Settlement Facility NEWS

VOLUME III

"A NEWSLETTER FOR BREAST AND OTHER IMPLANT CLAIMS (INCLUDING LARGE AND SMALL JOINT ORTHOPEDIC IMPLANTS, TMJ, CHIN, FACIAL AND PENILE) AND SILICONE MATERIALS"

S F D C T

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SPECIAL POINTS OF INTEREST:

- Message From the Claims Administrator
- Effective Date Notice
- Frequently Asked Questions

FOR ADDITIONAL INFORMATION

U.S. DISTRICT COURT FOR THE EASTERN DISTRICT OF MICHIGAN

WWW.MIED.USCOURTS.GOV/DOW/DOWDEFAULT.HTM

TORT CLAIMANTS' COMMITTEE
WWW.TORTCOMM.ORG

DOW CORNING
WWW.IMPLANTCLAIMS.COM

A MESSAGE FROM THE CLAIMS ADMINISTRATOR

DEAR CLAIMANT:

The time has finally arrived. We have an Effective Date! I know that is welcome news to all of you who have waited so patiently to settle your claims. Now that we have an Effective Date there are many things that you need to know. This packet contains your Effective Date notice that details the Effective Date, along with the dates and deadlines associated with it. It also contains the Participation Form, the form you will use to elect to settle, reject the settlement option or withdraw your claim from the Dow Corning Bankruptcy. In addition, the Settlement Facility has provided you with Volume 3 of Settlement Facility News, the latest edition of the newsletter that focuses mainly on the latest questions asked by claimants regarding the Settlement Program.

Now that the Effective Date is in place, it is of the utmost importance that you stay in contact with the Settlement Facility. Pay attention to the correspondence that you receive from the Facility and check our website, www.dcsettlement.com for the latest information. There you will find the latest Frequently Asked Questions, and, in the near future, we hope to unveil our "interactive website" which will allow you to access your claim information in a secure and confidential manner. You may also obtain the final versions of all Plan documents through the Downloads section on our website. In looking at the Participation Form, you should consult your Claimant Information Guides, particularly Sections 2 and 3 that outline the Settlement Options (which vary by class) and the Litigation Option.

Should you have any questions, please contact a Claims Assistance Representative, either by a toll-free telephone call (1-866-874-6099), or through electronic mail (info@sfdct.com). This is an exciting time and we look forward to assisting each of you in the process of settling your claims.

What is the Effective Date and What Does it Mean?

The "Effective Date" – January 15, 2004 – occurred because all of the appeals have been resolved and all conditions to Plan confirmation have been satisfied. As a result, the Plan Documents negotiated by the Tort Claimants Committee and Dow Corning Corporation were signed. What does this mean to you? Most importantly, approved claims for claimants who elect the Settlement Option can now begin to be paid! Claims for benefits such as Explant, Rupture, Disease or Expedited Release – or for one of the Medical Conditions listed in Class 9, 10.1, and 10.2 (Other Products) – will be processed in the order they are received by the Settlement Facility. The Settlement Facility will send you a "Notification of Status" letter describing the results of their review of the claim. Please read the Claimant Information Guide at Sections 5-7 (Class 5/6.1/6.2) or Sections 5-10 (Class 9/10.1/10.2) for more information on the process for claim review.

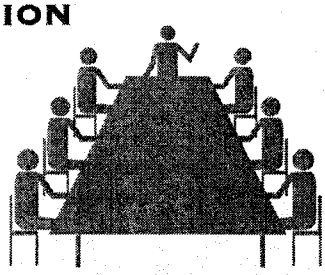
A second very important point to remember about the Effective Date is that all deadlines to apply for benefits from the Settlement Option began to run. Please check the "Effective Date Deadlines" section on the last page of this Newsletter. You may want to keep or display this deadline chart in a place so that you do not miss a deadline.

Finally, the Effective Date means that you must now make a decision on what to do with your claim. You can choose to settle your claim in the Settlement Option which offers payment(s) if you have acceptable proof of an eligible, covered implant and meet the criteria for payment. If you decide to reject the Settlement Option (opt-out), you must file a lawsuit and follow the litigation procedures outlined by the Court if you wish to pursue your claim. The last option is to permanently withdraw your claim and forfeit any right to payment(s) from the Settlement Facility and Litigation Facility. Please read the Participation Form Instructions for more information about your options.

