

# Exhibit D

Hasson v. Comcast Cable Communications, LLC  
c/o Kroll Settlement Administration LLC  
P.O. Box XXXX  
New York, NY 10150-XXXX

FIRST-CLASS MAIL  
U.S. POSTAGE PAID  
CITY, ST  
PERMIT NO. XXXX

Electronic Service Requested

LEGAL NOTICE

**YOU ARE ELIGIBLE FOR  
BENEFITS FROM A CLASS  
ACTION SETTLEMENT  
RELATED TO THE  
OCTOBER 2023  
COMCAST DATA BREACH.**

**[www.\[website\].com](http://www.[website].com)**

<<Barcode>>

SETTLEMENT CLASS MEMBER ID: <<Refnum>>

ENROLLMENT CODE: <<ReFnum>>

**Postal Service: Please do not mark barcode**

IF APPLICABLE: <<Parent or Guardian of:>>

<<FirstName>> <<LastName>>

<<Company>>

<<Address>>

<<Address2>>

<<City>>, <<ST>> <<Zip>>-<<zip4>>

<<Country>>

**What is this about?** On December 18, 2023, Comcast announced that it had been the victim of a third-party, criminal cyberattack that occurred in October 2023 in which the attackers were able to gain unauthorized access to customers' personal information ("Data Breach"). Among other things, the lawsuit claims that Comcast did not adequately protect personal data, had inadequate security measures, violated various laws, and failed to properly notify affected customers. Comcast denies that it engaged in any wrongdoing or violated any law and denies liability.

**Who is Included?** Defendants' records indicate you are included as a Settlement Class Member. The Settlement Class consists of all persons residing in the United States and its territories who were sent individual notification of the Data Breach by Comcast in December 2023.

**What does the Settlement provide?** Defendant will pay \$117,500,000 into a Settlement Fund. After deducting Notice and Administrative Costs, Attorneys' Fees and Expenses, and Service Awards, the Settlement Fund will be used to provide reimbursement for Out-of-Pocket Losses and Lost Time (up to \$10,000), Alternative Cash Payments (up to \$50), and Identity Defense Services and Restoration Services to Settlement Class Members. Settlement Class Members are automatically eligible to enroll in Identity Defense Services and Restoration Services. Your individual enrollment code has been on the front of this postcard. To pre-enroll in this service, visit <<Enrollment Link>> and enter your activation code. Once the settlement is final, you will be sent an email from CyEx with a link notifying you to complete your enrollment and activate the service.

**How do I get a Settlement payment?** You must submit a Claim Form online at [www.\[website\].com](http://www.[website].com) or print one from the website and mail it to the address on the form. Claim Forms must be postmarked or submitted online by **Month XX, 2026**. If you are making a claim for the Alternative Cash Payment, simply complete and mail the attached Claim Form **postmarked by Month XX, 2026**.

**What are my other options?** If you do nothing, you will not receive a payment, you will remain in the Settlement Class and give up your rights to sue the Defendant and related parties for any claim released by this Settlement. If you do not want any Settlement Benefits and you want to keep your right to sue the Defendant for these claims, you must submit a Request for Exclusion. If you do not request exclusion you can object to the Settlement. If you object, you still receive Settlement Benefits. The deadline to object or request exclusion is **Month XX, 2026**.

The Court will hold the Final Approval Hearing on **Month XX, 2026**, at **XX:00 x.m. ET**, to consider whether to approve: the Settlement; Class Counsel's request for Fees and Expenses of up to one-third of the Settlement Fund, and \$5,000 Service Award payments to each Settlement Class Representative. You or your attorney may attend the hearing, at your own cost, but you do not have to. You may also request to speak at the Final Approval Hearing but may only do so with the Court's permission.

For more information, including the Settlement Agreement, Claim Form and other documents, or to change or update your contact information, visit [www.\[website\].com](http://www.[website].com), call toll-free **(XXX) XXX-XXXX**, or write to *Hasson v. Comcast Cable Communications LLC*, c/o Kroll Settlement Administration LLC, P.O. Box **XXXX**, New York, NY 10150-**XXXX**.

Postage  
Required

***Hasson v. Comcast Cable Communications LLC***

c/o Kroll Settlement Administration LLC

P.O. Box XXXX

New York, NY 10150-XXXX

&lt;&lt;Barcode&gt;&gt;

Class Member ID: &lt;&lt;Refnum&gt;&gt;

&lt;&lt;Parent or Guardian of:&gt;&gt;

&lt;&lt;firstname&gt;&gt; &lt;&lt;lastname&gt;&gt;

**Hasson v. Comcast Cable Communications, LLC Claim Form**

Complete this Claim Form, tear at perforation above, and return by U.S. Mail. Alternatively, you may submit a claim online or download a Claim Form from [www.website.com](http://www.website.com). Claim Forms must be submitted online or postmarked no later than **Month XX, 2026**.

**To receive an electronic payment or to make a claim for Out-of-Pocket Losses and/or Lost Time, you must submit a Claim Form online.**

Class Member ID: &lt;&lt;Refnum&gt;&gt;

&lt;&lt;FirstName&gt;&gt; &lt;&lt;LastName&gt;&gt;

&lt;&lt;Address1&gt;&gt; &lt;&lt;Address2&gt;&gt;

&lt;&lt;City&gt;&gt;, &lt;&lt;State&gt;&gt; &lt;&lt;Zip&gt;&gt;

If different from the preprinted data, please print your correct information.

\_\_\_\_\_  
Address\_\_\_\_\_  
City\_\_\_\_\_  
State\_\_\_\_\_  
Zip Code**Additional Contact Details:**

Email Address: \_\_\_\_\_ Telephone Number (optional): (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Check the box below if you wish to receive an Alternative Cash Payment. If you select this benefit, **you may not claim compensation for Out-of-Pocket Losses or Lost Time**. To file a claim for Out-of-Pocket Losses and/or Lost Time, please visit [www.website.com](http://www.website.com) or scan the QR code above.

**Alternative Cash Payment:** Yes, I would like to receive an alternative cash payment of up to \$50.

I swear and affirm under the laws of my state that the information that I have supplied is true and correct to the best of my recollection, and that this form was executed on the date set forth below.

Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_