

**UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK**

OKLAHOMA POLICE PENSION AND  
RETIREMENT SYSTEM,

Plaintiff,

- against -

U.S. BANK NATIONAL ASSOCIATION (as Trustee  
Under Various Pooling and Servicing Agreements),

Defendant.

CASE NO. 1:11-CV-08066-JGK

**PROOF OF CLAIM AND RELEASE FORM**

**GENERAL INSTRUCTIONS**

1. To be eligible to recover as a member of the Settlement Class based on your claims in the lawsuit entitled *Oklahoma Police Pension and Retirement System v. U.S. Bank National Association (as Trustee Under Various Pooling and Servicing Agreements)* (case number 1:11-cv-08066-JGK) (the "Action"), you must complete, sign, and timely submit this Proof of Claim and Release Form ("Proof of Claim Form") together with the additional documentation specified below. If you fail to timely submit a properly addressed (as set forth below) Proof of Claim Form with the additional required documentation, your claim may be rejected and you may be precluded from any recovery in connection with the proposed settlement of the Action ("Settlement").
2. Timely submission of this Proof of Claim Form, however, does not ensure that you will share in the proceeds of the Settlement.
3. You must submit your completed and signed Proof of Claim Form by August 24, 2015, addressed as follows: Bear Stearns TIA Settlement, c/o KCC Class Action Services, P.O. Box 43034, Providence, RI 02940-3034. If you submit your Proof of Claim Form by first-class mail, it will be deemed submitted on the date of the postmark. Otherwise, it will be deemed submitted when received.
4. If you are not a member of the Settlement Class as defined in the Notice of Pendency of Class Action and of Proposed Settlement and Final Approval Hearing (the "Notice"), DO NOT submit a Proof of Claim Form.
5. If you are a member of the Settlement Class as defined in the Notice and you do not timely request exclusion therefrom, you will be bound by the terms of any judgment entered in the Action with respect to the Settlement, including any releases and injunctions provided therein, WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM FORM.

**INSTRUCTIONS FOR CLAIMANT IDENTIFICATION SCHEDULE**

1. This Proof of Claim Form must be submitted by the beneficial purchaser or acquirer of the Notes upon which this claim is based, or by the authorized legal representative of such purchaser or acquirer.
2. If you purchased or otherwise acquired any of the Notes and held the Note(s) in your name, you are the beneficial purchaser as well as the record purchaser. If, however, you purchased or otherwise acquired any of the Notes and the Note(s) were registered in the name of a third party, such as a nominee or a brokerage firm, you are the beneficial purchaser, and the third party is the record purchaser.
3. Use Part I of this Proof of Claim Form below, entitled "Claimant Identification," to identify the beneficial purchaser.
4. All joint purchasers must sign this Proof of Claim Form.
5. Executors, administrators, guardians, conservators, trustees, or other legal representatives must complete and sign this Proof of Claim Form on behalf of persons and entities represented by them. Satisfactory evidence of their authority must accompany this Proof of Claim Form and their titles or capacities must be stated. The social security or taxpayer identification number and telephone number of the beneficial owner may be used in verifying the claim. Failure to provide the foregoing information could delay verification of the claim or result in rejection of the claim.

**INSTRUCTIONS FOR SCHEDULE OF TRANSACTIONS**

1. Use Part II of this Proof of Claim Form below, entitled "Schedule of Transactions in Notes," to supply all required details of your transactions in and holdings of the Notes. If you need more space or additional schedules, attach separate sheets in accordance with the instructions in Part II below. Sign and print or type your name on each additional sheet.
2. Please provide all of the requested information with respect to *all* of your purchases, other acquisitions, sales, and other dispositions of the Notes, regardless of whether such transactions resulted in a profit or loss. Failure to report all such transactions may result in the rejection of your claim.
3. List each transaction separately and in chronological order, by trade date, beginning with the earliest. You must accurately provide the month, day, and year of each transaction you list.
4. Copies of documents evidencing your transactions in and holdings of the Notes (such as broker confirmations) must be attached to the Proof of Claim Form when you submit it. Failure to provide this documentation could delay verification of your claim or result in the rejection of your claim.
5. The above requests are designed to provide the minimum amount of information necessary to process the simplest claims. The Claims Administrator may request additional information as required to calculate your losses, if any, efficiently and reliably, and to process your claim. If the Claims Administrator cannot perform the calculation accurately or at a reasonable cost to the Settlement Class with the information provided, the Claims Administrator may condition acceptance of the claim on the production of additional information and/or your agreement to pay any increased costs due to the nature and/or scope of the claim.



UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

*Oklahoma Police Pension and Retirement System v. U.S. Bank National Association.* (No. 1:11-cv-08066-JGK)

**PROOF OF CLAIM AND RELEASE**

**Must be submitted no later than: August 24, 2015**

**Please type or print**

**PART I: CLAIMANT IDENTIFICATION**

Names of Beneficial Purchasers/Acquirers (including Joint Purchasers/Acquirers)

Name of Beneficial Purchasers/Acquirers (including Joint Purchasers/Acquirers)(if necessary)

Street Address

Street Address Line 2

City

State and Zip Code

Foreign Province and Country

Telephone Number

Last 4 Digits of Social Security Number or Taxpayer Identification Number

**NOTE:** A separate Proof of Claim Form should be submitted for each separate person or legal entity (e.g., a Proof of Claim Form from joint owners should not include separate transactions of just one of the joint owners, and an individual should not combine his or her IRA transactions with transactions made solely in the individual's name). Conversely, a single Proof of Claim Form should be submitted on behalf of one legal entity that includes all transactions made by that entity no matter how many separate accounts that entity has (e.g., a corporation with multiple brokerage accounts should include all transactions in the Notes on one Proof of Claim Form, no matter how many accounts were associated with the transactions).

**NOTICE REGARDING ELECTRONIC FILES:** Certain claimants with large numbers of transactions may request, or may be requested, to submit information regarding their transactions in electronic files. All claimants **MUST** submit a manually signed paper Proof of Claim Form, whether or not they also submit electronic copies, either listing all their transactions or including a notation to see corresponding electronic file for all transactions. If you wish to file your claim electronically, you must contact the Claims Administrator at [info@bearstearnstiasettlement.com](mailto:info@bearstearnstiasettlement.com) or visit the website for the Settlement, [www.BearStearnsTIASettlement.com](http://www.BearStearnsTIASettlement.com), to obtain the required file layout. No electronic files will be considered to have been properly submitted unless the Claims Administrator issues to the claimant a written acknowledgment of receipt and acceptance of electronically submitted data.

PROCEED TO PART II OF THIS PROOF OF CLAIM FORM.



UOKPCW1



**PART II: SCHEDULE OF TRANSACTIONS IN NOTES**



**A. PURCHASES AND OTHER ACQUISITIONS**

List all purchases and other acquisitions of the Notes listed on [www.BearStearnsTIASettlement.com](http://www.BearStearnsTIASettlement.com) in chronological order, starting with the earliest such transaction. Be sure to attach the required documentation.

Date(s) of Purchase or Acquisition (list chronologically) MM/DD/YYYY	CUSIP	Face Amount Purchased or Acquired	Price	Total Cost*
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$

\* excluding commissions, transfer taxes or other fees

**B. SALES AND OTHER DISPOSITIONS**

List all sales and other dispositions of the Notes listed on [www.BearStearnsTIASettlement.com](http://www.BearStearnsTIASettlement.com) in chronological order, starting with the earliest such transaction. Be sure to attach the required documentation.

Date(s) of Sale or Disposition (list chronologically) MM/DD/YYYY	CUSIP	Face Amount Sold or Disposed	Price	Total Proceeds*
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$
/ /		\$	\$	\$

\* excluding commissions, transfer taxes or other fees

**C. RETAINED NOTES**

State the CUSIP and face amount of each Note listed on [www.BearStearnsTIASettlement.com](http://www.BearStearnsTIASettlement.com) that you still own as of the date you sign this Proof of Claim Form. Be sure to attach documentation evidencing such continued ownership.

CUSIP	FACE AMOUNT

If you need additional space to list your transactions or continued holdings, check the box below, photocopy this page, and write and sign your name on each copy you submit.

If you do not check this box these additional pages may not be reviewed.

**PROCEED TO PART III OF THIS PROOF OF CLAIM FORM. YOU MUST READ AND SIGN BELOW.  
FAILURE TO SIGN WILL RESULT IN REJECTION OF YOUR CLAIM.**



### PART III: DEFINITIONS

1. **“Released Claims”** means any and all claims, debts, demands, rights or causes of action or liabilities whatsoever, including rights of appeal, whether based on federal, state, local, statutory or common law or any other law, rule or regulation, whether fixed or contingent, accrued or unaccrued, liquidated or unliquidated, at law or in equity, matured or un-matured, whether class, derivative and/or individual in nature, including both known claims and “Unknown Claims” (as defined below), (1) that have been asserted in this Action by Plaintiff on behalf of the Settlement Class against any of the Released Parties with respect to the Covered Trusts; or (2) that could have been asserted in this Action, or in any other action or forum by or on behalf of the Plaintiff and/or the members of the Settlement Class or any of them against any of the Released Parties that arise out of or are based upon or relate in any way to the allegations, transactions, facts, matters or occurrences, representations or omissions involved, set forth, or referred to in the Action with respect to the Covered Trusts. “Released Claims” also includes all rights of appeal from any prior decision of the Court in this Action with respect to the Covered Trusts. “Released Claims” also includes all rights to participate in or benefit from any settlement, judgment, or other recovery in derivative litigation that has been or may be filed against U.S. Bank on behalf of the Covered Trusts arising from or related to the “Released Claims” as defined above, and the members of the Settlement Class shall irrevocably waive and/or assign all such rights to U.S. Bank. “Unknown Claims” includes any and all Released Claims with respect to the Covered Trusts that Plaintiff or any member of the Settlement Class does not know or suspect to exist in his, her, or its favor at the time of the release of the Released Parties, which if known by him, her or it might have affected his, her, or its decision(s) with respect to the Settlement, including any and all provisions, rights and benefits conferred by any law of any state or territory of the United States, or principle of common law, which is similar, comparable, or equivalent to Cal. Civ. Code §1542, which provides: “A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor.” For avoidance of doubt, this Settlement is not intended to and does not release any claims or rights of appeal of Plaintiff Oklahoma Police Pension and Retirement System or members of the Settlement Class relating to the nine Bear Stearns MBS trusts dismissed from this case by the Court’s Order dated December 13, 2013. Additionally, note that the Releasing Parties’ ability to participate in a recovery provided by the settlement of *In the matter of the application of U.S. Bank National Association, et al.*, Index No. 652382/2014 (N.Y. Sup. Ct.), will not be affected by their decision to participate in, or to exclude themselves from, this Settlement.
2. **“Released Parties”** means U.S. Bank, in its individual capacity and in its capacity as trustee of the Covered Trusts, and its past, present or future representatives, trusts, trustees, heirs, executors, estates, administrators, predecessors, successors, assigns, attorneys, accountants, parents, subsidiaries, affiliates, insurers, reinsurers, employers, employees, members, directors, officers, representatives, and agents.
3. **“Releasing Parties”** means Plaintiff, the Settlement Class members, and their past and present trustees, named fiduciaries, directors, officers, employees, auditors, principals, attorneys, predecessors, successors, parents, subsidiaries, and divisions.
4. Other capitalized terms used herein have the same meanings assigned to them in the Parties’ Stipulation of Settlement dated as of December 17, 2014, a copy of which was filed with the Court under ECF document number 108-1 and is available at [www.BearStearnsTIASettlement.com](http://www.BearStearnsTIASettlement.com).

**PART IV: RELEASE OF CLAIMS AND RELATED MATTERS**



**A. RELEASES AND INJUNCTIONS**

I (We) understand, acknowledge, consent, and intend that, pursuant to the Judgment Order, upon the Effective Date, I (we) shall be deemed to have fully, finally, and forever released, relinquished, waived, discharged, and dismissed with prejudice all Released Claims as to all Released Parties with respect to the Covered Trusts.

I (We) understand, acknowledge, consent, and intend that, pursuant to the Judgment Order, upon the Effective Date, I (we) shall be deemed to have waived, to the fullest extent permitted by law, any and all provisions, rights, and benefits conferred by California Civil Code §1542 (and any similar provision of any other jurisdiction) in connection with the releases set forth above. Section 1542 provides:

**A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor.**

I (We) understand and acknowledge, after having had the opportunity to confer with counsel, that I (we) hereafter may discover facts in addition to or different from those that I (we) now know or believe to be true with respect to the subject matter of the Released Claims. Nevertheless, I (we) understand, acknowledge, consent, and intend that, upon the Effective Date, I (we) shall be deemed to have fully, finally, and forever released, relinquished, waived, discharged, and dismissed with prejudice all Released Claims as to all Released Parties with respect to the Covered Trusts, whether known, unknown, suspected, unsuspected, concealed, hidden, accrued, unaccrued, contingent, or non-contingent.

I (We) understand, acknowledge, consent, and intend that, pursuant to the Judgment Order, upon the Effective Date, I (we) shall be permanently enjoined from (i) asserting or pursuing any of the Released Claims against any of the Released Parties with respect to the Covered Trusts, whether directly, indirectly, or derivatively, whether on my (our) own behalf, on behalf of a Covered Trust, or otherwise, and whether alone or in conjunction with others.