Claimant Advisory Committee Appointed

At the Effective Date, the Tort Claimants' Committee was dissolved and is no longer charged with responsibility for representing the interests of the tort claimants. This responsibility is now with the Claimants' Advisory Committee. The Tort Claimants' Committee website address is still operational and is being assumed by the Claimants' Advisory Committee. To contact the CAC, send an email to info@tortcomm.org. or info@cac.org.

Attend a Claimant Meeting about the Settlement Option



Last year when the claim form packages were mailed, the Settlement Facility traveled to 12 major U.S. cities – and to London – to talk to and educate U.S. and foreign claimants about their options in the Settlement Facility. The response was overwhelming. In many cities, there was standing room only. Because of the success of these meetings, the Settlement Facility will hold meetings in various cities throughout the U.S. to discuss the Participation Form election and the benefits of remaining in the Settlement Option. The meetings will also focus on filing out claim forms and highlight recent Plan clarifications including those on Proof of Manufacturer. The meetings will be held during the months of March and April, in cities such as New York, Los Angeles, Chicago, Houston, etc. Because we were not able to finalize the schedule by the deadline for printing this Newsletter, we urge you to visit the Settlement Facility website for updates on these meetings. We hope you can attend a meeting and look forward to talking with you.

New Proof of Manufacturer Protocols and Clarifications– Assistance on Your Proof of Manufacturer

We have worked closely with the Plan Proponents on Plan clarifications, particularly on the Proof of Manufacturer protocols. We are happy to report that since the claim form packages were mailed last year, there are now additional ways to meet the "acceptable" proof standard for your implant. In addition, Claims Assistance has developed a helpful checklist of places to look for your medical records or other identifying information for your proof of manufacturer. This checklist is available at the Settlement Facility website. Below is a summary of the new Plan clarifications or protocols for proof of manufacturer:

1. Dow Corning has acknowledged that there may be references in medical records to "Rubin" implants or labels that state, "Silastic Mammary Implant Rubin Design High Profile Contour, Q7-2573." This implant was commercially available during 1984 thru 1986. It is Dow Corning's historical understanding that Dr. Rubin worked solely with DCC. Credible, contemporaneous documents identifying the claimantπs breast implants as "Rubin" implants, "Rubin Design" implants or "Q7-2573" implants would be deemed "acceptable" proof of manufacturer for implants implanted between 1984 and 1986. Any claim outside these years containing the terms "Rubin", "Rubin Design" or "Q7-2573" should employ the waiver/IRP process.

2. Dow Corning has acknowledged that approximately 50 breast implant claimants were implanted by Dr. Ben Gregory of Florida as part of a Dow Corning-sponsored clinical study. Dow Corning has supplied the names of the study participants to the Settlement Facility and acknowledged that these 50 persons will have acceptable proof of manufacturer of a Dow Corning breast implant. If you were implanted by Dr. Ben Gregory or believe that you were a participant in the Ben Gregory clinical study, call the Claims Assistance Program toll free within the U.S. and Canada at 1-866-874-6099 for more information.

3. Dow Corning has agreed that admissions made by Dow Corning in internal correspondence or documents that implants submitted by or on behalf of a particular claimant were in fact made by Dow Corning constitutes "acceptable" proof.

CLAIMS ASSISTANCE HAS DEVELOPED A HELPFUL CHECKLIST OF PLACES TO LOOK FOR YOUR MEDICAL RECORDS OR OTHER IDENTIFYING INFORMATION FOR YOUR PROOF OF MANUFACTURER.

4. Dow Corning has a number of implants in their possession that were sent to them by physicians and claimants over the last 20 years. Dow Corning has reviewed some – but not all — of these implants and has sent a letter to the Settlement Facility identifying claimants whose implants were determined to be made by Dow Corning. Contact Claims Assistance to determine if your name is on this list or if your implants are currently in the possession of Dow Corning (if so, you can request that they be reviewed to determine if they were made by Dow Corning).

5. Claimants may rely on affirmative statements or affidavits from a physician (or a responsible person at the treating facility where the implantation took place) that otherwise meet the criteria listed in Schedule I of Annex A that were written for a different claimant where the affidavit or statement identifies the doctor's use of certain brands of implants if the claimant can establish that she was implanted by the physician in question during the time frame listed in the affirmative statement or affidavit.

Frequently Asked Questions

General Questions

Q: My claim forms were sent to my attorney (or former attorney). I no longer want that attorney to represent me, but (s)he will not give me my claim forms. How can I submit my claim if my former attorney won't give me the claim forms?

A: Write a letter to the Settlement Facility informing us that you are no longer represented by your attorney and that you have been unable to get a copy of your claim form package. We will update our records and mail a new set of claim forms to you.

