

**REQUEST FOR EXCLUSION FROM THE CLASS ACTION/
"OPT OUT" FORM**

Dianne Kawashima. v. State of Hawai'i, Department of Education, et al.
Civil No. 06-1-0244-02 (ECN)

LEGAL NAME: _____

(Please do not use aliases or nicknames; include the name under which you received general assistance)

ADDRESS: _____

(Please include all addresses at which you receive mail)

E-Mail Address: _____

(if applicable)

TELEPHONE
NUMBER(S): _____

(Please include all numbers at which you can be contacted)

I wish to be excluded from the "Class" certified in the above named Class Action. I understand that it is my duty to find my own attorney to represent me and protect my rights as related to the claims in this Class Action. I will seek other legal assistance and advice.

Signature

If you do not wish to be part of the Class and will retain your own attorneys, please fill out this form and mail it to:

ALSTON HUNT FLOYD & ING
(Re: *Kawashima v. DOE*, 8259-1)
1001 Bishop Street, 18th Floor
Honolulu, Hawai'i 96813