

**UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF CALIFORNIA
SAN DIEGO DIVISION**

BRAD MAUSS, Individually and on behalf of
all others similarly situated,

Plaintiffs,

v.

NUVASIVE, INC., ALEXIS V. LUKIANOV,
KEVIN C. O'BOYLE and MICHAEL J.
LAMBERT,

Defendants.

Case No. 13-cv-2005-JM (JLB)

Hon. Jeffrey T. Miller

PROOF OF CLAIM AND RELEASE FORM

A. GENERAL INSTRUCTIONS & INFORMATION

1. You are urged to read carefully the accompanying Notice of Proposed Class Action Settlement (the "Notice") and the Stipulation of Settlement ("Stipulation"). Both documents are available at www.NuvasiveClassAction.com. All capitalized terms used herein shall have the same meaning as defined in the Notice and the Stipulation.

2. To file a claim and recover under the Settlement of this Litigation, you must have purchased or otherwise acquired NuVasive Inc. common stock between October 22, 2008 and July 30, 2013, both dates inclusive. You must not be a person who is excluded from the Class, as defined in the Notice. You also must not have requested exclusion from the Class.

3. If you are a Class Member and wish to participate in the proposed Settlement, you must complete and sign this Proof of Claim and Release Form ("Proof of Claim"). The submission of a Proof of Claim does not ensure that your claim will be upheld or that you will share in any recovery. All claims are subject to verification and investigation. If you fail to file a properly addressed and fully completed Proof of Claim, fail to provide required documentation, or are not eligible to recover under the Settlement, your claim may be rejected and you may be precluded from any recovery from the proposed Settlement. You may also be requested to provide further information.

4. You must mail your completed and signed Proof of Claim, **postmarked on or before October 23, 2018**, to the Settlement Administrator at:

NuVasive Class Action
c/o Strategic Claims Services
600 N. Jackson Street, Suite 205
Media, PA 19063
Fax: 610-565-7985
info@strategicclaims.net

5. If you are a member of the Class and do not timely request exclusion, **you will be bound** by any judgment entered in the Litigation **whether or not you submit a proof of claim**.

6. If you are **not** a member of the Class, **do not** submit a Proof of Claim. For help completing this Proof of Claim, please contact the Settlement Administrator.

B. CLAIMANT IDENTIFICATION INSTRUCTIONS

1. If you purchased NuVasive Inc. common stock and registered the certificate in your name, you are the beneficial owner as well as the owner of record. If, however, you purchased NuVasive Inc. common stock and the certificate was registered in the name of a third party (such as your stock broker),

you are the beneficial owner and the third party is the owner of record. Proceeds of this Settlement will be distributed to Class members who are beneficial owners of NuVasive Inc. common stock.

2. Use Section D of this form, entitled “Claimant Identification Schedule,” to identify yourself and each owner of record, if different from the beneficial owner of NuVasive Inc. common stock that forms the basis of this claim. **This claim must be filed by the actual beneficial owner(s), or the legal representative of such owner(s), of the stock upon which this claim is based.**

3. If shares of NuVasive Inc. common stock were owned jointly, all joint owners must sign the Proof of Claim. Executors, administrators, guardians, conservators, and trustees may complete and sign the Proof of Claim on behalf of persons or entities represented by them, but they must identify such persons or entities and provide proof of their authority (*e.g.*, powers of attorney or currently effective letters testamentary or letters of administration). The Social Security (or taxpayer identification) number and telephone number of the beneficial owner may be used in verifying the Claim. If you fail to provide the foregoing information, your claim may be delayed or rejected.

4. You must file a separate Proof of Claim for each differently named account or ownership, such as an individual account, an IRA account, a joint account, or a custodial account, etc. Joint tenants, co-owners, or custodians UGMA should file a single claim. Claimants who file one or more claims (*e.g.*, one in Claimant’s name and one for an IRA or joint ownership) must identify the other claims filed.

C. INSTRUCTIONS FOR SCHEDULE OF TRANSACTIONS

A. Use Section E of this form, entitled “Schedule of Transactions in NuVasive Inc. Common Stock,” to supply all of the requested information with respect to *all* of your transactions—purchases, other acquisitions, sales, and other dispositions—in NuVasive Inc. common stock that took place at any time between October 22, 2008 through and including October 28, 2013, whether such transactions resulted in a profit or a loss. The failure to report all such transactions or to provide all requested information with respect to each transaction may result in the rejection of your claim.

