INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

PE10-005

GM

4/14/2010

ATTACHMENT

Q 03

Subject Legal

ATT



| SR No. Account Last Name Daytime # Address State Serial #VIN Make | 71-623737356 PA ZipCd 1G1AK52F757 Chevrolet | Rof No. Sito First Name Evening # City Q Con Acct Model Year Warr, Start | uakerlown 2005 08/01/2003 | | Goodwill GW SubType Approval UCC Involved Dir Source Priority Status | No Goodwill Offered Not Initiated Steering - General Faukner-Clocca Chevrolet Lic Phone Medkum License # CHEVI Open | BRC Type Bus, Unit Area Sub-Area Safety Updated IOL Owner Opened | BRC PAR |
|---|--|--|---------------------------------|----------------------------|--|---|--|--|
| Model Abstract | Cobalt Steering - Collision | Mileage | 23000 | 2 % | Sub-Status | Satisfied | Closed | The second secon |
| Customer Description | This is a BRC-PAR case / do not assu | me / forward ell | inquiries to Tha | ddeus Kinzer x4 | 11039 | | | |
| Pre-PAR | | | | | and the second second | THE CONTRACTOR OF THE PARTY OF | en managementen der ender semme selver ten | n r 10 th a sign meaning of the get to six day (color). |
| AR Notifier Relative | Incident Date/Time Injuries 4/28/2008 04:28:41 PM Y | # Other Veh 0 | #People in Vel 2 | 1 Road Surface Concrete | Rog Wei | d Cond. Fire Report# .V/A | | lice Report# IST/13110 |

| AR Notifier | P. Danklerson, and the control of th | #Other Veh #People in Veh Roa | | | |
|-------------------------|--|--|------------------------------|---|--|
| Relative | 4/28/2008 04;28:41 PM Y | | ncrete Wel | Cond. Fire Reports | Police Report# 6103176110 |
| briver Last N | Iame Drivo | r First Nama Height | | olities | 0.037.017/ |
| istirance An | ient Last Name Insur | 5*7- ance Agent First Name Phone # | 8/9/1989 Glass | ⊞s e Agency | |
| nknown | uninu | | | CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE | |
| voident oc | rte 3 78 and Seddeersville | | Incident car power s Desc | teeing light went on car speed up | , starst to buck and then slow down and crash a po |
| omponent | steering failed | anner i i e annonce-aquanterena e e e enter-e i deple e gre | | | |
| enicio | Lion Collision - Titus Ave - Warrington, | | Damage no serious of Desc | damage, front bumper dent, right | door opens light and right head light broke |
| DC | mon vousium attacens – restingent, | • | | r ronald J # 180 | |
| mgcy Svc ames | police officer ronald J # 160 | e delle dell | Maint Loc N/A | - 24 | |
| AR De | di | | 110000 | | |
| ollision | Y Non Collision | Property N Thermal Evt Damage | N Spec Equip | None | |
| ehicle paed | 25 | Weather raining Condition | Prop Owner | n/a | Property n/a Type |
| est Service ate |) | Loc Last Service | Property Location | n/a | Prop Est Repair Cost |
| oh Est opair Cost | | Spec Equip n/a installer | Prop Damage Description | n/a | • |
| rimary oh Uso | Personal | inspection Type | Inspected By | Inspection Not Performed | fnspection Date/Time |
| oh Damago escription | no serious damage, front bumper dent, broke | right door opens tight and right head t | light Explain Other | forwarded to ESIS | w |

Report Generaled for toporowm

on 5/2/2008

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PAR Injuries

| l get Name Greef Name DOB Location Occupant of Owner's Vehicle Injury Description Medical Rolf | Phone # Soating Pos Driver | Rostraint Typo Air bags - seal belt. |
|--|--|---|
| brulses and a black eye, brusses on right arm unknown Street Address City | Treatment Location unknown State Zip Code | Treated By: unknown |
| | | |
| Activities | | A. A. Carrier and A. |
| Greated Created By Assigned To Activity Type 5/1/2008 03:56:00 PM MARQUEM MARQUEMO BRC PAR O | Activity Sub-Typo Status ESIS-Injuries Done | Completed Description 6/1/2008 03:56:56 PM ESIS-Injuries |
| Contact Lasi Name Contact First Name Lohr Helena | Account | BAC Cade |
| Comments File fowarded to ESIS due to Cust seeking medical compensation for injuries. | | |
| Monica Marquez/BRCPAR/ATX x21072 | | |
| Confidential Comments | | |
| Greated By Assigned To Activity Type 5/1/2008 03:55:21 PM MARQUEM ESISBIQU Escalation | Activity Sub-Typo Status ESIS - Injuries in Progress | Completed Description Assign to ESIS |
| Contact Last Name Contact First Name Lohr Helena | Account | BAC Code |
| Comments Cust sks medical comp for injuries | | |
| Monica Marquez/BRCPAR/ATX x21072 | | |
| Confidential Comments | | |
| | | |

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| Activities | | | | | | |
|---|---|---------------------------------------|------------------------------------|--------------------------|---|--------------------------------------|
| Groated Created By \$11/2008 09:19:59 AM DRAHEICM Contact Last Name Lohr | Assigned To MARQUEMO Contact Fire Helena | | Activity Sub-Type Account | Status Done | Completed 5/1/2008 03:55:19 PM BAC Code | Description ESIS-Med Comp |
| Comments Received | | | | | | |
| Monica Marquez/BRCPAR/ATX x21072 (Confidential Comments | | | | | | ı |
| Cronted Greated By 4/30/2008 04:52:58 PM KINZERTH | Assigned to KINZERITH | Activity Type Outbound Call Dealer | Activity Sub-Type Left Message | Status Done | Gompleted 4/30/2008 04:54:19 PM | Description Called (215) 536-2100 |
| Contact Last Name Lohr | Contact Firs Helena | l Name | Account | | BAC Code | |
| Comments Left message for Tim Lollis, svc mgr at I | Faulkner-Clocca | Chevrolet | | | | |
| Messago loft with Can Levill, eve adv | | | | | | |
| * Provided contact information | | | | | | |
| Thaddeus Kinzer/PAR/ATX Confidential Comments | | | | | | ! |
| Created By | Assigned To | Activity Typa | | | | |
| 4/30/2008 03:12:52 PM KINZERTH Contact Last Name | KINZERTH Contact Fire | Scheduled Follow-up | Activity Sub-Type Account | Status Scheduled Alan | Completed iii BAC Code | Description ESIS |
| Lohr Comments | Helena | | | | ENO COM | |
| Confidential Comments | | | | | | |
| Confidential Confidents | | | | | | |
| Created By 4/30/2008 03:12:24 PM KINZERTH | ASSISTED TO DRAHEICM | Activity Type BRC PAR | Activity Sub-Typo ESIS-Injuries | Status Done | Completed 5/1/2008 09:19:47 AM | Description ESIS - Injuries |
| Contact Last Name Lohr | Centad First Helena | Nams // VELOCITED AND | Account | | BAC Code | |

Report Generated for toporowm

Comments

Cust seeking medical compensation for injuries

Confidential Comments

on 5/2/2008

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Activities

| 1.20 E2 A 15100-73 | | | | | | | |
|--|------------------------|--------------------------|------------------------------------|--|----------------|------------------------------------|--|
| Control State Printer (Catherine Control Contr | Stephed By SINZERTH | Assigned To KINZERTH | AGIIVity Typo Ownership Changed | Activity Sub-Type Ownership Escalated to | Status Done | Completed 4/30/2008 03:05:51 PM | Description Ownership Escalated to BRC |
| Contact Last Name | | Contact Firs | t Name | BRC Account | | BAC Code | enserous commisses so DLC |
| Lohr Comments | | Helena | | | | | |
| Confidential Comments | | | . - | | | | |
| Created (| reated By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
| 4/30/2008 12:53:19 PM C | RAHEICM | KINZERTH Contact Fire | Ownership Changed | Account | Done | 4/30/2008 12:53:19 PM BAC Code | Service Request Ownership has changed FROM: GONZALDA TO: |
| Lohr Comments | | Helena | | | | BAU Cour | KNZERTH |
| Confidential Comments | | | | | | | |
| | | | | | | | |
| | reated By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
| Contact Last Name | PAHEICM | KINZERTH Contact Engl | BRC PAR Name | Initial Contact- Phone Account | Dana | 4/30/2008 03:11:01 PM BAG Gode | Called (215) 892-2134 |
| Lohr Comments | | Helena | | | | | |
| Spoke with cust husband G | ary Lohr | | | | | | |

* Cust claims steering failure resulting in collision with pole

* Verified pre-par and completed par detail

* Cust claims injuries are involved, seeking medical compensation and replacement veh

* Last svc daterioc - about a month ago at dir

* Current veh location

Lion Collision

Titus Ave

Warrington, PA

(215) 343-5900

* Cust insurance not yet involved

* Advised file would be forwarded to ESIS

* Provided contact information

Thaddous Kinzer/PAR/ATX
Confidential Comments

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Activities

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|---------------------------|-----------------|-----------------|---------------|-------------------------|---|----------------------|-----------------------|
| 4/30/2008 12:52:49 PM | DRAHEICM | KINZERTH | BRC PAR | Initial Contact- Dealer | Done | 5/1/2008 09:10:29 AM | Called (215) 538-2100 |
| Contact Last Name | | Contact Firs | : Name | Account | | BAC Code | • |
| Lohr | | Helena | | : | *************************************** | | |
| Comments | | | | 27750 | | | |
| Spake with Tim Lollis, sv | e mgr at Faulkn | er-Clocca Chevi | olet | | ~~~ y 10 (411 CO (411 | | |

Verified previous steering concerns at dir Mar 24, 2008 – steering locks / hard to turn – ignition switch replaced Jan 7, 2008 – could not duplicate steering concern

Thaddeus Kinzer/PAR/ATX
Confidential Comments

| ************************************** | | P1 61 M about the second or th | | | | | # 1 # ##111 A |
|--|-------------------|--|---------------|---------------------|--------|-----------------------|----------------------------|
| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
| 4/30/2008 12:52:42 PM | DRAHEICM | KINZERTH | BRC PAR | Initial Contact-AVM | Done | 4/30/2008 04:56:28 PM | DVM Name Robert Krerner |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | Node / Mailbox 914055 8129 |
| Lohr | Contractor factor | Helena | | | | | • |
| Comments | | | | | | | 1 |

The request number is 71-823737356
The customer's name is
The vehicle is a (year / make / model) 2005 Chevrolet Cobalt
The last 8 of the VIN are 57
The concern involved is cust claims power steering failed, resulting in a collision with a pole

Thaddeus Kinzer/PAR/ATX
Confidential Comments

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|----------------------------|---------------|---------------|---------------|-------------------|--------|-----------------------|-----------------------|
| 4/30/2008 12:52:35 PM | DRAHEICM | KINZERTH | BRC PAR | Acknowledgement | Dona | 4/30/2008 02:59:30 PM | Called (215) 892-2134 |
| Contact Last Name | | Contact First | Name: | Account | | BAC Code | • • |
| Lohr | | Helena | | | | | |
| Comments | | | | | | | |
| Initial completed during a | cknowledgment | i has | | | | | |
| Confidential Comments | | | | | | | |

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Activities

| Created Sy 4/30/2008 12:52:30 PM DRAHEICM Contact Last Name Lohr Comments Confidential Comments | Assigned To Activity Type KINZERTH Notify CRM Contact First Name Helena | Activity Sub-Type Account | Status Done | Completed 4/30/2008 01:12:58 PM BAC Code | Poscription File Assigned |
|---|---|------------------------------------|----------------|--|---|
| Croated Created By 4/30/2008 12:52:23 PM DRAHEICM Contact Last Name Lohr Comments Summary | Assigned To Activity Type KINZERTH Research Contact First Name Helena | Activity Sub-Type Account | Status Done | Completed 4/30/2008 01:23:29 FM BAC Code | Description Research VIN |
| No open recalls No related repairs No previous SRs Thaddeus Kinzer/PAR/ATX Confidential Comments Created Created By 4/30/2008 12:52:06 PM DRAHEICM | Assigned To Activity Type KINZERTH BRC PAR | Activity Sub-Type Case Assigned | Status Dona | Completed | Description |
| Contact Last Name Lohr Comments Confidential Comments Created By | Contact First Name Helena Assigned To Activity Typo | Account Activity Sub-Type | Status | 4/30/2008 01:12:25 PM BAC Code | Assigned to Thaddeus Kinzer ext 41039 Doscription |
| 4/30/2008 10:28:20 AM DRAHEICM Contact Last Name Lohr Comments Confidential Comments | GONZALDA SR Opened Contact First Name Helena | Account | Dane | 4/30/2008 10:28:20 AM BAC Gode | SR in Status of Closed has been Re- Opened by DRAHEICM |

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on 5/2/2008

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Activities

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|-----------------------|------------|--------------|--------------------------|-------------------|--------|-----------------------|---------------------------------|
| 4/30/2008 10:28:19 AM | DRAHEICM | GONZALDA | SR Closed - Dissatisfied | | Done | 4/30/2008 10:28:19 AM | Service Request has been Closed |
| Contact Last Name | | Contact Firs | Mame | Account | | BAC Cede | Dissatisfied. |
| Lohr | | Helena | | | | | |
| Comments | | | | | | | |
| Personal | | | | | | | |
| Confidential Comments | | | | | | | |

| Created | Greated By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Dascription |
|-------------------------|-----------------|-----------------|-------------------------|------------------------|--------|-----------------------|---------------------------------|
| 4/29/2008 01:22:03 PM | GONZALDA | DRAHEICM | Escalation | Initiate PAR | Cone | 4/30/2008 10:27:12 AM | Assigning activity to PAR QUEUE |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| Lohr | | Helena | | | | | |
| Comments | | | | | | | |
| CRS advised that a pers | on from the PAF | R Department wi | Il contact the customer | within 2 business days | | | • |

Received and assigned in PAR. Chad Drahelm/ATX/Workflow PAR Sontidential Comments

| Croated | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|-----------------------|------------|---------------|--------------------------|-------------------|--------|-----------------------|-------------|
| 4/29/2008 01:18:34 PM | GONZALDA | GONZALDA | Inbound Call Third Party | Complex Request | Done | 4/29/2008 01:22:01 PM | Helena Lohr |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| Lohr | | Helena | | | | | |
| Comments | | | | | 200 | | |

Cust st that she owns a COBALT 2005 whit 23.000 mis approx. Veh was involve in a car acodent. Cust's daughter was driving. Power steering failed veh speed up then buckles and then slow down at approx 30 Mph. Veh crash into a pole. Cust is concern about this veh. cust feels this is not safe to drive.

Cust seks to have this veh replaced or repurchase

CRS adv that cust will b contacted in 48- Hs from another Gm dept that will handle the request.

Daniel Davies (CAC BAT1) ext 42429

Confidential Comments

UCC Information

| PROVING | | Alexandria propriate propr | |
|----------|--|--|--|
| (Elet | Codo Symptom | | NORTH CONTROL OF CONTR |
| Author | · · · · · · · · · · · · · · · · · · · | Descriction | |
| 2 400 | | | |
| MARKET A | anomers and | Charles Consess | ALTERNATION OF THE PROPERTY OF |
| 4 = 0.00 | and a supplement of the supple | \$340000 \$1 * \$26010740 | |
| MO | Inoperative | Steering - General | |

Report Generated for toporown

on 5/2/2008

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Number

Odometer

Reading

GM Vehicle Inquiry System Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| VIN: | GIAI | KS2F757 | | | | | Section of the sectio | |
|--|----------------|---|-------------------|----------------------|----------------------|-----------|--|----------------|
| | | | INFORMAT | MON | | | | |
| Merchandising Model: | Tia | AK69 -2005 COBALT 4-DO | | Warranty S | taut T | lata e | 08/01/2 | nne. |
| BARS Order Type: | | I mananty o | 4431 F X | /415 · | V0/V1/20 | UV5 | | |
| Delivering Dealer: | - | - RETAIL - STOCK CHEITHAUER CHEVROLI | et inc | Selling Sour | ********* | | 12 00 | EVROLET |
| Control of the Contro | 78 | 0 S WEST END BLVD UAKERTOWN, PA 1895 | | Site Code: | ve ; | | 15 - CH 15607 | EVKOLET |
| | 1-2028 | Business As | -2-4 | - Call | 113813 | | | |
| Service Contract : | Branded Title: | 9 | | P arantaisean | | | | |
| Service Contract: | No | | | nty Block : | No | PDIS | atus : | Paid |
| Type Number | | | FIELD ACT | IONS | | T | | |
| 1.00 | 79. February | Descrip | | | | Poster | l Date | Status |
| RC 05034 WIRI | NG | TEM WIRING OR DUAL S | TAGE AIRE | AG MODULE | | N | 'A | Closed |
| | | SERVICE INFO | RMATIONA | LITEMS | | | | |
| Vehicle Has No Current | Rec | ord Of Outstanding Service | e Informatio | . | | | | |
| | O | ON STAR AND XM SATE | LLITE RAD | O INFORMA | IOITA | Y | - | |
| Vehicle Has No Associat | ed O | n Star or XM Radio Infor | mation. | | | | | |
| | | APPLICABI | E WARRAN | TIES | Wild Control Western | | | |
| D | eseri | ption | Effective Date | Effectiv Odomete | | End Dat | e Od | End Jometer |
| 36/36000 BUMPER TO E WARRANTY | UMI | PER LIMITED | 08/01/200 | 5 4 m | tiles | 08/01/200 | 8 30 | 6004 miles |
| 72/100000 SHEET META THROUGH LIMITED W | AL CO | OVERAGE RUST ANTY | 08/01/200 | 4 n | iles | 08/01/201 | 1 100 | 0004 miles |
| 96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM | | | 08/01/2005 | 4 m | niles | 08/01/201 | 3 80 | 0004 miles |
| 16/36000 FEDERAL EMI | SSIC | N | 08/01/2005 | 4 m | illes | 08/01/200 | 8 36 | 004 miles |
| 60/60000 POWERTRAIN | - U.S | S. LIMITED WARRANTY | 08/01/2005 | 4 m | iles | 08/01/201 | 0 60 | 0004 miles |
| | | CLAIM | HISTORY | | | | | |

Labor Operation

| 03/24/2008 | 161301 | # | N2320 - IGNITION AND START SWITCH REPLACEMENT | 22811 | miles |
|------------|--------|---|---|-------|-------|
| 03/24/2008 | 161301 | # | Z5001 - VIP FREIGHT/POSTAGE REIMBURESEMENT | 22811 | miles |
| 01/07/2008 | 159661 | # | K5365 - MODULE, TRANSMISSION CONTROL - REPLACE | 20477 | miles |
| 01/07/2008 | 159661 | # | Z5000 - DEALER/RETAILER TRADE(PART OBTAINED LOCALLY) | 20477 | miles |
| 01/07/2008 | 159661 | # | D0362 - CONTROL, HEATER AND AIR CONDITIONING - REPLACE | 20477 | miles |
| 01/07/2008 | 159661 | # | C0183 - FRONT SIDE DOOR WINDOW REGULATOR REPLACEMENT - LEFT SIDE | 20477 | miles |
| 05/15/2007 | 154430 | Ħ | K5225 - CONTROL ASSEMBLY, FLOOR SHIFT - REPLACE | 11277 | miles |
| 09/28/2006 | 149913 | # | K5225 - CONTROL ASSEMBLY, FLOOR SHIFT - REPLACE | 8772 | miles |
| 09/28/2006 | 149913 | # | K9995 - CUSTOMER CONCERN NOT DUPLICATED | 8772 | miles |
| 04/27/2006 | 146481 | # | E0027 - COVER, WHEEL - ALL - REPLACE | 7395 | miles |
| 04/27/2006 | 146481 | # | N9995 - CUSTOMER CONCERN NOT DUPLICATED | 7395 | miles |
| 04/25/2006 | 146481 | # | N4180 - INSTRUMENT CLUSTER REPLACEMENT | 7395 | miles |
| 04/25/2006 | 146481 | # | N6612 - WIRING AND/OR CONNECTOR - EXTERIOR LIGHTING - REPAIR OR RE | 7395 | miles |
| 05/12/2005 | 138057 | Ħ | V1362 - 05034 - INSTALL A/C JUMPER HARNESS | 3 | miles |
| 03/16/2005 | 136461 | 1 | Z6999 - PDI RELATED FLUID ADDS | 2 | miles |
| 03/04/2005 | A79203 | 1 | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | 0 | miles |

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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1G1AK52F757

VIN:

01/15/2008

01/15/2008

865

865

01

02

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GM Vehicle Inquiry System Claim History

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| | | | | CLAIM E | II. | STORY | | | | | | |
|-----------------|--------------|-------------|------------------|---|--|--------------------|----------|--------------|------------|---------------|---------------|-------------|
| Repair Ord | ler Datc | : 03 | /24/200 | Repair Order Number : | | 161301 | Odon | eter Ro | ad | ing: | | 22811 miles |
| Serviced By: | | | CIOCC/ END BL | CHEVROLET | S | ielling Sou | rce : | | | 13 - (| CHEVROL | et |
| wy. | QUAKI | ERTO | VN, PA | 18951-2628 | S | ite Code : | | | ********** | 1560 | 8 | |
| | (215) 5 | 10-21U | U | | E | Business A | ssociat | Code : | } | 2303 | 07 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Par | t | Auth Code | B . | erson Code | Line Total | Comments |
| 04/11/2008 | 890 | 01 | # | Z5001 - VIP FREIGHT/POSTAGE REIMBURESEMENT | | 10392423 SWITCH | | E | | N/A | \$ 17.49 | И |
| 03/28/2008 | 886 | 01 | # | N2320 - IGNITION AND START SWITCH REPLACEMENT | | 10392423 SWITCH | | E | | N/A | \$ 252.85 | ¥ |
| Repair Ord | ler Date | : 01 | /07/200 | Repair Order Number : | | 159661 | Odom | eter Ro | ad | ing : | | 20477 miles |
| Serviced | | | | CHEVROLET | S | elling Sou | rce: | | | 13 - (| CHEVROL | EI |
| By: | QUAKE | RTOV | | 18951-2628 | S | ite Code : | | | | 1560 | 3 | |
| | (215) 53 | 6-210 |) | | B | usiness A: | sociate | Code: | | 2303 | 07 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Par | : | Auth Code | | erson Code | Line Total | Comments |
| 01/25/2008 | 868 | 01 | # | Z5000 - DEALER/RETAILER TRADE(PART OBTAINED LOCALLY) | | 24239427 MODULI | | E | 1 | NA | \$ 49.04 | N |
| 01/15/2008 | 865 | 01 | # | K5365 - MODULE, TRANSMISSION | A CONTRACTOR OF THE PROPERTY O | 24239427 | | N/A | 1 | V/A | \$ 387 91 | N |

MODULE

22724323 -

KNOB

N/A

N/A

N/A

N/A

S 387.91

\$ 57.78

N

N

TRANSMISSION

D0362 - CONTROL, HEATER AND AIR

CONDITIONING -

C0183 - FRONT SIDE

REPLACE

CONTROL - REPLACE

| 01/15/2008 | 865 | 03 | # | DOOR WINDOW REGULATOR REPLACEMENT - LEFT SIDE | | 1589905 REGUL | | N/A | | N/A | \$ 142.61 | N |
|------------------|-------------------|---------------|--|--|--------|--------------------|----------|----------------------|-------|---------------|---------------|-------------|
| Repair Or | der Dat | e: 0 | 5/15/200 | Repair Order | Ī | 154430 | | oeter Ro | 4 | | | tteer |
| | | | | Number: | J. | 1J**1JV | Cuon | geich Ki | | ing ; | | 11277 miles |
| Serviced By: | FAUL 780 S | KNER- WEST | CIOCC. END BL | A CHEVROLET VD | L | Selling So | irce : | - Walley Street Land | 4-220 | 13 - 0 | CHEVRO | ÆT |
| | QUAK | | WN, PA | 18951-2628 | 5 | lite Code | | | #Slow | 1560 | 8 | |
| | | | | | L | Business A | ssociat | e Code : | | 2303 | 07 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | 50/226 | Pa | rt | Auth Code | | erson Zode | Line Total | Comments |
| 05/22/2007 | 797 | 01 | # | K5225 - CONTROL ASSEMBLY, FLOOR SHIFT - REPLACE | | 1592682 CONTR | | N/A | 1 | W. | \$ 154.39 | N |
| | | | Section of the sectio | | | | | | | | | |
| Repair Or | fer Date | 2 09 | /28/200 | 6 Repair Order Number : |] | 149913 | Odom | ieter Re | adi | ng: | | 8772 miles |
| Serviced By : | SCHE! | THAU | ER CHE | VROLET, INC. | s | elling Sou | irce : | | | 13 - (| CHEVROL | ET |
| Dy: | QUAK | ERTOV | VN, PA | 18951-2628 | S | ite Code : | | | | 1560 | | |
| | (215) 5 | 36-210 |) | | D | usiness A | ssociate | Code: | | 1138 | 13 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Par | t | Auth Code | | rson ode | Line Total | Comments |
| 10/10/2006 | 733 | 01 | # | K5225 - CONTROL ASSEMBLY, FLOOR SHIFT - REPLACE | | 15244165 CONTRO | | В | } | VA | S 158.41 | N |
| 10/03/2006 | 731 | 02 | # | K9995 - CUSTOMER CONCERN NOT DUPLICATED | | NA | | В | N | VA. | \$ 22.60 | И |
| | | | | | 1 | | | | | | | |
| Repair Ord | er Date | : 04/ | 27/2006 | Repair Order Number : | l | 46481 | Odom | eter Rei | ıdiı | ıg: | | 7395 miles |
| | SCHEIT 780 S W | | | VROLET, INC. VD | St | illing Sou | rce: | | | 13 - C | HEVROL | at . |
| | | RTOW | N, PA | 18951-2628 | Si | te Code : | | Meeronomous | l | 15607 | | |
| | (613) 33 | U-2100 | | | Bı | usiness As | sociate | Code: | | 11381 | 3 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Pat | t | Auth Code | | erson Zode | Line Total | Comments |
| 06/16/2006 | 700 | 01 | # | E0027 - COVER, WHEEL - ALL - REPLACE | | NA | | E | | VA | \$ 78.14 | N |
| 06/09/2006 | 698 | 02 | # | N9995 - CUSTOMER CONCERN NOT | | N/A | | В | 1 | N/A | \$ 22.60 | N |

| | | | | DUPLICATED | | | | | |
|------------|-----|----|---|---|-----|-----|-----|----------|---|
| 05/02/2006 | 687 | 01 | # | N4180 - INSTRUMENT CLUSTER REPLACEMENT | N/A | N/A | N/A | \$ 22.60 | N |
| 05/02/2006 | 687 | 02 | # | N6612 - WIRING AND/OR CONNECTOR - EXTERIOR LIGHTING - REPAIR OR RE | N/A | E | N/A | S 75.34 | N |

| Repair Or | der Date | : 05 | /12/200 | Repair Order Number : | 138057 | Odome | eter Rea | ding: | | 3 miles |
|---|--------------|---------|-----------------|--|------------------|------------|----------------|----------------|---------------|----------|
| Serviced SCHEITHAUER CHEVROLET, INC. 780 S WEST END BLVD | | | Selling Source: | | | 13 - C | 13 - CHEVROLET | | | |
| <i>-</i> y • | QUAKI | ERTOV | VN, PA | 18951-2628 | Site Code : | | | 15607 | | |
| | (215) 53 | 10-%10r | , | | Business A | ssociate | Code: | 11381 | 3 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Pa | r t | Auth Code | Person Code | Line Total | Comments |
| 05/17/2005 | 587 | 01 | # | V1362 - 05034 - INSTALL A/C JUMPER HARNESS | 1578551 HARNE | | N/A | N/A | \$ 28.50 | N |

| Repair On | der Date | : 03 | /16/2005 | Repair Order Number : | 136461 | Odomet | er Read | ling: | | 2 miles |
|-----------------|------------------|---------|----------|-----------------------------------|-------------|------------|--------------|----------------|---------------|----------|
| Serviced By: | SCHEI 780 S V | | | VROLET, INC. | Selling Sou | rce : | | 13 - CI | IEVROL | ET |
| , T | QUAKI | ERTOW | /N, PA | 18951-2628 | Site Code: | | | 15607 | | |
| | (215) 53 | 00-2100 |) | | Business A | ssoelate C | ode: | 113813 | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Pi | ert | Auth Code | Person Code | Line Total | Comments |
| 03/22/2005 | 571 | 01 | 1 | Z6999 - PDI RELATED FLUID ADDS | N/A | | N/A | N/A | \$ 2.00 | N |

| Repair Or | der Date | : 03 | /04/200 | Repair Order Number : | A79203 | Odome | eter Rea | ding: | | 0 miles |
|-----------------|-------------------|-------|---------|--|---------------------------|-------|--------------|----------------|---------------|----------|
| Serviced By: | 780 S W | EST E | ND BL | VD - | Selling Sou | | | _ | HEVROL | er |
| | QUAKI (215) 53 | | | end of the contract of the con | Site Code : Business A | | Code: | 15607 11381 | 3 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Pa | ri | Auth Code | Person Code | Line Total | Comments |
| 03/08/2005 | 567 | 03 | I | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | N/A | | N/A | N/A | \$ 79.82 | N |

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System Vehicle Build

<u>Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title</u>

Help

| VIN | 1G1AK52F757 |
|-----|--------------------|
| | |
| | TENTE AT TO THE TO |

VEHICLE BUILD

| Merchandising Model: | IAK69 -2005 COBALT 4-DOOR SEDAN | | | | | |
|------------------------------|---------------------------------|---------------|--------|--|--|--|
| Gross Vehicle Weight Rating: | 1709 kg (3768 lb) | Order Number: | HXTCXZ | | | |
| Build Date: | 03/04/2005 | Build Plant : | 157A | | | |

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

| AK5 - DRIVER & RIGHT FRONT PASSENGER AIR BAGS | AR9 - DELUXE FRONT BUCKET SEAT |
|--|---|
| AU0 - KEYLESS REMOTE DOOR LOCK | AU3 - POWER DOOR LOCK SYSTEM |
| B34 - FLOOR MATS | B35 - REAR FLOOR MATS |
| C67 - ELECT. FRONT AIR CONDITIONER | DC8 |
| DT4 - ASHTRAY AND LIGHTER | FEI - SUSPENSION SYSTEM-SOFT RIDE |
| FE9 - 50-STATE EMISSIONS | FYI - TRANS/AXLE 3.63 RATIO |
| IPB - INTERIOR TRIM DESIGN | J41 - POWER DISC FRONT BRAKES |
| K64 - 115 AMP GENERATOR | LOD - ASSEMBLY PLANT - LORDSTOWN,OHIO |
| L61 - 2.2L DOHC 4 CYL ENGINE | MN5 - 4 SPEED AUTO TRANSMISSION |
| MX0 - 4-SPD. AUTO. TRANS. W/OVERDRIVE | NT7 - FEDERAL EMISSION TIER 2 |
| N46 - 4 SPOKE STEERING WHEEL | PG1 - 15" STEEL WHEEL |
| QTU - P195/60R15 TOURING BW TIRES | R9U - GM ACCESS - AUTOBOOK IDENTIFIER |
| SLM - STOCK ORDERS | UQ4 - BASE SPEAKER SYSTEM |
| UIC - AM/FM STEREO W/CD AND CLOCK | VK3 - FRONT LICENSE PLATE MOUNT |
| VM3 - CONSUMER INFORMATION LABEL | V73 - STATEMENT OF VEHICLE CERT U.S. /CANADA |
| ISA - BASE PACKAGE | ISZ - OPTION PACKAGE DISCOUNT |
| 14B - GRAY | 14I - GRAY |
| 41U - BLACK | 6AR - FRONT SPRING |

ESIS/GM Central Claims Unit P.O. Box 300 Mail Code 482 C20 D71 Detroit, MI 48265-3000



Nikki Jackson **Claim Administrator**



RE:

Our File No.:

Our Client:

General Motors Corporation

Date/Event:

4/28/08

Subject Vehicle: 2005 Chevrolet Cobalt

VIN:

1G1AK52F757.

ESIS provides administrative claims handling services to General Motors Corporation in connection with product liability claims against GM. They have referred your claim to our office for further handling. I attempted to contact you at the daytime and evening numbers provided to me and learned you were no longer at the morning number and the evening number had been changed (no new number provided).

Please contact me at the toll free number to discuss the incident that occurred in the above referenced vehicle.

You may contact me directly at (800) 888-0164, Monday through Friday, 8:00 AM to 4:00 PM, EST.

