

UNITED STATES DISTRICT COURT  
MIDDLE DISTRICT OF FLORIDA  
JACKSONVILLE DIVISION

JACK HIRSCH, et al.

v.

PSS WORLD MEDICAL, INC., et al.

Plaintiff,

Defendants.

No. 3:98-cv-502-J-32TEM

Judge Corrigan

## **PROOF OF CLAIM**

### **I. GENERAL INSTRUCTIONS**

1. To recover as a Class Member based on your claims in the action entitled *Jack Hirsch, et al. v. PSS World Medical, Inc., et al.*, No. 3:98-cv-502-J-32TEM (M.D. Fla.) (the "Litigation"), you must complete and, on page 4 hereof, sign this Proof of Claim. If you fail to file a properly addressed Proof of Claim (as set forth in paragraph 3 below), your claim may be rejected and you may be precluded from any recovery from the Settlement Fund created in connection with the proposed settlement of the Litigation.

2. Submission of this Proof of Claim, however, does not assure that you will share in the proceeds of settlement in the Litigation.

**3. YOU MUST MAIL YOUR COMPLETED AND SIGNED PROOF OF CLAIM POSTMARKED ON OR BEFORE FEBRUARY 9, 2006, ADDRESSED AS FOLLOWS:**

PSS World Medical, Inc. Securities Litigation Claims Administrator  
c/o FRG Information Systems Corp.  
P.O. Box 4059, Grand Central Station  
New York, New York 10163

4. If you are NOT a Class Member (as defined in the detailed Notice of Proposed Settlement of Class Action and Settlement Fairness Hearing (the "Notice") which accompanied this Proof of Claim), DO NOT submit a Proof of Claim form.

5. If you are a Class Member, and you do not timely request exclusion, you are bound by the terms of any judgment entered in the Litigation, **WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM FORM.**

### **II. DEFINITIONS**

1. "Defendants" means PSS World Medical, Inc., Gulf South Medical Supply, Inc., Patrick C. Kelly, David A. Smith, Thomas G. Hixon and John L. Vaughan, Jr.

2. "Gulf South" means Gulf South Medical Supply, Inc.

3. "PSS" means PSS World Medical, Inc. (f/k/a/ Physicians' Sales & Service, Inc.).

4. "Related Parties" means each of the Defendants' respective past or present directors, officers, employees, partners, insurers, co-insurers, reinsurers, controlling shareholders, attorneys, agents, accountants or auditors, personal or legal representatives, predecessors, successors, parents, subsidiaries, divisions, joint ventures, assigns, spouses, heirs, related or affiliated entities, any entity in which any of the Defendants have a controlling interest, and any members of any of the Defendants' immediate family.

5. "Released Claims" shall collectively mean any and all claims (including "Unknown Claims" as hereinafter defined), demands, losses, charges, complaints, liabilities, obligations, damages, suits, expenses, rights, liabilities and causes of action of every nature and description whatsoever, whether known or unknown, whether concealed or hidden, whether in law or equity, whether asserted or that might have been asserted, including, without limitation, claims for negligence, gross negligence, breach of duty of care and/or breach of duty of loyalty, fraud, breach of fiduciary duty, or violations of any state or federal statutes, rules or regulations, by Plaintiff or any Class Member against Defendants and/or their Related Parties arising out of the facts, transactions, events, occurrences, acts, disclosures, statements, omissions or failures to act which were or could have been alleged in the Litigation.

6. "Released Persons" means each and all of the Defendants and their Related Parties.

### **III. CLAIMANT IDENTIFICATION INSTRUCTIONS**

1. If you purchased PSS common stock and held the certificate(s) in your name, you are the beneficial purchaser as well as the record purchaser. If, however, the certificate(s) were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial owner(s) and the third party is the record owner(s).

2. Use Part I of this form entitled "Claimant Identification" to identify each purchaser of record ("nominee"), if different from the beneficial purchaser of PSS stock which forms the basis of this claim. **THIS CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL PURCHASER OR PURCHASERS, OR THE LEGAL REPRESENTATIVE OF SUCH PURCHASER OR PURCHASERS, OF PSS COMMON STOCK UPON WHICH THIS CLAIM IS BASED.**

3. All joint purchasers must sign this claim. Executors, administrators, guardians, conservators and trustees must complete and sign this claim on behalf of Persons represented by them and their authority must accompany this claim and their titles or capacities must be stated. The Social Security (or taxpayer identification) number and telephone number of the beneficial owner may be used in verifying the claim. Failure to provide the foregoing information could delay verification of your claim or result in rejection of the claim.

