Form Approved: O.M.B. No. 2127-0038

U.S. Department of Transportation
National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 118	
Date Received: 11-AUG-2000	Od_or ____ ____ rt_dt ____ ____ od_rt ____ ____ up_ltr ____ ____
	Reference No. 867619

[redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
3FASP15JXSR154560	FORD	ESCORT	1995	

Purchase Date
☒ New ☐ Used

Dealer's Name _____
City _____ State _____ Zip Code _____

Engine Size (CID/CC/L) _____
No Cylinders _____

☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☐ Yes ☒ No	☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____ ☐ Sport Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
06110000	FUEL:FUEL TANK ASSEMBLY	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
	04-AUG-2000 113000	☐ Yes ☐ No	☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

FUEL IS LEAKING FROM PPER PART OF FUEL TANK, BY THE HEAT SHIELD ATTACHMENT. EXACTLY SAME PROBLEM AS STATED IN RECALL # 97V144000 FUEL TANK. OWNER WAS TOLD THAT THIS VEHICLE WAS NOT INCLUDED IN RECALL AND WOULD NOT BE SERVICED FREE. THE PROBLEM HAS NOT BEEN CORRECTED. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

CONTINUE ON BACK IF NEEDED

Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation
National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 118

Date Received: 11-AUG-2000

Od_or
rt_dl
od_rt
up_ltr

Reference No. 867619

OWNER INFORMATION (Type or Print)

[redacted] 626378

Work Num [redacted]
Home Num [redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of an authorization, NHTSA will NOT provide your name and address to the vehicle manufacturer.

Signature of Owner [redacted] Date 8/28/00

VEHICLE INFORMATION

Vehicle Iden. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
3FASP15JXSR154560	FORD	ESCORT	1995	113,800

Purchase Date: 11-3-95 ☒ New ☐ Used
Dealer's Name: Landmark Ford
City: Tigard State: OR Zip Code:
Engine Size (CID/CC): 1.9 No Cylinders: 4
☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

Transmission Type: ☒ Manual ☐ Automatic
Antilock Brakes: ☐ Yes ☒ No
Restraint System: ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag
Cruise Control: ☐ Yes ☒ No
Drive Train: ☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type: ☒ Car ☐ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other
Body Style: ☐ 2-Door ☐ 4-Door ☒ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
06110000	FUEL:FUEL TANK ASSEMBLY	☐ Left ☐ Right ☐ Front ☐ Rear	☒ Original ☐ Replacement

No of Failures: 1
Date(s) of Failure(s): 04-AUG-2000
Mileage at Failure(s): 113000
Vehicle Speed at Failure(s):
Failed Part(s) Available? ☒ Yes ☐ No
NHTSA Previously Contacted? ☐ Yes ☒ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s) Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	$	☐ Yes ☒ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

FUEL IS LEAKING FROM UPPER PART OF FUEL TANK, BY THE HEAT SHIELD ATTACHMENT. EXACTLY SAME PROBLEM AS STATED IN RECALL # 97V144000 FUEL TANK. OWNER WAS TOLD THAT THIS VEHICLE WAS NOT INCLUDED IN RECALL AND WOULD NOT BE SERVICED FREE. THE PROBLEM HAS NOT BEEN CORRECTED. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

Part arrived 2 weeks later, problem resolved. Attached receipt copies are for gas tank part, labor to replace part, and 2-week rental car (economy compact car) for use during part order process. Photographs of crack in original gas tank; mechanic is pointing to location of hairline crack.

CONTINUE ON BACK IF NEEDED

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.*

D	O	T												MANUFACTURER/TIRE NAME	SIZE

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

My goal is to have Ford cover the costs I incurred, associated with the gas tank crack, which was the same problem as in the recall referred to on the other page side.

Costs:

gas leak investigation	$35.00
gas tank (part)	$321.41 (includes 7.75% tax)
freight charge	$30.00
labor to replace tank	$105.00
gas to replace lost gas	$7.00
rental car for August 9-23, 2000	$351.78

One Photo was included of the gas tank crack, indicating its location

(Other photos, closer to tank, did not come out But mechanic will verify nature of crack.)

