



Statement Regarding Stryker Corporation Health and Welfare Plan Electronic Disclosures

Individuals entitled to receive benefits under the Stryker Corporation Welfare Plan (the Plan) are also entitled to be furnished with certain documents required by ERISA. Stryker Corporation intends to provide the following documents to you by electronic delivery (as described below):

- the Summary Plan Descriptions (SPDs) for all applicable benefit plans;
- any required Summaries of Material Modifications (SMMs);
- any Supplemental Summary Plan Descriptions for employees covered by a health plan other than UnitedHealthcare;
- any Insured Certificates for employees covered by a health plan other than UnitedHealthcare;
- any legal notices such as that for Medicare Part D Creditable Coverage; and
- Summary Benefit Comparisons.

Electronic Delivery Method to Be Used: These ERISA-required documents will be furnished to you in each case as an electronic document via the internet. To access the document you must have a computer available to you and access to the internet. A VPN connection is not required. To retain a copy of the document for future reference, you must either (1) be able to print a copy on a printer attached to the computer; or (2) save a copy in electronic form onto a backup system external to your computer's hard drive (e.g., on a flash drive).

If any of these requirements change in a way that creates a material risk that you will no longer be able to access and retain electronically transmitted documents, you will be furnished with notice and required to provide another consent for receiving documents electronically.

What You Must Do: To receive documents electronically, you must complete the following Consent Form.

You may withdraw this consent at any time by notifying your local Benefits Team by sending an email message that indicates in the subject line: **Consent Withdrawn for Electronic Disclosure** and includes in the body your full name, address and phone number or by sending the form via standard mail or fax.

Orthopaedics Shared Services

Phone: 201 831 6996 Email: hshared@stryker.com Fax: 201 831 6000

Spine Human Resources

Phone: 201 760 8096 Email: spinebenefits@stryker.com Fax: 201 962 4249

Benefits Shared Services

Phone: 877 795 2002 or extension 7599 (x 1) Email: benefits@stryker.com Fax: 877 204 1328

Your Right to a Paper Copy: You have a right to request and obtain a paper version of any electronically transmitted document at no charge. Contact your Benefits Team, who acts on behalf of the plan administrator, as noted above to request a paper copy.



Consent to Receive Stryker Corporation Plan Disclosures Electronically

I have read the Statement Regarding Stryker Corporation Employee Benefit Plan Electronic Disclosures (the Statement).

I do not consent to receiving the type of documents described in the Statement by electronic means. I understand that if my situation changes, I must notify my Benefits Team and complete the proper form.

I consent to receiving the type of documents described in the Statement by electronic means to my Stryker email address in addition to my personal email address if I provide it. I understand that if my situation changes, I must notify my Benefits Team and complete the proper form.

I confirm that I have the ability to access information in the electronic form that is described in the Statement. I understand that I will receive copies of the types of document described in the Statement only in the electronic form described there unless I exercise my right to affirmatively request a paper copy of such document.

I understand that I can withdraw this consent at any time by sending an e-mail message to my Benefits Team that indicates in the subject line: **Consent Withdrawn for Electronic Disclosures** and includes in the body my full name, address, and phone number or by sending the same statement via standard mail or fax

Name of Employee: _____

Stryker Division: _____

Employee's signature: _____ Date: _____

Employee's Stryker email address: _____

Optional - Personal email address: _____