UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

IN RE: SATYAM COMPUTER SERVICES LTD.
SECURITIES LITIGATION

No. 09-MD-2027-BSJ

PROOF OF CLAIM AND RELEASE

TO BE ELIGIBLE TO RECEIVE A SHARE OF THE NET SETTLEMENT FUNDS IN CONNECTION WITH THE SATYAM SETTLEMENT AND THE SETTLEMENT WITH THE PWC ENTITIES, YOU MUST COMPLETE AND SIGN THIS PROOF OF CLAIM AND RELEASE FORM, AND RETURN IT TO:

IN RE SATYAM COMPUTER SERVICE LTD. SECURITIES LITIGATION
CLAIMS ADMINISTRATOR
C/O RUST CONSULTING, INC.
P.O. BOX 2461
FARIBAULT, MN 55021-9161

YOU MUST COMPLETE AND SIGN THIS PROOF OF CLAIM AND RELEASE AND MAIL IT BY PREPAID, FIRST-CLASS MAIL, **POSTMARKED NO LATER THAN SEPTEMBER 23, 2011**. FAILURE TO SUBMIT YOUR CLAIM BY SEPTEMBER 23, 2011 WILL SUBJECT YOUR CLAIM TO REJECTION AND PRECLUDE YOU FROM BEING ELIGIBLE TO RECEIVE ANY MONEY IN CONNECTION WITH THE SETTLEMENTS.

DO NOT MAIL OR DELIVER YOUR CLAIM FORM TO THE COURT, THE SETTLING PARTIES OR THEIR COUNSEL. SUBMIT YOUR CLAIM ONLY TO THE CLAIMS ADMINISTRATOR AT THE ADDRESS SET FORTH ABOVE.

GENERAL INSTRUCTIONS

- 1. It is important that you completely read and understand the Notice of (I) Pendency of Class Action; (II) Proposed Settlements with Satyam Computer Services Ltd. and the PwC Entities; and (III) Motion for an Award of Attorneys' Fees and Reimbursement of Expenses (the "Notice") that accompanies this Proof of Claim and Release form ("Proof of Claim" or "Claim Form"), and the Plan of Allocation included in the Notice. The Notice and the Plan of Allocation describe the two proposed settlements that will resolve this Action against Settling Defendants, Satyam Computer Services Ltd., PricewaterhouseCoopers International Limited, Price Waterhouse (Bangalore), PricewaterhouseCoopers Private Limited, Lovelock & Lewes and PriceswaterhouseCoopers LLP, how the Class Members are affected by the two Settlements, and the manner in which the Net Settlement Funds will be distributed, if the Court approves the Settlements and the Plan of Allocation. The Notice also contains the definitions of many of the defined terms (which are indicated by initial capital letters) used in this Claim Form. By signing and submitting this Claim Form, you will be certifying that you have read the Notice, including the terms of the releases described therein and provided for herein.
- This Proof of Claim is directed to all persons and entities who, from January 6, 2004 through January 6, 2009, inclusive (the "Class Period"): (a) purchased or otherwise acquired Satyam American Depositary Shares ("ADSs") traded on the New York Stock Exchange (the "NYSE"); and/or (b) were investors residing in the United States at the time they purchased or otherwise acquired Satyam Ordinary Shares traded on the National Stock Exchange of India or the Bombay Stock Exchange (the "Indian Exchanges") and who were damaged thereby (the "Class"). The Class includes the Sub-Classes consisting of: (a) all persons who exercised options to purchase Satyam ADSs pursuant to Satyam Employee ADS Plans during the Class Period and who were damaged thereby; and (b) all United States residents who exercised options to purchase Satyam Ordinary Shares pursuant to Satyam Employee Ordinary Share Option Plans during the Class Period and who were damaged thereby. Excluded from the Class are the Settling Defendants and Non-Settling Defendants; persons who, during the Class Period, were officers and/or directors of any of the Settling Defendants or of their respective parents, subsidiaries and/or affiliates; persons who, during the Class Period, were officers, directors, members or partners in any other entity Defendant or any of their respective parents, subsidiaries and/or affiliates; any entity in which any Defendant has or had a controlling interest; the Defendants' liability insurance carriers and any affiliates or subsidiaries thereof; members of the immediate families of any of the foregoing and their legal representatives, heirs, successors or assigns. Also excluded from the Class are any Class Members who properly exclude themselves by filing a valid and timely request for exclusion in accordance with the requirements set forth in the Notice.
- 3. IF YOU ARE NOT A CLASS MEMBER, OR IF YOU, OR SOMEONE ACTING ON YOUR BEHALF, FILED A REQUEST FOR EXCLUSION FROM THE CLASS, DO NOT SUBMIT A PROOF OF CLAIM. YOU MAY NOT, DIRECTLY OR INDIRECTLY, PARTICIPATE IN THE SETTLEMENTS IF YOU ARE NOT A CLASS MEMBER. THUS, IF YOU FILE A VALID REQUEST FOR EXCLUSION IN A TIMELY MANNER, ANY PROOF OF CLAIM THAT YOU SUBMIT, OR THAT MAY BE SUBMITTED ON YOUR BEHALF, WILL NOT BE ACCEPTED.

