

STATE OF SOUTH CAROLINA

RESOLUTION NUMBER [NO.]

COUNTY OF [COUNTY]

2019-11-552-R

**A RESOLUTION TO OPT OUT OF THE NATIONWIDE CLASS
CERTIFIED FOR NEGOTIATION PURPOSES IN
IN RE NATIONAL PRESCRIPTION OPIATE LITIGATION, MDL 2804**

WHEREAS, [COUNTY] County (the County) is a plaintiff in the consolidated South Carolina state court action *In re: South Carolina Opioid Litigation* and is represented in that action by [ATTORNEY] (South Carolina Opioid Counsel);

WHEREAS, a class has been certified under Rule 23 of the Federal Rules of Civil Procedure (the Class) in the multidistrict litigation *In Re: National Prescription Opiate Litigation* that is intended to encourage and facilitate negotiations between opioid defendants and Class members;

WHEREAS, the Class encompasses all cities and counties in the United States, including the County;

WHEREAS, membership in the Class allows the County to share in any approved nationwide settlement reached with the Class (an Approved Settlement) and binds the County to any such settlement;

WHEREAS, opting out of the Class foregoes the County's right to share in an Approved Settlement and prevents the County from being bound by any such settlement;

WHEREAS, the deadline for opting out of the Class is November 22, 2019 (the Opt-Out Deadline), after which there is no guarantee that the County will be permitted to change its position relative to the class;

WHEREAS, the failure to affirmatively opt out of the class by the Opt-Out Deadline will result in the County remaining a member of the Class;

WHEREAS, the County recognizes that it could choose to be a member of the Class but desires to opt out of it;

NOW, THEREFORE, BE IT RESOLVED by the [COUNTY] County Council (the Council) that the County will opt out of membership in the Class. **BE IT FURTHER RESOLVED THAT** the Council will sign the appropriate exclusion request form, thereby affirmatively opting out of

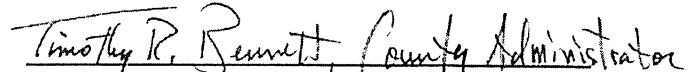
the Class, and the Council's attorney shall communicate the Council's decision and deliver the exclusion request form to South Carolina Opioid Counsel as soon as is practicable after the adoption of this resolution, and by November 19, 2019 at the latest, to ensure the County's decision to opt out of the Class is effectuated.

Adopted this ^{12th} day of ^{November} [MONTH], 2019.

[COUNTY] COUNTY COUNCIL



[Name], [Position]


Attest: [Name], [Position] County Administrator

**IF YOU WANT TO EXCLUDE YOUR COUNTY OR CITY
YOU MUST ACT BY NOVEMBER 22, 2019**

EXCLUSION REQUEST FORM

Read this page carefully then turn to Page 2 if you want to sign and send

Complete this form **ONLY** if your County or City does **NOT** want to remain a Class Member and does not want to share in any potential negotiated Class settlement. If your County or City does not complete and submit this form, it will be deemed to be a Class Member so long as it is a County or City in the United States as those terms are described in the Class Notice and is on the list of Class Members found at www.OpioidsNegotiationClass.info.

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO

_____ X
:
In re NATIONAL PRESCRIPTION : 1:17-md-2804 (DAP)
OPIATE LITIGATION :
:
_____ X

Class Notice Administrator
NPO Litigation
P.O. Box 6727
Portland, OR 97228-6727

Dear Class Notice Administrator:

My County or City does **NOT** want to be a member of the Negotiation Class certified in the *In re National Prescription Opiate Litigation*. I understand that by completing the information requested on page 2, signing, and submitting a copy of this form by email (to the email address on page 2) sent on or before **November 22, 2019** OR by first-class U.S. mail (to the mailing address on page 2) post-marked on or before **November 22, 2019**, I am opting my County or City out of the Negotiation Class and it will **NOT** be a Class Member. I understand that by timely submitting this form, my County or City is foregoing the right to share in any Class settlement that may be obtained. I understand that my County or City is **NOT** guaranteed an opportunity to opt back in if there is a Class settlement, so this is our final decision. I also understand that by opting out, my County or City will not be bound by any judgment entered as part of any Class settlement.

I understand that if my jurisdiction is a Class Member and wants to remain a Class Member, it does not need to do anything now. I understand that I should **NOT** return this Exclusion Request Form if my jurisdiction wants to remain a Class Member.

I understand that, if I have any questions, I may contact Class Counsel at 1-877-221-7468, or visit www.OpioidsNegotiationClass.info **BEFORE** I mail this form to you and **BEFORE** **November 22, 2019**.

**TURN TO PAGE 2 IF YOU WANT TO SIGN EXCLUSION/OPT-OUT FORM
AND FOR EMAIL AND MAILING ADDRESSES**

IF YOU WANT TO EXCLUDE YOUR COUNTY OR CITY
YOU MUST ACT BY NOVEMBER 22, 2019

EXCLUSION REQUEST FORM
Read Information on Page 1 carefully before signing

Having read and understood the information on page 1, the County or City (circle one) entitled Barnwell County in the State of South Carolina hereby excludes itself from the Negotiation Class certified by the United States District Court in the Northern District of Ohio in *In re National Prescription Opiate Litigation*, MDL 2804. Under penalty of perjury and in accordance with 28 U.S.C. § 1746, I declare that I am an official or employee authorized to take legal action on behalf of my County or City.

Signature: 

Print name: BEN KINLAW

Title: Chairman, Barnwell County Council

City or County Represented: Barnwell County, SC (Circle one): City / County

Address: 57 Wall Street

City: Barnwell State: SC Zip Code: 29812

Phone: (803) 541-1000 Email: bccd5kinlaw@gmail.com

Date: 11/19/19

BY NOVEMBER 22, 2019

EMAIL TO:

info@OpioidsNegotiationClass.info

OR SEND BY
FIRST CLASS MAIL TO:

NPO Litigation
P.O. Box 6727
Portland, OR 97228-6727