I (We) understand, acknowledge, consent, and intend that the foregoing releases and injunctions and other provisions shall bind me (us), as well as my (our joint and respective) past and present trustees, named fiduciaries, directors, officers, employees, auditors, principals, attorneys, predecessors, successors, parents, subsidiaries, divisions, participants and beneficiaries.

**B. SIGNATURE AND CERTIFICATIONS**

By signing and submitting this Proof of Claim Form, you (or your legal representative on your behalf) certify as follows:

I (We) submit this Proof of Claim Form under the terms of the Stipulation. I (We) submit to the jurisdiction of the Court with respect to my (our) claim as a Settlement Class member (Settlement Class members) and for purposes of enforcing the releases and injunctions set forth herein. I (We) further acknowledge that I am (we are) bound by and subject to the terms of any judgment that may be entered in the Action with respect to the Settlement, including all releases and injunctions contained therein. I (We) have not submitted any other claim covering the same Notes and know of no other person having done so on my (our) behalf.

I (We) hereby acknowledge that I (we) may be a Settlement Class member(s), and that I (we) have not submitted a request for exclusion from the Settlement Class and do not know of any such request having been submitted on my (our) behalf.





I (We) hereby acknowledge that I (we) have included the information requested above about all of my (our) transactions in the Notes. I (We) hereby acknowledge that I (we) own(ed) the Notes identified in this Proof of Claim Form.

I (We) hereby agree to furnish such additional information with respect to my (our) transactions in or holdings of the Notes as the Claims Administrator reasonably may request or the Court may require, and I (we) acknowledge that if I (we) do not do so, my (our) claim may be rejected.

I (We) hereby waive trial by jury, to the extent it exists, with respect to this claim, and consent to the Court's summary disposition of the determination of the validity or amount of the claim.

I (We) hereby represent and warrant that I (we) have not assigned, hypothecated, conveyed, transferred, or otherwise granted or given any interest in any of the Released Claims to any other person or entity.

I (We) hereby certify that I am (we are) not subject to backup withholding under the provisions of §3406(a)(1)(c) of the Internal Revenue Code because (i) I am (we are) exempt from backup withholding, (ii) I (we) have not been notified by the Internal Revenue Service that I am (we are) subject to backup withholding as a result of a failure to report all interest and dividends, or (iii) the Internal Revenue Service has notified me (us) that I am (we are) no longer subject to backup withholding.

NOTE: If you have been notified by the Internal Revenue Service that you are subject to backup withholding, please strike the language that you are not subject to backup withholding in the certification above. The Internal Revenue Service does not require your consent to any provision other than the certification required to avoid backup withholding.

I (We) declare under penalty of perjury under the laws of the United States that the statements made and answers given in this Proof of Claim Form are true and correct and that the documents submitted herewith are true and genuine.

\_\_\_\_\_  
Signature of Claimant

\_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Print Name of Claimant

\_\_\_\_\_  
Signature of Joint Claimant, if any

\_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Print Name of Joint Claimant, if any

If the Claimant is other than an individual, or is not the person completing this form, the following also must be provided:

\_\_\_\_\_  
Signature of Person Completing Form

\_\_\_\_\_  
Date (mm/dd/yyyy)

\_\_\_\_\_  
Print Name of Person Completing Form

\_\_\_\_\_  
Capacity of Person Signing (Executor, President, Trustee, etc.)





**ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME**

**THANK YOU FOR YOUR PATIENCE**

**Reminder Checklist:**

1. Please sign the Certification section of the Proof of Claim Form on Page 6.
2. If this claim is being made on behalf of joint claimants, both must sign.
3. Please remember to attach supporting documentation.
4. Do not send originals of any supporting documentation.
5. Keep a copy of your Proof of Claim Form and all documentation submitted for your records.
6. The Claims Administrator will acknowledge receipt of your Proof of Claim Form by mail, within 60 days. If you do not receive an acknowledgment postcard within 60 days, please call the Claims Administrator toll free at 1-877-564-2244.
7. If you move, please send your new address to:

Bear Stearns TIA Settlement  
c/o KCC Class Action Services  
P.O. Box 43034  
Providence, RI 02940-3034

Do not use highlighter on the Proof of Claim Form or supporting documentation.

**This Proof of Claim Form must be submitted by August 24, 2015.**

