UNITED STATES DISTRICT COURT

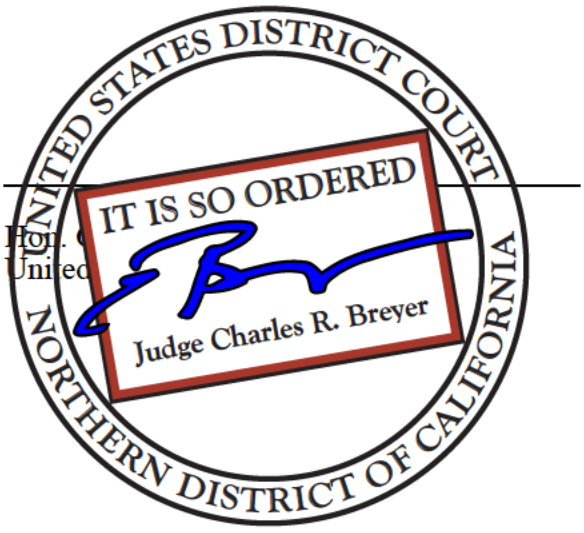
NORTHERN DISTRICT OF CALIFORNIA

IN RE: UBER TECHNOLOGIS, INC. PASSENGER SEXUAL ASSAULT LITIGATION	MDL No. 3084 CRB
This Document Relates to: ALL ACTIONS	**~~[PROPOSED]~~ FIRST AMENDED PRETRIAL ORDER NO. 12: COMMON BENEFIT ORDER—TIMEKEEPING AND EXPENSES PROTOCOL**

This Order amends Pretrial Order No. 12, the Common Benefit Order—Timekeeping and Expenses Protocol. This Order modifies Exhibit A to PTO 12 to require reporting of: (1) a monthly time report; (2) a monthly expense report; (3) a supplemental time report; and (4) a supplemental expense report. Modified **Exhibit A** is attached to this Order.

IT IS SO ORDERED.

DATED: April 1, 2024



Hon. C
United

EXHIBIT A

In re: Uber Technologies, Inc. Passenger Sexual Assault Litigation
MONTHLY TIME REPORT

Firm Name: _____

Date: _____

Categories: 1. Investigation/Factual Research 2. Attorney Meetings/Strategy 3. Leadership Case Management Duties 4. Court Appearances 5. Pleadings 6. Written Discovery 7. Plaintiff Discovery (Doc. Production, DME) 8. Document Review 9. Legal Research/Memoranda 10. Scientific Research 11. Motions/Briefs 12. Depositions (Prepare/Take/Defend) 13. Experts/Consultants 14. Settlement/Mediation 16. Bellwether Selection 17. Trial Preparation 17. Trial 18. Appeal 19. Client Communications 20. Miscellaneous

Last Name, First Name	Professional level: Partner (PT), Of Counsel (OC), Associate (A), Staff Attorney (SA), Contract Attorney (CA), or Paralegal/Staff (PL)	Date of Service:	Category Code:	Detailed Description of Work performed:	Lead Counsel Who Assigned or Approved Work	Billing Rate:	Time spent (by 0.1 increments)	Fees Total:

In re: Uber Technologies, Inc. Passenger Sexual Assault Litigation
MONTHLY Expense REPORT

Firm Name: _____

Date: _____

Categories: 1. Assessment Fees 2. Federal Express / Local Courier, etc. 3. Postage Charges 4. Facsimile Charges 5. Long Distance 6. In-House Photocopying 7. Outside Photocopying 8. Hotels 9. Meals 10. Mileage 11. Air Travel 12. Deposition Costs 13. Lexis/Westlaw 14. Court Fees 15. Witness / Expert Fees 16. Investigation Fees / Service Fees 17. Transcripts 18. Ground Transportation (i.e. Rental, Taxis, etc.) 19. Miscellaneous (Describe)

**************************ALL ORIGINAL RECEIPTS MUST BE ATTACHED TO THIS EXPENSE SHEET**************************

Last Name, First Name	Date:	Category Code:	Detailed Description:	Lead Counsel Who Assigned or Approved Cost (Hard Costs Only)	Amount:	Receipt Provided: Yes / No (if no, provide reason)

In re: Uber Technologies, Inc. Passenger Sexual Assault Litigation
SUPPLEMENTAL TIME REPORT

Firm Name: ______________________________

Date: ______________________________

Categories: 1. Investigation/Factual Research 2. Attorney Meetings/Strategy 3. Leadership Case Management Duties 4. Court Appearances 5. Pleadings 6. Written Discovery 7. Plaintiff Discovery (Doc. Production, DME) 8. Document Review 9. Legal Research/Memoranda 10. Scientific Research 11. Motions/Briefs 12. Depositions (Prepare/Take/Defend) 13. Experts/Consultants 14. Settlement/Mediation 16. Bellwether Selection 17. Trial Preparation 17. Trial 18. Appeal 19. Client Communications 20. Miscellaneous

Last Name, First Name	Professional Level: Partner (PT), Of Counsel (OC), Associate (A), Staff Attorney (SA), Contract Attorney (CA), or Paralegal/Staff (PL)	Date of Service:	Category Code:	Detailed Description of Work performed:	Lead Counsel Who Assigned or Approved Work	Billing Rate:	Time spent (by 0.1 increments)	Fees Total:

In re: Uber Technologies, Inc. Passenger Sexual Assault Litigation
SUPPLEMENTAL EXPENSE REPORT

Firm Name: _____

Date: _____

Categories: 1. Assessment Fees 2. Federal Express / Local Courier, etc. 3. Postage Charges 4. Facsimile Charges 5. Long Distance 6. In-House Photocopying 7. Outside Photocopying 8. Hotels 9. Meals 10. Mileage 11. Air Travel 12. Deposition Costs 13. Lexis/Westlaw 14. Court Fees 15. Witness / Expert Fees 16. Investigation Fees / Service Fees 17. Transcripts 18. Ground Transportation (i.e. Rental, Taxis, etc.) 19. Miscellaneous (Describe)

***************************ALL ORIGINAL RECEIPTS MUST BE ATTACHED TO THIS EXPENSE SHEET**************************

Last Name, First Name	Date:	Category Code:	Detailed Description:	Lead Counsel Who Assigned or Approved Cost (Hard Costs Only)	Amount:	Receipt Provided: Yes / No (if no, provide reason)