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### STADIUM LITIGATION CLASS ACTION QUESTIONNAIRE

This questionnaire is for use only in preparing and prosecuting the class action lawsuit filed at Allegheny County Court of Common Pleas No. GD-01-016041. Please be as complete as possible. Kindly attach copies, not originals, of all correspondence and contracts. Attach additional pages if necessary. You have been sent this questionnaire as a result of contact with this office. If you received this questionnaire from some other source and do not desire to respond, pardon us for the inconvenience.

**Please type or print all answers.** Use additional sheets of paper or reverse side of this form, if needed.

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Facsimile: \_\_\_\_\_

e-mail: \_\_\_\_\_

SBL Holder Name (exact licensee name on the account): \_\_\_\_\_

SBL Account No. \_\_\_\_\_ SBL Application No. \_\_\_\_\_

SBL Section(s) Requested on SBL Application: 1st Choice \_\_\_\_\_, 2nd Choice \_\_\_\_\_, 3rd Choice \_\_\_\_\_

SBL Section Assigned To You As Indicated On Your SBL Agreement: A \_\_, B \_\_, C \_\_, Club I \_\_  
D \_\_, E \_\_, F \_\_, Club II \_\_

SBL Section Where You Believe To Actually Be Located: \_\_\_\_\_ No. of Seats: \_\_\_\_\_

Actual Seat Location(s): section no(s): \_\_\_\_\_, row (s): \_\_\_\_\_, seat no(s): \_\_\_\_\_

Prior Season Ticket Holder? Yes \_\_\_\_\_ No \_\_\_\_\_ Since? \_\_\_\_\_

Years as Season Ticket Holder: \_\_\_\_\_ Previous Account No. \_\_\_\_\_

Previous Seat Location(s): section no(s): \_\_\_\_\_, row(s): \_\_\_\_\_, seat no(s): \_\_\_\_\_

Total Amount Paid for SBL: \_\_\_\_\_ Amount Overcharged: \_\_\_\_\_ (if known)

Comments and explanation of claim:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature