



BWICH



HEALTHCARE CLAIM FORM

Please type or print in the required information in the boxes. Do NOT use red ink, pencil, or staples.

First Name

M.I.

Last Name

Mailing Address

Continuation of Mailing Address

City

State

Zip Code

Foreign Province

Foreign Postal Code

Foreign Country Name/Abbreviation

Class Member Date of Termination of Employment from Spirit:

Class Member Date of Birth

Social Security Number

INSTRUCTIONS: TO RECEIVE REIMBURSEMENT OF OUT-OF-POCKET MEDICAL EXPENSES, YOU MUST COMPLETE AND MAIL, OR SUBMIT ONLINE, THIS HEALTHCARE CLAIM FORM NO LATER THAN SEPTEMBER 18, 2015 TO:

WICHITA RETIREMENT CLASS SETTLEMENT

C/O GILARDI & CO. LLC

P.O. BOX 8040

SAN RAFAEL, CA 94912-8040

WWW.WICHITARETIREMENTCLASSSETTLEMENT.INFO

Class Members may request reimbursement of certain medical premiums and out-of-pocket medical expenses. Reimbursement will be capped at \$40,000 per Class Member. Claims will be reimbursed in the order in which the claims are received by the Claims Administrator and will be reimbursed only to the extent that the portion of the Net Common Fund set aside for this purpose is sufficient to fund such reimbursement.

In order to be eligible for reimbursement, the expenses must meet criteria which includes, but not limited to, the following:

- 1) Medical costs must have been incurred after the Class Member reached age 55 and separated from Spirit.
- 2) Costs must have been incurred only for medical care (including medical premiums), and exclude costs involving dental, orthodontia, vision care, and costs for services that would not have been covered under the Boeing Retiree Health Insurance Plan.
- 3) Costs must have been incurred by a Class Member or qualified dependent.
- 4) Costs must have been incurred for services rendered before December 31, 2014.



FOR CLAIMS PROCESSING ONLY	OB	<input type="text"/>	CB	<input type="text"/>	<input type="radio"/> DOC	<input type="radio"/> RED
					<input type="radio"/> LC	<input type="radio"/> A
					<input type="radio"/> REV	<input type="radio"/> B

