

**Must be Postmarked
No Later Than
October 27, 2011**

SEC v. Wamex Holdings, Inc. Securities Litigation
c/o GCG, Inc.
PO Box 9519
Dublin, OH 43017-4819
1 (866) 405-2132

WMX



Claim Number:

Control Number:

PROOF OF CLAIM FORM

YOU MUST COMPLETE AND MAIL THIS PROOF OF CLAIM FORM POSTMARKED BY OCTOBER 27, 2011 TO BE ELIGIBLE TO SHARE IN THE SEC SETTLEMENT WITH WAMEX HOLDINGS, INC.

<u>TABLE OF CONTENTS</u>	<u>PAGE #</u>
SECTION A - CLAIMANT INFORMATION	2
TRANSACTIONAL HISTORY	
SECTION B - WAMEX HOLDINGS, INC. COMMON STOCK	3
SECTION C - U.N. DOLLARS COMMON STOCK	4
SECTION D - ABSOLUTEFUTURE.COM COMMON STOCK	5
SECTION E - RAMOIL MANAGEMENT, LTD. COMMON STOCK	6
SIGNATURE	
SECTION F - CERTIFICATION AND SIGNATURE	7



SECTION A - CLAIMANT INFORMATION

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

Account Number: (not required)

Claimant Social Security Number/Taxpayer ID Number:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------	----------------------

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

Claimant or Representative Contact Information:

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

Street Address:

City:

State and Zip Code:

Country (Other than U.S.):

Daytime Telephone Number: () -

Evening Telephone Number: () -

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.)

IF YOU FAIL TO SUBMIT A COMPLETE CLAIM POSTMARKED BY OCTOBER 27, 2011 YOUR CLAIM IS SUBJECT TO REJECTION OR YOUR PAYMENT MAY BE DELAYED.

NOTE: Separate Proof of Claim Forms should be submitted for each separate legal entity (for example, a Proof of Claim Form by joint owners should not include separate transactions of just one of the joint owners, an individual should not combine his or her IRA transactions with transactions made solely in the Individual's name). Conversely, a single Proof of Claim Form should be submitted on behalf of one legal entity including all transactions made by that entity no matter how many separate accounts that entity has (for example, a corporation with multiple brokerage accounts should include all transactions made in all Eligible Securities during the Settlement Periods, on one Proof of Claim Form, no matter how many accounts the transactions were made in.)



SECTION B - TRANSACTIONS IN WAMEX COMMON STOCK

1. **BEGINNING HOLDINGS:** At the close of business on **November 30, 1999**, I owned the following number of shares of Wamex common stock. (If none, write "zero" or "0.")

2. **PURCHASES DURING THE SETTLEMENT PERIOD:** I made the following purchases of Wamex common stock between **December 1, 1999**, and **April 6, 2000**, inclusive. (Must be documented.)

Trade Date(s) of Purchases (list chronologically) (Month/Day/Year)	Number of Wamex Common Stock Purchased	Purchase Price Per Share	Aggregate Cost (including commissions, taxes, and fees)
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.

3. **SALES :** I made the following sales of Wamex common stock between **December 1, 1999**, and **April 6, 2000**, inclusive. (Must be documented.)

Trade Date(s) of Sales (list chronologically) (Month/Day/Year)	Number of Wamex Common Stock Sold	Sale Price Per Share	Amount Received (net of commissions, taxes, and fees)
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.

4. **UNSOLD HOLDINGS:** At the close of trading on **April 6, 2000**, I owned the following number of shares of Wamex common stock. (If none, write "zero" or "0". If other than zero, the number of shares must be documented.)

**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**


SECTION C - TRANSACTIONS IN U.N. DOLLARS COMMON STOCK

1. **BEGINNING HOLDINGS:** At the close of business on **November 30, 1999**, I owned the following number of shares of U.N. Dollars common stock. (If none, write "zero" or "0.")

2. **PURCHASES DURING THE SETTLEMENT PERIOD:** I made the following purchases of U.N. Dollars common stock between **December 1, 1999**, and **March 13, 2000**, inclusive. (Must be documented.)

Trade Date(s) of Purchases (list chronologically) (Month/Day/Year)	Number of U.N. Dollars Common Stock Purchased	Purchase Price Per Share		Aggregate Cost (including commissions, taxes, and fees)	
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.

