

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF CONNECTICUT

LUANN RUGGERI, RICARDO
JARAMILLO and PRAKASH NAIK on
behalf of themselves and all others similarly
situated,

Plaintiffs,

vs.

BOEHRINGER INGELHEIM
PHARMACEUTICALS, INC.,

Defendants.

Case No. 3:06-CV-1985(JBA)

**THIS FORM MUST BE FILLED IN AND RETURNED BY NOT LATER THAN 5
P.M. (E.S.T.) JANUARY 16, 2009 IF YOU WISH TO PARTICIPATE IN THE
LAWSUIT**

CONSENT TO JOIN

I work or worked for Boehringer Ingelheim Pharmaceuticals, Inc. ("Boehringer") at some time between March 25, 2005 and the present as a Primary Care Sales Representative, Specialty Sales Representative, Institutional Sales Representative, HIV Sales Representative, or Senior Care Representative, or any predecessor job title/classification for the same positions, and I worked more than 40 hours in a workweek from March 25, 2005 to the present.

I choose to participate in the Fair Labor Standards Act ("FLSA") collective action titled *Ruggeri v. Boehringer Ingelheim Pharmaceuticals, Inc.*, Case No. 06-cv-01985 (D. Conn). I understand that this lawsuit seeks unpaid overtime wages that may be owed to me, and that by joining the lawsuit I will become a plaintiff. By joining this lawsuit, I designate the plaintiffs named in the complaint as my representatives, and, to the fullest extent possible under applicable laws, to make decisions on my behalf concerning the FLSA claim, the method and manner of conducting and resolving the litigation, and all

other matters pertaining to the lawsuit. To the extent that I am similarly situated to the other collective action members, I choose to be represented as a collective action member in this matter by Rudy, Exelrod & Zieff, LLP; Altshuler Berzon LLP; Lewis, Feinberg, Lee, Renaker & Jackson, P.C.; Hurwitz, Sagarin, Slossberg & Knuff, LLC; and other attorneys with whom they may associate. I understand I am retaining the above law firms who have agreed to share any fees recovered in this matter. I understand that it may be determined at a later date that certain individuals will not remain part of the proposed collective action and that I have the right to obtain separate legal advice and representation at my own expense. I understand that the attorneys will act in the best interests of the collective action members as a whole and hereby waive any conflict that may arise from the attorneys' representation of multiple collective action members.

Printed Full Legal Name: _____

Address: _____

City, State and Zip: _____

Job Title(s), Dates (start/end), and Locations
for employment at Boehringer (if known): _____

Signature: _____

Date signed: _____

**NOTE: To be effective, this form must be submitted to
Law Offices of Rudy, Exelrod & Zieff, L.L.P., 351 California Street,
Suite 700, San Francisco, CA 94104 (Fax: 415-434-0513)
by 5 P.M. (E.S.T.) JANUARY 16, 2009.**