### **IV. CLAIMS FORM**

1. Use Part II of this form entitled "Schedule of Transactions in PSS Common Stock" to supply all required details of your transaction(s) in PSS common stock. If you require additional space, attach the required information on separate, numbered sheets in the same format as above, and print your name and Social Security or Taxpayer Identification number at the top of each sheet.

2. On the schedules, provide all of the requested information with respect to (i) your ownership of PSS common stock at the close of trading on March 26, 1998; (ii) all of your purchases, acquisitions and all of your sales, if any, of PSS common stock that took place at any time between March 27, 1998 and May 8, 1998, inclusive, and whether such transactions resulted in a profit or a loss, and (iii) your ownership of PSS stock at the opening of trading on May 11, 1998. Failure to report all such transactions may result in the rejection of your claim.

3. List each transaction between March 27, 1998 and May 8, 1998 separately and in chronological order, by trade date, beginning with the earliest. You must accurately provide the month, day and year of each transaction you list.

4. **You must provide documentation (such as account statements from your broker-dealer) of the number of shares of PSS stock you owned as of the close of trading on March 26, 1998 and the close of trading on May 8, 1998, and all transactions, if any, between those dates.**

5. The date of a purchase or sale of PSS common stock is the trade date, and not the settlement date.

6. In processing claims, the last-in, first-out basis ("LIFO") will be applied to purchases and sales.

7. Exercises of option contracts will be considered purchases or sales of common stock. The option premiums should be incorporated into the purchase/sale price of the shares of common stock.

8. The date of covering a "short sale" is deemed to be the date of purchase of PSS common stock. The date of a "short sale" is deemed to be the date of sale of PSS common stock.

9. Any claim submitted that contains more than 50 transactions must be filed electronically on (a) a 3-1/2" diskette; (b) a CD-ROM; or (c) ZIP media. The data must be provided in a spreadsheet (MS Excel) or in ASCII fixed length field text files.

10. You must attach copies of documentation supporting the trading activity listed below in order for your claim to be valid. Use one of the following: brokerage confirmation slips or monthly statements; or similar documents to confirm your ownership of PSS common stock as of the close of trading on March 26, 1998, and with respect to all of your purchases and acquisitions and all of your sales of PSS common stock that took place at any time between March 27, 1998 and May 8, 1998, inclusive. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim.

**MUST BE POSTMARKED NO LATER THAN FEBRUARY 9, 2006**

UNITED STATES DISTRICT COURT  
MIDDLE DISTRICT OF FLORIDA  
JACKSONVILLE DIVISION

*Jack Hirsch, et al. v. PSS World Medical, Inc., et al.,*  
No. 3:98-cv-502-J-32TEM (M.D. Fla.)

**PROOF OF CLAIM**  
PLEASE TYPE OR PRINT

**PART I: CLAIMANT IDENTIFICATION**

Beneficial Owner's Name (as it appears on your brokerage statement)

Joint Beneficial Owner's Name (as it appears on your brokerage statement)

Street Address

City State Zip Code

Foreign Province Foreign Country

Social Security Number or Taxpayer Identification Number

Specify one of the following:

Individual(s) Corporation UGMA Custodian IRA  
Partnership Estate Trust Other:

Area Code Telephone Number (Day) Area Code Telephone Number (Evening)

Fax Number E-Mail Address

Record Owner's Name and Address (if different from beneficial owner listed above)

**PART II: SCHEDULE OF TRANSACTIONS IN PSS COMMON STOCK**

- A. Number of shares of PSS common stock held at the close of trading on March 26, 1998 (*must be documented*): \_\_\_\_\_.
- B. Separately list each and every purchase of PSS common stock between March 27, 1998 and May 8, 1998, inclusive, and provide the following information (*must be documented*):

Trade Date Mo. Day Year <i>(List Chronologically)</i>	Number of Shares Purchased	Total Purchase Price <i>(excluding commissions, taxes, and fees)</i>	Proof of Purchase Enclosed?*
			Yes/No

- C. Separately list each and every sale of PSS common stock between March 27, 1998 and May 8 1998, inclusive, and provide the following information (*must be documented*):

Trade Date Mo. Day Year <i>(List Chronologically)</i>	Number of Shares Sold	Total Sales Price <i>(excluding commissions, taxes, and fees)</i>	Proof of Sale Enclosed?*
			Yes/No

- D. Number of shares of PSS common stock held at close of trading on May 8, 1998 (*must be documented*): \_\_\_\_\_.

If you require additional space, attach the required information on separate, numbered sheets in the same format as above, and print your name and Social Security or Taxpayer Identification number at the top of each sheet.

YOU MUST READ AND SIGN THE RELEASE ON PAGE 4. FAILURE TO SIGN THE RELEASE MAY RESULT IN A DELAY IN PROCESSING OR REJECTION OF YOUR CLAIM.

