

Ramah Navajo Chapter, et al. v. Jewell

Settlement Administrator

P.O. Box 8060

San Rafael, CA 94912-8060

877-290-6637

{KCC E-MAIL ADDRESS?}

<<First Name>> <<MI>> <<Last Name>> <<Suffix>>

<<Job Title>>

<<Class Member>>

<<Address 1>>

<<Address 2>>

<<City>>, <<State>> <<ZipCose>>

Re: Settlement Agreement

Ramah Navajo Chapter, et al. v. Jewell, U.S. District Court for the District of New Mexico, No. 90 CV 957 JAP/KBM

Dear <<Job Title>> <<Last Name>>:

<<Class Member>> has been identified as a member of the plaintiff Class in *Ramah Navajo Chapter, et al. v. Jewell*, No. 90-CV-957 JAP/KBM, United States District Court, District of New Mexico.

Under the provisions of the Final Settlement Agreement approved by the Court and the Court's subsequent Order of _____, the Court has ruled that the << Contractor - current correct name>>'s share of the approved net settlement amount is \$_____.

To receive the <<Class Member>>'s share, please complete, sign, and return the enclosed Claim Form in the enclosed courtesy envelope. If you wish to have your funds electronically transferred to your bank account, please complete and return the separate Wiring Instructions form. Otherwise, your payment will be made by check.

The United States Department of the Treasury, Bureau of the Fiscal Service has identified <<ClassMember>> as having a federal debt and/or tax lien. The Treasury Department should have provided <<ClassMember>> with notice of this federal debt and/or tax lien. Pursuant to the Treasury Department's Debt Collection Authorities, 26 U.S.C. § 6331(h) and 31 U.S.C. § 3716, <<ClassMember>>'s payment will reflect the Treasury Department's offset of the <<ClassMember>>'s federal debt and/or tax lien. <<ClassMember>> should contact the Treasury Department directly pursuant to the instructions provided in the notice it received from

EXHIBIT C

Treasury with any questions about or challenges to the Treasury Department's federal debt and/or tax lien.

If the authorized agent signing the claim form is different from the person to whom this letter is addressed, please provide documentation showing that the person signing the claim form is authorized to do so.

If you have any questions, please contact the Settlement Administrator at (Toll Free) 877-290-6637.

Sincerely,

Settlement Administrator