

Exhibit D

**UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN
SOUTHERN DIVISION**

In re:	§	
	§	Case No. 00-CV-00005
	§	(Settlement Facility Matters)
SETTLEMENT FACILITY DOW CORNING TRUST	§	
	§	
	§	Hon. Denise Page Hood
	§	

**DECLARATION OF KIMBERLY SMITH-MAIR
IN SUPPORT OF RESPONSE TO MOTION OF CLAIMANT
MAXINE LOUISE SWAIM’S COUNSEL TO CLARIFY
CLOSING ORDER 5’S DEADLINE FOR QUALIFYING CALIMANTS
TO CONFIRM ADDRESSES AND SUBMIT ESTATE DOCUMENTS**

I, Kimberly Smith-Mair, declare as follows based upon my recollection and review of certain data and documents:

1. I am the Claims Administrator for the Settlement Facility-Dow Corning Trust (“Settlement Facility” or “SF-DCT”).
2. As Claims Administrator, I have knowledge of past and present procedures implemented to process the Settling Breast Implant Claims in accordance with the terms of the Settlement Facility and Fund Distribution Agreement (“SFA”) and the Claims Resolution Procedures (“Annex A” to the SFA).

Background on Closing Orders and SF-DCT Procedures

3. As Claims Administrator, I have knowledge of all Orders issued by the Court that pertain to the administration and payment of claims submitted to the SF-DCT including the various Closing Orders entered by the Court.
4. As Claims Administrator, I also have knowledge of notices and information posted by the SF-DCT and of notices, letters, and information sent to and received from attorneys of record regarding issues relating to notice, deadlines, and all matters related to assuring the validity of claim submissions

and compliance with the procedures, guidelines, and rules of the SF-DCT and of Annex A.

5. On January 19, 2019, the Court entered *Closing Order 2 (Regarding Additional Procedures for Incomplete and Late Claims; Protocols for Issuing Payments; Audits of Attorney Distributions of Payments; Protocols for Return of Undistributed Claimant Payment Funds; Guidelines for Uncashed Checks and Reissuance of Checks; Restrictions of Attorney Withdrawals)*, ECF No. 1482 (“Closing Order 2”).
6. In compliance with Closing Order 2, when the SF-DCT does not have a current confirmed address, prior to issuing payment the SF-DCT sends letters to claimants and counsel (“Address Verification Letters”) to confirm the claimant’s current address.
7. Closing Order 2 also directed the SF-DCT to “conduct audits of claimant settlement payments to lawyers/law firms to determine whether the law firm has distributed the payment(s) and whether the claimant or authorized representative received the appropriate amount of funds.” Closing Order 2, ECF No. 1482, PageID.24091.
8. On April 1, 2022, the Court entered *Closing Order 4 Requiring Completion of Court-Directed Audit Survey And Return of Funds Pursuant to Closing Order 2*, ECF No. 1640 (Closing Order 4”).
9. On June 13, 2022, the Court entered *Closing Order 5, Notice that Certain Claims Without a Confirmed Current Address Shall be Closed and Establishing Protocols for Addressing Payments for Claimants in Bankruptcy*, ECF No. 1642 (“Closing Order 5”).
10. In compliance with Closing Order 5, the SF-DCT posted a list of the claimant identification numbers for those claimants who had been identified as having a “bad address” on its website on June 19, 2022.
11. When the list was posted, the Settlement Facility’s website advised that the final day to submit an address verification was September 17, 2022 (the end of the 90-day period during which the list is maintained on the SF-DCT’s website). Attached hereto as Exhibit 1 is a true and correct copy of a screenshot of the website home page accessed on September 27, 2022. (A copy of the screenshot had also been attached as an exhibit to my previous September 28, 2022 declaration. See ECF No 1670-8, PageID.30994.) The

SF-DCT maintained the list on the website for the requisite 90-day period. That period ended on September 17, 2022.

12. To comply with the terms of Closing Order 5 and submit a timely address verification, the claimant need only notify the SF-DCT by phone or email. The email address is available 24 hours a day, 7 days a week.
13. The September 17, 2022 deadline was also publicized by the Claimant's Advisory Committee. Attached hereto as Exhibit 2 is a true and correct copy of a screenshot of the CAC's website, <http://www.tortcomm.org/index.shtml>, taken on June 13, 2023. Attached hereto as Exhibit 3 is a true and correct copy of the CAC's June 21, 2022 newsletter accessed on June 13, 2023 from http://www.tortcomm.org/newsletter_220621.shtml.
14. During the 90-day period starting June 19, 2022, I along with others representing the parties and the Finance Committee met on nearly a weekly basis. At each such meeting during the 90-day period, I reported on the status of submissions in response to Closing Order 5 and reiterated the deadline for submissions. At no time did the CAC or any other participant in those meetings object to that deadline or raise any question about the fact that the deadline fell on a Saturday.

Claimant Swaim's Motion

15. As Claims Administrator I have direct knowledge of the status of claims submitted to the Settlement Facility and communications with claimants, including address verification letters and responses.
16. I have reviewed the Motion of Claimant Maxine Louise Swaim's Counsel to Clarify Closing Order 5's Deadline For Qualifying Claimants to Confirm Addresses And Submit Estate Documents, ECF No. 1718 ("Motion") filed by Weitz & Luxenberg ("Swaim's Counsel") as counsel for the claimant Maxine Louise Swaim ("Claimant Swaim").
17. Claimant Swaim was issued payments in 2004 and 2007 for Explant, Rupture and Disease Base payments. These payments totalled in the aggregate \$35,000. Claimant Swaim was issued a 50% Rupture Premium Payment in the amount of \$2,500 on May 8, 2014 and a 50% Disease Premium Payment in the amount of \$1,000 on December 11, 2014.
18. Claimant Swaim's remaining two 50% Premium Payments were not paid because of the failure to provide the required address verification and probate

information. These two payments are: a second installment Rupture Premium Payment of \$2,500 and a second installment Disease Premium Payment of \$1,000 – together totaling \$3,500.

