ROCKEY CLASS ACTION LITIGATION
Cause No. 09-2-02242-7

REQUEST FOR EXCLUSION ("OPT-OUT") FORM

This form is to be completed only by those individuals who do <u>NOT</u> wish to remain a Class Member and who do <u>NOT</u> want to be considered for a monetary award that may result from this litigation.

Name:_____
First MI Last

Address:_____
Number and Street

_____
City State Zip Code

Date of Birth_____Telephone:_____

By signing this Form, I certify that I have read the Notice to Class Members and I understand that:

1. I am removing myself as a member of the Class;
2. I will receive no financial benefit from the Lawsuit
3. I have a right to pursue claims on my own, with or without my own attorney.
4. I understand that if I opt-out, my claims may be affected by the relevant statute of limitations and that I should discuss the statute of limitations with any attorney with whom I consult.

Signature:_____Date:_____

City and State where signed:_____

Please return the completed form postmarked by October 15, 2009 to:

Rockey Class Action Exclusion Request
c/o Sirianni Youtz Meier and Spoonemore
719 Second Avenue, Suite 1100
Seattle, WA 98104
(206) 223-0303