

**REQUEST TO BE EXCLUDED FROM THE CLASS**

If you **WANT** to be included in the Class, **DO NOT** return this form.

If you **DO NOT WANT** to be included in the Class, complete and return this form.

By signing and returning this form, I confirm that I have received, read, and understood the Notice of Certified Class Action Lawsuit and that I hereby exclude myself from the class action entitled *Clark, et al. v. Quest Diagnostics Clinical Laboratories, Inc, et al., Case No. BC 594022*, Superior Court of California County of Los Angeles.

Full Name: \_\_\_\_\_  
                    First                                    Middle                                    Last

Address: \_\_\_\_\_  
                    Number                    Street

\_\_\_\_\_  
City  State                                    Zip Code

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Send this form postmarked by August 22, 2022 to:**

Clark, et al. v. Quest Diagnostics Clinical Laboratories, Inc, et al.  
c/o CPT Group, Inc.  
50 Corporate Park, Irvine, CA 92606