

**Must be Postmarked  
No Later Than  
April 27, 2012**

**CardioNet Securities Litigation Settlement  
c/o GCG  
P.O. Box 9833  
Dublin, OH 43017-5733  
Toll-Free: 1 (888) 313-1923  
www.CardioNetSecuritiesSettlement.com**

**CDO**



Control Number:

Claim Number:

## **PROOF OF CLAIM AND RELEASE**

**YOU MUST COMPLETE THIS CLAIM FORM BY APRIL 27, 2012 TO BE ELIGIBLE TO SHARE IN THE SETTLEMENT.**

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**IMPORTANT:** Before Completing This Proof of Claim and Release, Please Carefully Read the Enclosed Instruction Sheet.



**SECTION A - CLAIMANT IDENTIFICATION**

**Beneficial Owner's Name(s)** (First, Middle, Last):

**Account Number:** (not required)

**Social Security Number/Taxpayer ID Number:**

**Record Owner's Name**

(if different from the Claimant Name(s) listed above):

**Claimant or Representative Contact Information:**

The Claims Administrator will use this information for all communications relevant to this Claim (including the check, if eligible for payment). If this information changes, you **MUST** notify the Claims Administrator in writing.

**Street Address:**

**City:**

**State:**

**Zip Code:**

**Country (Other than U.S.):**

**Daytime Telephone Number:**

**Evening Telephone Number:**

**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 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 website at [www.gcginc.com](http://www.gcginc.com) or you may e-mail the Claims Administrator at [eClaim@gcginc.com](mailto:eClaim@gcginc.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 electronic filing department at [eClaim@gcginc.com](mailto:eClaim@gcginc.com) to inquire about your file and confirm it was received and acceptable.

**NOTE:** Separate Proofs of Claim and Release 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 and Release 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 CardioNet common stock) during the Class Period on one Proof of Claim and Release, no matter how many accounts the transactions were made in.



**SECTION B - SCHEDULE OF TRANSACTIONS IN CARDIONET COMMON STOCK**

**1. PURCHASES/ACQUISITIONS:** Purchases or Acquisitions of Shares of CardioNet Common Stock ("Shares") (March 18, 2008 to the date of submission of the claim form, inclusive)<sup>1</sup>:

Trade Date (s) (List Chronologically) Month/Day/Year	Number of Shares Purchased/Acquired	Purchase/Acquisition Price Per Share	Total Purchase Price (excluding commissions, transfer taxes or other fees)
/  /		.	.
/  /		.	.
/  /		.	.
/  /		.	.
/  /		.	.

**IMPORTANT:** If any purchases listed were covered by a "short sale," please mark Yes:

**2. SALES:** Sales of CardioNet Shares (March 18, 2008 to the date of submission of the claim form, inclusive):

Trade Date (s) (List Chronologically) Month/Day/Year	Number of Shares Sold	Sale Price Per Share	Total Sale Price (excluding commissions, transfer taxes or other fees)
/  /		.	.
/  /		.	.
/  /		.	.
/  /		.	.
/  /		.	.

**3. SHARES HELD:** Shares Currently Held:  (Must be documented. If none, write "0" or zero):

<sup>1</sup>Please note: Information requested with respect to your purchases/acquisitions of CardioNet common stock from March 18, 2008 through and including the date you submitted your Claim Form is needed in order to balance your claim; not all purchases/acquisitions during this period, however, are eligible under terms of the Settlement but will be used for purposes of calculating your Recognized Claim(s) pursuant to the Plan of Allocation.

**IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS YOU MUST PHOTOCOPY THIS PAGE AND CHECK THIS BOX  IF YOU DO NOT CHECK THIS BOX THESE ADDITIONAL PAGES WILL NOT BE REVIEWED**



## SECTION C - SIGNATURE AND CERTIFICATION

### SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS

I (We) submit this Proof of Claim and Release under the terms of the Stipulation described in the Notice. I (We) also submit to the jurisdiction of the Superior Court of the State of California, County of San Diego, with respect to my (our) claim as a Class Member (as defined in the Notice) and for purposes of enforcing the release 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. I (We) agree to furnish additional information to Plaintiff's Counsel to support this claim if required to do so. I (We) have not submitted any other claim covering the same purchases, acquisitions, or sales of CardioNet common stock during the Class Period and know of no other Person having done so on my (our) behalf.

### RELEASE

1. I (We) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally, and forever settle, release, relinquish, and discharge, all of the Settled Claims against each and all of the Released Parties (as defined above) and shall not sue any Released Parties with respect to any and all such Settled Claims.

