

Must be Postmarked  
No Later Than  
April 6, 2007

DDi Corp. Securities Litigation  
c/o The Garden City Group, Inc.  
Claims Administrator  
P.O. Box 9000 #6465  
Merrick, NY 11566-9000  
1(888) 292-1828



**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:
Address:
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: (    ) -

Evening Telephone Number: (    ) -

Email Address:

- Check appropriate box:
- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> Individual   | <input type="checkbox"/> Corporation           |
| <input type="checkbox"/> Joint Owners | <input type="checkbox"/> IRA/RRSP              |
| <input type="checkbox"/> Estate       | <input type="checkbox"/> Other _____ (Specify) |

ALL PERSONS AND ENTITIES WHO PURCHASED SHARES OF DDI CORP. ("DDI") COMMON STOCK IN DDI'S FEBRUARY 14, 2001 PUBLIC OFFERING FOR \$23.50 PER SHARE (THE "SETTLEMENT CLASS").

EXCLUDED FROM THE SETTLEMENT CLASS ARE DEFENDANTS; MEMBERS OF THE FAMILIES OF EACH OF THE INDIVIDUAL DEFENDANTS; ANY PARENT, SUBSIDIARY, AFFILIATE, PARTNER, OFFICER, EXECUTIVE OR DIRECTOR OF ANY DEFENDANT; ANY ENTITY IN WHICH ANY EXCLUDED PERSON HAS OR HAD A CONTROLLING INTEREST; AND THE LEGAL REPRESENTATIVES, HEIRS, SUCCESSORS OR ASSIGNS OF ANY SUCH EXCLUDED PERSON OR ENTITY. ALSO EXCLUDED ARE THOSE PERSONS AND ENTITIES WHO TIMELY AND VALIDLY REQUEST EXCLUSION FROM THE SETTLEMENT CLASS.

IF YOU ARE A SETTLEMENT 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 RELEASE FORM ("PROOF OF CLAIM") AND MAIL IT BY FIRST CLASS MAIL, POSTMARKED NO LATER THAN APRIL 6, 2007 TO THE FOLLOWING ADDRESS:

DDi Corp. Securities Litigation  
c/o The Garden City Group, Inc.  
Claims Administrator  
P.O. Box 9000 #6465  
Merrick, NY 11566-9000

YOUR FAILURE TO SUBMIT YOUR PROOF OF CLAIM BY APRIL 6, 2007 WILL SUBJECT YOUR CLAIM TO REJECTION AND PRECLUDE YOUR RECEIVING ANY MONEY IN CONNECTION WITH THE SETTLEMENT OF THIS ACTION. 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 CLAIMS ADMINISTRATOR.

IF YOU ARE A SETTLEMENT CLASS MEMBER, AND UNLESS YOU TIMELY AND VALIDLY REQUEST EXCLUSION FROM THE SETTLEMENT CLASS, YOU ARE BOUND BY THE TERMS OF ANY JUDGMENT ENTERED IN THIS ACTION, WHETHER OR NOT YOU SUBMIT A CLAIM FORM.



I. Claimant Identification

1. I purchased shares of DDi common stock in DDi's February 14, 2001 public offering for \$23.50 per share. (Do not submit this Proof of Claim if you did not purchase shares of DDi common stock in DDi's February 14, 2001 public offering for \$23.50 per share.)

2. I submit this Proof of Claim under the terms of the Stipulation of Settlement. I also submit to the jurisdiction of the United States District Court for the Central District of California, with respect to my claim as a Settlement Class Member and for purposes of enforcing the releases set forth herein and in the Stipulation. I have not submitted any other claim covering the same purchase(s) or sale(s) of DDi common stock (common stock purchased in DDi's February 14, 2001 public offering for \$23.50 per share), and know of no other person having done so on my behalf. I hereby warrant and represent that I 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 thereof.

3. By submitting this Proof of Claim, I state that I believe in good faith that I am a Settlement Class Member as defined above and in the Notice of Pendency and Proposed Settlement of Class Action (the "Notice"), or am acting for such person; that I am not a Defendant in the Action or anyone excluded from the Settlement Class; that I have read and understand the Notice; that I believe that I am entitled to receive a share of the Net Settlement Fund; that I elect to participate in the proposed Settlement described in the Notice; and that I 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.)