Sincerely,

Nikki Jackson Claim Administrator PE10-005
GM
4/14/2010
ATTACHMENT
Q 03
Subject Legal
ATT

Service Request Detail SR No. 71-624471218 Ref No. Goodwill No Goodwill Offered BRC Type PAR Account Sito GW SubTypo Bus. Unit BRC Last Namo First Name Not initiated Approval Area PAR Daytimo # Evening # Sub-Aroa Initiate PAR- Property Damage UCC Brakes - Antilock Brake System Involved Dir Nick Chevrolet, Inc. Addross City Safety No State PA ZipCd Con Acet Source Phone Updated 5/7/2008 10:03:11 AM Serial #/VIN 1G1AK55F377 Model Year 2007 Priority Medium Licenze # Owner MARQUEMO Mako Chevrolet Warr. Start Status 04/03/2007 Open Opened 5/1/2008 01:15:09 PM Model Cobalt Mileage 27000 Sub-Status Satisfied Closed Collision - Brakes - Antilock Brake System (ABS) - Property Damages Abstract Customer Description ***This is a BRC PAR Case. Please do not assume. Forward any inquiries to Monica Marquez at ext.21072 ***

Pre-PAR

| PAR Notifier | Incident Date/Time Injunes | # Other Veh | # People in Veh Ro | od Sudare | Rose | Cond.:: Fire Report# | Police Report# |
|--|--|-------------------------|--|------------------|--------------------------|---|---|
| Owner | 5/1/2008 09:30:00 AM N | 2 | and the second s | phalt | Wel | didn't give to cust | 8318D |
| Driver Last N | ame Driva | Firet Name | Height | DOB | Disat | | |
| W. 7.711 (24 14 74 74 W) (14 14 14 14 14 14 14 14 14 14 14 14 14 1 | ent Last Name Insur | ince Agent First | 54" | 77 | по | | |
| Dematreini | ant Last (vanie Tom | | Interest the management of the Part of the | 74-5445 | | e Agency milinsuranea | |
| incident Loc | On Route 28 South | | | incident Desc | Cust sta: sh | e was driving the veh when she atten | npled to apply the brakes and then they locked ed to turn the wheel when she couldn't and her |
| Component | Pressed the brakes and they locked. T | ry to turn the wh | eel and it locked. | | brother tried | l as well and couldn't so then they hit | another veh infront of them. |
| Vehicle | Jay's Towing, 3634 Grenada St. Pitisbo | rg.PA. | | Damage Desc | | of veh is damaged and windshield is | • |
| Loc Emgcy Svc | Pillsburg police Dept | - | • •• | Add'I Info | Ambulance from the se | checked us out and sold we were fine albelt, his civest and hip hurt. We are | My chest hurts. My brother's chest is bruise going to see a doctor shortly. |
| Names | | | | Maint Loc | Independen | 1 | • • • |
| PAR De | tail | | | | | | |
| Colilston | Y Non Collision | Property Y Damage | Thormal Evt | N S | poc Equip | none | |
| Vehicle Speed | 35 | Weathor Condition | Wet | Pi | rop Owner | Liann Psoukas # 412-968-0907 | Property Mezda SUV |
| Last Sorvice Date | | Loc Last Service | | | roperty ocation | Unknown | Prop Est Repair Cost |
| Veh Est Ropair Cost | | Spec Equip Installer | none | | rop Damago oscription | Back was damaged, unknown of an | nount |
| Primary Voh Use | Personal | Inspession Typo | | în | spected By | Inspection Not Performed | inspection Date/Tims |
| Veh Damage Description | Whole front of veh is damaged and wis | dshleid is dama; | ged | E) | splain Othor | Inspection Not Performed | |

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on 5/7/2008

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PAR Injuries

| Last Name Sice Marge DOB Location | | | |
|--|-------------------------------|--|----------------------------|
| | Phone # of Owner's Vehicle | Scating Pos Driver | Rostraint Typo Seathelt |
| Injury Description | Nedical Roff | | -Treated By |
| Chest hurts | . 1/2 | Alle' kiski Urgent Care, did go to physical therapy, unknown where | Unknown |
| Street Address | City | | |
| | Creighton | PA | |
| Last vame First Name DOS Location | Phone # | Seating Pos | Restraint Type |
| Occupant o | f Owner's Vehide | Front Passenger | Seafbelt |
| Injury Description | Medical Rot# | Treatment Location | Treated By |
| chest is bruised from the seatbelt, his chest and hip hu | rt. n/a | Alle' kiski Urgent Care, did go to physical therapy, unknown where | Unknown |
| Street Address | City | State Zip Code | |

Activities

| ACUAIGO | | |
|--|--|---|
| Created By Assigned To Activity Type Activity Sub-Type 5/7/2008 02:06:49 PM MARQUEM MARQUEMO Scheduled Follow-up O | Status Completed Scheduled Alarm | Description Follow up with ESIS |
| Contact Last Name Contact First Name Account Comments | | |
| Confidential Comments | | |
| Greated Created By Assigned To Activity Type Activity Sub-Type 5/7/2008 02:05:35 PM MARQUEM MARQUEMO BRC PAR ESIS- Property Damage | Status Completed Done 5/7/2008 02:06:28 PM | Description ESIS - Third Party Property Damages - |
| 0 | BAC Code | Insurance involvement |
| File forwarded to ESIS Due to third party property damages and insurance involvement. | | |
| Monica Marquez/BRCPAR/ATX x21072 | | |
| Confidential Comments | entre de de de la companya de la com | |

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Activities

| Greated 5/7/2008 02:04:50 PM | Greated By MARQUEM O | Assigned To ESISBIOU | Activity Type Escalation | Activity Sub-Type ESIS - Property Damage | Status In Progress | Completed | Description Assign to ESIS |
|---|----------------------------|-------------------------|----------------------------------|---|-----------------------|---|--|
| Contact Last Name | | Contact First | Name | Account PROPER | | BAC Code | |
| Comments Third Party Property Dar | nages - Insuran | o Involvement | | | | | |
| Monica Marquez/BRCPA x21072 | RATX | | | | | | |
| Confidential Comments | | | | | | | |
| Granted 5/7/2008 09:20:12 AM | Created BY MARQUEM O | Assigned To MARQUEMO | Activity Type Ownership Changed | Activity Sub-Type Ownership Escalated to ERC | Status Dona | Completed 5/7/2008 09:20:13 AM | Description Ownership Escalated to BRC |
| Contact Last Name | | Cantact First | Name - 15 | WIND ACCOUNTS OF THE PROPERTY | 77.4 | BAC Code | |
| Comments | | | | | | | |
| Confidential Comments | | | | | - | | |
| Greated 5/6/2008 05:03:05 PM | Created By WARRENLE | Assigned To MARQUEMO | Activity Type Notify CRM | Activity Sub-Type | Status Done | Genioleted 5/7/2008 08:06:09 AM | Description Update: Please see outbound call and |
| erantant t mat kleinen | and the second second | C21 | Name | Account | | BAC Code - | VM received. |
| I notified you v | vill be calling Ma | ly 7 between 8- | 10am. Please contact her at: | | | ,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | |
| Lesley Warren/STA/Tiler 1 Gon/Ideniisi Commeniis | | | | | | | |

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Activities

| ACUVILIES | | | | | | | |
|---|-------------------------|-------------------------|---|----------------------------------|-------------------|---|--------------------------------------|
| Greated 5/6/2008 04:58:09 PM | Greated By WARRENLE | Assigned to WARRENLE | Activity Type Outbound Call Customer | Activity Sub-Type : Made Conlect | Status Done | Completed 5/6/2008 05:03:02 PM | Description |
| Contact Last Name | | — Contact Firs | | Account | | BAC Code | |
| Comments | | | | | | Commence of the second | |
| | VM. The PAR | dept. had been i | esearching your file. A call is | scheduled for tomorrow mo | ming between 8-10 | am. | |
| Cust, sts: Why do they h | ave to call when | i I told you every | /thing? | | | | |
| CRS sis: I gathered all th | e info. The PAI | R dept. will go fo | uther as I mentioned with our | intial call. | | | |
| Cost, sts: Ok. Thank you | . | | | | | | |
| Lesley Warren/STJ/Tier | | | | | | | |
| Confidential Comments | | | | | | | } |
| Created | Crealed By | Assinned To | Activity Type | Activity Sub-Type | | | * |
| 5/6/2008 04:55:32 PM | WARRENLE | WARRENLE | Inbound Voice Mail | Service Request Update | Status Done | Completed 5/6/2008 04:58:05 PM | Doscription VM received by L. Warren |
| Contact Last Name | 180 | Contact First | Name | Account | 2.00 | BAC Code | • |
| SUMMERUS | | | | | | | |
| VM: Please call me on m | | I nave no | ot heard from anyone since o | ur inital call. I understood the | caliback would be | in 2 business days. | |
| Lesley Warren/STJ/Tier (Confidential Comments | - 22 | | | | | | |
| 1 > bases Avelonin strongeron enterior | | - 4000 CAR A 9000 NV 34 | 20-10-10-20-00-00-00-00-00-00-00-00-00-00-00-00 | | | | |
| Greated 5/6/2008 04:16:03 PM | Created By MAROUSM | Assigned To MARQUEMO | Activity Type Scheduled Outbound Call | Activity Sub-Type | Status | Completed | Description |
| | 0 | | Cust | | Done | 6/7/2008 09:21:13 AM | Call cust |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| Action Plan: Perform Ack | and Jalijai Com | المسادة المسادة | | 7.7 | | | |
| | | ers Anni Ma | | | | | |
| Monica Marquez/BRCPA x21072 | secondary to the second | | | | | | |
| Gunfidential Comments - | | | 17.00 | 777. | ≯K⊊¥; | 1 | |

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Activities

| Greated | Greated By | Assigned To | Activity Type Activity Si | ub-Typo Status | Completed | Description |
|-----------------------|------------|---------------|---------------------------|----------------|----------------------|--|
| 5/6/2008 10:43:05 AM | DRAHEICM | MARQUEMO | Ownership Changed | Done | 5/6/2008 10:43:05 AM | Service Request Ownership has |
| Contact Last Name | | Contact First | Name Account | | BAC Code | changed FROM: WARRENLE TO: MARQUEMO |
| Comments | | | | | | |
| Confidential Comments | | | | | | |

| Created | Created By | Assigned To | Activity Type | Activity Sub-Typo | Status | Completed | Description |
|----------------------|------------|---------------|---------------|---------------------|--------|---|---------------------------------|
| 5/6/2008 10:42:33 AM | DRAHEICM | MARQUEMO | BRC PAR | Initial Contact-AVM | Done | anno anno anno anno anno anno anno anno | Called:Wong Theodoro Ted 914055 |
| Contact Last Name | | Contact First | Name | Account | | | 8049 NICK CHEVROLET, INC. |
| | | 3,500 | | | | | TARENTUM PA |

This is Monica Marquez w PAR dept
Customer.
Service Request.71-524471218
Vehicle Information:07 Chevrolet Cobalt
Last 8 of the VIN: 77
Involved Dealership:Nick Chevrolet
Nature of allegation: cust sts brakes and steering failed causing them to hit another veh, the will be fowarded to ESIS due to third party damages and insurance involvement.

CRS adv if you have any additional information pertaining to customer or vehicle please contact me at 1-866-790-5700 ext 21072. If no further info there is no need for a call back and this is just an FYI to let you know what is going on.

Monica Marquez/BRCPAR/ATX X21072 Confidential Comments

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Activities

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|--------------------------|-----------------|----------------|---------------|-------------------------|--------|-----------------------|-------------|
| 5/6/2008 10:42:24 AM | DRAHEICM | | BRC PAR | Initial Contact- Dealer | Oone | 5/7/2008 02:04:47 PM | Called: |
| Centact Last Name | | —Contact First | Name — | Account | | BAC Code | |
| Comments | 12000 | | | | | | |
| Left Message with: Servi | ce Manager - Li | oui | | | | Break Balling Control | |

This is Menica Marquez w PAR dept on a cust by the name of Service Request/1-624471218, Vehiclo Information:07 Chevrolet Cobalt, Just calling to make you aware of the concern, cust sts brakes and steering failed causing them to bit another veh, sie will be fowarded to ESIS due to third party damages and insurance involvement. Any questions or concerns my number is 1-856-790-5700 ext.21072

Monica Marquez/BRCPAR/ATX X21072 Confidential Comments

| Created | | Assigned To | Activity Type | Activity Sub-7 | Ivos Status | Completed | Description |
|----------------------|----------|---------------|---------------|------------------|-------------|----------------------|-------------|
| 5/6/2008 10:42:14 AM | DRAHEICM | MARQUEMO | BRC PAR | Initial Contact- | Phone Done | 5/7/2008 10:01:21 AM | Called |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| | | | | | | | |

CRS adv: asked detailed questions

Cust sist she was driving the veh when she altempted to apply the brakes and then they locked up and then the steering locked up, cust attempted to turn the wheel when sho couldn't and her brother tied as well and couldn't so then they hit another veh infront of them. Cust sis her and her brother did seek medical treatment and will be going to physical therapy. Cust sis brother does have to be off of work due to his injuries. Insurance company is involved and after gm looks at veh insurance company will be settling with cust. Cust is being held responsibile for third party property damages.

Cust skarfor gm to be involved in this matter, advised gm should be responsible for the damages

CRS adv: File will be fowarded to ESIS due to the third party property damages and insurance involvement.

Cust sis: wondering why file has to be fowarded

CRS adv. My dept can not be assisting in this matter

Monica Marquez/BRCPAR/ATX

x21072

Confidential Comments Manager Control of the Control of th

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Activities

| Groated 5/6/2008 10:42:03 AM Gontact Last Name Comments | Created By DRAHEICM | Assigned To MARQUEMO Contact First | | Activity Sub-Type Acknowledgement Account | Status Done | Completed 5/7/2008 09:39:03 AM BAC Code | Description Called |
|--|------------------------|--|------------------|---|----------------|---|-----------------------|
| See Initial Contact Monica Marquez/BRCP/ | NR/ATX | | | | | | |
| 221072 Confidential Comments | | | | | | | |
| Created | Crealed By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
| 5/6/2008 10:41:34 AM | DRAHEICM | MARQUEMO | Nolly CRM | Account | Done | 5///2008 09:22:22 AM EAC Code | File Assigned |
| Confidential Comments | | | | | | | |
| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
| 5/6/2008 10:41:24 AM Contact Lest Name | DRAHEICM | MARQUEMO Contact First | Research Name | Account | Done | 5/7/2008 09:22:17 AM BAC Code | Research VIN |
| Comments CRS Performed VIN Sca | n: | | | | | | |
| GMVIS: Found No Open | Recalls | | | | | | |
| VIN:Found No Duplicate | File | | | | | | |
| SVC History: No Service | History Related | to Allegation | | | | | |
| Monica Marquez/BRCPA X21072 Conlidential Comments | | | | | ART POLES | State 1 Section Co. | |

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Activities

| Created By Assigned To Activity Ty: 5/6/2008 10:40:51 AM DRAHEIOM MARQUEMO BRC PAR Contact Last Name | Activity Sub-Typo Case Assigned Account | Status Done | Completed 5/7/2008 09:22:27 AM BAC Code | Description Assigned to Monica Marquez ext 21072 |
|---|---|----------------|---|---|
| Confidential Comments | | | | |
| | oe Activity Sub-Type | | Completed | Description |
| Contact Last Name Contact First Name | Account See | Done | 5/5/2008 10:05:48 AM BAG Code | SR in Status of Closed has been Re- Opened by DRAHEICM |
| Confidential Comments © | | | | |
| Created Created By Assigned To Activity Typ 5/5/2008 10:05:44 AM DRAHEICM WARRENLE SR Closed- Contact Last Name | Satisfied | Status Dona | Completed 5/5/2008 10:05:45 AM BAC Code | Description: Service Request has been Closed Satisfied. |
| Confidential Comments | | 5. | | |
| Greated By Assigned To Activity Typ 5/1/2008 01:47:27 PM WARRENLE DRAHEICM Escalation | a Activity Sub-Type Initiate PAR | Status Done | | Description Assigning activity to PAR QUEUE. |
| Contact Last Name Contact First Name Contact First Name CRS advised that a person from the PAR Department will contact the c | 7770-2782000000 | | V BAC Code | A constitution of the second second second second |
| Received and assigned in PAR Chad Drahelm/ATX/Norkflow PAR | usioner water 2 Justices Gays. | a destata | | |
| | | | | |

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Activities

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Cornoleted | Description |
|----------------------|------------|-----------------------------------|-----------------------|-------------------|--------|----------------------|--------------|
| 5/1/2008 01:19:26 PM | WARRENLE | WARRENLE | Inbound Call Customer | Complex Request | Done | 5/1/2008 01:47:25 PM | Veh. crashed |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| | | | | | | | |

Cust. sts: I was driving and the brkaes locked. The wheel locked. My passenger grabbed the wheel as we were going to hit a car. Nothing worked. We hit a car which hit another car. I thought I should call as I believe there something wrong with the veh.

CRS sts: I have documented everything that has happened. I will send this to the PAR dept. They will contact you within 24-48 hrs. 2 business day. should be by Monday May 5.

Cust, sis; we are going to the doctor. We were checked out by ambulance Lady who said we should be fine.

CRS six: If you need to call before the PAR dept. calls, please feel free.

Lesley Warren/STJ/Tier 1 Confidential Comments

UCC Information

| UCC Codo | Symptom | Description |
|----------|---------|--------------------------------------|
| H70 | Locked | Brakes - Antilock Brake System (ABS) |

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GM Vehicle Inquiry System Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| VIN: | IGIA | IG1AK55F377 | | | | | | | |
|--|------------------------------------|---|-------------|-------------------|-----------------------|--------|------------|-------------------|----------------|
| | | VEHIC | LE IN | FORMATI | ON | | | | |
| Merchandising Model: | 1AK69 -2007 COBALT 4-DOOR SEDAN | | | LS | Warranty Start Date : | | | 04/03/2007 | |
| BARS Order Type: | 70 | - RETAIL - STOCK | | | | | | | |
| Delivering Dealer: | 22 | CK CHEVROLET, INC. W 7TH ST RENTUM , PA 15084 | .1425 | | Selling Sou | rce: | | 13 - CHEVROLET | |
| NO NOTICE AND ADDRESS OF THE PROPERTY OF THE P | (72 | 4) 224-2700 | 4.10442 | | Site Code : | | | 3596 | |
| | | | | | Business A Code : | ssocia | ite j | 13479 | |
| Service Contract: | Yes | Branded Title: | No | Warrant | y Block : | No | PDI Stat | us: | Paid |
| | | REQUIR | ed fi | ELD ACTION | ONS | | | | |
| Vehicle Has No Curr | ent Rec | ord Of Outstanding Ca | mpaig | រូបទ | | | | | |
| | | SERVICE IN | FORM | AATIONAL | ITEMS | | | | |
| Vehicle Has No Curr | ent Rec | ord Of Outstanding Ser | vice I | oformation | | | | | |
| | | ON STAR AND XM SA | <u>rell</u> | ITE RADIC | INFORM/ | \TIO | N | | |
| Vehicle Has No Assoc | iated C | n Star or XM Radio In | forma | ition. | | | | | |
| | | APPLICA | BLE | WARRANT | TES | | | | |
| | Deseri | ption | | Effective Date | Effectiv Odomet | | End Date | 0 | End dometer |
| 36/36000 BUMPER TO BUMPER LIMITED WARRANTY | | | | 04/03/2007 | 10 miles 04/03/2010 | | 3 | 36010 miles | |
| 72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY | | | | 04/03/2007 | 10 miles 04/03/201 | | 04/03/2013 | 10 | 00010 miles |
| 96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM | | | 7. | 04/03/2007 | 10 n | niles | 04/03/2015 | 8 | 80010 miles |
| 60/100000 POWERTR WARRANTY | AIN C | OVERAGE LIMITED | | 04/03/2007 | 10 n | niles | 04/03/2012 | 10 | 00010 miles |
| 36/36000 FEDERAL E | MISSK | N | | 04/03/2007 | 10 n | niles | 04/03/2010 | 3 | 6010 miles |

CLAIM HISTORY

Labor Operation

R.O Date

RO

Odometer

| | Number | | | Read | ing |
|------------|--------|---|--|-------|-------|
| 12/03/2007 | 256111 | # | C2990 - KNOB, CONTROL AND/OR SELECT - ONE AND/OR ALL - REPLACE | 15501 | miles |
| 04/20/2007 | 248841 | F | Z7200 - CORPORATE PARTS RETURN REIMBURSEMENT | 739 | miles |
| 04/17/2007 | 248695 | Ħ | B4261 - FRONT SIDE DOOR LOCK REPLACEMENT - LEFT SIDE | 737 | miles |
| 01/29/2007 | A70875 | 1 | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | 0 | miles |

CHECK HISTORY INFORMATION

| - 1 | |
|-----|--|
| 1 | Vehicle Has No Associated Check History Information. |
| 1 | i a config to the verification of the tripion of th |
| - | |

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GM Vehicle Inquiry System Claim History

<u>Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title</u>

Help

| Vin: | Standard Company | | 1 | 11220 PASS | Wite Sea | All Maries and All States and All St | | | Manager . | Topologia | | |
|-----------------|------------------|---------------------|------------------|--|-----------------|--|---|----------------|-----------|--|---------------|-------------|
| LAMA: | | | Ligi | AK55F377. | | ~~~~ | | | | 54504450000000000000000000000000000000 | | |
| | | | | CLAIM | | STORY | 7 | | - Wantana | | | |
| Repair Or | der Date | :: 12 | /03/200 | Repair Order Number : | | 256111 | Odon | eter R | 2ad | ing: | | 15501 miles |
| Serviced By: | NICK (| | OLET, | INC. | S | elling Sou | irce: | | | 13 - C | HEVROL | .BT |
| | | NTUM, | | 084-1435 | - | ite Code : | | | | 13596 | | |
| | (,, | | | | B | usiness A | ssociate | : Code | | 11347 | 9 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Pa | rt | Autl Code | | Person Code | Line Total | Comments |
| 01/11/2008 | 864 | 01 | # | C2990 - KNOB, CONTROL AND/OR SELECT - ONE AND/O ALL - REPLACE |)R | 2270623 HANDL | | N/A | | N/A | \$ 74.75 | Y |
| | | | | | | | | | makey. | | | |
| Repair Ord | ler Date | : 04 | /20/200 | Repair Order Number : | 2 | 48841 | Odom | eter Ro | ad | ing : | | 739 miles |
| Serviced By: | NICK (22 W 7 | | OLET, | INC. | Selling Source: | | | 13 - CHEVROLET | | | | |
| • | | ITUM, | | 84-1435 | Site Code: | | | 13596 | | | | |
| | (144) 4. | 54°&/Ul | , | | B | usiness A | ssociate | Code: | | 11347 | 9 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Pa | rt | Auth Code | | Person Code | Line Total | Comments |
| 04/24/2007 | 789 | 01 | F | Z7200 - CORPORATE PARTS RETURN REIMBURSEMENT | | N/A | | N/A | | NA | \$ 20.98 | N |
| | | -sansar-granusansis | | | oleonana | | | | | | | |
| Repair Ord | er Date | : 04/ | 1 7/2 007 | Repair Order Number : | 2 | 48695 | Odom | cter Re | ad | ing: | | 737 miles |
| Serviced By: | | | NC. | Se | lling Sou | rce : | ara | | 13 - C | HEVROL | 3 1 | |
| Ly: | TAREN | TUM, | | 84-1435 | Si | te Code : | | | | 13596 | | |
| | (724) 22 | H-2100 | | | Bı | usiness As | sociate | Code: | | 113479 |) | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Ī | Par | | Auth Code | | erson Code | Line Total | Comments |
| | | | | | | | | | S9245102 | | | |

| 04/20/2007 788 01 # B4261 - FRONT SIDE DOOR LOCK REPLACEMENT - LEFT SIDE | 15789113 - LOCK ASM | N/A | N/A | S 114.03 | И | |
|--|------------------------|-----|-----|----------|---|--|
|--|------------------------|-----|-----|----------|---|--|

| Repair Order Date: 01/29/2007 Repair Order Number: | | | A70875 Odometer Read | | ding: | ling: 0 miles | | | | | |
|--|--|------|----------------------|---|------------------------|---------------|--------------|----------------|---------------|----------|--|
| Serviced | | | | | Selling Source: 13 - 0 | | | | HEVROLET | | |
| By: | 22 W 7TH ST TARENTUM, PA 15084-1435 | | | 84-1435 | Site Code: | | | 13596 | 13596 | | |
| | (724) 224-2700 | | | Business Associate Code: | | | 113479 | | | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Pa | ** | Auth Code | Person Code | Line Total | Comments | |
| 02/02/2007 | 766 | 01 | 1 | 27000 - PRE-DELIVERY INSPECTION - BASE TIME | N/A | | N/A | N/A | \$ 90.91 | N | |

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System Vehicle Build

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| VIN | 1G1AK55F377 | |
|---------------|-------------|-----------------------------------|
| | | VEHICLE BUILD |
| Merchandising | Model: | TAK69-2007 CORALT A-DOOP IS SEDAN |

| Merchandising Model: | 1AK69 -2007 COBALT 4-DOOR LS SEDAN | | | | |
|------------------------------|------------------------------------|---------------|------|--|--|
| Gross Vehicle Weight Rating: | 1707 kg (3764 lb) | KRBVIS | | | |
| Build Date: | 01/29/2007 | Build Plant : | 177A | | |

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

| AK5 - DRIVER & RIGHT FRONT PASSENGER AIR BAGS | AL0 - SENSOR INDICATOR INFLATABLE RESTRAINT, FRT PASS/CHILD PRESENCE DETECTOR |
|---|---|
| AR9 - DELUXE FRONT BUCKET SEAT | AT8 - RESTRAINT PROVISIONS CHILD, RR SEAT, RR FACING |
| B34 - FLOOR MATS, FRONT/REAR | B35 - REAR FLOOR MATS |
| B84 - BODY COLOR, BODYSIDE MOLDINGS | C67 - ELECT. FRONT AIR CONDITIONER |
| DC8 - MIRROR, O/S MANUAL FLDG, BLK | D36 - MIRROR I/S R/V TILT |
| FEI - SUSPENSION SYSTEM-SOFT RIDE | FE9 - FEDERAL EMISSIONS |
| FY1 - TRANS/AXLE 3.63 RATIO | IPB - INTERIOR TRIM DESIGN |
| J41 - BRAKE, FRONT DISC/REAR DRUM | K64 - 115 AMP GENERATOR |
| LOD - ASSEMBLY PLANT - LORDSTOWN,OHIO | L61 - ENGINE, 2.2L DOHC 4V ECOTEC |
| MN5 - 4 SPEED AUTO TRANSMISSION | MX0 - TRANSMISSION, 4 SPD AUTOMATIC |
| NT7 - FEDERAL EMISSION TIER 2 | N45 - 3 SPOKE STEERING WHEEL |
| PCI - PROTECTION PACKAGE *FLOOR MATS, FRONT/REAR *BODY COLOR, BODYSIDE MOLDINGS | PGI - 15" STEEL WHEEL |
| QTU - P195/60R15 TOURING BW TIRES | R6K |
| R6P - PREMIUM PAINT | R9N - HEATED LEATHER APPOINTED FRONT BUCKET SEATS |
| R9X - XM TRACKING CODE | SLM - STOCK ORDERS |
| UQ4 - BASE SPEAKER SYSTEM | US8 - AM/FM STEREO, CD PLAYER & MP3 PLAYER |

| | (REPLACES STD/OPT RADIO) |
|-----------------------------|---|
| VT7 - OWNERS MANUAL ENGLISH | V73 - STATEMENT OF VEHICLE CERT U.S. /CANADA |
| ILS - ILS BASE PACKAGE | ISZ - OPTION PACKAGE DISCOUNT |
| 14B - GRAY | 14I - GRAY |
| 21U - LASER BLUE METALLIC | 6AR - FRONT SPRING |
| 7AR - FRONT SPRING | 8AA - REAR SPRING |
| 9AA - REAR SPRING | , |

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PE10-005
GM
4/14/2010
ATTACHMENT
Q 03
Subject Legal
ATT

Job Number: 5881

SUPPLEMENT OF RECORD 1 WITH SUMMARY 2008 CHEV COBALT LS 4-2.2L-FI 2D CPE WHITE Int:

ALTERNATE PARTS SUPPLIERS

| 26 Qual Repl | Parts Grille BASE | Part No. | GM1200545 | Price \$113.00 |
|---|------------------------------------|----------------------------------|----------------------------------|----------------|
| 485 LUDWI | - Complete G AVENUE NY 14227 | | (800)258-0008 (716)894-6262 | |
| 8 CAIRN S | - Complete TREET , NY 14611 | | (800) 836-2839 (585) 328-4420 | |
| Keystone - Complete 450 2ND STREET NEW KENSINGTON, PA 15068 | | (800) 445-5215 (724) 339-1800 | | |
| Keystone - Complete 801 W. 12TH STREET ERIE, PA 16501 | | | (814) 459~1300 (888) 566-7844 | |

SUPPLEMENT OF RECORD 1 WITH SUMMARY 2008 CHEV COBALT LS 4-2.2L-FI 2D CPE WHITE Int:

Job Number: 5881

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR COMMERCIAL INSURANCE OR A STATEMENT OF CLAIM FOR ANY COMMERCIAL OR PERSONAL INSURANCE BENEFITS CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, AND ANY PERSON WHO, IN CONNECTION WITH SUCH APPLICATION OR CLAIM, KNOWINGLY MAKES OR KNOWINGLY ASSISTS, ABETS, SOLICITS OR CONSPIRES WITH ANOTHER TO MAKE A FALSE REPORT OF THE THEFT, DESTRUCTION, DAMAGE OR CONVERSION OF ANY MOTOR VEHICLE TO A LAW ENFORCEMENT AGENCY, THE DEPARTMENT OF MOTOR VEHICLES OR AN INSURANCE COMPANY, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE VALUE OF THE SUBJECT MOTOR VEHICLE OR STATED CLAIM FOR EACH VIOLATION.

THE PREPARATION OF THIS ESTIMATE MAY HAVE BEEN BASED ON THE USE OF CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. THERE ARE WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS. THESE WARRANTIES ARE PROVIDED BY THE MANUFACTURER AND/OR DISTRIBUTOR OF THE PARTS RATHER THAN BY THE ORIGINAL MANUFACTURER OF YOUR VEHICLE.

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Unless otherwise noted all items are derived from the Guide DR1CL05, CCC Data Date 06/01/2008, 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 2006 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.

SUPPLEMENT OF RECORD 1 WITH SUMMARY 2008 CHEV COBALT LS 4-2.2L-FI 2D CPE WHITE Int:

| Ι | HEREBY | ACCEPT | AND | ACKNOWLEDGE | RECEIPT | OF | THIS | FINAL | BILL | AND | VEHICLE | |
|----|--------|--------|-----|-------------|---------|----|------|-------|------|-----|---------|--|
| DA | ATE | | | SIGNATURE | | T- | | | | | | |

IMPORTANT INFORMATION ABOUT ALLSTATE'S CHOICE OF PARTS POLICY

This estimate may list parts for use in the repair of your vehicle that are manufactured by a company other than the original manufacturer of your vehicle. These parts are commonly referred to as aftermarket parts or competitive parts, and would be designated on this estimate as "QUAL REPL PARTS", "A/M" or "COMP REPL PARTS". Such parts may include cosmetic outer body crash parts such as hoods, fenders, bumper covers, etc. Allstate guarantees the fit and corrosion resistance of any aftermarket/competitive outer body crash parts that are listed on this estimate and actually used in the repair of your vehicle for as long as you own it. If a problem develops with the fit or corrosion resistance of these parts, they will be repaired or replaced at Allstate's expense. This guarantee is limited to the repair or replacement of the part.

However, if you choose not to use one or more of the aftermarket/competitive outer body crash parts that may be listed on this estimate in the repair of your vehicle, Allstate will specify the use of original equipment manufacturer parts, either new or recycled at Allstate's option, at no additional cost to you. Allstate does not separately guarantee the performance of original equipment manufacturer parts, and makes no representation about the availability of any manufacturer's guarantee.

SUPPLEMENT OF RECORD 1 WITH SUMMARY 2008 CHEV COBALT LS 4-2.2L-FI 2D CPE WHITE Int:

| 22 23* 40* 42* 45 | s01 | Repl | CHANGED ITEMS Washer reservoir 2.2L & 2.4L | | | | |
|-------------------------------|-----|------|---|---|------------------------|--------|---|
| 23* 40* 42* 45 | S01 | | Washer reservoir 2.27 & 2.47 | | | | |
| 23* 40* 42* 45 | S01 | | | 1 | -37.51 | Incl. | |
| 40* 42* 45 | | | Washer reservoir 2.2L & 2.4L | | | | |
| 45 | | Repl | 2 Release cable clip | 1 | -16.60 | | |
| | 501 | Repl | 2 Release cable clip AC label AC label | 1 | 8.30 | | |
| | | Repl | AC label | | -20.70 | Incl. | |
| 45 | S01 | Repl | AC label | 1 | 20.70 | 0.2 | |
| 50 | | | LT Lower reinf | 1 | -23.17 | | |
| 60* | 501 | | LT Lower reinf | 1 | 32.40 | | |
| 62 | | - | Insulator | 1 | $\frac{32.40}{-13.27}$ | -0.1 | |
| 62* | S01 | | Insulator | 1 | 7.05 | | |
| | | | Opt OEM LT/Front Wheel, steel | | | | |
| | | | 15" | | -63.00 | m -0.3 | |
| 83** | 501 | Repl | Opt OEM LT/Front Wheel, steel | 1 | | | |
| - | | | 15" | | 78.75 | m 0.3 | |
| | | | DELETED ITEMS | | | | |
| 44 | | | Rpl information labels | | | -0.3 | |
| 45 | | | Emission label | 1 | -16.40 | Incl. | |
| | | | ADDED ITEMS | | | | |
| 24 | S01 | Repl | Washer pump | 1 | 30.32 | 0.2 | |
| | 501 | Repl | Washer pump LT Upper bracket (HSS) | 1 | 4.20 | | |
| | S01 | Repl | LT Cowl grille outer seal | 1 | 0.00 | | |
| | 501 | | Qual Repl Parts 1956015 TOUR | | | | |
| | | - | CONTACT AS +25% | | 97.90 | | |
| 96# | 501 | Repl | | 1 | | 1.0 | 1 |
| | | | GLASS CHARGES Subtotals ==> | | | | |

Line 83 : LKQ AT TRIPLETT 800-822-5555 REF # 402924

Line 96 : SUBLET THROUGH LYNX AND GEN GLASS BROKE DURING PULLS

Estimate Notes:

VEHICLE HIT GUARD RAIL W \ LH FRT CORNER BODY AND SUSPENSION DAMAGE.

| Parts Parts Discount Body Labor | \$ 0.1 | | -10.0% \$ 43.00/hr | 134.58 -2.09 4.30 |
|--|------------|-------|-----------------------|-------------------------|
| GLASS CHARGES | | | \$ 25.00/hr | 25.00 |
| SUBTOTAL Sales Tax Additional Supplement | ş Taxe: | 161.7 | \$ 9 @ 8.0000% | 161.79 12.94 0.01 |
| TOTAL SUPPLEMENT AMOUN | T | | \$ | 174.74 |
| NET COST OF SUPPLEMENT | | | \$ | 174.74 |

SUPPLEMENT OF RECORD 1 WITH SUMMARY 2008 CHEV COBALT LS 4-2.2L-FI 2D CPE WHITE Int:

Job Number: 5881

THE PREPARATION OF THIS ESTIMATE MAY HAVE BEEN BASED ON THE USE OF CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. THERE ARE WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS. THESE WARRANTIES ARE PROVIDED BY THE MANUFACTURER AND/OR DISTRIBUTOR OF THE PARTS RATHER THAN BY THE ORIGINAL MANUFACTURER OF YOUR VEHICLE.

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SUPPLEMENT OF RECORD 1 WITH SUMMARY
2008 CHEV COBALT LS 4-2.2L-F1 2D CPE WHITE Int:

Job Number: 5881

| I | HEREBY | ACCEPT | AND | ACKNOWLEDGE | RECEIPT | OF | THIS | FINAL | BILL | AND | VEHICLE | |
|----|--------|--------|-----|-------------|---------|----|------|-------|------|-----|---------|--|
| | | | | | | | | | | | i i | |
| - | - | | | | | | | | | | | |
| DF | TE | // | | SIGNATURE | | | | | | | | |

IMPORTANT INFORMATION ABOUT ALLSTATE'S CHOICE OF PARTS POLICY

This estimate may list parts for use in the repair of your vehicle that are manufactured by a company other than the original manufacturer of your vehicle. These parts are commonly referred to as aftermarket parts or competitive parts, and would be designated on this estimate as "QUAL REPL PARTS", "A/M" or "COMP REPL PARTS". Such parts may include cosmetic outer body crash parts such as hoods, fenders, bumper covers, etc. Allstate guarantees the fit and corrosion resistance of any aftermarket/competitive outer body crash parts that are listed on this estimate and actually used in the repair of your vehicle for as long as you own it. If a problem develops with the fit or corrosion resistance of these parts, they will be repaired or replaced at Allstate's expense. This guarantee is limited to the repair or replacement of the part.

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SUPPLEMENT OF RECORD 1 WITH SUMMARY 2008 CHEV COBALT LS 4-2.2L-FI 2D CPE WHITE Int:

Line 10: NO AFTERMARKET PART AVAILABLE NO LKQ AVAIL LOCALLY ON CAR PART.COM NO LKQ AVAIL TRIPLETT, PJ, FUGLES, WILBERTS OR DONS AUTO. NO RECONTITIONED PART AVAILABLE ONLY AVAIL AFT MKT IS NON CAPA NON CERTIFIED. PART IS POOR FIT AND HIGH RETURN RATE.

Line 28: Part is serviced as a kit that includes two pre-sleeved end caps for the upper rail cut I location, OEM includes instruction sheet with part. Time for replacement as outlined by the I OEM. Time includes R&I/R&R radiator, fan assembly, hood latch, horn, air cleaner I assembly, washer reservoir, impact sensor, condenser, D&R hood release cable and wiring I as necessary.

