

**Must be Postmarked
or Submitted by
October 1, 2010**

**Dannon Class Action Settlement Administrator
c/o The Garden City Group, Inc.
P.O. Box 9320
Dublin, OH 43017-4220
Toll-Free: 1 (888) 418-6122
Website: www.DannonSettlement.com**

DAN



Claim Number:

Control Number:

Gemelas v. The Dannon Company, Inc.
PROOF OF CLAIM FORM

You can also file online at: www.DannonSettlement.com

You must complete the required information below. If submitting a claim for more than \$15.00, you must also sign the Affirmation that you purchased the specified Product(s). For those purchases for which you have proof of purchase, please send the receipt or other relevant documentation. To receive more than \$30, you **MUST** send the receipt or other proof of purchase. Do NOT send original documents – send photocopies. **All Claim Forms must be postmarked or submitted online by October 1, 2010.**

If mailing, please return this form to:

Dannon Class Action Settlement Administrator
c/o The Garden City Group, Inc.
PO Box 9320
Dublin, OH 43017-4220

CLASS MEMBER INFORMATION

NAME: _____ TELEPHONE OR EMAIL: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PURCHASE INFORMATION

Complete information should be provided for each purchase. If additional space is required, please attach additional pages.

PRODUCT NAME (ACTIVIA, ACTIVIA LIGHT, DANACTIVE OR DANACTIVE LIGHT)*	DATE OF PURCHASE	COST OF PURCHASE	LOCATION OF PURCHASE (STORE, CITY & STATE)	PROOF OF PURCHASE ATTACHED?

* For a full list of the Products, see www.DannonSettlement.com

AFFIRMATION

I AFFIRM THAT I PURCHASED THE LISTED ACTIVIA OR DANACTIVE PRODUCTS IN THE UNITED STATES.

SIGNATURE: _____ DATE: _____

CLAIM FORMS MUST BE POSTMARKED OR SUBMITTED ONLINE BY OCTOBER 1, 2010
QUESTIONS? CALL TOLL-FREE 1 (888) 418-6122 OR VISIT WWW.DANNONSETTLEMENT.COM