

Current Cablevision Subscribers Claim Form

To receive a payment or other benefit, you must accurately complete this Claim Form and submit it no later than September 23, 2016. Authorized Claimants will receive (i) one-time bill credits ranging between \$20-\$40 or (ii) equipment or services ranging in value between \$50-\$140, depending on the length of time that they have subscribed to Cablevision cable TV services. Claim Forms may be submitted online at www.cableboxsettlement.com or by mail to:

Set-Top Box Claims Administrator, PO Box 3719, Portland, OR 97208-3719.

Claim Forms must be submitted online or postmarked by September 23, 2016.

Part 1: Class Member Information

Please enter your current contact information.

Last Name	MI	First Name
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Mailing Address

City	State	Zip Code
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Current Telephone Number

Email address that Cablevision and/or the Claims Administrator may use to contact you

Part 2: Subscription Information¹

Please enter the information about your Cablevision cable TV subscription.

Service Address where you currently receive Cablevision service

City	State	Zip Code
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Dates you received Cablevision service at this address (MM/YY-MM/YY)

Current Cablevision Account Number

Service Address(es) where you previously received Cablevision service and dates of service (MM/YY-MM/YY) (if applicable):

For approximately how many total months have you been a Cablevision cable TV subscriber? Please choose one:

- 36 months or less. Go to part 3.A.
- More than 36 months and up to 72 months. Go to part 3.B.
- More than 72 months. Go to part 3.C.

¹ Information provided in this Claim Form and for this Claim will be shared with the Claims Administrator, counsel for the Settlement Class, Cablevision, and Cablevision's counsel for the purpose of processing your claim. By submitting this Claim Form, you consent to the disclosure of video subscription account information to the Claims Administrator, Class Counsel, Cablevision, and Cablevision's counsel for verification purposes as necessary to fulfill the terms of this Settlement. The Claims Administrator will keep your Claim Form and any documentation until all obligations under the Settlement have been fulfilled.

Claim forms may be filed online at www.cableboxsettlement.com. Questions? Call 888.760.4871.

Part 3: Selection of Benefit

Choose a benefit from the list of options below. **Please choose an option from the menu corresponding to the length of your Cablevision service that you selected above. Please choose only one option.**

If you are an eligible Current Subscriber, you will automatically receive access to a free four month subscription to the Internet-delivered SundanceNow service from AMC, regardless of whether you select an option below.

Additional equipment may be required to receive one or more of the options listed below. For the additional set-top box option, equipment will be provided for free during the indicated term, but must be picked up from an Optimum Store, self-installed by the customer, and returned to an Optimum store before the free period ends (failure to return the set-top box by the expiration of the free period will result in the usual charge Cablevision applies for monthly equipment rental). Customers who elect the additional set-top box option will be charged for all set-top boxes on their account if they return a set-top box during the benefit period.

Please choose **one** option from **the selections below:**

A) If you have been a Cablevision subscriber for 36 months or less:

- A one-time credit of \$20 off your bill; **or**
- Five months of free multi-room DVR service (an estimated \$64.75 value). This option is only available to customers who do not already subscribe to multi-room DVR, but have at least one digital set-top box in their household; **or**
- One additional set-top box for 8 months (an estimated \$63.60 value). Free equipment available for pick-up only; **or**
- Three months of Starz/Encore, including Starz on Demand and Encore on Demand. This option is only available to customers who do not already subscribe to these services (an estimated \$50.70 value).

B) If you have been a Cablevision subscriber for more than 36 months and up to 72 months:

- A one-time credit of \$30 off your bill; **or**
- Eight months of free multi-room DVR service (an estimated \$103.60 value). This option is only available to customers who do not already subscribe to multi-room DVR, but have at least one digital set-top box in their household; **or**
- One additional set-top box for 13 months (an estimated \$103.35 value). Free equipment available for pick-up only; **or**
- Three months of Starz/Encore and Showtime, including Starz on Demand, Encore on Demand, and Showtime on Demand. This option is only available to customers who do not already subscribe to these services (an estimated \$101.40 value).

C) If you have been a Cablevision subscriber for more than 72 months:

- A one-time credit of \$40 off your bill; **or**
- Eleven months of free multi-room DVR service (an estimated \$142.45 value). This option is only available to customers who do not already subscribe to multi-room DVR, but have at least one digital set-top box in their household; **or**
- One additional set-top box for 18 months (an estimated \$143.10 value). Free equipment available for pick-up only; **or**
- Three months of Starz/Encore and Showtime, including Starz on Demand, Encore on Demand, and Showtime on Demand, plus four months of Optimum SportsPak (an estimated \$137.20 value). This option is only available to customers who do not already subscribe to these services.

Part 4: Sign and Date Your Claim Form

Your Claim Form must be signed.

Eligibility for benefits under the Settlement is subject to the terms and conditions contained in the governing Settlement Agreement. See the Settlement Agreement and detailed notice of the proposed Settlement, available at www.cableboxsettlement.com, or call 888.760.4871 for more information.

Benefits will be provided after Final Approval of the Settlement and after all claims are processed. Please be patient.

I affirm, under penalty of perjury, that: (1) I am a Current Subscriber of Cablevision's cable TV service and (2) to the best of my recollection, the information provided in this Claim Form is true and correct.

Print Name

Signature

Date (MM/DD/YY)

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