 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>DOT Auto Safety Hotline Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 100148</p>	
<p>Date Received APR 08 2011 14-DEC-2010</p>		<p>Repository <input type="checkbox"/></p> <p>Reference No. 10370666</p>			
<p>OWNER INFORMATION (Type or Print)</p>					
<p>Name [REDACTED]</p>		<p>Daytime Telephone Number [REDACTED]</p>		<p>E-mail Address [REDACTED]</p>	
<p>Address [REDACTED]</p>		<p>Evening Telephone Number [REDACTED]</p>		<p>[REDACTED]</p>	
<p>City CHICAGO</p>	<p>State IL</p>	<p>Zip Code [REDACTED]</p>		<p>[REDACTED]</p>	
<p>The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).</p>					
<p>VEHICLE INFORMATION</p>					
<p>17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JTDBT903994 [REDACTED]</p>		<p>Make TOYOTA</p>	<p>Model YARIS</p>	<p>Model Year 2009</p>	
<p>Date Purchased 08-11-09</p>	<p>Dealer's Name and Telephone Number Chicago Northside Toyota Scion (773) 728-5000</p>		<p>Engine: No: Cylinders 4</p>	<p>Fuel Type:</p>	
<p>Original Owner <input checked="" type="checkbox"/></p>	<p>Dealer's City Chicago</p>	<p>State IL</p>	<p>Zip Code 606</p>	<p>Incident Date(s) 10-DEC-2010</p>	
<p>Transmission Type <input checked="" type="checkbox"/></p>	<p><input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control</p>	<p>Powertrain</p>	<p>Multiple Failure: Yes - Battery not working on 03-04-11, and on 03-05-11.</p>		<p>Incident Date(s) 10-DEC-2010</p>
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>					
<p>Vehicle Component Code: 180000 VEHICLE SPEED CONTROL</p>			<p>Failure Mileage 2200 21700</p>	<p>Failure Speed 5</p>	
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</p>					
<p>Tire Make</p>		<p>Tire Model (Name or Number)</p>		<p>Tire Size (Example P215/65R15)</p>	
<p>DOT No. (Example: DOTM9ABC036)</p>		<p><input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair</p>		<p>Failure Location:</p>	
<p>Tire Component Code</p>				<p>Tire Failure Type:</p>	
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</p>					
<p>Make:</p>		<p>Date Manufactured:</p>		<p>Model No./Name:</p>	
<p>Seat Type:</p>		<p>Installation System:</p>		<p>Child Seat Component Code:</p>	
<p>Failed Part:</p>		<p>Child Seat Component Code:</p>			
<p>APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</p>					
<p>Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Number of Persons Injured 1</p>	<p>Number of Deaths</p>	<p>Reported to Police Y</p>	
<p>Narrative Description of Incident(S), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).</p>					
<p>TL* THE CONTACT OWNS A 2009 TOYOTA YARIS. THE CONTACT WAS DRIVING 5 MPH AND ATTEMPTING TO PARK WHEN THE VEHICLE ABNORMALLY ACCELERATED AND CRASHED INTO A WALL. THE AIR BAGS DID NOT DEPLOY AND THE CONTACT SUSTAINED INJURIES TO THE KNEES AND HANDS. A POLICE REPORT WAS AVAILABLE. THE CONTACT CALLED THE MANUFACTURER AND WAS ADVISED THAT THERE WERE NO RECALLS FOR THE VEHICLE. NO FURTHER ASSISTANCE WAS OFFERED. THE CONTACT STATED THAT HE BELIEVED THE VEHICLE TO BE HIGHLY UNSAFE TO DRIVE AND WOULD NO LONGER DRIVE THE VEHICLE UNTIL REPAIRED. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS 2,200. ^{Battery} Battery not working on 03-04-11; not working on 03-05-11 either. See copies from Triple A, from 03-04-11, and from Wells Automotive Service on 03-05-11. Please see attached complaint sent to National Center for Dispute Settlement with narrative of incident & crash information. See response dated 03-02-11, from NEDS. See also response from Toyota Corporate Offices.</p>					
<p>Attach, if available: Police/Fire Department Report, Photos, and Repair Invoice.</p>			<p>ATTACH ADDITIONAL SHEETS IF NECESSARY</p>		
<p>The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.</p>					

Grossinger

CITY TOYOTA

SCION

1561 N. Fremont St.
Chicago, IL 60642
(312) 707-9500
www.grossinger.com

Customer information form including fields for CUSTOMER NO. (115095), ADVISOR (JAMES COUCH), TAG NO. (2968), INVOICE DATE (03/25/11), INVOICE NO. (TOCS216361), LABOR RATE, LICENSE NO., MILEAGE (2,702), COLOR (SILVER STRE), STOCK NO., YEAR / MAKE / MODEL (09/TOYOTA/YARIS/4DR SEDAN AUTO.), DELIVERY DATE (08/05/09), DELIVERY MILES, VEHICLE I.D. NO. (JTDBT903994), SELLING DEALER NO., PRODUCTION DATE, F.T.E. NO., P.O. NO., R.O. DATE (03/24/11), RESIDENCE PHONE, BUSINESS PHONE, COMMENTS, and MO: 2703.

LABOR & PARTS
J# 1 26TOZ ENGINE ELECTRICAL TECH(S):1014 WARRANTY
CST STATES CAR WILL NOT START AT TIMES-INTERMITTENT
CONCERN-WILL NOT AFTER JUMPSTARTING
WEAK CELL
REPLACED BATTERY
PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----UNIT PRICE-----
JOB # 1 1 00544-35060-550 TRUESTART BAT WARRANTY 0.00
JOB # 1 TOTAL PARTS 0.00
JOB # 1 TOTAL LABOR & PARTS 0.00
J# 2 35TOZ WHEELS AND TIRES TECH(S):1014 INTERNAL
CST STATES TIRES SEEM TO BE LOSING AIR-INSPECT
AND ADVISE
SET TIRE PSI
PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----UNIT PRICE-----
JOB # 2 TOTAL PARTS 0.00
JOB # 2 TOTAL LABOR & PARTS 0.00
COMMENTS-----
TOW IN
1014 8:25 3/25
TOTALS-----
*****THANK YOU FOR BEING OUR CUSTOMER!*****
THANK YOU FOR SERVICING YOUR VEHICLE TODAY WITH GROSSINGER
TOYOTA. WE STRIVE FOR EXCELLENCE ON EVERY SERVICE VISIT SO
YOUR FEEDBACK IS VERY IMPORTANT!!
IF WE DID NOT GIVE YOU EXCELLENT SERVICE PLEASE ASK FOR:
OUR FIXED OPERATIONS DIRECTOR, TIM MCKAY
AT 312-707-9500 OR EMAIL AT tmckay@grossinger.com
OR PLEASE CONTACT OUR CUSTOMER RELATIONS MANAGER
SALLY FREEMAN AT 312-707-9500 OR E-MAIL AT
s.freeman@grossinger.com
*****WE APPRECIATE YOUR BUSINESS!*****
TOTAL LABOR.... 0.00
TOTAL PARTS.... 0.00
TOTAL SUBLET... 0.00
TOTAL G.O.G.... 0.00
TOTAL MISC CHG. 0.00
TOTAL MISC DISC 0.00
TOTAL TAX..... 0.00
TOTAL INVOICE \$ 0.00

TOYOTA logo
SCION logo
SATISFYING CUSTOMERS
PARTS & SERVICE
TOYOTA every day

CUSTOMER SIGNATURE
Thank You! We Appreciate Your Business
CUSTOMER COPY [END OF INVOICE] 12:31pm

The Factory Warranty Constitutes All Of The Warranties With Respect To The Sale Of This Item/Items. The Seller Hereby Expressly Disclaims All Warranties, Either Express Or Implied, Including Any Implied Warranty Of Merchantability Or Fitness For A Particular Purpose, And The Seller Neither Assumes Nor Authorizes Any Other Person To Assume For It Any Liability In Connection With The Sale Of This Item/Items.
Please see reverse side for important warranty information

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK

PERSONAL MONEY ORDER

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK

citibank

Citibank, N.A.

62-20
311

FC#00046 FA# 004

\$5.00 ONL

034-02 Ck. Ser.# 200137193

DATE 03 / 24 / 11

*****500.00*****

PAY *****FIVE HUNDRED DOLLARS*****

TO THE ORDER OF

Richards Body Shop.



NOT GOOD FOR MORE THAN \$1,000.00

MEMO

Citibank, N.A. One Penn's Way
New Castle, DE 19720

(Deductible)

PURCHASER'S SIGNATURE

ADDRESS

Chicago, IL

[Redacted area]

GEICO
GEICO.COM
VISIT US @ GEICO.COM
1407 S. BIRCH DRIVE.
MT PROSPECT, IL 60056
(847)456-3734 Fax: (847)440-9095

ESTIMATE OF RECORD

Written By: THOMAS STOLL 03/07/2011 11:39 AM
Adjuster: CAXN FCC:

Insured: [REDACTED] Claim [REDACTED]
Owner: [REDACTED] Policy # [REDACTED]
Address: [REDACTED] Date of Loss: 03/05/2011 at 12:00 AM
CHICAGO, IL [REDACTED] Type of Loss: Collision
Evening: [REDACTED] Point of Impact: 1. Right Front

Inspect RICHARDS BODY SHOP 6041 WEST LAW OTHER
Location: E CHICAGO IL 60625 773-588-3301
chicago, IL 60625

Repair RICHARDS Business: (773)588-3301
Facility: 3041 lawrence 10 Days to Repair
chicago, IL 60625 License #

2009 TOYO YARIS 4-1 5L-FI 4D SED SILVER / A Int:
VIN: JTDDBT903994 [REDACTED] Lic: [REDACTED] IL Prod Date: Odometer: 2700

- Condition: Good
- Air Conditioning Tilt Wheel Intermittent Wipers
- Console/Storage Clear Coat Paint Power Steering
- Power Brakes Power Trunk/Gate Release Anti-Lock Brakes (4)
- Driver Air Bag Passenger Air Bag Head/Curtain Air Bags
- Front Side Impact Air Bag Cloth Seats Bucket Seats
- 5 Speed Transmission Overdrive Deluxe Wheel Covers

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		HOOD				
2		Blnd Hood sedan (HSS)				0.9
3		FRONT BUMPER & GRILLE				
4	R&I	R&I bumper cover			1.1	
5		FRONT LAMPS				
6	R&I	LT R&I headlamp assy			0.3	
N 7**	Repl	RECOND RT Headlamp assy base	1	141.25	0.5	
8		Aim headlamps			0.5	
9		FENDER				
10	Repl	LT Bracket fender mount	1	30.75	0.3	0.2
11		Add for Clear Coat				0.1
12**	Repl	Qual Repl Parts CAPA LT Fender sedan (HSS)	1	133.00	1.2	1.8
13		Add for Clear Coat				0.7
14		Add for Edging				0.5

ESTIMATE OF RECORD

2009 TOYO YARIS 4-1.5L-FI 4D SED SILVER / A Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
15	Repl	LT Protector sedan	1	33.95	0.2	
N 16*	Rpr	LT Fender liner sedan			<u>0.5</u>	
17	Repl	LT Extension	1	15.46		
18	Repl	LT Extension fender bracket sedan	1	17.52	0.1	0.2
19		Add for Clear Coat				0.1
20	Repl	LT Bracket sedan	1	15.86	0.5	0.4
21		FRONT DOOR				
22*	Repl	LKQ LT door assy; sedan +25%	1	590.00	1.7	3.2
23		Overlap Major Adj. Panel				-0.4
24		Add for Clear Coat				0.6
25	R&I	LT Door w'strip			0.5	
26	R&I	LT Belt molding			0.2	
27	R&I	LT Mirror assy w/o power			0.4	
28	R&I	LT Handle, outside black			0.4	
29	R&I	LT R&I trim panel			0.5	
30*	R&I	LT Water shield			<u>0.1</u>	
31	Repl	LT Black out tape	1	25.26	0.2	
32	R&I	LT Moveable glass Toyota			0.6	
33*	R&I	LT Run w'strip			<u>0.2</u>	
34*	R&I	LT Run channel front			<u>0.2</u>	
35*	R&I	LT Run channel rear			<u>0.2</u>	
36	R&I	LT Lock assy w/o power			0.4	
37	R&I	LT Cyl & keys			0.1	
38	R&I	LT Upper hinge			0.3	
39	R&I	LT Lower hinge			0.3	
40	R&I	LT Door check			0.3	
41		REAR DOOR				
42	Blnd	LT Outer panel (HSS)				1.1
43	R&I	LT Belt molding			0.2	
44	R&I	LT Handle, outside black			0.4	
45	R&I	LT R&I trim panel			0.5	
46		PILLARS, ROCKER & FLOOR				
47*	Rpr	LT Hinge pillar w/o S model (HSS)			s <u>5.0</u>	1.5
48		Add for Clear Coat				0.3
49#	Repl	cover car complete	1			0.2
50#	Repl	corrosion protection	1	10.00 T		
51#	Repl	corrosion protection	1		0.2	
52#	Repl	FLEX-SHOP SYSTEM USES FLEX	1	8.00 T		
53#	Rpr	wet sand and buff adjustment as a measure of quality			1.0	
54#	Rpr	set up			1.5	
N 55#	Rpr	pull unibody			3.0 F	
56*	Rpr	<u>LT rocker panel</u>			s <u>3.0</u>	1.0
57		Overlap Major Adj. Panel				-0.4
58		Add for Clear Coat				0.1

03/07/2011 at 11:40 AM
60546

0091020880101215-01
lapua3jl

ESTIMATE OF RECORD

2009 TOYO YARIS 4-1.5L-FI 4D SED SILVER / A Int:

NO.	OP.	DESCRIPTION	QTY	EXT.	PRICE	LABOR	PAINT
59		OTHER CHARGES					
60#	E.P.C.		1		3.00		
61#	Towing		1		195.00		
Subtotals ==>					1219.05	26.6	12.1

Line 7 : cover slid over and cracked tab on lamp
Line 16 : heat and reshape
Line 22 : Damage: 1.0 Credit Card; Suppliers Part Description: Door, Lt Ft
5P1,WO/MIRROR,SDN L. (US MKT) ELEC WINDOW
Line 55 : pull hinge post 2.0 and lt rocker 1.0

Estimate Notes:

Place of Loss: PH VEH WAS JUMPED OFF AND TOW COMPANY WAS DRIVING V
EH OUT OF, PAY CD: 2 DI: DM: 63 CO: 01 NI: 2 LDC: 511 SYM: CO
L TOWED: YINST: AIRBAG INFLT: N LH: INC
PT DT: RR: 0900 MBI: UMPD:;

sysm gen chk to shop ok'd by ms.

