UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

SYLEBRA CAPITAL PARTNERS MASTER FUND LTD, SYLEBRA CAPITAL PARC MASTER FUND, AND SYLEBRA CAPITAL MENLO MASTER FUND, Individually and on Behalf of All Others Similarly Situated, Plaintiffs, v. EVERBRIDGE, INC., DAVID MEREDITH, PATRICK BRICKLEY, and JAIME ELLERTSON et al., Defendants.	Case No. 2:22-cv-02249-FWS-RAO CLASS ACTION

PROOF OF CLAIM AND RELEASE FORM

I. GENERAL INSTRUCTIONS

1. To recover as a member of the Settlement Class based on your claims in the class action entitled *Sylebra Capital Partners Master Fund LTD, et al. v. Everbridge, Inc., et al.,* No. 2:22-cv-02249-FWS-RAO (C.D. Cal.) (the "Action"), you must complete and, on page 5 below, sign this Proof of Claim and Release form ("Claim Form"). If you fail to submit a timely and properly addressed (as explained in paragraph 2 below) Claim Form, your claim may be rejected and you may not receive any recovery from the Net Settlement Fund created in connection with the proposed Settlement of the Action. Submission of this Claim Form, however, does not ensure that you will share in the proceeds of the Settlement.[1]

2. **THIS CLAIM FORM MUST BE SUBMITTED ONLINE AT WWW.EVERBRIDGESECURITIESSETTLEMENT.COM NO LATER THAN NOVEMBER 25, 2026 OR, IF MAILED, BE POSTMARKED NO LATER THAN NOVEMBER 25, 2026, ADDRESSED AS FOLLOWS:**

Everbridge Securities Settlement
c/o Verita Global, LLC
P.O. Box 301170
Los Angeles, CA 90030-1170

Do not mail or deliver your Claim Form to the Court, the Parties to the Action, or their counsel. Submit your Claim Form only to the Claims Administrator at the address set forth above.

3. If you are a member of the Settlement Class and you have not requested exclusion from the Settlement Class, you will be bound by and subject to the terms of all judgments and orders entered in the Action, including the releases provided therein, WHETHER OR NOT YOU SUBMIT A CLAIM FORM OR RECEIVE A PAYMENT.

4. By submitting a signed Claim Form, you will be swearing to the truth of the statements contained in it and to the genuineness of the documents attached to it, subject to penalties of perjury under the laws of the United States of America. The submission of forged or fraudulent documentation will result in the rejection of your claim and may subject you to civil liability or criminal prosecution.

[1] All capitalized terms not defined in this Claim Form have the meanings given in the Stipulation and Agreement of Settlement, dated August 10, 2026 (the "Stipulation"), available at www.EverbridgeSecuritiesSettlement.com.

II. CLAIMANT IDENTIFICATION

5. If you purchased or acquired Everbridge, Inc. ("Everbridge") publicly traded common stock during the period from February 18, 2020 through February 24, 2022, both dates inclusive (the "Class Period"), and held the stock in your name, you are the beneficial and record owner of the shares. If, however, the Everbridge shares were purchased or acquired through a third party, such as a brokerage firm, you are the beneficial owner and the third party is the record owner.

6. Use **Part I** of this form entitled "Claimant Identification" to identify each beneficial owner of Everbridge publicly traded common stock that forms the basis of this claim, as well as the owner of record if different. THIS CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL OWNERS OR THE LEGAL REPRESENTATIVE OF SUCH OWNERS.

7. All joint owners must sign this claim. Executors, administrators, guardians, conservators, legal representatives, and trustees filing this claim must complete and sign this claim on behalf of persons represented by them and their authority must accompany this claim and their titles or capacities must be stated. The Social Security (or taxpayer identification) number and telephone number of the beneficial owner may be used in verifying the claim. Failure to provide the foregoing information could delay verification of your claim or result in rejection of the claim.

III. IDENTIFICATION OF TRANSACTIONS

8. Use **Part II** of this form entitled "Schedule of Transactions in Everbridge Publicly Traded Common Stock" to supply all required details of the transaction(s). If you need more space or additional schedules, attach separate sheets giving all of the required information in substantially the same form. Sign and print or type your name on each additional sheet.

9. On the schedules, provide all of the requested information with respect to the purchases or acquisitions of Everbridge publicly traded common stock, whether the transactions resulted in a profit or a loss. Failure to report all such transactions may result in the rejection of your claim.

10. The date of covering a "short sale" is deemed to be the date of purchase or acquisition of Everbridge common stock. The date of a "short sale" is deemed to be the date of sale.

