

EXHIBIT F

Instructions for Completing Flint Water Settlement Claim Form

These instructions explain how to complete your Claim Form and follow the sections of the Claim Form as they appear. More detailed instructions regarding how to choose the appropriate Settlement Category, and required supporting documents, can be found starting on page 2.

The Claims Administrator has the obligation to verify all documentation submitted and may reject documentation that does not appear to be valid or does not support the claim.

1. **Claimant Information** – This contains the information we have from your Registration Form. If you need to make any changes or additions, then please complete this section again whether you are doing so online or on paper. If you are making any changes on paper, here or elsewhere, please make sure your writing is clear and readable so that your forms can be correctly processed.
2. **Next Friend, Personal Representative, or Guardian Information** (Please refer to the FAQ's on the website officialflintwatersettlement.com for a definition of these terms) – This contains the information that you provided in the Registration Form. If you need to make any changes or additions, then please complete this section again, whether you are doing so online or on paper.
 - If you did not originally submit information in the Registration Form about being the Next Friend, personal representative, or guardian of the Claimant, please complete the entire section in this Claim Form for the Claimant.
 - If you have not yet submitted the supporting documentation, with the Registration Form or otherwise, showing your authority to represent the Claimant as Next Friend, personal representative, or guardian, then please see the list chart at the end of these instructions, starting on page 19 and submit that documentation now along with this completed Claim Form.
3. **Attorney Information** – This contains the information that you provided in the Registration Form. If you need to make any changes or additions, then please complete this section again, whether you are doing so online or on paper.
4. **Settlement Categories** – The Compensation Grid explains the Settlement Categories and the proof requirements. The numbers listed on the Claim Form are the numbers that you see for the corresponding Settlement Categories in the Compensation Grid. Additional instructions for choosing the appropriate Settlement Category/ies and required documents can be found starting on page 2.
5. **Verification** – This is where you need to sign, date, and print your name. You are signing this form under penalty or perjury and it is important to verify that all the information you are providing on the form is true, correct, accurate and complete to the best of your knowledge.

Instructions for Settlement Categories

General Instruction for Settlement Categories:

- Exposure categories for Minor children and Adults are based on **age at the time of first exposure to the water**. The following examples are helpful:
 - If the Minor Claimant was 5 years old at the time of first exposure (during April 25, 2014 - July 31, 2016), then you should select a claim category in the section that applies to children ages 6 and under. That means you can select from Categories 1 - 6. If the Minor Claimant's first exposure to the water occurred between July 31, 2016 and November 16, 2020, then you can select Category 7.
 - If the Minor Claimant was 8 years old at the time of first exposure (during April 25, 2014 - July 31, 2016), then you should select a claim category in the section that applies to children ages 7 to 11. That means you can select from Categories 8 - 13. If the Minor Claimant's first exposure to the water occurred between July 31, 2016 and November 16, 2020, then you can select Category 14.
 - If the Minor Claimant was 15 years old at the time of first exposure (during April 25, 2014 - July 31, 2016), then you should select a claim category in the section that applies to children ages 12 - 17. That means you can select from Categories 15 - 20. If the Minor Claimant's first exposure to the water occurred between July 31, 2016 and November 16, 2020, then you can select Category 21.
 - If you or the Claimant you represent were 18 years old or older at the time of first exposure (after April 25, 2014), and you claim a personal injury, then you should select a claim category in the section that applies to Adults. That means you can select from Categories 22 - 27. Please note that some different dates apply in Categories 22 - 27.
- If you or someone you represent fit into more than one category for an injury claim among Categories 1 - 27, please select all that apply. The Claims Administrator will determine your eligibility and your payment will be based on the one highest injury category for which you qualify.
- If you owned a business in Flint or if you owned or rented or were legally obligated to pay water bills for residential property in Flint that received Flint water during the period April 25, 2014 to July 31, 2016, you may also be eligible for additional payments for property damage and/or business economic loss in Categories 28 - 30. So please select all categories that apply to you.