Prior Damage Notes:

Prior Unrelated Damage Notes:

Front Bumper: None
LT Fender: None
Hood: None
Lt Front Door: None
Lt Rear Door: None
Roof: None
Lt Quarter Panel: None
Decklid/Tailgate: None
Rear Bumper: None
Interior: None
Front Lamps: None
Rt Fender: None
Glass: None
Rt Front Door: None
Rt Rear Door: None
Sunroof: None
Rt Quarter Panel: None
Rear Lamps: None
Back Glass: None
Tires: None

ESTIMATE OF RECORD

2009 TOYO YARIS 4-1.5L-FI 4D SED SILVER / A Int:

Parts			1003.05
Body Labor	23.6 hrs @ \$ 46.00/hr		1085.60
Paint Labor	12.1 hrs @ \$ 46.00/hr		556.60
Frame Labor	3.0 hrs @ \$ 55.00/hr		165.00
Paint Supplies	12.1 hrs @ \$ 25.00/hr		302.50
Sublet/Misc.			18.00
Other Charges			198.00

SUBTOTAL			\$ 3328.75
Sales Tax	\$ 1326.55 @ 9.7500%		129.34

TOTAL COST OF REPAIRS			\$ 3458.09
ADJUSTMENTS:			
Deductible			500.00

TOTAL ADJUSTMENTS			\$ 500.00
NET COST OF REPAIRS			\$ 2958.09

THIS IS NOT AN AUTHORIZATION TO REPAIR

NO SUPPLEMENT WILL BE HONORED UNLESS AUTHORIZED BY GEICO DIRECT

NOTICE: NEW HIGH STRENGTH STEELS MAY REQUIRE THE USE OF A MIG WELDER FOR PROPER REPAIRS. NEW DESIGNS REQUIRE MEASUREMENT TO PROPERLY ALIGN THE VEHICLE. MAKE SURE YOUR SHOP HAS THE RIGHT EQUIPMENT TO REPAIR YOUR VEHICLE.

ILLINOIS LAW REQUIRES THAT VEHICLE REPAIRERS MUST BE LICENSED IN ACCORDANCE WITH SECTION 5-301 OF THE ILLINOIS VEHICLE CODE.

This estimate has been prepared based on the use of crash parts supplied by a source other than the manufacturer of your motor vehicle. Warranties applicable to these replacement parts are provided by the manufacturer or distributor of these parts rather than the manufacturer of your vehicle.

ESTIMATE OF RECORD

2009 TOYO YARIS 4-1.5L-FI 4D SED SILVER / A Int:

GEICO DIRECT
ALTERNATE PARTS DISCLAIMER

IF QUALITY REPLACEMENT PART (QRP) APPEARS ON THIS ESTIMATE, IT INDICATES THAT THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. WARRANTIES, IF ANY, APPLICABLE TO THESE REPLACEMENT CRASH PARTS ARE PROVIDED BY THE PART MANUFACTURER OR DISTRIBUTOR RATHER THAN BY THE MANUFACTURER OF YOUR VEHICLE.

*** IN ADDITION TO ANY SUCH WARRANTIES, GEICO PROVIDES THE FOLLOWING:

**** OWNER LIMITED WARRANTY ****

WE WARRANT THAT ALL QUALITY REPLACEMENT BODY PARTS (PARTS NOT MANUFACTURED BY THE MANUFACTURER) IDENTIFIED ON YOUR ESTIMATE, ARE FREE OF DEFECTS IN MATERIAL AND WORKMANSHIP AND MEET GENERALLY ACCEPTED INDUSTRY STANDARDS. THIS PARTS AND LABOR WARRANTY WILL BE IN EFFECT FOR AS LONG AS YOU OWN THE VEHICLE DESCRIBED IN THE ESTIMATE. THIS WARRANTY COVERS THE COST OF THE PART, LABOR TO INSTALL, AND INCIDENTALS SUCH AS PAINT AND MATERIALS AND IS SPECIFICALLY LIMITED TO THOSE ITEMS. THIS WARRANTY DOES NOT COVER LOSS OR DAMAGE THAT IS UNRELATED TO DEFECTS IN THE QUALITY REPLACEMENT PARTS. THIS IS NOT TRANSFERABLE. IF ANY QUALITY REPLACEMENT PARTS ARE DEFECTIVE IN EITHER MATERIAL OR WORKMANSHIP, CONTACT YOUR LOCAL GEICO REPRESENTATIVE.

Recycled Part Costs based on information provided by Car-Part.com. For assistance, call CCC at 800-637-8511.

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide ARM8327, CCC Data Date 02/14/2011, and the parts selected are OEM-parts manufactured by the vehicles Original Equipment Manufacturer. OEM parts are available at OE/Vehicle dealerships. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships. OPT OEM or ALT OEM parts may reflect some specific, special, or unique pricing or discount. OPT OEM or ALT OEM parts may include "Blemished" parts provided by OEM's through OEM vehicle dealerships. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor information provided by MOTOR may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. Non-Original Equipment Manufacturer aftermarket parts are described as AM, Qual Repl Parts or Comp Repl Parts which stands for Competitive Replacement Parts. Used parts are described as LKQ, Qual Recy Parts, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries. Some 2010 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The Pathways estimator has a complete list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

CCC Pathways - A product of CCC Information Services Inc.

1578

CHECK REFUND REQUEST

TO: BUSINESS MANAGER

CLOSED BY: GANTNER IV*GEORGE E*

REFUND TO:

RENTER:

[REDACTED]

[REDACTED]

CHICAGO IL [REDACTED]
US UNITED STATES OF AMERICA

CHICAGO IL [REDACTED]

TOTAL CHARGES 592.43

LESS DEPOSITS .00 (0 DEPOSITS)

LESS AMOUNT BILLED 592.43 GEICO-MIDWEST REGION**

REFUND AMOUNT 100.00 TO CUSTOMER 999999 FOR TICKET 593860

PAYMENT HISTORY

BR	DATE	CUST NO.	PAID BY	AUTH NO.	AMOUNT	EMPLOYEE NO.
78	03/07/2011	999999	CHECK		100.00	388GJ

REASON FOR REFUND:
DEPOSIT REFUND

SPECIAL INSTRUCTIONS:

ENTERPRISE LEASING COMPANY OF CHICAGO, 1842 N MILWAUKEE AVE, CHICAGO, IL 606474411 (773) 862-4700

RENTAL AGREEMENT REF#
593860 952C73

SUMMARY OF CHARGES

RENTER
[REDACTED]
DATE & TIME OUT
03/07/2011 01:26 PM
DATE & TIME IN
03/26/2011 11:25 AM

BILLING CYCLE
CALENDAR DAY

VEH #1 2010 FORD FOCUS SE
VIN# 1FAHP3FN5AW [REDACTED]
LIC# [REDACTED]
MILES DRIVEN 620

BILL TO ACCOUNT
GEICO-MIDWEST REGION**
ATTN: CAYN-STOLL, TOM
1 GEICO CENTER
MACON, GA 31295

CLAIM INFO
[REDACTED]
INSURED: [REDACTED]
LOSS DATE: 03/05/2011
INSURED
SHOP: RICHARD'S AUTO BODY -
1578**
PHONE: (312) 829-0988
ATTN: RICH

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	03/07 - 03/26	20	DAY	\$23.75	\$475.00
REFUELING CHARGE	03/07 - 03/26				\$0.00
YOUNG DRIVER FEE (18-99)	03/07 - 03/26			WAIVED	
				Subtotal:	\$475.00

Taxes & Surcharges					
AUTO RENTAL TAX	03/07 - 03/26			12%	\$58.97
CHICAGO TRANSACTION TAX	03/07 - 03/26			8%	\$39.37
IL VEHICLE LICENSE COST	03/07 - 03/26	20	DAY	\$0.82	\$16.40
RECOV FEE					
LESSER FEE	03/07 - 03/26	1	RENTAL	\$2.75	\$2.75
				Total Charges:	\$592.43

Bill-To / Deposits					
GEICO-MIDWEST REGION**					
TIME & DISTANCE	03/07 - 03/26	20	DAY		
REFUELING CHARGE	03/07 - 03/26				
AUTO RENTAL TAX	03/07 - 03/26	1	PERCENT	12%	
CHICAGO TRANSACTION TAX	03/07 - 03/26	1	PERCENT	8%	
IL VEHICLE LICENSE COST	03/07 - 03/26	20	DAY		
RECOV FEE					
LESSER FEE	03/07 - 03/26	1	RENTAL		
				Subtotal:	(\$592.43)

Total Amount Due \$0.00

PAYMENT INFORMATION
AMOUNT PAID TYPE CREDIT CARD NUMBER

ALL ABOUT YOUR
**REGISTERED
WRITTEN WARRANTY**

Richard's
BODY SHOP
The Professional's Automotive Rebuilders

3041 W. LAWRENCE
CHICAGO, ILLINOIS 60625

PHONE: (773) 588-3301
FAX: (773) 588-2335

Your repair carries a Lifetime Warranty.
Your vehicle is automatically covered the
moment you take delivery and is in effect
for as long as you own the vehicle.

To provide you with added protection your
repair is registered with the Automotive
Customer Relations Bureau (ACRB), a
consumer protection company. A week or
two may be required for processing. Once
registration is complete your warranty will
be mailed directly to you. This slight
processing delay does not limit or affect
your coverage in any way.

Should you experience any problem
before you receive your registered
warranty just give us a call.