11. Copies of broker trade confirmations or other documentation of the transactions must be attached to your claim. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim. **THE PARTIES DO NOT HAVE INFORMATION ABOUT YOUR TRANSACTIONS IN EVERBRIDGE PUBLICLY TRADED COMMON STOCK.**

12. NOTICE REGARDING ELECTRONIC FILES: Certain Claimants with large numbers of transactions may request, or may be asked, to submit information regarding their transactions in electronic files. (This is different than the online claim portal on the Settlement website.) All such Claimants MUST submit a manually signed paper Claim Form whether or not they also submit electronic copies. If you wish to submit your claim electronically, you must contact the Claims Administrator at 888-808-1850 to obtain the required file layout or visit www.EverbridgeSecuritiesSettlement.com. 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.

Official Office Use Only

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

Sylebra Capital Partners Master Fund LTD, et al. v. Everbridge, Inc., et al.

Case No. 2:22-cv-02249-FWS-RAO

PROOF OF CLAIM AND RELEASE

Must Be Postmarked (if Mailed) or Received (if Submitted Online) No Later Than November 25, 2026

EVS

Please Type or Print in the Boxes Below
Must use Black or Blue Ink or your claim may be deemed deficient.

The Claims Administrator will use this information for all communications regarding this Claim Form. If this information changes, you MUST notify the Claims Administrator in writing at the address above. Complete names of all persons and entities must be provided.

PART I – CLAIMANT IDENTIFICATION

Last Name | M.I. | First Name

Last Name (Co-Beneficial Owner) | M.I. | First Name (Co-Beneficial Owner)

○ Individual (includes joint owner accounts) ○ Corporation
○ Pension Plan ○ IRA/401k ○ Estate ○ Trust ○ Other (describe):

Entity Name (Beneficial Owner - If Claimant is not an Individual)

Representative or Custodian Name (if Claim is not submitted by Beneficial Owner(s))

Account Number (if filing for multiple accounts, file a separate Claim Form for each account)

Last Four Digits of Social Security Number or Taxpayer Identification Number

Telephone Number (Primary Daytime) | Telephone Number (Alternate)

Email Address

MAILING INFORMATION

Address

Address (cont.)

City | State | ZIP Code

Foreign Province | Foreign Postal Code | Foreign Country Name/Abbreviation

FOR CLAIMS PROCESSING ONLY	OB	CB	○ ATP ○ KE ○ ICI	○ BE ○ DR ○ EM	○ FL ○ ME ○ ND	○ OP ○ RE ○ SH	MM / DD / YYYY	FOR CLAIMS PROCESSING ONLY

PART II – SCHEDULE OF TRANSACTIONS IN EVERBRIDGE PUBLICLY TRADED COMMON STOCK

1. **BEGINNING HOLDINGS –** State the total number of shares of Everbridge publicly traded common stock held on February 17, 2020. If none, write "0" or "Zero." (Must submit documentation.)

Proof Enclosed? ○ Y ○ N

2. **PURCHASES/ACQUISITIONS DURING THE CLASS PERIOD –** Separately list each and every purchase and acquisition of Everbridge publicly traded common stock during the period from February 18, 2020 through, and including, February 24, 2022. (Must submit documentation.)

PURCHASES

Date of Purchase/Acquisition (List Chronologically) (Month/Day/Year)	Number of Shares Purchased/ Acquired	Purchase/ Acquisition Price Per Share	Total Purchase/ Acquisition Price (excluding any fees, commissions, and taxes)	Confirm Proof of Purchase/ Acquisition Enclosed
MM / DD / YYYY		$.	$.	○ Y ○ N
/ /		$.	$.	○ Y ○ N
/ /		$.	$.	○ Y ○ N
/ /		$.	$.	○ Y ○ N

○ IF NONE CHECK HERE

3. **PURCHASES/ACQUISITIONS DURING THE 90-DAY LOOKBACK PERIOD –** State the total number of shares of Everbridge publicly traded common stock purchased/acquired from February 25, 2022 through the close of trading on May 25, 2022.[2] (Must submit documentation.)

Proof Enclosed? ○ Y ○ N

4. **SALES DURING THE CLASS PERIOD AND DURING THE 90-DAY LOOKBACK PERIOD –** Separately list each and every sale of Everbridge publicly traded common stock from February 18, 2020 through, and including, the close of trading on May 25, 2022. (Must submit documentation.)

SALES

Date of Sale (List Chronologically) (Month/Day/Year)	Number of Shares Sold	Sale Price Per Share	Total Sale Price (excluding taxes, commissions, and fees)	Confirm Proof of Sale Enclosed
MM / DD / YYYY		$.	$.	○ Y ○ N
/ /		$.	$.	○ Y ○ N
/ /		$.	$.	○ Y ○ N
/ /		$.	$.	○ Y ○ N

○ IF NONE CHECK HERE

5. **ENDING HOLDINGS –** State the total number of shares of Everbridge publicly traded common stock held as of the close of trading on May 25, 2022. If none, write "0" or "Zero." (Must submit documentation.)

