

**Must Be  
Postmarked  
No Later Than  
March 10, 2008**

**John Coles v. Sally Beauty Company, Inc.  
c/o The Garden City Group, Inc.  
P.O. Box 9226  
Dublin, OH 43017-4626  
Toll Free: 1-888-404-8013**

CBS



Claim Number: «nme\_idno» Control Number: «control\_no»



«Name\_addr1»  
«Name\_addr2»  
«Name\_addr3»  
«Name\_addr4»  
«City», «State» «zip\_5»

**REQUIRED ADDRESS INFORMATION OR CORRECTIONS**

If the pre-printed address to the left is incorrect or out of date, **OR** if there is no preprinted data to the left, **YOU MUST** provide your current name and address here:

Name:	
Address:	
City/State/Zip:	

**PROOF OF CLAIM FORM**

***John Coles v. Sally Beauty Company, Inc.  
Los Angeles Superior Court Case No. BC359524***

YOU MUST FILL OUT AND RETURN THIS CLAIM FORM TO RECEIVE A PAYMENT UNDER THE SETTLEMENT. IN ORDER FOR YOUR CLAIM TO BE VALID, YOU MUST COMPLETE, SIGN UNDER PENALTY OF PERJURY, AND MAIL THIS DOCUMENT TO THE CLAIMS ADMINISTRATOR AT THE ADDRESS ABOVE BY U.S. MAIL WITH A POSTMARK DATED NO LATER THAN **MARCH 10, 2008**.

**I. CLAIMANT IDENTIFICATION**

Phone Number (work): (\_\_\_\_) \_\_\_\_\_ Phone Number (home): (\_\_\_\_) \_\_\_\_\_

Phone Number (cell): (\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

(Email address is not required, but if you provide it you authorize the Claims Administrator to use it in providing you with information relevant to your claim).

Social Security Number: (Failure to provide it will result in the rejection of your claim).

**YOUR SOCIAL SECURITY NUMBER WILL NOT BE FILED WITH THE COURT**

**II. EMPLOYMENT INFORMATION**

The records available to Beauty Systems Group LLC indicate that you were employed as an outside salesperson responsible for selling product to Salons and/or Salon professionals, ("Distributor Sales Consultant" or "DSCs") for either Beauty Systems Group LLC, formerly Beauty Systems Group, Inc. (collectively "BSG"), or companies acquired or whose assets were acquired by BSG, including without limitation West Coast Beauty Supply Company or a group known as the Innovations Companies (Innovations Successful Salon Services, Inc. aka Innovations—Successful Salon Services, Artistic Salon Services, Inc., SRG Enterprises, Inc. Pacific Salon Systems, Inc. and Matrix of Greater Los Angeles) (BSG and all aforementioned entities are collectively referred to as "Beauty Systems") and that you worked «**WORKWEEKS**» weeks as a DSC in California between October 2, 2002 and April 6, 2007.



By submitting this claim form, you are giving up your right to challenge the dates you worked as a Class member during the Settlement Period, unless you fill out the following section:

If you do **not** agree with the work weeks listed above, fill out the following:

- A. I do not agree with the dates stated.
- B. I believe that the dates I worked as a DSC during the Settlement Period (October 2, 2002 through April 6, 2007) are: \_\_\_\_\_
- C. Return this form to the Claims Administrator, with copies of all papers or documents which support your position.

Beauty Systems will be given an opportunity to respond to your position. The Claims Administrator will rule on the dispute and issue a final, non-appealable decision.

**III. SUBMISSION TO JURISDICTION OF COURT, AGREEMENT WITH SETTLEMENT**

By signing below, you acknowledge that you: (a) have read the enclosed "Notice of Pendency of Class Action, Proposed Settlement and Hearing"; (b) understand the definitions of Releasees and Released Claims; (c) agree to participate in this Settlement; and (d) in consideration for your settlement payment, hereby release Beauty Systems and all of the Releasees from all of the Released Claims, which includes only claims alleged in the Complaint. You also agree that you submit to the jurisdiction of the Los Angeles County Superior Court with respect to your claim as a Class Member and for purposes of enforcing the release of claims stated in the Settlement Agreement. You also understand that the full and precise terms of the Proposed Settlement are contained in the Stipulation and Agreement of Settlement filed with the Court and acknowledge that you are bound by the terms of any court judgment that may be entered in this Class Action.

**NO RETALIATION:**

Beauty Systems will not retaliate against any person who submits a proof of claim in connection with this settlement.

**IV. DECLARATION UNDER PENALTY OF PERJURY**

I declare under penalty of perjury under the laws of the State of California that I worked for Beauty Systems as a DSC in California, at some time between October 2, 2002 and April 6, 2007, and that I have not assigned any of the Released Claims to another person or entity. I also declare that I am the person whose name and social security number appears above.

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Your Signature	Date	Your Name (Print)
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