**PROTECTING YOUR ———
—AUTOMOTIVE INVESTMENT**

Use black ink

Illinois Department of Transportation
Crash Records Section
1340 North 9th Street
Springfield, Illinois 62766-0001

Copies of police crash reports may be obtained by sending \$5 per copy (check or money order) made payable to "Department of Finance - City of Chicago" and mailed to:

Chicago Police Department
Records Inquiry & Customer Service Section - Unit 163
3510 South Michigan Avenue - Room 1027 SE
Chicago, IL 60653-1020



C100174901

COMPLETE BOTH SIDES OF THIS FORM

ILLINOIS MOTORIST REPORT

INVESTIGATING AGENCY CHICAGO POLICE DEPARTMENT	37 DAMAGE TO ANY ONE PERSON'S VEHICLE / PROPERTY <input type="checkbox"/> \$500 OR LESS <input type="checkbox"/> \$501 - \$1,500 <input checked="" type="checkbox"/> OVER \$1,500	TYPE OF REPORT <input checked="" type="checkbox"/> ON SCENE <input type="checkbox"/> NOT ON SCENE (DESK REPORT) <input type="checkbox"/> AMENDED	31 <input type="checkbox"/> A No Injury / Drive Away <input checked="" type="checkbox"/> B Injury and / or Tow Due To Crash	32 33 R.D. NUMBER HT 189876
--	--	---	---	-----------------------------------

34 ADDRESS NO. 525	(CIRCLE) HIGHWAY or STREET NAME N E S W W HAWTHORNE	CITY CHICAGO	INTERSECTION RELATED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	35 DATE OF CRASH 03/05/11 mo day yr	TIME 3:30 <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	BEAT OF OCCURRENCE 2331
(CIRCLE) FT / MI 10	(CIRCLE) N E S W W	COUNTY COOK	PRIVATE PROPERTY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	36 CIRCLE DAY OF WEEK SU MO TU WE TH FR SA SA	38 NUMBER MOTOR VEHICLES INVLD 2	PHOTO(S) TAKEN <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
AT INTERSECTION WITH		HIT & RUN <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		STATEMENT(S) TAKEN <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

NAME <input checked="" type="checkbox"/> DRIVER <input type="checkbox"/> PARKED - NO DRIVER <input type="checkbox"/> PED <input type="checkbox"/> PEDAL <input type="checkbox"/> EQUUS <input type="checkbox"/> NMV <input type="checkbox"/> NCV 39 (LAST, FIRST, MI) [REDACTED]	DATE OF BIRTH mo day yr [REDACTED]	MAKE FORD	MODEL CARRALL	YEAR 99	CIRCLE NUMBER(S) FOR DAMAGED AREA(S) 00 - NONE 10 - UNDER CARRIAGE 11 - TOTAL (ALL AREAS) 12 - OTHER 99 - UNKNOWN POINT OF FIRST CONTACT 2	FRONT 6 5 4 7 9 3 8 1 2 REAR	TOWED DUE TO CRASH <input type="checkbox"/> Y <input checked="" type="checkbox"/> N FIRE <input type="checkbox"/> HAZMAT SPILL COM VEH <input type="checkbox"/> * <input checked="" type="checkbox"/> * * IF YES SEE BELOW
STREET ADDRESS [REDACTED]	SEX <input type="checkbox"/> SAFT <input type="checkbox"/> AIR 25 26 INJURY 27 EJECT 28	PLATE NO. 1FM2434XXXU	STATE IL	YEAR 10	INSURANCE CO. UNIK		
CITY CHICAGO	STATE IL	ZIP [REDACTED]	TELEPHONE [REDACTED]	DRIVER LICENSE NO. UNIK	STATE IL	CLASS [REDACTED]	OWNER ADDRESS (STREET, CITY, STATE, ZIP) SAME
TELEPHONE [REDACTED]	DRIVER LICENSE NO. UNIK	STATE IL	CLASS [REDACTED]	INSURANCE CO. UNIK	TELEPHONE [REDACTED]	POLICY NO. [REDACTED]	
TAKEN TO [REDACTED]	EMS AGENCY [REDACTED]	OWNER ADDRESS (STREET, CITY, STATE, ZIP) SAME		TELEPHONE [REDACTED]	POLICY NO. [REDACTED]		

NAME <input checked="" type="checkbox"/> DRIVER <input type="checkbox"/> PARKED - NO DRIVER <input type="checkbox"/> PED <input type="checkbox"/> PEDAL <input type="checkbox"/> EQUUS <input type="checkbox"/> NMV 39 (LAST, FIRST, MI) [REDACTED]	DATE OF BIRTH mo day yr [REDACTED]	MAKE TOYOTA	MODEL YARIS	YEAR 09	CIRCLE NUMBER(S) FOR DAMAGED AREA(S) 00 - NONE 10 - UNDER CARRIAGE 11 - TOTAL (ALL AREAS) 12 - OTHER 99 - UNKNOWN POINT OF FIRST CONTACT 7	FRONT 6 5 4 7 9 3 8 1 2 REAR	TOWED DUE TO CRASH <input type="checkbox"/> Y <input checked="" type="checkbox"/> N FIRE <input type="checkbox"/> HAZMAT SPILL COM VEH <input type="checkbox"/> * <input checked="" type="checkbox"/> * * IF YES SEE BELOW
STREET ADDRESS [REDACTED]	SEX <input type="checkbox"/> SAFT <input type="checkbox"/> AIR 25 26 INJURY 27 EJECT 28	PLATE NO. JTD BT903991	STATE IL	YEAR 11	INSURANCE CO. GEICO		
CITY CHICAGO	STATE IL	ZIP [REDACTED]	TELEPHONE [REDACTED]	DRIVER LICENSE NO. [REDACTED]	STATE IL	CLASS C	VEHICLE OWNER (LAST, FIRST M.I.) [REDACTED]
TELEPHONE [REDACTED]	DRIVER LICENSE NO. [REDACTED]	STATE IL	CLASS C	INSURANCE CO. GEICO	TELEPHONE [REDACTED]	POLICY NO. [REDACTED]	
TAKEN TO D N A	EMS AGENCY [REDACTED]	OWNER ADDRESS (STREET, CITY, STATE, ZIP) [REDACTED]		TELEPHONE [REDACTED]	POLICY NO. [REDACTED]		

Was driver (owner) of other vehicle insured? YES NO NOT KNOWN
 Were you driving a vehicle owned by your employer, in the course of your employment? If yes, check square.

DID POLICE OFFICER INVESTIGATE ACCIDENT? YES NO APPROXIMATE COST TO REPAIR YOUR VEHICLE \$ _____

LIST PERSONS KILLED OR INJURED	UNIT	AGE	SEX	ADDRESS
NAME				ADDRESS
DESCRIBE INJURIES				
NAME				ADDRESS
DESCRIBE INJURIES				
NAME				ADDRESS
DESCRIBE INJURIES				
DESCRIBE DAMAGE TO PROPERTY OTHER THAN MOTOR VEHICLES	APPROXIMATE COST TO REPAIR	PROPERTY OWNERS NAME		
	\$ _____	PROPERTY OWNERS ADDRESS		

SIGN HERE _____ ADDRESS _____ DATE _____
 Signature of person making report

YOUR INSURANCE

If you fail to give full information below it will be assumed that you did not have automobile liability insurance, and you may be subject to further application of the Safety Responsibility Law.

Were you covered by a liability insurance policy at the time of the crash? YES NO

Full name of your insurance company (not agency) which issued policy to cover liability for damages or injury to others.

Name and address of representatives who sold policy.

Policy Number _____

Policy Period From: _____ To: _____

Name of Policy Holder _____



M0109

Mail this report to:
Illinois Department of Transportation
Crash Records Section
1340 North 9th Street
Springfield, Illinois 62766-0001

Printed by authority of the State of Illinois

SR 1C JANUARY 2010

COMPLETE BOTH SIDES OF THIS FORM

WELLS AUTOMOTIVE SERVICE
 1177 N. Maple Street
 Oklahoma, Missouri 64516
 (417) 863-2740 or 843-3723

Road Service

DATE	TIME	A.M. / P.M.	REQUESTED BY	P.O. NO.
NAME		ADDRESS		PHONE
CITY		STATE	ZIP	
LOCATION OF VEHICLE				
YEAR, MAKE, MODEL		COLOR	DRIVER	
STATE	LIC. PLATE NO.	VEHICLE I.D. NO.	REGISTERED OWNER	
MILEAGE		SERVICE TIME		EXTRA PERSON
FINISH		FINISH		FINISH
START		START		START
TOTAL		TOTAL		TOTAL
REASON FOR TOW			SPECIAL EQUIPMENT	
<input type="checkbox"/> ACCIDENT <input type="checkbox"/> ARREST <input type="checkbox"/> UNREGISTERED <input type="checkbox"/> TOW ZONE <input type="checkbox"/> SNOW REMOVAL <input type="checkbox"/> ABANDONED <input type="checkbox"/> STOLEN CAR <input type="checkbox"/> BREAK DOWN <input type="checkbox"/> LOCK OUT <input type="checkbox"/> START <input type="checkbox"/> FLAT TIRE <input type="checkbox"/> OUT OF GAS <input type="checkbox"/> IMPOUNDED <input type="checkbox"/>			<input type="checkbox"/> SINGLE LINE WINCHING <input type="checkbox"/> DUAL LINE WINCHING <input type="checkbox"/> SNATCH BLOCKS <input type="checkbox"/> SCOTCH BLOCKS <input type="checkbox"/> DOLLY	
TYPE OF TOW		TOWED PER ORDER OF		VEHICLE TOWED TO
<input type="checkbox"/> SLING/ HOIST TOW <input type="checkbox"/> FLAT BED/ RAMP <input type="checkbox"/> WHEEL LIFT <input type="checkbox"/>		<input type="checkbox"/> STATE POLICE <input type="checkbox"/> LOCAL POLICE <input type="checkbox"/> OWNER <input type="checkbox"/> DEALER		FIRST TO: _____ SECOND TO: _____
STORAGE FROM			TOWING CHARGE	
TO _____ DAYS @ \$ _____			MILEAGE CHARGE	
PAID BY			EXTRA PERSON	
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK DRIVERS LIC. NO. _____ <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> AMEX EXP. DATE _____			SPECIAL EQUIPMENT	
CC NO. _____			LABOR CHARGE	
OPERATOR'S SIGNATURE _____ DATE _____			STORAGE	
TRUCK NO. _____			SUB-TOTAL	
AUTHORIZED SIGNATURE _____ DATE _____			TAX	
VEHICLE RELEASED TO _____ DATE _____			TOTAL	

249297

Not responsible for loss or damage to vehicle in case of fire, theft or any other cause beyond our control.

Thank You
 PRODUCT 2525

WELLS AUTOMOTIVE SERVICE

2317 N. Wells Street
Chicago, Illinois 60610
(312) 943-6729 or 343-6722

Road Service

DATE 2-5-11	TIME A.M. REQUESTED BY P.M.	P.O. NO. 09897
NAME		PHONE
ADDRESS		
CITY		STATE ZIP
LOCATION OF VEHICLE		
YEAR, MAKE, MODEL		COLOR DRIVER
STATE	VEHICLE I.D. NO.	REGISTERED OWNER
MILEAGE 756	SERVICE TIME	EXTRA PERSON
FINISH 752	FINISH	FINISH
START 4	START	START
TOTAL	TOTAL	TOTAL
REASON FOR TOW		SPECIAL EQUIPMENT
<input type="checkbox"/> ACCIDENT <input type="checkbox"/> ARREST <input type="checkbox"/> UNREGISTERED <input type="checkbox"/> TOW ZONE <input type="checkbox"/> SNOW REMOVAL		<input type="checkbox"/> SINGLE LINE WINCHING <input type="checkbox"/> DUAL LINE WINCHING <input type="checkbox"/> SNATCH BLOCKS <input type="checkbox"/> SCOTCH BLOCKS <input type="checkbox"/> DOLLY
<input type="checkbox"/> ABANDONED <input type="checkbox"/> STOLEN CAR <input type="checkbox"/> BREAK DOWN <input type="checkbox"/> LOCK OUT <input type="checkbox"/> START		<input type="checkbox"/> FLAT TIRE <input type="checkbox"/> OUT OF GAS <input type="checkbox"/> IMPOUNDED
TYPE OF TOW	TOWED PER ORDER OF	VEHICLE TOWED TO
<input type="checkbox"/> SLING/HOIST TOW <input type="checkbox"/> FLAT BED/RAMP <input type="checkbox"/> WHEEL LIFT <input type="checkbox"/>	<input type="checkbox"/> STATE POLICE <input type="checkbox"/> LOCAL POLICE <input type="checkbox"/> OWNER <input type="checkbox"/> DEALER	FIRST TOW SECOND TOW
STORAGE FROM		TOWING CHARGE
TO _____ DAYS @ \$ _____		MILEAGE CHARGE
PAID BY		EXTRA PERSON
<input type="checkbox"/> CASH <input type="checkbox"/> CHECK DRIVERS LIC. NO. _____ <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> AMEX EXP. DATE _____		SPECIAL EQUIPMENT
CC NO. _____		LABOR CHARGE
OPERATOR'S SIGNATURE _____ DATE _____		STORAGE
TRUCK NO. _____		SUB-TOTAL
AUTHORIZE _____		TAX
VEHICLE RELEASED TO _____ DATE _____		TOTAL

9257-9103-9900-0000

1249893

Not responsible for loss or damage to vehicle
in case of fire, theft or any other cause beyond our control.

Thank You

PRODUCT 2525

OCAMPO, MARIA

2 RN RR H41371831

VEHICLE 02298/5205570 VIN# JM1BL1UF8B
LIC IL [REDACTED] CLS YB 11 MAZDA FUEL: 8/8 OUT 8/8 IN

PREPARED BY: 5469/ILCHI03 COMPLETED BY: 2928/ILCHI03
RENTED: 12/29/2010 10:23 @ LAKEVIEW HLE
RETURN: 02/13/2011 11:54 @ LAKEVIEW HLE
PLAN IN: Custom PLAN OUT: RATE CLASS YB

MILEAGE IN	1500	TR-X MILES	0
MILEAGE OUT	773	MILES ALLOWED	0
MILES DRIVEN	727	MILES CHARGED	0.00
BASE RATE	46	@ \$ 15.00 / DAY	\$ 890.00

EX	2	@ \$ 5.00 / EX HOUR	10.00
----	---	---------------------	-------

ADJUSTMENTS			
SUBTOTAL		T \$	700.00

LDW	DECLINED	\$	
PDW	DECLINED	\$	
LIS	DECLINED	\$	
PAI,PEC	DECLINED	\$	

SURCHARGE		\$	40.47
-----------	--	----	-------

TAX 20.00 % ON EST. TAXABLE TTL \$737.72	\$	147.54
MISCELLANEOUS ADJUSTMENTS	\$	-16.00
CUSTOMER CHARGE	\$	872.01
CHARGED ON: VI XXXXXXXXXXXX [REDACTED]	\$	872.01
CUSTOMER BALANCE	\$	0.00

AN ADJUSTMENT FOR \$ -16.00 HAS BEEN APPLIED TO YOUR RENTAL. PLEASE ACCEPT OUR APOLOGY FOR ANY INCONVENIENCE YOU MAY HAVE EXPERIENCED DURING YOUR RENTAL.

