



In Re European Government Bonds Antitrust Litigation

ELECTRONIC CLAIMS FILING GUIDELINES



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Overview

Electronic Claims Filing applies to institutions or entities that are filing multiple Proof of Claim and Release forms on behalf of themselves and/or others, as well as individuals or entities that are filing Proof of Claim and Release forms with a large number of transactions (50+).

Electronic Claims Filings are subject to rejection if not prepared in compliance with these Electronic Claims Filing Guidelines.

PLEASE NOTE: No Electronic Claims Filings will be considered to have been properly submitted unless the Settlement Administrator issues to the filer a written acknowledgment of receipt and acceptance of electronically submitted data.

Electronic Filing Requirements

I. Prepare a cover letter:

- A cover letter **MUST** be included with the Electronic Claims Filing Template for Third Party Filers, Brokers and Nominees. The cover letter must include an Affidavit attesting your entity has the legal right and authorization. Please see the Authorization Requirements as set forth in Appendix A.

II. Prepare a data file:

- An Excel spreadsheet or other electronic file containing account information and transactional data **MUST** be prepared in accordance with A.B. Data, Ltd.'s Electronic Claims Filing Template Mapping Instructions found in Appendix B. The following formats are acceptable: a) MEDIA: CD, DVD, and flash drive and b) DATA: ASCII, MS Excel, and MS Access. For your convenience, an Excel spreadsheet template is available for your use and may be downloaded from the settlement website.
- If you cannot provide the information in the aforementioned formats or you have other requests, questions, concerns, or comments, please email A.B. Data, Ltd., at efiling@abdata.com or you may call 877-883-7336 to speak to an Electronic Claims Filing Specialist.

III. Mail your executed master Proof of Claim and Release form with a cover letter and media format to:

European Government Bonds Settlement
Attention: Electronic Claims Department



c/o A.B. Data, Ltd.
3410 West Hopkins Street
PO Box 173119
Milwaukee, WI, 53217

Documentation Requirements

A.B. Data, Ltd., reserves the right to request additional documentation at any time after your Proof of Claim and Release form and file have been received and processed. The documentation provided should be sufficient to verify the validity and accuracy of the data provided in the file.

If you provided a letter/affidavit attesting to the truth and accuracy of your data when initially submitting your file, A.B. Data may still require specific documentary evidence (trade confirmations, monthly statement, or equivalent) to verify the details of your transactions and/or holdings.



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Appendix A

Case Specific Information

CLASS DEFINITION:	All Persons or entities who or which purchased or sold one or more European Government Bond(s) in the United States directly with a Defendant or a direct or indirect parent, subsidiary, affiliate, or a division of a Defendant, or any of their alleged co-conspirators, during the Settlement Class Period.
CLAIM FILING DEADLINE:	November 28, 2023

Transactions for each account should include:

Transaction Type	Definition	Valid Dates
P	Purchases/acquisitions during the Class Period.	January 1, 2005 through December 31, 2016, inclusive
S	Sales during the Class Period.	January 1, 2005 through December 31, 2016, inclusive

*****Please see Appendix E for mapping instructions detailing how to properly submit your file. Files submitted that do not follow the mapping instructions are subject to rejection.**



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Appendix B



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UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

IN RE EUROPEAN GOVERNMENT BONDS
ANTITRUST LITIGATION

Case No. 1:19-cv-2601 (VM)

PROOF OF CLAIM AND RELEASE

I. INSTRUCTIONS

1. If you entered into a European Government Bond transaction from January 1, 2005 through and including December 31, 2016 (“5AC Settlement Class Period”), you may be eligible to receive a payment from the \$80 million settlement with Bank of America, N.A. and Merrill Lynch International, together with their affiliates and subsidiaries (“Bank of America”); NatWest Markets Plc and NatWest Markets Securities Inc., together with their affiliates and subsidiaries (“NatWest”); Nomura International plc, together with its affiliates and subsidiaries (“Nomura”); UBS AG, UBS Europe SE, and UBS Securities LLC, together with their affiliates and subsidiaries (“UBS”); Citigroup Global Markets Inc. and Citigroup Global Markets Limited, together with their affiliates and subsidiaries (“Citigroup”); and Jefferies International Limited and Jefferies LLC, together with their affiliates and subsidiaries (“Jefferies”) (collectively, the “Settling Defendants”).

