

**If you were booked into the Sacramento County Main Jail
and strip-searched between March 14, 2000 and June 6, 2003
You may be entitled to monetary compensation under a class action settlement.**

There is presently pending a class action lawsuit in the Sacramento County Superior Court. The Court has certified the case as a class action. If the proposed Settlement receives final approval, people who were subjected to a strip search in the Sacramento County Main County Jail before arraignment on certain charges will receive money.

If you believe you are a member of the class and you do not get a claim form mailed to you, you may obtain a claim form by writing to the Claims Administrator, Bull, et al. Strip Search Class Action, c/o Claims Administrator, P.O. Box 1110, Corte Madera, CA 94976-1110, or by calling the Claims Administrator at 1-800-706-8584, or by contacting the class counsel, Law Office of Mark E. Merin at 2001 P Street, Suite 100, Sacramento, CA 95814, (916) 443-6911, or by e-mail at office@markmerin.com.

Your Claim Form must be completed and be postmarked no later than September 30, 2004

For more information, please read this notice.

**If You Wish to Claim Monetary Compensation,
Obtain, Fill out and Mail the Claim Form as Soon as Possible but No Later than September 30, 2004.**

TO: Any person who was booked at the Sacramento County Main Jail between March 14, 2000 and June 6, 2003 on an infraction or misdemeanor offense or felony offense not involving violence, drugs or weapons and subjected to a strip search before arraignment.

**PLEASE READ THIS ENTIRE NOTICE CAREFULLY.
YOU MAY BE ENTITLED TO RECEIVE A PAYMENT.**

There is now pending in the Superior Court of the State of California, County of Sacramento a class action lawsuit involving a class of persons defined as those who were booked at the Sacramento County Main Jail between March 14, 2000, and June 6, 2003, on an infraction or misdemeanor offense or felony offense not involving violence, drugs or weapons and subjected to a strip search before arraignment.

This Notice is to inform you that a settlement has been proposed in this action and that, as a potential class member, your rights may be affected by the settlement. This Notice also summarizes the terms and effect of the proposed settlement, what you can do to participate in it, how you can obtain money under the settlement and what you must do if you choose to exclude yourself from the class.

SUMMARY OF THE PROPOSED TERMS

A Settlement Agreement ("Settlement") was entered into after several months of intensive negotiations between the parties, conducted with the assistance of a third party mediation. The Parties are requesting that the Court Approve the Settlement.

A. Parties to the Settlement.

The parties to the Settlement are the Plaintiffs named in Bull, et al v. County of Sacramento, Superior Court of the State of California, County of Sacramento Case No. 01AS01545 on behalf of themselves and the Settlement Class, and various defendants including the County of Sacramento. Counsel for the class is Mark E. Merin, The Law Office of Mark E. Merin, 2001 P Street, Sacramento, CA 95814.

B. Monetary Terms of Settlement

1. Class Fund and Related Expenses.

Defendants shall pay a maximum of \$15,000,000 under the terms of the settlement which will hereafter be referred to as the Class Fund.

Class Counsel shall seek an award of up to \$3,000,000 of the Class Fund as attorney's fees and costs for recovering the Class Fund for the Class Members. Up to \$500,000 of the Class Fund may be used for costs of claims administration. Up to \$11,500,000 may be used to pay valid claims.

2. Payments to Class Members Who File Claims.

Money for the class will be paid out based on a distribution formula, subject to payments being proportionately reduced if the total value of verified claims exceeds \$11,500,000. Pursuant to that distribution formula each Claimant will receive a minimum Tier-1 payment of \$1,000 (One Thousand Dollars) upon confirmation that the Claimant is a Class Member. In order to receive this payment, the Claimant need not do anything other than submit a valid Claim Form.

Claimants may also receive an additional Tier-2 payment of up to \$3,500.00 (Three Thousand Five Hundred Dollars). In order to receive this payment, the Claimant must answer Questions 1-10 included in the Claim form. Also, the Claimant must submit a written description of the circumstances surrounding the strip-search and/or provide documentation which supports those contentions. Complete instructions regarding the written description and/or type of documentation which will be required are included in the Claim Form.

