

Must be Postmarked
No Later Than
December 3, 2007

Central Laborers' Pension Fund v. SIRVA, Inc. Securities Litigation
c/o The Garden City Group, Inc.
Administrator
P.O. Box 9159
Dublin, OH 43017-4159
Toll Free: 1(800) 961-6816

CLP



PROOF OF CLAIM AND RELEASE

PART I: CLAIMANT IDENTIFICATION:

Claim Number: _____ Control Number: _____

| |
|--|
| WRITE ANY NAME AND ADDRESS CORRECTIONS BELOW OR IF THERE IS NO PREPRINTED DATA TO THE LEFT, YOU MUST PROVIDE YOUR FULL NAME AND ADDRESS HERE: |
| Name: |
| |
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| |
| Address: |
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| |
| City: |
| |
| State/Country: |
| |
| Zip Code: |
| |

IF THE ABOVE AREA IS BLANK, YOU MUST ENTER YOUR FULL NAME AND ADDRESS HERE →

You must fill in the last four digits of your Social Security Number/Taxpayer ID Number if box is blank:

| |
|--|
| |
|--|

Daytime Telephone Number: () -

Email Address: _____

Evening Telephone Number: () -

IF YOU PURCHASED OR OTHERWISE ACQUIRED THE COMMON STOCK OF SIRVA, INC. ("SIRVA") THROUGH ANY PUBLIC OFFERING OR ON THE OPEN MARKET BETWEEN NOVEMBER 25, 2003 AND JANUARY 31, 2005, INCLUSIVE ("SETTLEMENT CLASS PERIOD"), YOU ARE A CLASS MEMBER AND YOU MAY BE ENTITLED TO SHARE IN THE SETTLEMENT PROCEEDS. EXCLUDED FROM THE CLASS ARE: (a) SUCH PERSONS OR ENTITIES WHO HAVE SUBMITTED VALID AND TIMELY REQUESTS FOR EXCLUSION FROM THE SETTLEMENT CLASS IN ACCORDANCE WITH THE PROCEDURES SET OUT IN SECTION VI OF THE SETTLEMENT AGREEMENT AND DESCRIBED IN THE NOTICE OF PENDENCY OF CLASS ACTION, PROPOSED SETTLEMENT, MOTION FOR ATTORNEYS' FEES AND EXPENSES, AND FAIRNESS HEARING; (b) SUCH PERSONS OR ENTITIES WHO ARE DEFENDANTS, FAMILY MEMBERS OF THE INDIVIDUAL DEFENDANTS, OR THE LEGAL REPRESENTATIVES, HEIRS, EXECUTORS, SUCCESSORS, ASSIGNS OR MAJORITY-OWNED AFFILIATES—INCLUDING WITHOUT LIMITATION CLAYTON, DUBILIER & RICE FUND V LIMITED PARTNERSHIP ("CD&R FUND V") AND CLAYTON, DUBILIER & RICE FUND VI LIMITED PARTNERSHIP ("CD&R FUND VI")—OF ANY SUCH EXCLUDED PERSON OR ENTITY; OR (c) ANY DIRECTORS OR OFFICERS OF ANY SUCH EXCLUDED PERSON OR ENTITY DURING THE SETTLEMENT CLASS PERIOD.

IF YOU ARE A CLASS MEMBER, YOU MUST COMPLETE AND SUBMIT THIS FORM IN ORDER TO BE ELIGIBLE FOR ANY SETTLEMENT BENEFITS.

