Must be Postmarked No Later Than July 29, 2017

L3 Technologies Securities Litigation c/o GCG P.O. Box 9349 Dublin, OH 43017-4249 Toll-Free: 1-800-231-1815



Settlement Website: www.L3TechnologiesSecuritiesLitigation.com



Claim Number:

Control Number:

# PROOF OF CLAIM FORM

To be potentially eligible to receive a share of the Net Settlement Fund in connection with the Settlement of this Action, you must complete and sign this Proof of Claim Form ("Proof of Claim") and mail it by First-Class Mail to the above address, **postmarked no later than July 29, 2017.** 

Failure to submit your Proof of Claim by the date specified will subject your claim to rejection and may preclude you from being eligible to receive any money in connection with the Settlement.

Do not mail or deliver your Proof of Claim to the Court, the parties to the Action, or their counsel. Submit your Proof of Claim only to the Claims Administrator at the address set forth above.

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Important - This form should be completed IN CAPITAL LETTERS using BLACK or DARK BLUE ballpoint/fountain pen. Characters and marks used should be similar in style to the following:

ABCDEFGHIJKLMNOPQRSTUVWXYZ12345670



## **GENERAL INSTRUCTIONS**

1. To recover as a Member of the Class based on your claims in the action entitled *Patel v. L-3 Communications Holdings, Inc., et al.*, Case No. 1:14-cv-06038-VEC (S.D.N.Y.) (the "Litigation"), you must complete and, on page 5 hereof, sign this Proof of Claim and Release form ("Proof of Claim"). If you fail to submit a timely and properly addressed (as set forth in paragraph 3 below) Proof of Claim, your claim may be rejected and you may not receive any recovery from the Net Settlement Fund created in connection with the proposed Settlement.

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

# 3. YOU MUST MAIL OR SUBMIT ONLINE YOUR COMPLETED AND SIGNED PROOF OF CLAIM, ACCOMPANIED BY COPIES OF THE DOCUMENTS REQUESTED HEREIN, NO LATER THAN JULY 29, 2017, ADDRESSED AS FOLLOWS:

L3 Technologies Securities Litigation Claims Administrator c/o GCG P.O. Box 9349 Dublin, OH 43017-4249 Online Submissions: <u>www.L3TechnologiesSecuritiesLitigation.com</u>

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

4. If you are a Member of the Class and you did not timely request exclusion, you will be bound by the terms of any judgment entered in the Litigation, including the releases provided therein, WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM OR RECEIVE ANY PROCEEDS FROM THE NET SETTLEMENT FUND.

### **CLAIMANT IDENTIFICATION**

If you purchased or otherwise acquired L-3 Communications Holdings, Inc. (now known as L3 Technologies, Inc.) ("L3") common stock during the Class Period and held the certificate(s) in your name, you are the beneficial purchaser or acquirer as well as the record purchaser or acquirer. If, however, you purchased or acquired L3 common stock during the Class Period and the certificate(s) were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial purchaser or acquirer and the third party is the record purchaser or acquirer.

Use Part I of this form entitled "Claimant Identification" to identify each purchaser of record ("nominee"), if different from the beneficial purchaser or acquirer of the L3 common stock that forms the basis of this claim. THIS CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL PURCHASER(S) OR ACQUIRER(S) OR THE LEGAL REPRESENTATIVE OF SUCH PURCHASER(S) OR ACQUIRER(S) OF THE L3 COMMON STOCK UPON WHICH THIS CLAIM IS BASED.

All joint purchasers or acquirers must sign this claim. Executors, administrators, guardians, conservators, and trustees or others acting in a representative capacity on behalf of a Class Member must complete and sign this claim on behalf of persons represented by them, and submit evidence of their current authority to act on behalf of that Class Member, including your titles or capacities. Separate Proofs of Claim 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 Proof of Claim should be submitted on behalf of one legal entity including all transactions made by that entity on one Proof of Claim, 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 Proof of Claim). 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 your claim or result in rejection of the claim.

#### **PROOF OF CLAIM**

Use Part II of this form entitled "Schedule of Transactions in L3 Common Stock" to supply all required details of your transaction(s) in L3 common stock. 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.