Claimants may also receive an additional Tier-3 payment of up to \$25,000.00 (Twenty Five Thousand Dollars) for physical or psychological injury resulting from the strip-search. In order to receive a Tier-3 payment, the Claimant must answer questions 11-13 in the Claim form, provide medical documentation supporting a Tier-3 payment and agree to submit to an examination under oath by an attorney for the County of Sacramento.

C. Your Options as a Class Member.

1. Be Bound by, and Participate in the Settlement.

To qualify for a payment, you must send in a completed Claim Form to the Claims Administrator. A Claim Form is included in this notice package. You can also get a Claim Form by: (1) calling this toll free number: 1-800-706-8584; (2) requesting a Claim Form from the office of Class Counsel at: **The Law Office of Mark**

E. Merin, 2001 P Street, Sacramento, CA 95814, telephone (916) 443-6911; or (3) writing the Claims Administrator at: **Bull, et al. Strip Search Class Action, c/o Claims Administrator, P.O. Box 1110, Corte Madera, CA 94976-1110.**

You have until September 30, 2004 to submit a claim or opt -out of the settlement.

Mail your completed Claim Form to: **Bull, et al. Strip Search Class Action, c/o Claims Administrator, P.O. Box 1110, Corte Madera, CA 94976-1110.**

If you need assistance in completing the claim form, feel free to contact class counsel, Mark E. Merin at the Law Office of Mark E. Merin, 2001 P Street, Suite 100, Sacramento, CA 95814, (916) 443-6911. A minimal fee may be charged for assistance in completing and submitting the form.

Remember, if you do not send a Claim Form, you cannot get a payment. Also, please note that Class Members who have already settled their claims with the County of Sacramento or gone to trial with the County of Sacramento cannot receive a payment under this settlement. If you submit a Claim Form, you will be bound by the Settlement and receive money (if you are a class member). If you do not submit a Claim form but do not exclude yourself from the class (as explained by the next paragraph), you will be bound by the terms of the Settlement and dismissal entered in this case, but you will not receive any money.

By participating in the Settlement you will be waiving all your rights to all claims up to June 6, 2003, related to strip searches by the Defendants in this case, even those of which you are not aware of at present. This waiver will include a waiver of the provisions of California Civil Code §1542, which provides that "a general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor." By participating, you will be giving up unsuspected claims in the areas covered by the litigation.

2. Exclude Yourself From the Class.

You do not have to take part in the Settlement or be a member of the class. This is called "excluding" yourself. If you exclude yourself, you can not get a payment and you can not object to the Settlement. Any Court orders will not apply to you. To exclude yourself, you must sign a request for exclusion letter that states that you want to be excluded from Bull, et al. v. County of Sacramento, et. al., Court File No. 01AS01545. Your exclusion letter must be received before September 30, 2004. Mail or deliver it to: **Clerk of the Court, Sacramento County Superior Court, Dept. 39, 720 Ninth Street, Sacramento, CA 95814.**

If you do not follow these instructions properly, you will lose your right to exclude yourself. If you exclude yourself, you can not get any money from the Settlement and you can not tell the Court you do not like the Settlement (which is called "objecting"). If you exclude yourself, you are no longer part of the class or the Settlement. But you can sue or be part of a different lawsuit against the County of Sacramento about the claims in this case.

D. Fairness Hearing and Process for Objections.

A fairness hearing will be held on **October 22, 2004** at Superior Court of the State of California, County of Sacramento, 720 9th Street, Sacramento, CA 95814 in Department **39**. If you are a class member and do not exclude yourself, you can tell the Court you do not like the Settlement or some part of it at this hearing. This is called objecting to the Settlement. For example, you can say you do not think the Settlement is fair or adequate. The Court will consider your views.

To object, you must file a document with the court that contains all of the following: (1) The name and title of the lawsuit, Bull, et al. v. County of Sacramento, Court File No. 01AS01545; (2) A statement of each objection you have and the facts that support the objections; (3) A description of any law or case supporting the objections; (4) A statement on whether or not you or your lawyer will ask to appear at the Fairness Hearing to talk about your objections, and, if so, how long you will need to present your objections; and (5) Copies of any documents you or your lawyer will present at the Fairness Hearing.

