

**IMPORTANT LEGAL MATERIALS**



FOR OFFICIAL USE ONLY  
03

If the pre-printed information to the left is not correct or if there is no pre-printed information, please check the box and complete the information below:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_ Zip Code: \_\_\_\_\_

**PARKO LITIGATION  
CLASS SETTLEMENT CLAIM FORM**

**THIS CLAIM FORM MUST BE POSTMARKED NO LATER THAN OCTOBER 16, 2017 TO BE VALID  
FAILURE TO COMPLY WITH THIS REQUIREMENT WILL RESULT IN DISMISSAL OF YOUR CLAIM**

Only individuals satisfying the requirements set forth in the Class Notice are Members of the Settlement Class potentially eligible to receive a Settlement Payment if the proposed Settlements are approved by the Court. **IF YOU BELIEVE YOU ARE A MEMBER OF THE SETTLEMENT CLASS AS DESCRIBED IN THE NOTICE, YOU MUST SUBMIT A CLAIM FORM IN ORDER TO REQUEST A MONEY PAYMENT.** Only one Claim Form may be submitted per individual. If the Claim Form is not postmarked or electronically submitted by **OCTOBER 16, 2017**, this will result in the dismissal of your claim and you will not be entitled to any monetary recovery received under this action. If the Claim Form is incomplete, or if you fail to submit the required proof of residency, you will not be eligible for Settlement Benefits.

**In order to receive a Settlement Payment, you must be able to prove that you own or owned property or occupy or occupied property located in the Settlement Class Area during the Settlement Time Period, as defined in the Shell Settlement Agreement and the ConocoPhillips Settlement Agreement. Accordingly, in order to be eligible for a Settlement Payment, you must submit written proof and supporting documentation of your ownership and/or residence within the Settlement Class Area for any duration between January 1, 1986 and the present. Valid forms of written proof include, but are not limited to, utility bills, telephone bills, deeds, purchase agreements, rental agreements, or other similar documents showing your address and dates of ownership or residence. YOUR CLAIM WILL BE DENIED IF PROOF OF CLASS OWNERSHIP OR RESIDENCE IS NOT SUBMITTED.**

You can complete this Claim Form and mail it to PARKO LITIGATION CLASS SETTLEMENT, c/o Rust Consulting, Inc., PO Box 2570, Faribault, MN 55021-9570, or electronically submit it at [www.RoxanaClassSettlement.com](http://www.RoxanaClassSettlement.com). The completed Claim Form together with the required supporting documentation must be postmarked or electronically submitted no later than **OCTOBER 16, 2017**. If you have any questions, you may call Class Counsel at the number provided in the Class Notice or call the Settlement Administrator toll-free at 1-866-903-1197 or visit the case website at [www.RoxanaClassSettlement.com](http://www.RoxanaClassSettlement.com). Do not go to any Shell, ConocoPhillips or court website or call any Shell, ConocoPhillips or court phone numbers, as no information pertaining to the Settlements is available there.

PLEASE PRINT NEATLY. COMPLETION OF ALL FIELDS IS REQUIRED.

1. Your Name First: \_\_\_\_\_

Last: \_\_\_\_\_

2. Your Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

3. If you are completing this Claim Form on behalf of a Minor, Protected, or Deceased Person, the name of the Minor, Protected, or Deceased Person (If so, answers to Questions 4-9 below will pertain only to the Minor, Protected or Deceased Person). \_\_\_\_\_





4. Address of the property that you own/owned or occupy/occupied in the Settlement Class Area. Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
5. Name of owner of the property identified in No. 4, above (if the property owner was you, please so indicate here). If you are the owner, please indicate whether you also occupied the property. First: \_\_\_\_\_  
 Last: \_\_\_\_\_
6. Date you acquired and/or first occupied the property identified in response to No. 4. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Month Day Year
7. If applicable, date you sold and/or moved out of the property identified in your response to No. 4. \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Month Day Year
8. Current address if different from your response to No. 4. Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
9. Identify proof of ownership and/or residence submitted with Claim Form (i.e. utility bill, deed, etc.), and attach proof to this Claim Form. \_\_\_\_\_

**PLEASE INCLUDE PROOF OF OWNERSHIP OR RESIDENCE WITHIN THE SETTLEMENT AREA DURING THE SETTLEMENT TIME PERIOD. IF NO SUPPORTING DOCUMENTATION IS INCLUDED WITH THIS CLAIM FORM, YOUR CLAIM WILL BE DENIED. IF YOU OWNED OR LIVED AT MORE THAN ONE PROPERTY IN THE SETTLEMENT CLASS AREA DURING THE SETTLEMENT TIME PERIOD, OR IF YOU OWNED OR LIVED ON MORE THAN ONE PARCEL, YOU MAY SUBMIT ADDITIONAL PAGES WITH THE INFORMATION REQUESTED IN QUESTIONS 4-9 FOR EACH SUCH ADDRESS OR PARCEL. PLEASE NOTE YOU MUST SUBMIT THE REQUIRED SUPPORTING DOCUMENTATION FOR EACH PROPERTY AND PARCEL AND TIME PERIOD THAT YOU IDENTIFY.**

