



COMMONWEALTH OF PENNSYLVANIA  
OFFICE OF ATTORNEY GENERAL

CL-10595094-1915

BUREAU OF CONSUMER PROTECTION  
Pittsburgh Office  
6<sup>th</sup> Floor Manor Building  
564 Forbes Avenue  
Pittsburgh, PA 15219  
(412) 565-5134  
March 17, 2014

[REDACTED]  
Rochester, PA [REDACTED]

Re: Complaint Form,

MAY 21 2014

Dear Consumer:-

Enclosed is a Bureau of Consumer Protection complaint form. Please complete this form and return it to the address indicated above. Also, enclose copies of any information, including advertisements or contracts, which would substantiate your claim, along with the name of any individuals at the company who are aware of your complaint. This information will help us process your complaint more easily.

On behalf of the Office of Attorney General thank you for bringing this matter to our attention. We hope to be of assistance in resolving your complaint.

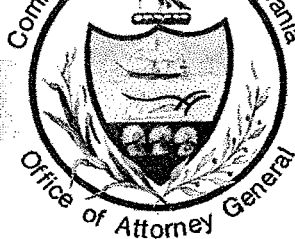
Very truly yours,

A handwritten signature in dark ink, appearing to read "Darlene D. Westfall", written over a faint circular stamp or watermark.

Darlene D. Westfall  
Agent Supervisor

Enclosure  
20

AM  
52814  
SMD



<b>Office Use Only</b> Complaint #	Investigator:	Code 1	Code 2	Bureau of Consumer Protection 564 Forbes Avenue, 6 <sup>th</sup> Floor Pittsburgh, PA 15219 (412) 565-5134
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[REDACTED]

ADDRESS  
[REDACTED]

CITY STATE ZIP COUNTY  
Rochester Twp. PA [REDACTED] Beaver

HOME PHONE NUMBER BEST NUMBER TO CALL DURING THE DAY  
[REDACTED]

NAME OF BUSINESS COMPLAINT IS AGAINST  
General Motors Corporation

NAME OF OWNER OR OTHER INDIVIDUAL TO WHOM YOU COMPLAINED  
WRIGHT Auto/Morrow Motors/Vehicle Safety Hotline/GMC

ADDRESS DAN Maggiant (1-888-327-4336) 1-800-462-2782  
1-866-740-5600 ref# 613665 ref# 71127449  
xt. 11650  
CITY STATE ZIP COUNTY

PHONE

WEBSITE/E-MAIL ADDRESS

PRODUCT(S) OR SERVICE(S) PURCHASED	DATE OF PURCHASE	PURCHASE PRICE
2005 Saturn Ion	2008	\$ 19,000

To what other agencies have you complained? GMC in Detroit Penn Dot/Vehicle Safety Hotline

What action was taken? None

Have you retained an attorney?  Yes  No

If yes, please provide your attorney's name, address and telephone number:

Have you filed a legal action?  Yes  No

If yes, please state WHEN, WHERE and WHAT decision was made?

**Your Age:**

18-29  
 30-44  
 45-59  
 60 or older

**How did you find out about us:**

Visited Office  
 Attended County/Senior Fair or Speaking Engagement  
 State Legislator/Agency  
 News Story  
 Internet  
 Other - Please Specify

(This information will be used for Statistical & Enforcement Purposes Only)

**1-800-441-2555**

Please explain your complaint. You may use additional sheets if necessary. Please print or type clearly. Try to be brief, but be sure to tell WHAT happened, WHEN it happened and WHERE it happened. Be specific about any oral statements the business made to you, ESPECIALLY those that influenced you to deal with the company. Describe events in the order in which they happened. Attach COPIES of all contracts, letters, receipts, canceled checks (front & back), advertisements or any other papers that relate to your complaint.

We feel we have been treated unfairly and unjustly. The 2 car dealerships (Gm) we went to kept passing the buck. We are requesting reimbursement for all the repairs, inconveniences and extreme distress which affected us physically and mentally. Our car broke down in late evening - no Gm dealers were open, so we had the car at the nearest Auto shop. We were without a vehicle for 2 1/2 mo. (12-31-13 -> 3/14). We borrowed friends vehicles for Dr's visits, appointments and everyday chores. I am on Kidney Dialysis - waiting

WHAT WOULD YOU LIKE THE BUSINESS TO DO TO SETTLE YOUR COMPLAINT?

