UNITED STATES DISTRICT COURT SOUTHERN DISTRICT NEW YORK

PAUL SHAPIRO, on behalf of himself as an individual, and on behalf of all others similarly situated,

Case No.:11-CV-8331 (CM)(MHD) ECF CASE

Plaintiff,

v.

JPMORGAN CHASE & CO., JPMORGAN CHASE BANK, N.A., J.P. MORGAN SECURITIES LLC, and J.P. MORGAN SECURITIES, LTD.,

Defendants.

STEPHEN and LEYLA HILL, on behalf of themselves as individuals, and on behalf of all others similarly situated,

Plaintiffs,

v.

JPMORGAN CHASE & CO., JPMORGAN CHASE BANK, N.A., J.P. MORGAN SECURITIES LLC, and J.P. MORGAN SECURITIES, LTD.,

Defendants.

Case No. 11-CV-7961 (CM) ECF CASE

PROOF OF CLAIM

NO SECOND CLAIM REQUIRED: If you filed a timely claim with Irving H. Picard, the Trustee for the SIPA Liquidation of Bernard L. Madoff Investment Securities LLC (the "Trustee"), and you wish to participate in the Settlement, then you do not have to complete this Proof of Claim.

IF YOU HAVE NOT PREVIOUSLY FILED A CLAIM IN THE SIPA PROCEEDING, THEN YOU MUST COMPLETE THIS PROOF OF CLAIM: If you did not file a timely claim in the SIPA proceeding and you wish to share in the proceeds of the Settlement between the Trustee, the Customer Representatives and JPMorgan Chase & Co., JPMorgan Chase Bank, N.A., JPMorgan Securities LLC and JPMorgan Securities Ltd. (collectively, "JPMorgan" or the "Bank"), you must complete this Proof of Claim and return it to the Claims Administrator by March 25, 2014.

You are urged to read these and the other enclosed documents carefully. They explain steps to protect any rights and claims you may have in the litigation captioned above.

If you are a former direct customer of Bernard L. Madoff Investment Securities LLC ("BLMIS") who directly had capital invested with BLMIS as of December 11, 2008, you may be eligible to participate in this Settlement. You must fill out this Proof of Claim if you would like to share in the proceeds of the Settlement unless you have previously filed one or more claim forms with the Trustee. All Proof of Claim forms must be filed with the Claims Administrator via email at Shapiro-HillClassSettlement@alixpartners.com, OR sent to the Claims Administrator via certified mail, return receipt requested, to the following address:

AlixPartners LLP Claims Processing Center Shapiro-Hill Class Settlement 2101 Cedar Springs Road, Suite 1100 Dallas, Texas 75201

Your claim(s) will not be deemed to be filed until received by the Claims Administrator. If you submit your claim(s) by mail, it is strongly recommended that your claim(s) be mailed via certified mail, return receipt requested. Your return receipt will be the only document you will receive that shows your claim has been received by the Claims Administrator. Claims that are filed by email to Shapiro-HillClassSettlement@alixpartners.com must be received by 11:59 p.m. (Prevailing Eastern Time) on March 25, 2014 to be considered timely.

If your claim is not properly completed or the Claims Administrator requires additional information in order to process your claim, the Claims Administrator may contact you by telephone or email and may send you a deficiency letter requesting that you file additional information or documents to support the validity of your claim. Failure to respond to a deficiency letter within thirty days of its receipt may result in the denial of your claim.

It is your responsibility to accurately report the amounts owed to you in connection with BLMIS account(s). A false claim or the retention of property to which you are not entitled may make you liable for damages and criminal penalties. Information about the amount of your claim from BLMIS's books and records maintained by the SIPA Trustee Irving H. Picard will be provided to you. If you dispute that amount, you may provide an estimated claim and supporting documentation.

Your Proof of Claim must be <u>received</u> by the Claims **Administrator on or** before March 25, 2014, or it will be barred (unless extended, for good cause only).

Nothing in this Proof of Claim serves to change the statutory bar date for filing timely claims in the SIPA proceeding, including, but not limited to, the deadline that has expired for filing timely customer claims or timely unsecured creditor claims against the BLMIS Estate in the SIPA proceeding.

Your cooperation in promptly returning the appropriate completed Proof of Claim to the Claims Administrator is in your best interest as it will help speed the administration of the recoveries from the Settlement.

INSTRUCTIONS FOR COMPLETING THE PROOF OF CLAIM PLEASE READ CAREFULLY

IF YOU ALREADY HAVE FILED A CLAIM IN THE SIPA PROCEEDING, THEN YOU DO NOT NEED TO FOLLOW THESE INSTRUCTIONS OR COMPLETE THIS PROOF OF CLAIM

These instructions are to help you complete the enclosed Proof of Claim. If you wish to share in the proceeds of the Settlement, and you have not already filed a claim with the Trustee in the SIPA proceeding, then the Claims Administrator must receive your Proof of Claim on or before March 25, 2014. If you submit an improperly completed Proof of Claim or do not provide sufficient information to support your claim, the Claims Administrator may send you a deficiency letter, indicating what additional information is required to process your claim. In addition to the specific items and information sought in the enclosed Proof of Claim, you should provide further explanation and detail regarding your claim and your account, as necessary, to aid the Claims Administrator in the determination of your claim.

Item I seeks a statement of the net investment of your BLMIS account (i.e., the amount of cash deposited minus the amount of cash withdrawn), as of December 11, 2008. Information about the amount of your claim from BLMIS's books and records maintained by the SIPA Trustee Irving H. Picard will be provided to you. If you dispute that amount, you may provide an estimated claim and supporting documentation. In that case, please be sure to indicate that you are providing an estimate.

Item II seeks details about your direct BLMIS Account. Please indicate the type of account you held, the capacity in which you hold the account, whether the account is held by a BLMIS "insider," "affiliate," or "relative," whether the account is a joint account, and whether you have any related accounts.

- If you dispute the amount of your claim provided to you from BLMIS's books and records maintained by the SIPA Trustee Irving H. Picard, you may provide an estimated claim and supporting documentation.
- Proper documentation can speed the review, allowance, and satisfaction of your claim.
- Please enclose: copies (not originals) of any documentation or correspondence you believe will be of assistance in processing your claim, including, but not limited to, bank statements and copies of your cash transactions with BLMIS.
- If you do not dispute the amount of your claim provided to you from BLMIS's books and records maintained by the SIPA Trustee Irving H. Picard, you do not need to submit any further documentation regarding your cash transactions with BLMIS.

- If, at any time, you complained in writing about the handling of your investment with BLMIS to any person or entity or regulatory authority, please be sure to provide with your Proof of Claim copies of the complaint and all related correspondence, as well as copies of any replies that you received.
- A separate Proof of Claim must be filed for each account.

When To File

For those Class members that have not already filed a claim with the Trustee in the SIPA Proceeding and who wish to participate in the Settlement, the deadline for filing this Proof of Claim is March 25, 2014. If your Proof of Claim(s) is(are) not received by the Claims Administrator on or before March 25, 2014, your claim(s) will be barred (unless extended, for good cause only). The March 25, 2014 deadline for filing a Proof of Claim or release does not affect or change in any way the already expired July 2, 2009 deadline for filing claims in the BLMIS SIPA proceeding. The law governing the BLMIS SIPA proceeding absolutely bars the allowance of any claim not received by the Trustee on or before the already expired bar date of July 2, 2009. As such, the time to file a claim in the SIPA proceeding has long since passed and filing a Proof of Claim in this Settlement has no bearing on claims allowance and distributions from the SIPA proceeding.

Please file well in advance so that there will be time to refile if, for instance, your Proof of Claim is lost in the mail. Claims that are filed via email must be received by 11:59 p.m. (Prevailing Eastern Time) on March 25, 2014 to be considered timely.

Where To File

The completed and signed Proof of Claim form, together with supporting documents must be filed with the Claims Administrator electronically via email to Shapiro-HillClassSettlement@alixpartners.com or be mailed **promptly** to:

AlixPartners LLP Claims Processing Center Shapiro-Hill Class Settlement 2101 Cedar Springs Road, Suite 1100 Dallas, Texas 75201

IF YOU SUBMIT YOUR CLAIM BY MAIL, PLEASE SEND YOUR CLAIM FORM BY CERTIFIED MAIL RETURN RECEIPT REQUESTED

Your claim is not filed until received by the Claims Administrator. If the Claims Administrator does not receive your claim, although timely mailed, you may lose all your rights against JPMorgan. Your return receipt will be the only document you will receive that shows your claim has been received by the Claims Administrator.

THIS INSTRUCTION SHEET IS FOR YOUR FILE—DO NOT RETURN YOU SHOULD RETAIN A COPY OF THE COMPLETED CLAIM FORM FOR YOUR RECORDS.

BLMIS /MADOFF PROOF OF CLAIM FORM

<u>- related to the Class Settlement with JPMorgan Chase & Co.,</u>

JPMorgan Chase Bank, N.A., JPMorgan Securities LLC and JPMorgan Securities Ltd

BLMIS Account Name:	
BLMIS Account Number:	
Daytime Phone:	
Email:	
Address:	
Taxpayer I.D. Number:	
(Social Security No.):	
Contact Person:	

PLEASE NOTE

THIS PROOF OF CLAIM FORM SHOULD BE USED (1) IF YOU ARE A FORMER CUSTOMER OF BLMIS WHO DIRECTLY HAD CAPITAL INVESTED WITH BLMIS AS OF DECEMBER 11, 2008, AND THUS, UNDER THE NET INVESTMENT METHOD UPHELD BY THE UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT, HAD NET LOSSES AND (2) YOU DID NOT FILE A CUSTOMER CLAIM WITH THE TRUSTEE

- THE DEADLINE FOR FILING ALL PROOF OF CLAIMS IS MARCH 25, 2014. NO PROOF OF CLAIM WILL BE ALLOWED IF IT IS RECEIVED AFTER THAT DATE (UNLESS EXTENDED, FOR GOOD CAUSE ONLY).
- ALL CLAIMS ARE DATED AS OF THE DATE <u>RECEIVED</u> BY THE CLAIMS ADMINISTRATOR. CLAIMS THAT ARE FILED ELECTRONICALLY MUST BE RECEIVED BY 11:59 P.M. (PREVAILING EASTERN TIME) ON MARCH 25, 2014 TO BE CONSIDERED TIMELY.
- YOU MAY FILE YOUR CLAIM ELECTRONICALLY VIA EMAIL TO SHAPIRO-HILLCLASSSETTLEMENT@ALIXPARTNERS.COM OR SEND YOUR COMPLETED AND SIGNED CLAIM FORM TO THE CLAIMS ADMINISTRATOR VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED TO THE APPROPRIATE ADDRESS BELOW.
- IF YOU REQUIRE ADDITIONAL SPACE TO ANSWER ANY QUESTION, PLEASE ATTACH SEPARATE PIECES OF PAPER AND LABEL THE ANSWERS TO THE CORRESPONDING QUESTIONS ON THIS CLAIM FORM. ALL ATTACHMENTS MUST BE SIGNED BY YOU.

ANSWER ALL QUESTIONS AS FULLY AS POSSIBLE, TO THE EXTENT YOU
KNOW OR CAN ESTIMATE THE INFORMATION REQUESTED. IF YOU ARE
PROVIDING AN ESTIMATE BECAUSE YOU DISPUTE THE AMOUNT OF YOUR
CLAIM PROVIDED TO YOU FROM BLMIS'S BOOKS AND RECORDS
MAINTAINED BY THE SIPA TRUSTEE IRVING H. PICARD, YOU MUST SO
INDICATE.

The completed and signed claim form, together with supporting documents must be filed with the Claims Administrator electronically via email to Shapiro-HillClassSettlement@alixpartners.com or be mailed **promptly** to:

AlixPartners LLP Claims Processing Center Shapiro-Hill Class Settlement 2101 Cedar Springs Road, Suite 1100 Dallas, Texas 75201

I. <u>NET INVESTMENT CLAIM AMOUNT</u>

Your cash transactions with BLMIS from the inception of your account until December 2008, as reflected in the books and records of BLMIS maintained by the SIPA Trustee Irving H. Picard, are listed on the attached Exhibit A. The aggregate amount represents the Net Investment Amount. If you agree with the Net Investment Amount listed on Exhibit A, please use this amount to fill out this Section. You do not need to provide any further documentation regarding your cash transactions with BLMIS.

If you do not agree with the Net Investment Amount, please include proof of additional transactions and any supporting documentation you have, with a detailed description on a signed attachment. If you do not provide sufficient details, you may be sent a deficiency letter seeking additional information.