Line 38 : A/M HOOD NOT AVAILABLE AT TIME OF ORDER PER BOB AT KEYSTONE

Line 83 : LKQ AT TRIPLETT 800-822-5555 REF # 402924

Line 96 : SUBLET THROUGH LYNX AND GEN GLASS BROKE DURING PULLS

Estimate Notes:

VEHICLE HIT GUARD RAIL W \ LH FRT CORNER BODY AND SUSPENSION DAMAGE.

| | 2418.39 |
|------------------------|--|
| \$ 1959.74 -10.0% | -195.97 |
| 35.9 hrs @ \$ 43.00/hr | 1543.70 |
| 16.5 hrs @ \$ 43.00/hr | 709.50 |
| 6.5 hrs @ \$ 45.00/hr | 292.50 |
| 6.0 hrs @ \$ 46.00/hr | 276.00 |
| 1.0 hrs @ \$ 25.00/hr | 25.00 |
| 16.5 hrs @ \$ 23.50/hr | 387.75 |
| | 58.45 |
| | 177.00 |
| S | 5692.32 |
| \$ 5692.32 @ 8.0000% | |
| \$ | 6147.71 |
| | |
| | 1000.00 |
| S | 1000.00 |
| | 5147.71 |
| | 35.9 hrs @ \$ 43.00/hr 16.5 hrs @ \$ 43.00/hr 6.5 hrs @ \$ 45.00/hr 6.0 hrs @ \$ 46.00/hr 1.0 hrs @ \$ 25.00/hr 16.5 hrs @ \$ 23.50/hr \$ \$ 5692.32 @ 8.0000% |

SUPPLEMENT OF RECORD 1 WITH SUMMARY 2008 CHEV COBALT LS 4-2.2L-FI 2D CPE WHITE Int:

| NO. | OP. | DESCRIPTION | QTY | EXT. | PRICE | LABOR | PAINT |
|---------|------------------------|---|-----|-------|---|-------|--------------------|
| 57 | | Deduct for Overlap LT Front panel Overlap Minor Panel | | | | -2 5 | |
| 58 | Repl | LT Front panel | 1 | 39 | 96 • | 2.5 | 0.5 |
| 59 | | Overlap Minor Panel | _ | 00. | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 2.5 | -0.3 |
| 60* 801 | Repl | LT Lower reinf | 7 | 32 | 40 | | -0.2 |
| 61 | Repl | LT Emblem GM MARK OF EXCELLENC | 7 | 4 | 75 | 0.2 | |
| 62* S01 | Repl | Overlap Minor Panel LT Lower reinf LT Emblem GM MARK OF EXCELLENC Insulator LT Rail assy (HSS) Overlap Major Non-Adj. Panel RT R&I fender assy Deduct for Overlap | 1 | 7. | 0.5 | 0.1 | |
| 63* | Rpr | LT Rail assy (HSS) | - | | s | 2.0 | 0.6 |
| 64 | | Overlap Major Non-Adj. Panel | | | | | -0.2 |
| 65 | R&I | RT R&I fender assy | | | | 1.6 | |
| 66 | | RT R&I fender assy Deduct for Overlap RT Fender RT Upper rail Overlap Minor Panel LT Upper bracket (HSS) | | | | -0.3 | |
| 67 | Blnd | RT Fender | | | | | 0.9 |
| 68* | Rpr | RT Upper rail | | | S | 0.5 | |
| 69 | | Overlap Minor Panel | | | - | 0.0 | $-\frac{0.4}{0.2}$ |
| | the product flows made | TI ONNET WITHCHE (IIO) | 1 | 4. | 20 | | 0.2 |
| 71 | | DOOR LT Outer panel | - | | | | |
| 72 | Blnd | LT Outer panel | | | | | 1.1 |
| 73 | R&I | LT Belt w'strip | | | | 0.3 | 4.4 |
| 74* | R&I | LT Body side mldg white LT Mirror assy w/o power | | | | 0.3 | |
| 75 | R&I | LT Mirror assy w/o power | | | | 0.3 | |
| 16 | R&I | LT Handle, outside | | | | 0.4 | |
| 77 | RAI | LT R&I trim panel | | | | 0.5 | |
| 78 | R&I | LT Door glass GM COWL | | | | 0.6 | |
| 79 | | COWL | | | | | |
| 80 | R&I | Cowl grille | | | | 0.7 | |
| 81* S01 | Repl | LT Cowl grille outer seal | 1 | 0.0 | 00 | | |
| 82 | | WHEELS | | | | | |
| | | Opt OEM LT/Front Wheel, steel 15" | | | | 0.3 | |
| 84 | Repl | LT/Front Wheel cover 15" | 1 | 29.8 | 37 | | |
| 85**501 | Repl | Qual Repl Parts 1956015 TOUR CONTACT AS +25% | 1 | 97.9 | 90 | | |
| 86 | 4 | FRONT SUSPENSION | | | | | |
| 8/* | Repl | LT Lower cntrl arm | 1 | 185.6 | 54 m | 1.2 M | |
| 0.0 | WEDT | DI SCLUC | 1 | 148.0 |)8 m | 1.5 M | |
| 89# | Subl | Two Wheel Alignment | 1 | 49.9 | 95 T | | |
| 90 | 2 | ELECTRICAL | | | | | |
| 91* | Repl | Fuse & relay box bracket | | 68.4 | | 1.0 | |
| 92** | Repl | Qual Repl Parts Seam sealer | | 15.0 | | 0.3 | |
| 93** | Repl | Qual Repl Parts Body cavity | 1 | 20.0 | 0 | 0.5 | |
| 0.44 | | Corrosion protection | | | | | |
| 94# | | Cover Car | 1 | 6.0 | 0 T | | |
| 95# | Repl | Hazardous Waste | 1 | 2.5 | 0 T | | |
| | Repl | GLASS CHARGES | 1 | | | 1.0 1 | |
| 97 | | OTHER CHARGES | | | | | |
| 98# | | Towing | 1 | 177.0 | 0 | | |

SUPPLEMENT OF RECORD 1 WITH SUMMARY 2008 CHEV COBALT LS 4-2.2L-FI 2D CPE WHITE Int:

| NO. | OP. | DESCRIPTION | QTY | EXT. PRI | CE | LABOR | | PAINT |
|---------|-------------|---|-----|----------|-----|--------|-----|-------|
| | | LT Bumper cover upper bracket | | | | | | |
| 14 | Repl | LT Bumper cover rear bracket | 7 | 8.19 | | | | |
| 1.5 | Repl | LT Bumper cover rear bracket Absorber | 1 | 58 43 | | 0.7 | | |
| 7.6 | | DESCRIPTION OF WARRING | | | | | | |
| 17 | Repl | LT Headlamp assy 2.2L & 2.4L | 7 | 174 71 | | Incl | | |
| | Transfer La | w/mount bracket | - | 114.11 | | THCT + | | |
| 1.8 | | | | | | 0.5 | | |
| 19 | Repl | LT Headlamp assy bracket | 1 | 4 04 | | 0.5 | | |
| 20 | Repl | LT Headlamp assy put | 1 | 3 95 | | | | |
| 21* | Ror | Aim headlamps LT Headlamp assy bracket LT Headlamp assy nut Harness 2.2L & 2.4L w/o fog | 1 | 3.25 | | 2.0 | M | |
| | 200 | lamps | | | | 2.0 | 1.1 | |
| 22 | | WINDSHIELD | | | | | | |
| | | Washer reservoir 2.2L & 2.4L | 3 | 15 61 | | Thel | | |
| 24 S01 | Repl | Washer pump | 1 | 30.32 | | 0 2 | | |
| 25 | | GRILLE | 4 | 30.32 | | U . Z | | |
| | | Qual Repl Parts Grille BASE, | 1 | 113 00 | | Tncl | | |
| | | LS, LT | 4 | 113.00 | | THET. | | |
| 27 | | RADIATOR SUPPORT | | | | | | |
| 28 | Repl | Radiator support | 1 | 190 26 | | 12 0 | | 7 6 |
| 29 | 1102- | Radiator support Evacuate & recharge | - | 109.30 | 2 | 12.0 | 3.6 | 1.5 |
| | | Refrigerant recovery | | | | 1.4 | | |
| 31 | | ENGINE / TRANSAXLE | | | 111 | 0.4 | 14 | |
| 32 | RAT | Outlet duct | | | *** | 0 2 | | |
| 23 | | COOLING | | | III | 0.3 | | |
| 34 | Repl | | 1 | 45.19 | | 0 4 | | |
| 35** | Repl | Qual Repl Parts ANTIFREEZE | 7 | 22.19 | 111 | 0.4 | | |
| | | DEXCOOL | | | | | | |
| 36 | керт | LT Radiator upper bracket | 1 | 11.56 | | | | |
| 37 | D 3 | HOOD | | | | | | |
| 38 | | | 1 | 239.70 | | 1.1 | | |
| 39 | | Add for Clear Coat | | | | | | 1.1 |
| 40 | | Add for Underside (Complete) | | | | | | 1.4 |
| 42* 601 | Donl | Add for Clear Coat | 4 | | | | | 0.3 |
| 43* | REPI | 2 Release cable clip Support strut upper bracket | Ţ | 8.30 | | | | |
| 44 | T/a T | THEODMATION TARRES | | | | 0.1 | | |
| 45 | Rent | INFORMATION LABELS AC label | 1 | 00 70 | | | | |
| 46 | uchi | FENDER | 1 | 20.70 | | 0.2 | | |
| 47** | Reni | | 7 | 110 00 | | | | |
| 48 | WEBT | Qual Repl Parts LT Fender CAPA Overlap Major Adj. Panel | 1 | 112.00 | | 2.0 | | 1.8 |
| 49 | | Add for Clear Coat | | | | | | -0.4 |
| 50 | | Add for Edging | | | | | | 0.3 |
| 51 | | Add for Clear Coat | | | | | | 0.5 |
| 52 | | Deduct for Overlap | | | | | | 0.1 |
| 53 | Renl | LT Fender liner 2.2L | 1 | 20 00 | | -0.3 | | |
| 54 | | LT Splash shield | 1 | 32.99 | | Incl. | | |
| 55 | | LT Upper rail | 1 | 10.66 | | | | |
| 56 | vehi | | 1 | 57.71 | S | 5.0 | | 0.8 |
| 30 | | Overlap Minor Panel | | | | | | -0.2 |

STERLING AUTOBODY CENTERS #72

License # Federal ID #:043388216 AN AFFILIATE OF THE ALLSTATE CORPORATION 1024 Ridge Road West

Rochester, NY 14615-2733 (585) 621-2870 Fax: (585) 621-2908

SUPPLEMENT OF RECORD 1 WITH SUMMARY

Written By: Ed Tondryk #IA-504041 07/03/2008 07:58 AM Adjuster: DD 27012460MNT06192 (800)347-4711

Insured: Owner: Address: ROCHESTER, NY Day: Cellular:

Claim : Policy #ALLSTATE INS. CO. Deductible: \$1000.00 Date of Loss: 06/18/2008 Type of Loss: Collision

Point of Impact: 11. Left Front

Inspect STERLING AUTOBODY CENTERS #72 Business: (585)621-2870

Location: 1024 Ridge Road West

Rochester, NY 14615-2733

Insurance ALLSTATE

Company: 165 Sully's Trail

Pittsford, NY 14534

Business: (800)347-4711

Days to Repair

2008 CHEV COBALT LS 4-2.2L-FI 2D CPE WHITE Int:

VIN: 1G1AK18F087 Lic: NY Prod Date: 12/2007 Odometer: 3664

Condition: Good

Full Wheel Covers

Air Conditioning Rear Defogger Tilt Wheel
Intermittent Wipers Message Center Dual Mirrors
Console/Storage Clear Coat Paint Power Steering
Power Brakes Power Trunk/Tailgate AM Radio
FM Radio Stereo Search/Seek
CD Player Driver Air Bag Passenger Air Bag
Cloth Seats Bucket Seats 5 Speed Transmission

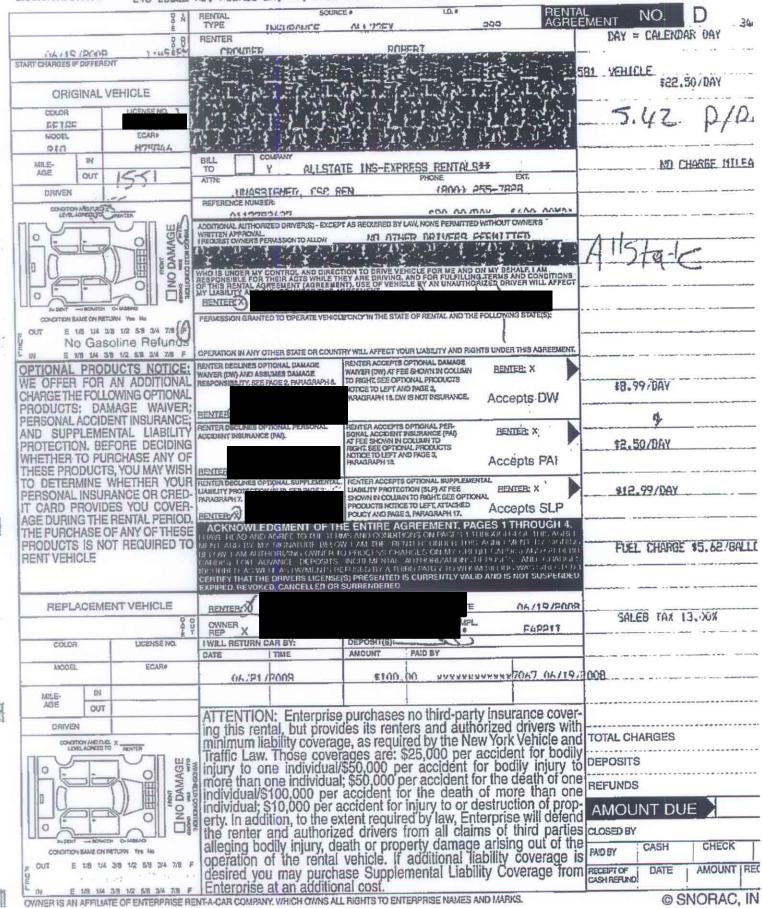
| the past | | ~~=== | | | | | | |
|----------|-----|-------|--|-----|------|-------|-------|-------|
| | NO. | OP. | DESCRIPTION | QTY | EXT. | PRICE | LABOR | PAINT |
| | 1# | | ESTIMATED COMPL.DATE: 07-11-08 | | | | | |
| | | | | 1 | | | | |
| | 2# | | CUSTOMER HAS THE RIGHT TO | 1 | | | | |
| | 3# | | REQUEST IN WRITING PARTS BE | 1 | | | | |
| | 4# | | RETURNED AFTER REPAIRS | 1 | | | | |
| | 5# | Algn | SETUP \ MEASURE UNIBODY | | | | 2.0 | |
| | 6# | | PULL LH RAIL | | | | 1.5 | F |
| | 7# | Algn | PULL CORE SUPPORT | | | | 1.5 | |
| | 8# | Algn | PULL LH APRON \ TOWER | | | | 3.0 | |
| | 9 | | FRONT BUMPER | | | | 5.0 | * |
| N | 10 | Repl | Bumper cover | 1 | 362. | 57 | 2.2 | 2.6 |
| | 11 | - | Add for Clear Coat | - | | | | 1.0 |
| | 12 | Repl | Control of the contro | 1 | 128. | 87 | Incl. | 1.0 |

enterprise

OWNER OF VEHICLE: BRANCH ADDRESS:

럞

SMORAC, INC. D/B/A ENTERPRISE RENT-A-CAR 248 BUELL RD. ROCKESTER, NY. 146243122 (SSS) 235-6700 50 0:30 AM - 5:00 PM TU 0:30 AM - 6:00 PM TH 7:30 AM - 6:00 PM TH 7:30 AM - 6:00 PM SA 9:00 AM - :2:00 CLOSED REFW 346K61







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| BINDING TYPE | | BINDING POSITION | |
|--------------|-------|------------------|------|
| STAPLE | START | CONT'D | END |
| REDWELD | START | CONTID | END |
| LOOSE | START | CONT'D | END |
| PAPERCLIP | START | CONT'D | END |
| CLAMP | START | CONT'D | END. |
| RUBBERBAND | START | CONT'D | END |
| FOLDER | START | CONT'D | END |
| BINDER | START | CONT'D. | END |
| OTHER | START | CONT'D | END |

ESIS/GM Central Claims Unit P.O. Box 300 Mail Code 482 C19 B61 Detroit, M1 48265-3000 800.888.0164 tel 313.665.0911 fax

September 4, 2008

Matthew Fruth Claims Administrator

Rochester, NY

RE: Claimant:

Our File No.:

Our Client: General Motors Corporation

Date/Event: 6/18/2008

Subject vehicle: 2008 Chevy Cobalt

VIN: 1G1AK18F087

Dear

ESIS is the third party administrator on behalf of General Motors. As we discussed, the above claim has been denied.

If you choose to pursue this matter further, you must maintain the vehicle in its immediate post-incident condition.

Thank you for your time in this regard.

Sincerely,

Matthew Fruth Claims Administrator

Service Request Detail SR No. 71-641074445 Rof No. Goodwill No Goodwill Offered BRC Type PAR GW SubTypo Account Sito Bus, Unit BRC Last Name First Name Not initiated Approvat Area PAR Daytime# Evening# UCC Steering - General Sub-Area Initiate PAR- Collision Address City Involved Dir R. J. Chevrolet, Inc. Safety Yes State NY ZIpCd Serial #/VIN 1G1AK18F097 Con Acct Sourco Phone Updated 7/3/2008 10:22:48 AM Model Year 2008 Priority Medium License # CHEVROL Owner HOLLARAL Make Chevrolet Warr, Start 04/18/2008 Status Open Opened 6/30/2008 04:40:06 PM Model Cobalt Mileago 3000 Sub-Status Closed Abstract Steering + General ***PAR File*** Please forward all inquiries to Alyson Hollar ext 21049 Customer Description

Pre-PAR

| PAR Notifier Owner Onver Last Na | 6/18/2008 11:20:00 PM | Injuries # Other Veh # People N 0 1 Driver First Name | Asphall Height DO | Dry | Cond. Fire Report# None plinies | Police Report# FX1872000174 |
|--|---------------------------------|--|-------------------------|----------------------------|---|---|
| паченкост Инкложн | ent Last Name | Insurance Agent First Name Unknown | Phone #. (585) 426-0550 | Insuranc | e Agency and address of the Insurance | |
| ncident .oc | Route 531 West bound feeds | r Ramp. Gates, NY, 14624 | Incident Desc | Cust's son | driving on the highway | |
| Component /ehicle | Steeling Body shop | | Damage Desc | | side door fender, grid hood driv Headlamp, Tires and window wa | er wheel, rim, overfolow for the radiator, struts, fire |
| .00 | | | Add'I Info | Claim: | Phone # of the collisi | on shop 5856212870 (Tina or Ed-Sterling Body |
| Emgcy Svo Names | Unknown | | Maint Lo | | | |
| PAR De | tail | | | 21 1 | | |
| Collision | Y Non Collision | Property N The Damage | nermal Evt N | Spec Equip | None | |
| /ohicle Speed | 40 | Weather Clear Condition | | Prop Owner | n/a | Property n/a Type |
| ust Servico Jate | | Loc Last Service | | Property Location | nfa | Prop Est Repair Cost |
| /oh Est Repair Cost | \$6,000.00 | Spec Equip n/a Installer | | Prop Damage Description | None | |
| Primary Jeh Uso | Personal | Inspection Type | | Inspected By | Inspection Not Performed | Inspection Date/Time |
| Veh Damage Description | Driver door, front, grill, hood | , passenger fender, driver's side wh | eel, struts, tie rod | Explain Other | File sent to ESIS | |

Activities

| ontod 3/2008 12:12:38 PM | Created By KINZERTH | Assigned To ESISBIQU | Escalation | Activity Sub-Typo ESIS - Insurance Involvement | In Progress | Completed 200 | ESIS - Insurance Involvement |
|---------------------------------|--|--------------------------|--|---|--|--|--|
| ntact Last Name | THE LOUIS | Contact Firs | i Name | Account | Carried W.C. | BAC Code | I |
| niments | AC. 181 | | The State of the S | STOREST THE STORES | | TESTARE OVER 1 | i |
| State Insurance 35) 426-0550 | | | 1-11-20-0 | CALL SOME DAY COME | | A STATE OF THE STA | |
| alm # 0112792627 | | | | | | | |
| infidential Comments | Next | 1250 | CONTRACTOR OF THE PARTY OF THE | 二曲 6年 6年 2日本 | O. TOTAL STEEL | THE PERSON NAMED IN STREET | |
| ontod = | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed ::: | Description |
| J/2008 10:48:29 AM | DRAHEICM | KINZERTH | Notify CRM | | Done | 7/3/2008 12:13:24 PM | ESIS-Insurance involvement |
| infact Lost Name | | Contact Firs | i Name | Account | () · | BAC Code | |
| minents : | WI To a series | STATE STREET | THE PARTY | | | | |
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| eated | Created By | Assigned To | CONTRACTOR OF STREET | Activity Sub-Typo | | | Description |
| 9/2008 10:14:37 AM | HOLLARAL | HOLLARAL Contact Fire | Scheduled Follow-up | | Scheduled Alarr | | File sent to ESIS |
| niaci Lasi Namo | A STEEL | Contact Firs | t Name | Account | West at the second | BAC Code | |
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| 9/2008 10:14:18 AM | HOLLARAL | DRAHEICM | BRC PAR | ESIS-Insurance Involvement | Done | 7/3/2008 10:48:27 AM | Insurance involvement |
| nlact Last Name | AND DESCRIPTION OF THE PARTY OF | Contact Firs | Name - Marie | Account of the Account | 一种。2017年15日 | BAC Code | 1 |
| manicika | CNU | | SESTION TO THE PROPERTY OF | 性。10.4年118.37月 · 37月 · 188 | | | |
| celved and assigned | | | | | | STATE OF THE PERSON NAMED IN COLUMN TWO | |
| ad Draheim/ATX/Wor | kilow PAR | | | | | | |

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on 7/7/2008

Page 2 of 7

Activities

| 00(05) 3/2008 10:14:17 AM | HOLLARAL | Assigned To HOLLARAL | Ownership Changed | Ownership Escalated to | Status Done | 7/3/2008 10:14:18 AM | Description Ownership Escalated to BRC |
|------------------------------|-------------------|-----------------------------------|---|---|--------------------|---|---|
| potact Last Name | FI L. SHOWE | Contact Fire | t Name | BRC Account | 12 T TABLE | 8000-4 | |
| | | Comout 113 | Communication desired | NOUTH ONE - COST | Y | BAC Code | |
| minustrus. | S S T VA | THE WEST | CHARLES SEED ST | CHEEN COMPANY THREE | 第一、国际 | , | |
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| cated to an acres | Created By | Assigned To | Activity Type | Activity Sub-Type | Status Ind | | Description |
| 1/2008 12:39:26 PM | DRAHEICM | HOLLARAL | Ownership Changed | | Done | 7/1/2008 12:39:26 PM | Service Request Ownership has changed FROM: CABRERPE TO: |
| naction Name | | Contact Fire | Name | Account | With at | BAC Code | HOLLARAL |
| | | | 7-1/6 1 1 | (PSG241) 中国(1) | - MARKET | Less to the second | |
| nfidential Comments | na i | 学が開かし | The state of the | and Godge | A SAMA | ADMIN'S | |
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| eated | Created By | | Activity Type | Activity Sub-Type | Status | Completed | Description |
| 1/2008 12:39:10 PM | DRAHEICM | HOLLARAL | BRC PAR | Initial Contact- Phone | Done | 7/3/2008 10:06:24 AM | called |
| ntaci Lesi Name | | Contact First | Name | Account | * 100 Marie 1 | BAC Code | |
| | | | THE SALES | 5-55() State (1) | The artists | Month of the Control | |
| ist sts: Cust son was d | riving onto the I | nighway and the inco company A | power steering froze up co listate. Cust has to pay \$1. | ausing him to drive into a guard ,000 dollars and some rental bill | rail Veh is at Ste | | |
| | | | | | | | |

Cust sts: No.

Alyson Hollar/BRC/PAR/ATX
Confidential Comments

Activities

| | DRAHEICM | | Activity Type | Activity Sub-Type | | Completed | The state of the s |
|--|--|---------------------------------------|----------------------------------|---|--------------------|---|--|
| 7/1/2008 12:39:05 PM | 100000000000000000000000000000000000000 | HOLLARAL Compression | BRC PAR | Initial Contact- Dealer Account | Done | 7/3/2008 10:12:17 AM | called |
| Section and Parities | | COMBG FIL | at ranne | Account | | BAC Code | |
| | The state of the s | SECTION | | 一种的自然 | THE WARREN | THE PARTY OF THE PARTY OF | |
| nto auv: Cost was in a | collision and is | alleging it was o | caused by the power ste | ering failing. My phone number is | 1-866-790-5700 | ext 21049. | |
| lysen Hellar/BRC/PAR | | | | | | | |
| Confidential Comments | 1931 | | I rockward such b | AN ARREST NAME OF THE | NAME OF THE PARTY. | 建筑图图 | |
| realed | Created By | Assigned To | Activity Tune | | | | |
| /1/2008 12:38:59 PM | DRAHEICM | HOLLARAL | Activity Type BRC PAR | Activity Sub-Typo Initial Contact-AVM | Done | 7/3/2008 10:13:09 AM | Description Called |
| ontact Last Name | 500 State of | Contact Fire | t Name | | har vorte at the | | Colleg |
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| TOD TOURISH CHEV | DOLET DOOLE | permitted kinds | | | | | |
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| CRS provided vehicle a | | | ption of cust concern. C | RS adv DVM that this is just on fy | l but if DVM has | any questions or Information to | |
| CRS provided vehicle a sall CRS. | nd cust informati | | ption of cust concern. C | RS adv DVM that this is just an fy | I but If DVM has | any questions or information to | |
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| CRS provided vehicle a all CRS. Alyson Hollan/BRC/PAR Hollifienilis (Comments) Resided 71/2008 12:38:55 PM | nd cust informati | on and a descri | the Soles | Min VESUS TO THE | | | Doscription called |
| CRS provided vehicle a all CRS. dyson Hollan/BRC/PAR fortificanilla (Commental trestor | nd cust informati | on and a descri | Activity Type BRC PAR | Activity Sub-Typo | Status Done | Completed | Description |
| CRS provided vehicle a all CRS. dyson Hollan/BRC/PAR fortificanilla (Commental trestor | nd cust informati | on and a descri | Activity Type BRC PAR Name | Activity Sub-Type Acknowledgement Account | Status Done | Completed 7/2/2008 12:03:13 PM | Description |
| RS provided vehicle a aff CRS. Lysun Hollan/BRC/PAR Application (1/2008 12:38:55 PM This is Alyson Hollar and | ATX Created By DRAHEICM | Assigned To HOLLARAL | Activity Type BRC PAR Name | Activity Sub-Typo Acknowledgement Account | Status Done | Completed 7/2/2008 12:03:13 PM BAC Code | Description |
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| Alyson Hollan/BRC/PAR Contidential Comments Recited 71/2008 12:38:55 PM | Created By DRAHEICM d I am calling from | Assigned To HOLLARAL in the product a | Activity Type BRC PAR Name | Activity Sub-Typo Acknowledgement Account | Status Done | Completed 7/2/2008 12:03:13 PM BAC Code | Doscription |

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on 7/7/2008

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Activities

| ostod /2008 12:38:51 PM | DRAHEICM | Assigned To HOLLARAL | Activity Type Notify CRM | Activity Sub-Type | Dane Dane | 7/2/2008 12:03:35 PM | Description (if assigned) |
|--|------------------------|-------------------------|-----------------------------|--|---|--|--|
| ntact Lost Name | HE BOOK | Contact First | l Name | Account Account | d'an "Madie | BAC Code | |
| AIII IOTUS | 31 3104-50 | ALL SHIP | 进路位 平身并加 | 经验证 1.4000000000000000000000000000000000000 | and Statement | la de company de la company | |
| oficiential Comments | The Latesta | | Share See also | X 2000年 (2.1) 组织建筑的2.1.1 | The latest | CONTRACTOR 1-300 | |
| rated rated 12:38:47 PM | Created By DRAHEICM | Assigned To | Activity Type | Activity Sub-Type | Stolus I | Completed 7/2/2008 12:03:32 PM | Doscription of research vin |
| nlact Last Name | Jan Sells | | Name | Account | 100000000000000000000000000000000000000 | BAC Code | Topular III |
| milding | | | - 1. M T. S. | | AND T | 3885 (6) AK | |
| inned VIN-no related ecked GMVIS- no rel | | | | | | | |
| ion Hollar/BRC/PAR | | | | * TUVETRIENERIO | INTERIOR CO. | 200 m | |
| name into Comments | | | | A Section of the Sect | | State | |
| oated //2008 12:38:28 PM | Created By DRAHEICM | Assigned To HOLLARAL | Activity Type - BRC PAR | Activity Sub-Type Case Assigned | Status | Completed: 7/2/2008 12:03:28 PM | Description assigned to alyson hollar ext 21049 |
| ntact Last Name | | Contact First | | Account | the property of the | A CONTRACTOR OF THE PROPERTY O | 5553.104.10 67,5011.101.111.014 |
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| pelved. | NA VIII | | | | | | |
| son Hollar/BRC/PAR niidentiki Comments | | | 计 然后 化 茅蕨 | 一一、杨林林园园。16 | number of the | inc. not the last of the last | |
| ated | Created By | Assigned To | Activity Typo | Activity Sub-Typo | | Completed 1997 | Description State of the second |
| The second secon | DRAHEICM | CABRERPE | SR Opened | Account | Done | 7/1/2008 10:48:25 AM | SR In Status of Closed has been Re Opened by DRAHEICM |
| 1/2008 10:46:25 AM | State State St. | | | | | | |
| | t in the fi | Contact First | | | | | |

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on 7/7/2008

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Activities

Contact Last Name

| 1/2008 10:46:24 AM | DRAHEICM | CABRERPE | SR Closed - Dissatisfied | | Done | 7/1/2008 10:45:24 AM | Service Request has been Closed |
|--------------------|--|----------------|--------------------------|--|-----------------------|---|---------------------------------|
| alaci I ast Mama | ET PH | Postpel First | Name . | Account | 。· 英国共和国共和国共和国 | BAC Code | Dissatisfied. |
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| lidential Comments | 建 模。 (1) 10 10 10 10 10 10 10 10 10 10 10 10 10 | | | LANGE THE STATE OF | acovered | - 196 Have 188 | |
| | | | | an paint grace (Co.) | Company of the second | 一年 100 日本 100 日 | |
| reated | Created By | Assigned To | Activity Type | Activity Sub-Ty | po Status | Completed | - Doscription |
| | | | | | | | |

BAC Code

CRS advised that a person from the PAR Department will contact the customer within 2 business days

Contact First Name

Peter Powers / CAC Tier 1/ L1

Received and assigned in PAR, Chad Drahelm/ATX/Workflow PAR

Confidential Commercia

Account

Created By Assigned To Activity Type Activity Sub-Type Status Completed Description
6/30/2008 04:52:10 PM CABRERPE CABRERPE Inbound Call Customer Complex Request Done 6/30/2008 04:59:35 PM Alleged product allegation - Collision
Contact Last Name Account BAC Code

Cust states: Her son had an accident on the veh because of a product failure. Cust states that, according to the shop that was repairing the veh, Power steering control module caused the veh not to turn and his son went over the guardrall. Cust states his son was not injured but he will need to incurr in expenses to repair the veh over \$ 6000.

Cust seeks: Info on how to proceed on this case.

CRS Adv: Explained customer will forward case to PAR departament and he should be receiving a call within the next 48 business hours. Cust agreed. Provided Case Id. Cust provided #s to contact him:

Anytime is ok to contact him.

Peter Powers / CAC Tier 1/ L1

Confidential Comments

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on 7/7/2008

Page 6 of 7

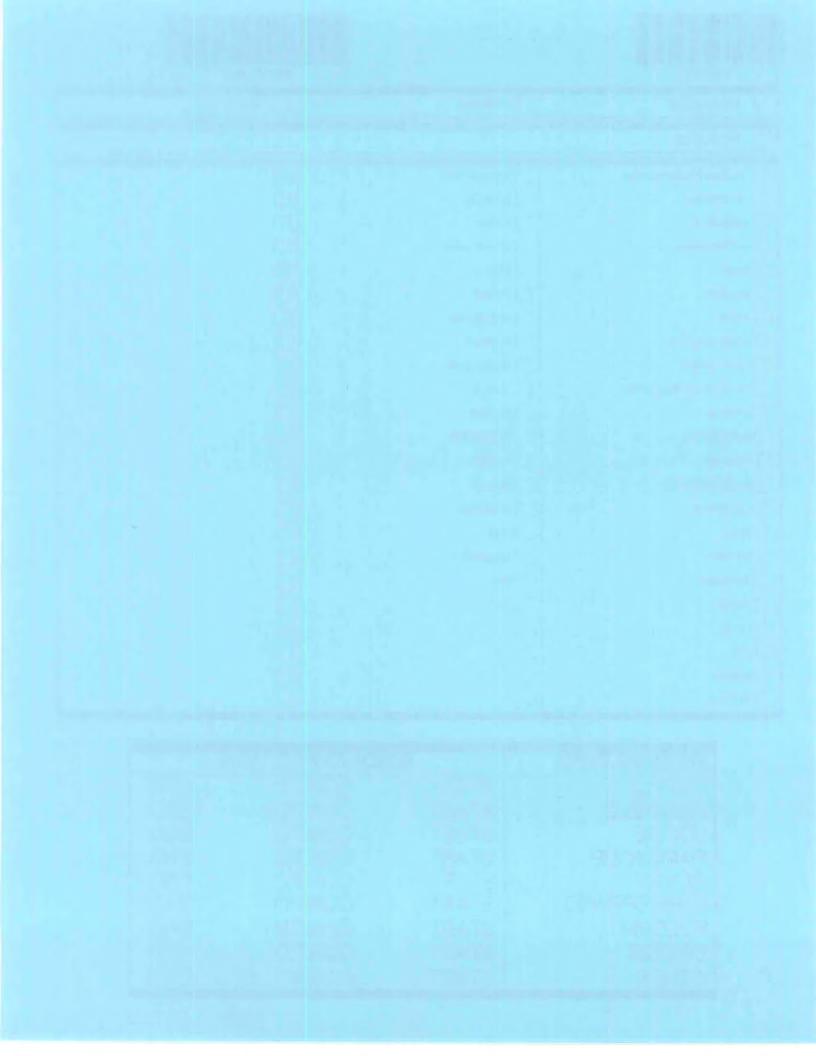
UCC Information

UGC Godo Symptom Description
M01 Inoperative Steering - General

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on 7/7/2008

Page 7 of 7



GM Vehicle Inquiry System Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| | | | | | | Telb | | | | | | |
|--|-------|------------|-----------------------|---------------|------------|---------------------------|--------------------------------|---|-------------------|---------------------------|--------------------|----------------------|
| VIN: | | IGIAK | 18F087 | | | | | | | | | |
| | | | | VEHIC | LE II | VFOR | MATIC | ON | | | | |
| Merchandising Model: | | 1AK COL | | COBALT 2-I | DOOR | R LS Warranty Start Date: | | | Date: | 04/18/2008 | | |
| BARS Order T | ype: | 70 - | RETAIL | - STOCK | | | | | | | | |
| Delivering Dealer: BOB JOHNSON CHEVROLET 1271 W RIDGE RD ROCHESTER, NY 14615-240 | | | | | | Selling Sou | irce : | | 13 - CHEVROLET | | | |
| | | |) 663-404 | | 3-240 | 0 | ĺ | Site Code | | | 13073 | |
| | | | | | | | | Business A Code : | ssocia | te | 115385 | |
| Service Contr | act: | Yes | Yes Branded Title: No | | No | V | Varrant | y Block : | No | PDI Sta | tus ; | Paid |
| | | | | REQUIR | ED F | IELD | ACTIO | ONS | | | | |
| Vehicle Has No | Curr | ent Reco | rd Of Ou | itstanding Ca | mpai | gns | | | | | | |
| | | | 5 | SERVICE IN | FOR | MAT | IONAL | ITEMS | | | | |
| Vehicle Has No | Curr | ent Reco | rd Of Ou | itstanding Se | rvice | Infor | mation | | | | | |
| - | | 0 | N STAR | AND XM SA | TEL | LITE | RADIO | INFORM. | ATIO | N | | |
| OnStar Equipped | No | OnSta | r Status | N/A | (loc | ated o | lelp pag n the "C -8271. | e for details InStar" tab i | or:go n GM | to OnStar C InfoNET) o | nline E r (888) | nrollment ONSTARI |
| XM Equipped | Yes | XM Ra | dio | YUBY0W5 | XM Stat | Active | | Refer to Help page for details or: www.xmradio.gm.ca or Dealer Hotline 1.877.GET.XMST (1-877-438-9677). | | | | |
| | | | | APPLICA | BLE | WAI | RRANT | TES | | | | |
| | | Descrip | tion | | | 1000 | ective late | Effection Odomes | | End Date | 0 | End dometer |
| 36/36000 BUMI WARRANTY | PER T | O BUMP | ER LIMI | TED | | 04/1 | 8/2008 | 7: | miles | 04/18/2011 | 1 3 | 6007 miles |
| 72/100000 SHEI THROUGH LIN | | | | E RUST | | 04/1 | 8/2008 | 71 | miles | 04/18/2014 | 1 10 | 00007 miles |
| 96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM | | | | | 04/1 | 8/2008 | 71 | miles | 04/18/2010 | 5 8 | 0007 miles | |
| 60/100000 POW WARRANTY | ERTR | AIN CO | VERAGE | LIMITED | | 04/1 | 8/2008 | 71 | niles | 04/18/2013 | 10 | 00007 miles |

| 180/150000 CALIFORNIA EMISSIONS | 04/18/2008 | 7 miles | 04/18/2023 | 150007 miles |
|--|------------|---------|------------|--------------|
| 180/150000 CALIFORNIA SELECT COMPONENT | 04/18/2008 | 7 miles | 04/18/2023 | 150007 miles |

CLAIM HISTORY

| R.O Date | R.O Number | Туре | Labor Operation | Odometer Reading |
|------------|---------------|------|---|---------------------|
| 01/07/2008 | 558486 | I | Z6999 - PDI RELATED FLUID ADDS | 2 miles |
| 12/12/2007 | A01745 | 1 | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | 0 miles |

CHECK HISTORY INFORMATION

| - | |
|-----|--|
| - 1 | Vehicle Has No Associated Check History Information. |
| - 1 | venicle has no associated Check history intornation. |

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GM Vehicle Inquiry System Claim History

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| VIN: | | | 1G1. | AK18F087 | | | | | | | |
|---------------|--------------------------|--------|-----------|--|--------------------------------|------------|----------|--------------|----------------|---------------|----------|
| | | | | CLAIM I | lis | TORY | | | | | |
| Repair Ord | ler Date | : 0 | 1/07/2008 | Repair Order Number : | 558486 Odom | | eter Rea | ding: | 2 miles | | |
| Serviced | | | | VROLET | Selling Source: 13 - CHEVROLET | | | | | ET | |
| By: | ROCHESTER, NY 14615-2406 | | | | Si | te Code | | | 13073 | | |
| | (585) 66 | 53-404 | 0 | | В | usiness A | ssociate | Code: | 115385 | 5 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | P | art | Auth Code | | Line Total | Comments |
| 02/01/2008 | 870 | 01 | 1 | Z6999 - PDI RELATED FLUID ADDS | | D N/A | | N/A | N/A | \$ 5.50 | N |
| Repair Ore | ler Date | : 11 | 2/12/2007 | Repair Order | A | 01745 | Odom | eter Rea | ding: | | 0 miles |
| Serviced | BOB JO | HNS | ON CHE | VROLET | Se | elling Sou | arce: | | 13 - C | HEVROL | ET |
| By: | 1271 W ROCHE | | | 615-2406 | Site Code : | | | 13073 | | | |
| | (585) 66 | | | | В | usiness A | ssociate | Code: | 115385 | 5 | |
| Cycle Date | Cycle Nbr | Case | Турс | Labor Operation | | Pa | art | Auth Code | Person Code | Line Total | Comments |
| 12/18/2007 | 857 | 01 | 1 | Z7000 - PRE-DELIVER INSPECTION - BASE TIME | Y | N/A | | N/A | N/A | \$ 92.24 | N |