Personal Injury Proof of Exposure for Settlement Categories:

The following Forms of Documentation can be used to prove exposure to Flint water for the **Personal Injury Categories 1 through 27:**

- **Required:** Declaration Form – form stating that the Claimant dwelled, resided, lived, worked, attended school or day care, or was exposed to water, in Flint along with addresses and time periods for each address where Claimant lived and was exposed to Flint water for at least 21 days during any 30-day period between the relevant dates in the various Categories 1 - 26, and for any number of days between the relevant dates for Category 27. **This form is attached to these instructions. All Claimants**

asserting claims under Categories 1 - 27 must complete and return this form along with at least one of the supporting documents listed below:

- Water bill in the Claimant's name during the relevant category Exposure Period for property where Claimant was exposed to Flint water; **OR**
- School Record during the relevant category Exposure Period with Minor child's name and address (showing Flint address of school and/or Claimant); **OR**
- Day Care Invoice during the relevant category Exposure Period with Minor child's name and address (showing Flint address of day care location and/or Claimant); **OR**
- Letter from employer verifying employment during the relevant category Exposure Period at business in Flint with address (showing Flint address of place of employment and/or employee); **OR**
- Check or pay stub during the relevant category Exposure Period with the Claimant's name showing Flint address of place of employment and/or employee; **OR**
- Tax return during the relevant category Exposure Period showing address in Flint and name of Claimant on return; **OR**
- Deed to property located in Flint during the relevant category Exposure Period showing name of Claimant on deed; **OR**
- Lease during the relevant category Exposure Period for residential property in Flint listing Claimant in lease; **OR**
- Mortgage Statement for residential property in Flint during the relevant category Exposure Period showing name of Claimant on statement; **OR**
- Other document sufficient to reliably show address of Claimant's exposure to Flint water during the relevant category Exposure Period. The Claims Administrator will follow up with you if necessary after their review of the documentation provided.

The following Forms of Documentation can be used to prove exposure to Flint water for **Property Owners/Renters (which includes those who paid water bills), or for Business Owners - Categories 28 through 30** (the documentation must be dated during the time period from April 25, 2014 through July 31, 2016 – only one document needs to be submitted):

- Water bill for property – needs to be in name or business name of Claimant; **OR**
- Tax return – needs to show property address **AND** be in name or business name of Claimant; **OR**
- Deed to property – needs to be in name or business name of Claimant; **OR**
- Lease – needs to be in name or business name of Claimant; **OR**
- Mortgage Statement – needs to be in name or business name of Claimant.

Instructions and Required Proof by Settlement Category

- For Minors 6 and younger, go to page 4.
- For Minors 7 through 11, go to page 7.
- For Minors 12 through 17, go to page 10.
- For Adult personal injury go to page 13.
- For property owners, renters, and businesses, go to page 17.

Settlement Categories for Minors Ages 6 or Younger at First Exposure to Flint Water:

1. Was the child age 6 or younger at the time they were **first** exposed to Flint water? **AND**
 2. Did the child reside, dwell, attend school or day care in Flint, or was the child otherwise exposed to Flint water, for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016?
- **If you can answer yes for the child to BOTH questions above, then look at Categories 1 through 6 below and choose the one in which the child best fits:**

1. Settlement Category One:

Description of Eligibility Requirements:

- Blood lead level test of 10.0mcg/dL or above taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test of 10.0ug/G or above taken between May 16, 2014 and April __, 2021.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to proof of exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form.

2. Settlement Category Two:

Description of Eligibility Requirements:

- Blood lead level test at or between 5.0 and 9.9mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test at or between 5.9 and 9.9ug/G taken between May 16, 2014 and April __, 2021; **OR**
- Cognitive deficiency caused after May 16, 2014 at a development rate of 2.0 standard deviations or more below the mean. See Compensation Grid for full description of testing required.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to proof of exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form; **OR**
 - If Claimant has a report of a cognitive deficiency, you will need to submit the medical report as described in the Compensation Grid for this Category.

3. Settlement Category Three:

Description of Eligibility Requirements:

- Blood lead level test at or between 3.0 and 4.9mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test at or between 3.0 and 4.9ug/G taken between May 16, 2014 and April ____, 2021; **OR**
- Cognitive deficiency caused after May 16, 2014 at a rate of 1.0 standard deviation or more below the mean. (see Compensation Grid for full description of testing required); **OR**
- Infant born preterm or with low birth weight:
 - Mother needs to have resided, dwelled, attended school, or worked in Flint, or otherwise been exposed to Flint water, for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016; **AND**
 - Mother gave birth such that infant was born preterm or with low birth weight between May 16, 2014 and April 30, 2017.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form; **OR**
 - If Claimant has a report of a cognitive deficiency, you will need to submit the medical report as described in the Compensation Grid for this Category; **OR**
 - If Claimant was born preterm or with low birth rate, you will need to submit a copy of the mother's or infant's medical records showing either:
 - Infant born prior to 37 weeks of gestation; **OR**
 - Infant born with a weight under 5lbs 8oz (2500 grams).

4. Settlement Category Four:

Description of Eligibility Requirements:

- Blood lead level test at or between 0.1 and 2.9mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test at or between 0.1 and 2.9ug/G taken between May 16, 2014 and April ____, 2021; **OR**
- Infant was formula fed with a powder or liquid concentrate formula mixed with Flint water for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to proof of exposure documentation, Claimants for this Category must provide one of the following:

- Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
- If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form; **OR**
- If Claimant was a formula fed infant, you will need to submit a copy of the mother's or infant's medical records dated between May 16, 2014 and August 31, 2016, or other verifiable equivalent documentation, indicating that the infant was fed powdered or liquid concentrate formula mixed with Flint water for at least 21 days during a 30-day period.

5. Settlement Category Five:

Description of Eligibility Requirements:

- Flint residence or dwelling of Claimant tested between May 16, 2014 and August 31, 2016 with a water lead level of 15ppb or higher; **OR**
- Flint residence or dwelling of Claimant had lead or galvanized steel service lines.
- "Residence" in this Category means the residential real property where Claimant resided or dwelled and was exposed to Flint water for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016. "Resided or dwelled" means that an individual's legal residence or location where they regularly slept was in Flint, as reflected on a medical or other reliable record.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to proof of exposure documentation, Claimants for this Category must provide one of the following:
 - Water lead level test result for Claimant's residence or dwelling dated between May 16, 2014 and August 31, 2016 with a result of 15ppb or higher. If Claimant has test results, Claimant should provide such results. If Claimant is unable to provide the test results, Claimant should advise the Claims Administrator and the Claims Administrator will obtain test results conducted by the State of Michigan and City of Flint. The Claims Administrator cannot obtain results of tests conducted by other entities; **OR**
 - Listed on City of Flint report evidencing that Claimant's residence or dwelling had a lead or galvanized steel service line at the time of exposure. The Claims Administrator will obtain this information on Claimant's behalf.

6. Settlement Category Six:

Description of Eligibility Documentation:

- The child does not have any blood or bone lead level tests.

Required Supporting Documentation:

- Claim Form verification that the requirements are met; **AND**
- All Claimant must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.

7. Settlement Category Seven:

Description of Eligibility Documentation:

- Claimant was age 6 or younger at the time they were first exposed to Flint water; **AND**
- Claimant resided, dwelled, attended school or day care in Flint, or was otherwise exposed to Flint water, for at least 21 days during any 30-day period between August 1, 2016 and November 16, 2020.

Required Supporting Documentation:

- Claim Form verification that the requirements are met; **AND**
- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.

Settlement Categories for Minors Ages 7 through 11 at First Exposure to Flint Water:

1. Was the child age 7 through 11 at the time they were **first** exposed to Flint water? **AND**
 2. Did they reside, dwell, attend school or day care in Flint, or were they otherwise exposed to Flint water, for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016?
- **If you can answer yes to BOTH questions above, then look at Categories 8 through 13 below and choose the one in which the child best fits:**

8. Settlement Category Eight:

Description of Eligibility Requirements:

- Blood lead level test of 10.0mgc/dL or above taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test of 10.0ug/G or above taken between May 16, 2014 and April __, 2021.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to proof of exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form.

9. Settlement Category Nine:

Description of Eligibility Requirements:

- Blood lead level test at or between 5.0 and 9.9mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test at or between 5.9 and 9.9ug/G taken between May 16, 2014 and April ___, 2021.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to proof of exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form.

