EXHIBIT B

Stryker MDL Quarterly Expense Report for _____

Last Name, First Name:

Quarter/ Date:

Categories: 1. Assessment fees 2. federal Express/Local courier 3. Postage Charges 4. Facsimile Charges 5. Long Distance 6. In-house Photocopying 7. Outside photocopying 8. Hotels 9. Meals 10. Mileage 11. Air travel 12. Deposition Costs/Expert Witness/Other 13. Lexis/Westlaw 14. Court Fees 15. Witness/Expert Fees 16. Investigation Fees/ Service Fees 17. Transcripts 18. Ground Transportation (ie rental) 19. Miscellaneous (describe)

*******ALL ORIGINAL RECIEPTS MUST BE ATTACHED TO THIS EXPENSE SHEET*******

Date	Category Code	Category Name	Detailed Description	Amount	Reciept Provided: Yes / No (if no, provide reason)