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System Vehicle Build

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| VIN | 1G1AK18F087 |
|-------|------------------|
| A 114 | IGIARIO O |
| | VEHICLE BUILD |
| | V DATEGORD DOLLD |

| Merchandising Model: | 1AK37 -2008 COBALT 2-DOOR LS COUPE | | | | | |
|------------------------------|------------------------------------|---------------|--------|--|--|--|
| Gross Vehicle Weight Rating: | 1687 kg (3720 lb) | Order Number: | ММНК06 | | | |
| Build Date : | 12/12/2007 | Build Plant: | 187A | | | |

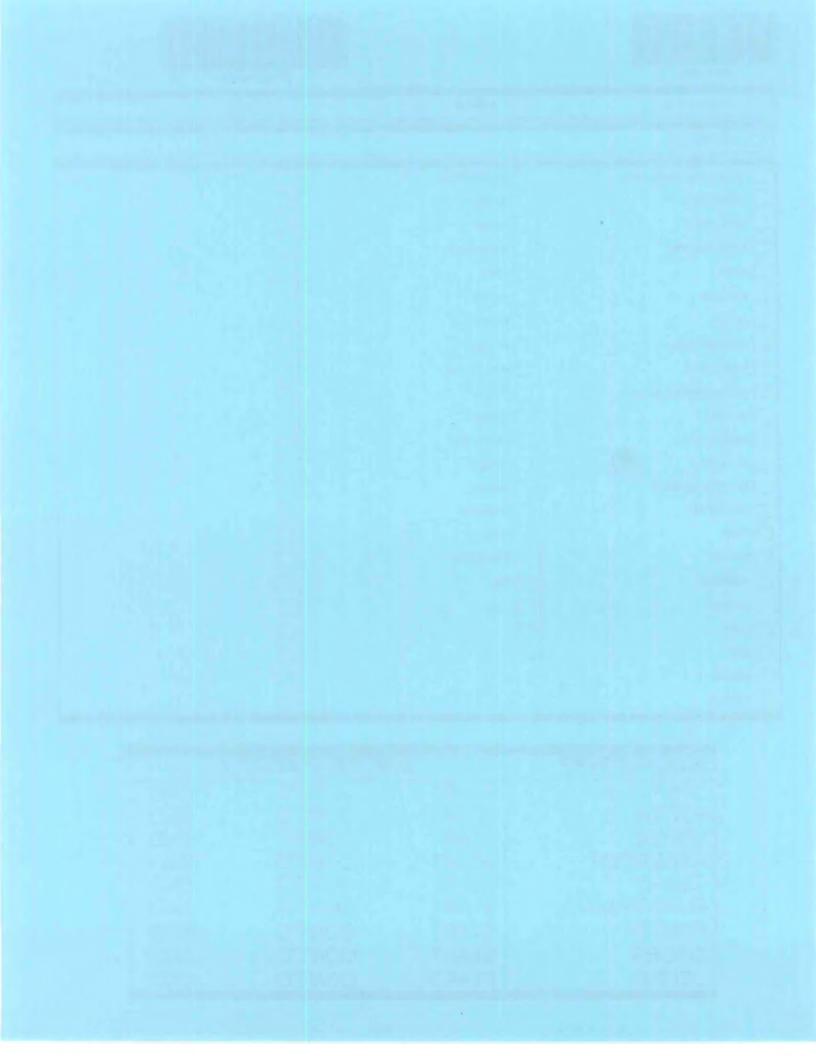
GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

| AK5 - DRIVER & RIGHT FRONT PASSENGER AIR BAGS | ALO - SENSOR INDICATOR INFLATABLE RESTRAINT, FRT PASS/CHILD PRESENCE DETECTOR |
|--|---|
| AR9 - DELUXE FRONT BUCKET SEAT | ASF - HEAD CURTAIN SIDE AIRBAGS, FRONT/REAF |
| AT8 - RESTRAINT PROVISIONS CHILD, RR SEAT, RR FACING | B34 - FLOOR MATS, FRONT/REAR |
| B35 - REAR FLOOR MATS | B84 - BODY COLOR, BODYSIDE MOLDINGS |
| C67 - ELECT. FRONT AIR CONDITIONER | DC8 - MIRROR, O/S MANUAL FLDG, BLK |
| D36 - MIRROR I/S R/V TILT | FEI - SUSPENSION SYSTEM-SOFT RIDE |
| FY1 - TRANS/AXLE 3.63 RATIO | IPB - INTERIOR TRIM DESIGN |
| J41 - BRAKE, FRONT DISC/REAR DRUM | K64 - 115 AMP GENERATOR |
| LOD - ASSEMBLY PLANT - LORDSTOWN,OHIO | L61 - 2.2L DOHC 4 CYL ENGINE |
| MN5 - 4 SPEED AUTO TRANSMISSION | MX0 - TRANSMISSION, 4 SPD AUTOMATIC |
| NEI - CT/MA/ME/NY/PA/RI/VT EMISSIONS | NU6 - EMISSION SYSTEM CALIFORNIA, PZEV |
| N45 - 3 SPOKE STEERING WHEEL | PCI - PROTECTION PACKAGE *FLOOR MATS, FRONT/REAR *BODY COLOR, BODYSIDE MOLDINGS |
| PGI - 15" STEEL WHEEL | QTU - P195/60R15 TOURING BW TIRES |
| R9N - PROCESSING CODE - SEAT | SLM - STOCK ORDERS |
| T43 - REAR SPOILER | UQ4 - BASE SPEAKER SYSTEM |
| US8 - AM/FM STEREO, CD PLAYER & MP3 FORMAT | U2K - XM SATELLITE RADIO-SERVICE FEE EXTRA. 1ST 3 MONTHS INCL. |

| VK3 - FRONT LICENSE PLATE BRACKET | VT7 - OWNERS MANUAL ENGLISH |
|---|-----------------------------|
| V73 - STATEMENT OF VEHICLE CERT U.S. /CANADA | ILS - ILS BASE PACKAGE |
| ISZ - OPTION PACKAGE DISCOUNT | 14B - GRAY |
| 14I - GRAY | 50U - SUMMIT WHITE |
| 6AR - FRONT SPRING | 7AR - FRONT SPRING |
| 8AA - REAR SPRING | 9AA - REAR SPRING |

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ESIS/GM Central Claims Unit P.O. Box 300 Mail Code 482 C19 B61 Detroit, M1 48265-3000 800.888.0164 tel 313.665.0911 fax

5 July 10, 2008

Matthew Fruth Claims Administrator

Rochester, NY

RE:

Claimant:

Our File No.:

Our Client:

General Motors Corporation

Date/Event: 6/18/2008

Subject vehicle: 2008 Chevy Cobalt

VIN: 1G1AK18F087

Dear

We are the third-party administrators on behalf of General Motors Corporation for matters involving allegations of product liability. I am the Claims Administrator assigned to this file.

In that regard, I am in receipt of your correspondence to General Motors. Your correspondence alleges that you sustained property damage as a result of a manufacturer's product defect. However, insufficient technical documentation was provided relative to any alleged defect. Due to this fact, the following information and documentation are respectfully requested:

*** IF INSURANCE COMPANY OR AN ATTORNEY IS REPRESENTING YOU, PLEASE FORWARD THIS LETTER TO THE APPROPRIATE PARTY FOR FURTHER HANDLING***

- Please provide a <u>copy</u> of your expert report and <u>color copies</u> of photos taken by your expert. Please do not send originals, as they may not be returned.
- A copy of the police and/or fire report.
- A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.
- Advise if the vehicle owner and/or operator noted anything wrong or unusual about the vehicle prior to the incident.
- Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If the vehicle owner performed repairs and maintenance, then a chronological summary of operations performed is needed.

5

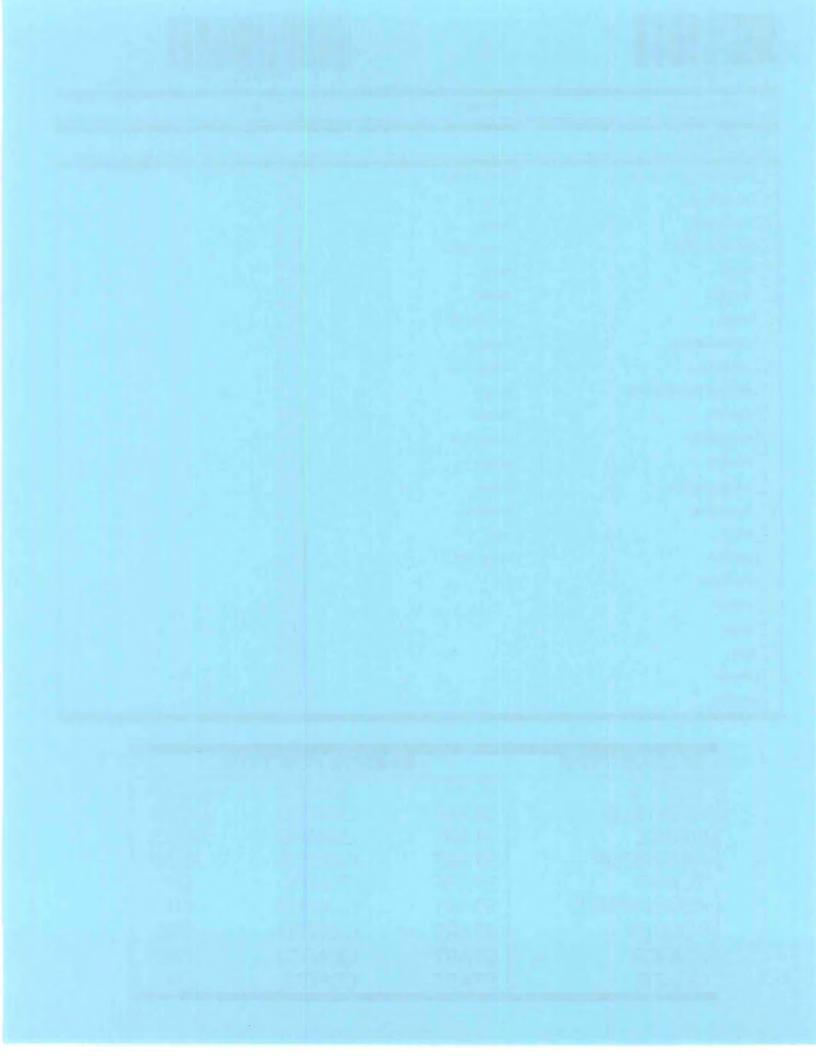
- Advise as to any after-market equipment that may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.
- Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.
- Did the owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.
- Advise if the subject vehicle was ever involved in any prior accidents.
 If applicable, identify the nature and extent of the damages and repairs completed.
- Provide copies of your proof of payment (cancelled checks). If this was a total loss, please submit a salvage estimate and your total loss work sheet.
- Advise of any injuries.

As soon as the requested information has been received, a technical evaluation of this matter will be completed. Upon the conclusion of our evaluation, I will contact you with our position.

Also, you have the obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their post-event condition for so long as you intend to pursue a claim and/or cause of action. If you choose to dispose of the salvage, it will be to your own peril and spoliation may become an issue. We will be unable to determine if a physical inspection of the subject vehicle would be necessary until we have had the opportunity to thoroughly evaluate your supporting technical documentation.

Sincerely,

Matthew Fruth Claims Administrator



S. 4001 to 4m2 504715

INVOICE

DUPLICATE 2 PAGE 1



1271 West Ridge Rd. Rochaster, NY 14615 Main (585) 663-4040 Fax (585) 663-2701

| ROCHESTER, | NY | | | | | | PAGE | 1 | | ***** | Fax (585) w.bobjohns | 663-2 | 2701 | |
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INVOICE

DUPLICATE 2 PAGE 2 Bob Johnson Chevrolet

1271 West Ridge Rd. Rochester, NY 14615 Main (586) 663-4040 Fax (585) 663-2701

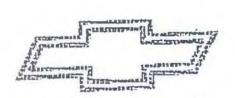
www.babjohnsonchevrolet.com ROCHESTER, NY SERVICE ADVISOR: 40 GARY OPIPARI BUS: HOME: OMISCOLORS HIM MEAR ISSUED MAKE MODEL TO A STREET WAS A STREET WHEN THE WAS A STREET WAS A STREE T6120 3980/3983 AND ENDATE: PRODUDATE INVARIE EXEMINATE PROMISED TO THE WARRED TO THE PROPURE OF 1G1AK18F087 15JUL08 CASH 90.00 17:00 08JUL08 18APROS DD STK: C81146 HARDER OF OPENED HAND HARDSHIP READ VICTORIAN HEADY OPTIONS: ENG:L61/ECOTEC 2.2L DOHC 16V 4-CYLINDER SFI TRN: MXO/ELECTRONIC 4-SPEED AUTO W/OD AXI (More. 17:36 07JUL08 11:38 15JUL08 TOTAL LIST LINE OPCODE TECH TYPE HOURS OUR WARRANTY CUSTOMERS RECEIVE A SURVEY

OUR WARRANTY COSTONERS RECEIVE A SOLVEY FROM GM. A COMPLETELY SATISFIED RESPONSE IS OUR GOAL. IF THIS IS NOT POSSIBLE PLEASE CALL

"W" INDICATES THE PART IS COVERD BY THE GM GOODWRENCH SERVICE PLUS LIMITED LIFETIME WARRANTY. IT MUST BE PAID BY THE CUSTOMER.

IIII Goodwierch Service 7/64





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WE ACCEPT - AMEX, DISCOVER, MASTERCARD, VISA, GMPP SHUTTLE SERVICE * EARLY BIRD PROGRAM

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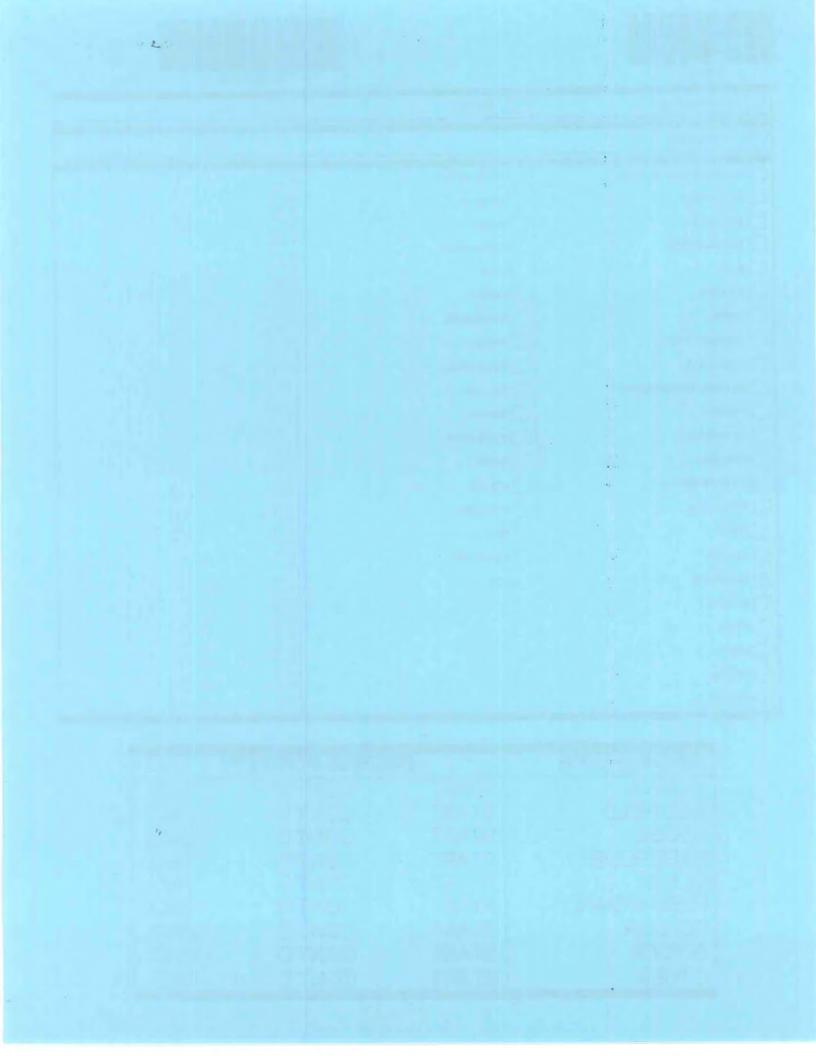
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Page 2 of 2 Pages

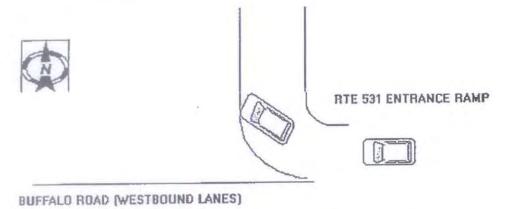
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New York State Department of Motor Vehicles COLICE ACCIDENT REPORT MV-104A (3/04)

AMENDED REPORT

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ACCIDENT INFORMATION EXCHANGE FORM

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Report your Accident to DMV on DMV form MV-104 (Report of Motor Vehicle Accident). Police Accident Reports (DMV form MV-104A) DO NOT

| Accident Report # | 1. T. T | | | | | | |
|-----------------------|-------------|---------------|------------------------|--------------|-----------------------|-----------------|-------------------|
| FX1871000174 | Local Cudes | Date | Time ! | ∓ of Veh. | Town, City, Road Name | | Se e-man |
| Police Agency | 30. 210 | 05/18/2008 | 11.20 01. | : | | 2 | - |
| GATES TO WARRIED S | E-T.VIII | Offi | cer's Name I | Badge ID# | 547ES, 101N OF - 255- | ₹ 50° | 458 (BOUNT FEE 2. |
| VEHICLE # co: | 1300 314014 | | 15 199. 404 | | Earne: | | 6708 |
| Operator's Name | e 31 s = | | | | | | |
| | | , 1 | ate of Birth | Addre | ss · · · · · · · | Pigure es escua | - |
| City:State:Zip | | Motorist I.D. | | π+ | | | |
| ROCHESTER I | ido24 | | | Vehi 2008 | cle Year and Make | License | Piate - and State |
| 111 - ALLSTATE IND CO | ompany | | V | ehicle Ow | 2012 | 0 00 As may 4 | MY |
| ehicle Towed By | | * 4 g | | | | W.Z.SS | |
| ATEL AUTO | | | Ve | hicle Toy | ed To | ROBER- | .V. |
| scellaneous Notes | | | | LIARWAY | | | |
| w 10 5 | | | | | 7 1/11/1-1-1 | | |
| | E MA REELS | | | | | | |

If you want to purchase a copy of the pulice accident report, form MV-104A.

complete DMVs "REQUEST FOR DOPY OF ACCIDENTIVE # PT form My-1 36C and 45 did to DMV.

The form and instructions are all arable at www.nysdiny.com or all your old "DMC or" >

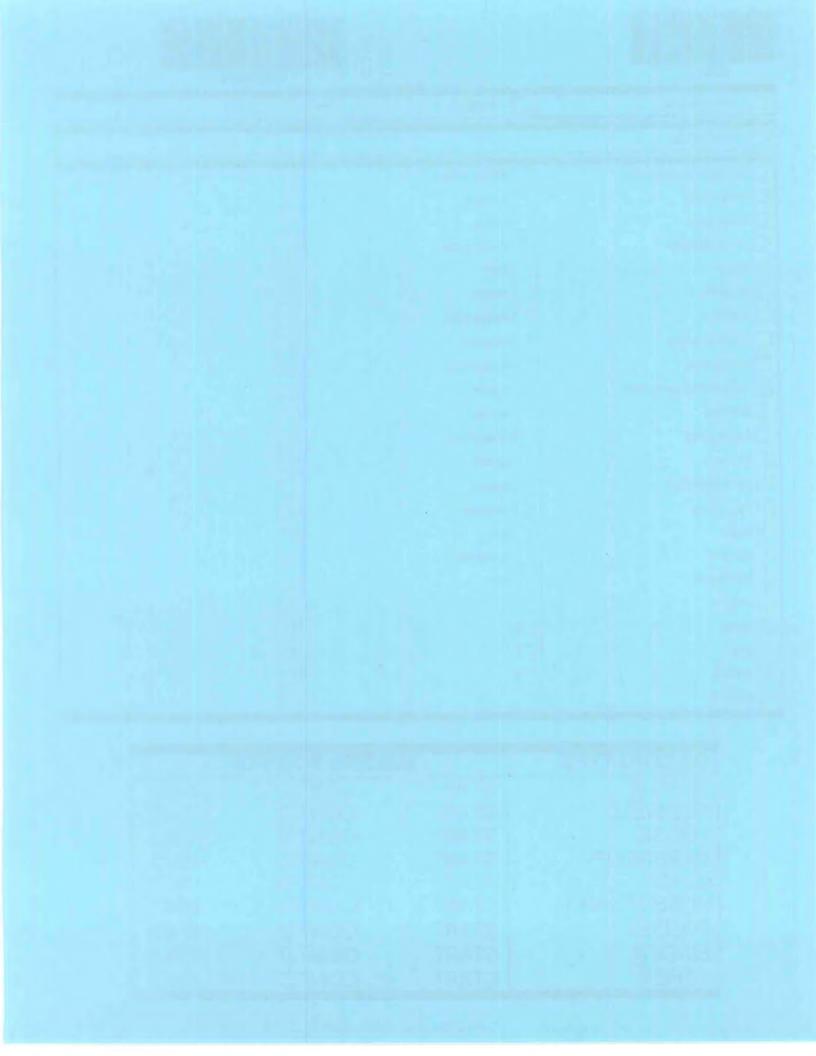
THE FORM MY-1046 MAY ALSO SE PURCHASED BY CONTACTING THE INVESTIGATING POLICE AGENCY

GALLS POURSE DEPARTMENT 1605 SUFFALO RIAD INJOHESTER MY 14624-585 147-2262

To obtain a blank civilian Accident Report (Form MV-104).

ist the DMV office hearest loo

access with surine at www.nysdmy.com.



PE10-005
GM
4/14/2010
ATTACHMENT
Q 03
Subject Legal
ATT

Service Request Detail 71-649013545 SR No. Ref No. No Goodwill Offered BRC Type PAR Goodwill Account Site **GW SubTypo** Bus, Unit BRC Last Name Not Initiated Mills First Name Unde PAR Approvat Area Daytimo # (916) 401-6354 Evening # ucc Steering - General Sub-Area Initiate PAR- Injury Involved Dir Walden Fleet Group, Inc. Safety Address 9310 Rental Car Lane City Austin Yes TX ZipCd 78719 State Con Acct Source Phone Updated 7/30/2008 12:59:32 PM Priority Serial #IVIN 1G1AL55F777: Model Year 2007 Medium License # Owner MARQUEMO Warr. Start 03/20/2007 Status Open Make ' Chevrolet 7/28/2008 02:39:54 PM Opened Model Cobalt Sub-Status Dissatisfied Clased Collision - Injuries - Steering - General Abstract Customer ***This is a BRC PAR Case. Please do not assume. Forward any inquiries to Monica Marquez at ext.21072 ***

Description
Pre-PAR

| LIGHMI | N. | | | | | and the second second | | |
|---------------------------|--|---------------------------|-----------------------------|--------------------|---|---|-------------------------|--|
| PAR Nouher. Owner | ana na mangana na mangana na mangana na mangana na mangana na mangana mangana na mangana na mangana na mangana | ries #OtherVeh # Y | Feople in Veh. Ro. 2 Con | d Sudaço) crelo | Road Day | Cond. Fire Reports | Polite 08104 | Report# AC |
| Oriver Last N | lama | Odver First Mame | Selatile Unknow | 300 1 | none | illes in | | |
| nsurance Ag | ent Lost Name | nsurance Agent First N | ame Phone i | | Insuranc | e Agency | | |
| n/a | | /a | | | - self-ins | ired • | | and and an artificial and artificial artifi |
| ncident Loc | bouroghville Rhode Island, travelling | ng on 727 east ave | | Incident Desc | | ving and powersleering locked as how many times. Driver and pass | | |
| Component | Steering Wheel and the seatbelt to place | | | Damage Desc | | ages and front suspension and d is bent back, dight side of windsh | | ı, üe-rod is broken, hoed fro |
| Vehicie Loc | Providence Rhode Island at the Ale #(401)738-0900 ext.2242 - 2053 F | | | Add'I Info | -its totalled | • | idia 6 | |
| Emgcy Svo | Browville Police Dept | AND LINES ARE SHOWN AFTER | MA MININ NEWS | MUSTANO | - no height; | | | |
| Names | and the second of the second to the second t | | | Maint Loc | At their loca | tion: | | |
| PAR De | fall | | | | *************************************** | | | |
| Collision | Y Non Collision | Property N Damage | Thermal Evt | M S | ipes Equip | none | | |
| Vehicle Speed | | Weather 1 Condition | Dry | F | rop Owner | n/a | Property Type | n/a |
| Last Service Date | r de la companya de l La companya de la co | Loc Last Service | | | roparty ocation | nfa | Prop Est Repair Cost | |
| Veh Est Ropair Cost | | Spec Equip a Installer | none | | rop Damage Jescription | ofa | | |
| Primary Veh Use | Fleat | Inspection Typo | | ß: | nspected By | Inspection Not Performed | inspection Date/Time | |
| Veh Damage Description | unknown of speed, Allover damag tie-rod is broken, hood front bump | | | | ixplain Other | Inspection Not Performed | | |

Report Generated for toporowm

on 7/31/2008

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PAR Injuries

| Last Name First Name DOB | Location is | Phone # Seating Pos | Restraint Type | |
|--|-----------------------------|--|---|--|
| | Occupant of Owner's Vehicle | Criver | Seatbelt | |
| Injury Description | Medical Rpt# | Trealment Location | Treated By | |
| - fractured rib and fractured right leg | Unknown | Unknown | Unknown | |
| Street Address | GIV | State Zip Code | | |
| | | | | |
| Last Namo First Namo DOB | Location | Phone # Seating Pos | Restraint Type | |
| | Occupant of Owner's Vehicle | Front Passenger | sealbeit | |
| | | The state of the s | | |
| injury Description | Medical Rot# | Treatment Location | Treated Ev | NA CONTRACTOR |
| | | ATEMPTICAL ECONOMICS | CONTRACTOR OF THE PROPERTY OF | ANNUAL PROPERTY OF THE PROPERT |
| daughter had facial cuts and xrays Sireer Askingers | unknows | unknown | unknown | |

| Activities | | | | | | | |
|--|----------------------------|-------------------------|--|---|-------------------------------|------------------------------------|-------------------------------|
| Greated 7/30/2008 01:55:25 PM | Greated By MARQUEM O | Assigned To MARQUEMO | Activity by possible Scheduled Follow-up | Activity Sub-Type | Statuce Season Scheduled Alam | Completed | Pollow up with ESIS |
| Contact Last Name Mils Comments | | Contact Firel Unde | Name | Account | | EAC Code | . |
| Confidential Comments | | | | | | | |
| 7/30/2008 01:54:30 PM | Created By MARQUEM O | Assigned To MARGUEMO | Activity Type BRC PAR | Activity Sub-Type ESIS- Injuries | Statue Done | Completed 7/30/2008 01:55:21 PM | Doscription ESIS- Injuries |
| Contact Last Name Milis Comments | | Contact First Unda | | Account using major injuries to driver. | | BAC Code | |
| Monica Marquez/BRCPAF x21072 | | ecing word w | h ranguill acus to sub guin ea | mang majur nyukos is citaet. | | | |
| Confidential Comments | | | | | | | |

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on 7/31/2008

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Activities

| | Indied By IAROUEM | Assigned To: ESISBIOU | Activity Typo Escalation | Activity Sub-Typo ESIS - Injuries | States In Progress | Gampigled | Description Assign to ESIS |
|--|----------------------|---|--|---|-----------------------|------------------------------------|----------------------------|
| Contact Last Name Mills Comments | | Conject First Linda | Name | Account | | BAC Code | |
| Injuries Monica Marquez/BRCPAR// x21072 | NIX | | | | | | |
| Confidential Comments | | | | | | | |
| 7/30/2008 09:59:23 AM N | redicti By ARQUEM | Assigned To MARQUEMO | Activity Type Scheduled Outbound Call Cust | Activity Sub-Type Cancelled - Cust Called Prior | Status Done | Completed 7/30/2008 12:47:58 PM | Description Call customer |
| Contact Last Name Mills Comments Action Plan: Call Customer | a National A | Centact First Linda | | Account | | BAC Code | |
| Monica Marquez/BRCPAR// ×21072 | | *************************************** | • | | | | |
| Confidential Comments | | | | | | | |
| | realed By AROUEM | | Activity Types Scheduled Outbound Call Cust | Activity Sub-Type | Status Done | Completed 7/30/2008 09:55:32 AM | Description Call customer |
| Contact Last Name Milis Comments | | Contact First Unda | Name | Account | 12. | BAC Code | |
| action plan: perform ack with Monica Marquez/BRCPAR// | | | | 1.594.70 | | | |
| x21072 | **** | | | | | | |

Report Generated for toporowm

on 7/31/2008

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Activities

| Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|--|---------------------------|---------------------------|---|--------|-----------------------------------|--|
| 7/29/2008 01:24:10 PM MARQUEM O | MARQUEMO | Ownership Changed | Ownership Escalated to BRC | Done | 7/29/2008 01:24:10 PM | Ownership Escalated to BRC |
| Contact Last Name | Contact Firs | Name | Account | | BAC Code | |
| Mills Comments | Linda | | | | | |
| Confidential Comments | | | As F | | | |
| | | | Andrea Andrea (Andrea | | | |
| | | | | | | |
| Created By | | | Activity Sub-Type | Status | Completed | Description |
| 7/29/2008 12:39:36 PM DRAHEICM | MARQUEMO | Ownership Changed | | Done | 7/29/2008 12:39:37 PM | Service Request Ownership has |
| 7/29/2008 12:39:36 PM DRAHEICM Contact Lost Name | MARQUEMO Contact Title | Ownership Changed | Activity Sub-Type Account | Done | | |
| 7/29/2008 12:39:36 PM DRAHEICM | MARQUEMO | Ownership Changed | | Done | 7/29/2008 12:39:37 PM | Service Request Ownership has changed FROM: SILVESHE TO: |
| 7/29/2008 12:39:36 PM DRAHEICM Contact Lost Name Mills | MARQUEMO Contact Title | Ownership Changed Name | | Done | 7/29/2008 12:39:37 PM BAG Code | Service Request Ownership has changed FROM: SILVESHE TO: |

| Croated | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed 5.5 | Description |
|-----------------------|------------|---------------|---------------|------------------------|--------|-----------------------|----------------------------|
| 7/29/2008 12:39:20 PM | DRAHEICM I | MARQUEMO | BRC PAR | Initial Contact- Phone | Done | 7/30/2008 01:03:12 PM | Unda Milis called CRS back |
| Contact Last Name | | Contact First | Vame | Account | 0.00 | BAC Code | |
| Mils | | Linda | | | | | |
| Comments | | | | | | | |

CRS adv: asked detailed questions

Cust states was driving and powersteering locked and veh pulled to the right and then veh flipped unknown of how many times. Driver and passenger substained injuries. Driver substained major injuries but daughter just had cuts and no stitches needed. Cust doesn't have info for where they were treated. Veh did flip causing damages to Allover damages and front suspension and right side axis is broke, tie-rod is broken, tood front humper grill is bent back, right elde of windshield cracked. There was no properly damages or third party damages. Veh is located at Providence Rhoda Island at the Airport location—maint manager Andy Shapi #(401)738-0900 ext.2242 ~ 2053 Post Road Warwick Rhode Island 02886. Unknown of milage or speed driver was going.

Cust sks: Inspection on veh

CRS adv: File will be forwarded to ESIS due to the major injuries substained and will contact cust in 7-10 business days.

Monica Marquez/BRCPAR/ATX x21072

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on 7/31/2008

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Activities

| Created Created By | Assigned To Activity Type | Activity Sub-Type | Status | - Completed | Description | |
|--------------------------------------|---------------------------|-------------------------|--------|-----------------------|-------------|--|
| 7/29/2008 12:39:15 PM DRAHEICM | MARQUEMO BRC PAR | Initial Contact- Dealer | Done | 7/30/2008 01:50:16 PM | called | |
| Contact Last Name | Contact First Name | Account | | BAC Code | | |
| Mills | Linda | | | | | |
| Comments | | | 100 m | | | |
| Snoke with Senice Manager . Mike Inh | nenn | | | | | |

CRS adv: Calling on allegation and with had an callision due to steering locking up and with flipped and substained injuries, advised file will go to ESIS, with is an

Oir sta: Veh must not have been here

CRS adv. Just calling to make aware of what is going on

Monica Marquez/BRCPAR/ATX x21072

Confidential Comments

| Created By | Assigned To: Activity T | po Activity Sub-Type | Status | Completed | Description | |
|--------------------------------|-------------------------|--|--|-----------------------|-------------|-----------|
| 7/29/2008 12:39:09 PM DRAHEICM | MARQUEMO BRC PAR | Initle! Contact- AVM | Done | 7/30/2008 01:52:19 PM | called: | 630092 |
| Contact Last Name | Contact First Name | Account | The State of the S | BAC Code | | PINE CITY |
| Mills | Linda | 20 - June 1997 - Control of Contr | | | MN | |

Comments
This is Monica Marquez calling from gm par dept.
Customer: Linda Mills
Service Request:71-849013454
Vehicle Information:07 Chevrolet Cobalt
Last 8 of the VIN: 77
Involved Dealership:CAR/TRUCK CITY
Nature of allegation: web steering locked up causing web to flip and driver substained injuries - life will be fowarded to ESIS. Veh is an rental veb.
CRS adv if you have any additional information pertaining to customer or vehicle please contact me at 1-866-790-5700 ext 21072. If not then this is an FYI to let you know what is going on in your district.

Monica Marquez/BRCPAR/ATX X21072 Confidential Comments

Report Generated for toporowm

on 7/31/2008

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Activities

| Created Greated By | Assigned To - Activity Type | Activity Sub-Type | Status | Completed | Description |
|--------------------------------|-----------------------------|-------------------|--|-----------------------|-------------|
| 7/29/2008 12:39:04 PM DRAHEICM | MARQUEMO BRC PAR | Acknowledgement | Done | 7/30/2008 09:58:27 AM | |
| Contact Lost Name | Contact First Name | Account | | BAC Code | |
| Mils | Linda | | | | |
| Comments | | 7.06 | | - 4 | |
| Left Message | | | A STATE OF THE PROPERTY OF THE | | |

CRS adv: Message is for Linda Mills, this is Monica Marquez calling from gra par dept in regards to the 07 Chevrolet Cobalt where there was a collision due to the steering failing. Provided sr# and number and extention to contact CRS back. Asked to be called back.

