As directed by Article 42(1) of the EC Regulation on Insolvency Proceedings 2000 the following is brought to your attention:

| Notice to creditor in EU Member State | Language |
|--|------------|
| Invitation to lodge a claim. Time limits to be observed. | English |
| Invitación para realizar un reclamo. Se deberán respetar los plazos establecidos. | Spanish |
| Opfordring til anmeldelse af fordringer. Vær opmærksom på fristerne. | Danish |
| Aufforderung zur Anmeldung einer Forderung. Etwaige Fristen beachten. | German |
| Πρόσκληση για έγερση αξίωσης. Υποχρεωτική τήρηση προθεσμίας | Greek |
| Invitation à produire une créance. Délais à respecter. | French |
| Invito all'insinuazione di un credito. Termine da osservare. | Italian |
| Oproep tot indiening van schuldvorderingen. In acht te nemen termijnen. | Dutch |
| Aviso de Reclamação de Créditos. Prazos Legais a Observar. | Portuguese |
| Kehotus saatavan ilmoittamiseen. Noudatettavat määräajat. | Finnish |
| Anmodan att anmäla fordran. Tidsfrister att iaktta. | Swedish |
| Pozvánka k uplatnění si nároku. Je nutno dodržet termíny. | Czech |
| Zaproszenie do wniesienia wniosku o odszkodowanie. Termin wniesienia wniosku jest obarczony obostrzeniami. | Polish |
| Felhívás követelés benyújtására. Vegye figyelembe az időkorlátokat. | Hungarian |
| Poziv k predložitvi zahtevka. Treba je upoštevati časovne omejitve. | Slovenian |
| Приглашение к подаче иска. Соблюдайте установленные сроки. | Russian |
| Pasiūlymas pateikti ieškinį. Paisytini laiko apribojimai. | Lithuanian |
| Stedina biex tagħmel talba. It-termini taż-żmien għandhom jiġu mħarsa. | Maltese |
| Palve nõude esitamiseks. Palun jälgige ajapiiranguid. | Estonian |
| Uzaicinājums prasības iesniegšanai. Prasības iesniegšanas laiks ir stingri ierobežots. | Latvian |
| Invitație pentru a depune o cerere. Luați în considerare data limită. | Romanian |
| Cuireadh éileamh a thaisceadh. Teorainn ama le comhlíonadh. | Irish |
| Покана за предявяване на иск. Трябва да се спази указания краен срок. | Bulgarian |
| Pozvánka na uplatnenie si nároku. Je nutné dodržať termíny. | Slovak |

Please complete and return this claim form with supporting documentation as soon as possible to the Joint Liquidators at lehman.affiliates@uk.pwc.com.

| Creditor's name and address. | |
|--|---|
| | |
| | |
| | |
| DBS CODE (if known): | |
| DBS CODE (II KIIOWII). | |
| Registered Company number (or other relevant | |
| company identification number as provided by the incorporation authority in the jurisdiction in which | |
| your entity is registered. If the creditor is not a | |
| company, please provide an equivalent legal | |
| registration number, if applicable): | (Enter amount using the relevant contractual currency |
| Claim amount | (Enter amount using the relevant contractual currency separately) |
| | |
| | |
| (a) Total amount of your claim (including VAT) | |
| at the date administration commenced (30 | |
| October 2008)* | |
| (b) Any payment received by the creditor in | |
| relation to the claim after the appointment | |
| of the Joint Liquidators | |
| (a) If your claim in (a) above is not of any | |
| (c) If your claim in (a) above is net of any amounts owed to LB REF 3, please state | |
| the total value (including VAT) of any | |
| monies owed by the creditor to LB REF 3 | |
| *You must deduct any trade or other discounts which would | |
| have been available to the company but for its administration, except any discount for immediate, early or cash settlement. | |
| except any discount for immediate, early of easil settlement. | |
| If the claim includes Value Added Tax, please | |
| state: | |
| (a) are asset of Malson Added Tays and | |
| (a) amount of Value Added Tax; and | |
| (b) amount of claim NET of Value Added Tax. | |
| le all or part of your claim professible as defined | (Enter amount(s) claimed as preferential using the relevant |
| Is all or part of your claim preferential as defined in the Insolvency Act 1986? (See Footnote 1 | contractual currency): |
| below.) If so, please specify which category of | |
| preferential debt your claim falls. | Category: |
| If no, please leave this section blank. | |
| Footnote 1: | |
| 1.Categories of preferential creditors are defined in section 386 of the Insolvency Act 1986 (amended by the provisions of | |
| section 251 of the Enterprise Act 2002) as contributions to occupational pension schemes; remuneration and accrued | |
| holiday pay of employees; amounts due in respect of monies advanced to pay remuneration and accrued holiday pay; | |
| amounts ordered to be paid under the Reserve Forces | |
| (Safeguard of Employment) Act 1985 and levies on coal and steel production | |
| | <u> </u> |

| Does the claim include uncenitalized interest? | |
|--|---|
| Does the claim include uncapitalised interest? | |
| If yes, please state: | |
| (i) amount; | |
| (i) amount, | |
| (ii) the period such interest relates to; and | |
| (iii) the basis on which such interest is claimed and calculated (e.g. please reference applicable | |
| statutory provisions or contract clauses). | |
| What goods or services did you provide, if any? | |
| Trial goods of convices did you provide, if any. | |
| | |
| | |
| | |
| | |
| Please provide details of any documents that | (Enter amount(s) claimed as preferential using the relevant |
| substantiate your claim including where | contractual currency): |
| applicable, details of any reservation of title that | |
| you wish to assert in respect of goods to which | |
| the debt relates and the value of the specified | |
| goods. | |
| If the second se | |
| If relevant, please attach a statement of account. | |
| | |
| Is your claim relating to a Financial Market | YES/NO (please delete as appropriate) |
| Trading Agreements(s)? | (Enter amount using the relevant contractual currency): |
| If you who are a water the full amount of the mortion | |
| If yes, please enter the full amount of the portion of your total claim that derives from such | |
| agreement(s), and provide separate supporting | |
| documentation. | |
| documentation. | |
| If no, please leave this section blank. | |
| Is your claim being made pursuant to a guarantee | YES/NO (please delete as appropriate) |
| given by LB REF 3? | (Enter amount using the relevant contractual currency): |
| | |
| If yes, please provide the full amount of the | |
| portion of your total claim that derives from such | |
| guarantee, and provide details of the guarantee | |
| (e.g. date of guarantee, details of guaranteed | |
| obligation(s)). Please attach supporting | |
| documentation. | |
| If no, please leave this section blank. | |
| If you have security for your debt, please provide | (Enter amount using the relevant contractual currency): |
| details of the type and value of the security, the | |
| date it was given, and provide details of how you | |
| have valued your security. | |
| | |
| If no security held, leave this section blank. | |
| We have a duty as Liquidators to consider the | |
| conduct of the directors prior to our appointment. Are there any particular matters relating to the | |
| purchase of goods and services from yourselves, | |
| relevant to such conduct, or any other matters | |
| that you feel should be reviewed? | |
| anat you look official bo forfored: | |
| If so, please provide brief details on this form or | |
| on a separate sheet if there is insufficient room. | |
| | |
| on a separate sheet if there is insufficient room. | |

| Does your claim or any part of it result from your taking the benefit of an assignment of claim? | YES/NO Date of Assignment: |
|--|----------------------------|
| Have you assigned the whole part of your claim or are you taking steps to assign it? | YES/NO Date of Assignment: |
| Please provide contact details of the Assignor: (i.e. legal entity, address, email and name) | |
| Please provide contact details of the Assignee: (i.e. legal entity, address, email and name) | |
| If there has been no assignment in respect to your claim, please leave this section blank | |
| Signature of creditor or person authorised to act on behalf of the creditor. | Signature: |
| | Date: |
| Name in block capitals. | |
| Position with or relation to the creditor (e.g. director, company secretary, solicitor). | |
| Address of authorised signatory: | |

Please complete and return this claim form with supporting documentation as soon as possible to the Joint Liquidators at lehman.affiliates@uk.pwc.com.