Q: I am listed as the attorney of record for my client and received the claim form package on her behalf. Can I sign the claim forms for her or does the claimant need to sign the forms?

A: Attorneys of record may sign the claim forms with two exceptions: the claimant must personally sign the Participation Form and the Waiver of Opt-Out Right / Conditional Waiver of Opt-Out Right Form.

Q: How do I know if I am listed as the attorney of record for my client?

A: If you received the claim form package for a claimant, then you are listed as the attorney of record for that claimant. If you did not receive claim forms for a particular individual, then you are not listed as the attorney of record.

Q: How do I become an attorney of record for my client?

A: You can either send a letter signed by your client that states that you are the attorney of record *or* provide your name, address and law firm information on the claim form box that asks for updated or new information about the claimant, and have the claimant sign the claim forms.

Q: The MDL Claims Office sent me a letter stating that I have a Dow Corning and a Bristol implant and therefore my claim was reduced by 50%. According to the information in my claim package, a reference to a "Cronin" implant after 1971 is not acceptable proof that the implant was made by Dow Corning. Does this mean that I won't receive anything for the Cronin implant?

A: Yes, however you may request that the Settlement Facility submit your proof to Dow Corning through the "Individual Review Process." Dow Corning may, on an individual case basis, decide to accept your proof as a Dow Corning implant thus allowing you to participate in the Settlement Facility.

Q: I am the attorney of record and can sign the claim forms for my clients. Can I use a stamped signature or must I sign each of the claim forms myself?

A: You can use a stamp of your signature.

Q: Do I have to submit the original medical records or are copies allowed?

A: You may submit a copy of the medical records. They do not have to be originals. If the copies are illegible, the Settlement Facility may request the originals.

Q: How do I remove my name as Attorney of Record for a claimant?

A: You may submit a letter to the Settlement Facility, stating that you are no longer the Attorney of Record for that claimant.

Q. We have a bank customer who wants to assign right to settlement proceeds from the Dow Bankruptcy as collateral on a loan.

Can this be done and where and how do we file the assignment?

A. The Settlement Facility cannot answer legal questions such as this. You may wish to consult an attorney.

Q. I received a Notification of Status letter that said my Proof of Manufacturer is acceptable. The letter described a "Waiver of Opt-Out Form" for me to sign but the form was not included. How do I get a copy of that form?

A. "Waiver of Opt-Out Right" forms were used by the Settlement Facility prior to the Effective Date of the Plan to indicate your decision to remain in the Settlement Facility. If you have not received or submitted the "Waiver of Opt-Out Right Form," then you must complete the Participation Form enclosed with this package to indicate whether you want to settle or litigate your claim.

Q: Since I was implanted, my name changed through marriage and/or divorce. How will the Settlement Facility be able to match my medical records if they contain different names? Should I write a list of the names that I have had and submit it?

A: You may submit a list. The Settlement Facility is also able to match medical records if they contain the same Social Security Number or if the name change is reflected in other documents that you submit.

Q. In what order will the claim forms be processed and reviewed?

A. As a general rule, and to the extent consistent with efficient administration and the Plan, the Claims Office shall process Claims within each category of payment option in the order in which the Claim form(s) and supporting materials for that option are received. The Claims Office shall deem the date of such receipt as the "submission date."

Q. Where on the claim form do I state that all of my documents have been previously submitted?

A. Each claim form has a box to check to indicate that you have previously submitted your medical records and that you are not attaching any additional records.

Q: How long after the Effective Date will payments be sent?

A: Approved claims in the Settlement Facility will be paid as soon as reasonably practicable after the Effective Date.

Q: I am not sure if my previously submitted medical records were complete. How will I know if I need to submit additional information?

A: You may call Claims Assistance at 1-866-874-6099 to request a copy of your medical records.

Q: Does the Settlement Facility come under the HIPAA guidelines and regulations?

A: SF-DCT is not a "covered entity" under the definitions issued under HIPAA. The Settlement Facility does, however, have very strict internal confidentiality policies to protect your privacy including: restricted access to claimant files; confidentiality agreements signed by all employees; assignment of a unique identifier to each claimant (separate from a claimant's social security number), etc. These and other measures are evidence of our ongoing commitment to protecting your confidentiality.

Q. If I disagree with my classification, how can I get it changed?

A. Submit all of the information that you feel is pertinent to your request for reclassification, including a letter describing why you feel your claim should be reclassified. The Settlement Facility will then review your request and make a determination on your claim's classification.