2. “European Government Bonds” or “EGBs” means euro-denominated sovereign debt or bonds issued by European governments (e.g., Austria, Belgium, Cyprus, Estonia, Finland, France, Germany, Greece, Ireland, Italy, Luxembourg, Malta, the Netherlands, Portugal, Slovakia, Slovenia, and Spain).

3. Unless otherwise defined herein, all capitalized terms contained in this Proof of Claim and Release (“Claim Form”) have the same meaning as defined in the accompanying Notice of Pendency of Class Action, Hearing on Proposed Settlement and Attorneys’ Fees Petition, and Right to Share in Net Settlement Fund (“Notice”), the Stipulation and Agreement of Settlement with Bank of America, N.A., Merrill Lynch International, NatWest Markets Plc, NatWest Markets Securities Inc., Nomura International plc, UBS AG, UBS Europe SE, UBS Securities LLC, Citigroup Global Markets Inc., Citigroup Global Markets Limited, Jefferies International Limited, and Jefferies LLC (the “2024 Stipulation”), which is available at www.EuropeanGovernmentBondsSettlement.com.

4. It is important that you read the Notice that accompanies 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 in the Notice and provided for in the 2024 Stipulation.

5. To be eligible to receive a payment from the Net Settlement Fund, you must submit a Claim Form along with the required data and/or information described in Parts III and IV below. **To be considered timely, your Claim Form must be submitted online at www.EuropeanGovernmentBondsSettlement.com by 11:59 p.m. Eastern Time on November 27, 2024 OR received by mail no later than November 27, 2024.** If you are unable to submit the required data described below at Parts III and IV, you should call the Claims Administrator for further instructions.

6. If you have already submitted a valid Claim Form in connection with one or more of the prior settlements with the named UniCredit, Natixis, JPMorgan, and State Street entities, you need not submit another—your prior Claim Form will be applied to this Settlement.

7. As described in Part III below, you may be required to submit additional information about the European Government Bond transactions that you submit as part of your Claim Form, but only if you are contacted and instructed to do so by the Claims Administrator.

8. Your payment amount will be determined based on the Claims Administrator’s review of your Claim Form and calculated pursuant to the Distribution Plan. Submission of a Claim Form does not guarantee that you will receive a payment from the Net Settlement Fund. For more information, please refer to the Notice and Distribution Plan available at www.EuropeanGovernmentBondsSettlement.com.

This Form Must Be Electronically
Submitted OR Received by Mail No Later
than November 27, 2024.

9. Separate Claim Forms must be submitted for each separate legal entity. Correspondingly, a single Claim Form should be submitted on behalf of only one legal entity.

10. If you have questions about submitting a Claim Form or need additional copies of the Claim Form or the Notice, you may contact the Claims Administrator.

This Form Must Be Electronically
Submitted OR Received by Mail No Later
than November 27, 2024.

II. CLAIMANT IDENTIFICATION

The Claims Administrator will use this information to verify eligibility and for all communications relevant to this Claim Form. If this information changes, please notify the Claims Administrator in writing. If you are a trustee, executor, administrator, custodian, or other nominee and are completing and signing this Claim Form on behalf of a Claimant, you must attach documentation showing your authority to act on behalf of the Claimant.

Section A – Claimant Information

MI

[illegible]

MI

1

[illegible][illegible][illegible][illegible][illegible][illegible]

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[illegible][illegible][illegible]

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-

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[illegible]

Location(s) from which Claimant entered into European Government Bond transactions:

Other (please specify):

For Brokers filing this Claim Form for its own account(s): Have you included European Government Bond transactions in which you acted as an agent?

No

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Section B – Authorized Representative Information

Name of the person you would like the Claims Administrator to contact regarding this claim (if different from the Claimant name listed above)

First Name	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Telephone Number (home or cell)	Telephone Number (work)
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>

Address 1 (street name and number)

<input type="text"/>

Address 2 (apartment, unit, or box number)

<input type="text"/>

City	State	ZIP Code/Postal Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

Province/Region (if outside U.S.)

