

**PROOF OF CLAIM FORM FOR CLAIMS AGAINST  
DIRECTORS OR OFFICERS OF EXPRESS FASHION APPAREL CANADA INC. AND  
EXPRESS CANADA GC GP, INC.  
(the “D&O Proof of Claim”)**

This form is to be used only by Claimants asserting a claim against any Directors and/or, Officers of Express Fashion Apparel Canada Inc. and Express Canada GC GP, Inc. (together, the “**Applicants**”) and NOT for claims against the Express Canada Entities<sup>1</sup> themselves. For claims against the Express Canada Entities, please use the form titled “Proof of Claim Form for Claims Against the Express Canada Entities”, which is available on the Monitor’s website at [www.alvarezandmarsal.com/expresscanada](http://www.alvarezandmarsal.com/expresscanada).

**1. Name of Officer(s) and/or Director(s) (the “Debtor(s)”)**

Debtor(s): \_\_\_\_\_

**2A. Original Claimant (the “Claimant”)**

Legal Name of Claimant:	_____	Name of Contact	_____
Address	_____	Title	_____
		Phone #	_____
		Fax #	_____
City _____	Prov /State _____	Email	_____
Postal/Zip Code	_____		

**2B. Assignee, if claim has been assigned**

Legal Name of Assignee:	_____	Name of Contact	_____
Address	_____	Title	_____
		Phone #	_____
		Fax #	_____
City _____	Prov /State _____	Email	_____
Postal/Zip Code	_____		

**3. Amount of Claim**

<sup>1</sup> Express Fashion Apparel Canada Inc., Express Canada GC GP, Inc., and Express Canada GC LP (collectively, the “Express Canada Entities”)

Name(s) of Director(s) and/or Officer(s)	Currency	Amount of Claim (including interest up to and including May 3, 2017)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**4. Documentation**

Provide all particulars of the Claim and all available supporting documentation, including any claim assignment/transfer agreement or similar document, if applicable, and including amount and description of transaction(s) or agreement(s) or legal breach(es) giving rise to the Claim.

**5. Certification**

I hereby certify that:

1. I am the Claimant or an authorized representative of the Claimant.
2. I have knowledge of all the circumstances connected with this Claim.
3. The Claimant asserts this Claim against the Debtor(s) as set out above.
4. All available documentation in support of this Claim is attached.

Signature: _____	Witness: _____
Name: _____	(signature)
Title: _____	(print)

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 2017.

**6. Filing of Claim**

**This D&O Proof of Claim must be received by the Monitor on or before 5:00 p.m. (Toronto time) on July 28, 2017 by prepaid ordinary mail, registered mail, courier, personal delivery or electronic transmission at the following address:**

**Alvarez & Marsal Canada Inc., Express Canada Monitor  
Royal Bank Plaza, South Tower  
200 Bay Street, Suite 2900, P.O. Box 22  
Toronto, ON Canada M5J 2J1**

**Email: [monitor.expresscanada@alvarezandmarsal.com](mailto:monitor.expresscanada@alvarezandmarsal.com)  
Fax No.: 416-847-5201**

**Attention: Josh Nevsky**

For more information see [www.alvarezandmarsal.com/expresscanada](http://www.alvarezandmarsal.com/expresscanada), or contact the Monitor by telephone at 1-844-692-6255.