POM Questions

Q: My medical records do not list a brand name of an implant manufacturer; however, they contain numbers that describe the implant(s) that I have. Can these numbers identify who made my implant(s)?

A: Maybe. Call the Claims Assistance Program toll free at 1-866-874-6099 and they can check the list of catalog, serial, and lot numbers to determine if the numbers in your medical records match an eligible implant.

Q: If the numbers do match an eligible implant, is this acceptable proof to participate in the settlement?

A: Depending on who made your implant, you may be eligible for either Class 5, 7 or 9 (see CIG Q1-5 for more information on these class definitions).

Q: How do I find out if the doctor who implanted my silicone gel implants used Dow Corning implants?

A: First, speak with your implanting doctor or other responsible person at that office to determine if they can provide you with information about whether the doctor used Dow Corning breast implants.

If you are not able to obtain this information, you may contact Claims Assistance at 1-866-874-6099 and request them to search the list of sales records provided to Claims Assistance by Dow Corning. Confirmation that Dow Corning sold breast implants to your implanting doctor does not in itself constitute acceptable proof under the plan. You must still meet the POM requirements in Question 3 of the POM claim form.

Q: I received a set of implants in one implantation. Since they were done at the same time, why do I have two different proof evaluations?

A: For the purposes of the Proof of Manufacturer review, each implant is evaluated on the basis of its own proof. Therefore, each implant must be identified as a Dow Corning implant in a manner outlined in the guidelines for acceptable proof found in Schedule I, Part I of Annex A.

Explant Questions

Q: After my Dow Corning breast implant(s) was removed in 1993, I was implanted with implants that contained hydrogel, soy oil or some material other than silicone gel. Will this subsequent reimplantion disqualify me for the Explant payment?

A: No.

Q: I READ ON THE SETTLEMENT FACILITY'S WEBSITE THAT THERE MIGHT BE A LIST OF PLASTIC SURGEONS PARTICIPATING IN THE REMOVAL ASSISTANCE PROGRAM. WHEN WILL THE LIST BE AVAILABLE?

A: The Settlement Facility is in the process of compiling such a list. However, the Settlement Facility cannot vouch for the skill level, expertise, or medical background and qualifications of any particular surgeon. Nor can the Settlement Facility staff make any type of recommendation concerning a particular surgeon. Therefore, such a list, when it becomes available, is for informational purposes only.

Q: WHEN WILL I RECEIVE INFORMATION ON THE EXPLANT ASSISTANCE PROGRAM?

A: It is available now. We will send this information to anyone who checked the box on the Explant claim form.

RUPTURE QUESTIONS

Q: I HAVE A BRAIN ANEURYSM. MY DOCTOR TOLD ME THAT I COULD NOT UNDERGO SURGERY TO HAVE MY RUPTURED DOW CORNING SILICONE GEL IMPLANTS REMOVED WITHOUT SERIOUS MEDICAL RISKS INCLUDING DEATH. IF MY MRI SHOWS THAT THE SILICONE GEL IMPLANTS ARE RUPTURED, CAN I QUALIFY FOR A RUPTURE PAYMENT UNDER THE "MEDICALLY CONTRAINDICATED EXCEPTION" DESCRIBED IN Q7-22 OF THE CLASS 5 CLAIMANT INFORMATION GUIDE?

A: You may be eligible for the Medically Contraindicated Exception after a review of your medical records. Based on the information you provide, the SF-DCT will determine if your medical condition is a serious chronic condition that prevents you from having the implant removal surgery.

Q: DOES LEAKAGE COUNT AS A RUPTURE?

A: No

Q: CAN A RUPTURE BE PROVED AND THE CLAIM PAID WITHOUT EXPLANTATION?

A: No, unless you qualify for a very narrow exception called the "Medically Contraindicated Exception" which is explained in Q7-22 through Q7-25 of the Class 5 Claimant Information Guide.

DISEASE QUESTIONS

Q: IS BREAST CANCER COVERED UNDER THE DISEASE OPTION?

A: No.

Q: WHAT IS THE DIFFERENCE BETWEEN ATYPICAL CONNECTIVE TISSUE DISEASE (ACTD) AND GENERAL CONNECTIVE TISSUE SYMPTOMS (GCTS)?

A: ACTD is a condition found in Disease Option 1. Disease Option 1 uses the same medical criteria and definitions that were used in the original global settlement. If you are familiar with the Revised Settlement Program (RSP), these same criteria were also used in the Fixed Amount Benefit Schedule. The payment amounts for ACTD are based upon the degree to which you are "disabled" by the condition, as determined by your treating physician or QMD. The guidelines for the disability statement are outlined in Q1-9 of the Class 5 Disease Claimant Information Guide.

