

UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF FLORIDA

IN RE CP SHIPS LTD. SECURITIES
LITIGATION

)
)

No. 8:05-MD-1656-T-27TBM

PROOF OF CLAIM AND RELEASE

I. GENERAL INSTRUCTIONS

A. To recover as a member of the Class based on your claims in the action entitled *In re CP Ships Ltd. Securities Litigation*, No. 8:05-MD-1656-T-27TBM (the “Action”), you must complete this Proof of Claim and Release form (“Claim Form”). If you fail to submit a Claim Form by the deadline, your claim may be rejected and you may be precluded from any recovery from the Settlement Fund, as defined in the Notice of Pendency of Class Action and Proposed Settlement and Motion for Attorneys’ Fees and Expenses and Final Hearing (the “Notice”), created in connection with the proposed Settlement of the Action.

B. Submission of this Claim Form, however, does not ensure that you will share in the proceeds of the Settlement Fund created in this Action.

C. YOU MUST COMPLETE AND SUBMIT YOUR CLAIM FORM VIA MAIL **POSTMARKED ON OR BEFORE JULY 23, 2008**, ADDRESSED TO THE CLAIMS ADMINISTRATOR AS FOLLOWS:

**CP Ships Ltd. Securities Litigation
Claims Administrator
c/o AB Data, Ltd.
Post Office Box 170500
Milwaukee, WI 53217**

If you are NOT a member of the Class, as defined in the Notice, DO NOT submit a Claim Form.

D. If you are a member of the Class, and you do not exclude yourself from the Class in accordance with the requirements set forth in the Notice, you are bound by the terms of any judgment entered in the Action, WHETHER OR NOT YOU SUBMIT A CLAIM FORM.

II. INSTRUCTIONS FOR CLAIMANT IDENTIFICATION SCHEDULE

A. If you purchased or otherwise acquired the Securities (as defined below) of CP Ships Ltd. (“CP Ships” or the “Company”) between January 29, 2003 and August 9, 2004, inclusive (the “Class Period”), except for Canadian citizens who purchased the shares of CP Ships on Canadian exchanges during the Class Period (the “Class”), and held the Securities in your name, you are the beneficial purchaser as well as the record purchaser. If, however, the Securities were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial purchaser and the third party is the record purchaser. The securities of CP Ships included in the definition of the Class are CP Ships common stock, CP Ships 4% Convertible Senior Subordinated Notes due 2024, and CP Ships 10-3/8% Senior Notes due 2012 (collectively, the “Securities”).

B. Use Part I of this form entitled “CLAIMANT IDENTIFICATION” to identify each beneficial owner of CP Ships Securities. THIS CLAIM FORM MUST BE FILED BY THE ACTUAL BENEFICIAL OWNER(S) OR THE LEGAL REPRESENTATIVE OF SUCH OWNER(S) OF THE SECURITIES OF CP SHIPS UPON WHICH THIS CLAIM IS BASED.

C. All joint purchasers must sign this claim. Executors, administrators, guardians, conservators, and trustees must complete and sign this claim on behalf of persons or entities represented by them, and proof of their authority must accompany this claim and their titles or capacities must be stated. The Social Security (or taxpayer identification) number and telephone number of the beneficial owner may be used in verifying the claim. Failure to provide the foregoing information could delay verification of your claim or result in rejection of the claim.

III. INSTRUCTIONS FOR SCHEDULE OF TRANSACTIONS

A. In the space provided below, supply all required details of your transaction(s) in CP Ships Securities. If you need more space, attach separate sheets providing all of the required information in substantially the same form. Sign and print or type your name on each additional sheet.

B. Please provide all of the requested information with respect to **all** of your purchases, acquisitions, and sales of CP Ships Securities between January 29, 2003 and August 9, 2004, inclusive, whether such transactions resulted in a profit or a loss. Failure to report all such transactions may result in the rejection of your claim.

C. List each transaction, including free receipts and free deliveries, in the Class Period separately and in chronological order, by trade date, beginning with the earliest. You must accurately provide the month, day, and year of each transaction you list.

D. Broker confirmations or other documentation of your transactions in CP Ships Securities should be attached to your claim. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim.

E. The requests are designed to provide the minimum amount of information necessary to process the most simple claims. The Claims Administrator may request additional information, as required, to efficiently and reliably calculate your losses. In some cases in which the Claims Administrator cannot perform the calculation accurately or at a reasonable cost to the Class with the information provided, the Claims Administrator may condition acceptance of the claim upon the production of additional information and/or the hiring of an accounting expert at the claimant’s cost.