Proof Enclosed? ○ Y ○ N

○ **IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS, YOU MUST PHOTOCOPY THIS PAGE, WRITE YOUR NAME, AND FILL IN THIS CIRCLE.**

[2] Information requested in this Claim Form with respect to purchases/acquisitions from February 25, 2022 through May 25, 2022 is needed only in order for the Claims Administrator to confirm that you have reported all relevant transactions. Purchases/acquisitions during this period, however, are not eligible for a recovery because they are outside the Class Period and will not be used for purposes of calculating Recognized Loss Amounts pursuant to the Plan of Allocation.

IV. SUBMISSION TO JURISDICTION OF THE COURT AND ACKNOWLEDGMENTS

13. By signing and submitting this Claim Form, the Claimant(s) or the person(s) acting on behalf of the Claimant(s) certify(ies) that: I (We) submit this Claim Form under the terms of the Plan of Allocation 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(s) and for purposes of enforcing the releases set forth herein. I (We) further acknowledge that, once the Settlement reaches its Effective Date, I (we) will be bound by and subject to the terms of all judgments and orders entered in the Action, including the releases set forth therein. I (We) agree to furnish additional information to the Claims Administrator to support this claim, such as additional documentation for transactions in Everbridge publicly traded common stock and other Everbridge securities, if required to do so. I (We) have not submitted any other claim covering the same transactions in Everbridge publicly traded common stock during the time periods herein and know of no other person having done so on my (our) behalf.

V. RELEASES, WARRANTIES, AND CERTIFICATION

14. I (We) hereby warrant and represent that I am (we are) a Settlement Class Member as defined in the notices, and that I am (we are) not excluded from the Settlement Class.

15. I (we) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally, and forever compromise, settle, release, resolve, relinquish, waive, and discharge with prejudice the Released Plaintiffs' Claims as to each and all of the Released Defendant Parties (as these terms are defined in the Notice). This release shall be of no force or effect unless and until the Court approves the Settlement and it becomes effective on the Effective Date.

16. I (We) hereby warrant and represent that I (we) waive the right to a trial by a jury, to the extent one exists, and agree to the determination by the Claims Administrator or the Court of the validity and amount of this Claim, and waive any right of appeal with respect to such determination.

17. 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 thereof.

18. I (We) hereby warrant and represent that I (we) have included information about all purchases, acquisitions, and sales of Everbridge publicly traded common stock that occurred during the relevant time periods and the number of shares held by me (us), to the extent requested.

19. I (We) certify that I am (we are) NOT subject to backup tax withholding. (If you have been notified by the Internal Revenue Service that you are subject to backup withholding, please strike out the prior sentence.)

I (We) declare under penalty of perjury under the laws of the United States of America that all of the foregoing information supplied by the undersigned is true and correct.

Executed this ________________ day of ___________________________ in ____
(Month/Year) (City/State/Country)

______________________________	______________________________
Signature of Claimant	Print Claimant Name Here
______________________________	______________________________
Signature of Joint Claimant (if any)	Print Name of Joint Claimant (if any)
______________________________	______________________________
Signature of person signing on behalf of Claimant	Print Name of person signing on behalf of Claimant

____
Capacity of person signing on behalf of Claimant, if other than an individual, *e.g.,* executor, president, trustee, custodian, etc. (Must provide evidence of authority to act on behalf of Claimant.)

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

Reminder Checklist:

1. Sign this Claim Form. If this Claim Form is on behalf of joint Claimants, then both must sign.
2. DO NOT HIGHLIGHT THE CLAIM FORM OR YOUR SUPPORTING DOCUMENTATION.
3. Attach only copies of supporting documentation as these documents will not be returned to you.
4. Keep a copy of your Claim Form for your records.
5. The Claims Administrator will acknowledge receipt of your Claim Form by mail, within 60 days. Your claim is not deemed submitted until you receive an acknowledgment postcard. If you do not receive an acknowledgment postcard within 60 days, please call the Claims Administrator toll free at 888-808-1850 or email at info@EverbridgeSecuritiesSettlement.com.
6. If you move after submitting this Claim Form, please notify the Claims Administrator of the change in your address, otherwise you may not receive additional notices or payment.
7. If you have any questions or concerns regarding your Claim, contact the Claims Administrator by email at info@EverbridgeSecuritiesSettlement.com, or toll-free at 888-808-1850, or you may visit www.EverbridgeSecuritiesSettlement.com. DO NOT call Everbridge or its counsel with questions regarding your claim.

THIS CLAIM FORM MUST BE SUBMITTED ONLINE OR MAILED NO LATER THAN NOVEMBER 25, 2026, ADDRESSED AS FOLLOWS:

Everbridge Securities Settlement
c/o Verita Global, LLC
P.O. Box 301170
Los Angeles, CA 90030-1170
www.EverbridgeSecuritiesSettlement.com