

BRENNAN, MANNA & DIAMOND, LLC
75 East Market Street
Akron, OH 44308
(330) 253-5060

January 22, 2019

Ilene Shapiro, Summit County Executive
The County of Summit
Ohio Building – 8th Floor
175 South Main Street
Akron, Ohio 44308

Re: The County of Summit, Ohio, et al. v. Purdue Pharma L.P., et al.
United States Northern District of Ohio, Case No. 17-MD-2804, MDL NO. 2804

INTERIM INVOICE

**FOR PROFESSIONAL SERVICES RENDERED AND CONTINGENCY FEES ON
SETTLEMENTS WITH:**

1. Allergan	\$ 65,906.25
2. Endo	\$ 133,616.25
3. Johnson & Johnson	\$ 133,616.25
4. Mallinckrodt	\$ 316,350.00
5. Distributors	\$2,833,968.75
6. Teva	\$ 65,906.25
7. HD Schein	\$ 0.00

TOTAL: \$3,549,363.75

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the
requester. Do not
send to the IRS.

Print or type.
See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Brennan, Manna & Diamond, LLC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☐ Partnership ☐ Trust/estate

☒ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► **P**
Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

75 East Market Street

6 City, state, and ZIP code

Akron, OH 44308

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

OR

Employer identification number

3 4 - 1 9 2 4 5 4 4

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

LSW

Date ►

9/30/19

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (Interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What Is Backup Withholding*, later.

**SUMMIT COUNTY FISCAL OFFICE
WIRE REQUEST FORM**

Kristen M. Scalise CPA, CFE
Summit County Fiscal Officer
175 South Main Street, Room 320
Akron, Ohio 44308

Investment Department
Jacqueline Sampsel
Phone: (330) 643-2607
Email: jsampsel@summitoh.net

Michelle Homelster
Phone: (330) 643-2610
Email: mhomelster@summitoh.net

County Agency:

Office/Department Name: Executive: Finance & Budget

Contact Person: Diane Miller-Dawson

Phone Number: 33-643-7706

Email: dmler-dawson@summitoh.net

Date of Request: January 30, 2020

Authorized Signature: 

Vendor:

Vendor Name: Brennan, Manna & Diamond, LLC

First Contact Person: Dee Botzer

Phone Number: 330-374-7488

Second Contact Person: Brandy Bader

Phone Number: 330-253-8504

Wire Instructions:

Account Name: Brennan, Manna & Diamond, LLC Operating Account

Bank Name: [REDACTED]

ABA/Routing Number: [REDACTED]

Account Number: [REDACTED]

Message: [REDACTED]

Settlement Date: January 31, 2020

Amount: \$ 3,547,560.00

Wire Instructions Verbal Confirmation:

Confirmed With: Dee Botzer

Confirmed By: Tim Greathouse

Date Confirmed: January 30, 2020

Investment Department Use Only:

Request Received : _____

Wire Settlement Date: _____

Warrant Received: _____

RAFFAELLI AND PRAZAK

1901 Mall Drive
Texarkana, Texas 75503

January 21, 2020

Ilene Shapiro, Summit County Executive
The County of Summit
Ohio Building – 8th Floor
175 South Main street
Akron, Ohio 44308

Re: The County of Summit, Ohio, et al. v. Purdue Pharma L.P., et al.
United States Northern district of Ohio, Case No. 17-MD-2804, MDL NO. 2804

INTERIM INVOICE

FOR PROFESSIONAL SERVICES RENDERED AND CONTINGENT FEES ON SETTLEMENTS WITH:

1. Allergan	\$ 13,181.25
2. Endo	\$ 26,362.50
3. Johnson & Johnson	\$ 26,362.50
4. Mallinckrodt	\$ 63,270.00
5. Distributors	\$566,790.00
6. Teva	\$ 13,181.25
7. HD Schein	\$.00

Gross Fees	\$709,512.00
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Agreed adjustments/discount	<u>- \$153,254.59</u>
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TOTAL INVOICED AMOUNT DUE:\$556,257.41

See attached wiring instructions.

Request for Taxpayer Identification Number and Certification

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the
requester. Do not
send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

RAFFAELLI AND PRAZAK

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.

☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation ☒ Partnership ☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ►

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) ►

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

1901 MALL DRIVE

6 City, state, and ZIP code

TEXARKANA, TX 75503

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

____ - ____ - ____

or

Employer identification number

2 6 - 2 4 9 3 0 5 6

Part II Certification

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- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign
Here

Signature of
U.S. person ►

Date ► **Dec. 6, 2019**

General Instructions

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- Form 1099-K (merchant card and third party network transactions)
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- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What Is backup withholding*, later.

Kristen M. Scalise CPA, CFE

ORIGINAL IS ON PURPLE PAPER

Wire Advice Sheet

!0002775

Voucher#	Check Date	Invoice#	Amount	Department	User
!2002829	1/30/2020	8016 012120	556,257.41	FB	TGREATHOUSE

Total Wire Expenditures 556,257.41

Pay to the
order of:

Summit County Fiscal Officer (Wire)
From Finance & Budget
To Raffaelli and Prazak
WIRE ONLY-DO NOT MAIL CHECK

!0002775

NOT A VALID CHECK
FOR CONFIRMATION OF WIRE ONLY

Jennifer Boley

Deputy Fiscal Officer Certification

ROBERT B. NEALON *
JAY IAN IGIEL □
ERIN K GALLGHER

+ Also admitted in DC & MD
* Also admitted in FLA
* Also admitted in NY
□ Also admitted in CA

NEALON & ASSOCIATES, P.C.

ATTORNEYS AND COUNSELORS AT LAW

119 NORTH HENRY STREET
ALEXANDRIA, VIRGINIA 22314

TELEPHONE (703) 684-5755 FACSIMILE (703) 684-0153

OF COUNSEL:

LAWRENCE ANDERSON +
JOHN T. CAULFIELD
ALBERT MOKHIBER
BRENNAN LEENE *

January 22, 2020

Ilene Shapiro, Summit County Executive
The County of Summit
Ohio Building - 8th Floor
175 South Main street
Akron, Ohio 44308

Re: The County of Summit, Ohio, et al. v. Purdue Pharma L.P., et al.
United States Northern district of Ohio, Case No. 17-MD-2804, MDL NO. 2804

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6. Teva	\$ 13,181.25
7. HD Schein	\$ 0.00

Gross Fees	\$709,512.00
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Agreed adjustment/discount	- \$153,254.59
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TOTAL INVOICED AMOUNT DUE:\$556,257.41

See attached wiring instructions.

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requester. Do not
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Nealon & Associates, P.C.

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☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☒ S Corporation ☐ Partnership ☐ Trust/estate

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☐ Other (see instructions) ▶

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Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts established outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

119 N Henry St

6 City, state, and ZIP code

Alexandria VA 22314

7 List account number(s) here (optional)

Requester's name and address (optional)

The County of Summit

Part I Taxpayer Identification Number (TIN)

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Social security number

____ - ____ - ____

OR

Employer identification number

5 4 - 1 7 8 1 6 1 7

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Sign
Here

Signature of
U.S. person ▶

John A. Nealon PRES. Date ▶ December 4, 2019

General Instructions

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- Form 1099-K (merchant card and third party network transactions)
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- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding*, later.

Wiring Instruction:

Wire From:

Bank Name:

Bank Address:

Wire from Account:

Routing Transit Number (ABA) number:

Dollar amount to be wired: \$

Wire To:

Bank Name: Wells Fargo Bank, NA
420 Montgomery Street
San Francisco, CA 94104

Routing Transit Number 121 000 248

To be credited to Nealon & Associates, P.C.
VA IOLTA Attorney Trust Account

Account number 9999331664

Business Name: Nealon & Associates, P.C.
Business Address: 119 N. Henry Street
Alexandria, VA 22314

Kristen M. Scalise CPA, CFE

ORIGINAL IS ON PURPLE PAPER

Wire Advice Sheet

!0002774

Voucher#	Check Date	Invoice#	Amount	Department	User
!2002831	1/30/2020	8016 012220A	556,257.41	FB	TGREATHOUSE

Total Wire Expenditures 556,257.41

Pay to the order of: Summit County Fiscal Officer (Wire)
From Finance & Budget
To Nealon & Associates PC
WIRE ONLY-DO NOT MAIL CHECK

!0002774

NOT A VALID CHECK
FOR CONFIRMATION OF WIRE ONLY

Jennifer Boley

Deputy Fiscal Officer Certification