EXHIBIT T
Dear Claimant,

We are further reviewing records for high-value claims including all available data and affidavit responses. To date, we have received one or more data sets on [Claimant’s] record, and have identified certain concerns or questions that require additional support or explanation.1

[Claimant] claimed the following amounts:

- **Schedule B – Total Purchase Amount:**
  - 1a Shipments:
  - 1b Shipments:
  - 1c Shipments:
  - 2a Shipments:
  - 2b Shipments:
  - 3a Purchase Amount:
  - 3b Purchase Amount:

In response to the Claims Administrator’s [date] letter, [claimant] indicated in affidavit statements that raw/unsorted data was available for independent audit. The Claims Administrator requested [claimant] provide source data in a letter dated [date], and again on [date]. We received your response on [date], including supporting data for your claim. If any additional supporting data is available, please provide, or confirm that you have provided all available claims data.

Based on review of the data provided in response to our request, we have identified the following issue(s) which require: (1) a sworn statement explaining how claimed amounts were derived; and may require: (2) additional supporting data, and/or (3) revised claim amounts, if applicable.

- **FINDINGS**

Please provide a detailed explanation of how [claimant]’s data supports its claim amounts. If [claimant]’s claims were based upon extrapolation, please provide a sworn statement explaining in detail how the data provided was used when extrapolating [claimant]’s responses to each claim question, any additional underlying data, and any other relevant information explaining how claim amounts were derived. The sworn statement must also attest to the fact that the information submitted in [claimant]’s claim is true and accurate to the best of your knowledge.

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1 The Claim Form instructed all Claimants to “save all relevant documents supporting your claim as you may be required to provide them later,” and in certifying that information provided in the Claim Form was accurate and complete, all Claimants agreed “to provide additional information to Settlement Class Counsel or the Claims Administrator to support my claim, if necessary.”
PLEASE NOTE THAT FAILURE TO SUFFICIENTLY RESPOND TO THIS REQUEST WILL RESULT IN REDUCTION OR DENIAL OF YOUR CLAIM.

If you have any questions, you may contact Kevin Skenandore or John Goodnow directly at kskenandore@epiqsystems.com or jgoodnow@epiqsystems.com.

Sincerely,

Claims Administrator
Freight Forwarders Settlement