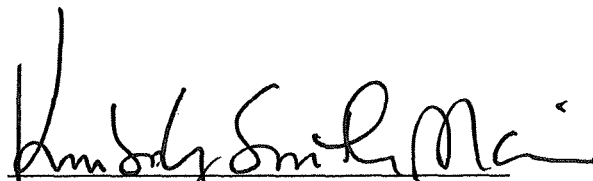
19. On November 29, 2021, the SF-DCT sent Address Verification Letters to Claimant Swaim and to Swaim's Counsel requesting a verified address pursuant to Closing Order 2. A true and correct copy of the November 29, 2021 address verification letters sent to Claimant Swaim and the November 29, 2021 cover letter sent to Swaim's Counsel are attached hereto as Exhibits 4 and 5, respectively.
20. The SF-DCT has no record of receiving a response from Swaim or Swaim's Counsel to the address verification letter.
21. Swaim's Counsel did not advise the SF-DCT that Claimant Swaim had passed away. In 2021, the SF-DCT learned through a routine search conducted using a vendor (Transunion) that Claimant Swaim had passed away on July 14, 2014.
22. Swaim's Counsel cashed the \$1000 premium payment check to Claimant Swaim in December 2014, 5 months after her death.
23. Swaim's Counsel returned the audit survey mandated by Closing Order 4 but did not include in that survey any information about the funds due to Claimant Swaim. Based on the assertions in the Motion, it seems that Swaim's counsel did not have contact information for Swaim's heirs until September of 2022.
24. Claimant Swaim's SID was included in the first Closing Order 5 posting on June 19, 2022.
25. There were 313 total claimants represented by Swaim's Counsel in that June 19, 2022 Closing Order 5 posting. Of those, there were 177 timely address verifications submitted and 134 timely liens submitted.
26. On September 14, 2022 (3 days before the expiration of the 90-day period), Swaim's Counsel submitted a Proof of Lien form for attorney fees/expenses for Claimant Swaim noting counsel was unable to locate Claimant Swaim. A true and correct copy of the Proof of Lien form is attached as Exhibit 6.
27. On September 19, 2022, two days after the deadline Swaim's Counsel submitted a document purporting to provide verified address for the Claimant

Swaim's estate representative along with probate documents and asked to withdraw the previously submitted lien.

28. On September 21, 2022, the SF-DCT responded to Swaim's counsel, stating: "This information is late, sent or postmarked after the deadline of September 17, 2022. With Closing Order #5, the Court has ordered that claims will be denied and permanently closed without payment if the SF-DCT does not receive a current address for the claimant (or the associated Lien) on or before the before the end of the 90-day period, which was September 17, 2022. The Claim is Closed and your request cannot be processed." A true and correct copy of the SF-DCT's September 21, 2022 response to counsel is attached hereto as Exhibit 7.
29. On September 21, 2022, a representative of Swaim's counsel responded by stating, "No, it's not. The deadline was on a Saturday so it defers to Monday. I confirmed this with CAC and they were calling to advise you. Please confirm." A true and correct copy of the September 21, 2022 response is attached hereto as Exhibit 8.
30. Swaim's Counsel has not submitted an appeal to the appeals judge of the SF-DCT determination that the submission was late.
31. Other claimants whose submissions were late (after the September 17, 2022 deadline) have not appealed or disputed the determination.
32. Attached hereto as Exhibit 9 is a true and correct copy of the Claimants Information Guide (Class 5), available at http://tortcomm.org/downloads/CIG_ENG_5.pdf (last accessed on June 12, 2023).

Pursuant to 28 U.S.C. Section 1746, I declare under penalty of perjury that the foregoing is true and correct.

Executed this 13th day of June 2023.


Kimberly Smith-Mair

EXHIBIT

1



Breast Implant Settlement

SEARCH SITE

[Am I Eligible for Benefits? >>>](#)

[Filing for Benefits? >>>](#)

[Check MyStatus >>>](#)

Deadline to File has Expired

Proof of Manufacturer Forms

Disease/Expedited Release Forms

Deadlines

Payment Information

Court Orders

Plan Documents

Forms

IMMEDIATE ACTION REQUIRED
THE COURT HAS ORDERED THAT CLAIMS
WILL BE DENIED AND CLOSED
WITHOUT PAYMENT IF
THE SFDCT DOES NOT RECEIVE A
CURRENT ADDRESS FOR THE CLAIMANT
BY September 17, 2022
CHECK HERE TO SEE IF THIS ORDER
APPLIES TO YOU
{List of Affected SIDs}

Claims Assistance

Toll Free Number: 1 866 874-6099

Hours of Operation:
Monday through Thursday:
9:00 am – 4:00 pm Central Standard
Time

Friday:
9:00 am – 3:00 pm Central Standard
Time

News Update:

**SETTLEMENT FACILITY
SENDS SURVEY TO LAW
FIRMS REGARDING
UNCASHED OR UNCLAIMED
CLAIMANT PAYMENTS IN
THEIR POSSESSION**

File Copy Requests

**Level A Disability
Guidelines for Option 1
Increased Severity**

Closing Order 2

To be eligible for payment, your claim must meet the definition for eligible claims as set forth in Article V of Annex A. If your claim does not meet all of the listed criteria, you may not be eligible for payment.

Contact Us >>>
Contact the Claims Assistance Program.

EXHIBIT

2



CLAIMANTS' ADVISORY COMMITTEE

The Tort Claimants' Committee ceased to function as an official committee when the Plan of Reorganization for Dow Corning Corporation became effective on June 1, 2004. The Plan Documents provide that a new committee -- called the Claimants' Advisory Committee or CAC -- will be appointed to represent the general interests of tort claimants. The United States District Court issued an Order and Notice of Appointment of the Claimants' Advisory Committee on May 20, 2004. The CAC will continue to maintain this website and provide information to tort claimants and counsel.

