

Appendix D

Opt-Out Notice

In the Ontario Superior Court of Justice (Court File No. 05-18369CP)

DOUGLAS JONES

Plaintiff

v.

**ROYAL BOTANICAL GARDENS AND
1242238 ONTARIO INC., OPERATING AS
COMPTON & GREENLAND FINE FOODS AND CATERING LTD.**

Defendants

OPT OUT FORM

I,

NAME

ADDRESS

**TELEPHONE NUMBER
INCLUDING AREA CODE**

wish to opt out of this class action. I do not wish to participate in the settlement in respect of the Royal Botanical Gardens' Mother's Day Brunch, May 8, 2005, salmonella poisoning class action.

I understand that this class action is brought on behalf of all persons who attended at the Royal Botanical Gardens' Mother's Day Brunch, May 8, 2005, consumed contaminated food and became ill thereafter.

I understand that if I opt out and complete this form, I will not take part in this class proceeding, agree to be excluded from the class proceeding, and will not be bound by the result whether favourable or unfavourable.

I understand as well that I will not be entitled to any benefits under the settlement negotiated.

I understand that if I intend to proceed with my own legal action, I must commence my own lawsuit within a specified limitation period or my claim will be legally barred. I take full responsibility for obtaining legal advice about the limitation period applicable and for taking all necessary steps to protect my claim.

I am the person entitled to participate in this action.

YES

NO

If the answer to the above question is "NO", I act in the following capacity for the person who is opting out of the class action.

Name of person opting out:

The Class Member is under 19 years of age: YES

NO

The Class Member is under a legal
disability:

YES

NO

DATE : _____

WITNESS

SIGNATURE OF CLASS MEMBER
OR REPRESENTATIVE

PRINT NAME OF CLASS MEMBER

**TO CONSTITUTE A VALID OPT OUT, THIS OPT OUT FORM MUST BE
MAILED OR DELIVERED BEFORE NOVEMBER 9, 2006 TO SCARFONE
HAWKINS LLP, ONE JAMES STREET SOUTH, 14TH FLOOR, HAMILTON,
ONTARIO, L8N 3P9, FAX: 905-523-5878.**