10. Settlement Category Ten:

Description of Eligibility Requirements:

- Blood lead level test at or between 3.0 and 4.9mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test at or between 3.0 and 4.9ug/G taken between May 16, 2014 and April ___, 2021; **OR**
- Cognitive deficiency caused after May 16, 2014 at a rate of 1.0 standard deviation or more below the mean (see Compensation Grid for full description of testing required).

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to proof of exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form; **OR**
 - If Claimant has a report of cognitive deficiency, you will need to submit the medical report as described in the Compensation Grid for this Category.

11. Settlement Category Eleven:

Description of Eligibility Requirements:

- Blood lead level test at or between 0.1 and 2.9mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test at or between 0.1 and 2.9ug/G taken between May 16, 2014 and April ___, 2021.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form.

12. Settlement Category Twelve:

Description of Eligibility Requirements:

- Flint residence or dwelling of Claimant tested between May 16, 2014 and August 31, 2016 with a water lead level of 15ppb or higher; **OR**
- Flint residence or dwelling of Claimant had lead or galvanized steel service lines.
- "Residence" in this Category means the residential real property where Claimant resided or dwelled and was exposed to Flint water for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016. "Resided or dwelled" means that an individual's legal residence or location where they regularly slept was in Flint, as reflected on a medical or other reliable record.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Water lead level test result for Claimant's residence or dwelling dated between May 16, 2014 and August 31, 2016 with a result of 15ppb or higher. If Claimant has test results, Claimant should provide such results. If Claimant is unable to provide the test results, Claimant should advise the Claims Administrator and the Claims Administrator will obtain test results conducted by the State of Michigan and City of Flint. The Claims Administrator cannot obtain results of tests conducted by other entities; **OR**
 - Listed on City of Flint report evidencing that Claimant's residence or dwelling had a lead or galvanized steel service line at the time of exposure. The Claims Administrator will obtain this information on Claimant's behalf.

13. Settlement Category Thirteen:

Description of Eligibility Requirements:

- The child does not have any blood or bone lead level tests.

Required Supporting Documentation:

- Claim Form verification that the requirements are met; **AND**
- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.

14. Settlement Category Fourteen:

Description of Eligibility Requirements:

- Claimant was age 7 through 11 at the time they were first exposed to Flint water; **AND**
- Claimant resided, dwelled, attended school or day care in Flint, or was otherwise exposed to Flint water, for at least 21 days during any 30-day period between August 1, 2016 and November 16, 2020.

Required Supporting Documentation:

- Claim Form verification that the requirements are met; **AND**
- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.

Settlement Categories for Minors Ages 12 Through 17 at First Exposure to Flint Water :

1. Was the child age 12 through 17 at the time they were **first** exposed to Flint water? **AND**
 2. Did they reside, dwell, attend school or day care in Flint, or were they otherwise exposed to Flint water, for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016?
- **If you can answer yes to BOTH questions above, then look at Categories 15 through 21 below and choose the one in which the child best fits:**

15. Settlement Category Fifteen:

Description of Eligibility Requirements:

- Blood lead level test of 10.0mgc/dL or above taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test of 10.0ug/G or above taken between May 16, 2014 and April __, 2021.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:

- Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
- If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form.

16. Settlement Category Sixteen:

Description of Eligibility Requirements:

- Blood lead level test at or between 5.0 and 9.9mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test at or between 5.0 and 9.9ug/G taken between May 16, 2014 and April ___, 2021.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form.

17. Settlement Category Seventeen:

Description of Eligibility Requirements:

- Blood lead level test at or between 3.0 and 4.9 mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test between 3.0 and 4.9 ug/G taken between May 16, 2014 and April ___, 2021; **OR**
- Cognitive deficiency caused after May 16, 2014 at a rate of 1.0 standard deviation or more below the mean (see Compensation Grid for full description of testing required).

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form; **OR**
 - If Claimant has a report of a cognitive deficiency, you will need to submit the medical report as described in the Compensation Grid for this Category.

18. Settlement Category Eighteen:

Description:

- Blood lead level test at or between 0.1 and 2.9 mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test at or between 0.1 and 2.9 ug/G taken between May 16, 2014 and April ____, 2021.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form.