Final Premium Payment Issue

Attorneys Willing to Assist Registered Claimants with a Disease Claim

Appeals to the 6th Circuit

Canadian Settlement Information

Claim Submission Issues

Claim Forms - SF-DCT

Claimant Confidentiality

Claimant Information Guide & Questions & Answers

Claimants' Advisory Committee

Claim Data Totals

Class 9, 10.1 and 10.2

Closing Info for SF-DCT

Contact Us

Court Orders

Deadlines

Disease Claim Guidelines

Late Claims

Lien Issues

Links to Related Websites

MDL 926 Claims Office - Revised Settlement Program

MDL 926 Orders

Motions in this Case

Newsletters - CAC

Notice of Intent, Rule 3005 Issues

Opt-Out Information for Litigation

Other Downloads / Forms

Plan Documents (Final)

Premium Payment Issue

Product Identification

SF-DCT Claims Assistance Program

SF-DCT Newsletters

SF-DCT Processing Timelines

Translations

Return Home

Latest News

Welcome to the Claimants' Advisory Committee (CAC) website. We are the official committee appointed by the U.S. District Court in the Eastern District of Michigan to represent the interests of claimants in the Dow Corning Bankruptcy Settlement Plan. This website has information concerning the Settlement Facility for the Dow Corning Trust (SF-DCT). We welcome all comments and questions so that we can make this website informative and useful. Contact us by phone at 419-394-0717, by email at info@tortcomm.org, or by U.S. mail at Claimants' Advisory Committee, P.O. Box 665, St. Marys, OH 45885. You can also sign up to receive a free copy of our monthly electronic newsletter by e-mail by clicking [here](#).

Site designed by random access

March 23, 2023

The Finance Committee has filed a motion seeking to hold 814 attorneys / law firms in contempt. To review the pleading, [click here](#). The law firm names are listed under seal, so you must contact the Settlement Facility directly to determine if your name or law firm is listed. Call them at 866-874-6099. Send an email to: info@sfdct.com.

In other news, the FDA has issued a warning regarding the finding of squamous cell carcinoma in the capsules of breast implants. For more information on that, go to

<https://www.fda.gov/medical-devices/safety-communications/update-reports-squamous-cell-carcinoma-scc-capsule-around-breast-implants-fda-safety-communication>

REMINDER: The Settlement Facility has listed approximately 1,100 SID numbers on its website. We suggest that all claimants and attorneys review this list to determine if their SID number is listed. If it is, they must contact the Settlement Facility on or before April 12, 2023 or their claim will be permanently barred. The Settlement Facility website is: www.sfdct.com. You can contact the Settlement Facility directly at 866-874-6099 or by email at info@sfdct.com.

August 17, 2022

Attention Attorneys - below are 2 links to Forms for Attorneys

[Attorney Proof of Lien Form](#)

[Attorney Audit Survey Form](#)

June 20, 2022

IMMEDIATE ACTION REQUIRED

Below is a link to a list of "BAD ADDRESS" SID numbers for claimants who have been identified as having a "BAD ADDRESS" and those who have **NOT RESPONDED** to the address verification mailing four (4) weeks after the address verification mailing to those claimants. [If you do not know your SID number, please contact the Settlement Facility \(866-874-6099\).](#)

If your SID number is listed you MUST RESPOND to the Settlement Facility (866-874-6099) to finalize processing or payment of your claim.

IF YOU DO NOT RESPOND by September 17, 2022, THE COURT HAS ORDERED your claim will be denied and closed without payment.

LIST OF AFFECTED SID NUMBERS

June 30, 2021

UPDATE ON PREMIUM PAYMENTS

As we reported last week, the District Court entered an Order authorizing the Settlement Facility to make the final premium payments to claimants in Classes 5, 6.1, and 6.2 who have an approved Rupture, Disease, and/or Increased Severity Disease claim. What does this mean?

Who is eligible for the premium payment? Women who have received a Notification of Status letter from the Settlement Facility stating that they have an acceptable Dow Corning breast implant **and** who also have an approved Rupture claim, Disease claim, and/or Increased Severity disease claim.

If your only payment was for Explant or Expedited Release, then you are NOT eligible for a premium payment.

If you are in Class 7 (non-DC breast implants), you are NOT eligible for a premium payment.

How much are the premium payments? For approved Rupture claims in Class 5 (US citizens), the total premium payment is \$5,000. However, the Settlement Facility distributed 50% of this payment (\$2,500) in 2015-16. The final premium payment is the other 50%, or another \$2,500.

For Disease claims, the premium payment is an additional 20% above the Base Payment. For example, if your disease claim was approved at Atypical Connective Tissue Disease (ACTD) Level C for \$10,000, then your premium payment is \$2,000. The Settlement Facility distributed 50% of this payment (\$1,000) in 2015-16. The final premium payment is the other 50%, or another \$1,000.

Please do not contact the Settlement Facility to ask what your premium payment will be. This will only cause delay to everyone because the staff must respond to each and every inquiry instead of using that time to process payments.

When will I receive the premium payment? Closing Order 2 requires all claimants to provide a current address to the Settlement Facility before their premium payment can be sent. This is to verify that the payment will reach the claimant. When premium payments were issued in 2015, almost 1,600 checks – totaling over \$2.8 million – were returned to the Settlement Facility because the claimant's address was no longer current or valid.

