BREWERS RETAIL INC. Salaried Pension Plan Class Proceeding

OPT-OUT FORM

The parties to the **Brewers Retail Inc.** ("BRI") Salaried Pension Plan Class **Proceeding** (the "Class Proceeding") have reached a Settlement, which will be submitted to the Ontario Superior Court of Justice (the "Court") for approval.

You may file this Form to EXCLUDE yourself from (opt-out of) the Class Proceeding. If you opt out of the Class Proceeding, you will retain the potential right to sue BRI personally, at your own expense, about the issues in the Class Proceeding, subject to any applicable limitation period, but you will then not be able to receive certain benefits from the proposed Settlement, if it is approved by the Court.

Please read the entire Form and follow the instructions carefully.

To opt out of this Class Proceeding, you must complete this Form and sign and send it to Class Counsel by prepaid mail or courier, or by email, so that it is **received** at the address below by **no later than** May 3, 2024:

Kaplan Law, attn. Ari Kaplan

393 University Avenue, Suite 2000 Toronto ON M5G 1E6 Tel: (416) 565-4656

Email: info@kaplanlaw.ca

I. Personal Information: Please provide the following information about yourself, or, if you are filing this Opt-Out Form as the legal agent of a Class Member, please provide the following information about the Class Member.

First Name	Middle Initial	Last Name				
Street Address			Apt. No.			
City	Province/Territory		Postal Code			
Daytime Phone Number	Email address		Gender (circle one)			
() -			M F			
Date of Employment by BRI:						
Location of Employment by BR	I:					
Last Joh Title with RRI:						

II.	Representative Information (if applicable):	If you are filing this Opt-Out Form
as the l	egal agent of a Class Member, please provide	this information about yourself.

First Name	Middle Initial	Last Name			
Street Address			Apt. No.		
City	Province/Territory		Postal Code		
Daytime Phone Number	Email Address		Relationship to Class Member		
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III. Individual Lawsuit: Plindividual lawsuit against BRI re	•	•			
	Yes N	0			
If you have already started such a lawsuit in Canada, please provide this information:					
Name of the lawsuit:					
Court File Number:			City:		
IV. Acceptance and Acknowle	edgement				
I understand (or, if I am the leg- named Class Member understar able to receive certain benefits approved by the Court. (If I an instructed me to execute and sub-	nds) that by filing this arising from the Cla n the legal agent, I c	s Form, I (shoss Proceeding on firm that the	e/he) will then not be g, if the Settlement is he Class Member has		
Date signed Signature of Class Member, or Legal Agent					

If you have questions about using or completing this Opt-Out Form, please contact your own lawyer at your own expense, or contact Class Counsel as above.