Your claim must be submitted online or postmarked by: February 5, 2026	*Filardi v. Mid-America Pet Food, LLC, Case No. 23-cv-11170-NSR* UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK **MID AMERICA PET FOOD SETTLEMENT CLAIM FORM**	**MAPF CLAIM**

This Claim Form relates to the settlement of lawsuits alleging that certain Mid America Pet Food Products contained or may have contained excessive levels of Salmonella.

By signing and submitting this form, you are attesting to the accuracy and truthfulness of the facts and documents provided. All claims submitted are subject to audit and review by the Settlement Administrator, veterinary experts, the Court, and the attorneys for the parties. You may be contacted to clarify or verify certain information.

All information submitted will be kept confidential except as noted elsewhere in this document. This Claim Form and any accompanying information will be used solely by the Settlement Administrator to process claims under the Settlement and may be reviewed by Settlement Class Counsel, a veterinarian or other expert (if necessary), Mid America Pet Food ("Defendant"), the Court, and/or a mediator.

Please note that simply filling out this form does not guarantee reimbursement and/or payment.

Each Household is only eligible to submit one Pet Injury Claim per pet and/or one Consumer Food Purchase Claim. A "Household" means all persons or entities who share a physical address. For all corporations, partnerships, business organizations or associations, or other type of legal entity, there can be only one physical address used even if there are multiple locations. Persons or entities who bought Mid America Pet Food Products listed in Exhibit 1 for resale are not eligible to make a claim. Additionally, persons who already received compensation from and signed a release with Mid America Pet Food are not eligible to make a claim.

IMPORTANT INFORMATION REGARDING REIMBURSEMENT

If you have been reimbursed previously by Mid America Pet Food or a retailer for expenses associated with the Mid America Pet Food Products covered by this Settlement, but did not sign a release of claims, then the already reimbursed amount will be deducted from the total amount provided to you as part of this Settlement. If the total amount of your previous reimbursement or payment from Defendant or a retailer is greater than the total amount that you are entitled to as part of this Settlement, then you will not receive any further reimbursement or payment as part of this Settlement, but you will be bound by the Settlement Agreement, including the releases set forth therein.

If you would like to receive your benefit electronically, you must complete the Claim Form electronically on the website: **www.MidAmericaPetfoodSettlement.com.**

I. HOW YOU CAN QUALIFY FOR AND RECEIVE A PAYMENT

You are eligible to file a claim if you purchased one or more of the Mid America Pet Food Products listed on Exhibit _D_ to the Settlement Agreement that were recalled on September 3, October 30, or November 9, 2023.

In order to be eligible for any compensation from the Settlement, you must:

- complete Part II of this form, Part III for Consumer Food Purchase Claims, and/or Part IV for Pet Injury Claims;
- sign the verification statement in Section VI; and
- return the Claim Form either by mailing it by U.S. Mail to the address below, along with your supporting documentation, if any, postmarked on or before **February 5, 2026** or by submitting it online (www.MidAmericaPetfoodSettlement.com) on or before **February 5, 2026**.

This Claim Form will be used solely by the Settlement Administrator to process claims for this Settlement. Go to **www.MidAmericaPetfoodSettlement.com** to submit your Claim Form online. If you cannot submit your claim online, you should complete, sign, and return this Claim Form to:

MID AMERICA PET FOOD SETTLEMENT

c/o Settlement Administrator, 1650 Arch Street, Suite 2210 Philadelphia, PA 19103

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Please read the Full Notice (available at www.MidAmericaPetfoodSettlement.com) carefully before filling out this Form. All claims must be submitted with a fully executed Verification to be considered valid.

II. YOUR INFORMATION

Provide your name and contact information below. You must notify the Settlement Administrator if your contact information changes after you submit this Claim Form.

First Name **Last Name**

Business Name (if applicable)

Street Address

City **State** **Zip Code**

Email Address **Daytime Phone Number** **Evening Phone Number**

Contact information for treating veterinarian, if any:

Veterinarian Name **Veterinarian Facility Name**

Veterinarian Facility Address

Phone Number

III. CONSUMER PET FOOD PURCHASE CLAIM INFORMATION

You may submit either (1) a claim for reimbursement for purchases of Mid America Pet Food Products if you have proof of purchase or (2) a claim for reimbursement for purchases of Mid America Pet Food Products if you do not have proof of purchase. You may NOT submit both.