Neither the CAC nor the Settlement Facility can give you an exact date when your premium payment check will be mailed. However, here are some general guidelines you can follow:

- **What is a "Current, valid address."** A current, valid address is one that you receive mail, AND this address has been provided to the Settlement Facility within 90 days of when payment is

EXHIBIT

3

CLAIMANTS' ADVISORY COMMITTEE
Dow Corning Breast Implant / Bankruptcy Settlement
Volume 19, No. 4, June 21, 2022

Email: info@tortcomm.org or
Phone: (419) 394-0717 or
Website: www.tortcomm.org

CAC Sybil Niden Goldrich
P.O. Box 665 Ernest Hornsby, Esq.
St. Marys, OH 45885 Dianna Pendleton-Dominguez, Esq.

This is the 184th e-newsletter (Vol. 19, No. 4) from the Claimants' Advisory Committee (CAC) in the Dow Corning bankruptcy Settlement Plan. You were sent a copy of the newsletter because our records show that you requested to be on the mailing list. If you wish to unsubscribe, click "Unsubscribe" at the bottom of this email or to reply to this newsletter, send an email to: info@tortcomm.org. **Please do not hit "Reply" to this email address.** To contact the CAC, use the email address: info@tortcomm.org or dpend440@aol.com.

**APPROXIMATELY 12,600 CLAIMS HAVE A BAD ADDRESS
AND WILL BE CLOSED PERMANENTLY UNLESS THEY
CONTACT THE SF-DCT ON OR BEFORE SEPTEMBER 17, 2022**

Please review the following carefully and take action if Closing Order 5 applies to you.

On June 13, 2022, the Court entered Closing Order 5. That order directs the SF-DCT to post the SID numbers of all claims where the SFDCT has deemed the claim to have a "bad address." This means that the SF-DCT has not been able to reach the claimant despite repeated attempts. Unless the claimant with a bad address contacts the SF-DCT **on or before September 17, 2022**, the claim will be permanently closed and barred from all future payments.

We strongly urge all claimants and law firms to review the list of SID numbers on either our website (www.tortcomm.org) or the SF-DCT website (www.sfdct.com). If you do not know your SID number, contact the SF-DCT (866-874-6099, info@sfdct.com) and check if your claim number is on the "bad address" list. If a SID number is on the list, then **CLAIMANT MUST TAKE ACTION AND CONTACT THE SF-DCT IMMEDIATELY, NO LATER THAN SEPTEMBER 17, 2022.**

For the persons on the SID list in Closing Order 5, failure to contact the SF-DCT on or before Sept. 17, 2022 will result in the permanent closure of that claim.

LAW FIRMS – PLEASE READ CAREFULLY:

IF YOU DID NOT RESPOND TO THE COURT-MANDATED ATTORNEY AUDIT SURVEY, YOU ARE AT RISK FOR COURT SANCTIONS AND POSSIBLE REFERRAL TO YOUR STATE BAR

On April 1, 2022, the District Court entered Closing Order 4 – "Requiring Completion of Court-Directed Audit Survey And Return of Funds Pursuant to Closing Order 2." It was **mandatory** that law firms must return the completed Audit Survey to the SFDCT. Numerous law firms did not respond and are in violation of the District Court's Order and are at risk for sanctions and possible referral to their state's bar.

The SF-DCT mailed a second reminder letter with a final deadline of JULY 17, 2022. Again, you **MUST** respond to the attorney audit survey. It is a single page survey with 3 questions. All questions must be answered, and the form must be signed under penalty of perjury. If you are unsure on how to respond or have questions, you must contact the SF-DCT on or before July 17, 2022. SF-DCT contact info: 866-874-6099, info@sfdct.com.

EXHIBIT

4



P.O. Box 52429
Houston, Texas 77052

Telephone 713.874.6099
866.874.6099

November 29, 2021

SID: 6368154

MAXINE LOUISE SWAIM
910 N VIRGINIA ST
ROCKVILLE, IN 47872
UNITED STATES OF AMERICA

RE: Premium Payments – Immediate Action Required

Dear Claimant or Attorney of Record,

On June 24, 2021 the District Court approved payment of the second fifty percent of Second Priority Payments.

Before your payment can be issued you **must confirm your current address** with the Settlement Facility. You may contact Claims Assistance toll free at 866-874-6099 and speak with a representative to confirm your address or you may send confirmation via email to info@sfdct.com. If you wish to confirm your address in writing you may complete the bottom portion of this letter and return the entire letter to PO Box 52429, Houston, Texas 77052. **You do not need to verify your address in writing and over the phone. Sending in multiple address verifications may slow down the issuance of your payment(s).**

If you do not confirm your address directly with the Settlement Facility your payment will not be issued.

Claims Assistance representatives are available Monday-Friday from 9:00 am – 3:00 pm (central standard time) to assist you.

Sincerely,

Payment Department
Settlement Facility - Dow Corning Trust

ADDRESS CONFIRMATION – Please check one of the following:

- The address listed at the top of this letter is my current address
- My current address is: _____

For assistance or questions call the Claims Assistance Program at 1.866.874.6099 (toll free)
Or go to www.dcsettlement.com on the Internet

EXHIBIT

5



P.O. Box 52429
Houston, Texas 77052

Telephone 713.874.6099
866.874.6099

November 29, 2021

Firm ID: 005272

WEITZ & LUXENBERG P.C.
700 BROADWAY
NEW YORK, NY 10003-9536
UNITED STATES OF AMERICA

RE: Premium Payments – Immediate Action Required

Dear Attorney of Record,

On June 24, 2021 the District Court approved payment of the second fifty percent of Second Priority Payments.

Before payments can be issued the SF-DCT must have a confirmed current address for you and your claimants.

Pursuant to Closing Order 2 the SF-DCT shall not issue payments to or for a claimant unless the SF-DCT has a confirmed, current address. A confirmed current address means an address that has been verified by the claimant **within 90 days** of the date the payment is issued as a current mailing address where the claimant is receiving mail. If the claimant is deceased, you must provide the name and address for the authorized personal representative along with acceptable probate documents before the SF-DCT can issue payments.

