

ACTION REQUIRED

Please follow the instructions below. Refer to instructional email for additional information regarding required documentation.

STEP 1: GATHER ALL YOUR DOCUMENTATION TO PROVE ELIGIBILITY

STEP 2: REMOVE AND COMPLETE THE REMITTANCE FORM BELOW

STEP 3:

MAIL YOUR FORM AND REQUIRED DOCUMENTATION TO:

Spectrum Internet Assist Program, PO Box 200, Charleston, IL 61920-9998

OR SCAN AND EMAIL YOUR FORM AND REQUIRED DOCUMENTATION TO:

MAILFORSIA@charter.com

You must include the **TASK ID** in the subject line of your email.

Please ensure that all required paperwork is enclosed and that all documents are official, legible and complete.

If you have any questions, **call 1-844-525-1574**.

SPECTRUM INTERNET ASSIST REMITTANCE FORM

Please write legibly and complete in its entirety.

Date

First name

Middle name

Last name

Home address

City

State

ZIP code

Email address

Phone number

Spectrum ▶