CLAIM FORM

To be eligible for payment from the Settlement Fund, you MUST complete and sign this Claim Form and return it to the address below, so that it is received on or before October 12, 2016. The actual amount you will receive is based on the allocation methodology described in the Stipulation of Settlement and Plan of Allocation.

Merrill v. ODNR Claims Administrator
c/o JND Class Action Administration
PO Box 6878
Broomfield, CO 80021

CLAIM FORM INSTRUCTIONS

1. You must file a separate Claim Form for each parcel you own or owned. If your ownership of the parcel has changed since May 28, 1998, then each owner or group of co-owners (including estates) must submit a separate Claim Form for each period of ownership.

2. Each group of co-owners should submit a single Claim Form. One person can submit the Claim Form on behalf of all co-owners. Consult with your co-owners before submitting a Claim Form. A single benefit check will be issued in the names of all co-owners.

3. You must include the supporting documentation detailed below in Section 7 - Supporting Documentation. Such documentation may include Proof of Ownership, Proof of Sale, Transfer, or Change of Ownership, and Plat Map with your Claim Form. Please submit photocopies of documents. Do not send original documents. They will not be returned to you.

4. Remember to sign the last page of the Claim Form; unsigned forms will not be processed.

5. We recommend that you keep a copy of the completed form for your records.

6. Any settlement benefits you receive may be taxable. You should consult with your tax advisor as to how you may be impacted. The Claims Administrator cannot provide tax advice.

7. If you have any questions, please call the Claims Administrator, toll-free, at 1-844-360-2770 or visit www.LakeErieSettlement.com.
1. **Claimant Information**  
Complete the following for the person or entity filing the claim.

<table>
<thead>
<tr>
<th>First Name</th>
<th>MI</th>
<th>Last Name</th>
</tr>
</thead>
</table>

Entity Name (if applicable)

<table>
<thead>
<tr>
<th>Current Mailing Address</th>
<th>Apt # / Unit</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>Telephone Number</th>
</tr>
</thead>
</table>

Tax ID Number (SSN or EIN)

2. **Parcel Information**  
Complete the following for the class parcel being claimed. Please keep in mind, you must complete a separate Claim Form for each parcel you own.

Name(s) on Deed

<table>
<thead>
<tr>
<th>Parcel Number</th>
<th>County</th>
</tr>
</thead>
</table>

Parcel’s Street Address, if known

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

3. **Ownership Duration**  
Please mark the one that best describes your ownership of the parcel of property for which you are making this claim and enter the appropriate date(s) in the blanks:

- [ ] **I was the owner as of September 14, 2011.** I purchased this property on ________________ (mm/dd/yyyy).
- [ ] **I owned the property prior to September 14, 2011.** I owned the property beginning ________________ (mm/dd/yyyy) and ending ________________ (mm/dd/yyyy).
4. **Lake Erie Frontage**
   What is the length (in feet) of the parcel’s Lake Erie frontage? ___________________________________

5. **Lake Erie Boundary Legal Description Changed**
   Between May 28, 1998 and September 14, 2011, was the parcel’s deed altered in any way to describe the Lake Erie boundary as the “Ordinary High Water Mark”, or equivalent?
   
   □ Yes    □ No

   *If “Yes,” you must provide documentation reflecting the change to your parcel’s deed showing the change to the legal description. This documentation is in addition to Section 7.*

6. **Public Access**
   Does your property immediately adjoin public lands with public access (i.e. does your property have public land on one side and public lake access on the other)?
   
   □ Yes    □ No

   *If “Yes,” you must provide a plat map or other publicly available map that documents your property is immediately adjoining a point of public access. This documentation is in addition to Section 7.*

7. **Supporting Documentation**
   a) **Proof of Ownership**
      To support your claim, you must submit a copy of a deed or certificate of title showing your ownership of the parcel you identified in Section 2.

      The deed or certificate of title must contain a legal description of the parcel and show its ownership. The document must either be certified by the appropriate county official (e.g. County Recorder, Register of Deeds/Titles, or the County Clerk) OR show on its face the recording information, including:
      - the date of recording;
      - the government office where recorded; and
      - the filing location in the land records (such as the conveyance book and page number or entry number).

   b) **Property Tax Document**
      To support your claim, you must submit property tax documentation showing the parcel number of the parcel you identified in Section 2.

   c) **Proof of Sale, Transfer or Change of Ownership**
      *If you currently own your property, you are not required to provide this documentation.*

      To support the dates of ownership of the parcel, you must submit documentation or a statement signed under penalty of perjury showing the date that you sold or transferred the property to another owner or group of owners. If there was an ownership change for the parcel that was not a sale, you will need to provide a copy of the document supporting the ownership change. Please keep in mind, you must complete a separate Claim Form for each group of owners.
d) Plat Map or Other Public Map

If you are not claiming Lake Erie frontage in excess of 1,000 feet in length, you are not required to provide this documentation.

You must submit a plat map or other publicly available map of the parcel that shows the length of Lake Erie frontage for the parcel being claimed.

Do not send original documents. Documents submitted to the Claims Administrator will not be returned.

8. Acknowledgement

I hereby affirm or attest under penalty of perjury that the information provided in this Claim Form is true and correct to the best of my knowledge, information, and belief, and that I will promptly notify the Claims Administrator of the transfer of any interest in the subject property between the time that I submit this form and the time that any payment is made to me.

______________________________  ______________________
Signature                                    Date

It is your responsibility to inform the Claims Administrator of any address changes until your benefit is received.

Legal Representative Signature: If you are a legal representative filing this Claim Form on behalf of a claimant other than yourself, complete the information below:

______________________________  ______________________
Signature of Person Completing the Form  Date

______________________________
Print Name of Person Completing the Form

______________________________  ______________________
Relationship to Owner  Phone Number for Person Completing Form

CHECK LIST

1) You must sign the Claim Form

2) You must be sure to include copies of your supporting documents; don’t send originals

3) You must mail the Claim Form so that it is received on or before October 12, 2016 to:

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