Help us get reimbursement for car repairs and all recalls since defects from 1999 until present. The Gm company was deceptive in recalls that they knew about. Never made aware of vehicles unsafeness during driving. Knew about Ion's defect since 2001, but sold us the Saturn anyway

PLEASE READ CAREFULLY

The Attorney General cannot act as your private attorney. As a law enforcement agency, the primary function of the Office of Attorney General is to represent the public at large by enforcing laws prohibiting fraudulent or deceptive trade practices that impact the public interest.

The Attorney General, through the Bureau of Consumer Protection ("Bureau"), provides a mediation service to consumers where an attempt may be made to mediate individual consumer complaints which fall within the Bureau's jurisdiction. The information you provide will be used in an attempt to resolve your complaint and will be shared with the party(ies) against which the complaint is filed. Additionally, your complaint may be shared with or referred to other Governmental Law Enforcement or Regulatory Agencies.

NOTE that we cannot mediate a matter which is or has been the subject of legal action.

Your complaint will be kept on file and may be used to establish violations of PA law.

By signing below:

1. I certify that the information provided in my complaint, including my identity and any factual statements or allegations, are true and correct to the best of my knowledge, information and belief.
2. I certify that I have read and understand the informational sheet about the mediation process; and, further certify my understanding that the Bureau cannot provide individual legal representation to me.
3. I certify that I have authorized the Bureau to contact the party(ies) against which I have filed a complaint; and, that I further authorize the party(ies) against which I have filed a complaint to communicate with and provide information related to my complaint to the Bureau.
4. I certify that I have authorized the Bureau to transfer my complaint, and any or all attachments related to it, to another federal, state, local or other agency which may have jurisdiction over this matter.

[Redacted Signature]

YOUR SIGNATURE

3-21-14

DATE

For a kidney transplant, I need a safe reliable vehicle because I do alot of traveling to my dialysis clinic. [REDACTED] is also on disability, due to a rare blood disease where clots are formed and break constantly throughout his body. He too has many Dr's appointments.

The Saturn Ion has been a severe inconvenience and still not running since we brought it home. We still owe \$4,800 on the loan, plus make monthly payments on it. The large car repair bill left us pinching pennies for 3 months. We contacted Wright Automotive in Bridgewater PA. they could not help us, told us to call Morrow Motors where we purchased the vehicle, they too, turned us away and even hung up on [REDACTED] because we called multiple times.

The Saturn Ion is sitting in our carport, Unable to be driven, because of the engine light and power steering & ignition switch recall. We no longer feel safe behind the wheel of this vehicle. There have been multiple deaths related to defects which GM knew about and refused to acknowledge. I do not want [REDACTED] our son or myself to be the next fatalities. We tried to purchase another vehicle but had nothing we could afford in our price range. We would like reimbursements for all repairs (warranty or not) pay off the Saturn and purchase a vehicle in our price range. I have enough stress and anxiety waiting for a kidney transplant. I don't want to worry about my life behind the wheel of a defective vehicle.

Sincerely,  
2009 Saturn Ion owner

[REDACTED]  
Rochester PA.  
[REDACTED]

April 8' 2014

Spoke with Monow Motors today (Josh Comoy). Very rude - said since they are not a Saturn dealership, they could not help us. Josh stated someone traded the Saturn in and then <sup>they</sup> resold it to us. At this point they will not help us. Josh is head of Service Dept. 724-846-1440

Spoke to Debbie at GM Corporation day prior. (Service # 71129 269663) / her phone # 1-866-790-5600. She was going to contact Mr. Comoy and we were to call her back if there was any problems. Well now there are even bigger problems!!

Can you please send us reimbursement forms as per advised by Debbie at GM Corporation her phone # 1-866-790-5600

April 15' 14 - went to Metz Crivelli in Beaver PA.

Unable to lease or buy a new car due to poor credit because of medical bills. They will fix ignition switch and check on any other recalls.

4/22/14 → It is now lomo without our vehicle

5/12/14 → According to Crivelli's - another 2-3 more months before parts come in (no vehicle until July?)