A list of your claimants who may be eligible for a Second Priority Payment is attached. Please complete the attachment and send via e-mail to info@sfdct.com.

You must confirm with your claimants their current address before you return the attachment. If you are not able to confirm the address of any claimant, you must inform the SF-DCT that you do not have a confirmed address for that claimant. If an address received from your firm as a confirmed current address either (1) matches an address that the Facility has previously received returned mail from OR (2) results in new returned mail, the Facility may no longer accept address verifications from your firm.

If you have additional questions you may contact Claims Assistance via e-mail at info@sfdct.com or by calling toll free at 866-874-6099 and speaking with a representative. Claims Assistance representatives are available Monday-Friday from 9:00 am – 3:00 pm central standard time.

Sincerely,

Payment Department
Settlement Facility - Dow Corning Trust

EXHIBIT

6

2:00-mc-00005-DPH Doc # 1413-1 Filed 04/13/18 Pg 7 of 16 Pg ID 23415

SF-DCT REVISED PROOF OF LIEN FORM
FOR ALLOWABLE FEES AND/OR EXPENSES

Read these instructions carefully. Failure to follow them will result in the return of the form to you without a decision.

INSTRUCTIONS: File one Proof of Lien form for each claimant. Do not combine multiple claimants on one form or the form will be returned to you without a decision. PRINT legibly and attach itemized documentation of allowable expenses only. See attached Q&A's.

1. Name of Law Firm / Entity Asserting a Lien WEITZ & LUXENBERG	2. Applicable Tax ID, EIN, or SSN of person asserting a lien																					
3. Name of Contact Person at Law Firm / Entity Asserting a Lien Michael E. Pederson, Esq.																						
4. Address (Street, City, State, Zip) 700 BROADWAY, NEW YORK, NEW YORK 10003																						
5. Telephone Number: 212-558-5500	6. Email: dowteam@weitzlux.com																					
7. Name and address (last known) of Claimant against whom you are asserting a lien. Maxine Louise Swain, 910N Virginia Street, Rockville, IN 47872																						
8. Provide at least <u>one</u> of the following: SID #, SSN, or Proof of Claim # (preferably in this order) of claimant against whom you are asserting a lien SID # : 6368154 Our file No: 36053																						
9. Check one of the following: <input checked="" type="checkbox"/> I am an attorney who represented the claimant on one or more of her benefit payments. Go to Q10. <input type="checkbox"/> I am NOT an attorney but I am asserting a lien for medical expenses. Go to Q12.																						
10. <input checked="" type="checkbox"/> I am asserting a lien for <u>ATTORNEY FEES</u> per the schedule in the Plan. (Complete the following questions: Check all boxes to which the lien applies, including future payments such as Premium and Increased Severity Payments. Failure to check applicable boxes now will be deemed a waiver of the right to assert a lien of these payments in the future.) Date representation began: 5/21/97 Date representation terminated (if applicable): PRESENT Attach a copy of the contract of representation and letter terminating representation (if applicable).																						
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Check which payment(s) the lien applies to</th> <th style="width:10%;"></th> <th style="width:30%;">Amt. Attorney Fee Claimed with this lien</th> </tr> </thead> <tbody> <tr> <td>Rupture Payment</td> <td align="center">✓</td> <td></td> </tr> <tr> <td>Rupture Premium Payment</td> <td align="center">✓</td> <td align="right">9562.50</td> </tr> <tr> <td>Disease Payment</td> <td></td> <td></td> </tr> <tr> <td>Disease Premium Payment</td> <td align="center">✓</td> <td align="right">1225.00</td> </tr> <tr> <td>Increased Severity Disease Payment</td> <td></td> <td></td> </tr> <tr> <td>Increased Severity Disease Premium Payment</td> <td></td> <td></td> </tr> </tbody> </table>		Check which payment(s) the lien applies to		Amt. Attorney Fee Claimed with this lien	Rupture Payment	✓		Rupture Premium Payment	✓	9562.50	Disease Payment			Disease Premium Payment	✓	1225.00	Increased Severity Disease Payment			Increased Severity Disease Premium Payment		
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Increased Severity Disease Premium Payment																						

11. Have you previously received attorney fees for this Claimant (including any fees from benefit payments made in the Revised Settlement Program)? If so, state the amount of the benefit awarded to claimant, the amount of attorney fees paid to you, and the date the fees were paid.

Claimant Award Amount: \$10,000 Attorney Fees Paid to You: \$1,853.07 Date: 12/13/07
 Claimant Award Amount: \$20,000 Attorney Fees Paid to You: \$3,248.90 Date: 12/27/04
 Attach additional pages if necessary. \$1,000 \$225.00 12/19/14
\$2,500 \$562.50 5/21/14

12. I am asserting a lien for **ALLOWABLE EXPENSES**. You must provide ITEMIZED documentation for each expense. You must include all allowable expenses incurred as of the date of the lien submission. You can amend this form for allowable expenses but only for expenses incurred **after** the date this form was submitted.

Period of time Claimed Expenses were incurred	Total Amount of Allowable Expenses Claimed
_____ to _____ (m/day/year) (m/day/year)	\$ _____

ATTACH an Itemized list that clearly identifies the type of allowable expense, amount, and date the expense was incurred. Do not submit any other documentation except for the Itemized list. Do not include non-allowable expenses on the Itemized list. This will delay the decision on your lien claim and possibly result in this claim being returned to you without a decision.

13. Have you previously received reimbursement for expenses for this Claimant? No. Yes. If so, state the date and amount of payment that was received and whether it satisfied all outstanding allowable expenses at the time. Were all prior reimbursements for allowable expenses only?