<input type="text"/>

Email Address (If you provide an email address, you authorize the Claims Administrator to use it in providing you with information relevant to this claim.)

<input type="text"/>

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III. REQUIREMENTS FOR CLAIM SUBMISSION

1. YOU MUST SUBMIT YOUR CLAIM FORM ELECTRONICALLY OR ON PAPER IN THE REQUIRED FORMAT

Claimants must electronically submit their Claim Forms online at www.EuropeanGovernmentBondsSettlement.com by **11:59 p.m. Eastern Time on November 27, 2024 OR** mail the Claim Forms **such that they are received no later than November 27, 2024** by the Claims Administrator at European Government Bonds Settlement, c/o A.B. Data, Ltd., P.O. Box 173119, Milwaukee, WI 53217. If you have already submitted a valid Claim Form in connection with one or more of the prior settlements with the named UniCredit, Natixis, JPMorgan, and State Street entities, you need not submit another—your prior Claim Form will be applied to this Settlement.

Instructions related to Claim submissions (“Claim Submission Instructions”), including the information you must provide about your European Government Bond transactions, are available at www.EuropeanGovernmentBondsSettlement.com. Claim Forms must be submitted in the format specified by the Claim Submission Instructions.

Along with your Claim Form, you may be later required to submit the details of your European Government Bond transactions reflected in the Summary Price Table in Part IV, below.

2. YOU DO NOT NEED TO SUBMIT ANY ADDITIONAL DATA OR DOCUMENTATION OF TRANSACTIONS AT THIS TIME BUT MUST DO SO IF CONTACTED BY THE CLAIMS ADMINISTRATOR.

The Claims Administrator may request that Claimants submit additional data or documentation of their European Government Bond transactions. The EGB Transaction Data Template, including the information you must provide about your European Government Bond transactions, if requested, is available at www.EuropeanGovernmentBondsSettlement.com.

If supplemental documentation is required, it must be from one or more of the following sources:

- a. Transaction data from your bank, broker, or internal trade system;
- b. Bank confirmations by individual trade;
- c. Bank transaction reports or statements;
- d. Trading venue transaction reports or statements;
- e. Prime broker reports or statements;
- f. Custodian reports or statements;
- g. Daily or monthly account statements or position reports;
- h. Email confirmations from counterparty evidencing transactions;
- i. Bloomberg confirmations or communications evidencing transactions; and/or
- j. Other documents evidencing European Government Bond transactions during the Class Period.

Claimants are advised to retain such documentation and information, as it may be required to substantiate a Claim Form.

Further information about these requirements is included in the Claim Submission Instructions, which are available at www.EuropeanGovernmentBondsSettlement.com.

IV. SUMMARY PRICE TABLE OF EUROPEAN GOVERNMENT BOND TRANSACTIONS

Complete this Part IV if and only if you entered into European Government Bond transactions from January 1, 2005, through and including December 31, 2016. Do not include information regarding instruments other than European Government Bond transactions with a Defendant, Deutsche Bank, or Rabobank (or a direct or indirect parent, subsidiary, affiliate, or division of a Defendant, Deutsche Bank, or Rabobank, or any of their alleged co-conspirators), and do not include European Government Bond transactions in which you acquired the bonds as an agent for another individual or entity. For detailed instructions on how to fill out this table, please refer to the Claim Submission Instructions, which are available at www.EuropeanGovernmentBondsSettlement.com.

Date of Transaction	Transaction Type (Purchase/Sale)	Name of Counterparty	Notional Amount (Expressed in Euros)	Maturity Date
/ /				
/ /				
/ /				
/ /				
/ /				
/ /				

V. CLAIMANT'S CERTIFICATION & SIGNATURE

SECTION A: CERTIFICATION

BY SIGNING AND SUBMITTING THIS CLAIM FORM, CLAIMANT OR CLAIMANT'S AUTHORIZED REPRESENTATIVE CERTIFIES ON CLAIMANT'S BEHALF AS FOLLOWS:

- I (we) have read the Notice and Claim Form, including the descriptions of the Releases provided for in the 2024 Stipulation;
- I (we) am (are) a Settlement Class Member and am (are) not one of the individuals or entities excluded from the Settlement Class;
- I (we) have not submitted a Request for Exclusion;
- I (we) have made the transactions submitted with this Claim Form for myself (ourselves) and not as agents of another, and have not assigned my (our) Settled Claims to another;
- 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 the release or any other part or portion thereof;
- I (we) have not submitted any other claim in this Action covering the same transactions and know of no other person having done so on my (our) behalf;
- I (we) submit to the jurisdiction of the Court with respect to my (our) claim and for purposes of enforcing the Releases set forth in any Judgment(s) that may be entered in the Action;
- I (we) agree to furnish such additional information with respect to this Claim Form as the Claims

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Administrator or the Court may require;

9. I (we) acknowledge that I (we) will be bound by and subject to the terms of the Judgments that will be entered in the Action if the Settlements are approved; and

10. I (we) understand that any trial by jury (to the extent any such right may exist) and any right of appeal or review of the Court's determination with respect to my (our) Claim are waived.

SECTION B: SIGNATURE

PLEASE READ THE RELEASE, CONSENT TO DISCLOSURE, AND CERTIFICATION, AND SIGN BELOW.

I (we) acknowledge that, as of the Effective Date of the Settlement, pursuant to the terms set forth in the 2024 Stipulation, and by operation of law and the Judgment, I (we) shall be deemed to release and forever discharge and shall be forever enjoined from prosecuting the Settled Claims against the Released Parties (as defined in the 2024 Stipulation and/or Judgment).

If signing as an Authorized Representative on behalf of an entity, I (we) certify that I (we) have legal rights and authorization from the entity to file this Claim Form on the entity's behalf.

UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA, I (WE) CERTIFY THAT ALL THE INFORMATION PROVIDED BY ME (US) ON THIS CLAIM FORM IS TRUE, CORRECT, AND COMPLETE, AND THAT THE DATA SUBMITTED IN CONNECTION WITH THIS CLAIM FORM ARE TRUE AND CORRECT COPIES OF WHAT THEY PURPORT TO BE.

Signature of Claimant (if Claimant is an individual filing on his or her own behalf)

Date: _____
MM/DD/YY

Print Name of Claimant (if Claimant is an individual filing on his or her own behalf)

Authorized Representative Completing Claim Form (if any)

Date: _____
MM/DD/YY

Print name of Authorized Representative Completing Claim Form (if any)

Capacity of Authorized Representative (if other than an individual (e.g., trustee, executor, administrator, custodian, or other nominee))

REMINDER: YOUR CLAIM FORM AND REQUIRED DATA MUST BE SUBMITTED ONLINE BY 11:59 P.M. EASTERN TIME ON NOVEMBER 27, 2024 OR RECEIVED BY MAIL NO LATER THAN NOVEMBER 27, 2024.

Appendix C

Authorization Requirements

- 1 **If you are a nominee** filing on behalf of your account holders, you **must** include the following documentation:

- 1.1 Affidavit attesting that your entity has legal rights and authorization from your account holders to file a Claim Form on their behalf **and** that your account holders understand that they are bound by and subject to the terms of all Releases that may be entered in these Settlements, etc.; **and**

- 1.1.1 Authorization to sign on your account holders' behalf.

- 1.2 **If you are a third party** filing on behalf of a nominee, you **must** include an Affidavit attesting to the following:

- 1.2.1 Your entity has the legal right and authorization from the nominee to file and sign any Claim Forms on their behalf; **and**

- 1.2.2 Your entity has the legal right and authorization from the nominee's account holders to file and sign any Claim Forms on their behalf; **and**

- 1.2.3 The account holders understand they are bound by and subject to the terms of all Releases that may be entered in the *European Government Bonds Antitrust Litigation*.

- 1.3 **If you are a third party** filing on behalf of another party, you **must** include an Affidavit attesting to the following:

- 1.3.1 Your entity has the legal right and authorization from the other party to file and sign any Claim Forms on its behalf; **and**

- 1.3.2 The other party understands it is bound by and subject to the terms of all Releases that may be entered in the *European Government Bonds Antitrust Litigation*.



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Appendix D
Sample Cover Letter

LETTERHEAD

Re: European Government Bond Settlement

Date:

Enclosed is a fully executed master Proof of Claim and Release with required authorizations and affidavits as well as an electronic media attachment, which is being filed in connection with the above-referenced matter on behalf of [COMPANY NAME(S) OR INDIVIDUAL NAME(S)] for the proprietary accounts of [ENTITY].