**MUST BE
POSTMARKED NO
LATER THAN
JULY 23, 2008**

UNITED STATES DISTRICT COURT
MIDDLE DISTRICT OF FLORIDA
In re CP Ships Ltd. Securities Litigation
No. 8:05-MD-1656-T-27TBM
PROOF OF CLAIM AND RELEASE
Please Type or Print



For Official Use Only

PART I: CLAIMANT IDENTIFICATION

LAST NAME (CLAIMANT)

FIRST NAME (CLAIMANT)

Last Name (Beneficial Owner if Different from Claimant)

First Name (Beneficial Owner)

Last Name (Co-Beneficial Owner)

First Name (Co-Beneficial Owner)

Company/Other Entity (If Claimant Is Not an Individual)

Trustee/Nominee/Other

Account Number (If Claimant Is Not an Individual)

Trust/Other Date (If Applicable)

Check here to use Correspondence Address for Distribution

Correspondence Address Line 1

Correspondence Address Line 2 (If Applicable)

City

State

Zip Code

Foreign Province

Foreign Zip Code

Foreign Country

(Optional) Distribution Address:

Distribution Address Line 1

Distribution Address Line 2 (If Applicable)

City

State

Zip Code

Foreign Province

Foreign Zip Code

Foreign Country

Telephone Number (Day)

() -

Telephone Number (Night)

() -

Beneficial Owner's Employer Identification Number or Social Security Number

E-mail Address

IDENTITY OF CLAIMANT (Check one)

Individual Joint Owner Estate Corporation Trustee/Custodian IRA Other (specify, describe on separate sheet)

Canadian citizens who purchased the shares of CP Ships on Canadian exchanges during the Class Period are excluded from the Class. In addition, the following persons and entities are excluded from the Class: Defendants, the officers and directors of CP Ships, at all relevant times, members of their immediate families and the legal representatives, heirs, successors or assigns of any Defendant and any entity in which any Defendant has or had a controlling interest.

- Check here if the beneficial owner is excluded from the Class.
- Check here if the claimant or beneficial owner was an officer, director, or partner of CP Ships at any time between January 29, 2003 and August 9, 2004, inclusive. If so, please state position(s) held and dates of employment:

- Check here if the claimant or beneficial owner acquired CP Ships Securities through any CP Ships employee benefit plan.

PART II: SCHEDULE OF TRANSACTIONS IN CP SHIPS COMMON STOCK

Proof Enclosed?

A. Number of shares of CP Ships common stock held at the opening of trading on January 29, 2003 (if none, write "0", if other than zero, documentation must be provided):

Y N

B. Purchases and acquisitions (between January 29, 2003 and August 9, 2004, inclusive) of CP Ships common stock:

Date(s) of Purchase/Acquisition List Chronologically Month/Day/Year			Number of Shares of Common Stock Purchased/Acquired	Purchase/Acquisition Price Per Share of Common Stock	Aggregate Cost (excluding commissions, taxes, and fees)	Proof of Purchase Enclosed
MM	DD	YY				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N

C. Sales or free deliveries (between January 29, 2003 and August 9, 2004, inclusive) of CP Ships common stock:

Date(s) of Sale List Chronologically Month/Day/Year			Number of Shares of Common Stock Sold	Sale Price Per Share of Common Stock	Amount Received (excluding commissions, taxes, and fees)	Proof of Sales Enclosed
MM	DD	YY				
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/> . <input type="text"/>	\$ <input type="text"/> . <input type="text"/>	<input type="radio"/> Y <input type="radio"/> N

Proof Enclosed?

D. Number of shares of CP Ships common stock held at the close of trading on August 9, 2004 (if none, write "0", if other than zero, documentation must be provided):

Y N

PART III: SCHEDULE OF TRANSACTIONS IN CP SHIPS 4% CONVERTIBLE SENIOR SUBORDINATED NOTES DUE 2024

Proof Enclosed?