4. I have set forth where requested below all relevant information with respect to each purchased share of DDi common stock in DDi's February 14, 2001 public offering for \$23.50 per share, and each sale, if any, of such common stock. I agree to furnish additional information to the Claims 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, sale or retention of DDi 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 Claims 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 Claims Administrator may request additional information as required to efficiently and reliably calculate your Recognized Claim. In some cases the Claims 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. Upon the occurrence of the Effective Date (as defined in the Notice) my signature hereto will constitute a full and complete satisfaction, release, remise and discharge by me 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 my, its, his, her or their heirs, executors, administrators, predecessors, successors, and assigns of each of the "Released Persons," as defined in the Notice, of all "Released Claims." The term "Released Claims" means any and all claims, debts, demands, rights or causes of action or liabilities, whether based on federal, state, local, statutory or common law or any other law, rule or regulation, whether fixed or contingent, accrued or un-accrued, liquidated or un-liquidated, at law or in equity, matured or un-matured, whether class or individual in nature, including both known claims and Unknown Claims, (i) that have been asserted in this Action by the Plaintiffs or Settlement Class Members or any of them or the successors and assigns of any of them against any of the Released Persons, or (ii) that could have been asserted in the Action by the Plaintiffs and Settlement Class Members or any of them against any of the Released Persons which arise out of, are based upon, or relate to any of the allegations, transactions, facts, matters or occurrences, representations or omissions set forth, or referred to in the Action and are based upon the purchase of DDi securities during the Settlement Class Period. The term "Unknown Claims" means any Released Claims which Plaintiffs or any Settlement 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, and any Released Defendants' Claims that any Defendant does not know or suspect to exist in his, her or its favor, which, if known by him, her or it, might have affected his, her or its decision(s) with respect to this Settlement.

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 Claims Administrator at 1-888-292-1828 or visit their website at [www.gardencitygroup.com](http://www.gardencitygroup.com) to obtain the required file layout. No electronic files will be considered to have been properly submitted unless the Claims Administrator issues to the Claimant a written acknowledgment of receipt and acceptance of electronically submitted data.



**PART II: SCHEDULE OF TRANSACTIONS IN DDI COMMON STOCK**

Separately list each of your purchases or sales of DDi common stock below. Photocopy this page if more space is needed. **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 or sale is the "trade" or "contract" date, and not the "settlement" or "payment" date.

A. **BEGINNING HOLDINGS:** Number of shares of DDi common stock owned at the close of business on **February 14, 2001**, (If none, write 0), (Must be documented).

B. **PURCHASES:** Out of the number of shares listed in paragraph A above, please indicate below the number of shares of DDi common stock purchased in DDi's **February 14, 2001** public offering for \$23.50 per share (Must be documented).

Number of Shares of DDi Common Stock Purchased
<input type="text"/>

C. **PURCHASES:** Number of shares of DDi common stock purchased from **February 15, 2001** through and including **the date this form is completed**:

D. **SALES:** Sales of DDi common stock from **February 14, 2001** through and including **the date this form is completed** (Must be documented):

Trade Date(s) (List Chronologically) (Month/Day/Year)	Number of Shares of DDi Common Stock Sold	Sale Price Per Share of DDi Common Stock	Total Sale Price (net of commissions, taxes, and fees)
/ /	<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"/>

E. **UNSOLD HOLDINGS:** Number of shares of DDi common stock owned at the close of trading on **the date this form is completed**, (If none, write 0), (Must be documented).

IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS PHOTOCOPY THIS PAGE



UNDER THE PENALTIES OF PERJURY, I (WE) CERTIFY THAT ALL OF THE INFORMATION PROVIDED ON THIS 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)

\_\_\_\_\_  
(Title/Capacity of person(s) signing, e.g. beneficial purchaser(s), president, 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 Claims 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 acknowledgement postcard. If you do not receive an acknowledgement postcard within 30 days, please call the Claims Administrator toll free at 1(888) 292-1828.
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  
APRIL 6, 2007 AND MUST BE MAILED TO:**

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