Total cost = $860.19

☆ U.S. G.P.O.: 1992 – 623-997 / 60046

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use $300

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

Nº 14329

FOLSOM AUTOTECH
1126 SIBLEY ST • FOLSOM, CA 95630-3506
PHONE: (916) 985-0274
B.A.R. REG.# AB145087

[redacted]

LICENSE NO. KTV02595 | MAKE & MODEL Ford Escort | MILEAGE 113673 | DATE 8/12/03

CROSS REF. | TIME REQUESTED 3:00 | WRITTEN BY

DESCRIPTION OR PART NO.	SALE AMOUNT
Part Check # 0954	

☐ CATALYTIC CONVERTER ☐ MUFFLER

HAZ. MAT. DISPOSAL FEE
OIL FILTER
QTS. OIL @
QTS. AUTO TRANS. FLUID @
GALS. COOLANT/ANTIFREEZE @

REFRIGERANT — POUNDS RECOVERED ___ LBS ___ OZ — POUNDS USED ___ LBS ___ OZ

ALL PARTS INSTALLED ARE NEW UNLESS SPECIFIED OTHERWISE — TOTAL PARTS

TOTAL HAZARDOUS WASTE DISPOSAL UNITS

SUBLET REPAIRS — TOTAL SUBLET REPAIRS

LABOR INSTRUCTIONS

Cust Smell Gas Rear Area
Found leak at Gas Tank (Cracked)

Both Gas Straps/Front Extend Rusted No Repair Needs New Parts

WARRANTIES FOR AAA MEMBERS – 12 MONTHS PARTS AND 4,000 MILES LABOR

By law, you may choose another Licensed Smog Check Facility to perform any needed repairs or adjustments which the Smog Check test indicates are necessary.

DESCRIPTION	✓	LABOR AMOUNT
1 LUBRICATION		
2 CHANGE OIL		
3 CHANGE OIL FILTER		
4 TRANSMISSION SERVICE		
5 AIR CONDITIONING SERVICE		
6 FLUSH COOLING SYSTEM		
7 REPLACE HOSES		
8 REPLACE BELTS		
9 BALANCE WHEELS		
10 ROTATE TIRES		
11 INSPECT BRAKES		
12 SMOG CHECK		
SMOG RETEST		
ESTIMATE		35.00

NOT RESPONSIBLE FOR DAMAGES DUE TO DYNAMOMETER TESTING: ☐ TRACTION CONTROL ☐ FT. AWD ☐ AWD
DISENGAGEABLE ☐ YES ☐ NO
CHANGE OF OWNERSHIP
☐ INITIAL CALIFORNIA REGISTRATION
☐ TAMPERED EMISSION CONTROL EQUIPMENT
☐ GROSS POLLUTER (SEE REVERSE SIDE)

[redacted]
CUSTOMER SIGNATURE — ☐ SAVE OLD PARTS

THIS ESTIMATE IS BASED ON OUR INITIAL INSPECTION AND DOES NOT COVER ANY ADDITIONAL PARTS AND LABOR WHICH MAY BE REQUIRED AFTER THE WORK HAS BEEN STARTED.

TOTAL ORIGINAL ESTIMATE INCLUDING HAZARDOUS WASTE DISPOSAL $ 35.00 | TEAR DOWN ESTIMATE $ | I understand that my vehicle will be reassembled within ___ days at the rate shown above if I choose not to authorize service. | TOTAL REVISED ESTIMATE $

DATE | TIME | PERSON CONTACTED | CONTACTED BY | ☐ BY PHONE ☐ IN PERSON | ITEMS DISCUSSED | #

I ACKNOWLEDGE AND APPROVE ALL REPAIRS AS LISTED AND ANY INCREASE IN THE ORIGINAL ESTIMATED PRICE. CUST. SIGN. X

RECOMMENDED SERVICES

SERVICE AND PARTS SALES

DESC.	SALE
LABOR	35.00
PARTS	
SUBLET REPAIRS	
HAZARDOUS WASTE DISP.	
SMOG TEST & INSPECT FEE	
SMOG CERT.	
SALES TAX	
TOTAL	35.00

OUR LABOR IS WARRANTED FOR 90 DAYS OR 4,000 MILES WHICHEVER OCCURS FIRST. WARRANTY VALID ONLY IF RETURNED TO US, AT THE CUSTOMER'S EXPENSE, FOR ADJUSTMENT.
NO LABOR WARRANTY FOR MISUSE, ABUSE OR CUSTOMER SUPPLIED PARTS.

