

Honest SLS MDL CLAIM FORM

YOU MUST SUBMIT YOUR CLAIM FORM NO LATER THAN NOVEMBER 15, 2017. YOU CAN ALSO FILE A CLAIM ONLINE AT: WWW.SLSSETTLEMENT.COM.

SECTION I. CLASS MEMBER INFORMATION. Please legibly print or type the following information:

Name (first, middle, and last): _____

Residential Street Address: _____

City, State, and ZIP code: _____

Email Address: _____

Preferred Telephone Number: (_____) _____ (optional)

Class Member Identification Number: (If you received a notice of the Settlement by email or mail): _____

Your contact information will be used by the claims administrator to contact you, if necessary, about your claim. Provision of your phone number is optional. By providing contact information, you agree that the claims administrator may contact you about your claim. Your contact information will not be used for any purpose unrelated to this settlement.

SECTION II. PRODUCTS INCLUDED IN THIS SETTLEMENT.

Products included in this Settlement are Honest multi-surface cleaner (regular and concentrate), dish soap (regular and concentrate, all scents) and laundry detergent purchased between January 17, 2012 and August 2, 2017: The products must have been purchased in the United States by a United States resident. Excluded from the Class are companies that purchased the Products at wholesale for resale, Defendant's Counsel, Defendant's officers and directors, and the judge presiding over the Action.

SECTION III. PURCHASE AND PRODUCT INFORMATION FOR PURCHASES OTHER THAN AT HONEST.COM.

Please fill in the information about your purchases below. You do not need to provide a receipt for purchases of less than \$50. Purchases of \$50 or more require a receipt as proof of purchase. The actual amount paid to individual claimants will depend on the number of valid claims submitted.

Honest Product	Number Purchased	Amount Paid for Product(s)	Location(s) of Purchase (Store Name, City and State)	Approximate Date(s) of Purchase	Receipt Provided?
Multi-surface Cleaner (regular)					<input type="checkbox"/> YES <input type="checkbox"/> NO
Multi-surface Cleaner (concentrate)					<input type="checkbox"/> YES <input type="checkbox"/> NO

Dish Soap, any scent (regular)					<input type="checkbox"/> YES <input type="checkbox"/> NO
Dish Soap, any scent (concentrate)					<input type="checkbox"/> YES <input type="checkbox"/> NO
Laundry Detergent					<input type="checkbox"/> YES <input type="checkbox"/> NO

Did you receive a refund of the purchase price of any of the items entered above? YES NO

If yes, how much? \$ _____.

SECTION IV. PURCHASE AND PRODUCT INFORMATION FOR PURCHASES AT HONEST.COM.

Please fill in the information about your purchases below. You do not need to provide a receipt for purchases of less than \$50. Purchases of \$50 or more require a receipt as proof of purchase if you did not provide a Class Member Identification Number above. The actual amount paid to individual claimants will depend on the number of valid claims submitted.

Honest Product	Number Purchased	Amount Paid for Product(s)	Approximate Date(s) of Purchase	Receipt Provided?
Multi-surface Cleaner (regular)				<input type="checkbox"/> YES <input type="checkbox"/> NO
Multi-surface Cleaner (concentrate)				<input type="checkbox"/> YES <input type="checkbox"/> NO
Dish Soap, any scent (regular)				<input type="checkbox"/> YES <input type="checkbox"/> NO
Dish Soap, any scent (concentrate)				<input type="checkbox"/> YES <input type="checkbox"/> NO
Laundry Detergent				<input type="checkbox"/> YES <input type="checkbox"/> NO

Did you receive a refund of the purchase price of any of the items entered above? YES NO

If yes, how much? \$ _____.

SECTION V. SETTLEMENT AWARD - ELECTION OF AWARD FORMAT (CHOOSE ONE).

Payment may be by check or in the form of a Settlement Credit usable at Honest.com. Settlement credits are valued under this Settlement at 1.5 times the dollar recovery amount. Thus, if you would receive a \$10 check under the settlement, you would receive \$15 in Settlement Credit if you elect that option. The full terms and conditions of the Settlement Credit can be found in the Settlement Agreement available at www.SLSSettlement.com.

- Check.
- Settlement Credit.

[If Credit is elected] Please provide the email address associated with Honest.com Account that you wish to have the Credit applied to: _____.

Only one claim per household will be accepted. The actual amount paid to individual claimants will depend on the number of valid claims submitted.

SECTION VI - REQUIRED AFFIRMATION.

With my signature below I declare, under penalty of perjury, that the information in this Claim Form is true and correct to the best of my knowledge, and that I purchased the Honest Products claimed between January 17, 2012 and August 2, 2017. I understand that my Claim Form may be subject to audit, verification, and Court review.

Additionally, with my signature below, I acknowledge that I have received notice of the class action Settlement in this case and that I agree to release all the claims, known and unknown, stated in Section 2.5 of the Settlement Agreement. I submit to the jurisdiction of the United States District Court, Central District of California with regard to my claim and for purposes of enforcing the release of claims stated in the Settlement Agreement. I am aware that I can obtain a copy of the full notice and Settlement Agreement at www.SLSSettlement.com or by writing the Claims Administrator at the email address: info@SLSSettlement.com or the postal address: Honest SLS MDL Settlement, c/o Dahl Administration, PO Box 3614, Minneapolis, MN 55403-0614

SIGNATURE: _____ DATE: _____

Note: The Claims Administrator has the right to request verification or more information regarding the claimed purchase of Honest products for purposes of preventing fraud. If the Class Member does not timely comply or is unable to produce documents or information to substantiate the Claim Form and the Claim is otherwise not approved, the Claims Administrator may disqualify the Claim.

All Claim Forms must be postmarked if mailed or electronically submitted online by November 15, 2017, to:

HONEST SLS MDL SETTLEMENT
C/O DAHL ADMINISTRATION
PO BOX 3614
MINNEAPOLIS, MN 55403-0614
OR
www.SLSSettlement.com