Monica Marquez/BRCPAR/ATX x21072

Confidential Comments

| Greated | Created By | Assigned To | Activity Type | Activity Su | b-Typo Status | - Completed | Doscription | |
|-------------------|------------|---------------|---------------|-------------|---------------|-----------------------|---------------|----------|
| | DRAHEICM | | Notify CRM | | Done | 7/30/2008 09:43:37 AM | file assigned | , Marie, |
| Contact Last Name | | Contact First | Name | Account | A SAN CARLON | BAC Cade | • | |
| Mils | | Unda | | | | | • | |
| Comments | | | | | | | | |
| | | | | | | | | |

| Created | Crealed By | Assigned To | Activity Type | Activity Sub-Typo | Status | Completed | Description |
|------------------------|------------|---------------|---------------|-------------------|--------|-----------------------|--------------|
| 7/29/2008 12:38:55 PM | DRAHEICM | MARQUEMO | Research | | Done | 7/29/2008 01:26:32 PM | research vin |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| Mills | | Linda | | | | | |
| Comments | | | | | | | |
| CDC Darformed VIN Con- | •• | | | | | | |

GMVIS: Found No Open Recalls

VIN: Found No Duplicate File

SVC History: No Service History Related to Allegation

Monica Marquez/BRCPAR/ATX X21072

Confidential Comments

Report Generated for toporowm

on 7/31/2008

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Activities

| Created Created By 7/29/2008 12:38:38 PM DRAHEICA Contact Last Name Mills | | | Status Completed 7/29/2008 01:25:16 PM BAG Code | Description assigned to monica marquez ext 21072 |
|--|---|--|---|---|
| Comments Confidential Comments | Grida | | | |
| Created By 7/29/2008 10:28:15 AM DRAHEICH | M SILVESHE SR Opened | | Status Completed Dane 7/29/2008 10:28:15 AM | Description SR in Status of Closed has been Re- |
| Contact Last Name Mills Comments | Contact First Name Unda | Account | BAC Goda | Opened by DRAHEICM |
| Confidential Comments | | | | |
| Created By 7/29/2008 10:28:13 AM DRAHEICN Contact Last Name Mills | | The state of the s | Status Completed 7/29/2008 10:28:14 AM BAC Code | Description Service Request has been Closed Dissatisfied. |
| Comments Confidential Comments | | | | |
| Greated By 7/28/2008 03:06:11 PM SILVESHE | | | Status Completed 7/29/2008 10:27:53 AM | Description *Assigning activity to PAR QUEUE |
| Contact Last Name Mills Comments **CRS artisted that a person from the | Contact First Name Linda PAR Department will contact the customer v | Account | BAC Gode | (previous activity mistakenty put to done) |
| Received and assigned in PAR. Chad DraheimATX/Workflow PAR Confidential Comments | r-An Department with Cornact the Costomer (| mum e uddiicos vays | | |

Report Generated for toporowm

on 7/31/2008

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Activities

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed 7 | Doscription |
|-------------------------|-----------------|-----------------|------------------------|--|--------|-----------------------|----------------------------------|
| 7/28/2008 03:03:31 PM | SILVESHE | SILVESHE | Escalation | biliate PAR | Done | 7/28/2006 03:05:21 PM | *Assigning activity to PAR QUEUE |
| Contact Last Name | | Contact Firs | Name | Account Count | | BAC Code | |
| Milis | 1.00 | Linda | | | | | |
| Comments | | | | Committee of the commit | | | |
| *CRS advised that a pen | ion from the P/ | NR Department v | All contact the custom | er within 2 business days | | | |
| Confidential Comments | | | | | | | |

| Croated | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|-----------------------|------------|--------------|-----------------------|-------------------|--------|-----------------------|-------------------------------------|
| 7/28/2008 02:39:58 PM | SILVESHE | SILVESHE | Inbound Call Customer | Complex Request | Done | 7/28/2008 03:05:13 PM | Alleged product allegation-Steering |
| Contact Last Name | 100 | Contact Firs | f Name | Account 1987 | | BAC Code | wheel locked causing injuries |
| Mills | | Unda | | | | | NATIONALIAMO CAR RENTAL |
| Comments | | | | | | | 6929 N LAKEWOOD AVE SUITE 100 |
| Cust sis: | | | | | | | TULSA, OK 74117-1824 |

- National Alamo Car Rental
 161AL567777
 2007 Cobalt
 defect that steering and seatbelt on the back fails to tock properly not yet to the dir, we report it first end, they'll normally get back
- accident happened on the 15th of April

Cust sks: • take care of

- CRS adv: Initiate pre-PAR transfer CUst

HeatherSanders,Prem.Tier1.OC.MNULv11Emp

UCC Information

| UCC Co | do Symptom | Description |
|--------|-------------|---|
| MO1 | inoperative | Steering - General |
| C28 | Inoperative | Restraints - Seal Belt System / Buckles / Tether Anchor |
| | | |

Report Generated for toporowm

on 7/31/2008

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GM Vehicle Inquiry System Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| | | | 8.43 | engr | | | | | |
|---------------------------------------|--------|------------------------|------------|--------------------------|--------------------|---------------------|---------------|-----------------------------|--|
| VIN: | IGIAL | .55F777 | | | | | | | |
| · | | VEHICI | Æ INI | FORMATI(| אכ | | | | |
| Merchandising Model : | | | | | | | Date: | 3/20/2 | 007 |
| BARS Order Type: | 50 | - FLEET | | | | | | Dille Till Helichelbergeren | |
| Delivering Dealer : | 692 | R/TRUCK CITY - VAN | | D | Selling Sou | rce: | | 3 - CHEV | ROLET |
| | 1,0 | LSA, OK 74117-1823 | | | Site Code: | | |)4443 | |
| | | ; | | Business Associate Code: | | | | 11571 | |
| Service Contract: | No | Branded Title: | No | Warrant | y Block : | No | PDI Sta | lus : | Paid |
| | | REQUIR | ed fi | ELD ACTIO | ONS | | · . | | |
| Vehicle Has No Curre | nt Rec | ord Of Outstanding Ca | mpaig | ns | | | | | |
| | | SERVICE IN | FORM | IATIONAL | ITEMS | | | | |
| Vehicle Has No Curre | nt Rec | ord Of Outstanding Ser | vice I | nformation | | | | | |
| | | ON STAR AND XM SA | TELL | ITE RADIO |) INFORM | ATIO | N | | |
| Vehicle Has No Associ | ated C | n Star or XM Radio In | forma | tion. | | | | | Selection of the select |
| | | APPLICA | BLE | WARRANT | TIES | | | | |
| | Descri | ption | - | Effective Date | Effectiv Odomet | | End Date | 0 | End dometer |
| 36/36000 BUMPER TO WARRANTY |) BUM | PER LIMITED | | 03/20/2007 | 10 1 | miles | 03/20/2010 | | 86010 miles |
| 72/100000 SHEET ME THROUGH LIMITED | | | | 03/20/2007 | 10 1 | miles | es 03/20/2013 | | 00010 miles |
| 96/80000 FEDERAL E AND PCM | MISSI | ON CATALYTIC CONV | / . | 03/20/2007 | 10 | miles | 03/20/2015 | 1 | 80010 miles |
| 60/100000 POWERTRA WARRANTY | AIN C | OVERAGE LIMITED | | 03/20/2007 | 10 | 10 miles 03/20/2012 | | : 10 | 0010 miles |
| 36/36000 FEDERAL E | MISSI | ON | | 03/20/2007 | 10 1 | niles | 03/20/2010 | 3 | 16010 miles |
| | | CL/ | VIM H | ISTORY | | | | | |
| R.O Date R.O | Турс | | L | abor Opera | tion | | | 0 | dometer |

| | Number | | · | Reading | MONTHUM TO SERVICE STATE OF THE SERVICE STATE OF TH |
|------------|--------|---|---|---------|--|
| 03/19/2007 | A07536 | 1 | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | 0 miles | (general production of the control o |

CHECK HISTORY INFORMATION

| Nation 11 - Nation Nation 1 (1) and |
|---|
| Vehicle Has No Associated Check History Information. |
| A MILLIAM WHITE A . M. C. MAN A RANGE MAN AND MAN AND MAN AND AND A STANDARD AND ASSESSED AND ASSESSED ASSESSED. |
| |

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GM Vehicle Inquiry System Claim History

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| VIN: | | | IGI | AL5SF777 | | | | | | | | |
|-----------------|--------------|------|---------|---|--------------------------|------|--------------|----------------|-------------------------|----------|--|--|
| | | | | CLAIM H | ISTORY | | | | | | | |
| Repair Ord | ler Date | : 03 | /19/200 | Repair Order Number : | A07536 | Odom | eter Rea | ding: | 0 miles | | | |
| Serviced By: | | | | | | | | 13 - C | 13 - CHEVROLET 99619 | | | |
| | | | 1 | | Business Associate Code: | | 126870 | | | | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Pa | art | Auth Code | Person Code | Line Total | Comments | | |
| 03/23/2007 | 780 | 01 | I | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | N/A | | N/A | N/A | \$ 68.34 | N | | |

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System Vehicle Build

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| VIN | IGIAL55F777 |
|-----|-------------|

VEHICLE BUILD

| Merchandising Model: | 1AL69 -2007 COBALT 4-DOOR LT SEDAN | | | | | |
|------------------------------|------------------------------------|----------------|--------|--|--|--|
| Gross Vehicle Weight Rating: | 1713 kg (3777 lb) | Order Number : | KTCC01 | | | |
| Build Date: | 03/19/2007 | Build Plant : | 177A | | | |

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

| AK5 - DRIVER & RIGHT FRONT PASSENGER AIR BAGS | ALO - SENSOR INDICATOR INFLATABLE RESTRAINT, FRT PASS/CHILD PRESENCE DETECTOR |
|--|---|
| AR9 - DELUXE FRONT BUCKET SEAT | AT8 - RESTRAINT PROVISIONS CHILD, RR SEAT. RR FACING |
| AU0 - REMOTE KEYLESS ENTRY | AU3 - POWER DOOR LOCKS W/REMOTE KEYLESS ENTRY |
| BZ4 - GM PRODUCTION WEEK #13 | B34 - FLOOR MATS, FRONT/REAR |
| B35 - REAR FLOOR MATS | B84 - BODY COLOR, BODYSIDE MOLDINGS |
| C67 - ELECT. FRONT AIR CONDITIONER | DG7 - BODY COLOR POWER MIRRORS |
| DT4 - ASHTRAY AND LIGHTER | D36 - MIRROR I/S R/V TILT |
| FEI - SUSPENSION SYSTEM-SOFT RIDE | FE9 - FEDERAL EMISSIONS |
| FLT - FLEET PROCESSING OPTION | FYI - TRANS/AXLE 3.63 RATIO |
| IPC - INTERIOR TRIM DESIGN | J41 - BRAKE, FRONT DISC/REAR DRUM |
| KCV - VANGUARD RAC | K34 - CRUISE CONTROL |
| K64 - 115 AMP GENERATOR | LOD - ASSEMBLY PLANT - LORDSTOWN,OHIO |
| L61 - ENGINE, 2.2L DOHC 4V ECOTEC | MN5 - 4 SPEED AUTO TRANSMISSION |
| MX0 - TRANSMISSION, 4 SPD AUTOMATIC | NT7 - FEDERAL EMISSION TIER 2 |
| NW7 - TRACTION CONTROL | N45 - 3 SPOKE STEERING WHEEL |
| PGI - 15" STEEL WHEEL | QTU - P195/60R15 TOURING BW TIRES |
| R6F - IDENTIFY B-CODE USERS | R6K |

| R6P - PREMIUM PAINT | R9N - HEATED LEATHER APPOINTED FRONT BUCKET SEATS |
|---|--|
| R9X - XM TRACKING CODE | UQ4 - BASE SPEAKER SYSTEM |
| US8 - AM/FM STEREO, CD PLAYER & MP3 PLAYER | VN9 - DAILY RENTAL REPURCHASE PROGRAM |
| VT7 - OWNERS MANUAL ENGLISH | V2G - FULL FUEL FILL CREDIT |
| V73 - STATEMENT OF VEHICLE CERT U.S. /CANADA | ILT - ILT BASE PACKAGE |
| ISZ - OPTION PACKAGE DISCOUNT | I4C - GRAY |
| 141 - GRAY | 21U - LASER BLUE METALLIC |
| 6AR - FRONT SPRING | 7AR - FRONT SPRING |
| 8AA - REAR SPRING | 9AA - REAR SPRING |

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Odometer

R.O Date R.O Type

GM Vehicle Inquiry System Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| | | | W.P. | 7,281 | | | | | | |
|--|---|---|---------|--|--|---|--|--|-----------------|--|
| VIN: | IGIA | L55F777 | | · | | | | | | |
| | | VEHIC | LE IN | FORMATI(| ON | | | | | |
| Merchandising Model: 1AL69 -2007 COBALT 4-DOOR LT SEDAN Warranty Start D | | | | | Date : | 03/20 | /2007 | | | |
| BARS Order Type: | 50 |) - FLEET | | | | | | | | |
| Delivering Dealer: | 69 | AR/TRUCK CITY - VAN 229 N LAKEWOOD AVE | , | RD | Selling Sou | rcc: | | I3 - CHE | VROLET | |
| | 1 | ULSA, OK 74117-1823 | | | Site Code: | | | 04443 | } | |
| · · · · · · · · · · · · · · · · · · · | | | | · | Business A Code : | ssocia | ite | 11157 | 11571 | |
| Service Contract: | No | Branded Title : | No | Warran | ty Block : | No | PDI St | atus : | Paid | |
| | | REQUIR | ED FI | ELD ACTI | ONS | | | | | |
| Vehicle Has No Curre | nt Re | cord Of Outstanding Ca | mpaig | ins . | | | | · | | |
| , | *************************************** | SERVICE IN | FORM | MATIONAL | , items | nessan en | İ | | | |
| Vehicle Has No Curre | nt Re | cord Of Outstanding Se | rvice I | nformation | | *************************************** | | | | |
| | | ON STAR AND XM SA | TELL | ITE RADIO |) INFORM | ATIO | N | | | |
| Vehicle Has No Assoc | ated | On Star or XM Radio In | forma | ition. | | | | | | |
| | | APPLICA | BLE | WARRANT | ries | | | | | |
| | Desc | ription | | Effective Date | Effectiv Odomet | | End Dat | le . | End Odometer | |
| 36/36000 BUMPER TO WARRANTY |) BUI | MPER LIMITED | : | 03/20/2007 | 10 : | miles | 03/20/20 | 10 | 36010 miles | |
| 72/100000 SHEET ME THROUGH LIMITED | | | | 03/20/2007 | 10 : | miles | 03/20/20 | 13 | 100010 miles | |
| 96/80000 FEDERAL E AND PCM | /. | 03/20/2007 | 10 1 | miles | 03/20/20 | 15 | 80010 miles | | | |
| 60/100000 POWERTRA WARRANTY | AIN C | COVERAGE LIMITED | | 03/20/2007 | 10 | miles | 03/20/20 | 12 | 100010 miles | |
| 36/36000 FEDERAL E | MISS | ION | | 03/20/2007 | 10 : | niles | 03/20/20 | 10 | 36010 miles | |
| | | CL | AIM I | IISTORY | | | | | | |
| | A AND DESCRIPTION OF THE PERSONS ASSESSMENT | | | ······································ | ······································ | | ······································ | The second secon | | |

Labor Operation

| | Number | | | Reading | encontration (S) |
|------------|--------|---|---|---------|------------------|
| 03/19/2007 | A07536 | 1 | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | 0 miles | Secremon and |

CHECK HISTORY INFORMATION

Vehicle Has No Associated Check History Information.

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GM Vehicle Inquiry System Claim History

Home - Summary - Claim History - <u>Vehicle Build</u> - <u>Vehicle Component</u> - <u>Delivery Information</u> - <u>Dealer Information</u> - <u>Service Contract</u> - <u>Warranty Block</u> - <u>Branded Title</u>

Help

| VIN: | **** | | 1G1 | AL55F777 | | | | | | |
|-----------------|--------------------|------|---------|---|-----------------|----------|--------------|----------------|---------------|----------|
| | | | | CLAIM H | ISTORY | | | | | |
| Repair Or | der Date | : 03 | /19/200 | Repair Order Number : | A07536 | Odome | ter Rea | ding: | | 0 miles |
| Serviced By: | | | | | Selling Source: | | 13 - C | 13 - CHEVROLET | | |
| • | TULSA, OK 74117-18 | | | Site Code: | | 99619 | 99619 | | | |
| | | | | | Business A | ssociate | Code: | 12687 | 0 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Pa | ırt | Auth Code | Person Code | Line Total | Comments |
| 03/23/2007 | 780 | 01 | , į | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | NA | | N/A | N/A | \$ 68.34 | N |

CHECK HISTORY

Vehicle Has No Associated Check History.

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GM Vehicle Inquiry System Vehicle Build

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| VIN | 1G1AL55F777 |
|-----|-------------|
| | 10412404777 |

VEHICLE BUILD

| Merchandising Model: | 1AL69 -2007 COBALT 4-DOOR LT SEDAN | | | |
|------------------------------|------------------------------------|---------------|--------|--|
| Gross Vehicle Weight Rating: | 1713 kg (3777 lb) Order Number : | | KTCC01 | |
| Build Date: | 03/19/2007 | Build Plant : | 177A | |

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

| · · · · · · · · · · · · · · · · · · · | |
|--|---|
| AK5 - DRIVER & RIGHT FRONT PASSENGER AIR BAGS | ALO - SENSOR INDICATOR INFLATABLE RESTRAINT, FRT PASS/CHILD PRESENCE DETECTOR |
| AR9 - DELUXE FRONT BUCKET SEAT | AT8 - RESTRAINT PROVISIONS CHILD, RR SEAT, RR FACING |
| AU0 - REMOTE KEYLESS ENTRY | AU3 - POWER DOOR LOCKS W/REMOTE KEYLESS ENTRY |
| BZ4 - GM PRODUCTION WEEK #13 | B34 - FLOOR MATS, FRONT/REAR |
| B35 - REAR FLOOR MATS | B84 - BODY COLOR, BODYSIDE MOLDINGS |
| C67 - ELECT. FRONT AIR CONDITIONER | DG7 - BODY COLOR POWER MIRRORS |
| DT4 - ASHTRAY AND LIGHTER | D36 - MIRROR I/S R/V TILT |
| FEI - SUSPENSION SYSTEM-SOFT RIDE | FE9 - FEDERAL EMISSIONS |
| FLT - FLEET PROCESSING OPTION | FY1 - TRANS/AXLE 3.63 RATIO |
| IPC - INTERIOR TRIM DESIGN | J41 - BRAKE, FRONT DISC/REAR DRUM |
| KCV - VANGUARD RAC | K34 - CRUISE CONTROL |
| K64 - 115 AMP GENERATOR | LOD - ASSEMBLY PLANT - LORDSTOWN,OHIO |
| L61 - ENGINE, 2.2L DOHC 4V ECOTEC | MN5 - 4 SPEED AUTO TRANSMISSION |
| MX0 - TRANSMISSION, 4 SPD AUTOMATIC | NT7 - FEDERAL EMISSION TIER 2 |
| NW7 - TRACTION CONTROL | N45 - 3 SPOKE STEERING WHEEL |
| PG1 - 15" STEEL WHEEL | QTU - P195/60R15 TOURING BW TIRES |
| R6F - IDENTIFY B-CODE USERS | R6K |
| | |

| R6P - PREMIUM PAINT | R9N - HEATED LEATHER APPOINTED FRONT BUCKET SEATS |
|---|--|
| R9X - XM TRACKING CODE | UQ4 - BASE SPEAKER SYSTEM |
| US8 - AM/FM STEREO, CD PLAYER & MP3 PLAYER | VN9 - DAILY RENTAL REPURCHASE PROGRAM |
| VT7 - OWNERS MANUAL ENGLISH | V2G - FULL FUEL FILL CREDIT |
| V73 - STATEMENT OF VEHICLE CERT U.S. /CANADA | ILT - ILT BASE PACKAGE |
| ISZ - OPTION PACKAGE DISCOUNT | 14C - GRAY |
| 14I - GRAY | 21U - LASER BLUE METALLIC |
| 6AR - FRONT SPRING | 7AR - FRONT SPRING |
| 8AA - REAR SPRING | 9AA - REAR SPRING |

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ESIS/GM Central Claims Unit P.O. Box 300 Mail Code 482 C19 B61 Detroit, MI 48265-3000



October 16, 2008

Linda Mills Rental Insurance Services 9310 Rental Car Lane Austin, TX 78719

RE:

Claimant:

Date of Event: April 15, 2008

File Number:

Client:

•

General Motors Corporation

Dear Ms. Mills:

As you know, ESIS provides claims handling services to General Motors involving product liability claims.

Thank you for your patience during the course of our investigation.

A review of the claim involving a 2007 Chevrolet Cobalt has been completed.

ESIS must respectfully deny the claim for any damages.

Sincerely,

Tiffini Hails



August 25, 2008

Linda Mills National Alamo Car Rental 9310 Rental Car Lane Austin, TX 78719

RE:

Claimant:

Date of Event: April 15, 2008

File Number:

657981

Client:

General Motors Corporation

Dear Ms. Mills:

ESIS provides claim handling services to General Motors involving product liability claims. I am the Claims Administrator assigned to handle this file. Please direct all future correspondence to my attention.

I am writing as a follow up to our conversation of August 21, 2008 in which it is being a alleged that the steering locked up and left rear seat belt failed causing an accident and injuries in the above-referenced file. In order to substantiate the claim being made, I need the following information and documentation:

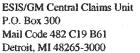
- A copy of maintenance records and any records stating any previous problems with the steering and/or seat belts and what type of repairs performed if any;
- 2. A copy of the police report.
- 3. A statement of facts regarding the accident from the claimant.
- 4. A copy of your expert's report documenting any defect with the steering and seat belt system with laser color copies of the allegedly defective part.
- If you are in possession of the subject vehicle, you have an obligation and responsibility to
 ensure that the subject vehicle and its related components are maintained and preserved in
 their immediate post-incident condition for as long as you intend to pursue a claim against
 GM.

ESIS Field Investigator, Karol Sullivan has been assigned to assist me in the investigation of this claim. She will contact Andy Sinapi to schedule an appointment to inspect and photograph the vehicle and download the SDM.

If you have any further questions or concerns, please give me a call. I can be reached at 800.888.0164, between 8:00 a.m. to 4:00 p.m., Eastern Time.

Sincerely,

Tiffini Hails



800.888.0164 tel 313.665.0911 fax



Tiffini Hails Claims Administrator

August 25, 2008

Andy Sinapi National Alamo Car Rental 11 Roseland Avenue Warwick, RI 02888

RE:

Claimant:

Our File No.:

657981

Our Client:

General Motors Corporation

Date/Event:

April 15, 2008

VIN:

1G1AL55F777

Dear Mr. Sinapi:

I am writing to confirm our conversation of August 25, 2008 during which you agreed to allow us to inspect your 2007 Chevrolet Cobalt and retrieve data from the air bag system. I estimate the inspection will take about two (2) hours.

As part of the inspection, we will likely take photographs and measurements. Also, your vehicle is equipped with an air bag Sensing and Diagnostic Module (SDM). As explained in the Owner's Manual, in addition to its other functions, the SDM records information about the air bag system and other crash related data in an air bag deployment event and some near-deployment crashes. The SDM in your vehicle also records the following precrash data: vehicle speed, throttle position, brake application and engine RPM for 5 seconds prior to the deployment or near deployment event. As part of our investigation, we will download the SDM data using the Vetronix Crash Data Retrieval software. We will provide you with a copy of that data at the time we retrieve it or as soon after as is practical. As we discussed, we will also provide a copy of the data to Andy Sinapi and Linda Mills

Please note the potential GM uses of this crash data once GM has a copy in its files. Once collected, the SDM crash data is available for GM's research needs. Also, in summary form, this information may be provided to non-GM organizations (i) which have a reasonable need for it, (ii) which have a demonstrated ability to utilize such data, and (iii) which are expected to use it for studies aimed at improving safety to the benefit of the public at large, the auto industry, or GM. However, information which ties SDM crash data to a particular vehicle, such as VIN, owner name, or date and location, will generally not be disclosed by GM other than (a) to the involved owner/lessee or his/her designated agent, (b) in response to an official request of police or similar government office, (c) for research where appropriate confidentiality is maintained and need is shown, (d) as part of GM's defense of litigation involving the subject vehicle or other GM products, or (e) as otherwise required by law.

5

If you have any additional questions about our upcoming inspection, you can contact me at 1.800.888.0164 Monday through Friday from 8:00 AM to 4:00 PM.

Sincerely,

Tiffini Hails





CDR File Information

| AND WILL A RESIDENCE ASSESSMENT OF A SECOND | |
|---|--|
| Vehicle Identification Number | 1G1AL55F777 |
| Investigator | Karol Sullivan |
| Case Number | |
| Investigation Date | Wednesday, August 27 2008 |
| Crash Date | Tuesday, April 15 2008 |
| Filename | G1AL55F777 CDR |
| Saved on | Wednesday, August 27 2008 at 02:25:08 PM |
| Collected with CDR version | Crash Data Retrieval Tool 3.09 |
| Reported with CDR version | Crash Data Retrieval Tool 3.09 |
| EDR Device Type | airbag control module |
| Event(s) recovered | Deployment |
| Evenu(a) remineren | Non-Deployment |

Data Limitations

SDM Recorded Crash Events:

There are two types of SDM recorded crash events. The first is the Non-Deployment Event. A Non-Deployment Event is an event severe enough to "wake up" the sensing algorithm but not severe enough to deploy the air bag(s). It can contain Pre-Crash and Crash data. The SDM can store up to one Non-Deployment Event. This event can be overwritten by an event that has a greater SDM recorded vehicle forward velocity change. This event will be cleared by the SDM after the ignition has been cycled 250 times.

The second type of SDM recorded crash event is the Deployment Event. It also can contain Pre-Crash and Crash data. The SDM can store up to two different Deployment Events, if they occur within five seconds of one another. Deployment Events cannot be overwritten or cleared from the SDM. Once the SDM has deployed the air bag, the SDM must be replaced. The data in the Non-Deployment Event file will be locked after a Deployment Event, if the Non-Deployment Event occurred within 5 seconds before the Deployment Event unless a Deployment Level Event occurs within 5 seconds after the Deployment Event, and then the Deployment Level Event will overwrite the Non-Deployment Event file.

SDM Data Limitations:

- -SDM Recorded Vehicle Forward Velocity Change reflects the change in forward velocity that the sensing system experienced during the recorded portion of the event. SDM Recorded Vehicle Forward Velocity Change is the change in velocity during the recording time and is not the speed the vehicle was traveling before the event, and is also not the Barrier Equivalent Velocity. This data should be examined in conjunction with other available physical evidence from the vehicle and scene when assessing occupant or vehicle forward velocity change. For Deployment Events and Deployment Level Events, the SDM will record 220 milliseconds of data after deployment criteria is met and up to 70 milliseconds of data after algorithm enable. The minimum SDM Recorded Vehicle Forward Velocity Change, that is needed to record a Non-Deployment Event, is 5 MPH.
- -Maximum Recorded Vehicle Velocity Change is the maximum recorded velocity change in the vehicle's combined "X" and "Y" axis. It is calculated every ten ms by taking the square of the "X" axis value and adding it to the square of the "Y" axis value and then taking the square root of the sum. The greatest calculated value is the one that is stored.
- -Event Recording Complete will indicate if data from the recorded event has been fully written to the SDM memory or if it has been interrupted and not fully written.
- -SDM Recorded Vehicle Speed accuracy can be affected if the vehicle has had the tire size or the final drive axle ratio changed from the factory build specifications.
- -Brake Switch Circuit Status indicates the status of the brake switch circuit.
- -Pre-Crash Electronic Data Validity Check Status indicates "Data Invalid" if the SDM receive an invalid message from the module sending the pre-crash data.
- -Driver's and Passenger's Belt Switch Circuit Status indicates the status of the seat belt switch circuit. The Passenger Belt Switch Circuit Status for 2005 vehicles is only available on the Cadillac STS. Also, the Passenger Belt Switch Circuit Status for 2006 Chevrolet Cobalt Sport Coupe (AP) model vehicles, with the option package that includes Recaro brand seats (RPO ALV), will always report a default value of "Buckled".
- -The Time Between Non-Deployment and Deployment Events is displayed in seconds. If the time between the two events is greater than 5 seconds, "N/A" is displayed in place of the time. If the value is negative, then the Deployment Event occurred first. If the value is positive, then the Non-Deployment Event occurred first.
- -If power to the SDM is lost during a crash event, all or part of the crash record may not be recorded.
- -The ignition cycle counter relies upon the transitions through OFF->RUN->CRANK power-moding messages, on the GMLAN communication bus, to increment the counter. Applying and removing of battery power to the module will not increment the ignition counter.
- -Steering Wheel Angle data is displayed as a positive value, when the steering wheel is turned to the right, and a negative value, when the steering wheel is turned to the left. For Cadillac STS models with Stabilatrac 3 systems, the Steering Wheel Angle data will be displayed just the opposite. When the steering wheel is turned to the right, a negative value will be displayed and when the steering wheel is turned to the left, a positive value will be displayed.

SDM Data Source:

All SDM recorded data is measured, calculated, and stored internally, except for the following:

1G1AL55F777

Page 1 of 14

Printed on: Wednesday, August 27 2008 at 02:26:06 PM





-Vehicle Status Data (Pre-Crash) is transmitted to the SDM, by various vehicle control modules, via the vehicle's communication network.
-The Belt Switch Circuit is wired directly to the SDM.





Multiple Event Data

| Associated Events Not Recorded | 0 |
|---|----|
| An Event(s) Preceded the Recorded Event(s) | No |
| An Event(s) was in Between the Recorded Event(s) | No |
| An Event(s) Followed the Recorded Event(s) | No |
| The Event(s) Not Recorded was a Deployment Event(s) | No |
| The Event(s) Not Recorded was a Non-Deployment Event(s) | No |

System Status At AE

| Vehicle Identification Number | **1AL55F*7*307536 |
|--|-------------------|
| Low Tire Pressure Warning Lamp (If Equipped) | Invalid |
| Vehicle Power Mode Status | Run |
| Remote Start Status (If Equipped) | Inactive |
| Run/Crank Ignition Switch Logic Level | Active |
| Brake System Warning Lamp (If Equipped) | OFF |

System Status At 1 second

| Transmission Range (If Equipped) | Fourth Gear |
|---|-------------|
| Transmission Selector Position (If Equipped) | Fourth Gear |
| Traction Control System Active (If Equipped) | Invalid |
| Service Engine Soon (Non-Emission Related) Lamp | OFF |
| Service Vehicle Soon Lamp | OFF |
| Outside Air Temperature (degrees F) (If Equipped) | 28 |
| Left Front Door Status (If Equipped) | Closed |
| Right Front Door Status (If Equipped) | Closed |
| Left Rear Door Status (If Equipped) | Unused |
| Right Rear Door Status (If Equipped) | Unused |
| Rear Door(s) Status (If Equipped) | Closed |

Pre-crash data

| Parameter | -2 sec | -1 sec |
|---|--------|--------|
| Reduced Engine Power Mode | OFF | OFF |
| Cruise Control Active (If Equipped) | No | No |
| Cruise Control Resume Switch Active (If Equipped) | No | No |
| Cruise Control Set Switch Active (If Equipped) | No | No |

Pre-crash data

| Parameter | -5 sec | 4 sec | -3 sec | -2 sec | -1 sec |
|---|---------|---------|---------|---------|---------|
| Vehicle Speed (MPH) | 42 | 44 . | 46 | 48 | 50 |
| Engine Speed (RPM) | 1664 | 1600 | 1664 | 1728 | 1728 |
| Percent Throttle | 36 | 41 | 43 | 45 | 40 |
| Accelerator Pedal Position (percent) | 16 | 24 | 27 | 30 | 20 |
| Antilock Brake System Active (If Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |
| Lateral Acceleration (feet/s²)(If Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |
| Yaw Rate (degrees per second) (if Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |
| Steering Wheel Angle (degrees) (If Equipped) | 0 | 0 | 0 | 0 | 0 |

1G1AL55F777

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Printed on: Wednesday, August 27 2008 at 02:26:06 PM





| Parameter | -5 sec | -4 sec | -3 sec | -2 sec | -1 sec |
|---|---------|---------|---------|---------|---------|
| Vehicle Dynamics Control Active (If Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |



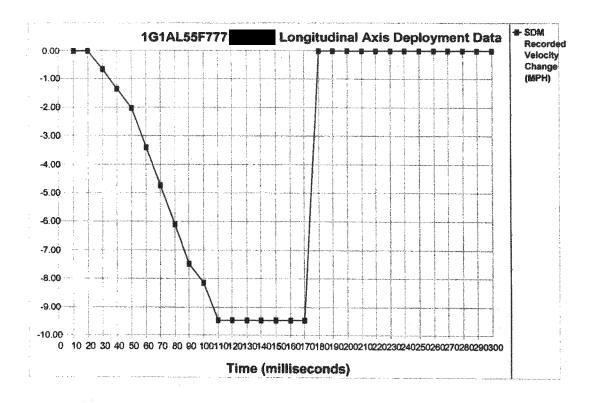


System Status At Deployment

| System Status At Deployment | |
|--|-----------------------|
| Ignition Cycles At Investigation | 2175 |
| SIR Warning Lamp Status | OFF |
| SIR Warning Lamp ON/OFF Time (seconds) | 655200 |
| Number of Ignition Cycles SIR Warning Lamp was ON/OFF Continuously | 2171 |
| Ignition Cycles At Event | 2172 |
| Ignition Cycles Since DTCs Were Last Cleared | 254 |
| Driver's Belt Switch Circuit Status | UNBUCKLED |
| Passenger's Belt Switch Circuit Status | UNBUCKLED |
| Diagnostic Trouble Codes at Event, fault number: 1 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 2 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 3 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 4 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 5 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 6 | N/A |
| Automatic Passenger SIR Suppression System Validity Status at AE | Valid |
| Automatic Passenger SIR Suppression System Status at AE | Air Bag |
| les autoria de la companya del companya de la companya del companya de la companya del la companya de la compan | Suppressed |
| Automatic Passenger SIR Suppression System Validity Status at First Deployment Command | Valid |
| Automatic Passenger SIR Suppression System Status at First Deployment Command | Air Bag Suppressed |
| Driver 1st Stage Time From Algorithm Enable to Deployment Command Criteria Met (msec) | 60 |
| Univer 2nd Stage Time From Algorithm Enable to Deployment Command Criteria Met (meac) | Disposal |
| Passenger 1st Stage Time From Algorithm Enable to Deployment Command Criteria Met (msec) | Suppressed |
| Passenger 2nd Stage Time From Algorithm Enable to Deployment Command Criteria Met (msec) | Suppressed |
| Time Between Events (sec) | 8 |
| Driver First Stage Deployment Loop Commanded | Yes |
| Driver Second Stage Deployment Loop Commanded | Yes |
| Driver Side Deployment Loop Commanded | No |
| Driver Pretensioner Deployment Loop Commanded | Yes |
| Driver (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No |
| Driver (Initiator 2) Roof Rail/Head Curtain Loop Commanded | No |
| Driver Knee Deployment Loop Commanded | No |
| Passenger First Stage Deployment Loop Commanded | No |
| Passenger Second Stage Deployment Loop Commanded | No |
| Passenger Side Deployment Loop Commanded | No |
| Passenger Pretensioner Deployment Loop Commanded | Yes |
| Passenger (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No |
| Passenger (Initiator 2) Roof Rail/Head Curtain Loop Commanded | No |
| Passenger Knee Deployment Loop Commanded | No |
| Second Row Left Side Deployment Loop Commanded | No |
| Second Row Left Pretensioner Deployment Loop Commanded | No |
| Third Row Left Roof Rail/Head Curtain Loop Commanded | No |
| Second Row Right Side Deployment Loop Commanded | No |
| Second Row Right Pretensioner Deployment Loop Commanded | No |
| Third Row Right Roof Rail/Head Curtain Loop Commanded | No |
| Second Row Center Pretensioner Deployment Loop Commanded | No No |
| Driver 2nd Stage Deployment Loop Commanded for Disposal | Yes |
| Passenger 2nd Stage Deployment Loop Commanded for Disposal | No |
| Crash Record Locked Vehicle Front Date (Re Crash) Associated Mile This | Yes |
| Vehicle Event Data (Pre-Crash) Associated With This Event | Yes |
| Deployment Event Recorded in the Non-Deployment Record | No No |
| Event Recording Complete | Yes |

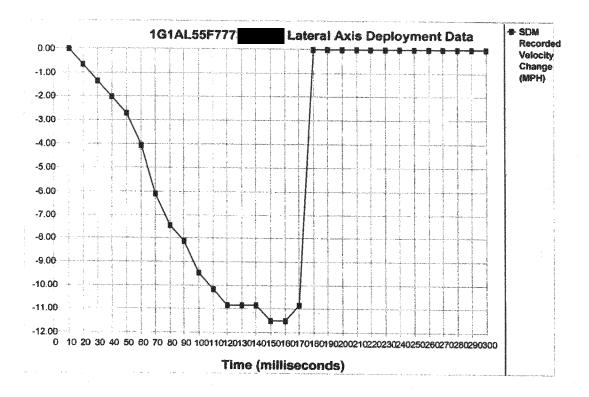






| Time (milliseconds) | 10 | 20 | 30 | 40 | 50 | 60 | 70 | 80 | 90 | 100 | 110 | 120 | 130 | 140 | 150 |
|--|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| Longitudinal Axis Recorded Velocity | 0.00 | 0.00 | -0.68 | -1.36 | -2.03 | -3.39 | -4.74 | -6.10 | -7.46 | -8.13 | -9.49 | -9.49 | -9.49 | -9.49 | -9.49 |
| Time (milliseconds) | 160 | 170 | 180 | 190 | 200 | 210 | 220 | 230 | 240 | 250 | 260 | 270 | 280 | 290 | 300 |
| Longitudinal Axis Recorded Velocity | -9.49 | -9.49 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |





| Time (milliseconds) | 10 | 20 | 30 | 40 | 50 | 60 | 70 | 80 | 90 | 100 | 110 | 120 | 130 | 140 | 150 |
|--|--------|--------|-------|-------|-------|-------|-------|-------|-------|-------|--------|--------|--------|--------|--------|
| Lateral Axis Recorded Velocity Change (MPH) | 0.00 | -0.68 | -1.36 | -2.03 | -2.71 | -4.07 | -6.10 | -7.46 | -8.13 | -9.49 | -10.17 | -10.85 | -10.85 | -10.85 | -11.52 |
| Time (milliseconds) | 160 | 170 | 180 | 190 | 200 | 210 | 220 | 230 | 240 | 250 | 260 | 270 | 280 | 290 | 300 |
| Lateral Axis Recorded Velocity Change (MPH) | -11.52 | -10.85 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |



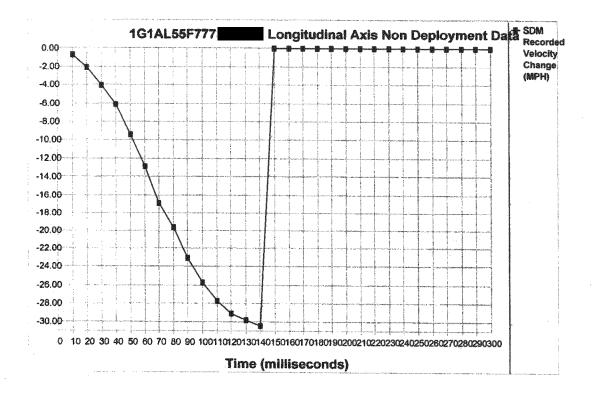


System Status At Non-Deployment

| Ignition Cycles At Investigation | 2175 |
|--|------------|
| SIR Warning Lamp Status | ON |
| SIR Warning Lamp ON/OFF Time (seconds) | 0 |
| Number of Ignition Cycles SIR Warning Lamp was ON/OFF Continuously | 0 |
| Ignition Cycles At Event | 2172 |
| Ignition Cycles Since DTCs Were Last Cleared | 254 |
| Driver's Belt Switch Circuit Status | UNBUCKLED |
| Passenger's Belt Switch Circuit Status | UNBUCKLED |
| Automatic Passenger SIR Suppression System Validity Status | Valid |
| Automatic Passenger SIR Suppression System Status | Air Bag |
| Diagnostic Trouble Codes at Event, fault number: 1 | Suppressed |
| Diagnostic Trouble Codes at Event, fault number: 1 Diagnostic Trouble Codes at Event, fault number: 2 | B0052 |
| | N/A |
| 1 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 4 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 5 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 6 | N/A |
| Maximum SDM Recorded Velocity Change (MPH) | 30.50 |
| Algorithm Enable to Maximum SDM Recorded Velocity Change (msec) | 140 |
| Driver First Stage Deployment Loop Commanded | No |
| Driver Second Stage Deployment Loop Commanded | No |
| Driver Side Deployment Loop Commanded | No No |
| Driver Pretensioner Deployment Loop Commanded | No |
| Driver (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No |
| Driver (Initiator 2) Roof Rall/Head Curtain Loop Commanded | No No |
| Driver Knee Deployment Loop Commanded | No |
| Passenger First Stage Deployment Loop Commanded | No |
| Passenger Second Stage Deployment Loop Commanded | No |
| Passenger Side Deployment Loop Commanded | No |
| Passenger Pretensioner Deployment Loop Commanded | No |
| Passenger (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No |
| Passenger (Initiator 2) Roof Rail/Head Curtain Loop Commanded | No |
| Passenger Knee Deployment Loop Commanded | No |
| Second Row Left Side Deployment Loop Commanded | No |
| Second Row Left Pretensioner Deployment Loop Commanded | No |
| Third Row Left Roof Rail/Head Curtain Loop Commanded | No |
| Second Row Right Side Deployment Loop Commanded | No No |
| Second Row Right Pretensioner Deployment Loop Commanded | No No |
| Third Row Right Roof Rail/Head Curtain Loop Commanded | No |
| Second Row Center Pretensioner Deployment Loop Commanded | No |
| Crash Record Locked | Yes |
| Vehicle Event Data (Pre-Crash) Associated With This Event | No |
| Deployment Event Recorded in the Non-Deployment Record | No |
| Event Recording Complete | Yes |
| | |



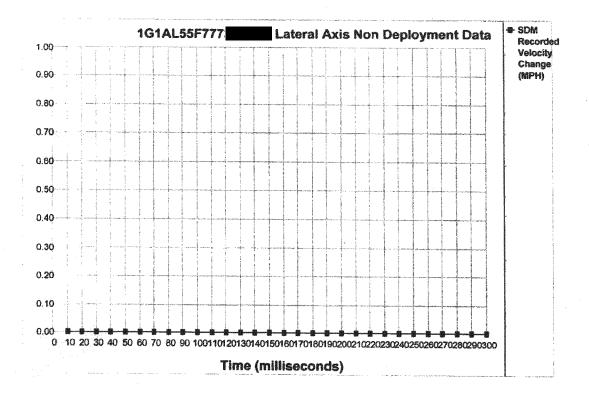




| Time (milliseconds) | 10 | 20 | 30 | 40 | 50 | 60 | 70 | 80 | 90 | 100 | 110 | 120 | 130 | 140 | 150 |
|--|-------|-------|-------|-------|-------|--------|--------|--------|--------|--------|--------|--------|--------|--------|------|
| Longitudinal Axis Recorded Velocity | -0.68 | -2.03 | -4.07 | -6.10 | -9.49 | -12.88 | -16.95 | -19.66 | -23.05 | -25.76 | -27.79 | -29.15 | -29.82 | -30.50 | 0.00 |
| Time (milliseconds) | 160 | 170 | 180 | 190 | 200 | 210 | 220 | 230 | 240 | 250 | 260 | 270 | 280 | 290 | 300 |
| Longitudinal Axis Recorded Velocity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0,00 |







| Time (milliseconds) | 10 | 20 | 30 | 40 | 50 | 60 | 70 | 80 | 90 | 100 | 110 | 120 | 130 | 140 | 150 |
|--|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|
| Lateral Axis Recorded Velocity Change (MPH) | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| Time (milliseconds) | 160 | 170 | 180 | 190 | 200 | 210 | 220 | 230 | 240 | 250 | 260 | 270 | 280 | 290 | 300 |
| Lateral Axis Recorded Velocity Change (MPH) | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |





Hexadecimal Data

All of the data that the vehicle manufacturer has requested to be retrieved is shown in the hexadecimal data section of the CDR report. It may contain data that is not converted by the CDR program.

| 403 | | ~ ~ | | | = ^ | | |
|--------|------|-----|-----|-----|-----|-----|-----|
| \$01 | 00 | 00 | 00 | 00 | 52 | 00 | 00 |
| \$02 | 30 | 00 | 0.0 | 00 | 00 | 00 | 00 |
| \$03 | 02 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$04 | 02 | 00 | 00 | 00 | 00 | | 00 |
| • | | | | | | | |
| \$05 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$06 | 00 | 03 | 00 | 00 | 02 | 39 | 15 |
| \$07 | 10 | 02 | 00 | 00 | 00 | 00 | 00 |
| \$08 | 00 | PF | 00 | 00 | 00 | 00 | 00 |
| | | | | | | | |
| \$09 | 00 | 88 | 8A | 00 | 00 | 00 | 00 |
| \$0A | 0.0 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$0B | 3 C | 00 | 05 | OF | 00 | 00 | 00 |
| \$0C | 80 | 00 | 80 | 00 | 00 | 00 | 00 |
| SOD | 00 | 00 | 40 | 00 | 0.0 | 00 | 00 |
| \$0E | 00 | | | 00 | | | |
| | | 00 | 00 | | 00 | 00 | 0.0 |
| SOF | A2 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$10 | 47 | 31 | 41 | 4C | 35 | 35 | 46 |
| \$11 | 37 | 37 | 37 | 33 | 30 | 37 | 35 |
| \$12 | 33 | 36 | 00 | 0.0 | 0.0 | 00 | 00 |
| \$13 | 00 | 00 | | 00 | 0.0 | 00 | 00 |
| | | | | | | | |
| \$14 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$15 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$16 | 03 | 06 | 0C | 16 | 34 | 00 | 00 |
| \$17 | 07 | 07 | 02 | 02 | 00 | 00 | 00 |
| \$18 | 07 | 07 | 00 | 00 | 00 | 0.0 | 0.0 |
| \$19 | 07 | 07 | 00 | | | | |
| | | | | 00 | 00 | 00 | 00 |
| \$1B | 3F | 00 | 00 | 67 | 00 | 7A | 00 |
| \$1C | 3F | 00 | 00 | 02 | 00 | 1A | 0.0 |
| \$1D | 00 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$1E | 4F | 00 | 00 | 4 P | 00 | 01 | 00 |
| SIF | 33 | Cl | 00 | 00 | | 23 | |
| | | | | | 0.0 | | 00 |
| \$20 | 40 | | 00 | 00 | 00 | 00 | 00 |
| \$21 | FF | FF | 00 | 00 | 50 | 00 | 00 |
| \$22 | 00 | 92 | 00 | 00 | 00 | 00 | 00 |
| \$24 | 00 | 00. | 00 | 00 | 00 | 00 | 00 |
| \$25 | 00 | 00 | 00 | 00 | 00 | | |
| | | | | | | 00 | 00 |
| \$26 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$27 | FF | 00 | FF | 00 | 0.0 | 00 | 00 |
| \$2A | 00 | 00 | 0.0 | 00 | 00 | 00 | 00 |
| \$2B | 00 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$2D | 00 | 00 | 00 | 00 | 00 | 00 | 00 |
| | | | | | | | |
| \$2E | 80 | | 06 | 00 | 00 | 00 | 00 |
| \$2F | 00 | | 08 | 7 F | 03 | 00 | 00 |
| \$30 | 9D | 00 | 00 | 0.0 | 00 | 00 | 00 |
| \$31 | 32 | 4C | 46 | 3C | 28 | 00 | 00 |
| \$32 | 00 | 0.0 | 00 | 00 | 00 | 00 | 00 |
| \$33 | 65 | 72 | 6E | 69 | 5D | 00 | 00 |
| \$34 | 1B | 18 | | | | | |
| | | | 1A | 19 | 1A | 00 | 00 |
| \$35 | 50 | | 4A | 47 | 44 | 00 | 00 |
| \$36 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$37 | 00 | 00 | 00 | 04 | 04 | 00 | E2 |
| \$38 | 4B | 00 | 00 | 00 | 03 | CO | 00 |
| \$39 | 00 | 00 | 00 | 00 | 00 | 80 | 00 |
| \$3A | 00 | 00 | | 00 | | | |
| | | | 00 | | 00 | 80 | 00 |
| \$3B | 03 | 06 | 0C | 00 | 00 | 00 | 00 |
| \$3C | 00 | 00 | 00 | 00 | 00 | 00 | C0 |
| \$3D | 31 | 41 | 4C | 35 | 35 | 46 | 00 |
| \$3E | 37 | 30 | 75 | 36 | 00 | 00 | 00 |
| \$3F | 00 | 00 | 90 | 00 | 00 | 00 | 00 |
| | 80 | | | | | | |
| \$40 | | A5 | 00 | 00 | 00 | 00 | 00 |
| \$41 | 00 | 00 | 00 | 00 | 00 | 00 | 00 |
| \$42 | 80 | .00 | 00 | 00 | 00 | 00 | 00 |
| 1G1AL5 | 5F77 | 7: | | | | | |
| | | | | • | | | |

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( BOSCH
```



```
$43 FE 08 7C 00 00 00 00
$44
    80 52 00 00 00 00 00
$45
    00 00 00 00 00 00 00
$46
    00 00 00 00 00 00 00
$47
    00 FF 00 FD 00 FA 00
    00 F7 00 F2 00 ED 00
$48
$49
    00 E7 00 E3 00 DE 00
$4A
    00 DA 00 D7 00 D5 00
$4B
    00 D4 00 D3 00 00 00
$4C
    00 00 00 00 00 00 00
$4D
    00 00 00 00 00 00
$4E
    00 00 00 00 00 00 00
S4F
     00 00 00 00 00 00 00
    00 00 00 00 00 00 00
$50
$51
     50 00 00 00 00 00 00
$52
    00 00 00 00 00 00 00
$53
    OE 07 E9 00 00 00 00
$54
    00 00 00 00 00 00 00
$55
    00 00 00 00 00 00 00
$67
    A0 A5 00 00 00 00 00
    DO 10 00 80 00 00 00
$68
$69
     00 FP F0 08 7B 00 00
     FE 08 7C 00 00 00 00
$6A
$6B
     00 00 00 00 00 00 00
$6C
     00 00 00 00 00 00 00
$6D
     00 00 00 00 00 00 00
$6E
     00 00 FF 00 FE FF 00
$6F
     FD PE FC FD FA FB 00
$70
     F7 F9 F5 F7 F4 F5 00
$71
     F2 F4 F1 F2 F0 F2 00
$72
     FO F2 F0 F2 EF F2 00
$73
     EF F2 F0 F2 00 00 00
$74
     00 00 00 00 00 00 00
$75
     00 00 00 00 00 00
$76
     00 00 00 00 00 00 00
$77
     00 00 00 00 00 00 00
$78
     50 00 00 00 00 00 00
$79
     00 00 00 00 00 00 00
$7A
     00 00 00 00 00 00 00
$7B
     1E 50 00 00 00 00 EC
    41 55 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$01
$02
     01 02 03 04
     41 54 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$03
$04
     01 02 03 04
$05
     FF FF FF FF
$06
$07
     42 54 FF FF FF FP FF FF FF FF FF FF FF FF FF
$08
     FF FF FF FF
SOD
     41 48 32 39 35 31 52 36 33 32 38 32 47 46 39 59
SOE
     01 5A 4B 31
     41 4A 01 02 03 04 52 45 41 32 30 32 33 30 30 30
SOF
$10
     01 02 03 04
$13
     42 52 30 31 33 34 56 31 07 30 34 36 48 36 54 55
514
     01 5A 74 02
$17
     42 54 FP FF $18
     FF FF FF FF
$21
     37 35 E1 72 6A 74 91 9A
$22
     39 15
$23
     31 41 FA FA FA FA FA
$24
     31 41 FA FA FA FA FA
$25
     32 41 FA FA FA FA FA
$26
     32 41 PA PA FA FA FA
$40
     00 00
$41
     3F 00 00 02 00 1A
     D0 C4
$42
$43
     00 00 8E 80
```