SALES DRAFT

FOLSOM AUTOTECH
[illegible] SIBLEY STREET
FOLSOM, CA 95630
TERMINAL 2[illegible]3[illegible]4

22[illegible]2051[illegible]
08/09/2000 15:57:[illegible]
VSA 4[illegible]65[illegible]00[illegible]18[illegible] EXP. [illegible]01
RETL. TRANS. ID. 000222[illegible]52[illegible]
[illegible] [illegible]
AUTH. CODE 009384

SALE TOTAL $430.71

CUSTOMER COPY

[redacted] DATE 8-9-00

[redacted]

CASH	C.O.D.	CHARGE	ON ACCT		

QTY.	DESCRIPTION	AMOUNT
1	Fuel tank	298 79
1	Rhs seat belt	100 94
	Paid	
	cc	
	Q/	
	TAX	30 89
RECEIVED BY	TOTAL	430 71

Thank You

All claims and returned goods MUST be accompanied by this bill

№ 14340

ENGINE NO.	YR	MAKE & MODEL	MILEAGE	DATE
[illegible]	75	Ford Escort	113623	8-8-9[illegible]

[redacted]

FOLSOM AUTOTECH

9128 SIBLEY ST • FOLSOM, CA 95630-8506
PHONE: (916) 985-0274
B.A.R. REG.# AB145087

WRITTEN BY: [illegible]

DESCRIPTION OR PART NO.

QTY.	DESCRIPTION OR PART NO.	SALE AMOUNT
	[illegible]	
	CATALYTIC CONVERTER / MUFFLER	
	TIRE DISPOSAL FEE	
	OIL FILTER	
	QTS. OIL @	
	QTS. AUTO TRANS. FLUID @	
	GALS. COOLANT/ANTIFREEZE @	
	REFRIGERANT — POUNDS RECOVERED ___ LBS ___ OZ; POUNDS USED ___ LBS ___ OZ	

ALL PARTS INSTALLED ARE NEW UNLESS SPECIFIED OTHERWISE — **TOTAL PARTS**

TOTAL HAZARDOUS WASTE DISPOSAL UNITS

SUBLET REPAIRS	
Freight Charge	30.00

TOTAL SUBLET REPAIRS

LABOR INSTRUCTIONS

LABOR INSTRUCTIONS	ESTIMATE	LABOR AMOUNT
Replace Seat Belt R[illegible] Pre Paid Fees		140.00
Replace Fuel tank Pre Paid Pars.		105.00

WARRANTIES FOR AAA MEMBERS – 12 MONTHS PARTS AND 6,000 MILES LABOR

By law, you may choose another Licensed Smog Check Facility to perform any needed repairs or adjustments which the Smog Check test indicates are necessary.

[redacted]

NOT RESPONSIBLE FOR DAMAGES DUE TO DYNAMOMETER TESTING
TRACTION CONTROL ☐ F/4WD ☐ AWD
DISENGAGEABLE TIRES ☐ NO

☐ SAVE OLD PARTS

☐ CHANGE OF OWNERSHIP
☐ INITIAL CALIFORNIA REGISTRATION
☐ TAMPERED EMISSION CONTROL EQUIPMENT
☐ GROSS POLLUTER (SEE REVERSE SIDE)

CUSTOMER SIGNATURE

THIS ESTIMATE IS BASED ON OUR INITIAL INSPECTION AND DOES NOT COVER ANY ADDITIONAL PARTS AND LABOR WHICH MAY BE REQUIRED AFTER THE WORK HAS BEEN STARTED.

