



UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

Silvia Seijas, et al. v. Republic of Argentina, 04 Civ. 400 (TPG)
Silvia Seijas, et al. v. Republic of Argentina, 04 Civ. 401 (TPG)
Cesar Raul Castro v. Republic of Argentina, 04 Civ. 506 (TPG)
Hickory Securities LTD. v. Republic of Argentina, 04 Civ. 936 (TPG)
Elizabeth Andrea Azza, et al. v. Republic of Argentina, 04 Civ. 937 (TPG)
Elizabeth Andrea Azza, et al. v. Republic of Argentina, 04 Civ. 1085 (TPG)
Eduardo Puricelli v. Republic of Argentina, 04 Civ. 2117 (TPG)
Ruben Daniel Chorny v. Republic of Argentina, 04 Civ. 2118 (TPG)



CLASS ACTION SETTLEMENT CLAIM FORM

Please Type or Print in the Boxes Below Do NOT use Red Ink, Pencil, or Staples

THIS SETTLEMENT CLAIM FORM IS FOR "CONTINUOUS HOLDERS" OF ANY OF THE FOLLOWING BONDS:

<u>Description</u>	ISIN Number	Start Date
Republic of Argentina 11% Global Notes due October 9, 2006,	US040114AN02	January 16, 2004
Republic of Argentina 7% Global Notes due December 19, 2008	US040114GF14	January 16, 2004
Republic of Argentina 9.75% Global Notes Due September 19, 2027	US040114AV28	January 22, 2004
Republic of Argentina 11.75% Global Notes Due June 15, 2015	US040114GA27	February 4, 2004
Republic of Argentina 11% Global Notes Due December 5, 2005	US040114AZ32	February 4, 2004
Republic of Argentina 8.375% Global Notes Due December 20, 2003	US040114AH34	February 10, 2004
Republic of Argentina 12.375% Global Notes Due February 21, 2012	US040114GD65	March 17, 2004
Republic of Argentina Floating Rate L+0.8125 Global Notes Due March 2005	XS0043120582	March 17, 2004

If you (or a member of your immediate family) have continuously held at least one of the above Bonds since at least the Start Date until today, you are a Continuous Holder. If you are a Continuous Holder, you are eligible to claim a Settlement Payment in the above Class Actions unless (a) you have filed your own lawsuit/arbitration or (b) you have opted out of the Class Actions listed in this notice.

If approved by the Court, the Settlement Payment will be 150% of the outstanding principal amount of the Bonds that you identify on this form (and that you tender for cancellation when requested), minus a portion of attorneys' fees and expenses the Court approves as compensation to Class Counsel. In exchange for the Settlement Payment, you will release all claims against Argentina concerning the Bonds.

Complete details about the proposed Settlement and the Settlement Agreement are available at **www.argentinabondclasses.com** or by emailing or calling the Settlement Administrator at **1-844-857-5164**. Please do not call the Court.

TO CLAIM A SETTLEMENT PAYMENT UNDER THE CLASS ACTION SETTLEMENT, YOU MUST FILL OUT THIS FORM AND SEND THE FORM AND THE REQUIRED DOCUMENTATION TO THE SETTLEMENT ADMINISTRATOR. THE FORM AND DOCUMENTS MUST BE EMAILED OR POSTMARKED BY SEPTEMBER 1, 2016.

IMPORTANT: IF YOU WANT TO CLAIM A SETTLEMENT PAYMENT, YOU MUST COMPLETE THIS FORM EVEN IF YOU PREVIOUSLY COMPLETED AND SENT A "PROOF OF CLAIM" FORM IN EARLY 2016.



INSTRUCTIONS

- 1. Fill out Parts I and II below.
- 2. Attach the documentation required by Part III.
- 3. Sign the attestation in Part IV.

PART I: CLAIMANT IDENTIFICATION

4. Send the signed Settlement Claim Form and documentation to the Settlement Administrator at the following address or email:

Argentine Bond Class Actions Settlement Administrator c/o Gilardi & Co. LLC P.O. Box 8040 San Rafael, CA 94912-8040 info@argentinabondseijas.com

SETTLEMENT CLAIM FORMS MUST BE EMAILED OR POSTMARKED BY SEPTEMBER 1, 2016.

Last Name (Beneficial Owner) First Name (Beneficial Owner) Last Name (Co-Beneficial Owner) First Name (Co-Beneficial Owner) Company/Other Entity (If Beneficial Owner Is Not an Individual) Contact Person (If Beneficial Owner is Not an Individual Record Owner's Name (If Different from Beneficial Owner Listed Above, e.g., Trust, Nominee, Other, etc.) Account Number Trust/Other Date (If Applicable) Address Line 1 Address Line 2 (If Applicable) City State Zip Code Foreign Province Foreign Postal Code Foreign Country Name/Abbreviation Email Address (optional) Telephone number (home) Telephone number (work) Area code Area code



PART II: BOND INFORMATION

1.	Principal am	ounts of	Arge	ntin	na 11	% C	Slob	al No	otes	due	10/9	9/06	(ISIN	US	040	114/	N0	2) y	ou h	eld (on e	ach	date	:		
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9.	Do you still h	nave cus	stody	of tl	he in	itere	sts	? If n	ot, w	/ho l	nas	custo	ody o	f the	int	erest	s?) Yes	s () No					
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PART III: DOCUMENTATION

Please attach legible copies, scans, or photos of account statements showing that you (or a member of your immediate family) have held the relevant Bonds continuously from the Start Date to today (even if you moved the Bonds from one account to another). You may blackout your account number(s) and information about other holdings/balances on the statement.

If the beneficial holder is not a natural person, or if you are submitting this Settlement Claim Form as an agent appointed by the beneficial holder (such as a class action service), please also attach documentation of your authority to settle claims concerning the Bonds on behalf of the beneficial holder.

PART IV: ATTESTATION AND ACKNOWLEDGMENT OF RELEASE

With my signature below I declare, under penalty of perjury under the laws of the United States, that the information in this Settlement Claim Form is true and correct to the best of my knowledge. I understand that my Settlement Claim Form may be subject to audit, verification, and Court review. I further understand and acknowledge that, under the Settlement Agreement, any claims I (or the beneficial holder that I represent) may have against the Republic of Argentina ("Argentina") will be completely and forever discharged and released upon payment by Argentina of the Settlement Amount.

If I am signing as the agent appointed by a beneficial holder (such as a class action service) or on behalf of a corporate entity, trust, or any other beneficial holder that is not a natural person, I declare that I have the current, requisite authority to settle and release claims concerning the Bonds on behalf of the beneficial holder and I have attached documentation confirming that authority, which is in full force and effect as of the date of my signature below.

SIGNATURE:	DATE:
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Note: The Settlement Administrator has the right to request verification or more information. If the Settlement is approved and your claim is accepted, you will be required to tender your Bonds into an escrow account to be exchanged for the Settlement Payment (minus attorneys' fees and expenses).

Mail or email the signed Settlement Claim Form and documentation to the Settlement Administrator at:

Argentina Bond Class Actions Settlement Administrator c/o Gilardi & Co. LLC P.O. Box 8040 San Rafael, CA 94912-8040 info@argentinabondseijas.com

SETTLEMENT CLAIM FORMS MUST BE POSTMARKED OR EMAILED BY SEPTEMBER 1, 2016.

Please contact the Settlement Claims Administrator with any questions. Additional information concerning the settlement also can be found at: www.argentinabondclasses.com.