If you have proof of your Mid America Pet Food Product purchases, such as a receipt showing these purchases, please continue to Section A ("Proof of Purchase").

If you do NOT have proof of your purchase, please continue to Section B ("No Proof of Purchase").

A. Proof of Purchase

Please provide the information requested in the chart below regarding your Mid America Pet Food Product purchases and attach documentation showing your purchases between October 31, 2022 and February

29, 2024 of Mid America Pet Food Products that were recalled on September 3, October 30, or November 9, 2023. Acceptable proof of purchase includes receipts, copies of receipts, retailer loyalty card records, or other legitimate, documentary proof showing payment to an authorized retailer. Fully Documented claims under this Section will be paid at a rate of 100%, subject to pro rata decrease as set forth in more detail in the Plan of Allocation located in the Settlement Agreement.

Date of Purchase (mm/dd/yyyy)	Place of Purchase (Store/City/State or website)	Product Name	Number of Bags Bought	Price Paid

B. No Proof of Purchase

If you do not have proof of your purchase of Mid America Pet Food Products, you will receive $20 reimbursement per bag of food purchased for up to two bags, subject to a pro rata decrease as set forth in more detail in the Plan of Allocation located in the Settlement Agreement. Please provide the information requested below regarding your Mid America Pet Food Product purchases.

Product Name Purchased	
Name of Retailer	
Retailer Location (city, state)	
Dates of Purchase	
Price Paid Per Bag	
Number of Bags Purchased	

IV. REIMBURSEMENTS AND PAYMENTS FOR LOSSES AND EXPENSES RELATING TO THE TESTING, TREATMENT, SICKNESS, OR DEATH OF YOUR PET

You may be eligible to receive money from the Net Settlement Fund if your pet became sick or died and showed signs of illness from Salmonella after consuming any of the Mid America Pet Foods Products covered by this Settlement (pet food recalled on September 3, October 30, or November 9, 2023).

If your pet died and showed signs of Salmonella contamination after consuming any of the Mid America Pet Food Products, you are eligible to recover related costs, such as costs for veterinarian care or treatment, costs of burial or cremation, the cost paid to purchase the pet, or the cost of a new pet. If your pet became ill and showed signs of Salmonella poisoning after consuming any of the products covered by this Settlement, you are eligible to recover related costs, such as costs for veterinarian care, treatment, medication, or screening provided that you submit supporting documentation.

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MID AMERICA PET FOOD SETTLEMENT CLAIM FORM

If your pet died or became sick and showed signs of Salmonella illness after consuming any of the Mid America Pet Food Products covered by this Settlement, but you do not have any supporting documentation, you may submit a claim along with a declaration under penalty of perjury for $50 for pets that became ill but did not die and $100 for pets that died. Please see Part A below. Pet Injury Claims supported solely by declaration(s) and which are not credible as determined by the Settlement Administrator will be rejected. The payment of these claims may also be subject to a pro rata decrease as set forth in the Plan of Allocation contained in the Settlement Agreement.

To make a valid Pet Injury Claim supported by documentation, you **MUST** submit documents showing screening, diagnosis, or treatment of your pet with signs consistent with the consumption of Salmonella resulting from the use or consumption of the Mid America Pet Food Products covered by this Settlement. The types of documents acceptable include, but are not limited to, receipts, invoices, contracts, and veterinarian records. Settlement Class Members seeking reimbursement for losses related to sick, injured, or deceased pets used for profit (breeding) must also provide business records (e.g., sales records, profit and loss statements, tax records, or similar documentation) and a copy of their commercial license or other state or federal permit (if required) that was valid at the time the breeding animal(s)/pet(s) was sick, injured, or deceased. Simply submitting a claimed expense without documentation or support is not a guarantee that the expense will be reimbursed.

