
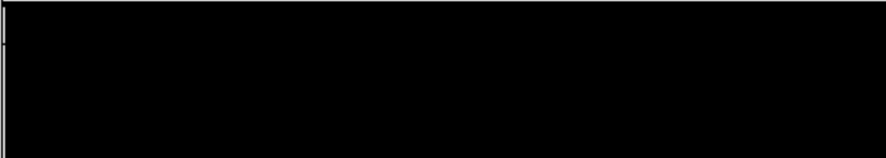


DOT Auto Safety Hotline		FOR AGENCY USE ONLY	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
		Date Received 30-AUG-2000	
		Od_or _____ rt_dt _____ od_rt _____ up_ltr _____	
		Reference No. 869136	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input type="checkbox"/> 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.) <small>(located at bottom of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year
1GHCU06D4MT305382	FIRESTONE	FIRESTONE	1900
Purchase Date	Dealer's Name _____	Engine Size (CID/CCL) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	
Transmission Type	Antilock Brakes	Restraint System	Cruise Control
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driver Side Airbag <input type="checkbox"/> Passenger Side Airbag <input type="checkbox"/> Inflator <input type="checkbox"/> 2-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			Drive Train
			<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
			Vehicle Type
			<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other
			<input type="checkbox"/> Sport Utility Truck <input type="checkbox"/> Motorcycle
			Body Style
			<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component Q2700000	Part Name(s) TIRES	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities
			Estimated Property Damage
			Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
15 INCH TIRES, ORIGINAL EQUIPMENT WITH OLDSMOBILE SILHOUTTE 1991, CONSUMER WAS DRIVING AT APPROX. AT 80 MPH WHEN THE FRONT PASSENGER TIRE BLEW OUT, TREAD COMPLETELY SHREDDED AND CAUSED DAMAGE TO THE SIDE OF VEHICLE. THE NEXT DAY THE FRONT DRIVER TIRE EXPERIENCED THE SAME DEFECT ALSO CAUSING DAMAGE TO THE SIDE OF VEHICLE. CONSUMER HAD ALL FOUR TIRES REPLACED WITH FIRESTONE ST70C.			
CONTINUED ON BACK IF NEEDED			
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 to 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.			



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 160

Date Received

03 OCT 17 AM 10:31
30-AUG-2000

Od. or
rt. dr
od. rt
up. lr

OWNER INFORMATION (Type or Print)

632291

DEFECTS INVESTIGATION

Reference No.

869136

Work Number

Home No.

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?

YES

NO

In the absence of an

name and address to the vehicle manufacturer.

Signature of Owner

Date 10/10/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) 1GHCU06D4MT305382
Vehicle Make FIRESTONE
Vehicle Model FIRESTONE
Vehicle Year 1990 1991
Current Odometer Reading 73,900

Purchase Date 1992
Dealer's Name _____
City _____ State _____ Zip Code _____
Engine Size (CID/CC/L) _____
No. Cylinders _____
 Turbo
 Diesel
 Gas
 Fuel Injectio

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02700000
Part Name(s) TIRES
Location Left Right Front Rear
Failed Part(s) Original Replacemen
No. of Failures Two slow outs
Date(s) of Failure(s) Aug 7, 1997 and Aug 8, 1997
Mileage at Failure(s) 20,000
Vehicle Speed at Failure(s) 80 mph and 55 mph
Failed Part(s) Yes No
NHTSA Previously 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 Yes No
Fire Yes No
Number of Persons Injured 0
Number of Fatalities 0
Estimated Property Damage ~ 200.00
Reported to Police Yes No

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

15 INCH TIRES, ORIGINAL EQUIPMENT WITH OLDSMOBILE SILHOUTTE 1991. CONSUMER WAS DRIVING AT APPROXIMATELY 80 MPH WHEN FRONT PASSENGER TIRE BLEW OUT, TREAD COMPLETELY SHREDDED, AND CAUSED DAMAGE TO SIDE OF VEHICLE. NEXT DAY FRONT DRIVER'S TIRE EXPERIENCED THE SAME DEFECT. IT ALSO CAUSED DAMAGE TO THE SIDE OF VEHICLE. CONSUMER HAD ALL FOUR TIRES REPLACED WITH FIRESTONE ST70C. *AK

CONTINUE ON BACK IF NEEDED

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Re: Firestone Tires blow out and shredded
from Oldsmobile Silhouette (Mini-Van)

On June 29, 1997, I went to the Firestone Tire store in Hollywood, CA and had my tires checked. The salesperson told me I needed to replace one of them, which I did. (replaced Tire #1, enclosed statement copy).

On Aug 7, 1997, I was away from home (Hollywood, CA), in the desert area of Palmdale. I was working with an entire production company, shooting a commercial. It was over 100 ° F. I was traveling about 80 mph when my Front Passenger tire blew out and the tread completely shredded. It was a Firestone tire. (15 inch, not sure of dot #). I replaced it with my spare.

The next day Aug 8, 1997, I was still in Palmdale, similar temperature, I was traveling about 55 mph and my Front Driver tire blew out, tread completely shredded. It was a Firestone tire. (15 inch, not sure of dot #). Since, I was using my spare tire, I had to get towed to the closest Firestone store. I had assured myself of a coworker to follow behind me since I was using my spare to get around. He witnessed the blow out as it unfolded on the freeway. He drove me to the closest Firestone store where they dispensed a tow truck to retrieve my vehicle.