STATEMENT OF CHARGES - NOT VALID FOR RENTAL
Renting Company - The Hertz Corporation

Hertz

#02PN RR 154915924

VEHICLE 02298/5205570

CLS YB 11NNK3 LIC: IL [REDACTED]

FUEL: 8/8 OUT 8/8 IN
CDP: 00020 - AAA CHICAGO AUTO CLUBRES F0314197435/LOCW1 /A
PREPARED BY: 2244/ILCHI03
COMPLETED BY: 2244/ILCHI03RENTED: 02/25/11 18:01 @ HLE, 2828 N. CLARK STREET
RETURN: 03/06/11 11:45 @ HLE, 2828 N. CLARK STREETPLAN IN: LOCW1 RATE CLASS: A
PLAN OUT: LOCW1
MILEAGE IN 2200 TR-X MILES
MILEAGE OUT 1800 MILES ALLOWED
MILES DRIVEN 400 MILES CHARGED

WEEKS	1 @ \$	124.99/WEEK	\$	124.99
EX DAYS	2 @ \$	31.12/DAY	\$	62.24
PROMOTIONAL COUPON	152213 1		\$	35.00
SUBTOTAL 1			\$	182.23
DISCOUNT - R 10%			\$	15.22
SUBTOTAL 2			T\$	137.01
LDW	DECLINED			
LIS	DECLINED			
PAI, PEC	DECLINED			
MVL TAX			\$	2.75
VEHICLE LICENSE COST RECOVERY			T\$	4.68
TAX 20.000% ON TAXABLE TTL OF \$	141.69		\$	28.34
PAID BY CASH			\$	172.78
AMOUNT TENDERED \$	172.78			
RENT FP VISA	XXXXXXXXXXXX	[REDACTED]		

HOW WAS YOUR EXPERIENCE?
WE'D LIKE YOUR FEEDBACK.

- 1) Call 1-800-278-1595, or
Visit WWW.HERTZSURVEY.COM
- 2) Enter Access Code: 05374
- 3) Take Brief 4 Question Survey

WANT TO BUY A HERTZ CAR?

Go To: WWW.HERTZCARSALES.COM or
Call: 1-888-674-3309

STATEMENT OF CHARGES - NOT VALID FOR RENTAL

VEHICLE 02298/5205570
CLS YB 11NNK3 LIC: IL [REDACTED]
FUEL: 8/8 OUT 8/8 IN
CDP: 1805452 - AAA WEB ID
FF: AA 7086TH2
RES F0151486495/MCLW /B
PREPARED BY: 2928/ILCHI03
COMPLETED BY: 2244/ILCHI03

RENTED: 02/13/11 12:06 @ HLE, 2828 N. CLARK STREET
RETURN: 02/25/11 17:00 @ HLE, 2828 N. CLARK STREET

PLAN IN: CNVW RATE CLASS: B
PLAN OUT: LOCD1
MILEAGE IN 1800 TR-X MILES
MILEAGE OUT 1500 MILES ALLOWED
MILES DRIVEN 300 MILES CHARGED

WEEKS	2 @ \$	85.00/WEEK	\$	170.00
PROMOTIONAL COUPON	152213 1		\$-	35.00
SUBTOTAL			T\$	135.00
FF SURCHARGE			T\$.16
LDW	DECLINED			
LIS	DECLINED			
PAI, PEC	DECLINED			
MVL TAX			\$	2.75
VEHICLE LICENSE COST RECOVERY			T\$	6.76
TAX	20.000% ON TAXABLE TTL OF \$	141.92	\$	28.38
MISCELLANEOUS ADJUSTMENTS			\$	6.20
CHARGED ON VISA	XXXXXXXXXX [REDACTED]		\$	179.25
RENT FP VISA	XXXXXXXXXX [REDACTED]			

FF: AA 7086TH2
135 MILES AWARDED ON CHARGES IDENTIFIED WITH ff

**HOW WAS YOUR EXPERIENCE?
WE'D LIKE YOUR FEEDBACK.**

- 1) Call 1-800-278-1595, or
Visit WWW.HERTZSURVEY.COM
- 2) Enter Access Code: 05374
- 3) Take Brief 4 Question Survey

WANT TO BUY A HERTZ CAR?
Go To: WWW.HERTZCARSALES.COM or
Call: 1-888-674-3309

STATEMENT OF CHARGES - NOT VALID FOR RENTAL



March 2, 2011

National Center for Dispute Settlement

43230 Garfield • Suite 130
Clinton Township, MI 48038
(800) 936-4303
(586) 226-2470
Fax: (586) 226-2559

[Redacted]
Chicago, IL [Redacted]

RE: CASE # 2111024

Dear [Redacted]

Your request for arbitration within the Toyota Dispute Settlement Program has been received. Your application for arbitration states that the situation, which gave rise to your complaint, included your vehicle being involved in an accident. The arbitration process has jurisdiction over service issues covered under Toyota's New Vehicle Limited Warranties. Therefore, your claim is not eligible for the arbitration process.

Although we are unable to assist you with this matter, we appreciate the time you took to explore this situation with NCDS.

Sincerely,

NCDS

A handwritten signature in cursive script, appearing to read 'A.M.', is written over the typed name.

Ashley Monahan x.117
Case Administrator

cc: Toyota Chicago Regional Office

RECEIVED

MAR 02 2011

N.C.D.S.

TOYOTA Customer Claim Form

FOR NCDS USE

CASE NUMBER:

2111024

CUSTOMER NAME AND ADDRESS

Mr. First name [redacted] MI [redacted] Last name [redacted]

Mrs. Street address [redacted]

Ms.

City Chicago State IL Zip Code [redacted]

Day phone [redacted] Evening phone [redacted] Fax [redacted]

VEHICLE INFORMATION

Name(s) that appears on the vehicle title:

Is this a leased vehicle: Yes No Delivery Date: 08/11/2009

If yes, lessor's name and address: N/A

Make: _____ Model: _____ Year: _____ Current mileage: _____

Vehicle Identification Number: _____

Selling dealer and address: Chicago Northside Toyota
5625 N. Broadway, Chicago, IL

Dominant Servicing Dealer: Chicago Northside Toyota
5625 N. Broadway, Chicago, IL

VEHICLE PROBLEM(S) (Attach legible copies of applicable repair orders or other documents that support your complaint)

Problem	List dealer(s) which have repaired or attempted repair (include city & state).	List the date, mileage, and repair order number for each repair attempt.	Does the problem currently exist? (Circle)	
Example: A/C won't cool properly	Autoworld, Inc Anytown, VA	4/23/99 3,500 miles #B73540	Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No
			Yes	No

Has the vehicle been involved in an accident? YES NO

If YES, give date of accident: December 10, 2010 Specify damaged area: _____

Resolution Sought:

Return all copies of this form to:

National Center for Dispute Settlement
P.O. Box 688
Mt. Clemens, MI 48046

X [redacted] 02/07/11
SIGNATURE(S) DATE

[redacted] 02/15/11
DATE

Chicago, IL
February 7, 2011

National Center for Dispute Settlement
P.O. Box 688
Mt. Clemens, MI 48046

To Whom It May Concern:

My Toyota Yaris 2009 was bought at Chicago Northside Toyota Scion, 5625 N. Broadway, on August 11, 2009. My Toyota Yaris is under warranty, and the total mileage is of about 2,696 miles driven in the city of Chicago, IL. As a consumer, I am utterly dissappointed due to the unintended sudden acceleration of my Toyota Yaris 2009, VIN: which occurred while I was making a right to park my car at Illinois Masonic Medical Center, on the second floor of their garage, located at 3000 N. Halsted, Chicago, IL. on Friday, December 10, 2010. (See attached copy of Illinois Motorist Report).

Toyota's Corporate Office didn't provide me with a loaner car, as it was requested at the time, from Case Managers Heather Lyons and Ana Escobar, as it was requested, for the front bumper of car was damaged and the Toyota Yaris had to be at the Body Shop. The dealer, Chicago Northside Toyota, did not provide me with a loaner car either while car was being fixed, when it was requested from them. I was told by Toyota Case Managers that they don't do "that" of providing loaner cars, for what if they did that for every call that they got?

Toyota's Corporate Office, through their Engineering Company hired by them, Engineering Express, has not performed an Over-the-road testing of car, thus no full inspection has been performed. (See letter dated January 14, 2011 and see). It is my recollection that my Toyota's car tires were not underinflated, nor did my Toyota Yaris 2009, VIN: JTDBT903994 have a screw on the rear of any tires on Friday, December 10, 2010. (See 4 attached pictures of Toyota Yaris 2009, VIN: JTDBT903994). To my recollection the floor mats, which are not Toyota's did not move the accelerator. This sudden acceleration of the car was very frightening. This sudden acceleration of my Toyota Yaris 2009, VIN: JTDBT903994 occurred at the time when I was making the right turn to pull into to park my Toyota Yaris 2009 VIN: JTDBT903994 and then the car suddenly accelerated on its own. This was extremely frightening and I did press the break to avoid the car hitting the wall and the car hit the wall, and my left hand thumb was injured, and the front bumper of Toyota Yaris 2009, VIN JTDBT903994 was damaged. (See copies of car expenses paid to the Toyota Certified Body Shop, A-Carr's Carstar, in the amount of \$1,000) (See attached GEICO Insurance copies of estimate of damage of Toyota Yaris 2009, VIN: JTDBT903994

As a driver consumer, and for my safety, I don't have the confidence in driving this Toyota Yaris 2009, VIN: JTDBT903994 anymore. Toyota has not done inspection that requires and Over-the-Road testing of my Toyota Yaris 2009, VIN: JTDBT903994 In letter dated January 14, 2011, from Toyota's Headquarters, it is being alleged that my Toyota Yaris 2009 tires were underinflated. Attached are 2 pictures that show that tires from my Toyota Yaris 2009 were

not underinflated on Friday, December 10, 2010 at about 1:30 p.m. when sudden acceleration which seems to have caused accident occurred. In addition, there was report filed by the Illinois Masonic Center, and security officer at Illinois Masonic Hospital is a witnesses the tires were not underinflated. Also, when car was brought by Triple AAA from Toyota Certified A-Carr's Carrstar to the Dealer, Chicago Northside Toyota, at 5625 N. Broadway, Chicago, IL on Tuesday, December 28, 2010, the Triple AAA driver did not mention the tires were underinflated. When the car arrived to the Toyota Dealer, on Tuesday, December 29, 2011, as it was transported there by the Triple AAA driver, (per my request and my daughter's request, since we were waiting to have inspection ordered by Toyota's headquarters through their engineering company, SPX Service Solutions/EAA from the Toyota Certified Body Shop: A-Carr Carrstar, the Triple AAA driver, nor the Assistant Service Manager, Jose Rivera said to me and my daughter, [REDACTED] that the tires of my Toyota Yaris 2009, VIN: JTDBT903994 [REDACTED] were underinflated, and at that point, one of the porters of the Dealer, Chicago Northside Toyota Scion, drove the the Toyota Yaris 2009, VIN: JTDBT903994 [REDACTED] which had already been brought inside the Chicago Northside Toyota, at 5625 North Broadway, Chicago, IL and parked it at the Dealer, as soon as the Triple A Towing Car driver that my daughter and I contacted, dropped the car at Chicago Northside Toyota, at 5625 N. Broadway, Chicago, IL for Toyota Headquarters Case Managers had told me that an Inspector would contact me to come and do inspection of my Toyota Yaris 2009, VIN: JTDBT903994 [REDACTED]. On January 4, 2011, an inspector from the engineering company hired by Toyota, called my daughter, [REDACTED] and my daughter let the inspector Bill Bodak, know the car was at the Dealer, Chicago Northside Toyota Scion, located at 5625 N. Broadway, Chicago, IL. (See 6-page copies of attached Vehicle Diagnostic Report provided by Toyota's contracted company: SPX Service Solutions/EAA and received on January 12, 2011). On or around January 20, 2011, Ana Escobar was called at Toyota's Customer Service, and message was left for Toyota to perform full inspection with a Road Test of my Toyota Yaris 2009, VIN: JTDBT903994 [REDACTED] which was not performed by Engineering Company, as it is stated on letter from Toyota Headquarters, dated January 14, 2011, which was received on the following week in January 2011. Message was left on January 21, 2011 by a different Case Manager, (the original Case Manager assigned by Toyota Customer Service), Heather Lyons, saying the Inspection was performed and that inspector from SPX Solutions/EAA closed the case. Phone call was not returned by Toyota Headquarters Case Manager, Ana Escobar.

