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:

Identity of Claimant (Check one):
☐ Individual/Sole Proprietor ☐ Corporation
☐ Trust ☐ Pension Plan
☐ IRA ☐ Partnership

IMPORTANT INSTRUCTIONS
MAIL YOUR COMPLETED PROOF OF CLAIM TO THE CLAIMS ADMINISTRATOR:

PFGI Securities Litigation
c/o The Garden City Group, Inc.
Claims Administrator
P.O. Box 9000 #6315
Merrick, New York 11566-9000

FILING DEADLINE: OCTOBER 31, 2005
ON OR BEFORE OCTOBER 31, 2005 IN ORDER TO PARTICIPATE IN THE DISTRIBUTION OF THE NET SETTLEMENT FUND DESCRIBED IN THE ACCOMPANYING NOTICE OF PENDING OF CLASS ACTION AND PROPOSED SETTLEMENT, MOTION FOR ATTORNEYS’ FEES AND SETTLEMENT FAIRNESS HEARING.

1. You must be a person or entity who purchased or acquired the common stock of Provident Financial Group, Inc. ("Provident") during the period March 30, 1998 through March 5, 2003, inclusive and were damaged thereby (the "Class Period"), or purchased or acquired Provident Income PRIDES securities at any time prior to March 5, 2003, and traceable to PRIDES June 6, 2002 offering and not have filed a request for exclusion in the Lawsuit.

2. TO PARTICIPATE IN THE SETTLEMENT, YOU MUST FILE THIS PROOF OF CLAIM ON OR BEFORE OCTOBER 31, 2005, AND EXECUTE IT UNDER THE PENALTIES OF PERJURY.

3. You must attach to your Proof of Claim legible copies of brokers’ confirmations, monthly statements, correspondence, or other documents sufficient to demonstrate your purchase(s) and sale(s) of Provident common stock or PRIDES between March 30, 1998 and March 5, 2003.

4. YOUR PROOF OF CLAIM MUST BE RECEIVED BY THE CLAIMS ADMINISTRATOR NO LATER THAN OCTOBER 31, 2005. A Proof of Claim shall be deemed received: (i) when posted, if it is mailed to the Claims Administrator at the above address by first class, registered or certified mail, postage prepaid; or (ii) if otherwise sent, when it is actually received by the Claims Administrator.
**PART II: SCHEDULE OF TRANSACTIONS IN PROVIDENT COMMON STOCK**

Separately list each of your purchases, acquisitions or sales of Provident common stock below. Photocopy this page if more space is needed. Be sure to include your name and 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.

5. **BEGINNING HOLDINGS:** Number of shares of Provident common stock owned at the open of business on March 30, 1998 (If none, write 0), (Must be documented):

6. **PURCHASES:** Purchases of Provident common stock during the period from March 30, 1998 through March 5, 2003, inclusive (Must be documented):

<table>
<thead>
<tr>
<th>Date(s) of Purchase (List Chronologically) (Month/Day/Year)</th>
<th>Number of Shares of Common Stock Purchased</th>
<th>Purchase Price Per Share of Common Stock</th>
<th>Aggregate Cost (excluding commissions, taxes and fees)</th>
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</table>

7. **ACQUISITIONS:** Number of shares of Provident common stock acquired through the merger of Fidelity Financial of Ohio, Inc. into Provident Financial Group, Inc. on or about February 4, 2000. (Must be documented):

<table>
<thead>
<tr>
<th>Date of Acquisition (Month/Day/Year)</th>
<th>Number of Shares of Common Stock Acquired</th>
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8. **ACQUISITIONS:** Number of shares of Provident common stock acquired through the merger of OHSL Financial Corp. into Provident Financial Group, Inc. on or about December 3, 1999. (Must be documented):

<table>
<thead>
<tr>
<th>Date of Acquisition (Month/Day/Year)</th>
<th>Number of Shares of Common Stock Acquired</th>
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9. **SALES:** Sales of Provident common stock during the period from March 30, 1998 through March 5, 2003, inclusive (Must be documented):

<table>
<thead>
<tr>
<th>Date(s) of Sale (List Chronologically) (Month/Day/Year)</th>
<th>Number of Shares of Common Stock Sold</th>
<th>Sale Price Per Share of Common stock</th>
<th>Amount Received (excluding commissions, taxes and fees)</th>
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10. **UNsold HOLDINGS:** Number of shares of Provident common stock owned at the close of business on March 5, 2003 (If none, write 0), (Must be documented):

**IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS PHOTOCOPY THIS PAGE.**
11. PURCHASES/ACQUISITIONS: Purchases or acquisitions of Provident Income PRIDES securities during the period from June 6, 2002 through March 5, 2003, inclusive (Must be documented):

<table>
<thead>
<tr>
<th>Date(s) of Purchase (List Chronologically) (Month/Day/Year)</th>
<th>Number of Shares of PRIDES Securities Purchased/Acquired</th>
<th>Purchase Price Per Share of PRIDES Securities</th>
<th>Aggregate Cost (excluding commissions, taxes and fees)</th>
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</tbody>
</table>

12. SALES: Sales of Provident Income PRIDES securities during the period from June 6, 2002 through March 5, 2003, inclusive (Must be documented):

<table>
<thead>
<tr>
<th>Date(s) of Sale (List Chronologically) (Month/Day/Year)</th>
<th>Number of Shares of PRIDES Securities Sold</th>
<th>Sale Price Per Share of PRIDES Securities</th>
<th>Amount Received (excluding commissions, taxes and fees)</th>
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13. UNSOLD HOLDINGS: Number of Provident Income PRIDES securities owned at the close of business March 5, 2003 (If none, write 0), (Must be documented):

IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS PHOTOCOPY THIS PAGE.
14. **SUBSTITUTE FORM W-9**

**REQUEST FOR TAXPAYER IDENTIFICATION NUMBER**

Enter your taxpayer identification number below. For most individuals, this is your Social Security number. The Internal Revenue Service requires your taxpayer identification number. If you fail to furnish your correct taxpayer identification number, 31% of the interest portion of your distributive share of the Net Settlement Fund will be withheld.

