

Exhibit F

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Wallenstein, et al. v. Mondelez Int'l, Inc., et al., Case No. 3:22-cv-6033-VC
United States District Court for the Northern District of California

CLAIM FORM

For use by purchasers of the Class Product(s) between October 13, 2018 through the date Class Settlement Notice is published.

GENERAL INSTRUCTIONS

Class Members who seek payment from the Settlement must complete and return this Claim Form. Completed Claim Forms must be mailed to the Class Administrator at Wallenstein v. MDLZ, c/o Kroll Settlement Administration LLC, P.O. Box XXXX, New York, NY 10150-XXXX, or can be submitted online via the Settlement Website, www.website.com. **Claim Forms submitted via mail must be POSTMARKED BY CLAIM DEADLINE, OR SUBMITTED ONLINE NO LATER THAN 11:59 pm, Pacific Time.**

Class Members are eligible for payments with, or without, proof of purchase:

- **Claims without Proof of Purchase:**
For Class Members without proof of purchase but upon description of purchase history: four dollars and fifty cents (\$4.50) per household; OR
- **Claims with Proof of Purchase:**
For Class Members with proof of purchase, \$0.15 per unit purchased shown in the proof, up to twenty dollars (\$20) maximum per household or, if more than one proofs are provided and the amount shown in the proofs does not exceed eight dollars (\$8), eight dollars (\$8) minimum per household regardless of the quantity purchased.
- All Cash Payments will be reduced *pro rata* down as necessary if the total value of all Approved Claims exceeds the funds available for distribution to Class Members.

Class Products eligible for Cash Payments

Original Wheat Thins
Reduced Fat Wheat Thins
Sundried Tomato & Basil Wheat Thins
Big Wheat Thins
Ranch Wheat Thins
Hint of Salt Wheat Thins
Cracked Pepper & Olive Oil Wheat Thins, and
Spicy Sweet Chili Wheat Thins

PAYMENT SELECTION

If you would like to elect to receive your Cash Payment through electronic transfer, please visit the Settlement Website and timely file your Claim Form. The Settlement Website includes a step-by-step guide for you to complete the electronic payment option.

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CLASS MEMBER NAME AND CONTACT INFORMATION

Provide your name and contact information below. You must notify the Class Administrator if your contact information changes after you submit this Claim Form.

First Name

Last Name

Address 1

Address 2

City

State

Zip Code

Email Address (optional): _____@_____.com

Telephone Number: (____) _____ - _____

PROOF OF CLASS MEMBERSHIP

☐

Check this box to certify if you are a person in the United States and its territories 18 years or older who, during October 13, 2018 through **the date Class Settlement Notice is published**, purchased one of the Class Products in the United States and its territories for personal use, and not for resale or distribution.

CASH PAYMENTS FOR CLASS PRODUCTS (WITH OR WITHOUT PROOF OF PURCHASE)

Claims (With No Proof of Purchase)

Claims with no proof of purchases are available for Class Members at four dollars and fifty cents (\$4.50) per household. If you check the box below, then you will recover no more than \$4.50, subject to a *pro rata* adjustment, per household. **Please fill in your purchase information in the table below.**

☐

I purchased one or more Class Products during October 13, 2018 through **the date Class Settlement Notice is published** in the United States and its territories.

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Claims (With Proof of Purchase)

Claims with proof of purchase, receive \$0.15 per unit purchased shown in the proof, up to twenty dollars (\$20) maximum per household or, if more than one proofs are provided and the amount shown in the proofs does not exceed eight dollars (\$8), eight dollars (\$8) minimum per household regardless of the quantity purchased.

Your Claim requires proof of purchase documentation of one of the following, for each claimed purchase: (1) a receipt; (2) removed UPC code; or (3) documentation from a third-party commercial source reasonably establishing the fact and date of purchase of the applicable Class Product(s) during October 13, 2018 through the date Class Settlement Notice is published in the United States and its territories.

☐ I purchased one or more Class Products during October 13, 2018 through the date Class Settlement Notice is published in the United States and its territories and have attached the proof of purchase for each unit.

PURCHASE INFORMATION

Provide the following information for the products you purchased:

Proof of Purchase (Y/N) *if no proof of purchase, \$4.50	Name of Product Purchased	Year You Began to Purchase Product	Store Name(s) of Purchase

ATTESTATION & SIGNATURE

I swear and affirm under the laws of my state that the information I have supplied in this Claim Form is true and correct to the best of my recollection, and that this form was executed on the date set forth below.

Signature: _____ Date ____ / ____ / ____
mm/dd/yyyy