19. Settlement Category Nineteen:

Description of Eligibility Requirements:

- Flint residence or dwelling of Claimant tested between May 16, 2014 and August 31, 2016 with a water lead level of 15 ppb or higher; **OR**
- Flint residence or dwelling of Claimant had lead or galvanized steel service lines.
- "Residence" in this Category means the residential real property where Claimant resided or dwelled and was exposed to Flint water for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016. "Resided or dwelled" means that an individual's legal residence or location where they regularly slept was in Flint, as reflected on a medical or other reliable record.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Water lead level test result for Claimant's residence or dwelling dated between May 16, 2014 and August 31, 2016 with a result of 15 ppb or higher. If Claimant has test results, Claimant should provide such results. If Claimant is unable to provide the test results, Claimant should advise the Claims Administrator and the Claims Administrator will obtain test results of tests conducted by the State of Michigan and City of Flint. The Claims Administrator cannot obtain results of tests conducted by other entities; **OR**
 - Listed on City of Flint report evidencing that Claimant's residence or dwelling had a lead or galvanized steel service line at the time of exposure. The Claims Administrator will obtain this information on Claimant's behalf.

20. Settlement Category Twenty:

Description of Eligibility Requirements:

- The child does not have any blood or bone lead level tests.

Required Supporting Documentation:

- Claim Form verification that the requirements are met; **AND**
- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.

21. Settlement Category Twenty-One:

Description of Eligibility Requirements:

- Claimant was age 12 through 17 at the time they were first exposed to Flint water; **AND**
- Claimant resided, dwelled, attended school or day care in Flint, or was otherwise exposed to Flint water, for at least 21 days during any 30-day period between August 1, 2016 and November 16, 2020.

Required Supporting Documentation:

- Claim Form verification that the requirements are met; **AND**
- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.

Settlement Categories for Adults 18 and over at First Exposure to Flint Water:

1. Were you 18 or older at the time you were **first** exposed to Flint water? **AND**
 2. Did you reside, dwell, attend school or work in Flint, or were you otherwise exposed to Flint water, for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016?
- **If you can answer yes to BOTH questions above, then look at Categories 22 through 27 below and choose the one in which you best fit. Note, however, that Category 26 for women miscarriages is for women of any age.**

22. Settlement Category Twenty-Two:

Description of Eligibility Requirements:

- Blood lead level test of 10.0 mcg/dL or above taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test of 10.0 ug/G or above taken between May 16, 2014 and April ___, 2021.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.

- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form.

23. Settlement Category Twenty-Three:

Description of Eligibility Requirements:

- Blood lead level test at or between 5.0 and 9.9 mcg/dL taken between May 16, 2014 and August 31, 2016; **OR**
- Bone lead test at or between 5.0 and 9.9 ug/G taken between May 16, 2014 and April __, 2021; **OR**
- Claimant had severe hypertension, neuropathy, stroke, anemia, or renal insufficiency and was treated for such conditions by a physician between May 16, 2014 and July 31, 2016, and Claimant's medical records or a medical report dated between May 16, 2014 and April __, 2021, document that the condition was caused or exacerbated by Claimant's exposure to Flint water between May 16, 2014 and July 31, 2016.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit test results from a blood lead level test taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form; **OR**
 - Copy of medical records or reports as described in the Compensation Grid for this Category.

24. Settlement Category Twenty-Four:

Description of Eligibility Requirements:

- A physical injury for which Claimant was treated by a physician between May 16, 2014 and July 31, 2016, and Claimant's medical records or a medical report dated between May 16, 2014 and April __, 2021, document that the condition was caused or exacerbated by Claimant's exposure to Flint water between May 16, 2014 and July 31, 2016. Examples of such physical injuries include, but are not limited to:
 - Skin rashes
 - Skin lesions
 - Hair loss
 - Respiratory
 - Pneumonia or
 - Gastrointestinal conditions.

Required Supporting Documentation:

- Copy of medical records or reports as described in the Compensation Grid for this Category; **AND**
- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.