GCTS is a condition in Disease Option 2. The diseases and conditions in Disease Option 2 were not part of the original global settlement. They were defined in the RSP and were contained in the "Long Term Benefit Schedule." In general, the medical criteria to qualify for a Disease Option 2 claim are more restrictive and require more medical documentation and laboratory testing than those in Disease Option 1. The payments for Disease Option 2 are higher than the payments for Disease Option 1.

See the Disease definitions and characteristics outlined in Tab 1 of the Class 5 Disease Claimant Information Guide for more specific information.

Q: WHAT DO I DO IF MY DISEASE IS NOT MENTIONED IN THE LIST?

A: Not every disease or medical condition is covered by the Disease Option. If you do not have one of the eligible diseases or conditions from the Settlement Facility, then you cannot receive payment for your disease or condition. You may pursue your claim against the Litigation Facility.

QUESTIONS FOR CLASS 6.1 AND 6.2

Q: THE CLAIM FORM SAYS THAT I DO NOT HAVE TO RE-SUBMIT MEDICAL RECORDS THAT WERE PREVIOUSLY SENT FOR THE ORIGINAL GLOBAL SETTLEMENT OR THE REVISED SETTLEMENT PROGRAM (RSP). I SENT IN MEDICAL RECORDS FOR THE "FOREIGN REVISED SETTLEMENT PROGRAM" OR FRSP. WILL THE SETTLEMENT FACILITY HAVE THESE RECORDS OR SHOULD I RESUBMIT THEM?

A: The Settlement Facility has access to these records. You do not need to re-submit them.

Q: I WAS A CURRENT DISEASE CLAIMANT IN THE FOREIGN REVISED SETTLEMENT PROGRAM BUT I WAS UNABLE TO SUPPLY THE PROOF OF MANUFACTURER INFORMATION BY THE DEADLINE IN 1999. I HAVE NOW OBTAINED THOSE DOCUMENTS AND WAS IMPLANTED WITH A SURGITEK (BRISTOL) IMPLANT. HAVE I MARSHALED AGAINST MY MANUFACTURER AS REQUIRED?

A: Yes, you have marshaled because you are no longer able to collect any money from the Foreign Revised Settlement Program or from the manufacturer directly.

Q: WHAT DATE IS USED TO DETERMINE FOREIGN STATUS?

A: The date that the Claim Forms were mailed — February 2003.

CLASS 7 QUESTIONS

Q: I DO NOT HAVE A DOW CORNING IMPLANT, BUT I WAS IMPLANTED IN 1980 WITH A SILICONE GEL BREAST IMPLANT FROM COX-UPHOFF (OR ONE OF THE ELIGIBLE IMPLANTS IN CLASS 7). I DON'T WANT TO GO TO THE EXPENSE OF GETTING A DISEASE CLAIM SUBMITTED UNLESS I FIRST KNOW THAT MY PRODUCT ID WILL BE ACCEPTED. CAN I COMPLETE JUST THE QUESTIONS ABOUT MY IMPLANT ON THE CLASS 7 CLAIM FORM AND SIGN IT WITHOUT CHOOSING BETWEEN EXPEDITED RELEASE AND DISEASE?

A: Yes. Make a copy of your completed claim form and keep it for your records. Prior to the two year deadline for Class 7, you must resubmit your claim form and inform us if you are making a claim for either Expedited Release or Disease.

Q: WHAT WILL HAPPEN IF I DO NOT CHECK THE BOX FOR EITHER EXPEDITED RELEASE OR DISEASE ON MY CLASS 7 CLAIM FORM?

A: If you do not choose an option and no medical records are submitted, then the Settlement Facility will automatically place you in the Expedited Release option.

Q: I SENT IN MY CLASS 7 CLAIM FORM AND CHECKED EXPEDITED RELEASE. NOW I WANT TO CHANGE AND SUBMIT A DISEASE CLAIM. HOW DO I DO THIS?

A: Prior to receiving payment, write us a letter advising us that you wish to submit a Disease claim and include your records. You must let us know specifically which of the diseases on the Class 7 Claim Form you wish to submit a claim for.

Q. ARE MCGHAN/3M IMPLANTS COVERED UNDER CLASS 7?

A: No.