3. **SALES :** I made the following sales of U.N. Dollars common stock between **December 1, 1999**, and **March 13, 2000**, inclusive. (Must be documented.)

Trade Date(s) of Sales (list chronologically) (Month/Day/Year)	Number of U.N. Dollars Common Stock Sold	Sale Price Per Share		Amount Received (net of commissions, taxes, and fees)	
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.

4. **UNSOLD HOLDINGS:** At the close of trading on **March 13, 2000**, I owned the following number of shares of U.N. Dollars common stock. (If none, write "zero" or "0". If other than zero, the number of shares must be documented.)

**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**



SECTION D - TRANSACTIONS IN ABSOLUTEFUTURE.COM COMMON STOCK

1. **BEGINNING HOLDINGS:** At the close of business on **November 30, 1999**, I owned the following number of shares of AbsoluteFuture.com common stock. (If none, write "zero" or "0.")

2. **PURCHASES DURING THE SETTLEMENT PERIOD:** I made the following purchases of AbsoluteFuture.com common stock between **December 1, 1999**, and **May 31, 2000**, inclusive. (Must be documented.)

Trade Date(s) of Purchases (list chronologically) (Month/Day/Year)	Number of AbsoluteFuture.com Common Stock Purchased	Purchase Price Per Share	Aggregate Cost (including commissions, taxes, and fees)
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.

3. **SALES:** I made the following sales of AbsoluteFuture.com common stock between **December 1, 1999**, and **May 31, 2000**, inclusive. (Must be documented.)

Trade Date(s) of Sales (list chronologically) (Month/Day/Year)	Number of Absolute Future.com Common Stock Sold	Sale Price Per Share	Amount Received (net of commissions, taxes, and fees)
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.
/ /		\$.	\$.

4. **UNSOLD HOLDINGS:** At the close of trading on **May 31, 2000**, I owned the following number of shares of AbsoluteFuture.com common stock. (If none, write "zero" or "0". If other than zero, the number of shares must be documented.)

**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**


SECTION E - TRANSACTIONS IN RAMOIL COMMON STOCK

1. **BEGINNING HOLDINGS:** At the close of business on **December 28, 1999**, I owned the following number of shares of Ramoil common stock. (If none, write "zero" or "0.")

2. **PURCHASES DURING THE SETTLEMENT PERIOD:** I made the following purchases of Ramoil common stock between **December 29, 1999**, and **May 31, 2000**, inclusive. (Must be documented.)

Trade Date(s) of Purchases (list chronologically) (Month/Day/Year)	Number of Ramoil Common Stock Purchased	Purchase Price Per Share		Aggregate Cost (including commissions, taxes, and fees)	
/ /		\$		\$	
/ /		\$		\$	
/ /		\$		\$	
/ /		\$		\$	

3. **SALES :** I made the following sales of Ramoil common stock between **December 29, 1999**, and **May 31, 2000**, inclusive. (Must be documented.)

Trade Date(s) of Sales (list chronologically) (Month/Day/Year)	Number of Ramoil Common Stock Sold	Sale Price Per Share		Amount Received (net of commissions, taxes, and fees)	
/ /		\$		\$	
/ /		\$		\$	
/ /		\$		\$	
/ /		\$		\$	

4. **UNSOLD HOLDINGS:** At the close of trading on **May 31, 2000**, I owned the following number of shares of Ramoil common stock. (If none, write "zero" or "0". If other than zero, the number of shares must be documented).

**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**



SECTION F - CERTIFICATION AND SIGNATURE

The undersigned represents and certifies UNDER PENALTY OF PERJURY that:

1. I am (We are) not:

(a) A past or present director or officer of Wamex Holding, Inc., U.N. Dollars, Absolute Future.com and/or Ramoil Management Ltd. or any of its past or present affiliates (or any of his or her affiliates, assigns, heirs, distributees, spouses, parents, children, or controlled entities) who served in such capacity on or after the commencement of the Settlement Periods;

(b) An employee of the affected companies or of any of its past or present affiliates who has been terminated for cause in connection with the violations alleged in the Commission's Complaint in this action or any related Commission actions, or who was otherwise terminated or has resigned in connection with the violations alleged in the Commission's Complaint in this action or any related Commission action (or any of such employee's affiliates, assigns, heirs, distributees, spouses, parents, children, or controlled entities);

