

**IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
COUNTY DEPARTMENT, LAW DIVISION**

JAMIE CRESS, individually and as next friend of)	
MICHAEL CRESS, a minor, ROBERT HANLEY,)	
DANIEL HURLEY, BETTY McKINNEY, individually)	
and as next friend of NICHOLAS McKINNEY, a minor,)	
FRANK PALUCH, individually and on behalf of all)	No. 98 L 15072
others similarly situated,)	
)	
Plaintiffs,)	
)	
v.)	Consolidated with No. 99-1254
)	
SARA LEE CORPORATION, a Maryland Corporation)	
a/k/a BIL MAR FOODSERVICE, a division of SARA)	
LEE CORPORATION d/b/a BIL MAR FOODS,)	
)	
Defendant.)	
)	
)	

**NOTICE OF SETTLEMENT AND OF THE ESTABLISHMENT OF AN
OFFICIAL CLAIM FORM AND A DEADLINE FOR MAKING CLAIMS**

TO: ALL PERSONS ASSERTING CLAIMS I-IV (AS DEFINED HEREIN) WHO (1) BETWEEN JULY 1, 1998 AND MARCH 1, 1999 CONSUMED SARA LEE PRODUCTS BEARING ESTABLISHMENT NUMBERS 6911 OR P261 THAT WERE SUBJECT TO SARA LEE'S VOLUNTARY RECALL OF DECEMBER 22, 1998 ("SARA LEE PRODUCTS") AND (2) AS A RESULT BECAME ILL WITH GASTROENTERITIS DUE TO LISTERIA OR LISTERIOSIS AT SOME TIME BETWEEN JULY 1, 1998 AND APRIL 1, 1999 ("CLASS MEMBERS").

You are hereby notified, pursuant to the Order of the Circuit Court of Cook County, Illinois, County Department, Law Division, Judge Jennifer Duncan-Brice, that A DEADLINE OF SEPTEMBER 1, 2000 HAS BEEN ESTABLISHED FOR MAKING CLAIMS AGAINST DEFENDANTS AND THAT PLAINTIFF CLASS MEMBERS ASSERTING CLAIMS I-IV WHO SEEK COMPENSATORY DAMAGES FROM THE DEFENDANTS, MUST COMPLETE AND RETURN AN OFFICIAL CLAIM FORM POSTMARKED ON OR BEFORE SEPTEMBER 1, 2000.

Description of Litigation

The claims classes described below were established to resolve putative class actions involving personal injury claims currently pending in the Circuit Court of Cook County, Illinois, entitled Cress et al. v. Sara Lee Corp., Court File No. 98 L 15072 and pending in Wayne County, Michigan entitled Casteel v. Sara Lee, Court File No. 99-903157 ("litigation"). The complaints allege that certain foods manufactured at Sara Lee's Bil Mar plant in Zeeland, Michigan contained the bacterium Listeria, and that putative class members became ill as a result of consuming those foods. On May 11, 2000, Sara Lee and counsel for the Class Members entered into a Settlement Agreement which, subject to final approval by the Court, will resolve claims made in the litigation. Plaintiff Claims I-IV seek compensatory damages for listeria related injuries and expenses incurred as a result of allegedly contaminated meat products produced by Defendant in 1998.

The Sara Lee Products involved in the voluntary recall were distributed under the following brand names: Advantage, Allen's Pride, Alliant, Ball Park, Ben E. Keith, Bil Mar, Bil Mar Signature, Blimpie, Bryan, Deli Perfect, Dickey's, Food Service of America, Gordon Food Service, Grillmaster, Heritage, Hygrade, Kahn's Mr. Turkey, Patuxent Farms, PYA Monarch, Sara Lee Carver Collection (SLCC), Sara Lee Home Roast, Sara Lee Premium Meats, Springbrook Farms, West Virginia Brand.

For purposes of settlement only, the Court has preliminarily approved a class consisting of all individuals who (1) between July 1, 1998 and March 1, 1999 consumed Sara Lee Products bearing establishment numbers 6911 or P261, and (2) as a result became ill with Gastroenteritis due to Listeria or Listeriosis at some time between July 1, 1998 and April 1, 1999. However, if a potential Class Member has already entered into a settlement of claims with Sara Lee or its insurer, that person is not eligible to participate in the Settlement Class unless the individual demonstrates that the prior settlement was reached in violation of Illinois law.