25. Settlement Category Twenty-Five:

Description of Eligibility Requirements:

- Blood lead level test with a blood level at or above 5.0 mcg/dL tested after July 31, 2016 and before November 16, 2020; **OR**
- Bone lead test at or above 5.0 ug/G tested after July 31, 2016 and before November 16, 2020; **OR**
- Claimant has any physical injury treated by a board-certified physician or a person supervised by a board-certified physician after July 31, 2016 and before November 16, 2020, that is documented in medical records or a report dated between July 31, 2016 and April __, 2021, by a physician or their supervisee as being caused or exacerbated by Claimant's exposure to Flint water after July 31, 2016 and before November 16, 2020. Examples of such physical injuries include, but are not limited to:
 - Skin rashes
 - Skin lesions
 - Hair loss
 - Respiratory
 - Pneumonia or
 - Gastrointestinal conditions.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Please submit blood lead level test result taken in Michigan by a qualified facility or doctor. If Claimant is unable to provide the test result, the Claims Administrator will obtain this information on Claimant's behalf; **OR**
 - If Claimant has a bone lead test result, you will need to submit the test results with this Claim Form; **OR**
 - Copy of medical records or reports as described in the Compensation Grid for this Category

26. Settlement Category Twenty-Six:

Description of Eligibility Requirements:

- A woman of any age, who for at least 21 days during any 30-day period between April 25, 2014 and July 31, 2016, resided, dwelled, attended school or worked in Flint, or was otherwise exposed to Flint water; **AND**
- Who suffered a miscarriage between May 16, 2014 and April 30, 2017 with the mother's or fetus' cord blood lead level of 5 mcg/dL or higher.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide:
 - Copy of medical records dated between May 16, 2014 and April 30, 2017, which includes an opinion from a board-certified physician in obstetrics and gynecology stating that the mother suffered a miscarriage between May 16, 2014 and April 30, 2017; **AND**
 - A blood lead level test of Claimant taken between May 16, 2014 and April 30, 2017 or a lead level test of the fetus' cord. If Claimant is unable to provide the blood lead level test result, the Claims Administrator will obtain this information on Claimant's behalf.

27. Settlement Category Twenty-Seven:

Description of Eligibility Requirements for Category 27A:

- An Adult first exposed to Flint water between April 25, 2014 and December 31, 2018, who was diagnosed with Legionnaires' Disease during the time period of April 25, 2014 through December 31, 2018, and who did not die from the disease.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of exposure Documentation, Claimants for this Category must provide a copy of medical records dated between April 25, 2014 and December 31, 2018, reflecting that Claimant was diagnosed with Legionnaires' Disease between the dates listed above. See also, Compensation Grid for Reconsideration Request of Adverse Notice and related affidavit.

Description of Eligibility Requirements for Category 27B:

- An Adult first exposed to Flint water between April 25, 2014 and December 31, 2018, who was diagnosed with Legionnaires' Disease during the time period of April 25, 2014 through December 31, 2018, and who died from the disease.

Required Supporting Documentation:

- All Claimants must submit Proof of Exposure. The list of acceptable documents is above on page 2 under the Personal Injury Proof of Exposure list of acceptable documents.
- In addition to Proof of Exposure documentation, Claimants for this Category must provide one of the following:
 - Copy of medical records dated between April 25, 2014 and December 31, 2018, reflecting that Claimant was diagnosed with Legionnaires' Disease between the dates listed above, and that such death was primarily or secondarily caused by Legionnaires' Disease; **OR**
 - A death certificate that indicates the primary or secondary cause of death was Legionnaires' Disease. See also, Compensation Grid for Reconsideration Request of Adverse Notice and related affidavit.

Settlement Categories for Property Owners/Renters (which includes those who paid water bills) and Business Owners:

28. Settlement Category Twenty-Eight:

Description of Eligibility Requirements:

- All individuals who owned or who were the lessee of a parcel of residential real property (which includes those who paid water bills) in the City of Flint, and where that residential property received Flint water on or between April 25, 2014 and July 31, 2016.

