## **SCHEDULE "A"**

## **OPT-OUT FORM**

## \*\*ONLY SUBMIT THIS FORM IF YOU WISH TO OPT-OUT OF THE CLASS PROCEEDINGS\*\*

MAIL YOUR OBJECTION FORM TO: 1-554 St. Mary's Road, Winnipeg, MB, R2M 3L5 or email the form as an attachment to info@CSAsettlement.com.

YOUR OPT-OUT MUST BE DELIVERED BY: August 26, 2024, 5:00 P.M. CST

First Name		Last Name	
Mailing Address			
City	Province		Postal Code
Telephone Number		Email Address:	
If you are acting on behalf of a Class Member, please provide your authority to act:			
I confirm that I wish to opt-out of the Flette/Lavallee Class Actions.			
By opting-out, I understand that:			
<ul> <li>-I will not be entitled to participate in the Class Actions;</li> <li>-I will not be bound by any judgment in the Class Actions; and</li> <li>-I will not be eligible for any recovery in the Class Actions.</li> </ul>			
Signature of Class Member (or Representation		tive) Da	te (dd/mm/yy)