IN ORDER TO MAKE A CLAIM YOU *MUST COMPLETE AND RETURN THE OFFICIAL CLAIM FORM POSTMARKED ON OR BEFORE SEPTEMBER 1, 2000.*

The compensatory damage claims that were provisionally certified by the Court on May 12, 2000 are:

Claim I: All CLASS MEMBERS with a Documented Case of Gastroenteritis due to Listeria. A claimant will be considered a Documented Case of Gastroenteritis due to Listeria if he or she: (1) was determined to have Gastroenteritis due to Listeria by a physician as reflected in a contemporaneous written record or report of that physician; or (2) tested positive for listeria in a stool sample, as reflected in contemporaneous supporting documentation.

Class Members with proper claims under Claim I will be entitled to \$4,000 if they were ill for between one (1) and twenty-four (24) hours; and \$8,000 if they were ill for more than twenty-four (24) hours. They will also be entitled to reimbursement for certain expenses.

Claim II: All CLASS MEMBERS with a Documented Case of Listeriosis. A claimant will be considered a Documented Case of Listeriosis if he or she tested positive for listeriosis in a blood or cerebrospinal fluid ("CSF") culture, as reflected in contemporaneous supporting documentation.

Class Members with proper claims under Claim II will be entitled to \$20,000 if they were ill for between one (1) and forty-eight (48) hours; \$35,000 if they were ill for between forty-eight (48) and ninety-six (96) hours; and \$50,000 if they were ill for more than ninety-six (96) hours. They will also be entitled to reimbursement for certain expenses.

Claim III: All CLASS MEMBERS who claim to have become ill with physical symptoms consistent with Gastroenteritis due to Listeria or Listeriosis.

Class Members with proper claims under Claim III may be entitled to \$250 if they were ill with at least three (3) Physical Symptoms of Gastroenteritis due to Listeria or Listeriosis within forty-eight (48) hours of consuming Sara Lee Products. If such a Class Member submits contemporaneous proof of at least one Health Care Contact relating to the symptoms, he or she may be entitled to \$500. Individuals in this group who were ill for more than forty-eight (48) hours and submit contemporaneous proof of at least one Health Care Contact relating to the symptoms may be entitled to \$1,000. They may also be entitled to reimbursement for certain expenses.

PLEASE NOTE: The total amount of the claims paid under Claim III, including reimbursement for expenses, will not exceed \$600,000. If the payable claims submitted under Claim III exceed \$600,000, each individual's claim will be reduced in a pro rata fashion so that the total amount paid out for claims under Claim III does not exceed \$600,000.

Claim IV: All CLASS MEMBERS who claim to have become ill with physical symptoms consistent with Gastroenteritis due to Listeria or Listeriosis and who submit contemporaneous proof that he or she was prescribed antibiotics for those physical symptoms.

Class Members with proper claims under Claim IV will be entitled to \$1,500.

Food Research Institute - University of Wisconsin-Madison

If the payable claims submitted under Claim III (including Documented Special Damages) do not exceed \$600,000.00, Sara Lee shall donate the difference between the amount of the payable claims and \$600,000.00 to the Food Research Institute, University of Wisconsin-Madison to be used for research on the prevention of listeria in food products. If the total amount of claims submitted under Claim III (prior to pro rata adjustment) exceeds \$600,000.00, Sara Lee shall donate \$25,000.00 to the Food Research Institute.

Class Counsel are:

Hal J. Kleinman, Esq.
Three First National Plaza
54th Floor
Chicago, Illinois 60602
www.kbmoll.com

(Member, Class Counsel Management Committee)

Lynn Lincoln Sarko, Esq.
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(Member, Class Counsel Management Committee)

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Southfield, Michigan 48075-1221

THIS NOTICE SHOULD NOT BE UNDERSTOOD AS AN EXPRESSION OF ANY OPINION OF THE COURT AS TO THE MERITS OF ANY INDIVIDUAL CLAIMS ASSERTED BY ANY CLAIMANT OR ANY DEFENSES ASSERTED BY SARA LEE. THIS NOTICE IS FOR THE SOLE PURPOSE OF INFORMING YOU THAT A CLAIMS DEADLINE HAS BEEN ESTABLISHED AND THAT YOU MUST COMPLETE AND RETURN AN OFFICIAL CLAIM FORM BY THAT DATE.

Terms of the Court Order

The Court has recently issued an Order establishing an Official Claim Form and a deadline for making claims. THIS ORDER AFFECTS YOUR RIGHTS. PLEASE READ THIS NOTICE CAREFULLY. THE COURT ORDER DESCRIBED IN THIS NOTICE REQUIRES YOU TO COMPLETE AND RETURN A CLAIM FORM POSTMARKED ON OR BEFORE SEPTEMBER 1, 2000 TO PURSUE YOUR CLAIM AGAINST DEFENDANTS.

