

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF WASHINGTON
AT SPOKANE

IN RE METROPOLITAN
SECURITIES LITIGATION

Civil Action No. 04-0025-FVS

PROOF OF CLAIM AND RELEASE

I. GENERAL INSTRUCTIONS

1. This Proof of Claim and Release has been sent to you at your request, and because you have indicated that you believe you are a Member of the Settlement Class in this matter. Because Metropolitan's records do not include your potentially eligible transactions, you must complete and sign this Proof of Claim and Release and provide supporting documents for any eligible transactions you claim. If you fail to file a properly addressed Proof of Claim and Release and supporting documents, your claim may be rejected, and you may be determined to be ineligible for any payment from the Net Settlement Fund.

2. Submission of this Proof of Claim and Release, however, does not assure that you will share in the proceeds of settlement in the Litigation.

3. YOU MUST MAIL YOUR COMPLETED AND SIGNED PROOF OF CLAIM AND RELEASE POSTMARKED ON OR BEFORE SEPTEMBER 30, 2010, ADDRESSED AS FOLLOWS:

In Re Metropolitan Securities Litigation
c/o Gilardi & Co. LLC
P.O. Box 990
Corte Madera, CA 94976-0990

If you are NOT a Member of the Settlement Class, as defined in the Notice of Proposed Settlement of Class Action and Hearing ("Notice"), DO NOT submit a Proof of Claim and Release form.

4. If you are a Member of the Settlement Class, you are bound by the terms of any judgment entered in the Litigation, WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM AND RELEASE FORM.

II. CLAIM FORM

1. Use Part II of this form entitled "Schedule of Transactions in Metropolitan and Summit" to supply all required details of your transaction(s). If you need more space or additional schedules, attach separate sheets giving all of the required information in substantially the same form. Sign and print or type your name on each additional sheet.

2. On the schedules, provide all of the requested information with respect to your eligible purchases of Metropolitan and / or Summit Securities that took place at any time on or between and including February 13, 2001 and July 31, 2003 (the "Class Period"), and **all** of your sales of Metropolitan and / or Summit Securities that took place at any time on or between and including February 13, 2001 and December 12, 2003, whether such transactions resulted in a profit or a loss. Failure to report all such transactions may result in the rejection of your claim.

3. List each transaction in the Class Period 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. Documentation of your transactions in Metropolitan and / or Summit securities should be attached to your claim. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim.

5. The above requests are designed to provide the minimum amount of information necessary to process the most simple claims. The Claims Administrator may request additional information as required to efficiently and reliably calculate your losses. In some cases where the Claims Administrator cannot perform the calculation accurately or at a reasonable cost to the Class with the information provided, the Claims Administrator may condition acceptance of the claim upon the production of additional information and/or the hiring of an accounting expert at the claimant's cost.



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Only



UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF WASHINGTON
AT SPOKANE

In re Metropolitan Securities Litigation
Civil Action No. 04-0025-FVS

PROOF OF CLAIM AND RELEASE

Please Type or Print in the Boxes Below
Do NOT use Red Ink, Pencil, or Staples

**Must be Postmarked
on or before
September 30, 2010**

MTPL2

PART I: CLAIMANT IDENTIFICATION

Last Name										M.I.	First Name									
Last Name (Co-Beneficial Owner)											First Name (Co-Beneficial Owner)									
<input type="radio"/> IRA <input type="radio"/> Joint Tenancy <input type="radio"/> Employee <input type="radio"/> Individual <input type="radio"/> Other _____																				
Company Name (Beneficial Owner - If Claimant is not an Individual) or Custodian Name (specify)																				
Filer Name, If Different from Beneficial Owner Listed Above																				
Capacity of the Filer, if Not Beneficial Owner																				
Account #/Fund # (Not Necessary for Individual Filers)										Filer Tax ID Number										

Social Security Number										Taxpayer Identification Number									
Telephone Number (Work)										Telephone Number (Home)									
Email Address																			

MAILING INFORMATION

Address																			
Address																			
City										State		Zip Code							
Foreign Province										Foreign Zip Code					Foreign Country Name/Abbreviation				

FOR CLAIMS PROCESSING ONLY	PB	PC	<input type="radio"/> ND <input type="radio"/> IHI	<input type="radio"/> NS <input type="radio"/> NTIN	<input type="radio"/> ICI <input type="radio"/> OTHER	<input type="radio"/> OPT <input type="radio"/> MRG <input type="radio"/> BOTH	M M / D D / Y Y Y Y	FOR CLAIMS PROCESSING ONLY
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PART II. SCHEDULE OF TRANSACTIONS IN METROPOLITAN AND SUMMIT SECURITIES

YOU MUST SUBMIT SUPPORTING DOCUMENTATION FOR THE TRANSACTIONS CLAIM BELOW

***Type of Security**

A. METROPOLITAN DEBENTURE

C. METROPOLITAN PREFERRED STOCK

B. SUMMIT INVESTMENT CERTIFICATE

A. Purchases between (February 13, 2001 – July 31, 2003, inclusive):

PURCHASES										
*Type of Security	Purchase Date(s) (List Chronologically)					Number of Shares Purchased	Total Investment			
	M	M	D	D	Y	Y				
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

B. Sales between (February 13, 2001 – December 12, 2003, inclusive):

SALES										
*Type of Security	Sale Date(s) (List Chronologically)					Number of Shares Sold	Sales Proceeds Received			
	M	M	D	D	Y	Y				
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you require additional space, attach extra schedules in the same format as above. Sign and print your name on each additional page.

QUESTIONS? PLEASE CALL 1-800-447-7657, email metropolitanlitigation@gilardi.com OR visit www.metropolitanlitigationsettlement.com



I (WE) DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA THAT ALL OF THE FOREGOING INFORMATION SUPPLIED ON THIS PROOF OF CLAIM AND RELEASE FORM BY THE UNDERSIGNED IS TRUE AND CORRECT.

Executed this _____ day of _____ in _____
(Month/Year) (City/State/Country)

(Sign your name here)

(Sign your name here)

(Type or print your name here)

(Type or print your name here)

(Capacity of person(s) signing, e.g.,
Beneficial Purchaser or Acquirer, Executor or Administrator)

(Capacity of person(s) signing, e.g.,
Beneficial Purchaser or Acquirer, Executor or Administrator)

**ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME.
THANK YOU FOR YOUR PATIENCE.**

Reminder Checklist:

1. Please sign the above release and declaration.
2. Remember to attach supporting documentation.
3. Do not send original stock certificates.
4. Keep a copy of your claim form and all supporting documentation for your records.
5. If you desire an acknowledgment of receipt of your claim form please send it Certified Mail, Return Receipt Requested.
6. If you move, please send the Claims Administrator your new address.

