

Williams Emtal Talc Settlement Fund

- Underlying Lawsuit Declaration -

Claimant Attorney's/Claimant's Declaration re: Claimant's Identification

I hereby declare that I am either the attorney responsible for filing the Underlying Lawsuit identified below against Engelhard/BASF during the Class Period, or am a member or associate attorney of the law firm (or its successor) of the attorney which did, or am either the Injured Party named in the lawsuit (or the Injured Party's personal representative bringing the lawsuit) or the current personal representative of the Injured Party named in the lawsuit who is now deceased or incapacitated.

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

Name of Injured Person:	Lawsuit Docket Number
Lawsuit Caption	Injured Person's Social Security Number
State of Lawsuit Filing	Date of Lawsuit Filing
Date of Service of Lawsuit on Engelhard/BASF if known	Date of Dismissal or Termination
Signature of Claimant or Claimant's Counsel	Date (mm/dd/yyyy)
Print Name Here	