# General Motors Product Field Action Customer Reimbursement Request Form

This section to be completed by customer (please print)

Customer Name: [Redacted]

Street Address or P. O. Box Number: [Redacted]

City: Rochester Twp. State: PA Zip Code: [Redacted]

Daytime Telephone Number (include Area Code): [Redacted]

Evening Telephone Number (include Area Code): [Redacted]

Date Request Form and Supporting Documentation Submitted to Dealer: February 2014

Vehicle Identification Number of Involved Vehicle: 1G8AL52F05Z [Redacted]  
(17 Characters)

Mileage at Time of Repair: 77,784 Date of Repair: 6/8/13, 6/12/13, 1/4/13, 3/1/14

Amount of Reimbursement Requested: \$ 8,000 <sup>Eight thousand</sup> (for repairs and inconveniences to us and friends/family)

**THE FOLLOWING DOCUMENTATION MUST ACCOMPANY THIS REQUEST FORM.**

Original or clear copy of all receipts, invoices and/or repair orders that show:

- The name and address of the person who paid for the repair.
- The Vehicle Identification Number (VIN) of the vehicle that was repaired.
- Description of problem, the repair performed, date of repair and who performed the repair.
- The total cost of the repair expense that is being requested.
- Proof of payment for the repair in question and the date of payment.  
(Copy of cancelled check, copy of credit card receipt or receipt for cash payment)

My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.

Customer's Signature: [Redacted]

Submit this request form and the required documents to your GM dealer for processing. All reasonable and customary costs to correct the condition described in the letter that came with this form will be considered for reimbursement. If your request is approved, you will receive a check from your dealer. If your request is denied, you will receive a written explanation for the denial from your dealer. If your request is incomplete, your dealer will advise you what documentation is needed to complete the request and offer you the opportunity to resubmit the request when the missing documents are available. If you have any questions about this process or have waited 30 or more days for a response from your dealer, please contact the GM Customer Assistance Center at 1-800-204-0261.

This section to be completed by dealer (please print)

Bulletin No.: \_\_\_\_\_ Request Approved: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Request Denied: \_\_\_\_\_ Date: \_\_\_\_\_ Reviewed By: \_\_\_\_\_

Reason: \_\_\_\_\_

If denied, please provide a copy of this form to the customer and retain original for your files

ODOMETER DISCLOSURE STATEMENT

Federal law (and State law, if applicable) requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

I, Morrow Chevrolet-Kia, Inc (transferor's name, Print)

state that the odometer now reads 44,281 (no tenths) miles and to the best of my knowledge that it reflects the actual mileage of the vehicle described below, unless one of the following statements is checked.

(1) I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.

(2) I hereby certify that the odometer reading is NOT the actual mileage. WARNING - ODOMETER DISCREPANCY.

MAKE	MODEL	BODY TYPE
SATURN	ION LEVEL	SDN
VEHICLE IDENTIFICATION NUMBER		YEAR
<u>1GBAL52E052</u> [REDACTED]		2005

[Signature]  
TRANSFEROR'S SIGNATURE

Morrow Chevrolet-Kia, Inc  
PRINTED NAME

300 Ninth Ave.  
TRANSFEROR'S ADDRESS (STREET)

Beaver Falls, PA 15010  
CITY STATE ZIP CODE

03/26/08  
DATE

[REDACTED]  
X TRANSFEREE'S SIGNATURE

[REDACTED]  
TRANSFEREE'S ADDRESS (STREET)

Rochester, PA [REDACTED]  
CITY STATE ZIP CODE

ROCHESTER PA



March 14, 2014

REMINDER NOTICE

RE: Account Number:		
Due Date of Oldest Unpaid Payment:		03-10-14
Amount Due:	\$	156.10
Late Charge This Installment.*	\$	0.00
Previous Late Charges Unpaid:	\$	67.84
Other Charges Due Now:	\$	145.51
Total Due Now:	\$	369.45

Dear Nuvel Credit Company Customer,

You may have overlooked sending the amount due as indicated above. Please forward immediately the total due now.

- Pursuant to Federal law, we are giving you this notice:
- **Notice of Intent to Report Negative Information**  
We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit reports.
- **Notice About Credit Bureau Disputes.** If you disagree with information reported about your account to a credit bureau, you can contact the credit bureau directly. Or, you can write to us at: P.O. Box 380901, Bloomington, MN 55438.

Nuvel Credit Company offers a variety of payment options to meet most circumstances. If we can be of assistance, please call the telephone number shown above Monday through Friday from 8:00 AM to 6:00 PM ET.

Sincerely,  
Nuvel Credit Company

\* This amount includes only late charges assessed on this installment when we sent this notice. Even if this amount is zero, you may still have to pay a late charge on this installment if your contract permits us to charge one.