- 4. All Class Members will be bound by the terms of the Judgments entered in the Action WHETHER OR NOT A CLAIM FORM IS SUBMITTED, unless a valid request for exclusion from the Class is received by August 19, 2011. The Judgments will release and enjoin the filing or continued prosecution of the Released Plaintiffs' Claims against the Released Settling Defendant(s) Parties, as described in the Notice.
- 5. You may only participate in the distribution of the Net Settlement Funds if you are a member of the Class and if you complete and return this form as specified below. If you fail to file a timely, properly addressed, and completed Claim Form, your claim may be rejected and you may be precluded from receiving any distribution from the Net Settlement Funds. You only need to submit <u>one</u> Proof of Claim form to make a claim in <u>both</u> Settlements.
- 6. **Submission of this Claim Form does not guarantee that you will share in the Net Settlement Funds.** The distribution of the Net Settlement Funds will be governed by the Plan of Allocation set forth in the Notice, if approved by the Court, or such other plan of allocation as the Court approves.
- 7. Use Part III of this Claim Form entitled "SCHEDULE OF TRANSACTIONS IN SATYAM SECURITIES" to supply all required details of your transaction(s) in and holdings of Satyam ADSs and/or Ordinary Shares. On the schedule, please provide all of the information requested below with respect to *all* of your holdings, purchases, other acquisitions and sales of Satyam ADSs and/or Ordinary Shares, whether such transactions resulted in a profit or a loss. Failure to report all transactions during the requested periods may result in the rejection of your claim.
- 8. You are required to submit genuine and sufficient documentation for all your transaction(s) in and holdings of Satyam ADSs and/or Ordinary Shares as set forth in the Schedule of Transactions in Part III. Documentation may consist of copies of brokerage confirmations or monthly statements. The Settling Parties and the Claims Administrator do not independently have information about your investments in Satyam ADSs or Ordinary Shares. IF SUCH DOCUMENTS ARE NOT IN YOUR POSSESSION, PLEASE OBTAIN COPIES OR EQUIVALENT CONTEMPORANEOUS DOCUMENTS FROM YOUR BROKER. FAILURE TO SUPPLY THIS DOCUMENTATION COULD DELAY VERIFICATION OF YOUR CLAIM OR COULD RESULT IN REJECTION OF YOUR CLAIM. DO NOT SEND ORIGINAL DOCUMENTS. Please keep a copy of all documents that you send to the Claims Administrator.
- 9. Separate Claim Forms should be submitted for each separate legal entity (*e.g.*, a claim 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 Claim Form should be submitted on behalf of one legal entity including all transactions made by that entity on one Claim Form, no matter how many separate accounts that entity has (*e.g.*, a corporation with multiple brokerage accounts should include all transactions made in all accounts on one Claim Form).
- 10. All joint beneficial owners must each sign this Claim Form. If you purchased or acquired Satyam ADSs or Ordinary Shares and held the securities in your name, you are the beneficial owner as well as the record owner. If, however, you purchased or acquired Satyam ADSs or Ordinary Shares and the securities were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial owner of these securities, but the third party is the record owner.
- 11. Agents, executors, administrators, guardians, and trustees must complete and sign the Claim Form on behalf of persons represented by them, and they must:
 - (a) expressly state the capacity in which they are acting;
 - (b) identify the name, account number, Social Security Number (or taxpayer identification number), address and telephone number of the beneficial owner of (or other person or entity on whose behalf they are acting with respect to) the Satyam securities; and
 - (c) furnish herewith evidence of their authority to bind the person or entity on whose behalf they are acting. (Authority to complete and sign a Claim Form cannot be established by stockbrokers demonstrating only that they have discretionary authority to trade stock in another person's accounts.)
- 12. By submitting a signed Claim Form, you will be swearing that you:
 - (a) own(ed) the Satyam securities you have listed in the Claim Form; or
 - (b) are expressly authorized to act on behalf of the owner thereof.
- 13. By submitting a signed Claim Form, you will be swearing to the truth of the statements contained therein and the genuineness of the documents attached thereto, subject to penalties of perjury under the laws of the United States of America. The making of false statements, or the submission of forged or fraudulent documentation, will result in the rejection of your claim and may subject you to civil liability or criminal prosecution.

