
**EAGLE-PICHER PERSONAL
INJURY SETTLEMENT TRUST**

William B. Nurre
Executive Director

August 28, 2006

Re: Elimination of Release Return Deadline / Reopening of Withdrawn Claims

Dear Claimants' Counsel and Pro Se Claimants:

On behalf of the Eagle-Picher Industries, Inc. Personal Injury Settlement Trust (the "Trust"), I am pleased to announce that as part of the Trust's ongoing efforts to maximize returns to claimants through greater efficiency, the Trust has determined that there is no longer an administrative need to require a deadline for the return of executed release forms. Accordingly, **effective immediately, the Trust has eliminated its release return deadline.**

I am equally pleased to announce that **claims previously withdrawn for failure to timely return an executed release will now be eligible for processing.** Under separate cover from the Claims Processing Facility, Inc. (the "CPF"), claimants or their counsel will soon be notified of such withdrawn claims. The CPF will reopen a claim and reissue a release upon receipt of a written request that includes both of the following:

1. New contact or personal representation information for the claimant (e.g., because the claimant is now deceased or other new information is relevant); *and*
2. Evidence that the original offer was not issued in connection with a medical diagnosis or chest x-ray, CT scan or B-reading of one of the nine physicians suspended by the Trust in October 2005. A copy of the October 19, 2005 physician suspension notice listing the nine suspended physicians is available on the CPF's website at www.cpf-inc.com "view all announcements" section. To satisfy this requirement, either please return the enclosed verification statement *or* please provide new medical documentation for each claim that is to be reopened.¹ (For multiple claims, one verification statement with an attachment listing the claims at issue is sufficient.)

Reopened IRC claims will be paid at the current payment percentage of 19.8%, regardless of the payment percentage at the time the claim was withdrawn or at the time the new release is returned and the claim is paid.

¹ If you are unable to execute the verification statement, you must submit an asbestos injury diagnosis based upon a physical examination by a diagnosing physician that is not suspended and this report must provide evidence of a review by the diagnosing physician of chest x-ray(s), CT scan or B-reading report by a physician that is also not on the suspension list. Any new medical submissions must conform to the mandates of section 7.1(b) of the Claims Resolution Procedures.

The Trust encourages you to take advantage of the options set forth above, and as always appreciates your input into the claims process. If you have any question or concern, please contact me directly or call the CPF's General Counsel, Melanie K. Impastato, Esq., at (630) 281-6522.

Sincerely,



William B. Nurre

cc: Ruth R. McMullin
James J. McMonagle, Esq.
David L. McLean, Esq.

**GENERAL AND
ADMINISTRATIVE OFFICE:**
652 Main Street, 2nd Floor
Cincinnati, OH 45202
513-412-5590
Fax 513-412-5591

CLAIMS PROCESSING FACILITY:
East-West Tech Center
1771 West Diehl Road, Suite 220
Naperville, IL 60563
630-281-6500
Fax 630-281-6485

BOARD OF TRUSTEES:
Ruth R. McMullin
James J. McMonagle
David L. McLean

Model Verification Statement
(for law firms)

In order to have a release issued under the amnesty program, all claims must provide evidence that the asbestos injury diagnosis was not based upon medical documentation of one of the nine suspended physicians. A signed verification as follows will constitute sufficient evidence:

I, _____, being of age, and duly sworn, state as follows:

1. I am a licensed attorney in the state of _____. I swear that all statements made herein are true to the best of my knowledge. I am aware that any false statements may subject me to penalty of perjury.
2. My firm of _____ is the counsel of record for the claim(s) on the attached list filed with the Eagle-Picher Industries, Inc. Personal Injury Settlement Trust ("EPI Trust"). As of the date of this statement, the firm represents the claimant(s) or estate of the claimant(s) for the settlement of asbestos personal injury claims.
3. I have reviewed the notice issued by the EPI Trust dated October 19, 2005 suspending nine physicians and two medical laboratories as unqualified under the EPI Trust Claims Resolution Procedures.
4. I hereby attest that the claim(s) on the attached list did not have a medical diagnosis resulting from a medical report of one of the nine suspended physicians or the diagnosing physician did not rely upon a chest x-ray, CT scan, or B-reading report by one of the nine suspended physicians in making his or her asbestos injury diagnosis.

Subscribed and Sworn before me
On this ____ day of _____, 200_.

NOTARY PUBLIC

Verification Statement
(pro se claimants)

In order to have a new release issued, all claims must provide evidence that the asbestos injury diagnosis was not based upon medical documentation of one of the nine suspended physicians. A signed verification as follows will constitute sufficient evidence:

I, _____, being of age, and duly sworn, state as follows:

1. I am the claimant or the personal representative of the estate of _____. I swear that all statements made herein are true to the best of my knowledge. I am aware that any false statements may subject me to penalty of perjury.
2. I have reviewed the notice issued by the Eagle-Picher Industries, Inc. Personal Injury Settlement Trust ("EPI Trust") dated October 19, 2005 suspending nine physicians and two medical laboratories as unqualified under the EPI Trust Claims Resolution Procedures.
3. I hereby attest that the medical documentation in support of my claim did not have a medical diagnosis resulting from a medical report of one of the nine suspended physicians or the diagnosing physician did not rely upon a chest x-ray, CT scan, or B-reading report by one of the nine suspended physicians in making his or her asbestos injury diagnosis.

Subscribed and Sworn before me
On this ____ day of _____, 200_.

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