

Must be
Postmarked or
Received
On or Before
July 18, 2016

Vocera Communications, Inc. Securities Litigation
c/o GCG
PO Box 9349
Dublin OH 43017-4249
1-800-231-1815
www.vocerasecuritieslitigation.com

VRA



ID Number:

Control Number:

PROOF OF CLAIM AND RELEASE FORM

TO FILE A CLAIM AND RECOVER UNDER THE SETTLEMENT OF THIS ACTION, YOU MUST SUBMIT THIS PROOF OF CLAIM AND RELEASE FORM (THE "PROOF OF CLAIM"). HOWEVER, SUCH FILING IS NOT A GUARANTEE THAT YOU WILL SHARE IN THE PROCEEDS OF THE SETTLEMENT IN THE ACTION.

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Important - This form should be completed IN CAPITAL LETTERS using BLACK or DARK BLUE ballpoint/fountain pen. Characters and marks used should be similar in the style to the following:

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z 1 2 3 4 5 6 7 0



PART I - CLAIMANT IDENTIFICATION

Claimant or Representative Contact Information:

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

Claimant Name(s) (as you would like the name(s) to appear on the check, if eligible for payment):

Grid for Claimant Name(s)

Street Address:

Grid for Street Address

City: **Last 4 digits of Claimant SSN/TIN:***

Grid for City and Last 4 digits of Claimant SSN/TIN

Account Number:

Grid for Account Number

State: **Zip Code:** **Country (if Other than U.S.):**

Grid for State, Zip Code, and Country

Name of the Person you would like the Claims Administrator to contact Regarding this Claim (if different from the Claimant Name(s) listed above):

Grid for Name of the Person to contact

Daytime Telephone Number:

Evening Telephone Number:

Grid for Daytime and Evening Telephone Numbers

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.)

Grid for Email Address

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 settlement website at www.vocerasecuritieslitigation.com or you may e-mail the Claims Administrator's electronic filing department at eClaim@gardencitygroup.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@gardencitygroup.com to inquire about your file and confirm it was received and acceptable.

To view Garden City Group, LLC's Privacy Notice, please visit <http://www.gardencitygroup.com/privacy>

*The last four digits of the taxpayer identification number (TIN), consisting of a valid Social Security Number (SSN) for individuals or Employer Identification Number (EIN) for business entities, trusts, estates, etc., and telephone number of the beneficial owner(s) may be used in verifying this claim.



PART II - GENERAL INSTRUCTIONS

1. Capitalized terms not defined in this Proof of Claim have the same meaning as set forth in the Notice of Pendency of Class Action, Proposed Settlement, and Motion for Attorneys' Fees and Expenses ("the Notice") that accompanies this Proof of Claim and the Stipulation and Agreement of Settlement, dated as of January 14, 2016 (the "Stipulation").
2. To be eligible to recover from the Net Settlement Fund in the action entitled *In re Vocera Communications, Inc. Securities Litigation*, Master File No. 3:13-cv-03567 EMC (N.D. Cal.) (the "Action"), you must complete and, on page 7, sign this Proof of Claim. If you fail to submit a properly completed and addressed Proof of Claim, your claim may be rejected and you may be precluded from any recovery from the Net Settlement Fund created in connection with the Settlement of the Action.
3. Submission of this Proof of Claim, however, does not assure that you will share in the Net Settlement Fund.
4. **YOU MUST MAIL OR SUBMIT YOUR COMPLETED AND SIGNED PROOF OF CLAIM SO THAT IT IS POSTMARKED OR RECEIVED ON OR BEFORE JULY 18, 2016, ADDRESSED AS FOLLOWS:**

VOCERA COMMUNICATIONS, INC. SECURITIES LITIGATION
c/o GCG
P.O. Box 9349
Dublin, OH 43017-4249

To be considered timely, your Proof of Claim must be postmarked or received by the deadline above. In all other cases, a Proof of Claim shall be deemed to have been submitted when actually received by the Claims Administrator.

5. You must submit supporting documentation for the transactions reported on this Proof of Claim, such as broker confirmation slips, broker account statements, an authorized statement from your broker reporting information about your transactions, or other similar documents.
6. If you are NOT a Settlement Class Member (as defined in the Notice), DO NOT submit a Proof of Claim.
7. If you are a Settlement Class Member and have not requested exclusion, you will be bound by the terms of the Settlement and any judgment entered in this Action, **WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM.**
8. You should be aware that it will take a significant amount of time to process fully all of the Proofs of Claim and to administer the Settlement. This work will be completed as promptly as time permits, given the need to review and tabulate each Proof of Claim. Please notify the Claims Administrator of any changes of address.



