

Claims Administrator
PO Box 4234
Portland OR 97208-4234

Toll Free Number: (877) 810-7247
Website: www.immucorsecuritieslitigation.com
Email: info@immucorsecuritieslitigation.com
Objection/Exclusion Deadline: May 16, 2013
Settlement Fairness Hearing: June 6, 2013
Deadline to File a Claim: July 24, 2013

Before completing this Proof of Claim Form, please read the detailed instructions on pages 3-4. When filling out this form, type or print in the boxes below in CAPITAL LETTERS; do not use red ink, pencils or staples.

Beneficial Owner's First Name

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PART II: SCHEDULE OF TRANSACTIONS IN IMMUCOR COMMON STOCK

A. Number of shares of Immucor common stock held at the close of trading on October 18, 2005:

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B. Purchases or other acquisitions, including by way of exchange, conversion or otherwise (from October 19, 2005 to September 24, 2009, inclusive) of Immucor common stock (please note, shares purchased during the 90-day period from June 26, 2009 through September 24, 2009 are not eligible to participate in the Settlement):

Trade Date (MM/DD/YY)	Number of Shares Purchased or Acquired	Price per Share	Total Purchase Price*	Transaction Type (P/R**)
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* Excluding taxes, fees and commissions

** P=Purchase, R=Receipt (transfer in)

C. Please indicate the number of shares, if any, received from the 3:2 stock split on May 15, 2006:

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D. Sales (from October 19, 2005 to September 24, 2009, inclusive) of Immucor common stock:

Trade Date (MM/DD/YY)	Number of Shares Sold or Delivered	Price per Share	Total Sale Price*	Transaction Type (S/D**)
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* Excluding taxes, fees and commissions

** S=Sale, D=Delivery (transfer out)

E. Number of shares of Immucor common stock held as of the close of trading on September 24, 2009:

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PART III: RELEASE

The obligations incurred pursuant to the Stipulation shall be in full and final disposition of the Action as against the Defendants and shall fully, finally and forever compromise, settle, release, resolve, relinquish, waive, discharge and dismiss, on the merits and with prejudice, the Action and any and all Released Claims against each and all of the Releasees in the event the Settlement is approved. Pursuant to the Judgment, without further action by anyone, and subject to ¶ 9 of the Stipulation, upon the Effective Date of the Settlement, Lead Plaintiff and each of the other Class Members, on behalf of themselves, their heirs, executors, administrators, predecessors, successors, affiliates and assigns, shall be deemed to have, and by operation of law and of the Judgment shall have, fully, finally and forever compromised, settled, released, resolved, relinquished, waived, discharged and dismissed each and every Released Lead Plaintiff's Claim against the Defendants and Defendants' Releasees and shall forever be enjoined from prosecuting any or all of the Released Lead Plaintiff's Claims against any of Defendants' Releasees. This Release shall not apply to any Person who submits a valid opt-out from the Class in connection with the Settlement Notice.

Further, pursuant to the Judgment, without further action by anyone, and subject to ¶ 9 of the Stipulation, upon the Effective Date of the Settlement, each of the Defendants and each of Defendants' Releasees, on behalf of themselves, their heirs, executors, administrators, predecessors, successors, affiliates and assigns, shall be deemed to have, and by operation of law and of the Judgment shall have, fully, finally and forever compromised, settled, released, resolved, relinquished, waived, discharged and dismissed each and every Released Defendants' Claims against all of the Lead Plaintiff's Releasees and shall forever be enjoined from prosecuting any or all of the Released Defendants' Claims against any of the Lead Plaintiff's Releasees. This Release shall not apply to any Person who submits a valid opt-out from the Class in connection with the Settlement Notice.

PART IV: CERTIFICATION

I (We) declare under penalty of perjury under the laws of the United States of America that the foregoing information supplied by the undersigned is true and correct.

Executed this _____ day of _____, in _____, _____.

(Month/Year) (City) (State/Country)

Signature of Claimant

Date

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MM DD YY

Print Name of Claimant

Signature of Joint Claimant, if any

Date

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MM DD YY

Print Name of Joint Claimant

PROOF OF CLAIM INSTRUCTIONS

- A. This Proof of Claim has been sent to you because you may be a member of the Class in this matter. To participate, you must complete and sign this Proof of Claim and provide supporting documents for any eligible transactions you claim. If you fail to file a properly addressed Proof of Claim and supporting documents, your claim may be rejected, and you may be determined to be ineligible for any payment from the Net Settlement Fund.
- B. Submission of this Proof of Claim does not assure that you will share in the proceeds of the Settlement Fund created in this Action.

- C. YOU MUST COMPLETE AND SUBMIT YOUR PROOF OF CLAIM BY MAIL POSTMARKED ON OR BEFORE JULY 24, 2013, ADDRESSED TO THE CLAIMS ADMINISTRATOR AS LISTED BELOW.
- D. If you are NOT a member of the Class, as defined in the Notice of Pendency of Class Action and Proposed Settlement (“Notice”), DO NOT submit a Proof of Claim.
- E. If you are a member of the Class and you do not timely request to be excluded from the Class, you are bound by the terms of any judgment entered in the Action, WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM.
- F. Use the section of this form entitled “Claimant Identification” to identify each owner of record. THIS CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL OWNER(S), OR THE LEGAL REPRESENTATIVE OF SUCH OWNER(S) OF SHARES UPON WHICH THIS CLAIM IS BASED.
- G. Use the section of this form entitled “Schedule of Transactions in Immucor Common Stock” 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 format. Sign and print or type your name on each additional sheet.
- H. Complete a separate Claim Form for each account in which you qualify.
- I. Provide all of the requested information with respect to shares of the Immucor common stock that you acquired at any time on or between October 19, 2005 and September 24, 2009, inclusive, whether such transactions resulted in a profit or a loss. Failure to report all such transactions may result in the rejection of your claim.
- J. List each transaction in the Class Period in chronological order, by trade date, beginning with the earliest. You must accurately provide the month, day and year of each transaction you list.
- K. Documentation of your transactions in Immucor common stock must be attached to your claim. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim.
- L. 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.

Proof of Claim Forms must be postmarked no later than July 24, 2013 and mailed to In re Immucor, Inc. Securities Litigation, Claims Administrator, PO Box 4234, Portland, OR 97208-4234.

ATTENTION NOMINEES AND BROKERAGE FIRMS: If you are filing claim(s) electronically on behalf of beneficial owners, detailed instructions are available on the Settlement website at www.immucorsecuritieslitigation.com along with the formatted electronic filing template. You may also send an email to info@immucorsecuritieslitigation.com requesting this information.

Reminder Checklist:

1. Sign the Certification section of the Proof of Claim on Page 3.
2. Remember to attach supporting documentation.
3. Do not send original documents.
4. Keep a copy of your Proof of Claim and all documents submitted for your records.
5. If you desire an acknowledgment of receipt of your Proof of Claim form, send your Proof of Claim by Certified Mail, Return Receipt Requested.
6. If you move, please send the Claims Administrator your new address.

ACCURATE CLAIMS PROCESSING CAN TAKE A SIGNIFICANT
AMOUNT OF TIME. THANK YOU FOR YOUR PATIENCE.