

**PLEASE BE AWARE THAT THE DEADLINE TO FILE A TIMELY CLAIM WAS DECEMBER 1, 2008.**

For Official Use Only

*If a claim is submitted after the December 1, 2008 deadline date, there is no guarantee that your late claim will be accepted.*

## **CLAIM FORM In Re OSB Antitrust Litigation**

Settlements have been reached in a class action lawsuit alleging antitrust claims against the following manufacturers of oriented strand board ("OSB"): Louisiana-Pacific Corporation ("Louisiana-Pacific"), Weyerhaeuser Company ("Weyerhaeuser"), Georgia-Pacific LLC (f/k/a Georgia-Pacific Corporation) ("GP"), Potlatch Corporation ("Potlatch"), Ainsworth Lumber Co. Ltd. ("Ainsworth"), Norbord Industries Inc. ("Norbord"), Tolko Industries Ltd. ("Tolko"), Grant Forest Products Inc. and Grant Forest Products Sales Inc. ("Grant"), J.M. Huber Corporation or Huber Engineered Woods LLC ("Huber") (collectively, the "Defendants"). If you purchased OSB products directly from any of the Defendants between June 1, 2002 and March 19, 2008, you may be eligible to receive a share of the settlement proceeds. This Claim Form must be completed and returned by any Class Member who seeks payment from any of the settlements. *Please refer to the General Instructions on page 5.*

### **PART 1: CLAIMANT INFORMATION**

Please type or neatly print all information. Correspondence about your claim will be sent to the mailing address you provide below.

*Name of Claimant: (Company Name)*

*Mailing Address:*

*City:*

*State:*

*Zip Code:*

<input type="text"/>	<input type="text"/>	<input type="text"/>
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*Federal Employer Tax Identification Number (FEIN):*

*Address of Claimant if different than Mailing Address:*

*Name of Person to contact if there are any questions:*

*Company Name:*

<input type="text"/>	<input type="text"/>
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*Contact Person's Telephone Number:*

*Email Address:*

<input type="text"/>	<input type="text"/>
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If you own the *majority* of any entities, including subsidiaries or affiliates, that purchased OSB from the Defendants between June 1, 2002 and March 19, 2008, list the names and addresses of those entities below. (Attach additional copies of this page, if required.) Owning the majority of an entity includes owning the majority of shares, partnership interests, corporate interests or other ownership interests of the entity. Entities majority-owned by you should *not* submit separate Claim Forms.

1. **Name:**   
**Address:**
2. **Name:**   
**Address:**
3. **Name:**   
**Address:**
4. **Name:**   
**Address:**
5. **Name:**   
**Address:**
6. **Name:**   
**Address:**

Please list below any names other than those listed above that you or entities majority-owned by you have used when purchasing OSB from the Defendants. (Attach additional copies of this page, if required.)

1. **Name:**
2. **Name:**
3. **Name:**
4. **Name:**
5. **Name:**
6. **Name:**

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**PART 2: SCHEDULE OF PURCHASES OF OSB STRUCTURAL PANEL PRODUCTS**

In the table below, list the total dollar amount (in U.S. dollars) of your purchases of OSB structural panel products made directly from each Defendant and delivered in the United States during four different time periods: from June 1, 2002 through February 24, 2006; from February 25, 2006 through March 5, 2007; from March 6, 2007 through December 3, 2007; and from December 4, 2007 through March 19, 2008. Amounts should be rounded to the nearest dollar (i.e.; \$12,345.67 should be entered as \$12,346). Include purchases of OSB structural panel products by entities majority-owned by you. Do not include transportation charges, rebates, refunds, credits, etc. You **DO NOT** need to attach documentation. However, you must keep copies of your purchase orders, invoices, or other documentation of your purchases in case verification of your claim is necessary.

**REMEMBER: ONLY INCLUDE PURCHASES WHICH YOU MADE DIRECTLY FROM ONE OR MORE OF THE DEFENDANTS.**

**OSB STRUCTURAL PANEL PURCHASES IN DOLLARS**

<b>DEFENDANT</b>	<b>June 1, 2002 through February 24, 2006</b>	<b>February 25, 2006 through March 5, 2007</b>	<b>March 6, 2007 through December 3, 2007</b>	<b>December 4, 2007 through March 19, 2008</b>
Louisiana-Pacific Corporation	\$	\$	\$	\$
Weyerhaeuser Company	\$	\$	\$	\$
Grant Forest Products Inc. and Grant Forest Products Sales Inc.	\$	\$	\$	\$
Potlatch Corporation	\$	\$	\$	\$
Norbord Industries Inc.	\$	\$	\$	\$
J.M. Huber Corporation or Huber Engineered Woods LLC	\$	\$	\$	\$
Ainsworth Lumber Co. Ltd.	\$	\$	\$	\$
Georgia-Pacific LLC	\$	\$	\$	\$
Tolko Industries Ltd.	\$	\$	\$	\$
<b>TOTAL</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

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**PART 3: SCHEDULE OF PURCHASES OF OTHER OSB PRODUCTS**

In the table below, list the total dollar amount (in U.S. dollars) of your purchases of products containing OSB other than OSB structural panel products made directly from each Defendant and delivered in the United States from June 1, 2002 through March 5, 2007. Amounts should be rounded to the nearest dollar (i.e.; \$12,345.67 should be entered as \$12,346). Include purchases made by entities majority-owned by you of products containing OSB other than OSB structural panel products. Do not include transportation charges, rebates, refunds, credits, etc. You **DO NOT** need to attach documentation. However, you must keep copies of your purchase orders, invoices, or other documentation of your purchases in case verification of your claim is necessary.