We, [ENTITY], hereby agree that further communication from the Claims Administrator may be conducted by email, and we accept sole responsibility to ensure the email address for [ENTITY] is updated in the event the email address provided on the master Proof of Claim and Release should change.

The attachment consists of a [CD, DVD, OR FLASH DRIVE] containing [NUMBER] accounts/claims in [ASCII, MS EXCEL, OR MS ACCESS] format with [NUMBER OF TRANSACTIONS] transactions for European Government Bonds. Each transaction contains corresponding account information for which the claims are being filed.

The total number of European Government Bonds purchased [##.##] for the amount of [\$0.0000] and European Government Bonds sold [##.##] for the amount of [\$0.0000]¹ can be found on the enclosed [CD, DVD, OR FLASH DRIVE].

We, [ENTITY], attest that the data provided on the media attachment corresponds to [ENTITY]'s internal records.

I attest that the above information is true and correct.

Signature

Company Name

Job Title

Contact Information (including telephone number, fax number, and email address).

¹ Please list all other transactions, if applicable, including free receipts and free deliveries.



Appendix E

Template Mapping Instructions – Transaction Detail Available

Column	Field Name	Max Length	European Government Bonds FIELD DESCRIPTION
A	Account Identifier	40	Account identifier from cover page of filing.
B	Beneficial Owner Account Name	40	Short Name of Beneficial Owner, for printing/mailling purposes You MUST also provide the correct, complete, unabbreviated name of the beneficial owner in Column C of your submission..
C	Full Name of the Beneficial Owner	40	Full Name of Beneficial Owner MUST be the correct, complete, unabbreviated name of the beneficial owner. Do not include honorifics, e.g., Mr., Mrs., Ms., Dr., Capt., Sgt. Please note: A trustee, in that capacity, is not the beneficial owner of the security; the full name of the trust should be entered followed by the name(s) of the trustee(s). A comma should separate the name of the trust and the name(s) of the trustee(s). YOUR SUBMISSION MAY BE REJECTED IF THIS INFORMATION IS NOT INCLUDED..
D	TIN of the Beneficial Owner	9	Taxpayer identification number (TIN) for beneficial owner, no spaces and no dashes.
E	Beneficial Owner TIN Type (E/S/U/F)	1	E = Employer Identification Number (EIN); S = Social Security Number (SSN); U = Unknown; F = Foreign.
F	Care of:	40	Name of the entity to which correspondence and distributions should be mailed.
G	Attn:	40	Name of the person to whose attention correspondence and distributions should be mailed.
H	Street 1	40	Street Address 1 for correspondence and distributions mailing.
I	Street 2	40	Street Address 2 for correspondence and distributions mailing.
J	City	25	City for correspondence and distributions mailing.
K	State	2	State for correspondence and distributions mailing.
L	Zip Code	5	Zip code for correspondence and distributions mailing.
M	Province	40	Province for correspondence and distributions mailing.
N	Country	40	Country for correspondence and distributions mailing.
O	TIN of the Claimant	9	Taxpayer identification number (TIN) for claimant (if Claimant is not Beneficial Owner), no spaces and no dashes.
P	ISIN	20	The security identifier
Q	EGB Issuer	20	List who issued the bond
R	Transaction Type (P/S)	2	P = Purchase; S = Sale
S	Trade Date (MM/DD/YYYY)	10	(MM/DD/YYYY) MM = Month; DD = Day; YYYY = Year
T	Maturity Date (MM/DD/YYYY)	10	The final date of the bond. (MM/DD/YYYY) MM = Month; DD = Day; YYYY = Year.
U	Notional Amount/Face Value (Euro)	40	List the Notional Value/Face Value of the EGB
V	Price/Par Value Per Unit (Euro)	40	List the price that applied to the Bond Transaction.
W	Name of Counterparty	20	List the Claimant's counterparty (i.e., Defendant).
X	Trade Location	20	List the Country from where Claimant's counterparty entered into the European Government Bond Transaction.
Y	Total Price for Transaction	20	List the total price paid for the bond.



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