Q: IF I HAVE A SILIMED (OR ONE OF THE OTHER FOREIGN GEL MANUFACTURERS) IMPLANT BUT I LIVE IN THE UNITED STATES, AM I A PART OF THE PARTICIPATING FOREIGN GEL CLAIMANTS OR THE SILICONE MATERIALS CLAIMANTS? IS THE DISTINCTION TIED TO MY COUNTRY OF RESIDENCY OR THE MANUFACTURER?

A: Claimants with implants from Koken, Silimed, Société Prometel or Medasil Surgical will be designated as Participating Foreign Gel claimants regardless of the country of their citizenship or residency. Those claimants with Bristol, Baxter, Bioplasty, or Mentor implants will be designated as Silicone Materials claimants regardless of the country of their residency or citizenship.

CLASS 9 QUESTIONS

Q: MY MEDICAL RECORDS CLEARLY LIST THAT I HAVE A CUSTOM CHEST IMPLANT MADE BY DOW CORNING. THE LIST OF ELIGIBLE "COVERED" OTHER PRODUCTS DOES NOT LIST MY CUSTOM CHEST IMPLANT. AM I ELIGIBLE FOR ANY COMPENSATION FROM THE SETTLEMENT FACILITY?

A: No. You can elect to remain in the Settlement Facility and receive no benefits *or* you can opt-out within six months of the Effective Date and pursue a claim for your custom implant in court against the Litigation Facility.

Q: I RECEIVED LIQUID SILICONE INJECTIONS IN THE 1960S. AM I ELIGIBLE FOR ANY COMPENSATION FROM THE SETTLEMENT FACILITY?

A: No. You can elect to remain in the Settlement Facility and receive no benefits *or* you can opt-out within six months of the Effective Date and pursue a claim for your silicone injections in court against the Litigation Facility.

CHILDREN DIRECT CLAIMS QUESTIONS

Q: I FILED A CLAIM FOR MY CHILD WHO WAS BREASTFED WHILE I HAD DOW CORNING IMPLANTS IN MY BODY. I DID NOT RECEIVE A CLAIM FORM PACKAGE FOR THAT CHILD. WHAT SHOULD I DO?

A: You will receive information on the rights of children who have these types of claims.

EFFECTIVE DATE-BASED DEADLINES

This is to inform you that the **EFFECTIVE DATE** for the Amended Joint Plan of Reorganization of Dow Corning Corporation has been established. **THE EFFECTIVE DATE WILL BE [DATE].** This means that on [DATE], the Plan Documents will be signed by Dow Corning Corporation and the Tort Claimants Committee, the Plan will be officially implemented, and all deadlines to file claims or take actions that affect your legal rights will begin to run. Review the chart below carefully and mark the following deadlines on your calendar for future reference. You will not receive any further notices of these deadlines.

Type of Deadline	Action Required of You	Deadline
Australian Processing Deadline	Submit medical records to the Independent Claims Reviewer for Australia *Applies to: Certain Australian breast implant claimants only*	November 30, 2003
Filing a Notice of Intent Form	Filing Notice of Intent form to assume timely 3005 claim	On or before 90 days after [DATE]
Claim forms for the following deadlines must be submitted to the Settlement Facility:		
Opt-Out Deadline	Submit the completed Participation Form *Applies to: All classes*	On or before 6 months after [DATE]
Rupture Claim Deadline	Submit the Rupture Claim Form *Applies to: Class 5, 9, 10.1 and 10.2 only*	On or before 2 years after [DATE]
Silicone Material Claimant Claim Deadline	Submit the Class 7 claim form to apply for either an Expedited Release Payment or a Disease Option Payment *Applies to: Class 7 only*	On or before 2 years after [DATE]
Other Products Claim Deadline	Submit claims to the Other Products Class *Applies to: Class 9, 10.1 and 10.2 only*	On or before 2 years after [DATE]
Breast Implant Expedited Release Claim Deadline	Submit the Expedited Release Claim Form *Applies to: Class 5, 6.1 and 6.2 only*	On or before 3 years after [DATE]
Breast Implant Explant and Explant Assistance Claim Deadline	Submit the Explant Claim Form *Applies to: Class 5, 6.1 and 6.2 only*	On or before 10 years after [DATE]
Breast Implant Disease Option Claim Deadline	Submit the Disease Option Claim Form *Applies to: Class 5, 6.1 and 6.2 only*	On or before 15 years after [DATE]
Class 6.2, Option 3 Claim Deadline	Submit the Class 6.2, Option 3 Claim Form *Applies to: Class 6.2 only*	On or before 15 years after [DATE]