B. If you need more space, attach separate, numbered sheets giving all of the required information in substantially the same form. Sign each additional sheet and print or type your name at the top.

C. List each transaction separately and in chronological order by trade date, beginning with the earliest. You must accurately provide the month, day, and year of each transaction, as well as the purchase and/or sales price, excluding commissions, taxes, and other fees. The date of a transaction is the “trade” date and not the “settlement” date. The date of covering a “short sale” is deemed to be the date of purchase; and the date of a “share sale” is deemed to be the date of sale. Shares originally sold short will have a Recognized Loss of zero. NuVasive Inc. common stock acquired or disposed of for any consideration other than, or in addition to, cash must be reported as having been acquired or disposed of.

D. You *must* attach to your claim form *copies* of brokerage confirmations, monthly statements, or other documentation of your transactions in NuVasive Inc. common stock in order for your claim to be valid. A complete list of acceptable supporting documentation can be found at www.NuvasiveClassAction.com. Failure to provide this documentation could delay verification or result in rejection of your Claim. The Settlement Administrator may also request additional information as required to efficiently and reliably calculate your losses.

E. If your trading activity between October 22, 2008 and October 28, 2013 exceeds 50 transactions, you must provide all information required in the Schedule of Transactions in an electronic file. For instructions and parameters concerning such a submission, please visit www.NuvasiveClassAction.com or www.strategicclaims.net or call the Settlement Administrator at 866-274-4004

F. If you have questions or need additional Proofs of Claim, contact the Settlement Administrator via the information in the preceding paragraph. You may make photocopies of this form.

G. Please refer to the Plan of Allocation set forth in the accompanying Notice for a detailed explanation of how a Claimant's Recognized Loss will be calculated.

D. CLAIMANT IDENTIFICATION SCHEDULE

Claims must be received by the Settlement Administrator postmarked no later than **October 23, 2018**.

Please Type or Print

Beneficial Owner's Name (<i>as it appears on your brokerage statement</i>)		
Joint Beneficial Owner's name (<i>as it appears on your brokerage statement</i>)		
Record Owner's Name and Address (if different from beneficial owner listed above)		
Street Address		
Street Address		
City	State	Zip Code
Foreign Province	Country	
Area Code & Telephone Number (day)	Area Code & Telephone Number (evening)	
Email		
Social Security Number (for individuals)	OR	Taxpayer Identification Number (for estates, trusts, corporations, etc.)

Specify one of the following.

Claimant holder of NuVasive Inc. common stock is:

<input type="checkbox"/>	A. Individual Claimant: I am a claimant acting in my own interest and am the sole owner of the shares.
<input type="checkbox"/>	B. Joint Claimants: We are claimants acting jointly.
<input type="checkbox"/>	C. Corporate Claimant: I am the _____ of _____, a corporation whose address is _____. I am authorized to make this claim on behalf of the corporation. The corporation is the owner of the shares.
<input type="checkbox"/>	D. IRA Claimant: I am a claimant acting on behalf of my IRA. The shares are held in my IRA.

<input type="checkbox"/>	E. Partnership Claimant: I am a partner of _____, a partnership whose business address is _____. I am authorized to make this claim on behalf of the partnership. The partnership is the owner of the shares.
<input type="checkbox"/>	F. Decedent’s Estate Claimant: I am the executor or the administrator (circle which) of the estate of _____, whose last address was _____. (Valid proof of authority must accompany this claim.)
<input type="checkbox"/>	G. Trust Claimant: I am a trustee of _____, a trust authorized under the laws of _____. I am authorized to make this claim on behalf of the trust. The trust is the owner of the shares.
<input type="checkbox"/>	H. Custodial or Guardian Claimant: I am the custodian or the guardian (circle which) for _____ whose address is _____. (Valid proof of authority must accompany this claim.)
<input type="checkbox"/>	I. Other: (Specify) _____

E. SCHEDULE OF TRANSACTIONS IN NUVASIVE INC. COMMON STOCK

1. State the total number of shares of NuVasive Inc. common stock owned at the close of trading on **October 21, 2008**, long or short (*if none, enter “0”; if other than zero, must be documented*): _____