The dealer, Chicago Northside Toyota Scion, did not inform me that the tires were underinflated and if the tires got underinflated while at the the dealers location, as soon as they were inflated why wasn't the the Road Test performed? My Toyota Yaris 2009, VIN: JTDBT903994 [REDACTED] remained at the dealer Chicago Northside Toyota, at 5625 N. Broadway, Chicago, IL, from December 29, 2011 up until January 12, 2011, and car was driven back by one of their porters, Victor, to my garage at [REDACTED]. As a matter of fact, the dealer, Chicago Northside Toyota was refusing to bring it to my house at first. (See attached letter that was written on January 11, 2011 and faxed to the dealer on January 12, 2011). My car is sitting in my garage, for I don't feel it us safe to drive it anymore due to the sudden/unintended acceleration which made accident took place on December 10, 2010.

RESOLUTION SOUGHT

Unfortunately, due to the above-mentioned, as a consumer, I don't feel safe anymore to be driving my Toyota Yaris 2009, VIN JTDBT903994 [REDACTED] and nor does my daughter feel it is safe anymore either to drive Toyota Yaris 2009, VIN JTDBT903994 [REDACTED]. My daughter and I find it extremely disappointing that after having bought a brand new car, from a Toyota car dealer, a Toyota Yaris 2009, VIN: JTDBT903994 [REDACTED] that we are having the above-mentioned problem. \

- 1) This is to request full inspection, which included On-the-Road-Testing of Toyota Yaris 2009.
- 2) This is to request the full reimbursement of the total amount of \$17,246.00 which was paid in full to the dealer at the time of purchase on August 11, 2009.
- 3) This is to request reimbursement for deductible expenses incurred at the Toyota Certified Body Shop, A-Carr's Carstar, in the amount of \$1,000 and for medical expenses incurred for injured thumb.
- 4) This is to request reimbursement for Car Rental Expenses in the amount of \$413.73 (Budget Rental) and for ongoing expenses of Hertz Car Rental up until the point that the above is resolved and we do receive full reimbursement of purchase price of Toyota Yaris 2009, VIN: JTDBT903994 [REDACTED].

I appreciate your promptness in resolving the above matter. You may reach me by calling my daughter, [REDACTED] at: [REDACTED] or at [REDACTED].

Sincerely,

[REDACTED]

02/15/11

Date

[REDACTED]

02/15/11

Date

CC: Attachments

Copy of Illinois Motorist Report of accident December 10, 2010 (1 page)

Copies of attached Vehicle Diagnostic Report provided by Toyota's SPX Service Solutions/EAA and received on January 12, 2011 (6 pages)

Copy of GEICO Insurance Estimate, and A Carr's Carstar receipts and photocopy of Check payment (13 pages)

Copy of letter from Toyota dated January 14, 2011 (1 page)

Copy of 2 Pictures of Toyota Yaris 2009, VIN JTDBT903994 [REDACTED] on December 10, 2010 (2 ~~20~~ pages)

Copy of email sent to [REDACTED] from Engineering Express/EAA contracted by Toyota, requesting a loaner car dated December 22, 2010 (2 pages)

Copies of attached letter to Northside Toyota Scion and fax receipt on January 12, 2011 (3 pages)

Copy of 1 invoice and and 1 computer print out from Chicago Northside Toyota. (2 pages)

RE: consent forms: [REDACTED], [REDACTED]

From: [REDACTED]
Sent: Wed 12/22/10 10:06 AM
To: toyota@spx.com

Ms [REDACTED]

Thanks for your email regarding Toyota Yaris 2009. This is to acknowledge I have received the email with Toyota Consent Forms as of December 15, 2010 and that I have faxed them addressing Toyota Consent to you in the morning of December 16, 2010.

I have called you again on December 20, 2010, at the phone number listed in the below email message, for Maria N. Ocampo and I have not been contacted yet for Toyota to perform inspection on our Toyota Yaris 2009 which had a sudden acceleration on December 10, 2010. We have not received a call back from you.

Our Toyota Yaris 2009 is presently at A-Carr's Carstar, (4246 N. Western Ave., Chicago, IL) waiting for the Toyota Inspection to be performed.

In the meantime, [REDACTED] is having to use a rental car. I would like to request a loaner car from Toyota to be provided to [REDACTED] for the time and up to the results of Toyota Yaris inspection are provided, for it seems, based on the attached document's information, that this may take about 45 days.

Thanks in advance for your prompt attention regarding this matter. I can be reached at [REDACTED] or via email.

Sincerely,

From: toyota@spx.com
To: [REDACTED]
Subject: consent forms [REDACTED]
Date: Wed, 15 Dec 2010 10:09:19 -0500

Please sign and return the attached form, by fax or email.

Once the EDR consent form is returned, we can go forward with ordering the inspection.

It does take about 7-10 business days for the inspector to contact you, to schedule the inspection.

Thank You,

TOYOTA YAKUO 2007 1

VIN: 2TD BT903941



TOYOTA YAKIS 2007 (

VIN: JTDBT90344



VEHICLE 02298/5205570 VIN# JM1BL1UF8
LIC IL [REDACTED] CLS YB 11 MAZDA FUEL: 8/8 OUT 6/8 IN

PREPARED BY: 5469/LCHI03 COMPLETED BY: 2928/LCHI03
RENTED: 12/20/2010 10:23 @ LAKEVIEW HLE
RETURN: 02/13/2011 11:54 @ LAKEVIEW HLE
PLAN IN: Custom PLAN OUT: RATE CLASS YB

MILEAGE IN	1500	TR-X MILES	0
MILEAGE OUT	773	MILES ALLOWED	0
MILES DRIVEN	727	MILES CHARGED	0.00
BASE RATE	46	@ \$ 15.00 / DAY	\$ 890.00

EX	2	@ \$ 5.00 / EX HOUR	10.00
----	---	---------------------	-------

ADJUSTMENTS
SUBTOTAL

T \$ 700.00

LDW	DECLINED	\$
PDW	DECLINED	\$
LIS	DECLINED	\$
PAI,PEC	DECLINED	\$

SURCHARGE	\$	40.47
-----------	----	-------

TAX 20.00 % ON EST. TAXABLE TTL \$737.72	\$	147.54
MISCELLANEOUS ADJUSTMENTS	\$	-16.00
CUSTOMER CHARGE	\$	872.01
CHARGED ON: VI XXXXXXXXXXXXX [REDACTED]	\$	872.01
CUSTOMER BALANCE	\$	0.00

AN ADJUSTMENT FOR \$ -16.00 HAS BEEN APPLIED TO YOUR RENTAL. PLEASE ACCEPT OUR APOLOGY FOR ANY INCONVENIENCE YOU MAY HAVE EXPERIENCED DURING YOUR RENTAL.

STATEMENT OF CHARGES - NOT VALID FOR RENTAL
Renting Company - The Hertz Corporation

*** TX REPORT ***

TRANSMISSION COMPLETED

TX/RX NO. 0075
DESTINATION NUMBER 17738785383
DESTINATION ID
ST. TIME 01/12 18:03
COMMUNICATION TIME 00'27
PAGES SENT 1
RESULT OK

[REDACTED]
[REDACTED]
[REDACTED]
Chicago, Illinois [REDACTED]

January 11, 2011

Peter Solber
Jose Rivera
David Solomon
Chicago Northside Toyota Scion
5625 North Broadway Street
Chicago, Illinois 60660

Via Fax (773) 878-5383

Via Fax (773) 728-1099

Re: 2009 Toyota Yaris
License Plate No. [REDACTED]

Dear Messrs. Solber, Rivera and Solomon:

First, this is to confirm, telephone conversation with David Solomon and Peter Solber, today January 11, 2011, at about 3:25 p.m., after my returning prior phone call from David Solomon, in which it was confirmed receipt of letter faxed by me to Chicago Northside Toyota Scion.

Second, this is also to confirm that [REDACTED]'s 2009 Toyota Yaris, License Plate No. [REDACTED] will be delivered to the garage at my residence located at [REDACTED] on Wednesday, January 12, 2010 at 6:00 p.m. As it was mentioned in phone conversation to David Salomon and Peter Solber, I will be waiting for car to be delivered on January 12, 2010 at 6:00 p.m. at my home address. [REDACTED]

01/12/2011 18:01 FAX 7732440992 Zulima Ocampo 12/001

*** TX REPORT ***

TRANSMISSION COMPLETED

TX/RX NO. 0074
DESTINATION NUMBER 17737281099
DESTINATION ID
ST. TIME 01/12 18:01
COMMUNICATION TIME 00'16
PAGES SENT 1
RESULT OK

[REDACTED]
[REDACTED]
[REDACTED]
Chicago, Illinois [REDACTED]

January 11, 2011

Peter Solber
Jose Rivera
David Solomon
Chicago Northside Toyota Scion
5625 North Broadway Street
Chicago, Illinois 60660

Via Fax (773) 878-5383
Via Fax (773) 728-1099

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[REDACTED]
Chicago, Illinois [REDACTED]

January 11, 2011

Peter Solber
Jose Rivera
David Solomon
Chicago Northside Toyota Scion
5625 North Broadway Street
Chicago, Illinois 60660

Via Fax (773) 878-5383
Via Fax (773) 728-1099

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Very truly yours,

[REDACTED]

VEHID 94 [REDACTED]

CHICAGO IL [REDACTED]
HOME PHONE [REDACTED]
BUS. PHONE [REDACTED] EXT. [REDACTED]
CELL PHONE N/A [REDACTED]
PAGER N/A [REDACTED] CODE [REDACTED]
E-MAIL [REDACTED]

09 TOYOTA YARIS 2696

Command? (Enter, *, N, VEH, CUST, ?)?

(OWNER) SERIAL NO. JTDBT903994 [REDACTED]
CUSTOMER 126851
DELV. DATE 11AUG09
IN SERVICE 11AUG09
WAR.EXP.DATE STKR N7389
LICENSE NO. [REDACTED]
UNIT N/A SLSMN
SA

640

600 PM
WEDS
DELIVER

CUSTOMER #: 126851

336325

INVOICE



DUPLICATE 1
PAGE 1

5625 NORTH BROADWAY
CHICAGO, IL 60660
(773) 728-5000

CHICAGO, IL
HOME:
BUS: CONT:N/A
CELL:

SERVICE ADVISOR: 321 JOSE RIVERA

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
SILVER STR	09	TOYOTA YARIS	JTDBT903994		2696/2696	T2561	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
11AUG09 DD			19:00 07JAN11		105.00	CASH	08JAN11
R.O. OPENED	READY	OPTIONS: STK:N7389					
12:05 29DEC10	07:50 08JAN11						

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A							

A CUSTOMER IS DROPPING CAR OF FOR INSPECTION FOR TOYOTA CAR ACCLERATE ON IT OWN

INS INSPECTION PERFORMED

385 CP

210.00 210.00

B** PATCH RIGHT REAR TIRE

PATCH NAIL DID NOT GO THROW --NO LEAKS

974ISHOP

(N/C)

CUSTOMER PAY SHOP SUPPLIES AND ENVIRONMENTAL SURCHARGE FOR REPAIR ORDER 14.70

REMOVED AND REINSTALLED WHEELS THANK YOU FOR YOUR BUSINESS

FOR ADJUSTER, R AND R REAR

WE HOPE YOU HAD AN EXCELLENT EXPERIENCE AT

BRAKE DRUMS, R AND R

CHICAGO NORTHSIDE TOYOTA/SCION

ACCELERATOR PED AL

ASSY, CHARGED BATTERY TECH NOTED GENUINE TOYOTA PARTS ARE WARRANTED BY TOYOTA.