On the schedules, provide all of the requested information with respect to **all** of your purchases or acquisitions and **all** of your sales of L3 common stock which took place during the period January 30, 2014 through and including October 28, 2014, whether such transactions resulted in a profit or a loss. You must also provide all of the requested information with respect to **all** of the shares of L3 common stock you held at the close of trading on January 29, 2014, July 30, 2014, and October 28, 2014. Failure to report all such transactions may result in the rejection of your claim.

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.

The date of covering a "short sale" is deemed to be the date of purchase of L3 common stock. The date of a "short sale" is deemed to be the date of sale of L3 common stock.

For each transaction, copies of broker confirmations or other documentation of your transactions in L3 common stock should be attached to your claim. The parties and the Claims Administrator do not independently have information about your investments. IF SUCH DOCUMENTS ARE NOT IN YOUR POSSESSION, PLEASE OBTAIN COPIES OR EQUIVALENT DOCUMENTS FROM YOUR BROKER. FAILURE TO SUBMIT THIS DOCUMENTATION MAY RESULT IN THE REJECTION OF YOUR CLAIM. DO NOT SEND ORIGINAL DOCUMENTS.



Please Type or Print

PART I - CLAIMANT IDENTIFICATION								
(The Claims Administrator will use this information for all communications regarding your Proof of Claim. If this information changes, you MUST notify the Claims Administrator in writing at the address above.)								
Beneficial Owner's Name (First, Middle, Last, as the name(s) should appear on check, if eligible for payment):								
Street Address:								
City:								
State or Province: Zip Code or Postal Code:								
Country (Other than U.S.):								
Telephone Number (work): Telephone Number (home):								
Social Security Number or Taxpayer Identification Number:								
Individual Corporation/Other								
Record Owner's Name (if different from the Beneficial Owner listed above):								
Email Address (Email address is not required, but if you provide it you authorize the Claims Administrator to use it in providing you with information relevant to this claim.):								

**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. This is different from the online submission process that is available at <u>www.L3TechnologiesSecuritiesLitigation.com</u>. If you wish to file your claim electronically, you must contact the Claims Administrator at 1-877-301-0353 to obtain the required file layout. All claimants MUST submit a manually signed paper Proof of Claim listing all their transactions whether or not they also submit electronic copies. No electronic files will be considered to have been properly submitted unless the Claims Administrator issues to the claimant a written acknowledgement of receipt and acceptance of electronically submitted data.

**NOTE:** Separate Proofs of Claim 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, 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 should be submitted on behalf of one legal entity including 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 L3 common stock) during the Class Period on one Proof of Claim, no matter how many accounts the transactions were made in.



Shares

## PART II - SCHEDULE OF TRANSACTIONS IN L3 COMMON STOCK

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A. BEGINNING HOLDINGS: Number of shares of L3 common stock held at the close of trading on January 29, 2014. If none, write "zero" or "0." (Must be documented.)

# **PURCHASES/ACQUISITIONS:** Purchases or acquisitions of L3 common stock (**January 30, 2014 – October 28, 2014**, inclusive). (Must be documented.)

Date(s) of Purchase/Acquisition (List Chronologically) (Month/Day /Year)	Number of Shares Purchased/Acquired	Purchase/Acquisition Price Per Share	Total Purchase or Acquisition Price (excluding taxes, commissions and fees)	Confirm Proof of Purchase/Aquisition Enclosed

# C. SALES: Sales of L3 common stock (January 30, 2014 – October 28, 2014, inclusive). (Must be documented.)

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C	he	ck	He	ere

	Date( ₋ist Chr (Month	onolo	gically)		Nu	mber	of Sha	ares S	Sold	Sale Price Per Share			Total Sale Price (excluding taxes, commissions and fees)					Confirm Proo Purchase/Aquis Enclosed	sition			
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	/		/	L		L	Т	L	L			L	L				L					
	/		/	L			Т	L	L		Ι	Т	L				Т					
	/		/	L									L									

D.	<b>ENDING HOLDINGS:</b> Number of shares of L3 common stock held at the close of trading on <b>July 30, 2014</b> . If none, write "zero" or "0." (Must be documented.)	Shares
E.	ENDING HOLDINGS: Number of shares of 1.3 common stock held at the close of trading	

 E.
 ENDING HOLDINGS: Number of shares of L3 common stock held at the close of trading on October 28, 2014. If none, write "zero" or "0." (Must be documented.)
 Shares

**Please note:** Information requested with respect to your purchases/acquisitions of L3 common stock from after the close of trading on July 30, 2014 through and including the close of trading on October 28, 2014 is needed in order to balance your claim; purchases/acquisitions during this period, however, are not eligible under the Settlement and will not be used for purposes of calculating your Recognized Claim pursuant to the Plan of Allocation.

