

Safeway BOGO Class Action Settlement Administrator
P.O. Box 1031
Baton Rouge, LA 70821

**Your Claim Form Must Be
Postmarked On or Before
June 16, 2023**

Safeway BOGO Class Action Settlement
Stewart et al. v. Albertsons Cos., Inc., Case No. 16CV15125 (Mult. Cty. Cir. Ct.)

Claim Form

You may be a class member entitled to payment of approximately \$200 if you purchased certain meat products at Safeway stores located within Oregon, offered on a “Buy One, Get One Free” or “Buy One, Get Two Free” promotion, using a Safeway Club Card between May 4, 2015, and September 7, 2016.

INSTRUCTIONS:

- 1. You are a Class Member who received notice.** You do **not** need to file a claim or take any further action. You will receive a direct payment of approximately \$200. If you would like to update your information or to elect to receive a direct payment digitally, please visit the Settlement website at www.SafewayBOGOClassAction.com.
- 2. You did NOT receive notice, but believe you are a Class Member.** You must make a valid and timely claim in order to receive a payment. The easiest way to submit a claim is online at www.SafewayBOGOClassAction.com, or you can complete this claim form. Your claim form must be submitted or postmarked **no later than June 16, 2023**.

SECTION I - CLAIMANT INFORMATION		
If you did <u>not</u> receive notice, but believe you are a Class Member, please provide all requested information in Section I below, sign and date the claim form, and return the completed form to Settlement Administrator at the address provided at the top of this page no later than June 16, 2023.		
<input type="text"/>	<input type="text"/>	
First Name*	Middle Initial	
<input type="text"/>		
Last Name*		
<input type="text"/>		
Mailing Address: Street Address/P.O. Box (include Apartment/Suite/Floor Number)*		
<input type="text"/>	<input type="text"/>	<input type="text"/>
City*	State*	Zip Code*
<input type="text"/>		
Current Email Address*		
<input type="text"/>	-	<input type="text"/>
Telephone Number		<input type="text"/>
		Safeway Club Card Number*

SECTION II - CERTIFICATION

I declare under penalty of perjury under the laws of the United States and the laws of my State of residence that the information supplied in this Claim Form by the undersigned is true and correct to the best of my recollection, and that this form was executed on the date set forth below.

I understand that I may be asked to provide supplemental information by the Claims Administrator before my claim will be considered complete and valid.

Signature

Print Name

Date

SECTION III - REMINDER CHECKLIST

1. Keep a copy of your Claim Form for your records.
2. If you would like to update your contact information, please visit the Settlement website at www.SafewayBOGOClassAction.com, call 1-855-475-1347, email info@SafewayBOGOClassAction.com, or write to Safeway BOGO Class Action Settlement Administrator, P.O. Box 1031, Baton Rouge, LA 70821.