

AFFIDAVIT

STATE OF _____ §

COUNTY OF _____ §
§

Before me, the undersigned authority, personally appeared _____
_____ (“Affiant”) who, being first duly sworn, upon his/her oath stated:

1. My name is _____.
2. I am over the age of eighteen (18) years, suffer no legal disabilities and am competent to make this Affidavit.
3. I have personal knowledge of the facts stated in this Affidavit and the facts stated herein are true and correct.
4. I am employed by _____
(hereinafter the "Laboratory"). My job title at the Laboratory is _____
_____. I am authorized by the Laboratory to make this Affidavit.
5. I make this Affidavit in support of the claims submitted to DII Industries, LLC Asbestos PI Trust by or on behalf of the individuals identified on Exhibit "A" attached hereto, for compensation for asbestos-related medical conditions based in part on pulmonary function testing conducted at the Laboratory.
6. All pulmonary function testing conducted at the Laboratory for the individuals identified on Exhibit "A" were performed by, or under the supervision and control of pulmonary technologists, respiratory care practitioners, registered nurses, or other health care providers with comparable training.
7. All spirometry, lung volume and diffusing capacity testing that has been performed at the Laboratory with respect to the individuals identified on Exhibit "A" have substantially conformed to the quality criteria established by the American Thoracic Society ("ATS") and has been performed on equipment which substantially meets ATS standards for technical quality and calibration.

8. I know that it has substantially conformed to ATS standards for the following reasons:

9. I declare, under penalty of perjury and under the laws of the United States of America, that the foregoing is accurate and complete.

Signed this _____ day of _____, 20_____.

[Signature]

[Printed Name]

Sworn to and subscribed to before me, this _____ day of _____, 20_____.

{SEAL}

Notary Public in and for
the State of _____

My Commission Expires: _____