MGM-FOX JAMES BOND BOX SET CLASS SETTLEMENT C/O JND CLASS ACTION ADMINISTRATION P.O. BOX 91349 SEATTLE, WA 98111

IMPORTANT LEGAL MATERIALS

CLAIM FORM

MGM-FOX JAMES BOND BOX SET CLASS SETTLEMENT

If you wish to receive benefits from this Settlement, please complete, sign, and return this Form, with the necessary attachments, postmarked by **May 29, 2018**, to:

MGM Fox James Bond Box Set Class Settlement c/o JND Class Action Administration P.O. Box 91349 Seattle, WA 98111

You may also email this form and attachments by May 29, 2018, to:

info@bonddvdsettlement.com

You are eligible to receive the benefits of this Settlement if you purchased any of the following "James Bond Box Sets" in the United States: "Bond 50: Celebrating Five Decades of Bond 007" (SKU numbers M126625, M126627, M129384, M130135, M130146, M132910); "The James Bond Collection" (SKU number M133433); and "The Ultimate James Bond Collection" (SKU numbers M133435, M134821, M134670) prior to January 31, 2018 **and** you timely file this Claim Form with a valid attachment.

If you are not sure how to answer any question on this Claim Form or have questions about your rights or this Settlement, please contact the Settlement Administrator or Class Counsel at:

MGM Fox James Bond Box Set Class Settlement c/o JND Class Action Administration P.O. Box 91349 Seattle, WA 98111

> Alan J. Statman Sylvie Derrien STATMAN HARRIS & EYRICH, LLC 3700 Carew Tower 441 Vine St Cincinnati, OH 45202

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Please complete the information below.

Name:		
Address:		
City:	State:	_ Zip Code:
Email:		
Title of James Bond Box Set Purchased:		
Date of Purchase:		

If you qualify for relief under the Settlement, you will receive one digital copy of the 1967 film entitled *Casino Royale* and one digital copy of the 1983 film entitled *Never Say Never Again*. If you do not have access to view a digital copy, please explain the nature of those circumstances below. Otherwise, leave this section blank.

I have attached as proof of purchase (including date of purchase) one of the following (please mark the appropriate category):



an invoice

another document showing proof of purchase. Please describe the document attached:

I certify under penalty of perjury that the information contained on this form is true and correct.

Signature:_____ Date: _____ / _____ / _____

* Your contact information is confidential and will be shared only with the Settlement Administrator and the lawyers for the parties in the case.

QUESTIONS? CALL 1-833-380-5565 TOLL-FREE, OR VISIT WWW.BONDDVDSETTLEMENT.COM