

PROOF OF CLAIM FORM

Castro v. Old Republic National Title Insurance Company
Civil Action No. 3:06-cv-784 (AWT), D. Conn.

DEADLINE FOR SUBMISSION: POSTMARKED BY AUGUST 4, 2010

LAST NAME	FIRST NAME	
<input type="text"/>		
Address of Property that was Refinanced (the "Property")		
<input type="text"/>		
Address Line 2 (If Applicable)		
<input type="text"/>		
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/> - <input type="text"/>
Telephone (Day)	Telephone (Night)	
(<input type="text"/>) <input type="text"/> - <input type="text"/>	(<input type="text"/>) <input type="text"/> - <input type="text"/>	

CURRENT ADDRESS IF DIFFERENT THAN ABOVE

Address 1		
<input type="text"/>		
Address Line 2 (If Applicable)		
<input type="text"/>		
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/> - <input type="text"/>

If you paid a premium for title insurance issued by Old Republic National Title Insurance Company ("Old Republic") in connection with a mortgage refinance transaction, you may be entitled to recover the difference between the premium you actually paid and the applicable refinance rate. You may also be entitled to an additional amount depending on the title agent involved in your transaction.

If you believe you qualify and want to participate in the Settlement, you must complete and return this Proof of Claim Form.

DECLARATION OF ELIGIBILITY TO PARTICIPATE IN SETTLEMENT

By signing this form, I (we) certify the accuracy of each of the following six facts under penalty of perjury under the laws of the United States of America:

1. I am (we are) the person(s) identified above.
2. I (we) owned an interest in the Property identified above.
3. The Property is my (our) current mailing address; or, if it is not, my (our) current mailing address is written on the lines provided above.
4. I (we) refinanced a mortgage on the Property within 10 years of a prior mortgage on the same Property.
5. Between my (our) prior mortgage and the refinance mortgage, there were no changes in ownership of the Property (other than the addition or deletion of a family member on the deed).
6. I (we) (not the mortgage broker, lender, or any other party) paid the closing costs associated with the refinance mortgage.

APPLICATION FOR SETTLEMENT PAYMENT

I (WE) UNDERSTAND THAT TO PARTICIPATE IN THE SETTLEMENT I (WE) MUST SUBMIT ONE DOCUMENT FROM CATEGORY A AND ONE DOCUMENT FROM CATEGORY B. By checking the box next to each document I am (we are) submitting, I (we) declare that the document(s) submitted with this Proof of Claim Form are true and accurate copies of the original.

Category A (check one)

- Title insurance policy(ies) issued in connection with any *prior* mortgage on the Property during the ten years prior to refinancing the Property.
- HUD-1 Settlement Statement from any *prior* mortgage on the Property during the ten years prior to refinancing the Property. (An example of what a HUD-1 Settlement Statement looks like may be found at www.hud.gov/offices/adm/hudclips/forms/files/1.pdf.)

Category B (check one)

- HUD-1 Settlement Statement from my (our) *refinance* mortgage showing title insurance premium paid (line 1108) to Old Republic or ORNTIC. (An example of what a HUD-1 Settlement Statement looks like may be found at www.hud.gov/offices/adm/hudclips/forms/files/1.pdf.)
- Other closing documents from my (our) *refinance* mortgage showing (a) the date of the refinance; (b) the amount of the title insurance premium; and (c) that Old Republic provided the title insurance.

If your transaction involved one of the following title agents, you may be entitled to an additional amount up to \$75 (“Tier 3 Settlement Payment”): Advanced Title and Escrow, Bridgespan Title, Industry Partners Title, or TransContinental Title Company.

A Tier 3 Settlement Payment will be \$75 if fewer than 667 Class Members who submit valid claim forms are eligible for such payment (“Qualifying Tier 3 Claimants”). If the number of Qualifying Tier 3 Claimants is 667 or more, the Tier 3 Settlement Payment will be calculated as follows: $\$50,000 \div \# \text{ of Qualifying Tier 3 Claimants}$, in which case the Tier 3 Settlement Payment will be less than \$75.