TOTAL ORIGINAL ESTIMATE INCLUDING HAZARDOUS WASTE DISPOSAL FEE	FIRST REVISED ESTIMATE	I understand that my vehicle will be reassembled within ___ days of the date shown above if I choose not to authorize service.	TOTAL REVISED ESTIMATE
$ 210 [illegible]	$		$

DATE	TIME	PERSON CONTACTED	CONTACTED BY	☐ BY PHONE ☐ IN PERSON #	☐ ITEMS DISCUSSED

I ACKNOWLEDGE AND APPROVE ALL REPAIRS AS LISTED AND ANY INCREASE IN THE ORIGINAL ESTIMATED PRICE. CUST. SIGN. X

DESCRIPTION	✓	LABOR AMOUNT
1 LUBRICATION		
2 CHANGE OIL		
3 CHANGE OIL FILTER		
4 TRANSMISSION SERVICE		
5 AIR CONDITIONING SERVICE		
6 FLUSH COOLING SYSTEM / REPLACE		
7 REPACK FRONT BEARINGS		
8 BALANCE WHEELS		
9 ROTATE TIRES		
10 INSPECT BRAKES		
11 SMOG CHECK		
12 SMOG RETEST		

RECOMMENDED SERVICES

SERVICE AND PARTS SALES

DESC.	SALE
LABOR	245.00
PARTS	
SUBLET REPAIRS	30.00
HAZARDOUS WASTE DISP. / Gas	7.00
SMOG CERTIFICATE FEE	
SALES TAX	
TOTAL	282.00

OUR LABOR IS WARRANTED FOR 90 DAYS OR 4,000 MILES - WHICHEVER OCCURS FIRST. WARRANTY VALID ONLY IF RETURNED TO US, AT THE CUSTOMER'S EXPENSE, FOR ADJUSTMENT. NO LABOR WARRANTY FOR MISUSE, ABUSE OR CUSTOMER SUPPLIED PARTS.

Hertz Local Edition

[redacted] STREET
FOLSOM CA 95630
916-608-9970

Rental Record No. H1146007 2

TO BE PAID BY

4465 3400 0201 8328

10/99 09/01 V 97

CC TYPE	CC # [redacted]	EXP. DATE	9/2001
R N		DOB	08/23/1968
#			
AD		PHONE	9166084334
CI		ZIP	95630
DRIVER'S LIC. #	H6587712	ST. CA	EXPIRES 08/23/2004
D.L AUTH #	1410067	RES. ID #	0
EMPLOYER	EDS	PHONE	9163088826
DUE LOC	CAROLE FOLSOM	AREA/LOC. #	07226601
RENTAL LOC.	CAROLE FOLSOM	AREA/LOC. #	07226601

DUE DATE 08/16/2000

AUTHORIZATION TO RECEIVE DIRECT PAYMENT FROM:

BILL TO		AUTH. #	
ACCT #	CO P2	DO.	
ADJUSTER NAME		CLAIM #	
ADDRESS		PHONE #	
CITY		ST.	ZIP
INSURED'S NAME		POLICY #	

FOR INFORMATION ABOUT YOUR RESPONSIBILITY FOR LOSS OR DAMAGE TO THE RENTED VEHICLE AND ANY LDW AND PDW, SEE PAR. 4 OF THE RENTAL AGREEMENT TERMS AND CONDITIONS (THE RENTAL TERMS) WHICH APPEAR ON THE FOLDER (SCA 19000211) DELIVERED TO YOU WITH THIS RENTAL RECORD. THE COST FOR EACH FULL OR PARTIAL DAY OF LDW AND PDW APPEARS ON THIS RENTAL RECORD. IF YOU DECLINE OPTIONAL LDW, PAR. 10(B) OF THE RENTAL TERMS WILL APPLY TO THIS RENTAL. BY SIGNING BELOW, YOU ACKNOWLEDGE THAT HERTZ LOCAL EDITION CORP. PROVIDES NO LIABILITY PROTECTION TO YOU FOR THIS RENTAL. YOUR OWN AUTO INSURANCE (OR THAT OF ANY AUTHORIZED OPERATOR) MAY OR MAY NOT PROVIDE SUCH LIABILITY PROTECTION. BY SIGNING BELOW, YOU ACKNOWLEDGE THAT YOU HAVE READ, UNDERSTAND, AGREE TO AND AGREE TO THE ABOVE AND THE RENTAL TERMS

[redacted]