By submitting a Pet Injury Claim, you are authorizing the Settlement Administrator, in its discretion, to fully investigate the validity of the Pet Injury Claim, including contacting the treating veterinarian who treated the Settlement Class Member's allegedly injured pet and seeking the input of Settlement Class Counsel, and Defendant's Counsel. For any Pet Injury Claim, the Settlement Administrator, Class Counsel, the claim appeal adjudicator, or the Court may request additional proof, including testimony under oath. Each Pet Injury Claim supported by documentation is subject to a cap of $100,000.00. Please see Notice for further details. Any Pet Injury Claim or Food Purchase Claim seeking reimbursement or the payment of an amount greater than $5,000 will be paid only upon the recommendation of the Settlement Administrator and approval of Class Counsel.

A. Pet Injury Claim with no supporting documentation

Product Name Purchased	
Name of Retailer	
Retailer Location (city, state)	
Dates of Purchase	
Price Paid Per Bag	
Describe Pet's Illness	
Describe Losses/Damages	

B. Pet Injury Claim with Documentation

Please list the losses and expenses you incurred in the chart below. Remember to attach proof of these expenses, including invoices, payment records, business records, veterinary notes, veterinary records, test or laboratory reports, or a statement(s) from the veterinarian, hospital, or clinic. If you already received reimbursement for these losses from the Defendants and signed a release of your claims, you are not entitled to additional compensation.

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TYPE OF EXPENSE/LOSS	EXPENSE/LOSS AMOUNT & DATE INCURRED	DESCRIBE PROOF OF EXPENSE/LOSS

Each expense listed above must be related to the screening or treatment of your pet with signs consistent with the use or consumption of Salmonella resulting from the use or consumption of Mid America Pet Food Products covered by this Settlement that were recalled on September 3, October 30, or November 9, 2023.

While it is not necessary to be eligible to receive money for your Pet Injury Claim, please feel free to provide an explanation for any of the above expenses if you wish to do so.

V. PAYMENT SELECTION

Please select **one** of the following payment options.

☐ **PayPal** - Enter your PayPal email address: _____

☐ **Venmo** - Enter the mobile number associated with your Venmo account: __ __ __-__ __ __-__ __ __ __

☐ **Zelle** - Enter the mobile number or email address associated with your Zelle account:

Mobile Number: __ __ __-__ __ __-__ __ __ __ or Email Address: _____

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☐ **Virtual Prepaid Card** - Enter your email address: _____

☐ **Physical Check** - Payment will be mailed to the address provided in Section II above.

VI. VERIFICATION

I declare under penalty of perjury that the above information is true and correct to the best of my recollection. I understand that the above information I provided to support my claim(s) may be reviewed and verified by the Settlement Administrator, the Court, and counsel for the parties. I hereby authorize the Settlement Administrator, in its discretion, to contact me and/or my pet(s)' treating veterinarian, seek the input of Settlement Class Counsel, Defendant's Counsel, and/or Mid America Pet Food, and to fully investigate and make a determination as to the validity of the claim based on the documentation submitted and any other materials determined to be relevant. I also authorize the Settlement Administrator (in conjunction with a veterinarian or other expert, if necessary) to review these documents, investigate, evaluate, and make a determination as to the validity and value of my claim.

Signature: _____ Dated: ___ ___ / ___ ___ / ___ ___ ___ ___

If submitting a business claim:

Signature: _____ on behalf of _____ Dated: ___ ___ / ____ /____ ___ ___ ___
Individual Business Name

VII. DEADLINE TO SUBMIT YOUR CLAIM FORM

Submit the Claim Form and your supporting documentation, if any, using one of the methods described below by the deadline listed below.

Online: (must be submitted on or before **February 5, 2026**)	**www.MidAmericaPetfoodSettlement.com**
By Mail: (must be postmarked on or before **February 5, 2026**)	**MID AMERICA PET FOOD SETTLEMENT** c/o Settlement Administrator 1650 Arch Street Suite 2210 Philadelphia, PA 19103

Please keep a copy of your completed Claim Form and copies of any attached documentation for your records.

Additional copies of the Full Notice and this Claim Form are available at **www.MidAmericaPetfoodSettlement.com**. If you have any questions about the Full Notice or Claim Form, please contact the Settlement Administrator at 1-888-559-4088 or visit **www.MidAmericaPetfoodSettlement.com**. Inquiries should **NOT** be directed to Mid America Pet Food, Mid America Pet Food's Counsel, the Court, or the Clerk of the Court.