**REMEMBER: DO NOT INCLUDE PURCHASES OF OSB STRUCTURAL PANEL PRODUCTS IN THE TABLE BELOW.**

**OTHER OSB PURCHASES IN DOLLARS**

<b>DEFENDANT</b>	<b>June 1, 2002 through March 5, 2007</b>
Louisiana-Pacific Corporation	\$
Weyerhaeuser Company	\$
Grant Forest Products Inc. and Grant Forest Products Sales Inc.	\$
Potlatch Corporation	\$
Norbord Industries Inc.	\$
J.M. Huber Corporation or Huber Engineered Woods LLC	\$
Ainsworth Lumber Co. Ltd.	\$
Georgia-Pacific LLC	\$
Tolko Industries Ltd.	\$
<b>TOTAL</b>	<b>\$</b>

**PART 4: CLAIMS BASED UPON ASSIGNMENT OR TRANSFER**

If you acquired the rights that are the basis of this claim from some other person or entity that is not majority-owned by you (as assignee, transferee, successor or otherwise), please check the box below and attach copies of legal documents in support of the acquisition.

Yes – This claim is based upon an assignment or transfer, and I have attached copies of supporting legal documents.

**PART 5: CERTIFICATION**

I certify that the foregoing statements made by me are accurate, and that I have not previously submitted a Claim Form for the same purchases listed in this Claim Form. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

*Signature:*

*Date:*

*Type/Print Name and Title:*

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### **GENERAL INSTRUCTIONS**

- 1. Authorized Claimant:** This Claim Form must be signed and verified by the claimant or a person authorized to act on behalf of the claimant.
- 2. Third-Party Solicitors:** There are companies that may contact Class Members upon learning of a pending class action distribution and offer to help Class Members file claim forms in exchange for a share of the money that the Class Members may ultimately recover or for other compensation. Please be advised that you do not need to use one of these companies in order to file a Claim Form. Assistance is available from the Claims Administrator at no cost to you.
- 3. Submission of Claim:** This Claim Form may be submitted by first-class mail, or it may be completed and submitted online at [www.OSBSettlement.com](http://www.OSBSettlement.com). If you mail the Claim Form, it must be postmarked by December 1, 2008 and addressed to: OSB Antitrust Litigation; c/o Complete Claim Solutions, LLC; P.O. Box 24753; West Palm Beach, FL 33416. If you complete and submit the Claim Form online, it must be submitted by December 1, 2008. If you fail to mail a timely, properly addressed Claim Form or submit a timely online Claim Form, your claim may be rejected and you may be precluded from any recovery from the settlements. Do not send a Claim Form to the Court or to any of the parties or their counsel.
- 4. Completion of Claim Form:** Please type or neatly print all requested information. Failure to complete all parts of the Claim Form may result in denial of the claim, may delay processing, or may otherwise adversely affect the claim.
- 5. Verification:** The Claims Administrator will verify the information you submit in your Claim Form by comparing it to an electronic database of Defendants' OSB sales. The Claims Administrator may ask you to provide supporting information. If you fail to provide such requested information, your claim may be delayed, reduced, or denied.
- 6. Claims of Single Entities:** Even if you belong to more than one of the classes described in the Notice, you need only submit one Claim Form. The Claims Administrator will determine the classes in which you qualify and the settlements from which you will receive proceeds.
- 7. Claims of Entities Owned by You:** If you own the majority of any entity, including a subsidiary or affiliate, that purchased OSB from Defendants and seek to obtain settlement proceeds as a result of those purchases, you must identify that entity in Part 1 of this Claim Form and list that entity's OSB purchases in Parts 2 and 3 of this Claim Form. Entities that are majority-owned by you should NOT submit separate Claim Forms. Owning the majority of an entity includes owning the majority of shares, partnership interests, corporate interests or other similar ownership interests of the entity.
- 8. Assistance:** If you have questions about your claim, you may contact the Claims Administrator at the above address or at 1-800-760-6408. You may also contact your own attorney or other person to assist you, at your own expense.
- 9. Keep a Copy:** For your records, keep a photocopy of your completed Claim Form. You should also retain any and all documents and records you may have concerning purchases of OSB products in the United States during the period June 1, 2002 through March 19, 2008.
- 10. Changes of Address:** Keep the Claims Administrator advised of any change in your current mailing address.

If you have any questions or concerns regarding your claim, please contact the Claims Administrator at:

OSB Antitrust Litigation  
c/o Complete Claim Solutions, LLC  
P.O. Box 24753  
West Palm Beach, FL 33416  
Toll-Free: (800) 760-6408

**ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME.  
THANK YOU FOR YOUR PATIENCE.**

CLAIM FORMS MAY BE FILED ONLINE AT [WWW.OSBSETTLEMENT.COM](http://WWW.OSBSETTLEMENT.COM)

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