Date: _____ Amount Received: _____ Yes No Explain: _____

14. Check this box if you are asserting a lien for attorney fees and/or expenses because you either cannot locate your client to distribute a payment or are unable to distribute a payment because the claimant is deceased. You must have returned the entire claimant award(s) in question to the SF-DCT before your lien will be reviewed. On a separate piece of paper, describe the efforts you have taken to locate your client, the last known address and contact information for the client, and/or any contact information for heirs and/or probate administrators and representatives, if applicable. The statement must include a reason why you cannot distribute the claimant's payments directly to the claimant.

If you are terminating your representation of the claimant for the reason(s) noted above, you must notify the SF-DCT in writing when you submit this Proof of Lien form.

15. CERTIFICATION: SIGN AND DATE

Forms that are not signed will be returned and the lien will not be reviewed.

I declare under penalty of perjury that the above information and statements are true, correct, and accurate.

Michael E. Pederson (M)
Signature of Person asserting a lien

9/14/2022
Date signed

MICHAEL E. PEDERSON, ESQ.
Printed name

ATTORNEY
Position

DEADLINE: You must return this completed, signed Proof of Lien form on or before 30 days from the date the form was sent to you by the SF-DCT. If you have any questions about your deadline, contact the SF-DCT.

EXHIBIT

7

Subject: SWAIM, MAXINE LOUISE - - DECEASED SID#:6368154-WITHDRAWAL OF LIEN & ADDRESS VERIFICATION OF NOK

From: Info <info@sfdct.com>

Sent: Wednesday, September 21, 2022 11:24 AM

To: 'Grundstrom-Hyams, Jennifer' <JGrundstrom-Hyams@weitzlux.com>

Subject: RE: SWAIM, MAXINE LOUISE - - DECEASED SID#:6368154-WITHDRAWAL OF LIEN & ADDRESS VERIFICATION OF NOK

RE SID 6368154

Dear Ms. Grundstrom-Hyams:

Thank you for your email.

This information is late, sent or postmarked after the deadline of September 17, 2022. With Closing Order #5, the Court has ordered that claims will be denied and permanently closed without payment if the SF-DCT does not receive a current address for the claimant (or the associated Lien) on or before the before the end of the 90-day period, which was September 17, 2022. The Claim is Closed and your request cannot be processed.

Please confirm if you still want to withdraw the lien.

Sincerely,
Settlement Facility-Dow Corning Trust
Info@sfdct.com
1-866-874-6099

From: Grundstrom-Hyams, Jennifer [<mailto:JGrundstrom-Hyams@weitzlux.com>]

Sent: Monday, September 19, 2022 10:53 AM

To: Info <info@sfdct.com>

Cc: Fisher, Nicole <NFisher@weitzlux.com>

Subject: SWAIM, MAXINE LOUISE - - DECEASED SID#:6368154-WITHDRAWAL OF LIEN & ADDRESS VERIFICATION OF NOK

Good Morning:

Please withdraw our lien, address verification of NOK attached.



Jennifer Grundstrom-Hyams

WEITZ & LUXENBERG, P.C.

700 Broadway

New York, NY 10003

212.558.5661 | jgrundstrom-hyams@weitzlux.com

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EXHIBIT

8

Subject: SWAIM, MAXINE LOUISE - - DECEASED SID#:6368154-WITHDRAWAL OF LIEN & ADDRESS VERIFICATION OF NOK

From: Grundstrom-Hyams, Jennifer <JGrundstrom-Hyams@weitzlux.com>
Sent: Wednesday, September 21, 2022 11:30 AM
To: Info <info@sfdct.com>
Subject: RE: SWAIM, MAXINE LOUISE - - DECEASED SID#:6368154-WITHDRAWAL OF LIEN & ADDRESS VERIFICATION OF NOK

Good Afternoon:

No, it's not. The deadline was on a Saturday so it defers to Monday. I confirmed this with CAC and they were calling to advise you. Please confirm.

From: Info <info@sfdct.com>
Sent: Wednesday, September 21, 2022 12:24 PM
To: Grundstrom-Hyams, Jennifer <JGrundstrom-Hyams@weitzlux.com>
Subject: RE: SWAIM, MAXINE LOUISE - - DECEASED SID#:6368154-WITHDRAWAL OF LIEN & ADDRESS VERIFICATION OF NOK

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RE SID 6368154

Dear Ms. Grundstrom-Hyams:

Thank you for your email.

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Please confirm if you still want to withdraw the lien.

Sincerely,
Settlement Facility-Dow Corning Trust
Info@sfdct.com
1-866-874-6099

From: Grundstrom-Hyams, Jennifer [<mailto:JGrundstrom-Hyams@weitzlux.com>]
Sent: Monday, September 19, 2022 10:53 AM
To: Info <info@sfdct.com>
Cc: Fisher, Nicole <NFisher@weitzlux.com>
Subject: SWAIM, MAXINE LOUISE - - DECEASED SID#:6368154-WITHDRAWAL OF LIEN & ADDRESS VERIFICATION OF NOK

Good Morning:

Please withdraw our lien, address verification of NOK attached.



Jennifer Grundstrom-Hyams
WEITZ & LUXENBERG, P.C.
700 Broadway
New York, NY 10003
212.558.5661 | jgrundstrom-hyams@weitzlux.com

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EXHIBIT

9

CLAIMANT INFORMATION GUIDE

DOW CORNING BREAST IMPLANT CLAIMANTS
(CLASS 5)

CLAIMANT INFORMATION GUIDE
DOW CORNING BREAST IMPLANT CLAIMANTS
(CLASS 5)

A note about the use of capitalized terms in this Claimant Information Guide:

When you see capitalized terms that are not otherwise defined, they have the meaning assigned to them in the following documents in the following order:

- 1. Amended Joint Plan**
- 2. Amended Disclosure Statement**
- 3. Dow Corning Settlement Program and Claims Resolution Procedures**
- 4. Funding Payment Agreement**
- 5. Litigation Facility, Inc. Agreement (this document and the preceding ones in this list are collectively referred to as the "Plan Documents")**
- 6. Bankruptcy Code**

Contact us at:

Settlement Facility-Dow Corning Trust
P.O. Box 52429
Houston, Texas 77052
(Toll Free) 1-866-874-6099

www.dcsettlement.com

December 2002

This "Claimant Information Guide" was produced by the office of the Settlement Facility-Dow Corning Trust. The information contained in this Claimant Information Guide is intended to summarize the information contained in the Plan Documents. Any conflicts between the information in this Claimant Information Guide shall be controlled by the provisions in the Plan Documents in the order reflected on the cover sheet.