A. Face amount of CP Ships 4% Convertible Senior Subordinated Notes held at the opening of trading on January 29, 2003 (if none, write "0", if other than zero, documentation must be provided):

Y N

B. Purchases and acquisitions (between January 29, 2003 and August 9, 2004, inclusive) of CP Ships 4% Convertible Senior Subordinated Notes:

Date(s) of Purchase/Acquisition List Chronologically Month/Day/Year			Face Amount	Purchase/Acquisition Price per \$1,000 face amount	Aggregate Cost (excluding commissions, taxes, and fees)	Proof of Purchase Enclosed
MM	DD	YY				
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N

C. Sales (between January 29, 2003 and August 9, 2004, inclusive) of CP Ships 4% Convertible Senior Subordinated Notes:

Date(s) of Sale List Chronologically Month/Day/Year			Face Amount	Sale Price per \$1,000 face amount	Amount Received (excluding commissions, taxes, and fees)	Proof of Sales Enclosed
MM	DD	YY				
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N

D. Face amount of CP Ships 4% Convertible Senior Subordinated Notes held at the close of trading on August 9, 2004 (if none, write "0", if other than zero, documentation must be provided):

Proof Enclosed?
Y N

PART IV: SCHEDULE OF TRANSACTIONS IN CP SHIPS 10-3/8% SENIOR NOTES DUE 2012

A. Face amount of CP Ships 10-3/8% Senior Notes held at the opening of trading on January 29, 2003 (if none, write "0", if other than zero, documentation must be provided):

Proof Enclosed?
Y N

B. Purchases and acquisitions (between January 29, 2003 and August 9, 2004, inclusive) of CP Ships 10-3/8% Senior Notes:

Date(s) of Purchase/Acquisition List Chronologically Month/Day/Year			Face Amount Face Amount	Purchase/Acquisition Price per \$1,000 face amount	Aggregate Cost (excluding commissions, taxes, and fees)	Proof of Purchase Enclosed
MM	DD	YY				
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N
				\$		<input type="radio"/> Y <input type="radio"/> N

C. Sales (between January 29, 2003 and August 9, 2004, inclusive) of CP Ships 10-3/8% Senior Notes:

Date(s) of Sale List Chronologically Month/Day/Year			Face Amount Face Amount	Sale Price per \$1,000 face amount	Amount Received (excluding commissions, taxes, and fees)	Proof of Sales Enclosed
MM	DD	YY				
	/			\$		<input type="radio"/> Y <input type="radio"/> N
	/			\$		<input type="radio"/> Y <input type="radio"/> N
	/			\$		<input type="radio"/> Y <input type="radio"/> N
	/			\$		<input type="radio"/> Y <input type="radio"/> N
	/			\$		<input type="radio"/> Y <input type="radio"/> N

Proof Enclosed?

D. Face amount of CP Ships 10-3/8% Senior Notes held at the close of trading on August 9, 2004 (if none, write "0", if other than zero, documentation must be provided):

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Y N

YOU MUST READ AND SIGN THE RELEASE ON PAGES 5-7. FAILURE TO SIGN THE RELEASE MAY RESULT IN A DELAY IN PROCESSING OR THE REJECTION OF YOUR CLAIM.

IF YOU REQUIRE ADDITIONAL SPACE, ATTACH EXTRA SCHEDULES IN THE SAME FORMAT AS ABOVE. COPIES OF BROKER CONFIRMATIONS OR OTHER DOCUMENTATION EVIDENCING YOUR TRANSACTIONS IN CP SHIPS SECURITIES SHOULD BE ATTACHED. PLEASE INCLUDE THE BENEFICIAL OWNER'S TAX IDENTIFICATION NUMBER ON ALL ADDITIONAL SHEETS.

PART V: SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS

- I (We) submit this Claim Form under the terms of the Stipulation and Agreement of Settlement ("Stipulation") described in the Notice. I (We) also submit to the jurisdiction of the United States District Court, Middle District of Florida, with respect to my (our) claim as a Class member and for purposes of enforcing the release set forth herein and any judgment which may be entered in the Action. I (We) further acknowledge that I am (we are) bound by and subject to the terms of any judgment that may be entered in the Action.
- I (We) agree to furnish additional information to the Claims Administrator to support this claim if required to do so.

PART VI: DEFINITIONS AND RELEASE

1. I (We) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally, and forever settle, discharge, and release all "Settled Claims" against all "Released Parties," including "Unknown Claims," as defined below.