Required Supporting Documentation:

- Declaration of Real Property Owner/Renter and/or Business Owner Form (attached to these instructions), on which Claimant must identify all owners, lessees and other interested parties in the real property (including those legally responsible for paying water bills) so that the proper legal recipient can receive the award; **AND**
- Copy of any document showing proof of residential real property ownership or of being a residential lessee in the City of Flint during the period of April 25, 2014 to July 31, 2016, as well as that the property was receiving Flint water, including but not limited to the following (the documentation must be in the name of Claimant and dated during the time period from April 25, 2014 through July 31, 2016 – only one document needs to be submitted):
 - Water bill
 - Deed
 - Housing contract
 - Mortgage statement
 - Lease
 - Property or income tax statement.

29. Settlement Category Twenty-Nine:

Description of Eligibility Requirements:

- All nonfarm businesses that owned and earned income from real property in the City of Flint (which includes those who paid for water bills), and that property received Flint water, on or between April 25, 2014 and July 31, 2016.

Required Supporting Documentation:

- Declaration of Real Property Owner/Renter and/or Business Owner Form (attached to these instructions), on which Claimant must identify all business owners and other interested parties in the real property so that the proper legal recipient can receive the award; **AND**
- Copy of any document showing proof of business and real property ownership in the City of Flint, and such property receiving Flint water, during the period of April 25, 2014 to July 31, 2016, including but not limited to the following (the documentation must be in the name of Claimant and dated during the time period from April 25, 2014 through July 31, 2016 – only one document needs to be submitted):
 - Water Bill
 - Deed
 - Housing Contract

- Mortgage Statement
- Property or income tax statement
- Lease
- Tax Registration
- State Filing
- Certificate of Incorporation; **AND**
- Proof of damages. Claimants shall complete a Business Interruption Claim Form (attached to these instructions).

30. Settlement Category Thirty:

Description of Eligibility Requirements:

- All nonfarm and non-real property businesses that operated in the City of Flint, and the business received Flint water, on or between April 25, 2014 and July 31, 2016.

Required Supporting Documentation:

- Declaration of Real Property Owner/Renter and/or Business Owner Form (attached to these instructions), on which Claimant must identify all business owners and other interested parties so that the proper legal recipient can receive the award; **AND**
- Copy of any document showing proof of business incorporation or organization, and business ownership operating in the City of Flint, and receiving Flint water, during the period of April 25, 2014 to July 31, 2016, including but not limited to the following (the documentation must be in the name of Claimant and dated during the time period from April 25, 2014 through July 31, 2016 – only one document needs to be submitted):
 - Water bill
 - Property or income tax statement
 - Tax registration
 - State filing
 - Certificate of Incorporation; **AND**
- Proof of damages, which shall be measured by loss of net profits year over year as reflected in tax filings. Claimants shall complete a Business Interruption Claim Form (attached to these instructions).

Supporting Documentation for Authority to Represent Claimant as Next Friend, Personal Representative or Guardian

Acceptable forms of documentation for Section 2 – “Relationship to Registrant”:

| Relationship to Claimant | Reason for Representation | Required Documentation |
|---------------------------------|--|---|
| Spouse | Legally incapacitated spouse | Court Order showing your appointment as legal guardian of your spouse. |
| Spouse | Death of spouse | A. Court documentation showing your appointment as representative for your spouse’s estate; OR B. If an estate has not been opened, you will be required to obtain the appropriate estate documentation prior to payment of the award. There will be help available to you to complete this process. For now, submit the death certificate of Registrant. |
| Parent | Legally Incapacitated adult child | Court Order showing your appointment as legal guardian of your adult child. |
| Parent | Death of child | A. Court documentation showing your appointment as representative for your child’s estate; OR B. If an estate has not been opened, you will be required to obtain the appropriate estate documentation prior to payment of the award. There will be help available to you to complete this process. For now, submit the death certificate of Registrant. |
| Parent | Minor child | A. Birth certificate for your child listing you as parent; ¹ OR B. Adoption certificate showing you adopting Minor child. |
| Stepparent | Minor child | A. Court Order showing your appointment as legal guardian of Minor child; OR B. Adoption certificate showing you adopting Minor stepchild; OR C. Tax Return showing the Minor as your dependent; OR D. Marriage license showing spousal relationship; AND E. Birth certificate for child listing a parent named in marriage license (see footnote 1). |
| Grandparent | Legally Incapacitated adult grandchild | Court Order showing your appointment as legal guardian of adult grandchild. |
| Grandparent | Death of grandchild | A. Court documentation showing your appointment as representative for your grandchild’s estate; OR B. If an estate has not been opened, you will be required to obtain the appropriate estate documentation prior to payment of the award. There will be help available to you to complete this process. For now, submit the death certificate of Registrant. |