PART III - SCHEDULE OF TRANSACTIONS IN VOCERA COMMON STOCK

A. BEGINNING HOLDINGS: State the total number of shares of Vocera publicly traded common stock as of the opening of trading on **March 28, 2012**. If none, write "0" or "Zero." (Must be documented.)

Shares										

B. PURCHASES/ACQUISITIONS DURING THE CLASS PERIOD: Separately list each and every purchase/acquisition of Vocera publicly traded common stock from after the opening of trading on **March 28, 2012** through and including the close of trading on **May 2, 2013**. (Must be documented.)

Purchase Date (list chronologically) Month/Day/Year	Number of Shares Purchased	Price Per Share	Total Purchase Price (excluding commissions, taxes, and other fees)
/ /		.	
/ /		.	
/ /		.	
/ /		.	
/ /		.	

C. PURCHASES/ACQUISITIONS DURING 90-DAY LOOKBACK PERIOD: State the total number of shares of Vocera publicly traded common stock purchased after the opening of trading on **May 3, 2013** through the close of trading on **August 1, 2013**. If none, write "0" or "Zero." (Must be documented.)

Shares										

D. SALES: Separately list each and every sale/disposition of Vocera publicly traded common stock from after the opening of trading on **March 28, 2012** through and including the close of trading on **August 1, 2013**. (Must be documented.)

Sale Date (list chronologically) Month/Day/Year	Number of Shares Sold	Price Per Share	Total Sale Price (excluding commissions, taxes, and other fees)
/ /		.	
/ /		.	
/ /		.	
/ /		.	
/ /		.	

E. ENDING HOLDINGS: State the total number of shares of Vocera publicly traded common stock held at the close of trading on, **August 1, 2013**. If none, write "0" or "Zero." (Must be documented.)

Shares										

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



PART IV - SCHEDULE OF TRANSACTIONS IN VOCERA CALL OPTIONS

A. BEGINNING HOLDINGS: At the beginning of trading on **March 28, 2012**, I owned the following call option contracts. (Must be documented.)

Number of Contracts	Expiration Month and Year & Strike Price of Options (i.e. 04/12 \$40)	Purchase Price Per Contract	Amount Paid	Insert an "E" if Exercised or an "X" if Expired	Exercise Date (Month/Day/Year)

B. PURCHASES/ACQUISITIONS OF CALL OPTIONS DURING THE CLASS PERIOD: I made the following purchases/acquisitions of call option contracts between **March 28, 2012** and **May 2, 2013**, inclusive. (Must be documented.)

Date of Purchase (List Chronologically) (Month/Day/Year)	Number of Contracts	Expiration Month and Year & Strike Price of Options (i.e. 04/12 \$40)	Purchase Price Per Contract	Total Purchase Price (excluding taxes, commissions and fees)	Insert an "E" if Exercised or an "X" if Expired	Exercise Date (Month/Day/Year)

C. SALES: I made the following sales, regardless of when they occurred, of the above call option contracts that were purchased or otherwise acquired between **March 28, 2012** and **May 2, 2013**, inclusive. (Must be documented.)

Date of Sale (List Chronologically) (Month/Day/Year)	Number of Contracts	Expiration Month and Year & Strike Price of Options (i.e. 04/12 \$40)	Sale Price Per Contract	Total Sale Price (excluding taxes, commissions and fees)

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

PART V - SCHEDULE OF TRANSACTIONS IN VOCERA PUT OPTIONS



A. BEGINNING HOLDINGS: At the beginning of trading on **March 28, 2012**, I was obligated on the following put option contracts. (Must be documented.)

Number of Contracts	Expiration Month and Year & Strike Price of Options (i.e. 04/12 \$40)	Sale Price Per Contract	Amount Received	Insert an "A" if Assigned or an "X" if Expired	Assign Date (Month/Day/Year)
	/				/
	/				/

B. SALES (WRITING) OF PUT OPTIONS DURING THE CLASS PERIOD: I wrote (sold) put option contracts between **March 28, 2012** and **May 2, 2013**, inclusive, as follows. (Must be documented.)

Date of Writing (Sale) (List Chronologically) (Month/Day/Year)	Number of Contracts	Expiration Month and Year & Strike Price of Options (i.e. 04/12 \$40)	Sale Price Per Contract	Total Sale Price (excluding taxes, commissions and fees)	Insert an "A" if Assigned or an "X" if Expired	Assign Date (Month/Day/Year)
/		/				/
/		/				/

C. COVERING TRANSACTIONS (REPURCHASES): I made the following repurchases, regardless of when they occurred, of the above put option contracts that I wrote (sold) on or before **May 2, 2013**, inclusive, as follows. (Must be documented.)

