

**UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF MICHIGAN  
SOUTHERN DIVISION**

In re:	§	CASE NO. 00-CV-00001
	§	(Litigation Facility Matters)
DOW CORNING LITIGATION	§	
	§	
	§	Honorable Denise Page Hood

**STIPULATION**

The Litigation Manager and Plaintiffs' Liaison Counsel stipulate to the entry of the attached order.

s/Douglas B. Schoettinger  
Douglas B. Schoettinger, Esq.  
Litigation Manager  
DCC Litigation Facility, Inc.  
P.O. Box 2089  
Midland, MI 48641-2089

s/Fredric L. Ellis  
Fredric L. Ellis, Esq.  
Plaintiffs' Liaison Counsel  
Ellis & Rapacki, LLP  
85 Merrimac Street, Suite 500  
Boston, MA 02114

s/Leslie J. Bryan  
Leslie J. Bryan, Esq.  
Plaintiffs' Liaison Counsel  
Doffermyre Shields Canfield  
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1355 Peachtree Street  
Atlanta, GA 30309

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**ORDER**

Upon stipulation of the Litigation Manager and Plaintiffs Liaison Counsel and pursuant to the recommendation of the Special Master, the Court approves the attached Class 8 Supplemental Questionnaire which supplements the Notice of Intent to Litigate/Claimant Questionnaire which, by this Court Case Management Order No. 2 dated September 29, 2004, was required to be completed by each opt-out claimant. Defendant DCC Litigation Facility, Inc. (The Litigation Facility) may direct this Supplemental Questionnaire to all remaining Class 8 claimants who have asserted claims against the Litigation Facility arising in connection with their use of breast implants not manufactured by Dow Corning.

Claimants are directed to complete and return the Supplemental Questionnaire to the Litigation Facility within 45 days of the date on which the Litigation Facility mails the Supplemental Questionnaire to the claimant. Failure to submit a completed Supplemental Questionnaire by this deadline may result in dismissal of the claimant case.

/s/ DENISE PAGE HOOD  
DENISE PAGE HOOD  
U.S. DISTRICT JUDGE

DATED: October 16, 2006

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**CLASS 8 SUPPLEMENTAL QUESTIONNAIRE**

The Plaintiff questionnaire you submitted in 2005 states that your claim is based on breast implants identified by a brand name other than Dow Corning or “Silastic”®. In order for your claim to proceed, you must complete this form and explain why you believe Dow Corning is responsible for your claim. You must return your completed form to the Litigation Facility, by \_\_\_\_\_, 2006. Your failure to do so may result in the dismissal of your claim.

1. If you claim that another company used Dow Corning materials in the making of your implants and that those materials caused or contributed to your injuries, identify the specific Dow Corning materials (for example, gel, shell, elastomer, etc.).
  
  
  
  
  
  
  
  
  
  
2. What evidence do you have that these Dow Corning materials were used in your implant? If you have documents that support your response, attach copies if possible.

3. If your claim is not based on the contention that another company used Dow Corning materials in the making of your implants, what do you believe is the connection between Dow Corning and the implant(s) that you claim caused your injuries?
4. What evidence do you have to support your response? If you have documents that support your response, attach copies if possible.

<p style="text-align: center;"><b>VERIFICATION</b></p> <p>In accordance with 28 U.S.C. §1746, I, the undersigned, declare, under penalty of perjury, that the responses in this questionnaire are true and correct.</p> <p>Executed on: <u>    </u> / <u>    </u> / <u>    </u> MM DD YYYY</p> <p>_____</p> <p>Plaintiff's signature</p> <p>_____</p> <p>(Type or legibly print name as signed above)</p>	<p style="text-align: center;"><b>PLEASE RETURN COMPLETED QUESTIONNAIRE TO:</b></p> <p style="text-align: center;"><b>DCC Litigation Facility, Inc. P.O. Box 2089 Midland, MI 48641-2089</b></p> <p style="text-align: center;"><b>To be timely, this form MUST be postmarked no later than _____, 2006.</b></p>
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