¹ If you do not have or cannot obtain the birth certificate, the Claims Administrator will attempt to confirm with the State of Michigan’s records that the information you provide matches the available birth records. However, there is no guarantee that the Claims Administrator will be able to independently confirm the birth certificate information. Please make every effort to provide the birth certificate.

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|---------------------|--|--|
| Grandparent | Minor grandchild | <p>A. Court Order showing your appointment as legal guardian for your Minor grandchild; OR</p> <p>B. Tax Return showing your Minor grandchild as your dependent; OR</p> <p>C. Birth certificate for the parent of the Minor grandchild, listing grandparent; AND</p> <p>D. Birth certificate for grandchild listing parent named above (see footnote 1), or adoption certificate showing parent named above adopting Minor grandchild.</p> |
| Adult Child | Legally incapacitated parent | Court Order showing your appointment as guardian for your parent. |
| Adult Child | Death of parent | <p>A. Court documentation showing your appointment as representative for your parent’s estate; OR</p> <p>B. If an estate has not been opened, you will be required to obtain the appropriate estate documentation prior to payment of the award. There will be help available to you to complete this process. For now, submit the death certificate of Registrant.</p> |
| Adult Sibling | Legally incapacitated adult sibling | Court Order showing your appointment as legal guardian for your adult sibling. |
| Adult Sibling | Death of sibling | <p>A. Court documentation showing your appointment as representative for your sibling’s estate; OR</p> <p>B. If an estate has not been opened, you will be required to obtain the appropriate estate documentation prior to payment of the award. There will be help available to you to complete this process. For now, submit the death certificate of Registrant.</p> |
| Adult Sibling | Minor sibling | <p>A. Court Order showing your appointment as the legal guardian for your Minor sibling; OR</p> <p>B. Adoption certificate showing you adopting your Minor sibling; OR</p> <p>C. Tax Return showing your Minor sibling as your dependent; OR</p> <p>D. Your birth certificate; AND</p> <p>E. Birth certificate of your Minor sibling listing the same parent (see footnote 1), or adoption certificate showing the same parent adopting Minor sibling.</p> |
| Adult Aunt or Uncle | Legally incapacitated adult niece/nephew | Court Order showing your appointment as legal guardian for your adult niece/nephew. |
| Adult Aunt or Uncle | Death of niece/nephew | <p>A. Court documentation showing your appointment as representative for your niece/nephew’s estate; OR</p> <p>B. If an estate has not been opened, you will be required to obtain the appropriate estate documentation prior to payment of the award. There will be help available to you to complete this process. For now, submit the death certificate of Registrant.</p> |
| Adult Aunt or Uncle | Minor niece/nephew | <p>A. Court documentation showing your appointment as legal guardian for your Minor niece/nephew; OR</p> <p>B. An adoption certificate showing you adopting your Minor niece/nephew; OR</p> |

| | | |
|--|--|--|
| | | <p>C. Tax return showing your Minor niece/nephew as your dependent; OR</p> <p>D. Your birth certificate; AND</p> <p>E. Your sibling’s birth certificate or death certificate listing at least one common parent (see footnote 1); AND</p> <p>F. Birth certificate for your niece/nephew listing your sibling as their parent, or adoption certificate showing your sibling adopting Minor niece/nephew.</p> |
| Legal Guardian or other court-appointed representative | Incapacity or death of Adult or Minor Claimant | Court documentation showing your appointment as guardian/representative for Registrant. |
| Estate Administrator | Death of Adult or Minor Claimant | Court documentation showing your appointment as representative for the estate of Registrant. |
| Other | Please describe: | Any documentation to support your relationship to Registrant. If none of the above descriptions or documents apply, please describe the basis for your relationship to the Registrant and provide the best documentation you have available to support that relationship. The Claims Administrator will follow up with you if necessary after their review of the documentation provided. |