Social Security Number: _______-____-_______
(for individuals)

OR

Employer Identification Number: ________-________-_______
(for estates, trusts, corporations, etc.)

15. **CERTIFICATION**

Claimant affirms that:

(a) The Social Security or Employer Identification number shown above is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and

(b) I(We) certify that I (we are) **NOT** subject to any backup withholding under the provisions of Section 3406(a)(1)(C) of the Internal Revenue Code.

NOTE: If you have been notified by the Internal Revenue Service that you are subject to backup withholding, please strike out the word **NOT** in the certification above, in accordance with the following instructions:

Instructions: If you have been notified by the Internal Revenue Service (IRS) that you are subject to backup withholding, strike out the word **NOT**. If you were notified by the IRS that you were subject to backup withholding but have since been notified by the IRS that you are no longer subject to backup withholding, do not strike out any part of the certification. If you have never been notified by the IRS that you are subject to backup withholding, do not strike out any part of the certification. (For additional information contact your tax consultant or the Internal Revenue Service.)

Any change in your status with respect to backup withholding should be promptly reported to the Claims Administrator at the above address.

16. (a) I(We) am (are) enclosing documentary proof of (a) the above purchases, (b) sales, and (c) shares held as of the close of business on March 5, 2003.

(b) I(We) was (were) not a named Defendant in the Action, or an affiliate of any named Defendant, an officer(s) or director(s) of Provident or its affiliates, a member of the immediate family of any officer or director of Provident or its affiliates, and/or any entity in which any of the named Defendants, members of Defendants’ immediate families, or officers or directors of any named Defendant has a controlling interest, and am (are) not otherwise excluded from the Class.

17. In consideration of the aforesaid, the undersigned, intending to be legally bound, does hereby **RELEASE** and forever discharges, and agrees that (s)he or it shall not, now or hereafter assert or maintain any present or prospective claim against any of the "Released Parties" for any "Settled Claim" which terms are defined as follows:

(a) "Released Parties" means Provident Financial Group, Inc., Provident Bank, PFGI Capital Corporation, Robert L. Hoverson, and Christopher J. Carey, and their past or present subsidiaries, parents, successors and predecessors, and all entities in which PFGI acquired a controlling interest during the period March 30, 1998 to March 5, 2003, including but not limited to Fidelity and OHSL, and each of their current and former officers, directors, agents, employees, attorneys, advisors, investment advisors, and any person, firm, trust, corporate officer, director or other individual or entity in which any Defendant has a controlling interest or which is related to or affiliated with any of the Defendants.

(b) "Settled Claims" means any and all claims, debts, demands, rights or causes of action or liabilities whatsoever (including, but not limited to, any claims for damages, interest, attorneys’ fees, expert or consulting fees, and any other costs, expenses or liability whatsoever), 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, (a) that have been or could have been
asserted in this Action by the Class Members or any of them against any of the Released Parties, and (b) that arise out of or are based upon: (i) the purchase or acquisition during the Settlement Class Period of PFGI common stock; or (ii) the purchase or acquisition of Provident Income PRIDES securities pursuant to the offering of said securities and prospectus disseminated by PFGI in connection therewith; or (iii) the acquisition of PFGI common stock by virtue of the merger of OHSL into PFGI pursuant to the OHSL Agreement and/or the OHSL Proxy Statement; or (iv) the acquisition of PFGI common stock by virtue of the merger of Fidelity into PFGI, pursuant to the Fidelity Agreement and/or the Fidelity Proxy Statement.

18. By executing and submitting this Proof of Claim and Release, I (we) understand that I (we) am (are) subject to the jurisdiction of the District Court for the purpose of enforcing the Settlement and the Release of Claims.

19. I(We) certify under penalty of perjury that to the best of my (our) knowledge, information and belief the information on the front and back of this claim (and any additional sheets) is true and correct and that this is the only claim being made with respect to these purchases.

Dated: ____________________________  ____________________________
(Sign your name here)               (Sign your name here)

__________________________________  ___________________________________
(Type or print your name here)       (Type or print your name here)

__________________________________  ___________________________________
(Capacity of person(s) signing, e.g., Beneficial Purchase, Executor or Administrator)  (Capacity of person(s) signing, e.g., Beneficial Purchase, Executor or Administrator)
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. You must attach documentary proof of your purchases, acquisitions and sales during the class period, i.e., copies of confirmation slips, and/or broker’s statements. If you are acting in a representative capacity, e.g., as an executor or trustee or hold a similar office, you must attach documentary proof of your authority to act.

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 within 30 days, please call the Claims Administrator toll-free at 1(800) 261-5846.

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 MUST BE POSTMARKED OR RECEIVED NO LATER THAN OCTOBER 31, 2005:

PFGI Securities Litigation
c/o The Garden City Group, Inc.
Claims Administrator
P.O. Box 9000 #6315
Merrick, New York 11566-9000