This Claimant Information Guide may be copied freely without amendment or deletion.

The Settlement Facility reserves the right to make changes to the Claimant Information Guide without notice.

Date of publication: December 2002

SECTION 8 – \$2,000 Expedited Release Payment

Q7-32. What type of biopsy can confirm that the material is silicone? My doctor says there is no such test or biopsy.

The pathology report should contain language that the material found is, in the opinion of the pathologist or other appropriate medical doctor, consistent with a finding of silicone.

SECTION 8 – \$2,000 EXPEDITED RELEASE PAYMENT

Q8-1. What is the \$2,000 Expedited Release Payment?

You will receive the \$2,000 Expedited Release Payment simply by showing that you were implanted with a Dow Corning breast implant. If you accept this payment, you will not be able to receive a Disease Payment.

Q8-2. What do I have to submit to qualify for the \$2,000 Expedited Release Payment?

Read the Instructions for the Expedited Release Payment Claim Form (the red edge).

Q8-3. If I receive the \$2,000 Expedited Release Payment, can I apply for a disease claim later if I become sick?

No.

Q8-4. If I decide to apply for a disease claim and don't qualify, can I then decide to take the \$2,000 Expedited Release Payment?

Yes. If your disease claim is not approved, you will be offered the \$2,000 Expedited Release Payment.

Q8-5. If I accept the \$2,000 Expedited Release Payment, will I be able to apply for Explant and Rupture?

Yes.

**SECTION 9 – GENERAL DEADLINES/DELIVERY METHODS/
EFFECTIVE DATE/DEADLINES TO APPLY FOR
SETTLEMENT BENEFITS**

PART A – DEADLINES TO RETURN THE PARTICIPATION FORM/DELIVERY METHODS

Q9-1. If I choose to settle my claim (Box 2A on the Participation Form), what is the deadline and what do I have to do?

If you check Box 2A on the Participation Form, then sign and return the Participation Form (the white edge) on or before fifteen (15) years after the Effective Date. *(Read*

For assistance or questions call Toll Free at 1-866-874-6099 or go to www.dcsettlement.com.

SECTION 9 – General Deadlines/Delivery Methods/Effective Date/Deadlines to Apply for Settlement Benefits

Q9-5 for more information about the Effective Date.) If you do not return the Participation Form, you will still be able to settle your claim in the Settlement Option by completing and submitting the Claim Forms in your Claims Package. There are separate deadlines for Explant, Rupture, Expedited Release and Disease claims.

Q9-2. If I choose to reject settlement and file a lawsuit (Box 2B on the Participation Form), what is the deadline and what do I have to do?

If you check Box 2B on the Participation Form (the white edge), then you must complete and return the Participation Form (the white edge) on or before [T.B.D.]. *(Read Section 3 for more information.)*

Q9-3. If I choose to withdraw my claim from the bankruptcy case, what do I have to do?

You must send a letter indicating that you wish to withdraw to the Claims Administrator. Remember to include your signature on all correspondence with the Settlement Facility. There is no deadline to withdraw your claim.

By withdrawing you will no longer be eligible to receive settlement benefits or file a lawsuit against any of the released parties.

Q9-4. What are the acceptable methods to mail or deliver my Participation Form to the Settlement Facility?

Mail or deliver the Participation Form to the Settlement Facility using one (1) of the following three (3) delivery methods:

1. Use a delivery service (e.g., Federal Express, Airborne Express, U.P.S., etc.) and make sure that the airbill or invoice clearly lists the date of mailing as on or before [T.B.D.] if you are withdrawing your claim or on or before [T.B.D.] if you are rejecting settlement and intend to file a lawsuit against DCC Litigation Facility, Inc.; OR
2. Mail the Participation Form by United States certified or registered mail as long as the certified or registered mail is postmarked on or before [T.B.D.] if you are withdrawing your claim or on or before [T.B.D.] if you are rejecting settlement and intend to file a lawsuit against DCC Litigation Facility, Inc. Please check with the U.S. Post Office on how to send a certified or registered letter so that it has the correct postmark (for claimants who reside outside of the U.S., the Settlement Facility will rely on the postmark date used by your country's version of "certified" or "registered" mail); OR
3. If you mail the Participation Form by regular U.S. mail or by using a national mail service in the country in which you reside, then the Participation Form must be *received* by the Settlement Facility by 5:00 p.m. Central Time on or before [T.B.D.] if you are withdrawing your claim and on or before [T.B.D.] if you are rejecting settlement and intend to file a

For assistance or questions call *Toll Free* at 1-866-874-6099 or go to www.dcsettlement.com.

SECTION 9 – General Deadlines/Delivery Methods/Effective Date/Deadlines to Apply for Settlement Benefits

lawsuit against DCC Litigation Facility, Inc. It is important to mail your Participation Form early enough so that the Settlement Facility *receives* it on or before the applicable deadline. The postmark date on the envelope will **NOT** be used by the Settlement Facility if you use regular U.S. mail or a national mail service in a country other than the U.S.

PART B – EFFECTIVE DATE

Q9-5. What is the Effective Date?

The Effective Date — which has not yet occurred — is the date when all preconditions listed in the settlement documents (Sections 7.1 and 7.2 of the Amended Joint Plan of Reorganization) have been met. Some of these preconditions include:

1. There is a final order confirming (approving) the Amended Joint Plan of Reorganization of Dow Corning; *and*
2. All appeals of such confirmation must be completed; *and*
3. The order confirming the Amended Joint Plan approves and provides for the implementation of various settlement documents such as the Domestic Health Insurer Settlement Agreement.

Once all of the preconditions are met, the Plan Documents will be signed and there will be an "Effective Date." You will receive a notice in the mail when the Effective Date occurs. Settlement payments can then be made on all approved claims.

PART C – DEADLINES TO APPLY FOR SETTLEMENT PAYMENTS

Q9-6. What is the deadline to submit my Proof of Manufacturer Form and supporting medical records or documents for proof of manufacturer?

You must complete and submit your Proof of Manufacturer Form (the blue edge) and supporting medical records or documents on or before fifteen (15) years after the "Effective Date." (*Read Q9-5 for more information about the Effective Date.*) Please note, however, that you can receive payment for Explant, Rupture, and Expedited Release or Disease only after you have first completed and submitted the Proof of Manufacturer Form and medical records or documents.

Q9-7. What is the deadline to submit my \$5,000 Explant Payment Claim Form and supporting medical records?

You must complete and submit the \$5,000 Explant Payment Claim Form (the yellow edge) and supporting medical records on or before ten (10) years after the Effective Date.

Q9-8. What is the deadline to submit my Expedited Release Payment Claim Form?

You must complete and submit the \$2,000 Expedited Release Payment Claim Form (the red edge) on or before three (3) years after the Effective Date.

For assistance or questions call Toll Free at 1-866-874-6099 or go to www.dccsettlement.com.

SECTION 9 – General Deadlines/Delivery Methods/Effective Date/Deadlines to Apply for Settlement Benefits

Q9-9. What is the deadline to submit my \$25,000 Rupture Payment Claim Form and supporting medical records?

You must complete and submit the \$25,000 Rupture Payment Claim Form (the green edge) and supporting medical records on or before two (2) years after the Effective Date.

Q9-10. What is the deadline to submit my Disease Payment Claim Form and supporting medical records?

You must submit the Disease Payment Claim Form (the red edge) and supporting medical records on or before fifteen (15) years after the Effective Date. *(Read the Disease Claimant Information Guide for more information.)*

Q9-11. What are the acceptable methods to mail or deliver my Claim Forms to the Settlement Facility?

Mail or deliver the Claim Forms to the Settlement Facility using one (1) of the following three (3) delivery methods:

1. Use a delivery service (e.g., Federal Express, Airborne Express, U.P.S., etc.) and make sure that the airbill or invoice clearly lists the date of mailing as on or before the deadline; OR
2. Mail the Claim Forms by U.S. certified or registered mail as long as the certified or registered mail is postmarked on or before the deadline. Please check with the U.S. Post Office on how to send a certified or registered letter so that it has the correct postmark (for claimants who reside outside of the U.S., the Settlement Facility will rely on the postmark date used by your country's version of "certified" or "registered" mail); OR
3. If you mail the Claim Forms by regular U.S. mail or by using a national mail service in the country in which you reside, then the Claim Forms must be received by the Settlement Facility by 5:00 p.m. Central Time on or before the deadline. It is important to mail your Claim Forms early enough so that the Settlement Facility receives them on or before the deadline for that settlement benefit. The postmark date on the envelope will **NOT** be used by the Settlement Facility if you use regular U.S. mail or a national mail service in a country other than the U.S.

Q9-12. What if a deadline falls on a Saturday, Sunday or federal holiday?

If a deadline falls on a Saturday, Sunday or federal holiday, the deadline is the next business day.

Q9-13. What are the deadlines to correct problems on my claim submission?

If there is a problem with your claim, the Settlement Facility will inform you of the problem in writing. Depending on the type of claim you submitted, the deadline to correct the problem will differ. Review the chart below. If you do not correct the problem within the time frame allowed, then your claim will be denied, and you will not be able to recover payment for that Settlement Option. If you do not correct any problems with your disease claim within the time allowed, then you will be limited in the future to applying for a new compensable condition that manifests after the conclusion of the one (1) year period to cure the deficiency.

For assistance or questions call Toll Free at 1-866-874-6099 or go to www.dcsettlement.com.

SECTION 10 – Contact Information

Settlement Option	Time to correct problem
Explant	six (6) months from the date of the letter notifying you of the problem
Rupture	six (6) months from the date of the letter notifying you of the problem
Disease	one (1) year from the date of the letter notifying you of the problem
Expedited Release	You must correct the problem by fifteen (15) years after the Effective Date

Q9-14. If I move and forget to notify the Settlement Facility in writing, my Notification of Status letter might take days or weeks to be forwarded to my new address. Will any of the time periods and deadlines be extended because of this?

No, unless your move occurred close in time to the date of the Notification of Status letter in which case the Claims Administrator will review and make individual case determinations. It is your responsibility to notify the Settlement Facility of any address change.

Q9-15. I moved and did not notify the Bankruptcy Court or Settlement Facility of my new address and I missed the deadline to file the Participation Form to elect to withdraw or litigate. Can I file it now?

No. You have an affirmative obligation to update your address with the Settlement Facility and the Bankruptcy Court.

SECTION 10 – CONTACT INFORMATION

Q10-1. How can I contact the Settlement Facility with a question?

Call 1-866-874-6099 Toll Free or send a question by e-mail to the Settlement Facility at info@sfdct.com.

Q10-2. What is the mailing address of the Settlement Facility?

All Claim Forms and correspondence to the Settlement Facility should be sent to the following address:

Settlement Facility-Dow Corning Trust
P.O. Box 52429
Houston, TX 77052-2429

For overnight delivery address, use:
Settlement Facility-Dow Corning Trust
3100 Main Street, Suite 700
Houston, TX 77002

For assistance or questions call Toll Free at 1-866-874-6099 or go to www.dcssettlement.com.