**THE CLASS SETTLEMENTS PROVIDE THAT ALL CLASS MEMBERS AGREE TO THE FOLLOWING TERMS. PLEASE INITIAL EACH OF THE FOLLOWING PARAGRAPHS OR YOUR CLAIM WILL BE DENIED.**

\_\_\_\_\_ By submitting this Claim Form, I acknowledge that, as more fully set forth in the Shell Settlement Agreement, I am releasing all claims against the Shell Defendants which directly or indirectly arise from (a) Shell's operations; or (b) the past, present and future environmental condition of the Wood River Refinery, the IEPA Study Area and surrounding areas, and/or Plaintiffs' properties; or (c) Shell's past, present, and future remediation and site closure activities at these areas conducted in order to satisfy the requirements of Shell's RCRA permit and/or to satisfy the regulations and requirements of IEPA; or (d) activities related to, associated with, or in any way connected to the Actions and the facts and circumstances alleged therein; or (e) any event, cause or matter which in whole or in part, is or could have been, the subject of the Actions.

\_\_\_\_\_ By submitting this Claim Form, I acknowledge that, as more fully set forth in the ConocoPhillips Settlement Agreement, I am releasing all claims against the ConocoPhillips Defendants which directly or indirectly arise from (a) the Claims in the Parko class action; or (b) the past and present environmental condition of the Wood River Refinery, the IEPA Study Area and surrounding areas, and/or Plaintiffs' properties; or (c) the ConocoPhillips Defendants' past, present, and future remediation and site closure activities at these areas conducted in order to satisfy the requirements of Shell's RCRA permit and/or to satisfy the regulations and requirements of IEPA; or (d) activities, as of the Effective Date, related to, associated with, or in any way connected to the Actions and the facts and circumstances alleged therein; or (e) any event, cause or matter, as of the Effective Date, which in whole or in part, is or could have been, the subject of the Actions.

\_\_\_\_\_ I acknowledge that the Shell Defendants have the sole and exclusive right to determine how any IEPA-directed remediation and site closure should be completed; to negotiate with IEPA and any other regulatory agencies, whether federal, state or local; and to hire, contract, or employ any agents or contractors to perform the investigation, remediation and site closure at or in connection with the Wood River Refinery, the Study Area, neighboring properties and surrounding areas allegedly affected by the Wood River Refinery.



\_\_\_\_\_ If I currently own property in the Settlement Class Area, I acknowledge that my property is or may be within the boundary of a Groundwater Management Zone (“GMZ”) established pursuant to the authority of the IEPA in connection with Defendants’ ongoing and future remediation activities in or around the Village of Roxana.

\_\_\_\_\_ I agree to provide access to my property to the Shell Defendants, their contractors, and/or the appropriate regulatory authorities at reasonable times to be mutually agreed upon to perform remediation activities including: (1) monitoring, and/or (2) engaging in remedial or mitigation activities including inspections, and/or (3) performing vapor intrusion assessment and/or mitigation activities.

\_\_\_\_\_ I agree that if I construct future structures or modify existing structures on my property I will comply with the design criteria set forth in 35 Illinois Administrative Code Part 742, as more fully set forth in the Shell Settlement Agreement, the ConocoPhillips Settlement Agreement, and the Class Notice.

\_\_\_\_\_ If I currently own property in the Settlement Class Area, I agree to disclose to any future purchasers of my property that the property is in an area (or is in close proximity to an area) that may be subject to an IEPA-directed remediation.

I declare under penalty of perjury that the information supplied in this Claim Form by the undersigned is true and correct to the best of my recollection, and that this form was executed on the date set forth below.

Date: \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Signature) (REQUIRED)

\_\_\_\_\_  
(Street Address) (REQUIRED)

\_\_\_\_\_  
(Please Print Name) (REQUIRED)

\_\_\_\_\_  
(City, State, Zip Code) (REQUIRED)

\_\_\_\_\_  
(Telephone Number) (REQUIRED)

If you have any questions or need more information, please visit the website, [www.RoxanaClassSettlement.com](http://www.RoxanaClassSettlement.com) or call the Administrator toll-free at 1-866-903-1197.