Individually, or through counsel, any class member has the right to object to the proposed Settlement as a whole, to the amount of attorney's fees and costs of Class Counsel, or to any portion of either. **ANY SUCH OBJECTIONS MUST BE FILED IN WRITING ON OR BEFORE October 22, 2004, IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF SACRAMENTO INDICATED ABOVE, LOCATED AT 720 9TH STREET, SACRAMENTO, CALIFORNIA, 95814, ATTN: CLERK, RE: BULL, ET AL V. COUNTY OF SACRAMENTO SETTLEMENT, CASE NO. 01AS01545.** If you wish to appear and present your objections at the fairness hearing, you must also submit a Notice of Intention to Appear that identifies the case, contains your name and address, and explains the reason the appearance is desired. The Notice of Intention to Appear and any objections must be filed with the Court on or before **September 30, 2004**. You may be represented by your own attorney. If you are to be represented by an attorney at the hearing, his or her name, address and telephone number must be included in the Notice of Intention to Appear as well.

A copy of the Statement of Objection and/or Notice of Intention to Appear must also be mailed to: (1) The Law Office of Mark E. Merin, 2001 P Street, Sacramento, CA 95814 ATTN: Mark E. Merin; and (2) Porter, Scott, Weiberg and Delehant, P.O. Box 255428, Sacramento, CA 95865, ATTN: Terrence Cassidy.

E. How to Obtain Further Information

For additional information regarding the Settlement, or to obtain a copy of the Settlement Agreement, Notice or Court Orders, you or your counsel should contact: **Bull, et al. Strip Search Class Action, c/o Claims Administrator, P.O. Box 1110, Corte Madera, CA 94976-1110.** You may also check the Class Administrator's website at www.bullvsac.com or call 1-800-706-8584. You may also obtain detailed information about the case by examining the Court file located in the office of the Clerk of the Superior Court of the State of California, County of Sacramento, 720 9th Street, Sacramento, CA 95814.

F. Court Approval.

Although the Court has reviewed the proposed Settlement, no decision has been, or will be, reached by the Court, until the Fairness Hearing. This Notice does not indicate that the Court has yet approved the Settlement.

**SACRAMENTO STRIP SEARCH LAW SUIT
CLASS ACTION CLAIM FORM (BULL, ET AL. V. COUNTY OF SACRAMENTO, ET AL.)
SACRAMENTO COUNTY SUPERIOR COURT, CASE NO. 01AS01545**

FILL OUT THIS FORM IF YOU WERE ARRESTED AND STRIP SEARCHED BEFORE YOU WERE ARRAIGNED AT THE SACRAMENTO COUNTY JAIL BETWEEN MARCH 14, 2000, AND JUNE 6, 2003. ALL MEMBERS OF THIS CLASS WHO QUALIFY MAY RECEIVE A **MINIMUM OF \$1,000.**

You must complete and submit this claim form no later than September 30, 2004, to qualify for payment from settlement of the class action strip search case against Sacramento County. If you do not return a completed claim form by the due date you will receive NO MONEY from the settlement.

CLASS ACTION CLAIM FORM

//////////-(Bar Code)

Name _____
Address _____
City, State, Zip Code _____

Please enter your correct name, and address here if it does not appear to the left.

Name: _____

Address: _____

Phone #: (____) _____

Cal. Driver's License No. _____

Social Security Number: _____-_____-_____

Date of Birth: _____

* * * * *

Were you arrested and strip searched prior to arraignment at the Sacramento County Jail at any time between March 14, 2000, and June 6, 2003? Yes No

If you answered "yes" to the above, or you are unsure of the date, please continue to answer the questions below.

Note: Not all persons strip searched at the Sacramento County Jail during the class period (March 14, 2000 to June 6, 2003) will be entitled to payment. If you were on parole or probation or were charged with a felony involving drugs, weapons, or violence, for instance, you are not entitled to payment under this settlement. Eligibility will be based solely on records maintained by the Sacramento County Sheriff's Department.

Use the enclosed return envelope and mail the completed claim form and any supporting information to: **Bull, et al. Strip Search Class Action, c/o Claims Administrator, P.O. Box 1110, Corte Madera, CA 94976-1110.**

Answer each of the following questions by placing a check in the "yes" or "no" box at the end of the question. If you check "yes" as the answer to any question (except question #9), and it is requested, you **MUST** submit an explanation, description of the circumstances, photographs, medical verification, witness statements, or such other documentation necessary to support your answer. If you do not provide the requested explanation, description or documentation, your "yes" answer will be disregarded. CAUTION – THESE ANSWERS ARE GIVEN UNDER PENALTY OF PERJURY.