LDW	ACCEPT X	$ 9.00	DECLINE	LOSS DAMAGE WAIVER (LDW) By initials, You accept at the rate shown, or decline LDW. LDW is not insurance.
PDW	ACCEPT X	$ 6.99	DECLINE	PARTIAL DAMAGE WAIVER (PDW). By initials, You accept at the rate shown, or decline. PDW. PDW is not insurance.
LIS	ACCEPT X	$ 13.95	DECLINE	LIABILITY INSURANCE SUPPLEMENT (LIS). By initials, You accept at the rate shown, or decline, LIS. You acknowledge reading Summary of Coverage provided to You
PAI & PEC	ACCEPT X	$ 4.75	DECLINE	PERSONAL ACCIDENT INSURANCE (PAI) & PERSONAL EFFECTS COVERAGE (PEC). By initials, You accept at the rate shown, or decline PAI & PEC. You acknowledge reading Summary of Coverage provided to You.
FPO	ACCEPT X	$ 6.99	DECLINE	FUEL PURCHASE OPTION (FPO). By initials, You accept at the amount shown, or decline FPO. NO REFUNDS GIVEN FOR FUEL LEFT IN THE CAR AT RETURN.

Authorization to Leave State of Rental ☐ YES
States Permitted: [redacted]

HLE Rep. Authorizing X [redacted]

RATE PLAN IN	AREA/LOC. IN 07226601	DATE/TIME IN	08/23/2000 14:50
RATE PLAN OUT	AREA/LOC. OUT 07226601	DATE/TIME OUT	08/09/2000 14:07
CAR CLASS RES.	AREA/LOC. DUE 07226601	EXCHANGE DATE/TIME	

ORIGINAL VEHICLE		EXCHANGE VEHICLE	
UNIT # 3004938	OWN # 238	UNIT #	OWN #
LICENSE # 4LY1250		LICENSE #	
MAKE / YEAR FOCUS	98 B	MAKE / YEAR	
MILEAGE IN	961	MILEAGE IN	
MILEAGE OUT	328	MILEAGE OUT	
MILES DRIVEN	633	MILES DRIVEN	
MILES ALLOWED	633	MILES ALLOWED	
FUEL OUT (1/8's) 8/8	FUEL IN (1/8's) 8/8	FUEL OUT (1/8's)	FUEL IN (1/8's)
REFUELING RATE .12 /MILE	2.99 /GAL	REFUELING RATE /MILE	/GA.

VEHICLE DAMAGE REPORT

96520 CHECK OUT

X = DENT S = SCRATCH O = MISSING

96524 CHECK IN

X = DENT S = SCRATCH O = MISSING

REMARKS

150 Miles Free /Day

COMPUTATION OF CHARGES
☐ CALENDAR DAY ☒ 24 HR DAY

DAYS	0 @ 39.99	0.00
EXTRA HRS	@ 13.99	
EXTRA DAYS	@	
WEEK	2@	319.98
MILES	0@ 0.00	0.00
SUB TOTAL ▶		319.98
		0.00
SUB TOTAL ▶		319.98
ADD'L CHARGES ACCT. OR DESC.		
		0.00
FUEL + SERVICE		
FPO		
SUB TOTAL		319.98
TAX	7.75 %	24.80
LDW	$	0.00
PDW	$	0.00
LIS	$	0.00
PAI/PEC	$	0.00
GPS	6.50 /DAY	7.00

DEPOSITS

DATE	AMOUNT	CSH/CHK	INTLS

CLEANING/OTHER	0.00
TOTAL CHARGES ▶	351.78
MISC (DEBIT(CR)) ACCT # OR DESC.	
LESS DEPOSIT	
LESS PAYMENT	
BAL. DUE	351.78

CREDIT APPROVALS

AUTH #	AMOUNT	DATE
00063	250.00	8/23

DUE FROM INS. CO.
CUST 351.78

REFUND ☐ CASH ☐ QUICK
EXCHANGE ID #
PREP ID # 7953 COMP ID # 24000

10/10-66/50

ET86 2hTL TOL MILES

RENTAL DAYS 14

Rental Record No. H1146007 2

CUSTOMER COPY-RETURN

401015* (6/99)