```
$44 C6 00 00 FC C0 C0
$45 07 01 07 01 05 01
$46
    FF 1B 1B 64 28
    OA 64 06 04 04 05 0A 06 04 0A 00 00 FA 00 00 FF 04 64
$47
$48 18 08 08
$B0
    58
    FD FE 00
$B1
    FF FF FF FF
SB2
$B4
    41 53 33 39 31 35 32 32 35 44 41 54 20 20 20 20
    50 AA 04 OF 07
$B7
$B8 43 48 70 02 09
$C1
    30 46 30 37
$CA
    30 46 30 37
$CB
    01 89 6E 6B
$CC
    01 89 6E 6B
$D1
    00 00
$DB 00 00
$DC 00 00
```





Comments

Lamp Status: AB light is on and stays on solid Method to Download: Through DLC Method to Power: Battery box to Vehicle's remote post Vehicle Mileage: 24,913 Miles

Location of Inspection: National Car Rental, 11 Roseland Ave, Warwick, RI People Present: KE Sullivan

STATE OF RHODE ISLAND UNIFORM CRASH REPORT

| | | | ********** | 44000 - 1000- | 9 9 42 2 | AND DESCRIPTION | 0 v | | | ~~ * **** | | | | ~ | | |
|------------------------------|--|--|--|---------------------------|----------------------------|--|-------------------------------------|--------------------------|------------------|---|-------------------------------------|--|---|--------------------------------|--|--|
| Reporti | ng Agency | Name | | | Report | Number | | \$3000 \$300 x 100 200 x | 1 | Crash Dat | - | Crash T | ime | Walk I | n Report | Parking Lot |
| Burril | lville | | | | 08-104 | I-AC | | , | C | 04/15/20 | 800 | 0905 | | | | |
| | Town Name | • | | | et or Hig East | - | | | F | On Ram | · 1 | # # of 2 | - 1 | Posted S _l 25 | oeed Lim | |
| Neares | Intersection | n Street | Direction | From | Neares | t Interse | ction to | Crash S | Site D | | | arest Inter. | Latitude | | Long | itude |
| 1 MHIE | PPLE AVE | | } | | North [| | | | 1 | | | Miles | | | | |
| Unit ID | Driver's | Last Na | | irst N | | M.I. DO | | opening water Oppning | nit ID | Ī | | Last Name | Fire | st Name | M.I. | DOB |
| և | | | | | ; | . . | | | | MDP-russeld MPP- | | | | | degreen | |
| Address | } | | | С | ity | | | A | ddress | 3 | | | | City | , <u></u> | mysician samuelija i maranjaga marani bilaga samu sampan samueli marani samueli samueli samueli samueli samuel |
| | | | | В | URRILL | VILLE | | | | | | | | | | |
| State | Zip | Home Phone | Cel | Phor | 1e | Work | Phone | St | ate | Zip | Hom | e Phone | Cell F | Phone | Wor | k Phone |
| RI | | | | 900 - anni 100 - anni 100 | | | majūram, siptiekā rite, spiemerite, | | | | | | | | | allegigien von von sity generalisen sparans von allegiscommen nick partie von sich sparan |
| Driver's | License # | | | | UUL | Lic. Stat | e | Pı | river's | License | i i | | | CDL | Lic. S | tate |
| | | | | | | RI | | | | | | | | | | |
| IVI/V VIO | | M/V Violation | ı M/ | / Viola | ation | M/V V | iolation | M | /V Vio | lation | MN | Violation | M/V | Violation | MV | Violation |
| 31-14- | anna ann an ann an ann an an an an an an | | | GSCheannit Photonics | Named Street Street Street | | 000074500 ¹ =10007=0 | | | wner are Sa | | | | tono (Tangal Canad Nasa | | |
| Driver & O | wner are Same | CMICIOL | | | First N | lame | M.I. | Pn | ver & O | wnerare sa | me O | wner's Last | Name | Fire | t Name | M.I. |
| | | ALAMO FINA | INCING LE | | | | | | | | | | | Oil. | | |
| Address | ; ORTH LAK | AN CUVERA | | City | | | | ľ | dress | • | | | | City | | |
| | | Home Phone | To all | l Phor | | Work I | 2hona | | ate | Zip | Hom | e Phone | Call F | Phone | Mor | k Phone |
| | 74117 | HOLLIG T HOLLO | 06. | 1 1 1101 | | V VOIN | 110110 | ľ | ato | | 1.0111 | 0 1 11011C | 00.11 | 110110 | 1,01 | N I HOHO |
| | ce Compan | v Name | | Insur | ance Po | icy Num | ber | In: | suran | ce Compa | any Na | me | l | surance | Policy N | ımber |
| 9 | Y MUTUAL | | No Ins. | | | , | | | | | | | lo ins. | | | |
| Hit And | Run | | | MATERIAL PROPERTY. | | ACCUPATION CONTRACTOR OF THE PARTY OF THE PA | | - h i | t And | Run | (Anno mallingua con Algas | | · | | | |
| Yes | , MV & Driv | rer left Scene | Yes, | Drive | r left Sce | ne 🏻 | No 🗌 | Unk [| Yes | , M/V & D | irtver le | fi Scene [| Yes, C | oriver left : | Scene (| No Unk |
| Registra | ition# | Not State | Yr Reg. | VIN | opening and service of | opografieros por alimbro conseriación qu | eyveldir masoyaldir movedaliri ma | Re | egistra | ition# _ | 1 Not | State Yr | Reg. V | 'IN | #************************************* | Processed Digescom (Processed Lanance Philosophical Constitution |
| | النا 🔃 | | 2009 | 1G1A | L55F77 | 7. | | | | L | Reg. | | | | | |
| Veh Yr. | Make | IV. | lodel | | Color | Plat | е Туре | Ve | h Yr. | Make | | Mod | lel | Colo | P | late Type |
| 2007 | CHEVRO: | let c | OLBALT | LT | BLUE | PC | | | | *************************************** | | | | | | |
| | vel Directio stbound | n | | Not o | Souti n Roadw | nbound ay | Unk | Ve | | vel Direct stbound | | ☐ Northbo Westbound | | Solot on Roa | outhboun dway | d Unk |
| Vehicle | Towed? | Towing Com | pany Nar | me | | laz Mat | Placard | ? Ve | hicle | Towed? | TOM | ring Compa | iny Nami | 8 | Haz M | at Placard? |
| ⊠ Ye | s No. | GEORGE'S | TOWING | | vocalestore | □ Y | es 🏻 | No | _ Ye | es 🔲 N | 0 | | · | | | Yes No |
| | | | | | | THE SECOND PROPERTY OF THE | | erson T | | | | | *************************************** | | | |
| 1 Driv | | Bicyclist Other Cyclist | | | • | elchair, I | Person i | n Buildi | ing, S | kater, Pe | | ccupant of Unknown T | | | | rtation Device |
| 2 | | Other Cyclist Witness | | | e, etc.) t of Moto | r Veh. N | lot in Tr | ansport | t (Parl | ked, etc.) | | Unknown | Abe of te | IOIMINOLOI | ist. | |
| Unit ID | Sex | | Seat Pos | sition | Othe | r Locati | on | 1 | Bag | Eject | | | ction Sy | r stem d - Forw Faci | | Injury |
| 1 Unit 1 | M Male | M | 13 Other f | | is) 17 N/ 18 Sk | | | 1 N/A | loyed 5 Other | 1 | alle 3 | NA None Used | 8 Chil | ld - Rear Fac | ing 1 Co | omplains of Pain on-Incapacitating |
| 2 Unit 2 3 (etc.) | F Female U Unk | 1 2 3 | 15 Other S | Seat | 19 0 | her Enclos her Unenck | | 2 No 3 Front | 6 Con | nb 3 Total | עי עי | 3 Shoulder & Li 1 Shoulder Onl | y 10 Ch | ster Seat nild - Unk | | capacitating |
| or N/A | Menters | 7 8 9 10 11 12 | 10 0411 00 | - | | wed Unit | 3000 11100 | 4 Side | / UIM | 5 Unk | | 5 Lap Only 3 Type Unik | 12 Ot | | | o Injury |
| Name: (| Occupants - | Witnesses - | Pedestria | ns - B | | | Unit ID | Sex | | DOB | Seat | Air Bag | 13 Un Eiected | | Injury | Trans by |
| | | | | | , | Type | | | | | Pos. | Deployed | | System | ,, | Rescue |
| TRINA I | L POLLARI |) | | <u> </u> | | 1 | 1 | F | 12/1 | 7/1975 | 1 | 3 | 1 | 3 | 3 | ⊠Y □N |
| | | | | | | | | | | | - | | | | | OY ON |
| and the second second second | | Market and the second s | | | | | | - | | | | - | | | - | |
| | | | | Singano Managawa | | | | | | | | | | | | N Y |
| | hicle Prop | erty Damage | <u>' </u> | State | Propert | | - transport | ity/Tow | n Prop | perty | ···· | No Private | Property | ··· | | |
| Owner | | | | | | Addres | S | | | | | | | | | |
| Home Pl | none | Cell Phone | | Work | Phone | | Damag | e Desci | ription | | and the second second second second | | Magazina sii Magazini sa Agazini sa | ····· | and the companies are considerable and an extension of the constant of the con | |
| | | | | | | | FRONT | LAWN, | STO | ne Wall | ALCOHOL SERVICE SERVICE | THE RESIDENCE OF THE PARTY OF T | | | | |
| • | g Officer N | | | | | | - 1 | • | ng Off | icer Badg | je Num | | ort Date | 1 | hibit Pub | lic Release |
| PATROLI | an denni | S CARR | | | | | | 25 | | | | 0.47 | 15/200 | 8 No | | |

Page 1

| | t Number 04-ac | STATE OF RHODE | | D UNIFORM CRASH RE IG GUIDE | PORT | | |
|------------|--|---|----------------------|---|--|---|--|
| | de la composition de la compo | . | | | | | garanonnanintala |
| 1 | Type of Roadwa | | | Traffic Controls | | der kommune som der Milligge segmenser kommune skrive skrive skrive skrive skrive skrive skrive skrive skrive | 10 |
| | 1 Two-Way, Not 2 Two-Way, Not 3 Two-Way, Div | Divided (No Median or Barrier) Divided With a Continuous Left Turrided, Unprotected (painted >4 feet) Midd, Positive Median Barrier | | No Controls Person Traffic Control Signal Flashing Traffic Control Sig. School Zone Signs Stop Signs | 7 Yield Signs 8 Warning Signs 9 Railway Crossing Devic 10 Pavement Markings 11 Other 12 Unknown | e | |
| | 1 Dry 5 fo 2 Wet 6 W 3 Snow 7 S | ondition (Prevailing) self-rost Vater (Standing, Moving) and lud, Dirt, Gravel | wn | Pre-Crash Traffic Controls Ma Yes No N/A Construction Zone Crash? (Crash Occurs in or Related to Construction Vehicles Slowed or Sto | struction, Maintenance, or Utilit | • | |
| 1 | Light Condition 1 Daylight 2 Dawn 3 Dusk | (Prevailing) 5 Dark - Not Lighted 6 Dark - Unknown Lighting 7 Other | | Yes No Construction Workers Present | 17 | | |
| | 4 Dark - Lighted | 8 Unknown | | Yes No | | 1st | |
| 1 | Weather Condit 1 Clear 2 Cloudy 3 Fog. Smog. St | ion (Prevailing) 5 Steet, Hail (Freezing Rain or I 6 Snow moke7 Blowing Snow | Orizzle) | Contributing Circumstances E 1 None 2 Weather Conditions 3 Physical Obstructions | invironment | | 1 |
| ara-e-in-o | 4 Rain | 8 Severe Crosswinds | | 4 Glare 5 Animal(s) in Roadway 6 Other 7 Unknown | | 2nd | |
| 1 | 2 Rear End (Fro 3 Head-On (Fro | Between Two Motor Vehicles in Tra nt-to-Rear) | nsport | | | 3rd | and the second s |
| | 5 Angle (Front-to 6 Angle (Front-to 7 Angle-direction 8 Sideswipe, Sa 9 Sideswipe, Op 10 Rear-to-Side | p-Side) Opposite Direction p-Side) Right Angle (includes Broads n Not Specified me Direction posite Direction | ide) | Contributing Circumstances R 1 None 2 Road Surface Condition (We 3 Debris | | 1st | P |
| | 11 Rear-to-Rear 12 Other 13 Unknown | | | 4 Rut, Holes, Bumps 5 Work Zones (Construction/M 6 Worn, Travel-Polished Surface 7 Obstruction in Roadway | | 2nd : | |
| | School Bus Relation (Directly Involved In | ndicates Contact was Made) | | 8 Traffic Control Device Inoper 9 Shoulders (None, Low, Soft, 10 Non-Highway Work 11 Other | | 3rd | |
| | Yes, Indirecti | | | 12 Unknown | | | L |
| | | · | | | | · | _ |
| 1 | Vehicle #1 1 Passenger Car | 6 Motor Home | 11 Motor | | | 17 Tow Truck | |
| <u> </u> | 2 (Sport) Utility Vehicl 3 Passenger Van 4 Cargo Van (10K lbs 5 Pickup | 8 Transit Bus | 14 Other 15 Track | d ipeed Vehicle Light Trucks (10K lbs [4,536 kg] or Trailer or Combination (More t im/Heavy Trucks (More than 10) | han 10K lbs [4,536 kg]) | 18 Pedestrian 19 Bicyclist 20 Witness 21 Other | |
| Yes | Vehicle #1 | Does this Vehicle have Seats to | Transport | 9 or more people, including the | Driver's Seat? | —— [] Yes | ☐ No |
| Yes | Vehicle #1 | 1 | Was this Vo | phicle in Tow? | | —— [] Yes | No |
| 1 - | Vehicle #1 | | manial E | ction Vehicle ———— | | | |
| * | 1 No Special Fund 2 Taxl | | ol Bus | 5 Military 6 Police | 7 Ambulance 8 Fire Truck | | |

7 Ambulance 8 Fire Truck 9 Unknown

| Report Number 104-AC | 1 | STATE OF RHO | | D UNIFORM (IG GUIDE | CRASH REPOI | RT | | |
|----------------------|--|---|-------------------------------------|--|--|---|---|--|
| Vehi | cle #1 Vo Unk — | Police, Ami | bulance or Fire | Truck Respondi | ng to a Call? | werconin-summovementers unbattair-suminativ | Yes No | Un |
| Vehi | cle #1 | | 84 | | | | | |
| | 11 | Motor Vehicle on Roadway | Motor Vel 2 Motor Veh | nicle Position — nicle Parked | 3 Working Vehicle/ | Equipment | against the State of the State | |
| Vehi | .cle #1 | | | | | | | |
| 4 | | linor damage (less than or equa | | of Damage —— | | Disablina Daman | a Innastar than \$10 | 000 |
| | | mor damage frees trait or edge | 1 to \$1000) 51 | onouna oomago | (greater treat property | olasimiy bomey | , (greater trial) \$100 | |
| 20 | cle #1 | | | rmful Event | | | | _ |
| Non-C | Collision: | Collision with Person, Moto or Non-fixed Obj: | or Veh, | | Collision with Fix | ed Object: | | |
| 6 Fell/Jump | sion i uip. Loss or Shift ed from Motor Veh Falling Object | 9 Pedestrian 10 Pedalcycle 11 Railway Vehicle (Train, I 12 Animal 13 Motor Vehicle in Transpo 14 Work Zone/Maintenance 15 Other Non-Fixed Object | Engine) ort Equipment | 16 Impact Attenue 17 Bridge Overhe 18 Bridge Pier or 19 Bridge Rail 20 Culvert 21 Curb 22 Ditch 23 Embankment 24 Guardrall Face 25 Guardrail End 26 Jersey/Concre 27 Other Traffic B | Support te Traffic Barrier | 31 Highway Ligh 32 Traffic Sign/S 33 Traffic Signal 34 Traffic Contro 35 Variable Mes 36 Other Post, F 37 Fence 38 Mailbox | Elec/Tele)/Light Su hting/Light Standar Support VSupport of Box sage Board/Arrow | rd Board |
| | | 40 Uni | known - Most H | larmful Event | | · | • | • |
| Vehi. | cle #1 | | Vahirla | Action Prior | | | | |
| | 2 Bar 3 Chr 4 Ov | vements Essentially Straight Al cking anging Lanes ertaking/Passing ning Right | head 6 Turnii 7 Makir 8 Leavi | ng Left ng U-Turn ng Traffic Lane ing Traffic Lane | 11 Negotiating 12 Parked 13 Stopped in 14 Other 15 Unknown | | | Accession of the Control of the Cont |
| 12 Vehi | cle #1 | |); | *(| |)3 | | |
| | Initial Impact Are Clock Diagram | Passenger Car | | | Motorcycle | | mpact Area k Diagram | |
| | Or 13 Top (Roof) 14 Undercarriag 15 Non-Collision 16 Unknown Most Damaged A | e | | | mouse cycle | 14 Un 15 No 16 Un | Or up (Roof) idercarriage in-Collision iknown lamaged Area | |
| 12 Vehic | cle #1 | | | 8 8 8 nger Car Irailer 10 | 12 1 | 33 | | The state of the s |
| | | Bus | | | Tractor Trailer | | | |

Bus

| Report 1 08-104 | | STATE OF R | HODE ISLAND UNIFO | | ORT | | | | |
|--|--|--|--|---|---|-----|--|--|--|
| 1st | | 3 | | | | 1st | | | |
| | Vehicle #1 | | man and the second | | 4 | | | | |
| 13 | Non-Collisi | in the state of th | Sequence of Events | on with Fixed Object: | | | | | |
| 2nd | 1 Overtum/F 2 Fire/Explor 3 Immersion 4 Jackknife 5 Cargo/Equ | Rollover | 16 Impact Attenuator/Crasi 17 Bridge Overhead Struct 18 Bridge Pier or Support 19 Bridge Rail 20 Culvert 21 Curb | h Cushion 28 Tree (S ture 29 Landsd 30 Utility F 31 Highwa 32 Traffic | | 2nd | | | |
| 3rd | 7 Thrown or 8 Other Non | Falling Object -Collision | 22 Ditch 23 Embankment 24 Guardrail Face 25 Guardrail End | 34 Traffic 35 Variabl | Control Box le Message Board/Arrow Board Post, Pole, or Support | 3rd | | | |
| | Collision wit or Non-fixed | th Person, Motor Veh, I Obj: | 26 Jersey/Concrete Traffic 27 Other Traffic Barrier | Barrier 38 Mailbox | x ixed Obj. (Wall, Building, Tunnel, e | | | | |
| 4th | 9 Pedestrian | | | | | | | | |
| 6 <u>r</u> | Oriver Vehicle #1 | Not Distracted Electronic Communication Other Electronic Powless (| Driver Distracted Devices (Ceti Phone, Pager, e (Navigation Device, Palm Pilot, | 4 Other Inside to | | | | | |
| | | 3 Other Electronic Devices (| Navigation Device, Paim Pilot, | etc.) b Unknown | | | | | |
| | river Vehicle #1 | | | | | | | | |
| 5 | | parently Normal | | ep, Fainted, Fatigued, | | | | | |
| | 2 Em 3 III (3 | otional (Depressed, Angry, D Sick) | isturbed, etc.) 5 Under the 6 Other | e Influence of Medicati | ons/Drugs/Aiconoi | | | | |
| 1st | /ehicle #1 | | The same of the sa | | | 1st | | | |
| 2nd v | Pehicle #1 | | Used (Elbows, Knees, Shins, eng (Jacket, Backpack, etc.) | 5 Lighting 6 Other | | 2nd | | | |
| | | | | | | | | | |
| and the second s | | | ——Alcohol and/or Drug Tes | sting management and the second | | | | | |
| Dr | iver Vehicle #1 | | • | iver Vehicle #1 | | | | | |
| | | Chemical Test | | | ohol Test Result | | | | |
| Alcoh | ol Drug | , Alcoho | ol Drug | | BAC | | | | |
| □- | | None Given — | | | - Pending | | | | |
| □- | Secure J | Test Refused — | | en e | Unknown | | | | |
| 573 | lame. | | Then d | iver Vehicle #1 | | | | | |
| ⊠ - | Service Servic | — Blood — | | | rug Test Result | | | | |
| П. | | | | | Positive — | | | | |
| LJ- | tion of the same | Serum [] - | | | Negative | | | | |
| <u> </u> | | —Other— | ——— 🗆 🔞 – | Awa | niting Test Result | | | | |
| | | — Breath — | | | | | | | |

| Report Number 08-104-AC | STATE OF RHODE ISLAND UNIFORM O Narrative/Diagram Supplem | |
|--|--|--|
| and was a grown to great an executive country training of the control flow of the Commission of the country flowers and the country flowers are considered and the country flowers and the country flo | | |
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| | Please see the Narrative Suppl | emental |
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| 1 Indicates North | Crash Diagram (NOT TO SCALE) | |
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Report Number 08-104-AC

STATE OF RHODE ISLAND UNIFORM CRASH REPORT Additional Persons Supplemental

| Person Type | | | | | | | | | | | | | | | |
|--------------------------------------|-------------------|--|-----------------|----------------|--------------------------|--------------------|-----------------|---|--|--|--|--------------------------|--|----------------------|--|
| | Bicyclist | 7 Oth | er Ped. (| Whee | elchair, F | | - | ng, Ska | ter, Pec | | | | | | ortation Device |
| | Other Cyclist | | eyance, e | - | | | | | | | Unknown T | ype of N | on-Motori | st | |
| 1 | Vitness | | cupant of | | | | | | Special Statement Street | | Unknown | | | | For 2 - a see a |
| Unit ID Sex | | Seat Pos | | | r Locati | on | | Bag loyed | Eject | | Prote NA | | d - Forw Facil | | Injury |
| 1 Unit 1 M Male 2 Unit 2 F Female | M 2 3 | 13 Other I 14 Unk Ro | Row (Bus) Sw | 17 N/ 18 Sk | | | | 5 Other | 2 Partis | any . | ! None Used Shoulder & Le | | d - Rear Faci ster Seat | 21 | Complains of Pain Ion-Incapacitating |
| 3 (etc.) U Unk | 4 5 6 | 15 Other 9 | | | her Enclos her Unenci | | 2 No 3 Front | 6 Comb | 3 Totali 4 N/A | 'Y 4 | Shoulder Only Lep Only | 10 Ch | ild - Unk Imet Used | | ncapacitating atal |
| or N/A | 7 8 9 10 11 12 | | | | wed Unit | | 4 Side | 7 0, | 5 Unk | | Type Unk | 12 Ot | her | | lo Injury Ink |
| | | ···· | | 22 01 | | Unit ID | Sex | DC |)B | Seat | Air Bag | 13 Un Ejected | Prot. | Injury | |
| Name: Occupants | - Witnesses - | | | | Туре | | | | | Pos. | Deployed | , | System | , | Rescue |
| Pedestrians - Bicyc | dists | | | | | | | | | | | | | | |
| | | | | | 10 | N/A | F | 1 | ····· | | 2 | 1 | 3 | 5 | □Y ⊗N |
| | | | | | 10 | n/a | М | | | 1 | 2 | 1 | 3 | 5 | □Y ⊠N |
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| | | *************************************** | | | | | | | | | | ~ | | | N DY |
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| | | Original and Artistate Theorem (1988) | | | | | | | | | | | | | N Y |
| | | | | • | | | | | | an proposition sures | | | | | N Y |
| Non-Vehicle Prope | rty Damage | | State P | roper | ty | | City/Tov | vn Prop | erty | □Р | rivate Prop | erty | | | |
| Owner | | | | | Addres | S | | | | 4 | | | | | |
| Home Phone | Cell Phone | | Work Ph | none | | Damage | Descr | iption | | | | | | | |
| Non-Vehicle Prope | rty Damage | | State P | roper | ly | | ity/Tov | vn Prope | erty | ПР | rivate Prop | erty | | | |
| Owner | | *************************************** | | | Addres | S | | *************************************** | Tyracian di Marana and Marin | | | | | | angunta to the same and plant to the same and all the same and and the same and an engineering an engineering and an engineering an engineering and an engineering and an engineering and an engineering and an engineering an engineering an engineering and an engineering and an engineering and an engineering and an eng |
| Home Phone | Cell Phone | | Work Ph | one | | Damage | Descr | iption | | | | | | | |
| Non-Vehicle Proper | rty Damage | | State P | roperi | ty | | ity/Tov | vn Prope | erty | Пр | rivate Prop | erty | | | |
| Owner | | *************************************** | | | Address | Š | | | Tagger, and the Stage of the St | ····· | | | the Partition accompanies the Processor along a 1977 agree | | |
| Home Phone Cell Phone Work Phone | | | | | | Damage Description | | | | | | | | | |
| | į | | | | | | | sacron-cut-concent) | | | haring the solution of the solution of the | non-officer-modification | | ententententententen | |

Printed on

08/25/2008

Burrillville Police Department

Operator Information Sheet

08-104-AC [State Report Required: Y] 1 of 1

Page Number

| General | | | | | | | |
|---------------------|---------------|-------------------|--------|------------------|-------|-----|---|
| ccident Date | Time | Reporting Officer | | | | | |
| 04/15/2008 | 0905 | PATROLMAN | DENNIS | CARR | | | : |
| ocation | | | | City | State | ZIP | |
| שוזוגשנא שמאש פס פס | UADDTCVTT.T.E | • | | DITODTT.TVTT.T.F | DT | | |

| Oı | perator | | | | | ì | | |
|---|--|--|------------|--|--|------------|------------------------|---|
| | Last Name First | | | Middle | | Suffix | Veh/Unit | |
| 0 | | | | L | | | 1 | Fatality |
| IP. | Number Street | Suffix | Apt | City | | State | ZIP | |
| ER | disposance of | DR | | BURRII | LLVILLE | RI | | |
| A | DOB Home Phone | | Work Phone | and the second s | License Sta | ate/Number | | |
| IT | According to the second | | | | RI | | | |
| O R | Insurance Company | | F | olicy Number | | | | |
| | | | | | | | | |
| | Last Name First | | Middle | Suffix | Home P | hone | Work Phone | |
| lo | ALAMO FINANCING LP | | | | | | Application residences | |
| W | Number Street | Suffix | Apt | City | and the second | State | ZIP | *************************************** |
| N E R | 6929 NORTH LAKEWOOD | ST | | TULSA | | OK | 74117 | 7 |
| Ŕ | Insurance Company | ······································ | P | olicy Number | ······································ | | | |
| | LIBERTY MUTUAL INS | | | | | | | |
| | Year Make | Model | | | VIN | | | |
| V E H | 2007 CHEVROLET | COLI | BALT LT | | 1G1AL55 | 5F777 | | |
| | Registration State/Number | | Towed By | | To | wed To | | |
| 1.3 | | | George's ' | TOWING | G | EORGE'S AU | ro body a | TOWING |
| Simon of the last | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| 0 | Last Name | | First | | Middle | Suffix | Veh/Unit | ☐ Injured ☐ Fatality |
|------------------|--------------------|------------|--------|------------|------------|----------------------|------------|-------------------------|
| P E R | Number Stree | | Suffix | Apt | City | State | ZIP | |
| OPERATIOR | DOB | Home Phone | | Work Phone | , | License State/Number | · | |
| | Insurance Compa | any | | | icy Number | | | |
| O W | Last Name | First | | Middle | Suffix | Home Phone | Work Phone | |
| N N E R | Number Stree | | Suffix | Apt | City | State | ZIP | |
| R | Insurance Compa | - | | Poli | cy Number | | | |
| V E H | | Vlake | Model | | | /IN | | |
| Ħ | Registration State | e/Number | T | owed By | | Towed To | | |

Burrillville Police Department NARRATIVE FOR PATROLMAN DENNIS CARR

Page: 1

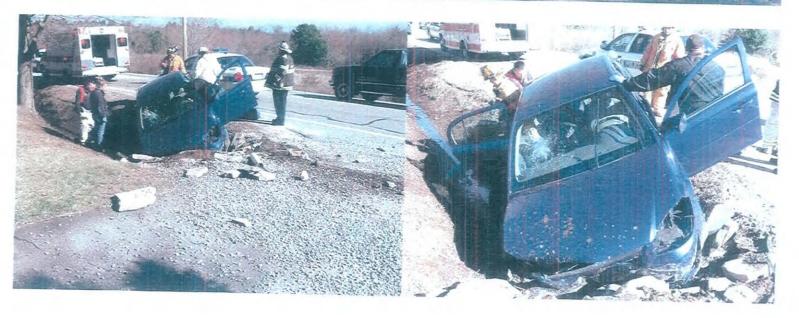
Ref: 08-104-AC

| VEHICLE #1 A 2007 CHEVY COLBALT LT 4-DOOR/BLUE. DRIVEN BY |
|---|
| DOB WAS TRAVELING EASTBOUND ON RT 107/EAST AVENUE. THE CAR |
| LEFT THE TRAVEL LANE OVER THE EMBANKMENT TRAVELING APPROXIMATELY FIFTY(50') |
| FEET EASTBOUND INTO A STONE WALL & CULVERT DRAINAGE DITCH . DAMAGE WAS DONE |
| TO THE DRIVEWAY ENTRANCE ABOVE THE CULVERT AT 727 EAST AVENUE. |
| |
| UPON MY ARRIVAL, THE DRIVER WAS ON THE PASSENGER SIDE CAUGHT |
| BETWEEN THE PASSENGER SEAT AND THE DASHBOARD, THE "STAR" IN THE WINDSHIELD IS |
| FROM TRINA'S HEAD HITTING THE WINDSHIELD. A PASSING MOTORIST MR. PAUL DUBOIS |
| REMOVED A FEMALE CHILD IN A CAR SEAT FROM THE BACK SEAT AND PLACED THE CHILD II |
| THE CAR SEAT ON THE LAWN AT 727 EAST AVENUE. RESCUE PERSONAL ON SCENE, |
| ATTENDING TO TRINA AND THE FEMALE CHILD. TIRANA AND THE FEMALE CHILD WERE |
| TRANSPORTED TO LANDMARK MEDICAL CENTER-WOONSOCKET UNIT BY RESCUE. |
| |
| I ENTERED THE CAR ON THE DRIVERS SIDE, I ATTEMPTED TO SPEAK WITH IT |
| APPEARED TO ME THAT TRINA WAS NOT AWARE THAT I WAS THERE. I ASKED FOR |
| INFORMATION; NAME, ADDRESS, DATE OF BIRTH, CHILDS NAME, A SECOND TIME I ASKED |
| FOR INFORMATION TRINA LOOKED AT ME AS I SPOKE TOO HER, SHE DID NOT ANSWER MY |
| QUESTIONS. RESCUE PERSONNEL REMOVED TRINA FROM THE CAR AND PLACED HER IN THE |
| RESCUE. I ENTERED THE RESCUE AND AGAIN ATTEMPTED TO SPEAK WITH |
| WAS LOOKING AT ME. DID NOT ANSWER THE QUESTIONS I ASKED HER. I FOUND A |
| BLACK WOMANS HANDBAG ON THE REAR SEAT INSIDE THE HANDBAG I FOUND A RI |
| DRIVERS LICENSE: |
| VEHICLE #1 DRIVEN BY (DOB: WRITTEN |
| STATEMENT:" REFUSED TO GIVE A STATEMENT OR INFORMATION OF THE FEMALE |
| CHILD. AFTER THE ACCIDENT, THREE(3) ATTEMPTS WERE MADE BY ME TO GET TO |
| GIVE ME INFORMATION ON THE ACCIDENT AND THE FEMALE CHILD. |
| |
| |
| AT 2:07PM I WAS ADVISED TO MEET A DCYF WORKER ON CHAPEL STREET. MET WITH DCYF |
| INVESTIGATOR MICHAELA DOLAN(401-528-3414). MICHAELA TOLD ME A BLOOD TEST DONE |
| ON WAS POSITIVE FOR COCAINE/NARCOTICS. SHE IS ON HER WAY TO THE HOME OF |
| TO TAKE CUSTODY OF TWO(2) CHILDREN. PTLM. BARRETTE ARRIVED AND WENT |
| WITH MICHAELA TO TO REMOVE THE CHILDREN. |
| NOTE: LANDMARK MEDICAL CENTER-WOONSOCKET UNIT. |
| DR. GEORGE SHERVANIK ORDERED THE BLOOD TOX ON |
| TAY OTOTAL DITHE LITTLE AND TITE AND THE DITOCH TAY AND TAKEN |

Burrillville Police Department Images Associated with 08-104-AC







Burrillville Police Department Images Associated with 08-104-AC





ESIS/GM Central Claims Unit P.O. Box 300 Mail Code 482 C19 B61 Detroit, MI 48265-3000

October 16, 2008

Linda Mills 9310 Rental Car Lane Austin, TX 78719

RE:

Claimant:

File Number:

Client:

Date of Event: April 15, 2008

General Motors Corporation

Dear Ms. Mills:

As you know, ESIS provides claims handling services to General Motors involving product liability claims.

Thank you for your patience during the course of our investigation.

A review of the claim involving a 2007 Chevrolet Cobalt has been completed.

ESIS must respectfully deny the claim for any damages.

Sincerely,

Tiffini Hails

ESIS/GM Central Claims Unit P.O. Box 300 Mail Code 482 C19 B61 Detroit, MI 48265-3000



October 16, 2008

Linda Mills **Rental Insurance Services** 9310 Rental Car Lane Austin, TX 78719

RE:

Claimant:

File Number:

Date of Event: April 15, 2008

Client:

General Motors Corporation

Dear Ms. Mills:

As you know, ESIS provides claims handling services to General Motors involving product liability claims.

Thank you for your patience during the course of our investigation.

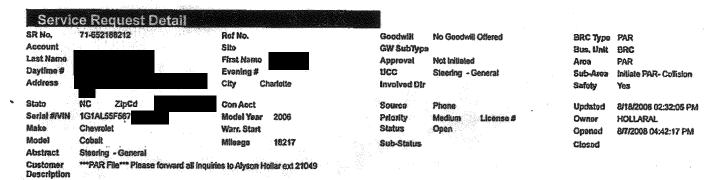
A review of the claim involving a 2007 Chevrolet Cobalt has been completed.

ESIS must respectfully deny the claim for any damages.

Sincerely,

Tiffini Hails

PE10-005
GM
4/14/2010
ATTACHMENT
Q 03
Subject Legal
ATT



Pre-PAR

| PAR Notifier Relative | 8/4/2008 07:45:00 AM Y | # Other Veh : | SAME TAN | 1 As | ao Soylac phalt | Dry | d Cond. Fire Report# | | e Report# 080407≼903 |
|---------------------------|---------------------------------------|---|-----------------|--|--------------------|----------------------------|-----------------------------------|-------------------------|-------------------------------|
| Driver Lact N | | - Circi Name | | i leight 50 | D(8/7 | | bilities ective Lens | | |
| nisureniserani Fuller | eni Lasi Name insu Davi | ance Agent Fire | i Nam | Control of the Contro | 33-45 7 5 | | ce Agency Insurance | | All Control |
| incident Loc | West WT Hamis BLVD near W. Sugar | Creek Intersecti | on | ······································ | Incident Dese | Loud popp | ing sound then lost control, ziga | tagged in median area | in left hand lane when happen |
| Component | Under Vehicle | | | | Damag | n Totaliad as | nishma dania mat kaon amba a th | | 1.5. (|
| Vehicle Loc | Insurance look II | | | | Desc | | d airbag deployed tom under th | ie venicie, passanger s | ide from wheel is bent |
| | M V Service | | | | Add1 in | | Insurance dalm number | | |
| PAR Del | lail e | *************************************** | DD-St. American | *************************************** | Maint L | oc Totaled | | | |
| Collision | Non Collision | Property Damage | N | Thormal Evt | M | Spec Equip | None | | |
| Vehicle Speed | 45 | Weather Condition | Clea | or or | | Prop Owner | Na | Property Type | n/a |
| Last Sorvice Date | | Loc Last Servico | | | | Property Location | n/a | Prop Est Repair Cost | |
| Voh Est Repair Cost | | Spec Equip Installer | Na | | | Prop Damage Description | None | • | |
| Primary /oh Uso | Personal | Inspection Type | | | | Inspected By | Inspection Not Performed | inspection Date/Time | |
| /eh Damage Joscription | Totalled, bottom and front of vah dam | aged, fender off | | | | Explain Other | 704-920-0004 | | |

Report Generated for toporowm

on 8/19/2008

Page 1 of 11

PAR Injuries

| Last Name First Name DOB Location Occupant | of Owner's Vehicle | Phone # Scating Driver | | Seatbel | ni 1/po I, Akbag deployed causing Injury |
|---|--------------------------------------|--|----------------------------------|------------------------------------|---|
| base and burned around the wrist and palm, also lip bleeding. Street Address | | hide CMC U | ent Location niversity Branch | | By on in the Emergancy Room |
| - Sheet Admess | Charlotte | State NC | Zip Code* | | 5 1 10 10 10 10 10 10 10 10 10 10 10 10 1 |
| Activities | | | | | |
| Greated Created By Assigned 8/18/2008 02:23:13 PM HOLLARAL HOLLARAL | | Activity Sub-Type ESIS-Insurance Involvement | Status Done | Completed 8/18/2006 02:26:01 PM | Description ESIS case |
| Contact Last Name Contact I | rst Name | Account | | _ BAC Code | |
| Comments File sent to ESIS for insurance involvement. | | | | | l |
| Alyson Holler/BRC/PAR/ATX Confidential Comments | | | | | I |
| Greated By Assigned 8/18/2008 02:01:05 PM HOLLARAL ESISBIQU | To Activity Type Escalation | Activity Sub-Type ESIS - Insurance Involvement | Status In Progress | Completed | Description Assigned to ESIS |
| Contact Last Name Contact F | irel Name | Accounts | | BAC Code | |
| Cust alleges that while driving she heard a pop and the insurance has taken ownership of the veh. | nen lost control of her veh, the bro | akes would not work and the | veh hit a barrier. V | eh was totalied and cust | |
| Alyson Hollar/BRC/PAR/ATX Genfigential Comments | | | | | |
| Created By Assigned 8/18/2008 01:45:19 PM HOLLARAL HOLLARAL | o Ariivityatypo | Activity Sub-Typo | Status | Completed | <u>Description</u> |
| | | Ownership Escalated to BRC | Done | 8/18/2008 01:45:19 PM | Ownership Escalated to BRC |
| Contact Last Name Contact F Gonments | irst Name | Account (***) | | BAC Gode | |
| Confidential Comments | | | | | |
| | 1 | | | | |

Report Generated for toporowm

on 8/19/2008

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Activities

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Sta!us | Completed | Description |
|-----------------------|------------|---------------|-----------------------|-------------------|-------------|-----------------------|-------------|
| 8/18/2008 01:10;22 PM | HOLLARAL | HOLLARAL | Inbound Call Customer | Complex Request | Done | 8/18/2008 01:47:15 PM | |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| | | | | | | | |
| ACHERISTIS | | | | | 7. F. P. S. | 12.00 | |

Cust sis: Insurance company has veh and they say that they have sent out the check to GMAC for the veh. Cust does not have gap insurance and will still owe money on the veh because of this.

CRS adv: Will need to forward file to central claims dept, they will centact cust in 7-10 business days. Is there anything else CRS can do for cust?

Cust sts: No.

Alyson Hollar/BRC/PAR/ATX Confidential Comments

| OPM |
|-----|
| |
| |
| |

Alyson Hollar/BRC/PAR/ATX Confidential Comments

| orease and the second | | 2455HJH00410 | Activity typa | Activity Sub-Type | Status | Completed | Description |
|----------------------------------|----------|---------------|--|-------------------|--------|-----------------------|-------------|
| 8/13/2008 04:58:27 PM | HOLLARAL | HOLLARAL | Inbound Call Customer | | Done | 8/18/2008 12:48:00 PM | VIN |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| F | | | | | | | |
| Comments Here is the VIN 1G1AL55 | E567 (| Call me back. | | | | | |
| | | AND THE MACHE | | | | | |
| Alyson Hollar/BRC/PAR/ | NTX | | Ottown to the state of the stat | | | | |

Report Generated for toporowm

on 8/19/2008

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Activities

Greated By Assigned To Activity Type
8/12/2008 04:51:06 PM HOLLARAL HOLLARAL Inbound Call Customer Status Completed Description Done 8/13/2008 04:56:42 PM Discuss file Contact First Name BAC Code Cust sis: I was driving and heard a pop and loss control of the veh. Brakes did not work and caused cust to run over and into a median. Cust believes that insurance company may have the veh but CRS will have to talk to cust husband at

CRS adv: Will call husband, thank you for your information.

Alyson Hollar/BRC/PAR/ATX Conlideniial Comments

| Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|--------------------------------|--------------|-----------------------|-------------------|--------|-----------------------|----------------------------------|
| 8/12/2008 04:45:17 PM JACKSOFA | JACKSOFA | Inbound Call Customer | Complex Request | Done | 8/12/2008 04:46:30 PM | continued from previouis ib call |
| Contact Last Name | Contact Firs | l Name | Account | | BAC Code | customer |
| | | | | | | |

Veh repaired? If yes, cost & where completed? no What has Dir told you about a diagnosis? Who was working with you?

Business Decision: Where maint performed? CNS Auto in Hamsburg, Independent on 49 and Hamsburg. Prev GM veh? yes Prev related repairs? When? no

Falth Jackson/ATX/CAC/T1/Emptyl 0
Confidential Comments

Activities

| | Created By | Assigned To | Activity Typo | Activity Sub-Type | Status | Completed | Description |
|-----------------------|------------|---------------|-----------------------|-------------------|--------|-----------------------|-------------|
| 8/12/2008 04:44:12 PM | JACKSOFA | JACKSOFA | Inbound Call Customer | Complex Request | Done | 8/12/2008 04:46:03 PM | called in |
| Contact Last Name | 28,000 | Contact First | Name | Account | | BAC Code | |
| Comments | | Aug. | 29.00 | | | | |

7047567081

Molle, NC

Chanotte, NC 2006, purchased January 2007.

—call her husband and obtain the vin.

Doesn't understand what happened. Car was at curb of medium, was zig-zagging, car lost control, could not put the brakes on. Ayard or so, cement in the medium, car landed on that, thought a bomb was in there, that is when the sirbag deployed. Blew a fire and the brakes clidn't work, or the tie rod blew. Estimate of repair will be \$14,000. has gap insurance. Looked like the front axide split.

Vin: does not have, says to contact husband to obtain.

Her arm was not injured thought the needed a mrt, ctscan, her lip was bleeding. Was nothing wrong.

Alcheg deploy, that is what did the damage.

Cust Sts:

Owner Specific: Orig owner? yes Primary driver? yes Personal or business use? Personal

Veh Specific: Where purchased? Larry King Chevrolet Current approx mig? 18,200 Ext Svc Plan?

Concern Specific:
Concern? believes a manufacturer defect caused the accident. Going 45 mph in a 60, and the vehicle was headed straight when the brakes stopped working.
Vehicle was totaled
When 1st notice concern? did not notice

What conditions does concern occur? n/a

Where diagnosed? ru'a
Est cost of the repair? \$14k
Current location of veh? At Old Statesville rd. In North Carolina at a towing place. Right of WT Harris.

Faith Jackson/ATX/CAC/T1/Emptyl 0 Confidential Comments

Report Generated for toporowm

on 8/19/2008

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Activities

| Croated Created By 8/12/2008 11:43:58 AM HOLLARA! Contact Last Name Comments Confidential Comments | ARREST AND A STATE OF THE PROPERTY OF THE PROP | Account 5 | Status Scheduled Alarm | BAC Code | Description Sent to ESIS |
|---|--|---|---------------------------|--|------------------------------|
| Created By 8/12/2008 09:16:13 AM HOLLARAI Contact Last Name Comments Some one called me by the name of C | L HOLLARAL Inbound Call Customs Contact First Name | Activity Sub-Type Voice Mail Received Account | Status Done | Completed 8/12/2008 09:16:43 AM BAS Code | Description Discuss file |
| Alyson Hollar/BRC/PAR/ATX Confidential Comments | | | | | |
| Created Created By 8/8/2008 08:22:32 PM UYDA Contact Last Name Comments Please refer to Inbound call customer Confidential Comments | HOLLARAL Notify CRM Contact First Name | Activity Sub-Type Customer Celled Account | Status Done | Completed | Description **Assisting only |

Report Generated for toporowm

on 8/19/2008

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Activities

| Created | Crealed By | Assigned To | Activity Typa | Activity Sub-Type | Status | Completed | Description |
|---------------------------|--|------------------|------------------------|-------------------|--------|----------------------|-------------------|
| 8/8/2008 06:18:05 PM | UYDA | UYDA | Outbound Call Customer | Made Contact | Done | 8/8/2008 06:22:30 PM | Customer followup |
| Contact Last Name | | Contact Fire | Mame | Account | | BAC Code | |
| Comments | | | | | | | |
| CRS sts: | NAC SECOND CONTRACTOR OF THE SECOND CONTRACTOR | | | | | | |
| >read SR# to cust for ful | ture reference a | nd cust convenie | ince | | | | |

>vill notify OCRS of cust call
>gave tel no. of GMAC 800-200-4622, in case the person who called them was from GMAC

Note: Cust alternative tel acc

Dave Brown/MLA/CAC Tier 1

Confidential Comments

| Created | | | Activity Type | Activity Sub-Type | Status | Completed | Description |
|----------------------|------|---------------|-----------------------|-------------------|--------|----------------------|-------------------|
| 8/8/2008 06:15:44 PM | UYDA | UYDA | Inbound Call Customer | Complex Request | Ооле | 8/8/2008 06:18:03 PM | Customer followup |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| | | | | | | | |

Cust sts:

>comebody from either GM or GMAC called them, would like to talk to OCRS >cust does not have OCRS extension number and SR# with her

Cust sks: >to communicate with OCRS

CRS Adv: >will connect cust to OCRS

Dave Brown/MLA/CAC Tier 1 Confidential Comments

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Activities

| Greated 8/8/2008 12:06:58 PM Contact Last Name | Greated By DRAHEICM | Assigned To HOLLARAL Gonlact Fire | Ownership Changed | Activity Sub-Typo Account | Status Done | Completed 8/8/2008 12:06:58 PM BAC Code | Doscription Service Request Ownership has changed FROM: ARIASAD TO: HOLLARAL |
|--|------------------------|---|------------------------------|--|----------------|--|--|
| Confidential Comments | | | | | | | |
| Groated 8/8/2008 12:06:12 PM Gentact Last Name | Created By DRAHEICM | Assigned To HOLLARAL | ERC PAR | Activity Sub-Type Initial Contact- Phone Account | Status Done | Completed 8/12/2008 10:41:37 AM BAC Code | Description called |
| CRS adv. Will call cust b | ack at that time | | work, please call back after | 4:30 EST. | | | |
| Alyson Hollar/BRCIPAR/ Confidential Comments Croated | Created By | Assigned To | Activity Typa | Activity Sub-Type | Status | Completed | Description |
| 8/8/2008 12:06:07 PM Contact Last Name | DRAHEICM | HOLLARAL Contact Firs | | Initial Contact-Dealer Account | Done | 8/12/2008 11:43:32 AM BAC Code | Called |
| Ayson Hollar/BRC/PAR/ Confidential Comments | | | noon to provide VIN or invol | ved dir information, | | | |

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on 8/19/2008

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Activities

| Greated 8/8/2008 12:06:01 PM | CTERIOR BY DRAHEICM | Assigned To HOLLARAL | Activity Type | Activity Sub-Type initial Contact-AVM | Status Done | Completed 8/12/2008 11:42:51 AM | Description Caled |
|---|--|--------------------------|--|---------------------------------------|--------------------|--|--------------------|
| Contact Last Name | | Contact Fire | it Name | Account | | BAC Code | prevarit de |
| Communication Horvath Andrew 404082 | 2845K | | | | | | |
| CRS provided vehicle an | | on and a descri | ption of cust concern. C | RS adv DVM that this is just an fy | l but if DVM has | any mestions or information to | |
| Call UKS. | | i mi | | | | A About an annual man annual an annual a | |
| Alyson Hollar/BRC/PAR/ Canidential Comments | Andrew Control of the | | | | | The state of the s | |
| | | in faces a short as a | | | | | |
| ©700(50 8/8/2008 12:05:55 PM | Orealed by DRAHEICM | ASSIBIODE TO HOLLARAL | Activity Typo BRC PAR | Activity Sub-Type Acknowledgement | Status Done | 9 Completed 8/8/2008 05:25:07 PM | Description called |
| Contact Last Name | | | PROVERZIA STERNING PROVINCIA DE LA CONTRACTOR DE LA CONTR | | an area of the | | |
| Some continue | | Contact Fire | t Name | Account | | BAC Code | |
| Comments | I am calling from | | | Account | u that I have rece | | |
| etalunians sessions and This is Alyson Hollar and | | m the product a | llegation dept at genera | | J that I have rece | | |
| This is Alyson Hollar and 2006 Chevrolet Cobalt. | e has bad recep | m the product a | llegation dept at genera | | rthat I have rece | | |

| Created | Created By | Assigned To | Activity Type | Activity Sub-Ty | po Status | Completed | Description |
|-----------------------|------------|--------------|--|-----------------|-----------|-----------------------|---------------|
| 8/8/2008 12:05:51 PM | DRAHEICM | HOLLARAL | Notify CRM | | Done | 8/12/2008 11:43:42 AM | file assigned |
| Contact Last Name | | Contact Firs | Name | Account | | BAC Code | • |
| | | | 13 | | | | |
| Commenta | | | | | | | |
| | | | WO WE SHARM THE PROPERTY OF THE PARTY OF THE | | | | |
| Confidential Comments | | | | | | 35 at 15 | |

Report Generated for toporowm

on 8/19/2008

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Activities

| Greated 8/8/2008 12:05:46 PM Contact Last Name | Orosled By DRAHEICM | Assigned To HOLLARAL Geniael En | Activity Typo Research st Name | Activity Sub-Type Account | Status Cone | Gampleted 8/18/2008 02:34:31 PM BAC Code | Description research vin |
|--|------------------------|---|--------------------------------|---|-----------------------|--|--|
| Scanned VIN-no related Checked GMVIS-no rel | | | | | | | |
| Alyson Hollar/BRG/PAR/ Confidential Comments | | | | | | | |
| Greated 8/8/2008 12:95:34 PM Contact Last Name | Ozened By DRAHEICM | Assigned To HOLLARAL Conlact Fire | BRC PAR | Activity Sub-Type Case Assigned Account | Status In Progress | Completed BAC Code | Description: assigned to alyson hollar ext 21049 |
| Confidential Comments | | P | 777238077 | | | | |
| Greated 8/8/2008 10:22:03 AM Contact Lost Name | Created By DRAHEICM | Assigned To ARIASAD Contact Fire | SR Opened | Activity Sub-Type Account | Status Done | Completed 8/8/2008 10:22:03 AM BAC Code | Discription SR in Status of Closed has been Re- Opened by DRAHEICM |
| Confidential Comments | | | | | | | |
| Croated 8/8/2008 10:22:01 AM Contact Last Name | Created By DRAHEICM | Assigned To ARIASAD Contact Fire | SR Closed - Dissatisfied | Activity Sub-Typo Account | Status Done | Completed 8/8/2008 10:22:02 AM BAG Code | Description Service Request has been Closed Dissatisfied. |
| Comments Confidential Comments | | | | | 7; 7 *** | | |
| | | | | | | | |

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on 8/19/2008

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Activities

| | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Dascription |
|-------------------|------------|---------------|---------------|-------------------|--------|----------------------|---------------------------------|
| | | DRAHEICM | Escalation | Initiate PAR | Done | 8/8/2008 10:21:39 AM | Assigning activity to PAR QUEUE |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |

CRS advised that a person from the PAR Department will contact the customer within 2 business days

Received and assigned in PAR. Chad Drahelm/ATX/Workflow PAR Confidential Comments

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|----------------------|------------|---------------|-----------------------|-------------------|--------|----------------------|-------------|
| 8/7/2008 05:04:24 PM | ARIASAD | ARIASAD | Inbound Call Customer | Complex Request | Done | 8/7/2008 05:25:46 PM | Pre PAR |
| Centact Last Name | | Contact First | Name | Ассоил | | BAC Code | |

Cust sits that his wife was in a accedent and wanted to let GM know to see if they could come look at the vehicle becase he thinks it was due to manufacture defect

CRS advises to gather information to feward concern to the pre-part legal team who will contact you back to two bulsness days, CRS ask to obtain VIN, but cust sto that they no longer have the vehicle and he does not see the information

Cost sts ok thank you anytime is ok, we will be traviling but contact the daytime number and we will answer

Adrianaaris/atx/(1

Confidential Comments

UCC Information

| UCG Code | Symptom | Description |
|----------|-------------|--------------------|
| 1101 | Inoperative | Brakes - General |
| MO1 | Inoperative | Steering - General |
| * | • | |

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on 8/19/2008

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GM Vehicle Inquiry System Summary

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| STORES CONTRACTOR | Name and the second | | | | | | | | | | |
|--|--|---------|------------------|-----------------------------------|---------|-------------------------|----------------------|---------|---------------------|------------|----------------|
| VIN: | | 10 | IAI | .55F567: | | | | | | | |
| | | | | VEHIC | LE IN | FORMATI | ON | | | | |
| Merel Mode | handising 1 : | | IA! SE! | L69 -2006 COBALT 4-E DAN | DOOR | LT | Warranty | Start I | Date: | 01/27/2 | 007 |
| BARS | Order Tyl | pe: | 70 - | - RETAIL - STOCK | | | | | | | |
| Delivering Dealer: | | 152 | RRY KING CHEVROL | • | | Selling Sou | rce: | | 13 - CHEVROLET | | |
| | \$ | | | NNAPOLIS , NC 2808 4) 933-1104 | 83-023 | | Site Code : | | | 16065 | |
| | | | | | | | Business A Code : | ssocia | le | 227270 | |
| Serv | /ice Contra | st : | No | Branded Title: | No | Warran | y Block : | No | PDI Sta | itus : | Paid |
| | | | | REQUIR | ED FI | ELD ACTI | ONS | | | | |
| Туре | Number | -5 | | Desc | ription |) | | | Posted | Date | Status |
| RC | 06090 | ENGI | NE I | UEL INJECTORS - RE | PLAC | E | | | | N/A Closed | |
| | | | | SERVICE IN | FORM | IATIONAL | ITEMS | | • | | |
| Vehic | le Has No C | urrent | Rec | ord Of Outstanding Sei | rvice I | nformation | | | | | |
| | 44.5 | | C | N STAR AND XM SA | TELL | ITE RADIO |) INFORM | ATION | 4 | | |
| Vehle | le Has No A | ssociat | ed O | n Star or XM Radio In | forma | tion. | | | | | I |
| | | | | APPLICA | BLE | WARRANT | IES | | | | |
| | | D | seri | ption | | Effective Date | Effection Odomei | | End Date | · o | End dometer |
| | 000 BUMPE RANTY | R 70 B | UM | PER LIMITED | | 01/27/2007 | 136 ı | niles | 01/27/201 | 0 3 | 6136 miles |
| | 0000 SHEET OUGH LIMI | | | OVERAGE RUST ANTY | | 01/27/2007 | 136 1 | niles | 01/27/201 | 3 10 | 0136 miles |
| 96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM | | | | 01/27/2007 | 136 : | niles | 01/27/201 | 5 8 | 01 36 m iles | | |
| 36/360 | 000 FEDER/ | NL EMI | SSIC | N | | 01/27/2007 | 136 г | niles | 01/27/201 | 0 3 | 6136 miles |
| Seumonauannon. | es management and a second and a | | Olika-kitaraysa | | | *********************** | | | | | |

CLAIM HISTORY

136 miles 01/27/2012

60136 miles

60/60000 POWERTRAIN - U.S. LIMITED WARRANTY 01/27/2007

| R.O Date | RO Number | Туре | Labor Operation | Odometer Reading |
|------------|--------------|------|---|---------------------|
| 05/14/2007 | M33322 | # | Z2083 - ROADSIDE SERVICE (BATTERY/JUMP START) | 4000 miles |
| 05/07/2007 | 068400 | Ħ | V1553 - 06090 - INJECTOR, FUEL - REPLACE ALL | 4014 miles |
| 03/20/2007 | 067432 | Ħ | C2750 - FRONT FLOOR CONSOLE ARMREST REPLACEMENT | 1932 miles |
| 11/11/2005 | A22563 |] | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | 0 miles |

CHECK HISTORY INFORMATION

| Vehicle Has No Associated Check History Information. | |
|--|--|
| , | |

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GM Vehicle Inquiry System Claim History

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

<u>Help</u>

| | | | | | ZIH. | • | | | | | | |
|-----------------|--------------|---------|---------|--|----------|--------------------------|----------------------------------|--------------|---------------|----------------|--|------------|
| VIN: | | | 1G1 | AL55F567 | | | | | - Mindelplace | | | |
| | | | | CLAIM | HI | STORY | | | | | | |
| Repair Ord | ler Date | : 05 | /14/200 | Repair Order Number : | | M33322 | Odom | eter R | ead | ing: | | 4000 miles |
| Serviced By: | ONE C | ABOT | RD | ISTANCE/CCAS | - | elling Sou | MARK IN COLUMN TO SERVICE STREET | | | - | HEVROL | ET |
| | MEDF | ORD, N | (A 021: | 55-5117 | - | ite Code : Iusiness A | | : Code | • | 34415 20745 | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Pa | ırt | Auti Code | | Person Code | Line Total | Comments |
| 05/25/2007 | 798 | Ol | # | Z2083 - ROADSIDE SERVICE (BATTERY/JUMP START) | | N/A | | С | | N/A | \$ 42.75 | N |
| Repair Ord | ler Date | : 05 | /07/200 | Repair Order Number : | |)68400 | Odom | eter Ro | ad | ing: | | 4014 miles |
| Serviced By: | | | CHEV | ROLET,LLC | s | elling Sou | irce : | | | 13 - C | HEVROL | ET |
| by . | KANN | APOLIS | S, NC 2 | 8083-6251 | S | ite Code : | | | (absence) | 16065 | ; | |
| | (704) 93 |)3-11U4 | • | | B | usiness A | ssociate | Code: | | 22727 | 0 | |
| Cycle Date | Cycle Nbr | Case | Type | Labor Operation | | Par | * | Auth Code | | erson Code | Line Total | Comments |
| 05/11/2007 | 794 | 01 | #- | V1553 - 06090 - INJECTOR, FUEL - REPLACE ALL | | 89060563 INJECTO | | N/A | | N/A | \$ 140.01 | N |
| Repair Ord | er Date | : 03/ | 20/2007 | Repair Order Number : | To | 67432 | Odom | eter Re | adi | ing: | lacoversia crimin net sono crico carriving mino co | 1932 miles |
| | | | | ROLET, LLC | S | elling Sou | rce: | | | 13 - C | HEVROL | EII. |
| | | POLIS | , NC 2 | D 8083-6251 | Si | ite Code : | | | | 16065 | | |
| | (704) 93 | 3-1104 | | | B | usiness As | ssociate | Code: | | 22727 | 0 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Par | 1 | Auth Code | | erson Code | Line Total | Comments |
| | | | | | Ţ | | | | | | | |

| 03/30/2007 | 782 | 01 | # | C2750 - FRONT FLOOR CONSOLE ARMREST REPLACEMENT | 15283914 ARMRE | | N/A | N/A | S 154.20 | N |
|-----------------|-------------------|--------|----------|---|----------------------------|---|--------------|----------------|---------------|----------|
| Repair Ord | ier Date | : 114 | /11/2005 | Repair Order Number : | A22563 | Odom | eter Re | ading: | | 0 miles |
| Serviced By: | PO BOX | K 1250 | | _ | Selling Sou Site Code : | | | 13 - C | HEVROL | er |
| | NEWT((828) 46 | | | - 1 20 7 7 | one Code : Business A | on and a second | Code: | 11403 | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Pa | rt | Auth Code | Person Code | Line Total | Comments |
| 11/15/2005 | 639 | OI | | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | NA | | N/A | N/A | \$ 76.57 | N |

CHECK HISTORY

| 8 | | 껯 |
|---------|--|---|
| Bestere | Vehicle Has No Associated Check History. | 2 |
| | | ĕ |

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GM Vehicle Inquiry System Vehicle Build

Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title

Help

| VIN | IGIAL55F567 |
|-----|-------------|
| | |

VEHICLE BUILD

| Merchandising Model: | 1AL69 -2006 COBALT 4-DO | OR LT SEDAN | |
|------------------------------|-------------------------|----------------|--------|
| Gross Vehicle Weight Rating: | 1722 kg (3797 lb) | Order Number : | JQCJVR |
| Build Date : | 11/11/2005 | Build Plant : | 167A |

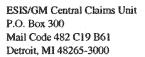
GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

| 4 | |
|--|---|
| AK5 - DRIVER & RIGHT FRONT PASSENGER AIR BAGS | AR9 - DELUXE FRONT BUCKET SEAT |
| B34 - FLOOR MATS | B35 - REAR FLOOR MATS |
| C67 - ELECT. FRONT AIR CONDITIONER | DG7 - BODY COLOR POWER MIRRORS |
| FEI - SUSPENSION SYSTEM-SOFT RIDE | FE9 - FEDERAL EMISSIONS |
| FY1 - TRANS/AXLE 3.63 RATIO | IPC - INTERIOR TRIM DESIGN |
| JM4 - 4-WHEEL ANTI-LOCK BRAKE SYSTEM | K64 - 115 AMP GENERATOR |
| LOD - ASSEMBLY PLANT - LORDSTOWN,OHIO | L61 - 2.2L DOHC 4 CYL ENGINE |
| MN5 - 4 SPEED AUTO TRANSMISSION | MX0 - 4-SPD. AUTO. TRANS. W/OVERDRIVE |
| NT7 - FEDERAL EMISSION TIER 2 | NW7 - TRACTION CONTROL |
| N46 - 4 SPOKE STEERING WHEEL | PF7 - 15" ALUMINUM WHEELS |
| QTU - P195/60R15 TOURING BW TIRES | R6P - PREMIUM PAINT |
| SLM - STOCK ORDERS | T43 - REAR DECK-LID SPOILER |
| UN0 - AM/FM STEREO W/CD & RDS | UQ4 - BASE SPEAKER SYSTEM |
| VK3 - FRONT LICENSE PLATE MOUNT | V73 - STATEMENT OF VEHICLE CERT U.S. /CANADA |
| ILT - ILT BASE PACKAGE | ISZ - OPTION PACKAGE DISCOUNT |
| 14C - GRAY | 14I - GRAY |
| 6AR - FRONT SPRING | 7AR - FRONT SPRING |
| 8AA - REAR SPRING | 9AA - REAR SPRING |

95U - ULTRA SILVER METALLIC

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800.888.0164 tel 313.665.0911 fax



September 3, 2008



RE:

Date of Event: August 4, 2008

File Number:

Client:

General Motors Corporation



ESIS provides claims handling services to General Motors involving product liability claims. I am the Claims Administrator assigned to handle this file. Please direct all future correspondence to my attention.

This letter is a follow up to our conversation of August 26, 2008 in which you alleged that the steering and brakes on your 2006 Chevrolet Cobalt failed causing you to become involved an accident. In order to substantiate the claim being made, I need the following information:

- 1. All medical bills concerning the injuries sustained in the above accident. A consent to develop medical information is enclosed to assist this office in obtaining these records;
- 2. Documentation to substantiate the type and amount of damages being claimed (i.e., medical bills and any out of pocket expenses)

Marvin Burts of Collision Consultants has been assigned to assist me in the investigation of this claim. He will contact you to schedule an appointment to interview you.

Once I have received the requested information, I will be in a better position to consider your claim.

If you have any additional questions or concerns, please give me a call. I can be reached at 800.888.0164, between 8:00 a.m. to 4:00 p.m., Eastern Time.

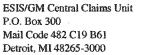
Sincerely,

Tiffini Hails

Enclosure

| DMV:349 (Rev. 32596) THIS REPORT IS FOR THE USE OF THE DIVISION OF MOTOR VEHICLES. THE DATA IS COLLECTED FOR STATISTICAL ANALYSIS AND SUBSECUENT HIGHWAY SAFETY PROGRAMMING. DETERMINATIONS OF FAULT ARE THE RESPONSIBILITY OF INSURERS OR OF THE STATE'S COURTS. |
|--|
| 1020,0200 |
| One Constitution Local UsePotrol Area |
| 2 08/04/2008 MECKLENBURG 07:39 20080804073903/14 08/21/2008 |
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| UNIT # 1 KI VEHICLE PEDESTRIAN HIT & RUN COMMERCIAL CONTROL VEHICLE PEDESTRIAN HIT & RUN COTHER |
| Driver |
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| Serie Abbress on Direct's Phone H 1 |
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| Service Other? |
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| City CHARLOTTE State NC Zig City City State Zip |
| Plate # Plate MC Pole 2009 Plate # Plate # Plate # Plate # Plate # Plate |
| MN 1G1AL55F567 |
| Vehicle CHEV Vehicle 2006 4: Vehicle 1 17 Vehicle CHEV Vehicle 41 Vehicle 42 Vehicle 42 Vehicle 43 Vehicle 44 Vehicle 45 Vehicle 45 Vehicle 46 Vehicle 47 Vehicle 47 Vehicle 48 Vehicle 48 Vehicle 48 Vehicle 48 Vehicle 48 Vehicle 49 |
| Mark Year Style (1904) Drivable Li No Make Year Style (1904) Drivable |
| A TAD Demage Demage Demage |
| Country Company |
| Policy 8 |
| 20 COMMERCIAL VEHRILE: Cargo, Carrier Memo, Address, Source Source: Carrier Members, GAVAR, Ardes 45 Care Bour Type Source as Caper? Aries on Vehicle |
| L. Janob US DOTF Solding Toring |
| Signay State State FT/49 |
| Choss Veltation PERS PROFIT PROFIT WARRY Reforms |
| 21 22 75 24 25 26 27 38 29 30 31 32 Names and Addresses for All Persons (Unit TAINS 2 Drv., Ped., atc See Above): Use check blocks if address series as Differ |
| A 1 1 1 1 BOILON: Fedisc W F 2 2 4 2 1 3 500 VIM TOWN TOWN TOWN TOWN OF CAMBELLS WRECKER SERVICE |
| B Unit Car, Post ar. Los state Texas Total; |
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| G |
| H L |
| |
| 46 Name of EMS 46 Name of EMS |
| 47 Injured Tables 47 Injured Tables 49 Injured Tables 49 EMS to (Textment Feelby and City or Town) 49 EMS to (Textment Feelby and City or Town) 49 OF Art Tables 40 OF Art Table |

| PORTSOCIUTAL Head 22 | | VEHICLE PAPO. | ven a 1 | Vesta | ROADWAY INFO. | | WORK ZONE RELATED | | | |
|--|--|---|--|--|--|--|--|--|---|---|
| CONTACT | | SD Authorized Speed Limit | 45 | 45314 June | 69 Road Feature | 0 | 26 Viorizone Area | 5 | | |
| CRASH SEQUENCE (Unit Loval) | wa 1 | Uras | 61 Folimate of Original Traveling Speed | 45 | Careta Service or Anna Grandes | 70 Road Character | i | 79 Work Activity | | |
| planter or any of equipped contractive process rates an electrophysical design of the experience of th | 4 | 1000 | 62 Estimate of Speed at Smyasi | 45 | march and service and a servic | 1: Read Classification | 5 | 80 Work Area Marked 81 Cresh Location | | |
| FORDA CORRES CORRES ON | | | as Tire Impressions Sciore Impact (IL) | 0 | | 72 Raze Surfaça Type | 3 | e, Gentram | | |
| g) Nan-Aolodai Action | <u> </u> | | es Distance Traveled Afre: Impact (fi.) | 34 | | 73 Road Configuration | 3 | TRAILER INFO. | 1000 1 | Uriti |
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800.888.0164 tel 313.665.0911 fax



October 1, 2008

Tiffini HailsClaims Administrator

Mr. David Fuller GMAC INSURANCE P.O. Box 1623 West Salem, NC 27102

RE:

Claimant:

Our File No.:

Your File No:

A CUIT INC

Our Client:

General Motors Corporation

Date/Event:

August 4, 2008

8556605

VIN:

1G1AL55F567

Dear Mr. Fuller:

Please find enclosed a copy of the air bag data retrieved from the above vehicle. This copy is for your records.

We are still in the process of evaluating the claim and will contact you once it has been completed.

Sincerely,

Tiffini Hails

Enclosure





CDR File Information

| Vehicle Identification Number | 1G1AL55F567 |
|-------------------------------|--|
| Investigator | Marvin Burts |
| Case Number | 658844 |
| Investigation Date | Friday, September 19 2008 |
| Crash Date | Monday, August 4 2008 |
| Filename | 1G1AL55F567 |
| Saved on | Friday, September 19 2008 at 09:15:52 AM |
| Collected with CDR version | Crash Data Retrieval Tool 3.09 |
| Reported with CDR version | Crash Data Retrieval Tool 3.09 |
| EDR Device Type | airbag control module |
| Event(s) recovered | Deployment |

Data Limitations

SDM Recorded Crash Events:

There are two types of SDM recorded crash events. The first is the Non-Deployment Event. A Non-Deployment Event is an event severe enough to "wake up" the sensing algorithm but not severe enough to deploy the air bag(s). It can contain Pre-Crash and Crash data. The SDM can store up to one Non-Deployment Event. This event can be overwritten by an event that has a greater SDM recorded vehicle forward velocity change. This event will be cleared by the SDM after the ignition has been cycled 250 times.

The second type of SDM recorded crash event is the Deployment Event. It also can contain Pre-Crash and Crash data. The SDM can store up to two different Deployment Events, if they occur within five seconds of one another. Deployment Events cannot be overwritten or cleared from the SDM. Once the SDM has deployed the air bag, the SDM must be replaced. The data in the Non-Deployment Event file will be locked after a Deployment Event, if the Non-Deployment Event occurred within 5 seconds before the Deployment Event unless a Deployment Level Event occurs within 5 seconds after the Deployment Event will overwrite the Non-Deployment Event file.

SDM Data Limitations:

-SDM Recorded Vehicle Forward Velocity Change reflects the change in forward velocity that the sensing system experienced during the recorded portion of the event. SDM Recorded Vehicle Forward Velocity Change is the change in velocity during the recording time and is not the speed the vehicle was traveling before the event, and is also not the Barrier Equivalent Velocity. This data should be examined in conjunction with other available physical evidence from the vehicle and scene when assessing occupant or vehicle forward velocity change. For Deployment Events and Deployment Level Events, the SDM will record 220 milliseconds of data after deployment criteria is met. For Non-Deployment Events, the SDM will record up to the first 300 milliseconds of data after algorithm enable. The minimum SDM Recorded Vehicle Forward Velocity Change, that is needed to record a Non-Deployment Event, is 5 MPH.

-Maximum Recorded Vehicle Velocity Change is the maximum recorded velocity change in the vehicle's combined "X" and "Y" axis. It is calculated every ten ms by taking the square of the "X" axis value and adding it to the square of the "Y" axis value and then taking the square root of the sum. The greatest calculated value is the one that is stored.

-Event Recording Complete will indicate if data from the recorded event has been fully written to the SDM memory or if it has been interrupted and not fully written.

-SDM Recorded Vehicle Speed accuracy can be affected if the vehicle has had the tire size or the final drive axle ratio changed from the factory build specifications.

-Brake Switch Circuit Status indicates the status of the brake switch circuit.

-Pre-Crash Electronic Data Validity Check Status indicates "Data Invalid" if the SDM receive an invalid message from the module sending the pre-crash data.

-Driver's and Passenger's Belt Switch Circuit Status indicates the status of the seat belt switch circuit. The Passenger Belt Switch Circuit Status for 2005 vehicles is only available on the Cadillac STS. Also, the Passenger Belt Switch Circuit Status for 2006 Chevrolet Cobalt Sport Coupe (AP) model vehicles, with the option package that includes Recaro brand seats (RPO ALV), will always report a default value of "Buckled".

-The Time Between Non-Deployment and Deployment Events is displayed in seconds. If the time between the two events is greater than 5 seconds, "N/A" is displayed in place of the time. If the value is negative, then the Deployment Event occurred first.

-If power to the SDM is lost during a crash event, all or part of the crash record may not be recorded.

-The ignition cycle counter relies upon the transitions through OFF->RUN->CRANK power-moding messages, on the GMLAN communication bus, to increment the counter. Applying and removing of battery power to the module will not increment the ignition counter.

-Steering Wheel Angle data is displayed as a positive value, when the steering wheel is turned to the right, and a negative value, when the steering wheel is turned to the left. For Cadillac STS models with Stabillatrac 3 systems, the Steering Wheel Angle data will be displayed just the opposite. When the steering wheel is turned to the right, a negative value will be displayed and when the steering wheel is turned to the left, a positive value will be displayed.

SDM Data Source:

All SDM recorded data is measured, calculated, and stored internally, except for the following:

1G1AL55F567

Page 1 of 11

Printed on: Saturday, September 20 2008 at 09:15:44 PM





-Vehicle Status Data (Pre-Crash) is transmitted to the SDM, by various vehicle control modules, via the vehicle's communication network.

-The Belt Switch Circuit is wired directly to the SDM.





Multiple Event Data

| Associated Events Not Recorded | 0 |
|---|----|
| An Event(s) Preceded the Recorded Event(s) | No |
| An Event(s) was in Between the Recorded Event(s) | No |
| An Event(s) Followed the Recorded Event(s) | No |
| The Event(s) Not Recorded was a Deployment Event(s) | No |
| The Event(s) Not Recorded was a Non-Deployment Event(s) | No |

System Status At AE

| wy y we will a warm to a warm | |
|--|-------------------|
| Vehicle Identification Number | **1AL55F*6*722563 |
| Low Tire Pressure Warning Lamp (If Equipped) | OFF |
| Vehicle Power Mode Status | Run |
| Remote Start Status (If Equipped) | Inactive |
| Run/Crank Ignition Switch Logic Level | Active |
| Brake System Warning Lamp (If Equipped) | OFF |

System Status At 1 second

| a govern wearene i in i opposite | |
|---|-------------|
| Transmission Range (If Equipped) | Fourth Gear |
| Transmission Selector Position (If Equipped) | Fourth Gear |
| Traction Control System Active (If Equipped) | No |
| Service Engine Soon (Non-Emission Related) Lamp | OFF |
| Service Vehicle Soon Lamp | OFF |
| Outside Air Temperature (degrees F) (If Equipped) | 75 |
| Left Front Door Status (If Equipped) | Closed |
| Right Front Door Status (If Equipped) | Closed |
| Left Rear Door Status (If Equipped) | Unused |
| Right Rear Door Status (If Equipped) | Unused |
| Rear Door(s) Status (If Equipped) | Closed |

Pre-crash data

| Parameter | -2 sec | -1 sec |
|--|--------|--------|
| Reduced Engine Power Mode | OFF | OFF |
| Cruise Control Active (If Equipped) | No | No |
| Cruise Control Resume Switch Active (If Equipped) | No | No |
| Cruise Control Set Switch Active (If Equipped) | No | No |

Pre-crash data

| Parameter | -5 sec | -4 sec | -3 sec | -2 sec | -1 sec |
|--|---------|---------|---------|---------|---------|
| Vehicle Speed (MPH) | 63 | 62 | 60 | 57 | 48 |
| Engine Speed (RPM) | 2176 | 2112 | 2048 | 2048 | 1536 |
| Percent Throttle | 17 | 16 | 16 | 19 | 18 |
| Accelerator Pedal Position (percent) | 0 | 0 | 0 | 0 | 0 |
| Antilock Brake System Active (If Equipped) | No | No | No | No | No |
| Lateral Acceleration (feet/s²)(If Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |
| Yaw Rate (degrees per second) (if Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |
| Steering Wheel Angle (degrees) (If Equipped) | 0 | 0 | 0 | 0 | 0 |

1G1AL55F567

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| Parameter | -5 sec | -4 sec | -3 sec | -2 sec | -1 sec |
|---|---------|---------|---------|---------|---------|
| Vehicle Dynamics Control Active (If Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |



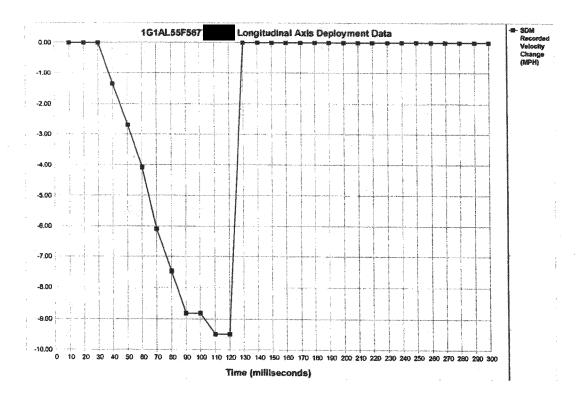


System Status At Deployment

| Ignition Cycles At Investigation | |
|--|---------------------|
| | 2505 |
| SIR Warning Lamp Status | OFF |
| SIR Warning Lamp ON/OFF Time (seconds) | 655200 |
| Number of Ignition Cycles SIR Warning Lamp was ON/OFF Continuously | 2497 |
| Ignition Cycles At Event | 2502 |
| Ignition Cycles Since DTCs Were Last Cleared | 254 |
| Driver's Belt Switch Circuit Status | BUCKLED |
| Passenger's Belt Switch Circuit Status | UNBUCKLED |
| Diagnostic Trouble Codes at Event, fault number: 1 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 2 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 3 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 4 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 5 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 6 | N/A |
| Automatic Passenger SIR Suppression System Validity Status at AE | |
| · · | Valid |
| Automatic Passenger SIR Suppression System Status at AE | Air Bag |
| Automatic Passenger SIR Suppression System Validity Status at First Deployment Command | Suppressed Valid |
| | Air Bag |
| Automatic Passenger SIR Suppression System Status at First Deployment Command | Suppressed |
| Driver 1st Stage Time From Algorithm Enable to Deployment Command Criteria Met (msec) | 42 |
| Driver 2nd Stage Time From Algorithm Enable to Deployment Command Criteria Met (msec) | 58 |
| Passenger 1st Stage Time From Algorithm Enable to Deployment Command Criteria Met (msec) | Suppressed |
| Passenger 2nd Stage Time From Algorithm Enable to Deployment Command Criteria Met (msec) | Suppressed |
| Time Between Events (sec) | 0 |
| Driver First Stage Deployment Loop Commanded | Yes |
| Driver Second Stage Deployment Loop Commanded | Yes |
| Driver Side Deployment Loop Commanded | No |
| Driver Pretensioner Deployment Loop Commanded | Yes |
| Driver (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No |
| Driver (Initiator 2) Roof Rail/Head Curtain Loop Commanded | No |
| Driver Knee Deployment Loop Commanded | No |
| Passenger First Stage Deployment Loop Commanded | No |
| Passenger Second Stage Deployment Loop Commanded | No |
| Passenger Side Deployment Loop Commanded | No |
| Passenger Pretensioner Deployment Loop Commanded | Yes |
| Passenger (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No |
| Passenger (Initiator 2) Roof Rail/Head Curtain Loop Commanded | No |
| Passenger Knee Deployment Loop Commanded | No. |
| Second Row Left Side Deployment Loop Commanded | No. |
| Second Row Left Pretensioner Deployment Loop Commanded | No |
| Third Row Left Roof Rail/Head Curtain Loop Commanded | |
| Second Row Right Side Deployment Loop Commanded | No. |
| Second Row Right Pretensioner Deployment Loop Commanded | No. |
| Third Row Right Roof Rail/Head Curtain Loop Commanded | No. |
| Second Row Center Pretensioner Deployment Loop Commanded | No. |
| Driver 2nd Stage Deployment Loop Commanded for Disposal | No. |
| Passenger 2nd Stage Deployment Loop Commanded for Disposal | <u>No</u> |
| Crash Record Locked | <u>No</u> |
| Vehicle Event Data (Pre-Crash) Associated With This Event | Yes_ |
| Deployment Event Recorded in the Non-Deployment Record | Yes_ |
| Event Recording Complete | <u>No</u> |
| Facultifocologist Combiete | Yes_ |



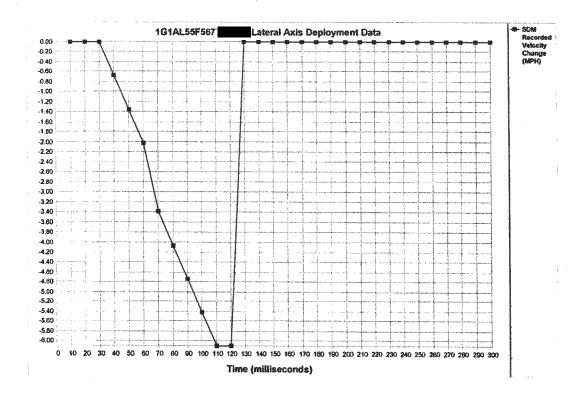




| Time (milliseconds) | 10 | 20 | 30 | 40 | 50 | 60 | 70 | 80 | 90 | 100 | 110 | 120 | 130 | 140 | 150 |
|--|------|------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|------|------|
| Longitudinal Axis Recorded Velocity | 0.00 | 0.00 | 0.00 | -1.36 | -2.71 | -4.07 | -6.10 | -7.46 | -8.81 | -8,81 | -9.49 | -9.49 | 0.00 | 0.00 | 0.00 |
| Time (milliseconds) | 160 | 170 | 180 | 190 | 200 | 210 | 220 | 230 | 240 | 250 | 260 | 270 | 280 | 290 | 300 |
| Longitudinal Axis Recorded Velocity | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0,00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |







| Time (milliseconds) | 10 | 20 | 30 | 40 | 60 | 60 | 70 | 80 | 90 | 100 | 110 | 120 | 130 | 140 | 150 |
|--|------|------|------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|------|------|
| Lateral Axis Recorded Velocity Change (MPH) | 0.00 | 0.00 | 0.00 | -0.68 | -1.38 | -2.03 | -3.39 | -4.07 | -4.74 | -5.42 | -6.10 | -6.10 | 0.00 | 0.00 | 0.00 |
| Time (milliseconds) | 160 | 170 | 180 | 190 | 200 | 210 | 220 | 230 | 240 | 250 | 260 | 270 | 280 | 290 | 300 |
| Lateral Axis Recorded Velocity Change (MPH) | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |





Hexadecimal Data

All of the data that the vehicle manufacturer has requested to be retrieved is shown in the hexadecimal data section of the CDR report. It may contain data that is not converted by the CDR program.

BOSCH