Puede obtener una
forma de reclamacion
en español al llamar
al 1-800-706-8584

PLEASE PRINT

Question

1. Did you have a physical disability or disfigurement (such as an embarrassing scar condition in a private area) at the time of the search? If so, describe the disability, and/or scar condition in detail and/or submit a photograph. _____

_____ Yes No
2. Did you have a mental disability? If so, describe/explain the disability. _____

_____ Yes No
3. If you are female, were you more than 3 months pregnant? If so, give the name and birth date of the child born or explain how the pregnancy ended. _____

_____ Yes No
4. Did you have piercings in a private area removed? If so, describe: _____

_____ Yes No
5. Did you have to remove hair extensions? If so, describe: _____

_____ Yes No
6. If you are an uncircumcised male, did you have to retract your foreskin? _____ Yes No
7. Were you obese? If so, state your height _____ and weight _____ Yes No
8. Were you required to remove religious garments? If so, describe: _____

_____ Yes No
9. Were you incarcerated in a State Prison or County Jail pursuant to a sentenced conviction within five years prior to the strip search. If so, list the date of incarceration and the facility you were incarcerated in. _____

_____ Yes No

10. Did you experience any of the following or similar treatment? If so, you must describe your experiences in sufficient detail to convince the claims examiner that you are being truthful. Yes No
- a. Were you observed during the strip search by a member of the opposite sex? Yes No
 If so, describe completely _____

- b. Were you touched in a private area during the search? If so, describe completely. Yes No

- c. Were you subjected to foul or demeaning language, or subjected to nasty jokes? If, so, describe completely. Yes No

- d. Were you required to bend over and spread your buttocks and/or labia multiple times? If so, describe completely. Yes No

- e. Were you made to jump and/or dance during the strip search? If so, describe completely. Yes No

- f. If you are female, were you having your period? Yes No

11. Did Jail Officer(s) use physical force to forcibly strip search you? If so, describe the circumstances: Yes No

- *12. Did you receive counseling or therapy as a result of the strip search? If so, give the name, address and telephone number(s) of the therapist(s), the dates of the visits and provide documentation to support your claim: Yes No

- *13. Were you diagnosed with a psychological condition resulting from the strip search? If so, give the name, address and telephone number of the person(s) who diagnosed your condition and provide documentation to support your claim: Yes No

- *14. Did you suffer any other significant ill effects of the strip search? If so, describe those effects, in detail, and provide whatever documents exist to confirm or support your statement. Yes No

 List documents attached to support above statement: _____

* If you answered “yes” to any of these questions you may be contacted and asked to provide further information. You may also be required to submit to an examination under oath by an attorney or an agreed medical examiner hired by the County of Sacramento.

CRIMINAL FRAUD WILL RESULT IN DENIAL OF YOUR CLAIM.

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ABOVE IS TRUE AND CORRECT.

DATED: _____ SIGNATURE: _____

The information given here is private and will be held in the strictest confidence. If you have any questions about this lawsuit, write to the Claims Administrator at Bull, et al. Strip Search Class Action, c/o Claims Administrator, P.O. Box 1110, Corte Madera, CA 94976-1110, or visit our website at www.bullvsac.com

THIS CLAIM FORM MUST BE SIGNED AND RETURNED WITH A POSTMARK NO LATER THAN SEPTEMBER 30, 2004.

If you need assistance in completing this form, please feel free to contact plaintiffs' class counsel, Mark E. Merin at Law Offices of Mark E. Merin, 2001 P Street, Suite 100, Sacramento, California 95814; Telephone (916) 443-6911; Facsimile (916) 447-8336; Email office@markmerin.com.

If you would like your settlement check mailed to an address other than that on the first page of the Claim Form, provide it here: (Address if different) to which settlement check should be mailed:

Name or c/o _____
Street Address (or Post Office Box) _____
City _____, State _____ Zip Code _____

Puede obtener una
forma de reclamacion
en español al llamar
al 1-800-706-8584