(c) A defendant in any class action lawsuit related to the violations alleged in the Commission's Complaint in this action or any related Commission action (or any of such defendant's affiliates, assigns, heirs, distributees, spouses, parents, children, or controlled entities), unless and until I am found not liable in all such civil suits prior to the Claims Bar Date October 27, 2011, and proof of the finding(s) is included in my timely filed Proof of Claim Form;

(d) A person who, as of the Claims Filing Date October 27, 2011, has been the subject of criminal charges related to the violations alleged in the Commission's Complaint in this action, or any related Commission actions (or any of his or her affiliates, assigns, heirs, distributees, spouses, parents, children, or controlled entities);

(e) A person who assigned that person's right to obtain a recovery in the Commission's lawsuit against the defendants;

(f) An assignee of another person's right to obtain a recovery in the Commission's lawsuit against the defendants, provided, however, this provision shall not be construed to exclude those persons who obtained such a right by inheritance or devise; and

(g) The Claims Administrator, those persons assisting it in its role as Claims Administrator, including its employees, and the Independent Outside Accounting Firm and its employees.

2. If signing this Proof of Claim Form on behalf of a corporation, partnership or other business entity, I have the legal authority to act on its behalf and execute this Proof of Claim Form;

3. I agree to submit to the jurisdiction of the United States District Court for the Southern District of New York for all purposes relating to this claim;

4. I understand that the Claims Administrator may require additional information from me in order to validate or pay my claim, and I agree to provide any information requested by the Claims Administrator for those purposes. If necessary, I authorize the Claims Administrator to obtain and review any and all trading records relevant to my transactions in each of the eligible securities from any brokerage firm or other entity that has possession of such records, and further consent to the release of such records by such brokerage firm or other entity to the Claims Administrator;

5. The numbers shown on page 2 of this Proof of Claim Form is the correct Social Security Number or Taxpayer Identification Number;

6. I agree that under no circumstances shall the Claims Administrator or its agents incur any liability to me or to any other person if it makes a distribution in accordance with the list of all Eligible Claimants and their Approved Claims as approved by the Court and that I am enjoined from taking any action in contravention of this provision;

7. I agree that upon receipt and acceptance by me of a distribution from the Distribution Fund, I shall be deemed to have released all claims that I may have against the Claims Administrator and its agents and shall be deemed enjoined from prosecuting or asserting any such claims; and

8. If I am a custodian, trustee, or professional investing on behalf of and representing more than one potentially eligible claimant in a pooled investment fund or entity, I also attest that any distribution received will be allocated for the benefit of current or former pooled investors and not for the benefit of management.

I (We) declare under penalty of perjury under the laws of the United States of America that all of the foregoing information supplied on this Proof of Claim Form by the undersigned is true and correct and that the documents submitted herewith are true and genuine.

Executed this _____ day of _____ in _____.
(Month/Year) (City) (State/Country)

 (Sign your name here)

 (Joint owner sign your name here)

 (Type or print your name here)

 (Joint owner type or print your name here)

 (Capacity of persons signing, e.g., Beneficial Purchaser, Executor or Administrator)



REMINDER CHECKLIST
PLEASE READ

1. Please sign the Certification and Signature Section of the Claim Form.
2. If this claim is made on behalf of joint claimants, then both must sign.
3. Please remember to attach supporting documents. (Supporting documents include trade confirmations, official monthly, quarterly or annual brokerage statements).
4. **DO NOT SEND ORIGINALS OF ANY SUPPORTING DOCUMENTS.**
5. If you aggregated accounts, be sure to include supporting documents for all accounts.
6. Keep a copy of your Claim Form and all documentation submitted for your records.
7. The Claims Administrator will acknowledge receipt of your Claim Form by regular or electronic mail, within 60 days. Your claim is not deemed filed until you receive an acknowledgment postcard or e-mail. If you do not receive an acknowledgment postcard or e-mail within 60 days, please call the Claims Administrator toll free at **1 (866) 405-2132**.
8. If you move, you must send us your new address. Otherwise, any funds allocated to your claim are subject to forfeiture.
9. **Do not use highlighter on the Claim Form or supporting documentation.**

THIS PROOF OF CLAIM FORM MUST BE POSTMARKED NO LATER THAN
OCTOBER 27, 2011 AND MUST BE MAILED TO:

SEC v. Wamex Holdings, Inc. Securities Litigation
c/o GCG, Inc.
PO Box 9519
Dublin, OH 43017-4819