IF A CLASS MEMBER FAILS TO COMPLETE AND RETURN AN OFFICIAL CLAIM FORM POSTMARKED BY SEPTEMBER 1, 2000, OR FAILS TO OPT OUT BY SUBMITTING A WRITTEN LETTER POSTMARKED BY JULY 21, 2000, THAT CLASS MEMBER'S CLAIM AGAINST THE DEFENDANT WILL BE REJECTED AND FOREVER BARRED IN THIS CLASS ACTION AND IN ANY OTHER PROCEEDING.

**What You Must Do To Make A Claim, Exclude Yourself From Settlement Of The Litigation,
Or Object To The Settlement**

TO MAKE A CLAIM FOR COMPENSATORY DAMAGES, YOU MUST COMPLETE AND RETURN THE OFFICIAL CLAIM FORM TO THE COURT-APPOINTED CLAIMS ADMINISTRATOR:

CLAIMS ADMINISTRATOR
P. O. BOX 9364
GARDEN CITY, NY 11530
1-800-804-7537
www.meatsettlement.com

THE CLAIM FORM MUST BE POSTMARKED ON OR BEFORE SEPTEMBER 1, 2000. A PRE-ADDRESSED ENVELOPE IS ENCLOSED.

IF YOU DO NOT WISH TO BE A MEMBER OF THE CLASS AND YOU DO NOT WISH TO FILE A CLAIM HEREIN, YOU MAY OPT-OUT OF THE CLASS SETTLEMENT BY ADVISING HAL J. KLEINMAN, ONE OF THE CLASS COUNSEL, IN WRITING POSTMARKED ON OR BEFORE JULY 21, 2000.

ON SEPTEMBER 15, 2000, AT 2:00 P.M., THE COURT WILL CONDUCT A HEARING TO DETERMINE WHETHER THE PROPOSED SETTLEMENT SHOULD BE FINALLY APPROVED. YOU MAY APPEAR IN PERSON OR BY COUNSEL AT THAT TIME AND OBJECT TO THE SETTLEMENT. IF YOU WANT TO OBJECT TO THE SETTLEMENT AT THE HEARING, YOU MUST FIRST MAKE AN OBJECTION IN WRITING, BY SENDING YOUR OBJECTION POSTMARKED ON OR BEFORE JULY 21, 2000 TO HAL J. KLEINMAN, ONE OF THE CLASS COUNSEL, THREE FIRST NATIONAL PLAZA, 54TH FLOOR, CHICAGO, ILLINOIS 60602, AND TO COUNSEL FOR SARA LEE, JEFFREY D. COLMAN, ONE IBM PLAZA, SUITE 4500, CHICAGO, ILLINOIS 60611.

Additional Information

Any questions you have about the matters contained in this Notice should *NOT* be directed to the Court but *MUST* be directed to the Claims Administrator. If you want to communicate with one of the Class Counsel, you may contact (1) Hal J. Kleinman, Three First National Plaza, 54th Floor, Chicago, Illinois 60602 (telephone: 312-558-6444; Toll Free: 888-882-3453), www.kbmoll.com; (2) Lynn Lincoln Sarko, 1201 Third Avenue, Suite 3200, Seattle, WA 98101-3052, Toll Free: 800-508-4865; or (3) Charles S. Zimmerman, 901 North Third Street, Suite 100, Minneapolis, MN 55401, (telephone: 612-341-0400; Toll Free: 800-487-6985), www.zimmreed.com. You also may obtain a copy of the Court's Order, and the Settlement Agreement between Sara Lee and Counsel for Class Members by accessing www.meatsettlement.com. These documents describe fully the terms of the settlement, and the benefits to which you may be entitled as a CLASS MEMBER.

Reminder As To Time Limit

IF YOU WISH TO SUBMIT A CLAIM FOR COMPENSATORY DAMAGES YOU *MUST* COMPLETE AND RETURN THE OFFICIAL CLAIM FORM POSTMARKED BY SEPTEMBER 1, 2000 OR YOUR CLAIM WILL BE FOREVER BARRED. IF YOU DO NOT WISH TO BE A CLASS MEMBER, YOU MAY OPT-OUT OF THE CLASS SETTLEMENT BY ADVISING HAL J. KLEINMAN, ONE OF THE CLASS COUNSEL, IN WRITING POSTMARKED ON OR BEFORE JULY 21, 2000.

PLEASE DO NOT TELEPHONE OR WRITE THE COURT OR THE JUDGE.