

Must be  
Postmarked  
No Later Than  
July 22, 2013

ZST Digital Networks, Inc. Securities Litigation  
Claims Administrator  
c/o The Garden City Group, Inc.  
PO Box 9349  
Dublin, OH 43017-4249  
1 (800) 231-1815 (Toll-Free)

ZST



Claim Number:

Control Number:

## **PROOF OF CLAIM AND RELEASE**

TO BE ELIGIBLE TO RECEIVE A SHARE OF THE NET SETTLEMENT FUND IN CONNECTION WITH THE SETTLEMENT OF THIS ACTION, YOU MUST MAIL YOUR COMPLETED AND SIGNED PROOF OF CLAIM AND RELEASE TO THE CLAIMS ADMINISTRATOR BY FIRST-CLASS MAIL, POSTAGE PREPAID, POSTMARKED BY JULY 22, 2013, TO THE ADDRESS SET FORTH AT THE TOP OF THIS PAGE.

IF YOU FAIL TO SUBMIT A TIMELY, PROPERLY ADDRESSED, AND COMPLETED PROOF OF CLAIM AND RELEASE, YOUR CLAIM MAY BE REJECTED AND YOU MAY BE PRECLUDED FROM RECEIVING ANY PROCEEDS FROM THE SETTLEMENT.

**DO NOT MAIL OR DELIVER YOUR CLAIM FORM TO THE COURT, THE SETTLING PARTIES OR THEIR COUNSEL. SUBMIT YOUR CLAIM FORM ONLY TO THE CLAIMS ADMINISTRATOR AT THE ADDRESS SET FORTH ABOVE.**

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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**
**LAST NAME (CLAIMANT)**
**FIRST NAME (CLAIMANT)**
**Last Name (Beneficial Owner if Different From Claimant)**
**First Name (Beneficial Owner)**
**Last Four Digits of the Beneficial Owner's Employer Identification Number or Social Security Number<sup>1</sup>**
**Last Name (Co-Beneficial Owner)**
**First Name (Co-Beneficial Owner)**
**Company/Other Entity (If Claimant Is Not an Individual)**
**Contact Person (If Claimant is Not an Individual)**
**Trustee/Nominee/Other**
**Account Number (If Claimant Is Not an Individual)**
**Trust/Other Date (If Applicable)**
**Address Line 1**
**Address Line 2 (If Applicable)**
**City**
**State**
**Zip Code**
**Foreign Province**
**Foreign Country**
**Foreign Zip Code**
**Telephone Number (Day)**
**Telephone Number (Night)**
**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.)

**IDENTITY OF CLAIMANT (check only one box):**

- Individual
  Joint Owners
  Estate
  Corporation
  Trust
  Partnership
- Private Pension Fund
  Legal Representative
- IRA, Keogh, or other type of individual retirement plan (indicate type of plan, mailing address, and name of current custodian)
- Other (specify, describe on separate sheet)

**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.gcginc.com](http://www.gcginc.com) or you may e-mail the Claims Administrator's electronic filing department at [eClaim@gcginc.com](mailto:eClaim@gcginc.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@gcginc.com](mailto:eClaim@gcginc.com) to inquire about your file and confirm it was received and acceptable.

**To view GCG's Privacy Notice, please visit <http://www.gcginc.com/pages/privacy-policy.php>**

<sup>1</sup>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 - SCHEDULE OF TRANSACTIONS IN ZST DIGITAL NETWORKS, INC. COMMON STOCK**

**A. Beginning Holdings:** Number of ZST Digital Networks, Inc. common stock held at the close of trading on **October 19, 2009**. If none, write "zero" or "0".

Shares									

**B. Purchases/Acquisitions:** List purchases or acquisitions of ZST Digital Networks, Inc. common stock between **October 20, 2009** and **April 21, 2011**, inclusive (Must be documented):

Trade Date List Chronologically (Month/Day/Year)	Number of Shares Purchased or Otherwise Acquired	Purchase Price per Share	Total Amount Paid (Excluding taxes, fees, and commissions)
/  /		.	.
/  /		.	.
/  /		.	.
/  /		.	.

**C. Purchases/Acquisitions:** Number of shares of ZST Digital Networks, Inc. common stock purchased or acquired between **April 22, 2011** and **July 19, 2011**, inclusive (If none, write "zero" or "0").

Shares									

**D. Sales:** List sales of ZST Digital Networks, Inc. common stock between **October 20, 2009** and **July 19, 2011**, inclusive (Must be documented):

Trade Date List Chronologically (Month/Day/Year)	Number of Shares Sold	Sale Price per Share	Total Amount Received (Excluding taxes, fees, and commissions)
/  /		.	.
/  /		.	.
/  /		.	.
/  /		.	.

