

**CLAIM FORM**  
**COMPLETE AND MAIL BY OCTOBER 2, 2007**  
**SENDING A CLAIM FORM IS VOLUNTARY**

**MULTNOMAH COUNTY CIRCUIT COURT FOR THE STATE OF OREGON**

**BRAD BELKNAP, and LORRAINE  
NICOLE BRULC, Individually, and on  
Behalf of All Persons Similarly Situated,**

**Case No. 0301-00042**

**Plaintiff,**

v.

**US BANK NATIONAL ASSOCIATION,  
dba US Bank,**

**CLAIM FORM**

**Defendant.**

**To Make a Claim for Monetary Recovery You Must Sign and Mail this Form on or before  
October 2, 2007.**

**Name:** \_\_\_\_\_  
**(Please Print your Full Name Clearly)**

**Address:** \_\_\_\_\_  
**(Street) (City) (State) (Zip Code)**

**Former Names (if any):** \_\_\_\_\_

**You must answer Yes to all of the questions below to be a class member and make a claim; check  
the appropriate box.**

- 1. I worked for US Bank in Oregon. [ ] Yes [ ] No**
- 2. I quit my employment with U.S. Bank in Oregon between January 2, 2000  
and January 2, 2003. [ ] Yes [ ] No**
- 3. I gave at least 48 hours business notice of my intent to quit my employment  
with US Bank. [ ] Yes [ ] No**

**Social Security Number: XXX-XX-\_\_\_\_\_ (Last 4 Numbers Only)**

**Daytime Telephone Number:** \_\_\_\_\_

**Evening Telephone Number:** \_\_\_\_\_

\_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**(Date)**