DON'T FORGET TO ATTACH COPIES, SHOWING BOTH FRONT AND BACK PAGES.

SUBMISSION TO JURISDICTION OF COURT AND AGREEMENT WITH SETTLEMENT

By submitting a Proof of Claim, you are agreeing to be subject to the jurisdiction of the United States District Court for the District of Connecticut for any proceedings relating to the Proof of Claim.

RELEASE OF CLAIMS

For and in consideration of the Settlement Payments and the mutual promises contained in the Settlement Agreement, I (we), on behalf of myself (ourselves) and my (our) respective agents, heirs, executors, administrators, successors, assigns, guardians, and representatives, fully and finally release, as of the Final Settlement Date, Old Republic and its parent companies (including intermediate parents and ultimate parents) and subsidiaries, affiliates, predecessors, successors, and assigns, and each of their respective officers, directors,

employees, agents, attorneys, insurers, stockholders, representatives, heirs, administrators, executors, successors and assigns, and any other person or entity acting on their behalf (the "Released Parties," which does not include any separate title insurance underwriter under common ownership with Old Republic) from any and all claims for relief, causes of action, suits, petitions, demands in law or equity, or any allegations of liability, damages, debts, contracts, agreements, obligations, promises, attorneys' fees, costs, interest, or expenses that are based on or in any way related to the premiums charged for lender's title insurance policies issued by the Released Parties in connection with mortgage refinancings involving residential real estate located in Connecticut during the Class Period where the refinancing occurred within 10 years of a prior mortgage on the same property with no change in the ownership of the property (other than the deletion or addition of a family member) following the prior mortgage (the "Released Claims").

The Released Claims include, and I (we) do hereby release, without limitation, all of the causes of action alleged against Old Republic in the above-referenced lawsuits together with any other claim under state or federal law that could have been asserted in the action with respect to premiums charged for lender's title insurance policies issued by the Released Parties in connection with mortgage refinancings involving residential real estate located in Connecticut during the Class Period where the refinancing occurred within 10 years of a prior mortgage on the same property with no change in the ownership of the property (other than the deletion or addition of a family member) following the prior mortgage.

In connection with this Release, the Released Claims include, and I (we) do hereby release, without limitation, all past or currently existing claims that existed during the Class Period (May 19, 2000 through November 30, 2008) that may be unknown or unsuspected, or facts in addition to or different from those which are now known and believed to be true with respect to the allegations and subject matter of the above-referenced lawsuits. Nevertheless, it is my (our) intention in executing this Release to fully, finally and forever settle and release all such matters and all such claims against the Released Parties, which exist or might have existed (whether or not previously or currently asserted in this litigation) as described above.

All owners of the Property must sign this form. Failure to sign this Certification will result in denial of your Proof of Claim.

Executed this _____ day of _____ 2010, at _____, _____.
[month] [city] [state]

Signature of Claimant

Signature of Co-Owner of Property, If Any

Signature of Co-Owner of Property, If Any

Signature of Co-Owner of Property, If Any

IN ORDER FOR YOUR CLAIM TO BE VALID, YOU MUST COMPLETE, SIGN, AND MAIL THIS PROOF OF CLAIM FORM WITH ANY REQUIRED DOCUMENTATION BY REGULAR MAIL WITH A POSTMARK DATED NO LATER THAN AUGUST 4, 2010 TO:

**CLAIMS ADMINISTRATOR
Kurtzman Carson Consultants LLC
P.O. Box 56636
Jacksonville, FL 32241-6636**

REMINDER CHECKLIST:

1. If this claim is made on behalf of joint claimants, then each claimant must sign.
2. Please remember to attach any supporting documents.
3. Do not send originals of any supporting documents.
4. Keep a copy for your records of your Proof of Claim and any documentation submitted.
5. You will not receive confirmation that your Proof of Claim has been received.
6. If you move, please send us your new address.