NAIL IN RIGHT REAR TIRE AND

FOR 12 MONTHS FROM THE DATE OF PURCHASE

ALL TIRE PRESSURE/S LOW..DTC # CHICAGO LICENSE # 350064

U 0100 IN MEMORY

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

STATEMENT OF DISCLAIMER

The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

DESCRIPTION	TOTALS
LABOR AMOUNT	210.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	14.70
TOTAL CHARGES	224.70
LESS INSURANCE	0.00
SALES TAX	1.43
PLEASE PAY THIS AMOUNT	226.13

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

CUSTOMER SIGNATURE

Use black ink

Mail this report to
Illinois Department of Transportation
Crash Records Section
1340 North 9th Street
Springfield, Illinois 62766-0001

COMPLETE BOTH SIDES OF THIS FORM

ILLINOIS MOTORIST REPORT

Copies of police crash reports may be obtained by sending \$5 per copy (check or money order) made payable to "Department of Finance - City of Chicago" and mailed to:

Chicago Police Department
Records Inquiry & Customer Service Section - Unit 163
3510 South Michigan Avenue - Room 1027 SE
Chicago, IL 60653-1020



C100176537

INVESTIGATING AGENCY CHICAGO POLICE DEPARTMENT		37 DAMAGE TO ANY PERSONS VEHICLE / PROPERTY <input type="checkbox"/> \$500 OR LESS <input type="checkbox"/> \$501 - \$1,500 <input type="checkbox"/> OVER \$1,500	TYPE OF REPORT <input type="checkbox"/> ON SCENE <input checked="" type="checkbox"/> NOT ON SCENE (DESK REPORT) <input type="checkbox"/> AMENDED	31 <input checked="" type="checkbox"/> A No Injury / Drive Away <input type="checkbox"/> B Injury and / or Tow Due To Crash	32	33 R.D. NUMBER HS-660450
34 ADDRESS NO. 3000	(CIRCLE) HIGHWAY or STREET NAME HALSTED	CITY CHICAGO	INTERSECTION RELATED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	35 DATE OF CRASH 12 10 10	TIME 1:20	BEAT OF OCCURRENCE 1932
(CIRCLE) FT / MI N E S W <input type="checkbox"/> AT INTERSECTION WITH	(NAME OF INTERSECTION OR ROAD FEATURE)	COUNTY COOK	PRIVATE PROPERTY <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CIRCLE DAY OF WEEK SU MO TU WE TH FR SA FR	38 NUMBER MOTOR VEHICLES INVLD 1	PHOTO(S) TAKEN <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

NAME FIXED OBJECT - WALL	DATE OF BIRTH	MAKE CEMENT	MODEL	YEAR	CIRCLE NUMBER(S) FOR DAMAGED AREA(S)	FRONT	TOWED DUE TO CRASH	Y N
STREET ADDRESS	SEX SAF AIR	PLATE NO.	STATE	YEAR	00 - NONE 10 - UNDER CARRIAGE 11 - TOTAL (ALL AREAS) 12 - OTHER 99 - UNKNOWN	8 1 2 7 9 3 6 5 4 REAR	FIRE	<input type="checkbox"/>
CITY	INJURY 27 EJECT 28	VIN			POINT OF FIRST CONTACT		HAZMAT SPILL	<input checked="" type="checkbox"/>
TELEPHONE	DRIVER LICENSE NO.	STATE	CLASS	VEHICLE OWNER (LAST, FIRST M.I.)	INSURANCE CO.		COM VEH	<input checked="" type="checkbox"/>
TAKEN TO	EMS AGENCY	OWNER ADDRESS (STREET, CITY, STATE, ZIP)		TELEPHONE	POLICY NO.		* IF YES SEE BELOW	

NAME [REDACTED]	DATE OF BIRTH	MAKE TOYOTA	MODEL JARIS	YEAR 09	CIRCLE NUMBER(S) FOR DAMAGED AREA(S)	FRONT	TOWED DUE TO CRASH	Y N
STREET ADDRESS	SEX SAF AIR	PLATE NO.	STATE	YEAR	00 - NONE 10 - UNDER CARRIAGE 11 - TOTAL (ALL AREAS) 12 - OTHER 99 - UNKNOWN	8 1 2 7 9 3 6 5 4 REAR	FIRE	<input checked="" type="checkbox"/>
CITY CHICAGO	INJURY 27 EJECT 28	VIN JTDBT903974			POINT OF FIRST CONTACT		HAZMAT SPILL	<input checked="" type="checkbox"/>
TELEPHONE	DRIVER LICENSE NO.	STATE	CLASS	VEHICLE OWNER (LAST, FIRST M.I.)	INSURANCE CO.		COM VEH	<input checked="" type="checkbox"/>
TAKEN TO DECLINED MED. ATTN/WILL SEEK OWN	EMS AGENCY	OWNER ADDRESS (STREET, CITY, STATE, ZIP)		TELEPHONE	POLICY NO.		* IF YES SEE BELOW	

Was driver (owner) of other vehicle insured? YES NO NOT KNOWN

Were you driving a vehicle owned by your employer, in the course of your employment? If yes, check square.

DID POLICE OFFICER INVESTIGATE ACCIDENT? YES NO APPROXIMATE COST TO REPAIR YOUR VEHICLE \$ _____

LIST PERSONS KILLED OR INJURED

NAME	UNIT	AGE	SEX	ADDRESS

DESCRIBE DAMAGE TO PROPERTY OTHER THAN MOTOR VEHICLES

APPROXIMATE COST TO REPAIR \$ _____

PROPERTY OWNER'S NAME _____

PROPERTY OWNER'S ADDRESS _____

SIGN HERE _____ ADDRESS _____ DATE _____

Signature of person making report

YOUR INSURANCE

If you fail to give full information below it will be assumed that you did not have automobile liability insurance, and you may be subject to further application of the Safety Responsibility Law.

Were you covered by a liability insurance policy at the time of the crash? YES NO

Full name of your insurance company (not agency) which issued policy to cover liability for damages or injury to others.

Name and address of representatives who sold policy.

Policy Number _____

Policy Period From: _____ To: _____

Name of Policy Holder _____



M0109

Printed by authority of the State of Illinois

SR 1C - JANUARY 2010

COMPLETE BOTH SIDES OF THIS FORM

Mail this report to
Illinois Department of Transportation
Crash Records Section
1340 North 9th Street
Springfield, Illinois 62766-0001

PAID BY
~~CHECK~~ # 200145208
LBY

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK

PERSONAL MONEY ORDER

HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK

citibank

Citibank, N.A.
FC#00044 FA# 008
036-04 Ck. Ser. # 200145208

\$0.00 QNL PIC

62-20
311

DATE 1 2 / 2 3 / 1 0

***** 1 , 0 0 0 . 0 0 *****

PAY *****ONE THOUSAND DOLLARS*****

TO THE ORDER OF

A-Carr's Carstar



Security Features
Details on Back

NOT GOOD FOR MORE THAN \$1,000.00

MEMO
Citibank, N.A. One Penn's Way
New Castle, DE 19720

PURCHASER'S SIGNATURE

ADDRESS

Chicago, IL

|| [REDACTED] || [REDACTED] || [REDACTED]



DELIVERY INSTRUCTIONS

Repair Order # 11615

- Deductible \$ 1000.00
- Insurance draft/check \$ 582.42
- Customer pay \$ 0
- Total pay \$ 1582.42

Authorization/Direction of Payment

Date: 12-20-10

A-CARR'S CARSTAR AUTO BODY
Federal ID #:363462818
4246 N. Western Avenue
Chicago, IL 60618
(773)478-4844 Fax: (773)478-0860

PRELIMINARY SUPPLEMENT 1 WITH SUMMARY

Estimate Origin: GEICO, GEICO INS
Written By: WALTER FISCHER
Adjuster: CAXQ FCC: (708)906-9591

Insured: [REDACTED] Claim [REDACTED]
Owner: [REDACTED] Policy [REDACTED]
Address: [REDACTED] Deductible: \$1000.00
[REDACTED]
CHICAGO, IL [REDACTED] Date of Loss: 12/10/2010 at 12:00 AM
Evening: [REDACTED] Type of Loss: Collision
Point of Impact: 12. Front

Inspect CAXQ A CARR CAR STAR
Location: 4246 N WESTERN AVE
CHICAGO, IL 60618

Insurance GEICO
Company: 10 Days to Repair

2009 TOYO YARIS 4-1.5L-FI 4D SED SILVER Int:
VIN: JTDDBT903994 [REDACTED] Lic: [REDACTED] IL Prod Date: Odometer: 2695
Condition: Good
Air Conditioning Tilt Wheel Intermittent Wipers
Console/Storage Clear Coat Paint Power Steering
Power Brakes Power Trunk/Gate Release Anti-Lock Brakes (4)
Driver Air Bag Passenger Air Bag Head/Curtain Air Bags
Front Side Impact Air Bag Cloth Seats Bucket Seats
Automatic Transmission Overdrive Deluxe Wheel Covers

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		FRONT BUMPER & GRILLE				
N 2	S01	Repl Bumper cover base	1	225.17	1.9	3.0
3	S01	Add for Clear Coat				1.2
4		Repl Absorber	1	50.59	Incl.	
5*		Rpr Reinforce bar (HSS)			<u>1.0</u>	0.7
6**		Repl Qual Repl Parts Bumper cover clip	6	5.16		
7		Repl Emblem	1	29.87	Incl.	
8*		Repl Upper grille silver	1	148.38	Incl.	<u>0.0</u>
9	S01	FRONT LAMPS				
N 10	S01	Repl LT Headlamp assy base	1	188.24	0.5	
11	S01	Aim headlamps			0.5	
12		RADIATOR SUPPORT				
13		Repl Upper tie bar	1	145.14	1.1	0.6

PRELIMINARY SUPPLEMENT 1 WITH SUMMARY
2009 TOYO YARIS 4-1.5L-FI 4D SED SILVER Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
14		Add for Clear Coat				0.1
15#	Rpr	PRE PULL CORE SUPPORT			1.0 F	
16#	Rpr	SET UP -NO MEASURE-			1.0	
17#	Repl	CORROSION PROTECTION	1	10.00	0.2	
18#	Repl	COLOR SAND/ BUFF SHOPa/p-performing extra measure of quality	1		0.3	
19#	Repl	Cover Car for a.p	1			0.2
20#	Subl	Flex- SHOP PAINT SYSTEM REQUIRES FLEX ADTV.	1	8.00 T		
21		OTHER CHARGES				
22#	E.P.C.		1	3.00		
Subtotals ==>				813.55	7.5	5.8

Line 2 : The a/m part was a bad fit...
Line 10 : Headlamp was N/A per JR at Alpha

- Prior Damage Notes:
 Prior Unrelated Damage Notes:

 Front Bumper: None
 LT Fender: None
 Hood: None
 Lt Front Door: None
 Lt Rear Door: None
 Roof: None
 Lt Quarter Panel: None
 Decklid/Tailgate: None
 Rear Bumper: MARKS
 Interior: None
 Front Lamps: None
 Rt Fender: None
 Glass: None
 Rt Front Door: None
 Rt Rear Door: None
 Sunroof: None
 Rt Quarter Panel: None
 Rear Lamps: None
 Back Glass: None
 Tires: None

PRELIMINARY SUPPLEMENT 1 WITH SUMMARY

2009 TOYO YARIS 4-1.5L-FI 4D SED SILVER Int:

Parts		802.55
Body Labor	6.5 hrs @ \$ 46.00/hr	299.00
Paint Labor	5.8 hrs @ \$ 46.00/hr	266.80
Frame Labor	1.0 hrs @ \$ 55.00/hr	55.00
Paint Supplies	5.8 hrs @ \$ 26.00/hr	150.80
Sublet/Misc.		8.00
Other Charges		3.00

SUBTOTAL		\$ 1585.15
Sales Tax	\$ 964.35 @ 9.7500%	94.02

GRAND TOTAL		\$ 1679.17
ADJUSTMENTS:		
Deductible		1000.00

CUSTOMER PAY		\$ 1000.00
INSURANCE PAY		\$ 679.17

ESTIMATE OF REPAIR:

The Estimate of Repair includes parts, labor, diagnosis, and any applicable taxes. If, on further inspection, additional parts or repairs are needed, you will be contacted for authorization. We are not responsible for loss or damage to your vehicle from fire, theft, accidents or any cause beyond our control. All tests will be made by our employees at your risk.

AUTHORIZED

SIGNATURE: _____ DATE: _____

POWER OF ATTORNEY:

I do hereby appoint the aforementioned business as my attorney in fact to accept on my behalf any and all checks, drafts, or bills of exchange for deposit to the aforementioned business' account for credit on my account for repairs on my vehicle which has been released and accepted.

ACCEPTED

BY: _____ DATE: _____

ILLINOIS LAW REQUIRES THAT VEHICLE REPAIRERS MUST BE LICENSED IN ACCORDANCE WITH SECTION 5-301 OF THE ILLINOIS VEHICLE CODE.

This estimate has been prepared based on the use of crash parts supplied by a source other than the manufacturer of your motor vehicle. Warranties applicable to these replacement parts are provided by the manufacturer or distributor of these parts rather than the manufacturer of your vehicle.

12/20/2010 at 11:46 AM
70741

Job Number: 11615

PRELIMINARY SUPPLEMENT 1 WITH SUMMARY
2009 TOYO YARIS 4-1.5L-FI 4D SED SILVER Int:

ALTERNATE PARTS SUPPLIERS

6 Qual Repl Parts Bumper cove Part No. 21249 Price \$0.86

Auveco (800) 354-9816
100 HOMAN DRIVE (859) 341-6450
COLD SPRING, KY 41076

TOYOTA

Joyce E. Jackson
Direct Phone (310) 468-7446
Fax (310) 381-7356
Joyce_E_jackson@toyota.com

Toyota Motor Sales, U.S.A., Inc.
19001 South Western Avenue
Torrance, CA 90501
310 468-4000

January 14, 2011

[REDACTED]
Chicago, IL [REDACTED]

RE:

Date of Loss:

December 10, 2010

Vehicle:

2009 Toyota Yaris

Vin #:

JTDBT903994 [REDACTED]

Dear [REDACTED]

This letter will acknowledge the receipt of your communication with our Customer Relations Department in regards to the above referenced incident.