- "Released Parties" means Defendants and the current and former officers, directors, partners, members, parents, subsidiaries, affiliates, employees, agents, attorneys, insurers (including the Insurer), representatives, heirs, successors in interest and assigns of any Defendant.
- "Settled Claims" means any and all claims, debts, demands, rights or causes of action or liabilities whatsoever, whether based on federal, state, local, statutory or common law or any other law, rule or regulation, whether fixed or contingent, accrued or un-accrued, liquidated or un-liquidated, at law or in equity, matured or un-matured, whether class or individual in nature, including both known claims and Unknown Claims (as defined below), (i) that have been asserted in this Action by Plaintiffs and/or the Class members or any of them against any of the Released Parties, or (ii) that could have been asserted in any forum by Plaintiffs and/or the Class members or any of them against any of the Released Parties which arise out of or are based upon the allegations, transactions, facts, matters or occurrences, representations or omissions involved, set forth, or referred to in the Consolidated Amended Class Action Complaint and relate to the purchase, acquisition, retention, or sale of the Securities of CP Ships during the Class Period.
- "Settled Defendants' Claims" means any and all claims, rights or causes of action or liabilities whatsoever, whether based on federal, state, local, statutory or common law or any other law, rule or regulation, including both known claims and Unknown Claims (as defined below), that have been or could have been asserted in the Action or any forum by the Defendants or any of them or the successors and assigns of any of them against Lead Plaintiffs, any Class member, Lead Counsel, or any Plaintiffs' Counsel, which arise out of or relate in any way to the institution, prosecution, or settlement of the Action (except for claims to enforce the Settlement).
- "Unknown Claims" means any and all Settled Claims which Lead Plaintiffs or any Class member does not know or suspect to exist in his, her or its favor at the time of the release of the Released Parties, and any Settled Defendants' Claims which any Defendant does not know or suspect to exist in his, her or its favor, which if known by him, her or it might have affected his, her or its decision(s) with respect to the Settlement. With respect to any and all Settled Claims and Settled Defendants' Claims, the Parties stipulate and agree that upon the Effective Date, the Parties shall expressly waive, and each Class member shall be deemed to have waived, and by operation of the Final Order and Judgment shall have expressly waived, any and all provisions, rights and benefits conferred by any law of any state or territory of the United States, or principle of common law, which is similar, comparable, or equivalent to Cal. Civ. Code § 1542, which provides:

A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor.

The Parties are aware that they may, after the date of the Stipulation, discover claims or facts in addition to or different from those they now know or believe to be true with respect to the Settled Claims. Nevertheless, it is the intention of the Parties as of the date hereof to fully, finally, and forever settle and release all Settled Claims as to all Released Parties, including existing claims for damages and losses that are presently unknown or unanticipated. In furtherance of this intention, the releases given in the Stipulation are and will remain in effect as full and complete mutual releases of Settled Claims as to all Released Parties, notwithstanding the discovery or existence of any additional or different facts relative to them. Each Party assumes the risk of any mistake in executing the Stipulation and furnishing the releases set forth in the Stipulation. The Parties acknowledge, and the Class members by operation of law shall be deemed to have acknowledged, that the inclusion of “Unknown Claims” in the definition of Settled Claims and Settled Defendants’ Claims was separately bargained for and was a key element of the Settlement.

2. This release shall be of no force or effect unless and until the Court gives final approval to the Settlement and the Effective Date occurs.

PART VII: REPRESENTATIONS

1. I (We) hereby warrant and represent that I (we) have not assigned or transferred or purported to assign or transfer, voluntarily or involuntarily, any matter released pursuant to this release or any other part or portion thereof.

2. I (We) hereby warrant and represent that I (we) have included information about all of my (our) purchase, acquisition, and sales transactions in CP Ships Securities which occurred during the Class Period, the number of shares of CP Ships common stock held by me (us) at the opening of trading on January 29, 2003 and the close of trading on August 9, 2004, and the face amount of CP Ships 4% Convertible Senior Subordinated Notes due 2024 and CP Ships 10-3/8% Senior Notes due 2012 held by me (us) at the opening of trading on January 29, 2003 and the close of trading on August 9, 2004.

ALL CLAIMANTS MUST COMPLETE EITHER THE SUBSTITUTE FORM W-9 OR W-8, AS APPLICABLE.

SUBSTITUTE FORM W-9—FOR UNITED STATES CITIZEN, RESIDENT, OR ENTITY

Enter taxpayer identification number (“TIN”) below for the beneficial owner(s). For individuals, this is your Social Security number (“SSN”). The Internal Revenue Service (“IRS”) requires such TIN. If you fail to provide this information, your claim may be rejected.