RETURN THIS PORTION WITH YOUR PAYMENT

ACCOUNT NUMBER :  
CUSTOMER NAME :



*GLEN*  
*spoke w/* *10 days 4/25/*  
*\$4,900.65*  
*1.39 per item*

**Nuvel**

Amount Due:	\$	156.10
Late Charge This Installment:	\$	0.00
Previous Late Charges Unpaid:	\$	67.84
Other Charges Due Now:	\$	145.51
TOTAL DUE NOW:	\$	369.45

NUVELL CREDIT COMPANY  
PO BOX 9001952  
LOUISVILLE KY 40290-1952



NUVELL05

DO NOT SEND CASH OR POST DATED CHECKS. ALL CHECKS WILL BE DEPOSITED UPON RECEIPT. MAKE CHECKS PAYABLE TO NUVELL CREDIT COMPANY. RETURN THIS NOTICE WITH YOUR PAYMENT TO THE ABOVE ADDRESS.





724-384-0294

724-775-3323

# MILLIGAN'S — AUTO REPAIR —

3642 52nd Street, New Brighton, PA 15066

QUANTITY	PART NUMBER AND DESCRIPTION	UNIT PRICE
2	FRONT STRUTS A1216.00	432.00
	LABOR	1800.00
	STEERING MOTOR	3000.00
	LABOR	1300.00

ADDRESS: [REDACTED]

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

LICENSE TAG NO: \_\_\_\_\_ UNIT #: \_\_\_\_\_ CUSTOMER ORDER #: \_\_\_\_\_

YEAR: 2005 MAKE: SATURN MODEL: Ion

ODOMETER: \_\_\_\_\_

RECEIVED: \_\_\_\_\_ PROMISED: \_\_\_\_\_

AM DATE: 6/18/13 PM: 11:30 AM: \_\_\_\_\_ WHEN RE: \_\_\_\_\_ YES: \_\_\_\_\_ NO: \_\_\_\_\_

CUSTOMER NOTIFIED: 1/1

PHONES: # \_\_\_\_\_ # CELL: \_\_\_\_\_

#	DESCRIPTION	SERVICE (LABOR)
	LUBE	<input type="radio"/>
	CHANGE OIL	<input type="radio"/>
	FLUSH	<input type="radio"/>

OPER #	SERVICE DESCRIPTION
1	
2	
3	
4	
5	
6	

If repair commencement is authorized but completion is not authorized, a charge will be imposed for disassembly, reassembly or partially completed work.

QUANTITY	GALLONS GAS	OCTANE	\$ AMOUNT	TOTAL SERVICE
		DETERGENT		TOTAL PARTS
	QUARTS OIL	NON DETERGENT		OUTSIDE REPAIRS
	SOLVENT			GAS, OIL, SOLVENT Enviro. Chrg.

HAZARDOUS WASTE (ENVIRO.)

CASH  CHARGE

TOTAL GAS, OIL, SOLVENT

ESTIMATED SERVICE DATE: // /

TOTAL PARTS →

TOTAL SUBLET REPAIRS →

TOTAL: 1042.00 + 8.5 = 1050.5

I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and your employees permission to operate the vehicle herein described for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on this vehicle to secure the amount of repairs thereto. You will not be held responsible for loss or damage to the vehicle or articles left in vehicle in case of fire, theft or any other cause beyond your control. If it becomes necessary for you to employ a collection agency and/or an attorney to collect this account, I the undersigned agree to pay all court costs plus a reasonable attorney's fee and/or collection agency fee.

X



# Eric's Auto Service

638 Pennsylvania Ave. • Rochester, PA 15074

Phone: 724-728-3421 • Fax: 724-728-3420



QTY	PART NO. AND DESCRIPTION	PRICE
8	VALVES	131 20
1	Gal. of Antifreeze	15 00
3	Cans of Cleaner	15 00
1	Head Set	225 48
1	Timing Chain Tensioner	89 95
<b>TOTAL PARTS</b>		<b>476 63</b>

NAME		DATE
ADDRESS		MILEAGE
CITY, STATE, ZIP		LICENCE NUMBER
HOME PHONE	CELL PHONE	BUS. PHONE EXT.
YEAR MAKE & MODEL		
VIN NUMBER - MOTOR NUMBER		ORDER WRITTEN BY

DESCRIPTION OF WORK	AMOUNT
Removed Cylinder Head & 8 Bent Valves and Replaced Timing Chain Tensioner	650 00
LOF w/ Synthetic Oil (Dexos)	59 95
<b>TOTAL LABOR</b>	
<b>TOTAL PARTS</b>	
<b>GAS, OIL &amp; GREASE</b>	
<b>SUBLET REPAIRS</b>	
<b>HAZARDOUS WASTE DISP.</b>	
<b>SUBTOTAL</b>	
<b>SALES TAX</b>	
<b>TOTAL</b>	

RF Tread depth	RF Brake Lining	RR Tread depth	RR Brake Lining
132		132	
LF Tread depth	LF Brake Lining	LR Tread depth	LR Brake Lining
132		132	

Insurance Company:  
 Policy Number:  
 Expiration Date:  
 State Inspection #:  
 State Emissions #:  
 Mechanic's Signature:

3/16/14  
 PAID CHECK # [REDACTED]  
 I hereby authorize the above repair work to be done along with necessary materials. You and your employees may operate above vehicle for purposes of testing, inspection or delivery at my risk. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto. It is understood that this company assumes no responsibility for loss or damage by theft or fire to vehicles placed with them for storage, sale, repair or while road testing.

TOTAL LABOR	709 95
TOTAL PARTS	476 63
GAS, OIL & GREASE	
SUBLET REPAIRS	
HAZARDOUS WASTE DISP.	
<b>SUBTOTAL</b>	<b>1186 58</b>
<b>SALES TAX</b>	<b>71 19</b>
<b>TOTAL</b>	<b>1257 77</b>

Thank You!  
 TOTAL



# Eric's Auto Service

638 Pennsylvania Ave. • Rochester, PA 15074

Phone: 724-728-3421 • Fax: 724-728-3420



QTY	PART NO. AND DESCRIPTION	PRICE	
4	AC Delco platinum Plus	41	20
1	Intake Cleaner Vial	19	95
1	Air Filter	19	77
1	Fwd Filter	37	42
1	S12 Coil Stearns Column	72	07
<b>TOTAL PARTS</b>		<b>189</b>	<b>98</b>

NAME			DATE
ADDRESS			MILEAGE
CITY, STATE, ZIP			LICENCE NUMBER
HOME PHO	CELL PHONE	BUS. PHONE	EXT.
YEAR MAKE & MODEL			
VIN NUMBER - MOTOR NUMBER			
ORDER WRITTEN BY:			

### DESCRIPTION OF WORK

### AMOUNT

✓ Stallings etc  
 Cleaned Throats, Buds + Intake  
 Rn spark plugs, Air Filter  
 Fwd Filter  
 VARN BAS Light, Fuel  
 Rn S12 coil Rn S12  
 coil etc  
 Lof

130.00  
 28.95

RF Tread depth	RF Brake Lining	RR Tread depth	RR Brake Lining
132		132	
LF Tread depth	LF Brake Lining	LR Tread depth	LR Brake Lining
132		132	

TOTAL LABOR	1150	95
TOTAL PARTS	189	98
GAS, OIL & GREASE		
SUBLET REPAIRS		
HAZARDOUS WASTE DISP.		
<b>SUBTOTAL</b>	<b>340</b>	<b>93</b>
<b>SALES TAX</b>	<b>30</b>	<b>76</b>
<b>Thank You!</b>	<b>361</b>	<b>39</b>
<b>TOTAL</b>		

Insurance Company:

Policy Number:

Expiration Date:

State Inspection #:

State Emissions #:

Mechanic's Signature:

I hereby authorize the above repair work to be done along with necessary materials. You and your employees may operate above vehicle for purposes of testing, inspection or delivery at my risk. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto. It is understood that this company assumes no responsibility for loss or damage by theft or fire to vehicles placed with them for storage, sale, repair or while road testing.

X



# IMPORTANT SAFETY RECALL

April 2014

[REDACTED]  
Rochester, PA [REDACTED]

Dear [REDACTED]

This notice is sent to you in accordance with the National Traffic and Motor Vehicle Safety Act.

General Motors has decided that one or more defects as described below which relate to motor vehicle safety exist in all 2005-2007 model year (MY) Chevrolet Cobalt, 2006-2007 MY Chevrolet HHR, 2007 MY Pontiac G5, 2006-2007 MY Pontiac Solstice, 2003-2007 MY Saturn Ion, and 2007 MY Saturn Sky vehicles. As a result, GM is conducting a recall. We apologize for this inconvenience. However, we are concerned about your safety and continued satisfaction with our products.

## IMPORTANT

- This notice applies to your 2005 model year Saturn ION, VIN 1G8AL52F05Z [REDACTED]
- Parts needed for the recall repairs are becoming available for dealers to order. Please contact your General Motors dealer to schedule an appointment to have the recall repairs performed on your vehicle.
- **Until the recall repairs have been performed, it is very important that you remove all items from your key ring, leaving only the vehicle key. The key fob (if applicable), should also be removed from the key ring. Also, when exiting your vehicle, always make sure your vehicle is in "Park", or in the case of a manual transmission, put the transmission into reverse gear and set the parking brake.**
- The recall repairs will be performed for you at **no charge**.

### Why is your vehicle being recalled?

There is a risk, under certain conditions, that your ignition switch may move out of the "run" position, resulting in a partial loss of electrical power and turning off the engine. This risk increases if your key ring is carrying added weight (such as more keys or the key fob) or your vehicle experiences rough road conditions or other jarring or impact related events. If the ignition switch is not in the run position, the air bags may not deploy if the vehicle is involved in a crash, increasing the risk of injury or fatality.

Some of these vehicles may also have a condition in which the ignition key may be removed when the ignition is not in the "Off" position. If the ignition key is removed when the ignition is not in the "Off" position, unintended vehicle motion may occur: (a) for an automatic transmission, if the transmission is not in "Park"; or (b) for a manual transmission, if the parking brake is not engaged and the transmission is not in reverse gear. This could result in a vehicle crash and occupant or pedestrian injuries.

**you remove all items from your key ring, leaving only the vehicle key. The key fob (if applicable), should also be removed from your key ring. Also, when exiting your vehicle, always make sure your vehicle is in "Park", or in the case of a manual transmission, put the transmission into reverse gear and set the parking brake.**

**What will we do?**

Your General Motors dealer will replace the ignition switch on your vehicle whether it is the original switch or a replacement. For vehicles that have not previously had an ignition cylinder replacement under warranty, dealers will replace the ignition cylinder. Dealers will also cut and, if necessary, re-learn two ignition/door keys for each vehicle. This service will be performed for you at **no charge**. Because of service scheduling requirements, it is likely that your dealer will need your vehicle longer than the actual service correction time of approximately 90 minutes.

If required, your dealer will provide you with some form of courtesy transportation at no charge while your vehicle is at the dealership for this repair.

**What should you do?**

You should contact your General Motors dealer to arrange a service appointment as soon as possible. **Until the recall repair has been performed, it is very important that you remove all items from your key ring, leaving only the vehicle key. The key fob (if applicable), should also be removed from your key ring. Also, when exiting your vehicle, always make sure your vehicle is in "Park", or in the case of a manual transmission, put the transmission into reverse gear and set the parking brake.**

**Did you already pay for this repair?**

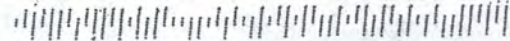
**Even though you may have already had the ignition switch replaced, you will still need to take your vehicle to your dealer to have the switch replaced.** If you have paid to have your vehicle's ignition switch or ignition cylinder replaced, please complete the enclosed reimbursement form and present it to your dealer with all required documents. Working with your dealer will expedite your request, however, if this is not convenient, you may mail the completed reimbursement form and all required documents to Reimbursement Department, PO Box 33170, Detroit, MI 48232-5170. The completed form and required documents must be presented to your dealer or received by the Reimbursement Department by May 31, 2015, unless state law specifies a longer reimbursement period.

**Do you have questions?**

If you have questions or concerns that your dealer is unable to resolve, please contact the Saturn Customer Assistance Center at 1.800.553.6000 (TTY 1.800.833.6000).

If after contacting your dealer and the Customer Assistance Center, you are still not satisfied we have done our best to remedy this condition without charge and within a reasonable time, you may wish to write the Administrator, National Highway Traffic Safety Administration, 1200 New Jersey Avenue, SE., Washington, DC 20590, or call the toll-free Vehicle Safety Hotline at 1.888.327.4236 (TTY 1.800.424.9153), or go to <http://www.safercar.gov>. The National Highway Traffic Safety Administration Campaign ID Numbers for these recalls are 14V047 and 14V171.

chester, PA



U.S. Dept. of Transportation  
National Highway Traffic Safety Administration  
Office of Defects and Investigation (NVS-210)  
1200 New Jersey Ave. Southeast  
West Building  
Washington DC 20590