CLAIM FORM INSTRUCTIONS

To make a claim through the claims process for benefits that may be available as a result of the Settlement reached in the Litigation captioned *Gulbankian*, et al. v. MW Manufacturers, Inc. and Hartshorn, et al. v. MW Manufacturers, Inc., you must fill out the following Claim Form as completely as you can and send it to the following address:

Gulbankian v. MW Manufacturers Settlement Administrator PO Box 2995 Portland, OR 97208-2995

You must submit your notarized claim by the later of one year from the Effective Date, or the end of the Warranty Period applicable to the window that is the subject of your claim.

Capitalized terms that are used herein and not defined have the meanings set forth in the Settlement Agreement.

Each property owner making a claim must submit a separate Claim Form. You may obtain extra copies by calling the Settlement Administrator at 1-866-752-0068. You may also obtain extra copies online at www.MWManufacturersVinylCladWindowSettlement.com.

All photographs submitted with this Claim Form should be labeled with (1) the Claimant's name and address, and (2) the location in the Structure of the window shown, if applicable. The Claimant must identify exactly which window is depicted in each photograph. All photographs must be in focus and comply with the instructions in this Claim Form.

No materials submitted to the Settlement Administrator will be returned to you. Accordingly, do not submit any original documents.

A class member submitting a claim may be contacted by the Settlement Administrator for additional information regarding the class member's claims. If you do not provide the additional information requested within thirty (30) days from the date on the letter from the Settlement Administrator, your claim may be denied. If your claim is denied for failure to provide such additional evidence, you may begin a new claim by submitting a new Claim Form so long as that new claim is submitted prior to the later of one year from the Effective Date, or the end of the Warranty Period applicable to the window that is the subject of your claim.

If the Claims Reviewer approves your claim in whole or in part, the Settlement Administrator will send you a check and, if applicable, an explanation of which part of your claim is approved and which part is denied. By cashing the check, you accept that amount as payment for your claim and you may not appeal the decision with respect to the claim.

If your claim is denied in whole or in part, you may appeal the denial to the Independent Claims Reviewer. If you wish to do so, you must inform the Settlement Administrator in writing within thirty (30) days of the date on the letter denying your claim in whole or in part. So long as your submission is within the Claims Deadline, you may also submit another claim for the window subject to the denial once every year from the date that you receive notice of the denial of your claim from the Settlement Administrator.

Capitalized terms used herein and not defined have the meanings set forth in the Settlement Agreement.

CLAIM FORM

IT IS IMPORTANT THAT YOU TRY TO ANSWER ALL QUESTIONS AS FULLY AND ACCURATELY AS POSSIBLE. FAILURE TO FULLY ANSWER THE QUESTIONS OR TO PROVIDE THE REQUESTED INFORMATION AND/OR DOCUMENTATION MAY AFFECT YOUR ABILITY TO OBTAIN BENEFITS.

I. By submitting this Claim Form, I state that I currently own or previously owned a Structure that contains or contained one or more vinyl-clad, wood-framed windows manufactured by MW Manufacturers, Inc. ("MW"), between January 1, 1987 and May 23, 2014, which, during the majority of the class period, were marketed under the trade name MW Manufacturers, but may have been marketed under the trade name Ply Gem Windows.

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in the Structure. An illustration of an acceptable photograph is included in Appendix A as Figure 2. Number of units, if not a single family home: c. d. Total number of MW vinvl-clad, wood-framed windows installed in the Structure, whether the subject of this claim or not: 2. Please provide the following information about the purchase and installation of the MW vinyl-clad, woodframed window(s) that is/are the subject of this claim. Date and source of purchase: a. Source Name: Source Address: City: ZIP Code: State:

Please attach one or more photographs of each exterior wall of the Structure to show the total number of windows