Claim Ai	mount:		
Is this an estimated amount?			
	YES □	NO 🗆	

II. <u>DESCRIPTION OF THE ACCOUNT</u>

A.	Pleas appli	cify the capacity in which you hold the account (check all that are):	
		1.	Individual capacity
		2.	As guardian, custodian, or conservator for the benefit of a ward or a minor under the Uniform Gift to Minors Act
		3.	As executor or administrator of an estate
		4.	As trustee for the trust beneficiary
		5.	In the name of a corporation, partnership, or unincorporated association.
		6.	As part owner of a joint account
		7.	In the name of a plan which, on December 11, 2008, had in effect a registration statement in accordance with the requirements of § 1031 of the Employee Retirement Income Security Act of 1974 and the regulations thereunder
		8.	As agent or nominee for a principle or beneficial owner (and not described in Items (II.B.1-8))
		9.	In any other capacity not described above in Items (III.B.1-9) (please specify the capacity):
other type of association) on whose behalf the following persons or does one of the following		r type wing	son (including a general partnership, limited partnership, corporation, or of association) on whose behalf the account is held one of the persons or does one of the following persons, alone or jointly, hold ore of the account? (Check all that are applicable):
		1.	BLMIS
		2	Officer of BLMIS
		3	Person in control of BLMIS
		4.	Partnership in which BLMIS is a general partner
		5.	Owner of ten percent or more of the capital stock of BLMIS

		6.	Employee of BLMIS whose duties include (a) the management of the business of BLMIS or any part thereof; (b) the handling of BLMIS customer funds; (c) the keeping of records pertaining to the trades or funds of customers of BLMIS; or (d) the signing or cosigning of checks or drafts on behalf of BLMIS			
		Managing agent of BLMIS				
		8.	A family member of ANY OF THE FOREGOING PERSONS (listed in Items (II.C.1-7), above), or any other relative, regardless of residency, defined as an individual related by affinity or consanguinity within the third degree as determined by the common law, or individual in a step or adoptive relationship with such degree			
		9.	"Affiliate" of BLMIS*			
		10.	Any of the persons listed in Items (II.C.1-8), above, if such person is associated with an affiliate of BLMIS as if the affiliate were BLMIS			
	*"Affiliate" of BLMIS is defined as:					
		A corporation 20% or more of whose outstanding voting securities are directly or indirectly owned, controlled, or held with power to vote, by BLMIS;				
		BLMIS	A person whose business is operated under a lease or operating agreement by BLMIS, or a person substantially all of whose property is operated under an operating agreement with BLMIS;			
			tity that otherwise, directly or indirectly, is controlled by or is under on control of BLMIS;			
			ity that operates the business of all or substantially all of the property MIS under a lease or operating agreement; or			
		An ent	ity or person that otherwise, directly or indirectly, controls BLMIS			
C.	Is this a joint account?					
		Check	one: YES \square NO \square			
	NO'	th	you selected "YES," specify the amount of your percentage interest in e account, and whether all participants in a joint account are claiming intly.			
	1.	My	percentage interest in the account is:			

2	are claiming:	Participants in a joint account are claiming:			(Check one)			
			_	□ SEPA	ARATELY		JOINTLY	
Do	you have any rela	ted accounts	?					
	Check one:	YES		NO				
NO	TE: If you select accounts. Y EACH ACC	OU MUST F				. •		

WHEN COMPLETING THE ABOVE PLEASE KEEP IN MIND:

- If you dispute the amount of your claim provided to you from BLMIS's books and records maintained by the SIPA Trustee Irving H. Picard, you may provide an estimated claim and supporting documentation.
- Proper documentation can speed the review, allowance, and satisfaction of your claim.
- Please enclose: copies (not originals) of any documentation or correspondence you believe will be of assistance in processing your claim, including, but not limited to, bank statements and copies of your cash transactions with BLMIS.
- If you do not dispute the amount of your claim provided to you from BLMIS's books and records maintained by the SIPA Trustee Irving H. Picard, you do not need to submit any further documentation regarding your cash transactions with BLMIS.
- If, at any time, you complained in writing about the handling of your BLMIS account to any person or entity or regulatory authority, please be sure to provide with your claim copies of the complaint and all related correspondence, as well as copies of any replies that you received.

Please list the full name, address, phone number, and email address of anyone assisting you in the preparation of this claim form:				
Full name:				
Address:				
Phone number:				
Email address:				
If more than one person exact format above.	is assisting you, attach additional pages providing the information in the			
• •	of of Claim, I (we) agree to be subject to the jurisdiction of the United the Southern District of New York for any matters relating to or arising			
UNITED STATES, TH	NDER PENALTY OF PERJURY UNDER THE LAWS OF THE LAT THE FOREGOING CLAIM IS TRUE AND ACCURATE TO FORMATION AND BELIEF.			
Date	Signature			

(If ownership of the account is shared (*i.e.*, there is more than one name on the account), all must sign above. Give each owner's name, address, phone number, and extent of ownership on a signed separate sheet. Other than a personal account, e.g., corporate, trustee, agent, custodian, etc., also state your capacity and authority. Please supply the trust agreement or other proof of authority.)

Date

Signature