I chose to go to Firestone, since the tires that had blown out were Firestone, and maybe they knew of a problem I was not aware of. The sales person was not sure why the tires blew out and shredded since on June 29, 1997, (just a few months prior) the salesperson of the Hollywood store had said my tires were fine. I bought 2 new Firestone tires. (replaced Tires #2 and #3, enclosed is a copy of my visa receipt).

On Aug 9, 1997, I returned to Hollywood. The side of my vehicle had oil/tire marks all over it and a rod had been torn off. I went to my local car wash where I had the tire marks removed. (enclosed is visa receipt). Also, by then I was concerned about the 4th tire, and replaced it as well at the Firestone in Hollywood. (replaced Tire #4, enclosed receipt).

I hope this information can be of help to your agency. Do not hesitate to contact me if you need further information.

Sincerely,

A large black rectangular redaction box covers the signature area. A thin line extends from the right side of the box towards the right margin.

W.S. Merrill Lynch

CMA Cash Management Account
Monthly Statement

I enclose these receipts for proof of data.

Account No.	Taxpayer No.	Page	Statement Period
			06/28/97 TO 07/25/97

Summary of Visa Transactions/Continued

Transaction Date	Date Cleared	Description	Location	Amount
07/24	07/25			

Total Visa Activity

You have used 6 Free ATM transaction(s) of the \$2 available this year.

Summary of Checking Transactions

Check Number	Date Written	Date Cleared	Payee	Amount
1143	06/29	07/01	FIRESTONE	\$68.74

Trace #1

IRMAIN

END OF STATEMENT

JULY 1997

Please advise your Financial Consultant immediately of any discrepancies in equities transactions or investment activity on your statement of account or if you are unable to identify your address. Send all correspondence relating to these matters to the office serving your account. For all other questions about your statement, please inquire by telephone to 1-800-724-INFO (1-800-724-6363) or in writing to Merrill Lynch, Pierce, Fenner & Smith Inc., 200 Pine Street, New York, N.Y. 10280-3000. When making inquiries, please give your account number. See back of page for details of key terms.

Merrill Lynch, Pierce, Fenner & Smith Inc.
Member, Securities Investor Protection Corporation (SIPC)

Code 70878 (R2-96)

Merrill Lynch

CMA Cash Management Account
Monthly Statement

Account No.	Statement Period
██████████	07/26/97 TO 08/29/97
Tabular No.	Page
██████████	01

08/08 *OK cleared* 08/12 PALMDALE FRSTN08500027 PALMDALE CA \$154.90

NIC #2
Fire #3

Total Via Activity
You have had 7 tree ATM transactions of the \$2 available this year.

AMPLIS

Please advise your Financial Consultant immediately in writing if you are unable to receive your statement or if you are unable to change your address. Send all correspondence relating to this account to the office serving your account. For all other correspondence, by telephone to 1-800-CMA-INFO (1-800-226-2600) or in writing to Merrill Lynch, Pierce, Fenner & Smith Inc., 270 Park Avenue, New York, NY 10022-6000. When making inquiries, please give your account number. See back of page for definitions of key terms.

Merrill Lynch, Pierce, Fenner & Smith Inc.
Member, Securities Investor Protection Corporation (SIPC)
We urge you to keep this statement with your investment records.

Code 1087R (02-96)

August 1997

CMA Cash Management Account
 Monthly Statement

Merrill Lynch

Account No.	Taxpayer No.	Page	Statement Period
			07/26/97 TO 08/29/97

1365 08/09 08/12 FIRESTONE \$68.74

OK cleared

Fire #4

199708

END OF STATEMENT

August 1997

Please advise your Financial Consultant immediately of any discrepancies in reported transactions or unusual activity on your statement of account or if you correspond to Merrill Lynch, Pierce, Fenner & Smith Inc. For all other customer service inquiries, please call 1-800-CMAA (1-800-262-4628) or in writing to Merrill Lynch CMAA Operations, New Brunswick, NJ 08903-0666. When making inquiries, please give your account number. See back of page for definitions of key terms.

Merrill Lynch, Pierce, Fenner & Smith Inc.
 Member, Securities Investor Protection Corporation (SIPC)

Code 7087A (R2-96)

We urge you to keep this statement with your investment records.

08/08/97 11:58:27

4443040125362692

GONZALEZ/GLORIA

9905

BEL AIR CAR WASH

2841 N. LA BREA

WEST HOLLYWOOD

OTHER

10	CR	
	\$7.99	47.99

STNR:00090032 (S)

PNR #0211001

AUTH:150001

L/ VISA

DEPT. TAX	40.00
TOTAL	57.99

SIGNATURE

[REDACTED]

PALMDALE FIRESTONE

2401 E PALMDALE BLVD

PALMDALE CA 93550

(805) 947-4227

FRI AUG 08, 1997 20:18 PM

VS 4443040125362692 0592

SALE TERM 0001 RFA 001

AMOUNT \$ 154.90

MP 078570

I AGREE TO COMPLY WITH
THE CARDHOLDER AGREEMENT

X
WNT

[REDACTED]