Employer Identification Number (EIN for estates, trusts, corporations, etc.) Social Security Number (SSN for individuals)

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I (We) certify that I am (we are) NOT subject to backup withholding under the provisions of Section 3406(a)(1)(C) of the Internal Revenue Code because (a) I am (we are) exempt from backup withholding or (b) I (we) have not been notified by the IRS that I am (we are) subject to backup withholding as a result of a failure to report all interest or dividends or (c) the IRS has notified me (us) that I am (we are) no longer subject to backup withholding.

NOTE: If the IRS has notified you that you **are** subject to backup withholding, please strike out the language that you are not subject to backup withholding in the certification above.

NOTE: If you have a joint account, only the Social Security number associated with that account is required to be provided. However, if your account is held jointly, BOTH parties must sign the form below.

SUBSTITUTE FORM W-8—FOR NON-UNITED STATES CITIZEN, RESIDENT, OR ENTITY

Certificate of foreign status of beneficial owner for United States tax withholding

Last Name	First Name

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Check Appropriate Box:

- | | | | |
|--|---|---|------------------------------------|
| <input type="radio"/> Individual | <input type="radio"/> Corporation | <input type="radio"/> Partnership | <input type="radio"/> Simple trust |
| <input type="radio"/> Grantor trust | <input type="radio"/> Complex trust | <input type="radio"/> Estate | <input type="radio"/> Government |
| <input type="radio"/> Disregarded entity | <input type="radio"/> Private foundation | <input type="radio"/> Central bank of issue | |
| <input type="radio"/> International organization | <input type="radio"/> Tax-exempt organization | <input type="radio"/> Other | _____ |

- I am (We are) the beneficial owner(s) (or am authorized to sign for the beneficial owner[s]) of all the income to which this form relates;
- The beneficial owner(s) is (are) not a United States person;
- The income to which this form relates is not effectively connected with the conduct of a trade or business in the United States or is effectively connected but is not subject to tax under an income tax treaty; and
- For broker transactions or barter exchanges, the beneficial owner(s) is (are) an exempt foreign person(s).

Furthermore, I (we) authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am (we are) the beneficial owner(s) or any withholding agent that can disburse or make payments of the income of which I am (we are) the beneficial owner(s).

The Internal Revenue Service does not require your consent to any provisions of this document other than the certifications required to establish your status as a non-United States person(s) and, if applicable, obtain a reduced rate of withholding.

Enter United States taxpayer identification number (“TIN”) on appropriate line, if applicable. For individuals, this is your Social Security Number (“SSN”). If you are not an individual or you are an individual who is an employer or who is engaged in a United States trade or business as a sole proprietor, you must enter an employer identification number (“EIN”). If you are a disregarded entity claiming treaty benefits as a hybrid entity, enter your EIN. If you are a non-United States citizen and have no SSN or EIN, please check “Not Applicable.”

Employer Identification Number (for estates, trusts, corporations, etc.)

Grid for Employer Identification Number: 2 boxes for the first two digits, followed by a hyphen, and then 7 boxes for the remaining digits.

Social Security Number (for individuals)

Grid for Social Security Number: 3 boxes for the first three digits, followed by a hyphen, 2 boxes for the next two digits, another hyphen, and then 4 boxes for the final four digits.

Not Applicable

I declare under penalty of perjury under the laws of the State of Florida and the United States of America that the foregoing information supplied by the undersigned is true and correct and that this Claim Form was executed this ____ day of _____ (Month, Year) in

_____ (City, State, Country).

Sign your name here

Type or print your name here

Joint owner sign your name here

Joint owner type or print your name here

Capacity of persons signing, e.g., beneficial owner, executor, or administrator

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

Reminder Checklist:

1. Please sign the Representations section of the Claim Form on Page 7.
2. If this claim is being made on behalf of joint claimants, both must sign.
3. Remember to attach supporting documentation. Do not highlight documentation.
4. Do not send original stock certificates or documentation; please send only copies. These items cannot be returned to you by the Claims Administrator.
5. Keep a copy of your Claim Form and all documents submitted for your records.
6. If you desire an acknowledgment of receipt of your Claim Form, please send it Certified Mail, Return Receipt Requested.
7. If you move and/or change your name, please inform the Claims Administrator of your new address and/or name change.

**THE CLAIM FORM AND YOUR SUPPORTING DOCUMENTATION MUST BE POSTMARKED
NO LATER THAN JULY 23, 2008.**