

ESTIMATED PAYMENT FORM AND INSTRUCTIONS TO CHALLENGE DATES OF EMPLOYMENT

For Class Members formerly employed by US Foods, those based in Nevada or Arizona who drove routes in California, and those hired after October 2010

LORETTA DOWNS AND D'ANDRE PARKER ET AL. VS. U.S. FOODSERVICE, INC., CASE NO. C 10-2163 EMC, IN THE UNITED STATES DISTRICT COURT, NORTHERN DISTRICT OF CALIFORNIA

Your estimated share of the settlement in this case is \$<<ESTIMATEDAWARD>>>. This estimate is based on the dates of employment, excluding leaves of absence, as listed below on this form.

You must file a Claim Form, which is also attached to the Notice, if you want to participate in the monetary payments under the Settlement Agreement.

If you accept your dates of employment, you do not need to do anything other than file the Claim Form to receive your share of the settlement (unless you also need to update or correct your mailing address).

If you wish to challenge the dates of employment listed below, carefully follow the instructions on this form.

TO CHALLENGETHE ESTIMATED AMOUNT OF PAYMENT BASED ON THE DATES OF EMPLOYMENT AS A DRIVER, **THIS FORM MUST BE SIGNED AND POSTMARKED NOT LATER THAN July 16, 2012.**

MAIL TO:
US Foods Settlement Administrator
c/o Rust Consulting, Inc.
PO Box 2396
Faribault, MN 55021-9096

Important:

- 1. You do NOT have to submit this form if you believe the dates of employment listed below are accurate. But you do have to submit a Claim Form in order to receive a payment.
- 2. It is strongly recommended that you keep proof of timely mailing for your records until receipt of your settlement payment.
- 3. If you change your mailing address, please send your new mailing address to the Settlement Administrator. It is your responsibility to keep a current address on file with the Settlement Administrator to ensure receipt of your settlement payment.

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EMPLOYMENT DATES AND CHALLENGE INFORMATION

<<Name>> <<Address>>

<<City>>, <<State>> <Zip>>

<<Telephone Number>>

Your Compensable Workweeks

US Foods' records show that during the Class Period of April 9, 2006 through April 10, 2012, you held the position of Driver in the following time periods:

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Start to End < <start 1="" date="">> <<end 1="" date="">> <<start 2="" date="">> <<end 2="" date="">></end></start></end></start>	Start to End < <leave 1="" date="" start="">> <<leave 1="" date="" end="">> <<leave 2="" date="" start="">> <<leave 2="" date="" end="">> <<leave 3="" date="" start="">> <<leave 3="" date="" end="">> <<leave 4="" date="" start="">> <<leave 4="" date="" end="">> <<leave 5="" date="" start="">> <<leave 5="" date="" end="">> <<leave 6="" date="" start="">> <<leave 6="" date="" end="">> <<leave 6="" date="" start="">> <<leave 6="" date="" end="">> <<leave 7="" date="" start="">> <<leave 7="" date="" end="">></leave></leave></leave></leave></leave></leave></leave></leave></leave></leave></leave></leave></leave></leave></leave></leave>

Your total number of Compensable Workweeks is: << WORKWEEKS>>

Your Estimated Payment

Based on the estimated share for each compensable workweek at an estimated amount per week worked of \$<<PER WEEK>>, your settlement share is currently estimated at \$<<ESTIMATEDAWARD>>>, assuming that all Settlement Class Members identified to date participate in the Settlement (*i.e.*, can be located and do not opt out). This amount is subject to change, either up or down, depending on the number of Settlement Class Members who submit challenges to estimated amounts, the outcome of those challenges, the number of Class Members who opt out, and other possible factors.

CHALLENGE

Check the box below ONLY if you wish to challenge	e the dates	listed above.	All fields must	be complete for your
challenge to be accepted:				

	I wish to challenge the employment dates listed above. I have included a written statement detailing what I believe to be my correct dates of employment as a Driver with US Foods during the period from April 9, 2006 through April 10, 2012. I have also included information and/or documentary evidence that supports my challenge. I understand that, by submitting this challenge, I authorize the Settlement Administrator to review US Foods' records and determine the validity of my challenge based on US Foods' records as well as the dates, records and information that I am submitting. This includes information related to any possible Family Medical Leave Act (FMLA)/California Family Responsibility Act (CFRA) leave that I may have been on while employed by US Foods.
Sign	ature:
Clas	e of Class Member: < <name>> s Member ID Number: <<rustid>> eve that my correct dates of employment as a Driver for US Foods during the Class Period areto</rustid></name>
1 DCII	toto
State	ement of reasons and documentation of dates of employment according to Class Member: