REQUEST FOR EXCLUSION FORM

Jamie Corliss v. Irvine Valley Veterinary Hospital, Inc., et al.

Case No. 30-2023-01320938-CU-OE-CXC

TO EXCLUDE YOURSELF FROM THE SETTLEMENT, YOU MUST SIGN AND RETURN THIS FORM, POSTMARKED ON OR BEFORE INSERT DATE TO:

INSERT SETTLEMENT ADMINISTRATOR INFORMATION.

IDENTIFYING INFORMATION

Please verify and/or complete any missing identifying information:

[NAME] Former Names (if any):

[ADDRESS LINE l] _____

[ADDRESS LINE 2] _____

TELEPHONE NUMBER _____

THIS FORM IS TO BE USED ONLY IF YOU DO NOT WANT TO PARTICIPATE IN THE

PROPOSED SETTLEMENT. IF YOU WANT TO RECEIVE A SETTLEMENT PAYMENT DO NOT

SUBMIT THIS FORM.

[ ] By checking the box to the left, and signing and completing the below, I agree to the following:

I do not want to participate in the settlement in *Corliss v. Irvine Valley Veterinary Hospital, Inc.* Case No. 30-2023-01320938-CU-OE-CXC

I understand by not participating and excluding myself from the settlement, that I will not receive any money from the settlement.

Executed on _____,2026

Signature: _____