YOU MUST READ AND SIGN THE RELEASE ON PAGE 5. FAILURE TO SIGN THIS FORM MAY RESULT IN A DELAY IN PROCESSING OR THE REJECTION OF YOUR CLAIM.

IF YOU REQUIRE ADDITIONAL SPACE FOR THE SCHEDULE ABOVE, ATTACH EXTRA SCHEDULES IN THE SAME FORMAT. PRINT THE BENEFICIAL OWNER'S FULL NAME AND LAST FOUR DIGITS OF SOCIAL SECURITY/TAXPAYER IDENTIFICATION NUMBER ON EACH ADDITIONAL PAGE. IF YOU DO ATTACH EXTRA SCHEDULES, CHECK THIS BOX

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### PART III – SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS

On behalf of myself (ourselves) and each of my (our) heirs, agents, executors, trustees, administrators, predecessors, successors and assigns, I (we) submit this Proof of Claim under the terms of the Stipulation of Settlement described in the Notice. I (We) also submit to the jurisdiction of the United States District Court for the Southern District of New York with respect to my (our) claim and for purposes of enforcing the release set forth herein. I (We) further acknowledge that I am (we are) a Class Member(s) bound by and subject to the terms of any judgment that may be entered in the Litigation. I (We) agree to furnish additional information to the Claims Administrator to support this claim (including transactions in other L3 securities) if requested to do so. I (We) have not submitted any other claim covering the same purchases, acquisitions or sales of L3 common stock during the Class Period and know of no other person having done so on my (our) behalf.

### PART IV – RELEASE

1. Upon the Effective Date of the Settlement, I (we), as a Class Member, acknowledge full and complete satisfaction of, and fully, finally, and forever settle, release, and discharge from the Released Claims as against each and all of the Released Persons, as defined in the accompanying Notice.

2. I (We) hereby warrant and represent that I (we) have not assigned or transferred or purported to assign or transfer, voluntarily or involuntarily, any matter released pursuant to this release or any other part or portion thereof.

3. I (We) hereby warrant and represent that I (we) have included the information requested about all of my (our) transactions in L3 common stock which are the subject of this claim, which occurred during the Class Period, as well as the opening and closing positions in such securities held by me (us) on the dates requested in this Proof of Claim.

I 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 by the undersigned is true and correct.

Executed this	day of	, in	
	(Month/Year)		(State/Country)
Signature of claim	ant	Date	
Print your name h	ere		
Signature of joint of	claimant, if any	Date	
Print your name h <i>If the claimant is</i>		s not the person completing this for	m, the following also must be provided:
Signature of perso	on signing on behalf of claiman	t Date	
Print your name h	ere		
	n signing on behalf of claimant ecutor, president, trustee, cust		
	ACCURATE CLAIMS PR	OCESSING TAKES A SIGNIFICANT A	AMOUNT OF TIME.

THANK YOU FOR YOUR PATIENCE.

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### **REMINDER CHECKLIST**

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- 1. Please sign above.
- 2. If this claim is being made on behalf of joint claimants, then both must sign.
- 3. Remember to attach copies of supporting documentation, if available.
- 4. **Do not send** originals of certificates.
- 5. Keep a copy of your Proof of Claim and all supporting documentation for your records.
- 6. The Claims Administrator will acknowledge receipt of your Proof of Claim by mail, within 60 days. Your claim is not deemed submitted until you receive an acknowledgment postcard. If you do not receive an acknowledgment postcard within 60 days, please call the Claims Administrator toll free at 1-800-231-1815.
- 7. If you move please send your new address to the address below.
- 8. **Do not use red pen or highlighter** on the Proof of Claim or supporting documentation.

### THIS PROOF OF CLAIM MUST BE SUBMITTED ONLINE OR MAILED NO LATER THAN JULY 29, 2017, ADDRESSED AS FOLLOWS:

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