YOU MUST COMPLETE AND SIGN THIS PROOF OF CLAIM AND MAIL IT BY FIRST-CLASS MAIL, POSTMARKED NO LATER THAN DECEMBER 3, 2007 TO THE ADMINISTRATOR AT THE FOLLOWING ADDRESS:

Central Laborers' Pension Fund v. SIRVA, Inc. Securities Litigation
c/o The Garden City Group, Inc.
Administrator
P.O. Box 9159
Dublin, OH 43017-4159

YOUR FAILURE TO SUBMIT YOUR CLAIM BY DECEMBER 3, 2007 WILL SUBJECT YOUR CLAIM TO REJECTION AND PRECLUDE YOUR RECEIVING ANY MONEY IN CONNECTION WITH THE SETTLEMENT OF THIS LITIGATION. DO NOT MAIL OR DELIVER YOUR CLAIM TO THE COURT OR TO ANY OF THE PARTIES OR THEIR COUNSEL AS ANY SUCH CLAIM WILL BE DEEMED NOT TO HAVE BEEN SUBMITTED. SUBMIT YOUR CLAIM ONLY TO THE ADMINISTRATOR.



CLAIMANT'S STATEMENT

1. I purchased or otherwise acquired the common stock of SIRVA through a public offering or on the open market between November 25, 2003 and January 31, 2005, inclusive. (Do not submit this Proof of Claim if you did not purchase or otherwise acquire SIRVA common stock during this period).

2. By submitting this Proof of Claim, I state that I: (a) believe in good faith that I am a Settlement Class Member as defined above and in the Notice of Pendency of Class Action, Proposed Settlement, Motion for Attorneys' Fees and Expenses, and Fairness Hearing ("Notice"), or am acting for such person; (b) am not a Defendant in the Action or anyone excluded from the Settlement Class; (c) have read and understand the Notice; (d) believe that I am entitled to receive a share of the Net Cash Settlement Fund; (e) elect to participate in the proposed Settlement described in the Notice; and (f) have not filed a request for exclusion. (If you are acting in a representative capacity on behalf of a Settlement Class Member—e.g., as an executor, administrator, trustee, or other representative—you must submit evidence of your current authority to act on behalf of that Settlement Class Member. Such evidence would include, for example, letters testamentary, letters of administration, or a copy of the trust documents.)

3. I consent to the jurisdiction of the Court with respect to all questions concerning the validity of this Proof of Claim. I understand and agree that my claim may be subject to investigation and discovery under the Federal Rules of Civil Procedure, provided that such investigation and discovery shall be limited to my status as a Settlement Class Member and the validity and amount of my claim. No discovery shall be allowed on the merits of the Action or Settlement in connection with processing of the Proofs of Claim.

4. I have set forth, where requested below, all relevant information with respect to each purchase or other acquisition of SIRVA common stock during the Settlement Class Period, and each sale, if any, of such securities. I agree to furnish additional information (including transactions in other SIRVA securities) to the Administrator to support this claim if requested to do so.

5. I have enclosed photocopies of the stockbroker's confirmation slips, stockbroker's statements, or other documents evidencing each purchase, acquisition, sale or retention of SIRVA common stock listed below in support of my claim. (IF ANY SUCH DOCUMENTS ARE NOT IN YOUR POSSESSION, PLEASE OBTAIN A COPY OR EQUIVALENT DOCUMENTS FROM YOUR BROKER BECAUSE THESE DOCUMENTS ARE NECESSARY TO PROVE AND PROCESS YOUR CLAIM.)

6. I understand that the information contained in this Proof of Claim is subject to such verification as the Administrator may request or as the Court may direct, and I agree to cooperate in any such verification. The information requested herein is designed to provide the minimum amount of information necessary to process most simple claims. The Administrator may request additional information as required to efficiently and reliably calculate my Recognized Claim. In some cases the Administrator may condition acceptance of the claim based upon the production of additional information, including, where applicable, information concerning transactions in any derivatives of the subject securities, such as options.

7. My signature hereto will constitute a full and complete release, remise and discharge by me and my heirs, executors, administrators, predecessors, successors, and assigns (or, if I am submitting this Proof of Claim on behalf of a corporation, a partnership, estate or one or more other persons, by it, him, her or them, and by its, his, her or their heirs, executors, administrators, predecessors, successors, and assigns) of each of the Releasees of all Released Claims, as defined in the Notice.