Date of Repurchase (List Chronologically) (Month/Day/Year)	Number of Contracts	Expiration Month and Year & Strike Price of Options (i.e. 04/12 \$40)	Price Paid Per Contract	Total Purchase Price (excluding taxes, commissions and fees)
/		/		
/		/		

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



PART VI - SUBMISSION TO JURISDICTION OF THE COURT AND ACKNOWLEDGMENTS

By signing and submitting this Proof of Claim the claimant(s) or the person(s) acting on behalf of the claimant(s) certify(ies) that: I (We) submit this Proof of Claim under the terms of the Plan of Allocation of Net Settlement Fund described in the accompanying Notice. I (We) also submit to the jurisdiction of the United States District Court for the Northern District of California (the "Court") with respect to my (our) claim as a Settlement Class Member(s) and for purposes of enforcing the releases set forth herein. I (We) further acknowledge that I (we) will be bound by the terms of any judgment entered in connection with the Settlement in the Action, including the releases set forth therein. I (We) agree to furnish additional information to the Claims Administrator to support this claim, such as additional documentation for transactions in eligible Vocera securities, if required to do so. I (We) have not submitted any other claim covering the same transactions in publicly traded Vocera securities during the alleged Class Period and know of no other person having done so on my (our) behalf.

PART VII - RELEASES, WARRANTIES, AND CERTIFICATION

1. I (We) hereby warrant and represent that I am (we are) a Settlement Class Member as defined in the Notice, that I am (we are) not excluded from the Settlement Class, that I am (we are) not one of the "Released Defendant Parties" as defined in the accompanying Notice (other than an Underwriter making a claim on behalf of a third-party client, account, fund, trust or employee benefit plan that otherwise falls within the definition of the Settlement Class and on whose behalf that Underwriter, or an agent or affiliate thereof, held Vocera securities in a fiduciary capacity), and that I (we) believe I am (we are) eligible to receive a distribution from the Net Settlement Fund under the terms and conditions of the Plan of Allocation, as set forth in the Notice.

2. As a Settlement Class Member, I (we) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally, and forever settle, release, and discharge with prejudice the Released Claims as to each and all of the Released Defendant Parties (as these terms are defined in the accompanying Notice).

3. As a Settlement Class Member, I (we) hereby acknowledge that I (we) will not be entitled to receive a recovery in any other action against any of the Released Defendant Parties based on or arising out of the Released Claims (as these terms are defined in the accompanying Notice).

4. This release shall be of no force or effect unless and until the Court approves the Settlement and it becomes effective on the Effective Date.

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) purchases, acquisitions and sales and other transactions in publicly traded Vocera securities that occurred during the Class Period and the number of securities held by me (us), to the extent requested.

7. I (We) certify that I am (we are) not subject to backup withholding. (If you have been notified by the IRS that you are subject to backup withholding, strike out the previous sentence).

8. I (We) declare that all of 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

Print Name of Claimant

Signature of Joint Claimant, if any

Date

Print Name of Joint Claimant, if any

Signature of Person signing on behalf of Claimant, if any

Date

Capacity of person signing on behalf of Claimant, if other than an individual, Administrator, if any

Print Name of Person signing on behalf of Claimant

**REMINDER CHECKLIST**

**ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME.
THANK YOU FOR YOUR PATIENCE.**

1. Please sign the Proof of Claim and Release.
2. Remember to attach supporting documentation (supporting documents include trade confirmation, official monthly, quarterly or annual brokerage statements).
3. **DO NOT SEND ORIGINALS OF ANY SUPPORTING DOCUMENTS.**
4. Keep a copy of your completed Proof of Claim and all documentation submitted for your records.
5. The Claims Administrator will acknowledge receipt of your Proof of Claim by mail within 60 days. **Your claim is not deemed filed until you receive an acknowledgment postcard.** If you do not receive an acknowledgment postcard within 60 days, please call the Claims Administrator toll free at **1-800-231-1815**.
6. If you move, you must send the Claims Administrator your new address. If these documents were sent to an old or incorrect address, you must notify the Claims Administrator.
7. **DO NOT USE HIGHLIGHTER ON THE PROOF OF CLAIM OR SUPPORTING DOCUMENTATION.**
8. If you have any questions or concerns regarding your Proof of Claim, please contact the Claims Administrator at the address listed below or at **1-800-231-1815**, or visit **www.vocerasecuritieslitigation.com**

THIS PROOF OF CLAIM MUST BE POSTMARKED OR RECEIVED
ON OR BEFORE **JULY 18, 2016** AND MUST BE MAILED TO:

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