- b. Please provide proof of Date of Manufacture for each of the MW vinyl-clad, wood-framed window(s) that are the subject of this claim. There are a number of ways that you can prove the Date of Manufacture under the Settlement Agreement, including: 1) a photograph of the label (see Appendix A, Figure 3) containing a "Ship Date"; 2) a photograph of the rim spacer (see Appendix A, Figure 5) indicating the manufacturing date; 3) an invoice and evidence of payment for the MW vinyl-clad, wood-framed window(s); 4) a certificate of occupancy for the Structure or other building inspection document identifying the date of construction; or 5) any other contemporaneous documentary proof of the purchase and installation for each of the MW vinyl-clad, wood-framed window(s) that are the subject of this claim. Note: not all MW Vinyl-Clad Windows have labels or a rim spacer; a single photo of a label or a rim spacer may provide sufficient proof for both 2b and 2c; the sash label may not provide conclusive evidence of the Date of Manufacture.
- c. Please provide proof that each of the vinyl-clad, wood window(s) that are the subject of this claim are MW windows. There are a number of ways you can prove that the window(s) that are the subject of your claim are MW vinyl-clad, wood-framed window(s), including: 1) a photograph of the label (see Appendix A, Figure 3); 2) a photograph of the rim spacer (see Appendix A, Figure 5) that should show "MW Manufacturers"; 3) a photograph of the lock(s) on the window(s) that are the subject of your claims bearing a "MW" stamp (see Appendix A, Figures 4a and 4b) [Note: the presence of this stamp is not conclusive evidence that it is a MW window]; 4) photographs of the interior and exterior (if possible) of the lower portion of the frame and sash with the sash open (see Appendix A, Figures 6a and 6b); and 5) any other evidence that the window(s) that are the subject of your claim are MW vinyl-clad, wood-framed window(s). Note: not all MW Vinyl-Clad Windows have a head label or a rim spacer; a single photo of a label or a rim spacer may provide sufficient proof for both 2b and 2c.

3.	Please identify the nature of the damage alleged.	
	a. Please state the number of windows for which you are seeking a remedy:	
	b. For each window for which you are seeking a remedy, please identify which of the fo of damage you allege (check all that apply).	llowing sorts
	Wood rot in lower portion of Window Frame, and/or wood rot in the lower sash (for Level 1 Relief (In Warranty) only)	aining
	☐ Visible evidence of warping ☐ Visible evidence of di	scoloration
	c. For each window for which you are seeking remedy, provide the measurement of the Appendix A, Figure 9).	window (See
	Daylight Opening: W Inches L Inches	
	For each window for which you are seeking remedy, please attach:	
	(1) a photograph showing the interior of each window from a distance sufficient to show in the Structure of the window (An illustration of an acceptable photograph is included A as Figure 7a.);	the location in Appendix
	AND	
	(2) two different photographs showing the condition of each window. The photografthe condition of the window must be of the wood itself. To expose the wood on the double-hung window, raise the sash and remove the window balance. (Instructions or of a balance from an applicable window can be found in Appendix A, Figure 7b. Ill acceptable examples of framing for the two photographs showing the condition of the be found in Appendix A, Figures 8a and 8b.)	e frame of a the removal ustrations of
4.	Are you currently employed by MW Manufacturers, Inc. or any of its affiliates?	
	Yes No	
	If yes, which entity?	
IV.	Claims, Settlements, and Lawsuits	
1.	Have you made a warranty or other such claim to MW or its affiliates for repair or replacement the MW vinyl-clad, wood-framed window(s) that is/are the subject of this claim?	of damage to
	Yes No	
	If yes, please state:	
	a. the date of the claim: MM DD YYYY	
	b. to whom you made the claim:	

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Please attach any documentation related to such claim, including documents submitted to the insurance company or documents received from the insurance company.

in	entify whether you made any claims to, or received any payments from, anyone other than MW or an surance company (such as a contractor, subcontractor, siding manufacturer, etc.) for water-intrusion amage to the MW vinyl-clad, wood-framed window(s) that is/are the subject of this claim.
	Yes No
If	yes, please state:
a.	the name of the company to whom the claim was made:
b.	a description of the claim made:
L	
c.	the amount of the claim:
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d.	the outcome of the claim:
_	the amount noid if any
e.	
	ease attach any documentation related to such claim, including documents submitted to the company or
	ocuments received from the company.
H Fe	ave you entered into any written settlement with MW or its affiliates for the damage alleged in this Claim orm?
	Yes No
If	yes, please state:
D	ate of settlement: Amount of settlement:
	\$
	MM DD YYYY
Pl	ease attach written settlement agreement.
H th	ave you entered into any written settlement for the damage alleged in this Claim Form with anyone other an MW or its affiliates (such as a contractor, subcontractor, siding manufacturer, etc.)?
	Yes No
If	yes, please state:
	ate of settlement: Amount of settlement: MM DD YYYY Amount of settlement:

Please attach written settlement agreement.