8. NOTICE REGARDING ELECTRONIC FILES: Certain claimants with large numbers of transactions may request, or may be requested, to submit information regarding their transactions in electronic files. All Claimants MUST submit a manually signed paper Proof of Claim form listing all their transactions whether or not they also submit electronic copies. If you wish to file your claim electronically, you must contact the Administrator at 1-800-961-6816 or visit its website at www.gardencitygroup.com to obtain the required file layout. No electronic files will be considered to have been properly submitted unless the Administrator issues to the claimant a written acknowledgment of receipt and acceptance of electronically submitted data.



PART II: SCHEDULE OF TRANSACTIONS IN SIRVA COMMON STOCK

Separately list each of your purchases or sales of SIRVA common stock below. Photocopy this page or enclose a schedule of transactions providing the same information requested here. **Be sure to include your name and the last four digits of your Social Security number or Tax ID number on any additional sheets.** The date of purchase, acquisition or sale is the "trade" or "contract" date, and not the "settlement" or "payment" date.

9. **SHARES PURCHASED PURSUANT TO IPO:** Number of shares of SIRVA common stock purchased pursuant to SIRVA's November 24, 2003 IPO (Must be documented).

10. **SHARES PURCHASED PURSUANT TO SECONDARY OFFERING:** Number of shares of SIRVA common stock purchased pursuant to SIRVA's June 10, 2004 secondary offering (Must be documented).

11. **PURCHASES:** I made the following purchases of SIRVA common stock during the period between **November 25, 2003** and **January 31, 2005**, inclusive (NOTE: If you acquired your SIRVA common stock during this period other than by an open market purchase, please provide a complete description of the terms of the acquisition on a separate page.) (Must be documented):

| Date of Purchases (List Chronologically) (Month/Day/Year) | Number of Shares of Common Stock Purchased | Purchase Price Per Share of Common Stock | Aggregate Cost |
|---|--|--|----------------------|
| <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"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

12. **PURCHASES:** Between **February 1, 2005** and **October 11, 2005**, inclusive, I purchased shares of SIRVA common stock.

13. **SALES:** I made the following sales of SIRVA common stock during the period between **November 25, 2003** and **October 11, 2005**, inclusive (Must be documented):

| Date of Sales (List Chronologically) (Month/Day/Year) | Number of Shares of Common Stock Sold | Sale Price Per Share of Common Stock | Amount Received |
|---|--|--|----------------------|
| <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"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

14. **UNSOLD HOLDINGS:** As of the close of business on **October 11, 2005**, I owned shares of SIRVA common stock (If none, write 0) (Must be documented).

**IF YOU NEEDED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS
YOU MUST CHECK THIS BOX
IF YOU DO NOT CHECK THIS BOX THESE ADDITIONAL PAGES WILL NOT BE REVIEWED**



UNDER THE PENALTIES OF PERJURY, I (WE) CERTIFY THAT ALL OF THE INFORMATION I (WE) PROVIDED ON THIS PROOF OF CLAIM FORM IS TRUE, CORRECT AND COMPLETE.

Signature of Claimant (If this claim is being made on behalf of Joint Claimants, then each must sign)

(Signature)

(Signature)

(Capacity of person(s) signing, e.g. beneficial purchaser(s), executor, administrator, trustee, etc.)

Date: _____

**ACCURATE CLAIM PROCESSING TAKES TIME.
THANK YOU FOR YOUR PATIENCE.**

REMINDER CHECKLIST

1. Please sign the Certification Section of the Proof of Claim and Release form.
2. If this claim is made on behalf of joint claimants, then both must sign.
3. Please remember to attach supporting documents.
4. **DO NOT SEND ORIGINALS OF ANY SUPPORTING DOCUMENTS.**
5. Keep a copy of your Proof of Claim and Release form and all documentation submitted for your records.
6. The Administrator will acknowledge receipt of your Proof of Claim and Release by mail, within 30 days. Your claim is not deemed filed until you receive an acknowledgment postcard. If you do not receive an acknowledgment postcard within 30 days, please call the Administrator toll free at 1-800-961-6816.
7. If you move, please send us your new address.
8. **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
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