

Williams Emtal Talc Settlement Fund

- Extraordinary Injury Fund (EIF) Eligibility Waiver Form -

All Claims requesting EIF eligibility must also be eligible under Part A and under Part B as a Claim Level 4 (mesothelioma) claim pursuant to the POD.

Claimant hereby requests that the EIF Eligibility Criteria be waived or relaxed for the following reasons:

Upon information and belief, formed after an inquiry reasonable under the circumstances, I hereby certify, under penalty of perjury, that the information submitted is complete and accurate.

Signature of Claimant, Claimant's Representative		Date (mm/dd/yyyy)	Claimant Identification No.
Print Name Here		Relationship to Injured Party	
Injured Party Last Name (If different from claimant)	Injured Party First Name (If different from claimant)	Injured Party Social Security No.	