2. Separately list each and every **purchase or acquisition** of NuVasive Inc. common stock between **October 22, 2008** and **October 28, 2013**, and provide the following information (*must be documented*):

Trade Date <i>(list chronologically)</i> Month/Day/Year	Number of Shares Purchased	Price Per Share <i>(excluding commissions, taxes, and other fees)</i>	Total Purchase Price <i>(excluding commissions, taxes, and other fees)</i>
____/____/____		\$	\$
____/____/____		\$	\$
____/____/____		\$	\$

3. Separately list each and every **sale or disposition** of NuVasive Inc. common stock between **October 22, 2008** and **October 28, 2013**, and provide the following information (*must be documented*):

Trade Date <i>(list chronologically)</i> Month/Day/Year	Number of Shares Sold	Price Per Share <i>(excluding commissions, taxes, and other fees)</i>	Total Sale Price <i>(excluding commissions, taxes, and other fees)</i>
____/____/____		\$	\$
____/____/____		\$	\$
____/____/____		\$	\$

4. State the total number of shares of NuVasive Inc. common stock owned at the close of trading on **October 28, 2013**, long or short (*if none, enter “0”; if other than zero, must be documented*): _____

If you need 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 additional sheet.

YOU MUST ALSO READ THE RELEASE AND SIGN THE CERTIFICATION OR THE W-8 CERTIFICATION BELOW

F. SUBMISSION TO JURISDICTION OF THE COURT

By submitting this Proof of Claim and Release Form, I/we, and every Class Member I/we represent, submit to the jurisdiction of the United States District Court for the Southern District of California for purposes of this Action and the Settlement of the Litigation, as reflected in the Stipulation. I/We further agree to be bound by the orders of the Court, agree that this Proof of Claim Form, my/our status or the status of the Class Member I/we represent as a Claimant, and the allowable amount of this claim will be subject to review and further inquiry, and that I/we will furnish such additional documentation with respect to this Proof of Claim as may be required.

G. RELEASE

1. By signing this Proof of Claim and Release Form, I/we hereby acknowledge full and complete satisfaction of, and do hereby fully, finally and forever settle, release and discharge from the Class Claims each and all of the “Released Persons” defined as, collectively, each and all of the Defendants, their past, present and future directors, officers, partners, members, employees, controlling shareholders, present and former attorneys, accountants, consultants, financial or investment advisors, commercial bankers, underwriters, banks or investment banks, advisors, engineers, principals or agents (including, without limitation, those acting on behalf of or at the direction of Defendants), personal or legal representatives, estates, insurers, reinsurers, predecessors, successors, parent entities, affiliates, subsidiaries, divisions, assigns, spouses, heirs, devisees, executors, trustees, administrators, or related or affiliated entities, any partnership in which a Defendant is a general or limited partner, any entity in which a Defendant has a controlling interest, any member of an Individual Defendant’s immediate family, or any trust or foundation of which any Defendant is the settlor or which is for the benefit of any Individual Defendant and/or member(s) of his family.

2. “Released Claims” means any and all past or present claims (including Unknown Claims), complaints, demands, losses, obligations, judgments, suits, matters, rights, liabilities,

allegations of liability, restitution, and causes of action of every kind or nature whatsoever (including, but not limited to, all claims for damages, interest, attorneys' fees and expert consulting fees and all other costs, expenses and liabilities whatsoever), whether based at law or in equity, on federal, state, local, foreign, statutory or common law or on any other law, rule, or regulation (including, but not limited to, any claims arising under federal, state or foreign law, common law, statute, rule, or regulation arising out of or relating to any acts, failures to act, representations, omissions, disclosures, public filings with the Securities and Exchange Commission or any other regulatory agency or body, registration statements, press releases, financial statements, audit opinions, or other statements of any kind by the Released Parties, and each of them, and those people acting under their control, including without limitation, claims for negligence, gross negligence, constructive or actual fraud, violations of the federal or state securities laws, negligent misrepresentation, conspiracy, or breach of fiduciary or any other duty), whether known or unknown, concealed or hidden, accrued or not accrued, foreseen or unforeseen, contingent or absolute, suspected or unsuspected, disclosed or undisclosed, asserted or unasserted, matured or not matured, that were asserted or that could have been asserted directly, indirectly, representatively or in any other capacity, at any time, in any court, tribunal, forum or proceeding by Plaintiffs or any Member of the Class in their individual or representative capacity against the Released Persons arising out of or based upon the purchase, acquisition, sale, or disposition of any publicly traded shares of common stock of NuVasive by any Plaintiff during the Class Period; the allegations that were made or could have been made in the Litigation; and any of the facts, transactions, events, occurrences, disclosures, statements, acts, omissions or failures to act which were or that could have been asserted by Plaintiffs or any Member of the Class in their individual or representative capacity in the Litigation. "Released Claims" do not include claims to enforce the Settlement.

