

**SUPERIOR COURT OF THE STATE OF CALIFORNIA
FOR THE COUNTY OF LOS ANGELES
CENTRAL CIVIL WEST**

IN RE: TV WRITERS CASES

THIS DOCUMENT RELATES TO:

Edwards, et al. v. International Creative Management, Inc., BC 268846

Mintz, et al. v. Broder Kurland Webb Agency, Inc., BC 268850

CLAIM FORM

**YOU MUST POSTMARK THIS CLAIM FORM BY NO LATER
THAN DECEMBER 22, 2008 IN ORDER FOR IT TO BE CONSIDERED.**

Claims based on facts occurring before **October 22, 1996** or after **the date of final approval of the settlement** are not eligible for any award under the Settlement Fund.

This Claim Form is printed on both sides of the paper. Please complete both sides of each page and sign and date it. Incomplete or unsigned claim forms cannot be processed.

Please write legibly and in dark ink.

Section I. Identification

| | |
|----|------------------|
| 1. | Full Name: |
| 2. | Street Address: |
| 3. | City, State, ZIP |
| 4. | Telephone: |
| 5. | Email Address: |
| 6. | Date of Birth: |

Section II. Class Membership Qualification

7. I have been both a member of the Writers Guild of America (“WGA) and over the age of forty (40) years at some time since October 22, 1996.

Yes No

If “yes,” attach documentation evidencing your WGA membership and your date of birth.

8. At some time since October 22, 1996, I have been employed as an executive or talent agent by one or more of the Defendants in the Television Writers Cases as defined in Section III. N. of the Consent Decree.

Yes No

9. At some time since October 22, 1996, I have been a partner, shareholder, member or principal of a business that is a signatory to the WGA Collective Bargaining Agreement.

Yes No

Section III. Television Writing Background & Qualifications

10. I received my first WGA-covered writing employment in _____ (year) when I was _____ years old, and my last WGA-covered writing employment in _____ (year) when I was _____ years old.

11. To date, I have received _____ (number) WGA writing credits, including _____ (number) television writing credits.

12. I have received WGA television writing credits in the following genres:

Sitcom Drama MOW Western

Reality Talk Show Late Night Variety

Others (please specify) _____

Attach documentation evidencing your WGA writing credits.

13. Identify each award you received for television writing.

14. State the year and amount of income you received from television writing employment during your five highest earning years (e.g., 1995 -- \$100,000; 1993 -- \$120,000, etc.).

Attach documentation evidencing your television writing income for the years identified.

Section IV. Case Participation

15. I have participated in the TV Writers Litigation in the following ways (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Federal Court Plaintiff | <input type="checkbox"/> State Court Plaintiff |
| <input type="checkbox"/> Answered Interrogatories | <input type="checkbox"/> Produced Documents |
| <input type="checkbox"/> Gave Deposition | <input type="checkbox"/> Served on Liaison Committee |
| <input type="checkbox"/> Interviewed by Class Counsel | <input type="checkbox"/> Submitted Claim Form |
| <input type="checkbox"/> Others (please specify) _____ | |

Section V. Claim Description

16. Have you sought to be represented by INTERNATIONAL CREATIVE MANAGEMENT, INC. for the purpose of obtaining television writing employment at any time after October 22, 1996?

- Yes No

a. If you answered “yes,” please provide the following additional information:

i. List the date(s) (i.e., month/year) on which you sought representation.

ii. Describe in detail the manner in which you sought representation, including the name(s) of the agent(s) you contacted.

iii. Describe the response you received, if any.

iv. State whether you believe that you were not accepted as a client because of your age and, if so, explain the basis for your belief.

b. If you answered “no,” please provide the following information:

i. Describe in detail the reason(s) you did not seek representation (e.g., not interested in television writing employment, retired, physically unable to work, deterred, etc.).

17. Have you sought to be represented by BRODER KURLAND WEBB AGENCY, INC. for the purpose of obtaining television writing employment at any time after October 22, 1996?

Yes

No

a. If you answered "yes," please provide the following additional information:

i. List the date(s) (i.e., month/year) on which you sought representation.

ii. Describe in detail the manner in which you sought representation, including the name(s) of the agent(s) you contacted.

iii. Describe the response you received, if any.

iv. State whether you believe that you were not accepted as a client because of your age and, if so, explain the basis for your belief.

b. If you answered "no," please provide the following information:

i. Describe in detail the reason(s) you did not seek representation (e.g., not interested in television writing employment, retired, physically unable to work, deterred, etc.).

Section VI. Mitigation

18. Have you been represented by any talent agency for the purpose of obtaining television writing employment at any time after October 22, 1996?

Yes

No

If you answered "yes," please identify the talent agency(ies): _____

19. Have you actively sought television writing employment at any time after October 22, 1996?

Yes

No

If you answered "yes," please describe in detail the efforts that you have made:

20. Have you been employed at any time after October 22, 1996?

Yes

No

If you answered "yes," please provide the following additional information:

a. Employer:

b. Position:

c. Dates of employment:

d. Wages/Salary:

Section VII. Job Relief Program

21. State whether you are interested in participating in the job relief program described in the Consent Decree. If so, you will receive an additional mailing describing how to apply for the program if the program is implemented.

Yes

No

Section VIII. Verification and Waiver of Privacy Rights

I AFFIRM UNDER PENALTY OF PERJURY THAT THE FACTS I HAVE STATED IN THIS CLAIM FORM ARE TRUE TO THE BEST OF MY KNOWLEDGE.

I hereby voluntarily waive my rights to privacy and agree to allow the Claims Administrator, including its employees and agents, full and complete access to any and all confidential and personal information supplied on my Claim Form. I understand that the Claims Administrator will check the accuracy of certain facts represented on my Claim Form with information maintained by third-parties including, but not limited to, the Writers Guild of America.

I understand that I must keep the Claims Administrator informed of my current address and of any change in my home address. If I do not do so, I understand that I may not receive any award that I might otherwise be entitled to receive.

Date

Signature

**WHEN YOU HAVE COMPLETED THIS CLAIM FORM,
PUT IT IN AN ENVELOPE, PUT POSTAGE ON IT, AND MAIL IT
BY NO LATER THAN DECEMBER 22, 2008, TO:**

**SETTLEMENT ADMINISTRATOR
TV WRITERS AGE DISCRIMINATION SETTLEMENT FUND
P.O. BOX 34386
WASHINGTON, DC 20043**