2. "Settled Claims" means any and all claims, rights, causes of action, damages, or liabilities whatsoever, fixed or contingent, accrued or unaccrued, liquidated or unliquidated, at law or in equity, matured or unmatured, foreseen or unforeseen, whether class or individual in nature, including both known and unknown (including, but not limited to, Unknown Claims, as defined below), that were asserted or could have been asserted in this Action by Plaintiff or members of the Class against the Released Parties under United States federal, state, local, statutory or common law, or any other law, rule or regulation, whether foreign or domestic based upon, arising out of, or relating to, in any way, (i) the facts and circumstances alleged in the complaints filed in this Action, and (ii) the purchase of CardioNet's common stock pursuant or traceable to the Company's IPO and Secondary Offering Registration Statements. "Settled Claims" also includes any and all claims arising out of, relating to, or in connection with the Settlement or resolution of the Action against the Released Parties (including Unknown Claims), except claims to enforce any of the terms of this Stipulation.

3. "Unknown Claims" means any and all claims and potential claims against Defendants which Plaintiff or any Class Member does not know or suspect to exist in his, her or its favor as of the Effective Date, which if known by him, her or it might have affected his, her or its decision(s) with respect to the Settlement. With respect to any and all Settled Claims (including Unknown Claims), the Parties stipulate and agree that by operation of the Order and Final Judgment, upon the Effective Date, the Plaintiff shall have expressly waived, and each Class Member shall be deemed to have waived, and by operation of the Final Judgment shall have expressly waived, the provisions, rights and benefits of 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**

and 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. Plaintiff and Class Members may hereafter discover facts in addition to or different from those which he, she, or it now knows or believes to be true with respect to the subject matter of the Settled Claims, but the Plaintiff shall expressly fully, finally, and forever settle and release, and each Class Member, upon the Effective Date, shall be deemed to have, and by operation of the Order and Final Judgment shall have, fully, finally, and forever settled and released, any and all Settled Claims, known or unknown, suspected or unsuspected, contingent or non-contingent, whether or not concealed or hidden, which now exist, or heretofore have existed, upon any theory of law or equity now existing or coming into existence in the future, including, but not limited to, conduct which is negligent, intentional, with or without malice, or a breach of any duty, law or rule, without regard to the subsequent discovery or existence of such different or additional facts. Plaintiff acknowledges, and Class Members shall be deemed to have acknowledged, that the inclusion of "Unknown Claims" in the definition of Settled Claims was separately bargained for and was a key element of the Settlement.

4. This release shall be of no force or effect unless and until the Court approves the Stipulation and the Stipulation becomes effective on the Effective Date (as defined in the Stipulation).

5. 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.

6. I (We) hereby warrant and represent that I (we) have included information about all of my (our) transactions in CardioNet common stock.

7. I (We) understand and intend that the signature below serves as the release of the Settled Claims.



**SECTION C - SIGNATURE AND CERTIFICATION (CONTINUED)**

UNDER THE PENALTIES OF PERJURY, I (WE) CERTIFY THAT ALL OF THE INFORMATION PROVIDED BY ME (US) ON THIS FORM IS TRUE, CORRECT, AND COMPLETE, AND THAT THE DOCUMENTS SUBMITTED HERewith ARE TRUE AND CORRECT COPIES OF WHAT THEY PURPORT TO BE.

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

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

\_\_\_\_\_  
Date

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

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

\_\_\_\_\_  
Date

***If 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

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Capacity of person signing on behalf of Claimant, if other than an individual, e.g., executor, president, custodian, etc.

**SUBSTITUTE FORM W-9  
Request for Taxpayer Identification Number ("TIN") and Certification**

**PART I**

Name:

\_\_\_\_\_

Check appropriate box:

Individual/Sole Proprietor

Partnership

Trust

IRA

Corporation

Pension Plan

Other

Enter TIN on appropriate line.

- For individuals, this is your Social Security Number ("SSN").
- For sole proprietors, you must show your individual name, but you may also enter your business or "doing business as" name. You may enter either your SSN or your Employer Identification Number ("EIN").
- For other entities, it is your EIN.

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Social Security Number

or

\_\_\_\_ - \_\_\_\_\_

Employer Identification Number





## REMINDER CHECKLIST

1. Please sign the above release and declaration.
2. Remember to attach supporting documentation, if available.
3. Do not send original stock certificates.
4. Keep a copy of your claim form 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 us your new address.

THIS PROOF OF CLAIM AND RELEASE MUST BE POSTMARKED NO LATER THAN  
**APRIL 27, 2012** AND MUST BE MAILED TO:

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