3. "Unknown Claims" means collectively, any and all Released Claims which Plaintiffs or any Class Member 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. Unknown Claims include those claims in which some or all of the facts comprising the claim may be suspected, or even undisclosed, concealed, or hidden. The parties stipulate and agree that this provision is to be interpreted to the broadest extent permitted by any applicable law, regulation, or rule.

H. REPRESENTATIONS

I/We acknowledge that I/we have read the Notice of Proposed Class Action Settlement and that pursuant thereto I/we file this claim to participate in the Settlement.

I/We hereby warrant and represent that neither I/we, nor any person I/We represent, is a Defendant (as defined in the Notice) with respect to any of the claims asserted in the Litigation, a member of the immediate family of any of the Defendants, or anyone excluded from the Class as it is defined in the Stipulation, or a person or entity who has requested exclusion from the Class.

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 hereof.

I/We hereby warrant and represent that I/We have included information about all of My/Our transactions in NuVasive Inc. common stock between October 22, 2008 and October 28, 2013 as well as the number of shares of NuVasive Inc. common stock held by Me/Us at the close of trading on October 21, 2008 and October 28, 2013.

I/We hereby warrant and represent that I am/we are authorized to execute and deliver this Proof of Claim Form and Release.

I. CERTIFICATION

I/We certify that I am/we are not subject to backup withholding. (If you have been notified by the IRS that you are subject to backup withholding, strike out the previous sentence.).

I/We certify that I/we purchased or otherwise acquired the NuVasive Inc. common stock listed in the above Schedule between October 22, 2008 and July 30, 2013, inclusive.

I/We declare and affirm under penalties of perjury that the foregoing information and the documents attached hereto, including the Social Security or Taxpayer Identification Number shown on this Proof of Claim, are true, correct and complete to the best of my/our knowledge, information, and belief, and that this Proof of Claim was executed this _____ day of _____, 201_ in: _____

(City)

(State/Country)

Signature of Claimant

Signature of Joint Claimant, if any

(Print your name here)

(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, (Executor, President, Custodian, etc.)

SUBSTITUTE FORM W-8: IF YOU ARE NOT A RESIDENT OR CITIZEN OF THE UNITED STATES, COMPLETE THE FOLLOWING:

Permanent residence (principal office if a corporation):

If your claim is effectively connected with the conduct of a trade or business within the U.S., please provide the following information regarding your U.S. business:

Name of U.S. Business

Address of U.S. Business

Type of Business

Tax Identification Number

W-8 Certification: Under the penalties of perjury, I certify that the information provided above is true, correct and complete.

Signature(s) _____

Date: _____

Date: _____

ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME. THANK YOU FOR YOUR PATIENCE.

NuVasive Class Action
c/o Strategic Claims Services
600 N Jackson Street – Suite 205
Media, PA 19063

IMPORTANT LEGAL DOCUMENT – PLEASE FORWARD

Reminder Checklist:

1. Remember to sign the above Release and Certification (or W-8 Certification).
2. Remember to attach only **copies** of acceptable supporting documentation, a complete list of which can be found on the Settlement Administrator’s website at www.NuvasiveClassAction.com.
3. Do not send originals of securities certificates.
4. Keep copies of the completed claim form and documentation for your own 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 your address changes in the future, or if these documents were sent to an old or incorrect address, please send us **written** notification of your new address.

If you have questions or concerns regarding your claim, please contact the Settlement Administrator at:

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c/o Strategic Claims Services
600 N. Jackson Street, Suite 205
Media, PA 19063
Tel: 1-866-274-4004
Fax: 1-610-565-7985
info@strategicclaims.net