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7.	Have you submitted any previous claims under this Settlement for the window(s) that is/are the subject of this claim?
	Yes No
	If yes, please state:
	a. the date of the claim: MM DD YYYY
	b. the nature of the damage alleged in the prior claim:
	c. the outcome of the claim:
V.	d. the amount paid, if any: \$ Ownership Documentation
1.	Please attach documentation that verifies that you are the current owner (or are a former owner who has retained the right to sue through an assignment) of the property containing the MW vinyl-clad, wood-framed window(s) that is/are the subject of this claim. If the Structure is a condominium, owned apartment, coop, or other Structure with shared ownership, please attach documentation establishing that you have legal standing to sue for damages to the window at issue, such as the Condominium Declarations and/or By-Laws. Examples of sufficient documentation of current property ownership include a copy of the most recent property tax bill, declaration page from a policy of title or homeowners insurance, or mortgage statement. If you are a former homeowner who has retained the right to sue through an assignment, you must provide a written assignment agreement executed by you and the buyer of the property indicating that you retained the right to pursue a remedy against MW for damage to the window(s) that is/are the subject of this claim, as well as the evidence described above for the period for which you were the homeowner.
2.	Identify whether you have assigned to any other person any rights you have with respect to the window(s) that is/are the subject of this claim.
	Yes No
	If yes, please state:
Name o	f person assigned to:
Date of MM	Assignment: -

Circui	mstances	leading to the assignment:
		ny documentation related to the assignment, including any written evidence of the assignment itself.
VI.		onal Information
Please	e provide	any additional information that you believe would be helpful in evaluating your claim:
	D 41	Clina of this Claim Farms are harden and mixture the invitation of the United Court Court for
VII.	the Dis	filing of this Claim Form, you hereby submit to the jurisdiction of the United States District Court for strict of Massachusetts for the purposes of this claim.
VIII.	incurre that, ot	enefits provided by the Settlement are for otherwise unreimbursed damages, costs, and expenses ed by you related to damage covered by the Settlement. By submitting this Claim Form, you verify ther than what you disclosed in the Claim Form, you have not been reimbursed or compensated for the es, costs, and expenses that you are seeking in this Claim Form.
IX.	Certifi	ication Under the Penalty of Perjury
this C	Claim For	U.S.C. Section 1746, I declare under penalty of perjury that the answers and statements made in m are true and accurate, that all enclosures are true and correct copies of the documents, that all abmitted accurately depict the condition of the window shown, and that:
	1.	The Social Security number or Taxpayer Identification Number provided is correct;
	2.	the Claimant is NOT subject to backup withholding because: (a) the Claimant is exempt from backup withholding, or (b) the Claimant has not been notified by the Internal Revenue Service (IRS) that the Claimant is subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified the Claimant that he or she is no longer subject to backup withholding; and
	3.	the Claimant is a U.S. citizen or other U.S. person.
		ust cross out item 2 above if you have been notified by the IRS that you are currently subject to p withholding because you have failed to report all interest and dividends on your tax return.
		nternal Revenue Service does not require your consent to any provision of this document other ertifications required to avoid backup withholding.
Enter	your Tax	payer Identification Number below.
Social	Security	Number: Taxpayer Identification Number: -
In add	lition, ple	ease answer the following questions:
	1.	Are you seeking reimbursement for a structure/product that you no longer own?
		Yes No
	2.	Did you deduct the cost of installation of the product on your federal tax returns?
		Yes No

3.	Did you d	educt the	e cost of repairs of	the produ	ect on your fe	ederal tax re	turns?	
	Yes	☐ No)					
By signing thi is true and cor	s Claim For	m, I certi	ify under the penal y knowledge.	lty of perju	ıry that the iı	nformation I	provided in	this Claim Form
Subscribed an	d sworn to b	efore m	e this:					
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