**E. Unsold Holdings:** Number of ZST Digital Networks, Inc. common stock held at the close of trading on **July 19, 2011**. If none, write "zero" or "0". (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 III - SUBMISSION TO JURISDICTION OF COURT  
AND ACKNOWLEDGMENTS AND SIGNATURE**

I (We) submit this Proof of Claim and Release under the terms of the Stipulation and Agreement of Settlement (“Stipulation”) described in the Notice. I (We) also submit to the jurisdiction of the United States District Court for the Central District of California, with respect to my (our) claim as a Settlement 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 Action. I (We) agree to furnish additional information to Counsel or 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 ZST Digital Networks, Inc. securities during the Settlement Class Period and know of no other Person having done so on my (our) behalf.

**PART IV - RELEASE**

By submitting this claim, I hereby release and forever relinquish and discharge the Released Parties from and with respect to the Settled Claims on behalf of myself as well as my current or former heirs, executors, administrators, successors, attorneys, legal representatives, and assigns.

Definitions:

“Released Parties” means the Settling Defendants, and any of their current, former or future parents, subsidiaries, affiliates, partners, joint ventures, officers, directors, principals, shareholders, members, agents (acting in their capacity as agents), employees, attorneys (including but not limited to ZST Digital Network’s Counsel, as defined in the Stipulation), insurers (including but not limited to ZST Digital Network’s Insurer, as defined in the Stipulation), reinsurers, advisors, accountants, associates and/or any other individual or entity in which any Settling Defendant has a controlling interest or which is related to or affiliated with any of the Settling Defendants, and the current, former, and future legal representatives, heirs, successors in interest, or assigns of the Settling Defendants.

“Settled Claims” means any and all claims, debts, demands, liabilities, rights, and causes of action of every nature and description whatsoever (including but not limited to any claims for damages, interest, attorneys’ fees, expert or consulting fees, and any other costs, expenses, or liability whatsoever), whether based on federal, state, local, statutory, or common law or any other law, rule, or regulation, whether fixed or contingent, accrued or unaccrued, liquidated or unliquidated, at law or in equity, matured or unmatured, whether class or individual in nature, including both known claims and Unknown Claims (as defined in the Stipulation) (i) that have been alleged or asserted in the Litigation (as defined in the Stipulation) by Lead Plaintiff and/or Settlement Class Members (as defined in the Stipulation) against any of the Settling Defendants; or (ii) that could have been alleged or asserted in the Litigation, including but not limited to any claim arising out of or relating to any of the acts, omissions, misrepresentations, facts, events, matters, transactions or occurrences referred to in the Litigation or otherwise alleged or asserted in the Litigation.

“Settling Defendants” means ZST Digital Networks, Inc., the Individual Defendants, the WestPark Defendants, and Kempisty (as defined in the Stipulation).



## PART V - CERTIFICATION

Under penalty of perjury, I (we) hereby certify and represent that I (we) have included information about all of my (our) transactions in ZST Digital Networks, Inc. securities that occurred during the Settlement Class Period as well as the number of shares of ZST Digital Networks, Inc. securities held by me (us) at the close of trading on July 19, 2011. By executing this certification, I (we) acknowledge and agree to be bound by the Release set forth above.

Executed this \_\_\_\_\_ day of \_\_\_\_\_ in \_\_\_\_\_.  
(Month) (Year) (City, State, Country)

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

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print your name here

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

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Print your name here

\_\_\_\_\_  
 Capacity of person signing on behalf of claimant, if other than an individual, e.g., executor, president, custodian, etc.

## REMINDER CHECKLIST

1. Please sign the claim form at Part V above.
2. Remember to attach supporting documentation, if available.
3. Do not send original of any supporting documents.
4. Keep a copy of your claim form for your records.
5. The Claims Administrator will acknowledge receipt of your Proof of Claim and Release within 60 days. **Your claim is not deemed filed until you receive an acknowledgment postcard or e-mail.** If you do not receive a written acknowledgment within 60 days, please call the Claims Administrator toll free at 1-800-231-1815.
6. If you move, please send us your new address.
7. Do not use highlighter on the Proof of Claim and Release form or supporting documentation.

**THIS PROOF OF CLAIM AND RELEASE MUST BE POSTMARKED NO LATER THAN  
 JULY 22, 2013 AND MUST BE MAILED TO:**

**ZST Digital Networks, Inc. Securities Litigation  
 Claims Administrator  
 c/o The Garden City Group, Inc.  
 PO Box 9349  
 Dublin, OH 43017-4249**