**V. SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS**

I (We) submit this Proof of Claim under the terms of the Stipulation of Settlement described in the Notice. I (We) also submit to the jurisdiction of the United States District Court for the Middle District of Florida, with respect to my (our) claim as a Class Member 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 Litigation. I (We) agree to furnish additional information such as transactions in other PSS securities (including options) to the Claims Administrator 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 PSS common stock during the Class Period and know of no other Person having done so on my (our) behalf.

**VI. RELEASE**

1. I (We) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally and forever settle, release and discharge from the Released Claims each and all of the Defendants and each and all of their "Related Parties," defined as each of the Defendants' respective past or present directors, officers, employees, partners, insurers, co-insurers, reinsurers, controlling shareholders, attorneys, agents, accountants or auditors, personal or legal representatives, predecessors, successors, parents, subsidiaries, divisions, joint ventures, assigns, spouses, heirs, related or affiliated entities, any entity in which any of the Defendants have a controlling interest, and any members of any of the Defendants' immediate family.

2. "Unknown Claims" means any of the Released Claims which Plaintiff or any of the Class Members does not know or suspect to exist in his, her or its favor at the time of the release of the Released Persons which, if known by him, her or it, might have affected his, her or its settlement with and release of the Released Persons, or might have affected his, her or its decision not to object to this settlement. Upon the Effective Date, Plaintiff shall expressly and each of the Class Members shall be deemed to have, and by operation of the Judgment shall have, expressly waived the provisions, rights and benefits of California Civil 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.

Plaintiff shall expressly and each of the Class Members shall be deemed to have, and by operation of the Judgment shall have, expressly waived any and all provision, 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 California Civil Code §1542. Plaintiff and each of the 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 Released Claims, but upon the Effective Date, Plaintiff shall expressly and each of the Class Members shall be deemed to have, and by operation of the Judgment shall have, fully, finally, and forever settled and released any and all Released 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 the Class Members shall be deemed by operation of the Judgment to have acknowledged, that the foregoing waiver was separately bargained for and a key element of the settlement of which this release is a part.

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

4. 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.

**\*IMPORTANT: FAILURE TO PROVIDE SUPPORTING DOCUMENTATION MAY RESULT IN THE REJECTION OF YOUR CLAIM AND PREVENT YOU FROM RECEIVING ANY DISTRIBUTION UNDER THE SETTLEMENT.**

5. I (We) hereby warrant and represent that I (we) have included information about all of my (our) transactions in PSS common stock which occurred between March 27, 1998 and May 8, 1998, if any, as well as the number of shares of PSS common stock held by me (us) as of the close of trading on March 26, 1998 and the close of trading on May 8, 1998.

**VII. CERTIFICATION**

UNDER THE PENALTY OF PERJURY, I (WE) CERTIFY THAT:

1. The number shown on this form is my correct Social Security or Taxpayer Identification number; and
2. I (We) certify that I am (we are) NOT subject to backup withholding under the provisions of §3406(a)(1)(C) of the Internal Revenue Code.

NOTE: If you have been notified by the Internal Revenue Service that you are subject to backup withholding, you must cross out the word "NOT" in the preceding paragraph.

I (We) have read the foregoing Proof of Claim and Release and certify that all of the information contained herein, and in the supporting documents attached hereto, is true, correct and complete to the best of my/our knowledge, information and belief, and that this form was executed

on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in \_\_\_\_\_, \_\_\_\_\_  
(City) (State/Country)

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

\_\_\_\_\_  
*(Print your name here)*

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

\_\_\_\_\_  
*(Print your name here)*

\_\_\_\_\_  
*Signature of person signing on behalf of Claimant*

\_\_\_\_\_  
*(Print your name here)*

\_\_\_\_\_  
*Capacity of person signing on behalf of Claimant, if other than an individual, e.g., Executor, President, Custodian, etc.)*

**ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME.**

**THANK YOU FOR YOUR PATIENCE.**

**Reminder Checklist:**

1. Remember to sign the above Release and Certification.
2. Remember to attach only **copies** of acceptable supporting documentation, a complete list of which can be found on our website.
3. Do not send original securities certificates.
4. Keep a copy of the completed 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, or its equivalent. **You will bear all risks of delay or non-delivery of your claim.**
6. If you move after submitting your claim form, please send us your new address.
7. If you have any questions or concerns regarding your claim, please contact:

PSS World Medical, Inc. Securities Litigation Claims Administrator  
c/o FRG Information Systems Corp.  
P.O. Box 4059, Grand Central Station  
New York, New York 10163  
Tel: 800-556-9955  
Fax: 212-490-5709

E-mail: [claimsadministrator@frginfosys.com](mailto:claimsadministrator@frginfosys.com)  
Website: <http://www.frginfosys.com/pss>