It is our understanding that your mother experienced an unintended acceleration causing her to hit a wall.

As you are aware, your vehicle was inspected on January 7, 2011 at Chicago Northside Toyota. An inspection of the throttle system, brake system and floor mats was completed. The accelerator pedal was in good condition and moved freely with no hesitation or obstruction. Pedal movement felt smooth with no positions of high friction, binding or sticking observed. The brake pads were of adequate thickness and the rotors were in good condition. There were no leaks found in the brake system. The master cylinder was full with clean, clear fluid. All connections were proper with no leakage found. There were after market mats in both the driver's and passenger floor well areas. There were no retaining hooks in the driver side to secure any mat. There was no road test due to the condition of the tires. There was a screw in the right rear tire tread and all four tires are underinflated.

We are sorry to learn of this unfortunate incident, however, at this time there is no indication that any type of manufacturing design or defect caused or contributed to this incident. If you have any additional information or documentation you wish to submit for review, please do so. Thank you for allowing Toyota Motor Sales, USA, Inc. to address your concerns.

Very truly yours,



Joyce E. Jackson

Toyota Motor Sales, USA, Inc.

Vehicle Diagnostic Report

2009 Yaris 1NZ-FE
JTDBT903994 [REDACTED]

TMS

Printed By: Default User(1)

1/7/2011 7:58:54 AM

Health Check Results All Systems(1 of 1)

System	Monitor Status	FFD	DTC	Curr	Pend	Hist	Perm	Calibration	Update
Engine and ECT	Inc							352J5000	?
EMPS	-	No	U0100	X				-	
Cruise Control	-							-	
Tire Pressure Monitor	-							-	
ABS/VSC/TRAC	-							-	
Occupant Detection	-							-	
SRS Airbag	-							-	
Air Conditioner	-							-	
Main Body	-							-	

Tire Pressure [psi(gauge)]

Sensor 1:21.8
Sensor 2:27.5
Sensor 3:22.1
Sensor 4:21.8
Sensor 5:-14.5

Techstream - 10759
File Function Setup TIS User Help

System Select
Stored Data

2009 Yaris
1NZ-FE

JTDBT903994

2009_Yaris_1NZ-
File Notes

- Health Check Data 1-1/7
- Time Stamp
- Engine and E
- Cruise Contr
- ABS/VSC/TR
- Air Condition
- Main Body
- Tire Pressure
- EMPS
- Occupant De
- SRS Airbag

Expand>>

TIS Search

Print

Back

Tire Pressure [psi(gauge)]

Sensor 1:	21.8	Sensor 2:	27.5
Sensor 3:	22.1	Sensor 4:	21.8
Sensor 5:	14.5		

Health Check Results

System	Monitor Status	DTC	Curr	Pend	Hist	Perm	Calibration	Update
Engine and ECT	Inc						352J5000	?
EMPS	-	U0100	X				-	
Cruise Control	-						-	
Tire Pressure Monitor	-						-	
ABS/VSC/TRAC	-						-	
Occupant Detection	-						-	
SRS Airbag	-						-	
Air Conditioner	-						-	
Main Body	-						-	

1/7/2011 7:56:09 AM Campaign Available:?

S309-06 Default User DLC 3

page(2 of 2)

Side Crash Page.0

RecordStatus : Initial State

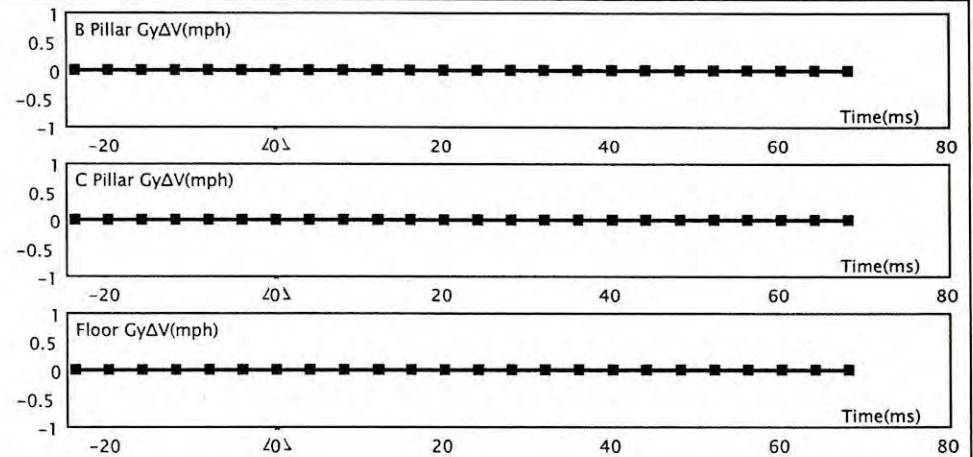
User Data

RECORDER : EDR
 Investigation Date : 01/07/2011
 Investigator : Bill Bodach
 Accident Date : December10, 2010
 Vehicle : Toyota Yaris
 Model Year : 2009
 VIN Number : JTDBT903994 [REDACTED]
 Tool Version(download) : Ver.1.4.1.1
 Tool Version(display) : Ver.1.4.1.1
 ECU No : 52D80
 COMMTYPE : SIL(ISO9141)

Side Crash Page.0

Time from TRG to Initial G : 0(ms)

Writing Flag for Gy : Invalid
 TRG Counter : 0(times)
 Previous Event : Frontal
 Linked PreCrash Data Page No. : Page.0
 Time from Pre Crash TRG : 0(ms)
 Deployment Time(B-Pillar) : 0(ms) \triangle
 Deployment Time(C-Pillar) : 0(ms) \triangle
 Deployment Side : Driver'sside
 Writing Flag for Side Crash : Invalid



Post Crash Data(Vel Chg)

Time(ms)	B Pillar Gy(mph)	C Pillar Gy(mph)	Floor Gy(mph)
-24	0.0	0.0	-0.0
-20	0.0	0.0	-0.0
-16	0.0	0.0	-0.0
-12	0.0	0.0	-0.0
-8	0.0	0.0	-0.0
-4	0.0	0.0	-0.0
0	0.0	0.0	-0.0
4	0.0	0.0	-0.0
8	0.0	0.0	-0.0
12	0.0	0.0	-0.0
16	0.0	0.0	-0.0
20	0.0	0.0	-0.0
24	0.0	0.0	-0.0
28	0.0	0.0	-0.0
32	0.0	0.0	-0.0
36	0.0	0.0	-0.0
40	0.0	0.0	-0.0
44	0.0	0.0	-0.0
48	0.0	0.0	-0.0
52	0.0	0.0	-0.0
56	0.0	0.0	-0.0
60	0.0	0.0	-0.0
64	0.0	0.0	-0.0
68	0.0	0.0	-0.0

Side Crash Page.1



RecordStatus : Initial State

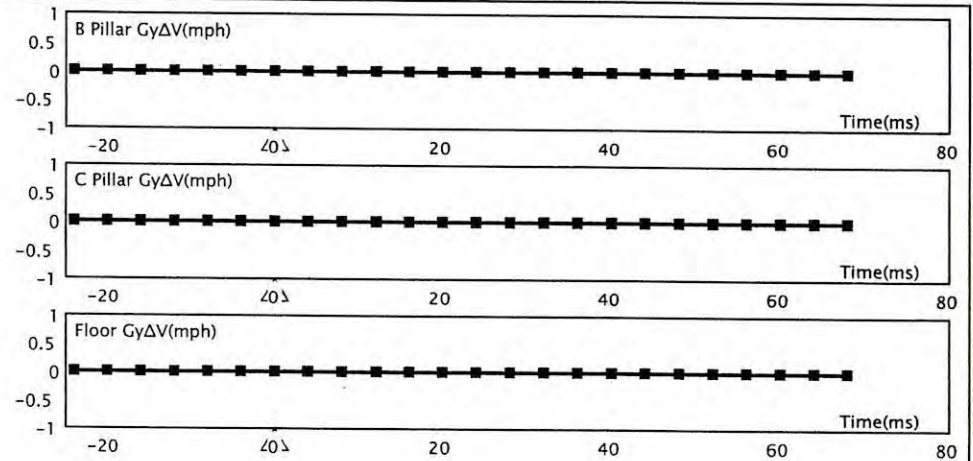
User Data

RECORDER : EDR
 Investigation Date : 01/07/2011
 Investigator : Bill Bodach
 Accident Date : December10, 2010
 Vehicle : Toyota Yaris
 Model Year : 2009
 VIN Number : JTD8T9039940
 Tool Version(download) : Ver.1.4.1.1
 Tool Version(display) : Ver.1.4.1.1
 ECU No : 52D80
 COMMTYPE : SIL(ISO9141)

Side Crash Page.1

Time from TRG to Initial G : 0(ms)

Writing Flag for Gy : Invalid
 TRG Counter : 0(times)
 Previous Event : Frontal
 Linked PreCrash Data Page No. : Page.0
 Time from Pre Crash TRG : 0(ms)
 Deployment Time(B-Pillar) : 0(ms) 
 Deployment Time(C-Pillar) : 0(ms) 
 Deployment Side : Driver'sside
 Writing Flag for Side Crash : Invalid



Post Crash Data(Vel Chg)

Time(ms)	B Pillar Gy(mph)	C Pillar Gy(mph)	Floor Gy(mph)
-24	0.0	0.0	-0.0
-20	0.0	0.0	-0.0
-16	0.0	0.0	-0.0
-12	0.0	0.0	-0.0
-8	0.0	0.0	-0.0
-4	0.0	0.0	-0.0
0	0.0	0.0	-0.0
4	0.0	0.0	-0.0
8	0.0	0.0	-0.0
12	0.0	0.0	-0.0
16	0.0	0.0	-0.0
20	0.0	0.0	-0.0
24	0.0	0.0	-0.0
28	0.0	0.0	-0.0
32	0.0	0.0	-0.0
36	0.0	0.0	-0.0
40	0.0	0.0	-0.0
44	0.0	0.0	-0.0
48	0.0	0.0	-0.0
52	0.0	0.0	-0.0
56	0.0	0.0	-0.0
60	0.0	0.0	-0.0
64	0.0	0.0	-0.0
68	0.0	0.0	-0.0

Latest Pre-Crash Page.0

RecordStatus : Recorded

User Data

RECORDER : EDR
 Investigation Date : 01/07/2011
 Investigator : Bill Bodach
 Accident Date : December10, 2010
 Vehicle : Toyota Yaris
 Model Year : 2009
 VIN Number : JTDBT903994 [REDACTED]
 Tool Version(download) : Ver.1.4.1.1
 Tool Version(display) : Ver.1.4.1.1
 ECU No : 52D80
 COMMTYPE : SIL(ISO9141)

System Information

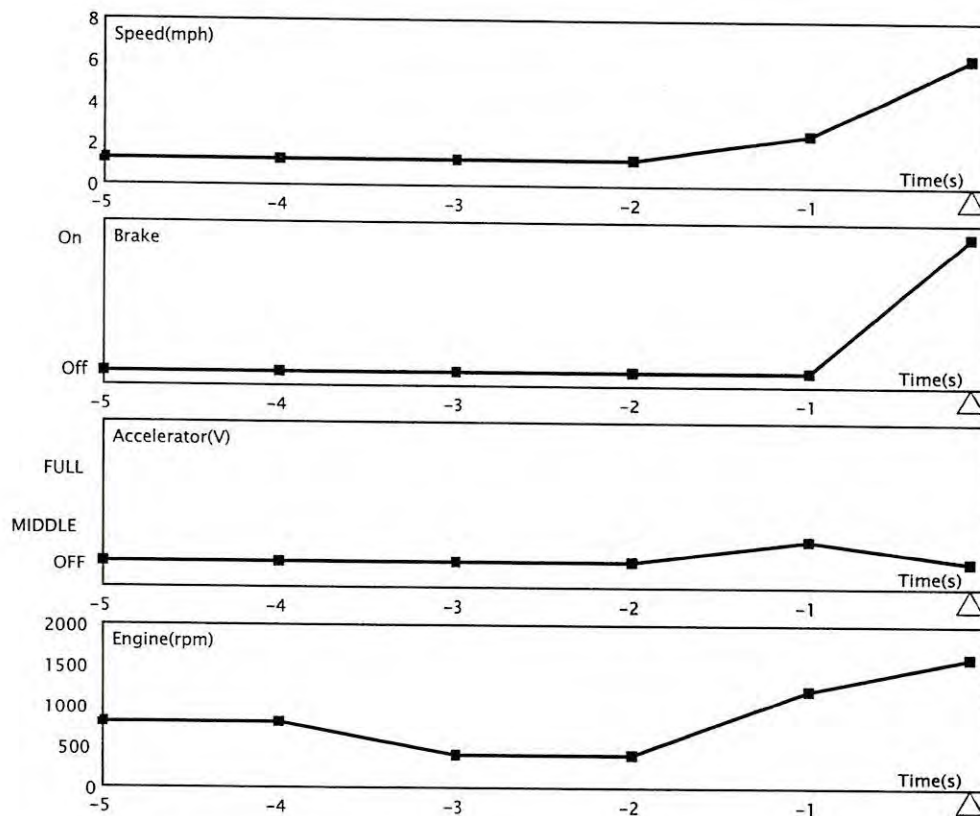
Page No.of Latest PreCrash Data : Page.0
 Time from Previous PreCrash TRG Event : 16381(ms)
 Freeze Signal : UnFreeze
 AB Deployment Flag : NotFired

Diag

Diag Code : 0 0 0 0
 : 0 0 0 0
 : 0 0 0 0
 Ignition Cycle : 0(times)
 Lamp on Term : 0(min.)
 Writing Flag for Diag : FinishedWriting

Occupant

Belt Switch Status Driver : UnBelted
 Belt Switch Status Passenger : UnBelted
 Occupant Detection : Unoccupied
 Seat Position : FW
 Shift Position : Others
 PAB Manual Cut Off(N/A) : (N/A)
 R/O CSA-Manual Cut Off(N/A) : (N/A)
 Writing Flag for PreCrash/Occupant : FinishedWriting



PreCrash Data

Speed	: 1.2	1.2	1.2	1.2	2.5	6.2(mph)
Brake	: OFF	OFF	OFF	OFF	OFF	ON
Accelerator	: 0.78	0.78	0.78	0.78	1.45	0.78(V)
Engine	: OFF	OFF	OFF	OFF	OFF	OFF
	: 800	800	400	400	1200	1600(rpm)

Time from Last PreCrash Data : 900(ms) \triangle

Next Most Recent Pre-Crash Page.1

RecordStatus : Initial State

User Data

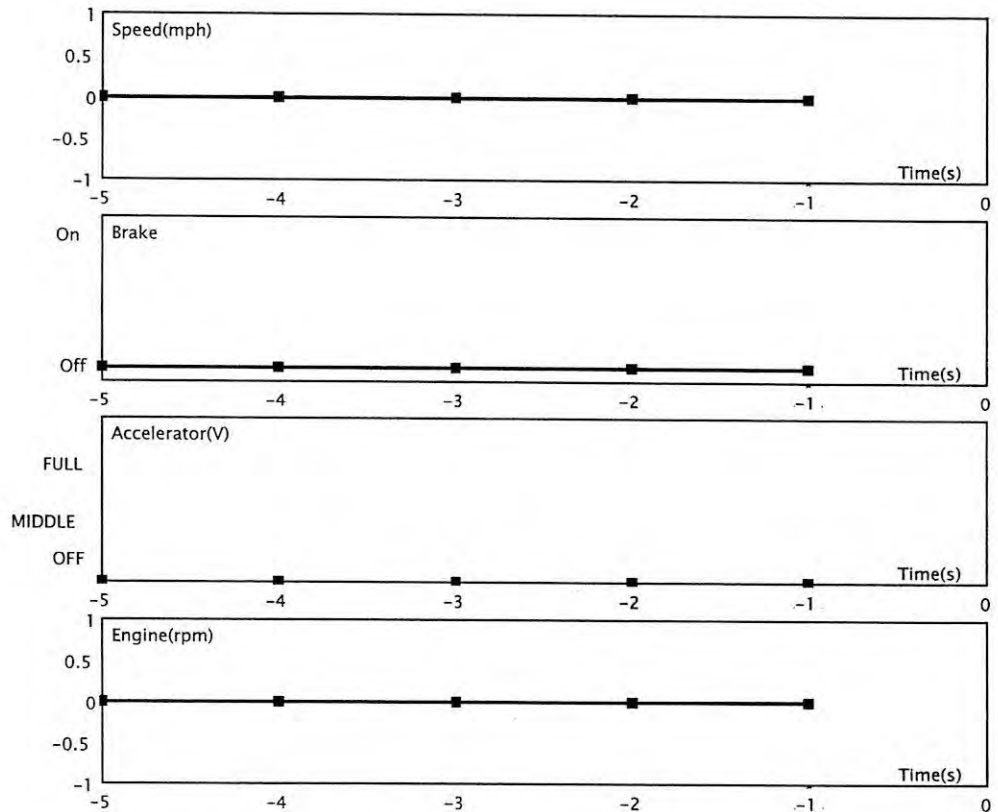
RECORDER : EDR
 Investigation Date : 01/07/2011
 Investigator : Bill Bodach
 Accident Date : December10, 2010
 Vehicle : Toyota Yaris
 Model Year : 2009
 VIN Number : JTDBT90399 [REDACTED]
 Tool Version(download) : Ver.1.4.1.1
 Tool Version(display) : Ver.1.4.1.1
 ECU No : 52D80
 COMMTYPE : SIL(ISO9141)

Diag

Diag Code : 0 0 0 0
 : 0 0 0 0
 : 0 0 0 0
 Ignition Cycle : 0(times)
 Lamp on Term : 0(min.)
 Writing Flag for Diag : Invalid

Occupant

Belt Switch Status Driver : UnBelted
 Belt Switch Status Passenger : UnBelted
 Occupant Detection : Unoccupied
 Seat Position : FW
 Shift Position : N
 PAB Manual Cut Off(N/A) : (N/A)
 R/O CSA-Manual Cut Off(N/A) : (N/A)
 Writing Flag for PreCrash/Occupant : Invalid



PreCrash Data

Speed	: 0.0	0.0	0.0	0.0	0.0	0.0(mph)
Brake	: OFF	OFF	OFF	OFF	OFF	OFF
Accelerator	: 0.00	0.00	0.00	0.00	0.00	0.00(V)
Engine	: 0	0	0	0	0	0(rpm)

Time from Last PreCrash Data : 0(ms) \triangle

Frontal Crash Page.0

RecordStatus : Recorded

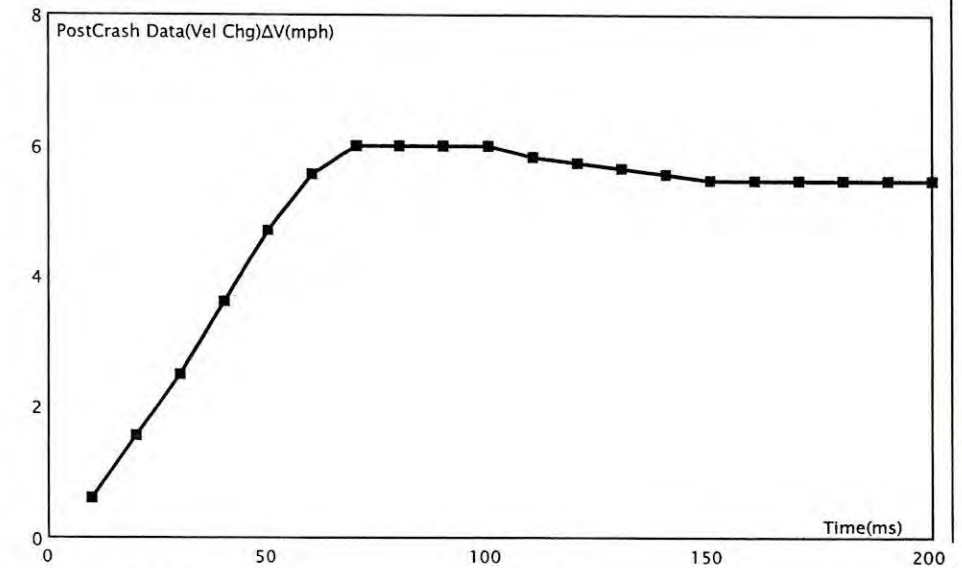
User Data

RECORDER : EDR
 Investigation Date : 01/07/2011
 Investigator : Bill Bodach
 Accident Date : December10, 2010
 Vehicle : Toyota Yaris
 Model Year : 2009
 VIN Number : JTDBT903994 [REDACTED]
 Tool Version(download) : Ver.1.4.1.1
 Tool Version(display) : Ver.1.4.1.1
 ECU No : 52D80
 COMMTYPE : SIL(ISO9141)

Frontal Crash Page.0

Max deltaVx : 6.0(mph)

Writing Flag for Gx : FinishedWriting
 TRG Counter : 1(times)
 Previous Event : NoEvent
 Linked PreCrash Data Page No. : Page.0
 Time from PreCrash TRG : 0(ms)
 Frontal AB Deployment Time : NotFired
 Pretensioner Deployment Time : NotFired
 Deployment Stage Driver : NotFired
 Deployment Stage Passenger : NotFired
 Writing Flag for Frontal Crash : FinishedWriting



Post Crash Data(Vel Chg)

Time(ms)	PostCrash Data(Vel Chg)(mph)
10	0.6
20	1.5
30	2.5
40	3.6
50	4.7
60	5.6
70	6.0
80	6.0
90	6.0
100	6.0
110	5.8
120	5.7
130	5.7
140	5.6
150	5.5
160	5.5
170	5.5
180	5.5
190	5.5
200	5.5

Frontal Crash Page.1



RecordStatus : Initial State

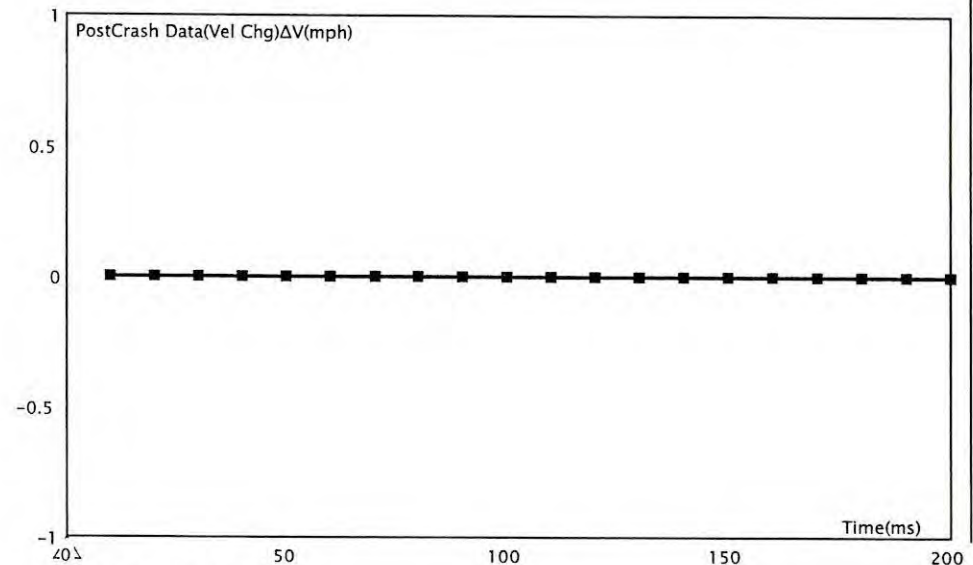
User Data

RECORDER : EDR
 Investigation Date : 01/07/2011
 Investigator : Bill Bodach
 Accident Date : December10, 2010
 Vehicle : Toyota Yaris
 Model Year : 2009
 VIN Number : JTD8T903994 [REDACTED]
 Tool Version(download) : Ver.1.4.1.1
 Tool Version(display) : Ver.1.4.1.1
 ECU No : 52D80
 COMMTYPE : SIL(ISO9141)

Frontal Crash Page.1

Max deltaVx : 0.0(mph)

Writing Flag for Gx : Invalid
 TRG Counter : 0(times)
 Previous Event : Frontal
 Linked PreCrash Data Page No. : Page.0
 Time from PreCrash TRG : 0(ms)
 Frontal AB Deployment Time : 0(ms) 
 Pretensioner Deployment Time : 0(ms) 
 Deployment Stage Driver : NotFired
 Deployment Stage Passenger : NotFired
 Writing Flag for Frontal Crash : Invalid



Time(ms)	PostCrash Data(Vel Chg)(mph)
10	0.0
20	0.0
30	0.0
40	0.0
50	0.0
60	0.0
70	0.0
80	0.0
90	0.0
100	0.0
110	0.0
120	0.0
130	0.0
140	0.0
150	0.0
160	0.0
170	0.0
180	0.0
190	0.0
200	0.0

Chicago, IL

Attention:

Luvinia

U.S. Department of
Transportation (Office of Defect
Investigations
National Highway Traffic (NHTSA)
Safety Administration (WEST BUILDING)
1200 New Jersey Avenue SE
Washington, DC 20590

U.S.

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Mo. Day Year 4 7 11	Month Day 4 8	COD Fee \$	Insurance Fee \$
Time Accepted 2:23 PM	Scheduled Time of Delivery Mon <input type="checkbox"/> 3 PM Tues <input type="checkbox"/> 4 PM Wed <input type="checkbox"/> 9 AM	Total Postage & Fees \$ 18.30	
Flat Rate <input type="checkbox"/> or Weight <input checked="" type="checkbox"/>	Int'l Alpha Country Code	Acceptance Emp. Initials 2	

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Mo. Day		
Employee Signature		
Delivery Attempt	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM
Mo. Day		
Employee Signature		

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National Highway Safety Administration
Office of Defect Investigations
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