- 14. **NOTICE REGARDING ELECTRONIC FILES**: Certain Claimants with large numbers of transactions may request to, or may be requested to, submit information regarding their transactions in electronic files. To obtain the mandatory electronic filing requirements and file layout, you may visit the Claims Administrator's website at www.SatyamSecuritiesSettlement.com or you may email the Claims Administrator at info@SatyamSecuritiesSettlement.com. Any file not in accordance with the required electronic filing format will be subject to rejection. No electronic files will be considered to have been properly submitted unless the Claims Administrator issues an email after processing your file with your claim numbers and respective account information. Do not assume that your file has been received or processed until you receive this email. If you do not receive such an email within 10 days of your submission, you should contact the Claims Administrator's electronic filing department at info@SatyamSecuritiesSettlement.com to inquire about your file and confirm it was received and acceptable.
- 15. If you have questions concerning the Claim Form, or need additional copies of the Claim Form or the Notice, you may contact the Claims Administrator, Rust Consulting, Inc., at the above address or by toll-free phone at 1-888-227-1652, or you may download the documents from www.SatyamSecuritiesSettlement.com.

CHECKLIST

- 1. Please sign the release and certification on page 6 of the Claim Form. If this Claim Form is being made on behalf of joint Claimants, then both must sign.
- 2. Remember to attach only **copies** of acceptable supporting documentation.
- 3. Please do not highlight any portion of the Claim Form or any supporting documents.
- 4. Do not send original stock certificates or documentation. These items cannot be returned to you by the Claims Administrator.
- 5. Keep copies of the completed Claim Form and documentation for your own records.
- 6. The Claims Administrator will acknowledge receipt of your Claim Form by mail, within 60 days. Your claim is not deemed filed until you receive an acknowledgement postcard. If you do not receive an acknowledgement postcard within 60 days, please call the Claims Administrator toll free at 1-888-227-1652.
- If your address changes in the future, or if this Claim Form was sent to an old or incorrect address, please send the Claims Administrator written notification of your new address. If you change your name, please inform the Claims Administrator.
- 8. If you have any questions or concerns regarding your claim, please contact the Claims Administrator at the above address or at 1-888-227-1652, or visit www.SatyamSecuritiesSettlement.com.

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MUST BE POSTMARKED
NO LATER THAN
SEPTEMBER 23. 2011

In re Satyam Computer Securities Litigation

PROOF OF CLAIM AND RELEASE

Use Blue or Black Ink Only

FOR OFFICIAL USE ONLY

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PART I. CLAIMANT IDENTIFICATION	- Complete either S	Section A or B and then $\mathfrak g$	proceed to C. Pl	ease type or print
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•	I, joint, or IRA account. Otherwise, proceed to B.
Last Name (Beneficial Owner)	First Name (Beneficial Owner)
Last Name (Joint Beneficial Owner, if applicable)	First Name (Joint Beneficial Owner)
Name of IRA Custodian (if applicable)	
If this account is an IRA, and if you would like any check that you MA	Y be eligible to receive made payable to the IRA
account, please include "IRA" in the "Last Name" box above ($e.g.$, Jo	nes IRA).
B. Complete this Section ONLY if the Beneficial Owner is an Entity; i.e.,	corporation, trust, estate, etc. Then, proceed to C.
Entity Name	
Name of Representative (Executor, administrator, trustee, c/o, etc., in	f applicable)
	,
C. Account/Mailing Information:	
Specify one of the following:	
☐ Individual(s) ☐ Corporation ☐ UGMA Custodian ☐ IRA	A Partnership Estate Trust
	Tarthership
Other	Tarthership
Other Number and Street or P.O. Box	Tarthership
Number and Street or P.O. Box	
Number and Street or P.O. Box City State	e Zip Code
Number and Street or P.O. Box City State	
Number and Street or P.O. Box City Stat Foreign Province and Postal Code Foreign	e Zip Code eign Country
Number and Street or P.O. Box City Stat Foreign Province and Postal Code Foreign	e Zip Code
Number and Street or P.O. Box City State Foreign Province and Postal Code Fore Telephone Number (Day) Tele	e Zip Code eign Country phone Number (Evening)
Number and Street or P.O. Box City State Foreign Province and Postal Code Fore Telephone Number (Day) Tele	e Zip Code eign Country
Number and Street or P.O. Box City State Foreign Province and Postal Code Fore Telephone Number (Day) Tele	e Zip Code eign Country phone Number (Evening)
Number and Street or P.O. Box City State Foreign Province and Postal Code Fore Telephone Number (Day) Tele	e Zip Code eign Country phone Number (Evening) ount Number
Number and Street or P.O. Box City Stat Foreign Province and Postal Code Fore Telephone Number (Day) Tele Email Address Acc Enter Taxpayer Identification Number below for the Beneficial Owne	e Zip Code eign Country phone Number (Evening) ount Number
Number and Street or P.O. Box City Stat Foreign Province and Postal Code Fore Telephone Number (Day) Tele Email Address Acc Enter Taxpayer Identification Number below for the Beneficial Owne	e Zip Code eign Country phone Number (Evening) ount Number

¹ The taxpayer identification number (TIN), consisting of a valid Social Security number (SSN) for individuals or employer identification number (EIN) for business entities, trusts, estates, etc., and telephone number of beneficial owner(s) may be used in verifying this claim.







PART II – RESIDENCY INFORMATION

1. RESIDENCE IN THE UNITED STATES:

Place a check in the circle to the right if you were a United States resident during the entire Class Period (January 6, 2004 through and including January 6, 2009).	0
If you were a United States resident during part(s) of, but not the entire, Class Period, set forth in the box to the right the beginning and ending dates for the period(s) during which you were a United States resident.	

2. RESIDENCE IN INDIA:

Place a check in the circle to the right if you were a resident of India during the entire period beginning on January 6, 2004 through the date of submission of this Claim Form	0
If you were a resident of India at any time between January 6, 2004 through the date of submission of this Claim Form, set forth in the box to the right the beginning and ending dates for the period(s) during which you were a resident of India.	

IF YOU REQUIRE ADDITIONAL SPACE TO COMPLETE PART III OF THIS CLAIM FORM, ATTACH EXTRA SCHEDULES IN THE SAME FORMAT AS SHOWN ON PAGES 3-4. PRINT THE BENEFICIAL OWNER'S FULL NAME AND TAXPAYER IDENTIFICATION NUMBER ON EACH ADDITIONAL PAGE.



PART III – SCHEDULE OF TRANSACTIONS IN SATYAM SECURITIES

Failure to provide proof of all of the beginning holdings, purchases/acquisitions, sales, and ending holdings information requested below will impede proper processing of your claim and may result in the rejection of your claim. Please include proper documentation with your Claim Form as described in detail in General Instructions, Paragraph 8, above.

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1. BEGINNING HOLDINGS:	
State the total number of Satyam ADSs held as of the close of trading on January 5, 2004 .	
If none, write "zero" or "0". (Must be documented.)	

2. PURCHASES/ACQUISITIONS:

Separately list each and ever January 6, 2004 through and in through the exercise of an opt purchase price per ADS is the	icluding the close of trading ion, the purchase date is t	gon April 6, 2009 . For Satya he date that the option wa	am ADSs purchased c	NONE, HECK HERE
Date(s) of Purchase(s)/ Acquisition(s) (List Chronologically) (Month/Day/Year)	Number of ADSs Purchased/Acquired	Purchase/Acquisition Price Per ADS	Total Purchase/ Acquisition Price (Excluding taxes, fees and commissions)	Proof of Purchase/ Acquisition <u>Enclosed</u>
		\$	\$	\circ Y \circ N
		\$	\$	\circ Y \circ N
		\$	\$	\circ Y \circ N
		\$	\$	\circ Y \circ N
		\$	\$	\circ Y \circ N

3. SALES:

Separately list each and every sand including the close of tradi	•		C	NONE, HECK HERE
Date(s) of Sale(s) (List Chronologically) (Month/Day/Year)	Number of ADSs Sold	Sale Price Per ADS	Total Sale Price (Excluding taxes, fees and commissions)	Proof of Sale <u>Enclosed</u>
//		\$	\$	\circ Y \circ N
//		\$	\$	\circ Y \circ N
		\$	\$	\circ Y \circ N
		\$	\$	\circ Y \circ N

4. ENDING HOLDINGS:

State the total number of Satyam ADSs held as of the close of trading on **April 6, 2009**. If none, write "zero" or "0". (Must be documented.)

² Please note: Only Satyam ADSs purchased/acquired during the period from January 6, 2004 through and including the close of trading on January 6, 2009 are eligible under the settlements. Information requested with respect to your purchases/acquisitions of Satyam ADSs from January 7, 2009 through and including the close of trading on April 6, 2009 is needed in order to balance your claim; purchases/acquisitions during this period, however, are not eligible under the settlements and will not be used for purposes of calculating your Recognized Loss Amount pursuant to the Plan of Allocation.

PART III – SCHEDULE OF TRANSACTIONS IN SATYAM SECURITIES (continued)

B. <u>SATYAM ORDINARY SHARES</u>:

NOTE: In order to be eligible to recover from the Net Settlement Funds based on your purchases/acquisitions of Satyam Ordinary Shares during the Class Period, you must have been a United States resident at the time that you purchased/acquired your shares. If you do not satisfy that criteria, DO NOT COMPLETE THIS SECTION.

1.	REG	IMNI	NG F	1OI D	INGS:

State the total number of shares of Satyam Ordinary Shares held as of the close of trading on **January 5, 2004**. If none, write "zero" or "0". (Must be documented.)

2. PURCHASES/ACQUISITIONS:

Separately list each and every from January 6, 2004 through Shares purchased through th was exercised and the purchadocumented.)	and including the close of the exercise of an option,	f trading on April 6, 2009 . ³ the purchase date is the	For Satyam Ordinary date that the option	IF NONE, CHECK HERE
Date(s) of Purchase(s)/ Acquisition(s) (List Chronologically) (Month/Day/Year)	Number of Ordinary Shares Purchased/Acquired	Purchase/Acquisition Price Per <u>Ordinary Share</u>	Total Purchase/ Acquisition Price (Excluding taxes, fees and commissions)	Proof of Purchase/ Acquisition <u>Enclosed</u>
		Rs	Rs	\circ Y \circ N
		Rs	Rs	\circ Y \circ N
		Rs	Rs	\circ Y \circ N
		Rs	Rs	\circ Y \circ N
/		Rs	Rs	\circ Y \circ N

3. SALES:

Separately list each and every sa through and including the close				F NONE, O CHECK HERE
Date(s) of Sale(s)	Number of		Total Sale Price	
(List Chronologically)	Ordinary Shares	Sale Price Per	(Excluding taxes, fees	
(Month/Day/Year)	<u>Sold</u>	<u>Ordinary Share</u>	and commissions)	<u>Enclosed</u>
		Rs	Rs	\circ Y \circ N
		Rs	Rs	\circ Y \circ N
		Rs	Rs	\circ Y \circ N
		Rs	Rs	\circ Y \circ N
//		Rs	Rs	\circ Y \circ N

4. ENDING HOLDINGS:

State the total number of Satyam Ordinary Shares held as of the close of trading on **April 6, 2009**. If none, write "zero" or "0". (Must be documented.)

³ Please note: Only Satyam Ordinary Shares purchased/acquired during the period from January 6, 2004 through and including the close of trading on January 6, 2009 are eligible under the settlements. Information requested with respect to your purchases/acquisitions of Satyam Ordinary Shares from January 7, 2009 through and including the close of trading on April 6, 2009 is needed in order to balance your claim; purchases/acquisitions during this period, however, are not eligible under the settlements and will not be used for purposes of calculating your Recognized Loss Amount pursuant to the Plan of Allocation.

PART IV – RELEASE OF CLAIMS AND SIGNATURE

YOU MUST ALSO READ THE RELEASE AND CERTIFICATION BELOW AND SIGN ON PAGE 6 OF THIS CLAIM FORM

- A. I (we) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally, and forever waive, release, discharge, and dismiss each and every one of the Released Plaintiffs' Claims as against each and every one of the Released Settling Defendant(s) Parties, as those terms are defined in the accompanying Notice.
- B. I (we) hereby acknowledge that as of the Effective Date, I (we) shall: (i) be deemed to have fully, finally and forever waived, released, discharged and dismissed each and every one of the Released Plaintiffs' Claims as against each and every one of the Released Settling Defendant(s) Parties; and (ii) forever be barred and enjoined from commencing, instituting, prosecuting or maintaining any of the Released Plaintiffs' Claims against any of the Released Settling Defendant(s) Parties.

CERTIFICATION

By signing and submitting this Claim Form, the Claimant(s) or the person(s) who represents the Claimant(s) certifies, as follows:

- 1. that I (we) have read the Notice, the Plan of Allocation and the Claim Form, including the releases provided for in the Settlements;
- 2. that the Claimant(s) is (are) Class Member(s), as defined in the Notice, and is (are) not one of the individuals or entities excluded from the Class (*i.e.*, Settling Defendants and Non-Settling Defendants; persons who, during the Class Period, were officers and/or directors of any of the Settling Defendants or of their respective parents, subsidiaries and/or affiliates; persons who, during the Class Period, were officers, directors, members or partners in any other entity Defendant or any of their respective parents, subsidiaries and/or affiliates; any entity in which any Defendant has or had a controlling interest; the Defendants' liability insurance carriers and any affiliates or subsidiaries thereof; members of the immediate families of any of the foregoing and their legal representatives, heirs, successors or assigns);
- 3. that the Claimant(s) has (have) not submitted a request for exclusion from the Class;
- 4. that the Claimant(s) owns (own) or owned the Satyam securities identified in the Claim Form and have not assigned the claim against the Released Settling Defendant(s) Parties to another, or that, in signing and submitting this Claim Form, the Claimant(s) has (have) the authority to act on behalf of the owner(s) thereof;
- 5. that the residency information provided in Part II above is complete and correct;
- 6. that the Claimant(s) has (have) not submitted any other claim covering the same purchases, acquisitions, sales, or holdings of Satyam securities and knows of no other person having done so on his/her/its/their behalf;
- 7. that the Claimant(s) submits (submit) to the jurisdiction of the Court with respect to his/her/its/their claim and for purposes of enforcing the releases set forth herein;
- that I (we) agree to furnish such additional information with respect to this Claim Form as the Claims Administrator or the Court may require;
- 9. that the Claimant(s) waives (waive) the right to trial by jury, to the extent it exists, and agrees (agree) to the Court's summary disposition of the determination of the validity or amount of the claim made by this Claim Form;
- 10. that I (we) acknowledge that the Claimant(s) will be bound by and subject to the terms of any judgment that may be entered in the Action; and
- 11. that the Claimant(s) is (are) NOT subject to backup withholding under the provisions of Section 3406(a)(1)(C) of the Internal Revenue Code because: (i) the Claimant(s) is (are) exempt from backup withholding; or (ii) the Claimant(s) has (have) not been notified by the IRS that he/she/it/they is (are) subject to backup withholding as a result of a failure to report all interest or dividends; or (iii) the IRS has notified the Claimant(s) that he/she/it/they is (are) no longer subject to backup withholding. If the IRS has notified the Claimant(s) that he/she/it/they is (are) subject to backup withholding, please strike out the language in the preceding sentence indicating that the claim is not subject to backup withholding in the certification above.



IS TRUE, CORRECT, AND COMPLETE, AND THAT THE] THAT ALL OF THE INFORMATION PROVIDED BY ME (US) ON THIS FORM DOCUMENTS SUBMITTED HEREWITH ARE TRUE AND CORRECT COPIES
OF WHAT THEY PURPORT TO BE.	
Signature of Claimant	Signature of Joint Claimant, if any
Print Name of Claimant	Print Name of Joint Claimant, if any
Date	Date
If Claimant is other than an individual, or is not the	e person completing this form, the following also must be provided:
Signature of Person Completing Form	Print Name of Person Completing Form
. 0	
Date	Capacity of person signing on behalf of Claimant, if other than an individual, e.g., executor, president, custodian, etc.

THIS CLAIM FORM MUST BE MAILED TO THE CLAIMS ADMINISTRATOR BY FIRST-CLASS MAIL, POSTAGE PREPAID, **POSTMARKED NO LATER THAN SEPTEMBER 23, 2011**, ADDRESSED AS FOLLOWS:

In re Satyam Computer Services Ltd. Securities Litigation
Claims Administrator
c/o Rust Consulting, Inc.
P.O. Box 2461
Faribault, MN 55021-9161

A Claim Form received by the Claims Administrator shall be deemed to have been submitted when posted, if mailed by September 23, 2011 and if a postmark is indicated on the envelope and it is mailed First Class, and addressed in accordance with the above instructions. In all other cases, a Claim Form shall be deemed to have been submitted when actually received by the Claims Administrator.

You should be aware that it will take a significant amount of time to fully process all of the Claim Forms. Please notify the Claims Administrator of any change of address.