```
$43 FF FF FF 00 00 00 00
$44 PF FF FF PF FF 00
$45
    FF FF FF FF FF 00
    FP FF FF FF FF 00
$46
$47
    PF FF FF FF FF 00
$48
    FF FF FF FF FF
                     00
    FF FF FF FF FF 00
$49
$4A
    FF FF FF FF FF 00
$4B
    FF FF FF FF FF 00
    FF FF FF FF FF 00
$4C
S4D
    FF FF FF FF FF 00
$4E
    FF FF FF FF FF 00
    FF FF FF FF FF 00
$4F
$50
    FF FF FF FF FF 00
$51
    FO OO OO FO OO OO OO
$52
    81 FF FF FF 00 00 00
$53
    FF FF FF 00 00 00 00
$54
    82 FF FF 00 00 00 00
$55
    FF FF FF FF FF 00
$67
    A0 A5 00 00 00 00 00
$68
    DO 10 00 00 00 00 00
$69
    00 FF F0 09 C1 00 00
$6A
    FE 09 C6 00 00 00 00
$6B
    00 00 00 00 00 00 00
$6C
    00 00 00 00 00 00 00
    00 00 00 00 00 00 00
$6D
$6E
    00 00 00 00 00 00 00
$6F
    FF FE FE FC FD FA 00
$70
    FB F7 FA F5 F9 F3 00
$71
    F8 F3 F7 F2 F7 F2 00
$72
    00 00 00 00 00 00 00
$73
    00 00 00 00 00 00 00
$74
    00 00 00 00 00 00 00
$75
    00 00 00 00 00 00 00
$76
    00 00 00 00 00 00
$77
    00 00 00 00 00 00
$78
    DO 00 00 00 00 00 00
$79
    00 00 00 00 00 00 00
$7A
    00 00 00 00 00 00 00
$7B
    15 1D 00 00 00 00 00
$01 41 55 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$02 01 02 03 04
    41 54 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$03
$04
    01 02 03 04
$05
    $06
    PP FF PF FF
$07
    42 54 PF FF FF FP FF FF FF FF FF FF FF FF
$08
    FF FF FF FF
$0D
    41 48 32 39 35 31 52 35 32 33 30 33 33 30 39 45
SOE
    01 5A 4B 31
SOF
     41 4A 01 02 03 04 52 45 41 32 30 32 33 30 30 30
$10
    01 02 03 04
$13
    42 52 30 31 33 34 56 31 05 32 39 37 43 4A 44 31
$14
    01 5A 74 02
$17
    FF FF FF FF
$18
$21
    33 19 2A B4 E6 87 91 9A
$22
    90 11
$23
    31 41 PA PA FA FA FA
$24
    31 41 FA FA FA FA FA
$25
    32 41 FA FA FA FA FA
$26
    32 41 FA FA FA FA FA
$40
    00 00
$41
    3F 00 00 02 00 1A
    FO C4
$42
$43
    00 00 8E 80
```





```
$44 C6 00 00 FC C0 C0
$45 07 01 07 01 05 01
$46 FF 1A 1A 64 64
$47 OA 64 06 04 04 05 OA 06 04 OA 00 00 FA 00 00 FF 04 64
$48 18 08 08
$B0
    58
    FD FE 00
$B1
   FF FF FF FF
$B2
$B4
    41 53 39 30 31 31 32 31 33 35 59 47 20 20 20 20
$B7 50 AA 04 0F 03
$B8 41 57 68 09 19
$C1 30 46 30 33
    30 46 30 33
$CA
$CB 01 5A D1 33
$CC
    01 5A D1 33
$D1
    00 00
$DB 00 00
$DC 00 00
```





Comments

Download at Copart, China Grove, North Carolina. DLC used. Vehicle battery. Odometer: 018,217. SIR lamp: "on".

Main ph. # for CMC 704-863-6000

Orthopedic Dr — Matthew D. DHL

CMC

Carolina Medical Center University

Po Box 96072 Charlotte, NC 28296-0072

Moy-323-2178 ask for Triage Nuise

to get to Dr.

ER-ATTENDING DR — Jerry Bowman MO4-863-5600 Same address as above



Carolinas Medical Center - University - Emergency Department 8800 North Tryon Street Charlotte, NC 28262 (704) 863-5600

- Ativan
- Haldol

Call your doctor if you have:

- · any sign of allergy.
- · any sign of dependence.
- · any new or severe symptoms.

Please bring all medicines or a medication list with your discharge instructions to your follow up appointment(s). Any specific changes in your medications as a result of your emergency department visit today are included in your discharge instructions and reviewed with you prior to discharge. Any specific questions regarding your chronic medications and dosages should be discussed with your physician(s) and pharmacist.

YOU ARE THE MOST IMPORTANT FACTOR IN YOUR RECOVERY.

Follow the above instructions carefully. Take your medicines as prescribed. Most important, see a doctor again as discussed. If you have problems that we have not discussed, call or visit your doctor right away. If you cannot reach your doctor, return to the Emergency Department.

You may have been given a medicine or prescribed a medicine that may make you drowsy or sleepy. Do not drink alcohol with this medicine. Do not perform activities that require alertness or coordination such as driving, operating toots or machinery. Do not make important decisions while taking this medication.

"I have received this information and my questions have been answered. I have discussed any challenges I see with this plan with the nurse or physician."

or Responsible Pelson

VIRGINIA MCKINNEY or Responsible Person has received this information and tells me that all questions have been answered.

RN Staff Signature

Date and Time of Discharge:

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Carolinas Medical Center - University - Emergency Department 8800 North Tryon Street Charlotte, NC 28262 (704) 863-5600

Patient:

Acct#

Unit #

Date: 08/04/2008 Time: 13:45

Discharge Instructions

IMPORTANT: We examined and treated you today on an emergency basis only. This was not a substitute for, or an effort to provide, complete medical care. In most cases, you must let your doctor check you again. Tell your doctor about any new or lasting problems. We cannot recognize and treat all injuries or illnesses in one Emergency Department visit. If you had special tests, such as EKG's or X-rays, we will review them again within 24 hours. We will call you if there are any new suggestions. After you leave, you should follow the Instructions below. IF YOU GET WORSE AND CANNOT IMMEDIATELY CONTACT YOUR DOCTOR OR IF YOU DO NOT HAVE A DOCTOR, PLEASE RETURN TO THE EMERGENCY DEPARTMENT AT ONCE!

You were treated today by Bowman MD

THIS INFORMATION IS ABOUT YOUR FOLLOW UP CARE

Call as soon as possible to make an appointment in 2 days at the Metrolina Neurology Associates. You can reach the Metrolina Neurology Associates at (704) 542-6698, 10620 Park Road, Charlotte, NC, 28210. If you have any problems or concerns before the appointment, call the Clinic.

Call as soon as possible to make an appointment to see your doctor in 2 days. You can reach your doctor by calling their clinic phone number.

Call as soon as possible to make an appointment in 2 days at the OrthoCaroline University. You can reach the OrthoCarolina University at (704) 323-2100, 101 W. T. Harris Blvd Ste 1110, Charlotte, NC, 28262. If you have any problems or concerns before the appointment, call the Clinic.

SPECIAL INFORMATION

Follow up with a neurologist as directed for a MRI. DO NOT DRIVE UNTIL COMPLETED.

THIS INFORMATION IS ABOUT YOUR DIAGNOSIS

FRACTURE (Broken or cracked bone)

You have a broken forearm. Broken bones heal best when the pieces are put back together in their normal position. They should be held still for a number of weeks. The length of time depends on which bone is broken and how well your particular bones heal. Your doctor will tell you how long you will need a cast or splint. It is important to follow your doctor's treatment and therapy instructions, as broken bones can cause chronic pain or incomplete healing without proper care. Research has shown that smoking slows fracture healing.

For the first few days after a serious injury, it is important to keep the swelling down. This is especially important if you have a cast. If there is much swelling in a cast, the part inside could get pinched.

Follow these instructions:

- Keep the swelling down:
 - Keep your injury above the level of your heart when resting, if gossible.

- Apply ice packs 4 times a day for 20 minutes each time. Place a cloth between your skin and the ice pack. This prevents troatbite.
- · Keep your injury wrapped when it is not elevated.
- Pinch the area above and below your fracture (splint or cast). Check for numbness and tingling. Do this 3 times a day.
- Eat foods that ere nutritious and high in protein and fiber. Foods high in protein include meat, fish, poultry, beans, chaese, milk, eggs, and tofu.

Call your doctor if you have:

- swelling, pain, numbness, tingling, coolness or color change beyond the cast or wrap.
- · Increased pain.
- any new or severe symptoms.

This is Information About Your New Medications - Start taking as prescribed.

TRAMADOL (Ultram).

Take this medicine in the following dose: 1 tablet by mouth every 6 hours as needed for pain if needed for pain.

This medicine is a pain reliever. Tramadol is an opioid pain reliever. Side effects may include: sleepiness, dizziness, upset stomach, dry mouth, sweating or constipation. Altergy would show up as: rash or itching, wheezing or shortness of breath. This medicine can be habit forming if used for a long period of time.

Follow these instructions:

- Drink plenty of liquids. Try to drink 8 to 10 glasses of water or juice each day.
- Tell your doctor right away if you are or become pregnant.
- Sit or stand up slowly when getting up from a lying position.
- Tell any other doctor or dentist that treats you that you are taking this
 medicine.
- · Use sugarless candy or gum to relieve your dry mouth.
- · Store this medicine away from heat, moisture or direct light.
- Watch for signs of dependence:
 - · feeling that you "cannot live without this medicine".
 - you need more of this medicine than before to get the same relief.
- Do not drink alcohol while you are taking this medicine. This can cause problems with your liver.
- Make sure you know how this medicine affects you before driving or operating machinery. This medicine can cause sleepiness and dizziness.

Talk with your doctor before taking any other medicines (including herbals) as you may require additional monitoring especially:

- blood thinners such as Cournadin (warfarin)
- · opioid pain relievers (codelne, morphine)
- Thorazine
- Prolixin
- tricyclic antidepressants such as amitriptyline (Elavil), doxepin (Singguen)
- SSRI antidepressants such as citalogram (Celexa), sertraline (Zoloft), fluvoxamine (Luvox), fluoxetine (Prozac)
- MAO inhibitors such as turezolidone (Furoxone), pargyline (Eutonyl), phenelzine (Nardil), procarbazine (Matulane), tranyloypormine (Pamate), isocarboxazid (Marplan)
- · carbamazepine (Tegretol)
- Valium
- Xanax

Radiology

Exam: CT Head Scan w/o Contrast Result Status: Auth (Verified)

Performed Date: 8/4/2008 11:10:00 AM EDT

7078

Accession # 13640941

Clinical Information: 3T MVC R CHEST AND HEAD PAIN ;er 29

Requesting Provider: JERRY BOWMAN

DATE OF SERVICE: 8/4/2008 11:22:00 AM

EXAM: CT brain without contrast

The pituitary gland may be enlarged. A pituitary macroadenoma cannot be excluded. MR would better evaluate.

The ventricles are normal in size midline. No areas of abnormal density seen in the brain. No extra cerebral collections.

Impression: Possible pituitary macroadenoma. MRI would better evaluate. No other brain abnormalities seen.

Report ID: 80046

D: 8/4/2008 11:25:36 AM SC: 141 Dictated by: John Howard, MD

Verified By: JOHN HOWARD M.D. Date: 08/04/2008 Time: 11:30

Admit Date: 8/4/2008 Disch Date: 8/4/2008 Admitting Dr: UNIVERSITY PHYSICIAN PEMA, MD

Attending Dr. JERRY L BOWMAN, MD

Pt Name:

MRN#: 0003003951 Acct#:

DOB: 5/23/1942 Age: 66 years

Location: UEMJ

Page 1 of 2

Reclicion

Exam: DX Chest PA & Lat Result Status: Auth (Verified) Performed Date: 8/4/2008 11:10:00 AM EDT

7263

Accession # 13640940

Clinical Information:

3T MVC R CHEST AND HEAD PAIN

;er 29

Requesting Provider: JERRY BOWMAN

EXAMINATION:

CHEST TWO VIEWS

DATE OF SERVICE: 08/04/2008

HISTORY: MVC.

Cardine silhouette is maintained. Prominence of the right hilum incidentally noted and may be attributable to slight rotation. One cannot exclude adenopathy as fullness in the right hilum. Diaphragms well defined without blunting of the costophrenic margins. Pulmonary vascularity is within normal limits. The lung fields show no evidence of a pneumothorax or discrete rib fracture.

Thoracic vertebrae align normally with degenerative disease but no compressive fracture seen.

CONCLUSION:

- I. Slight tortuosity through the transverse and descending aorta.
- 2. Fullness in the right hilum, question adenopathy.
- 3. No focal infiltrate, pleural effusion, rib fracture or pneumothorax noted.

SC: 151 D: 08/04/2008 1212

Dictated By: James Coumas, M.D.

Verified By: JAMES COUMAS M.D. Date: 08/04/2008 Time: 18:05

Disch Date: 8/4/2008 Admit Date: 8/4/2008 Admitting Dr: UNIVERSITY PHYSICIAN PEMA, MD

Attending Dr. JERRY L BOWMAN, MD

Pt Name: MRN#:_

Acct#:

Age: 66 years

Sex: Female

Location: UEMJ

Page 2 of 2

CMC UNIVERSITY
8800 NORTH TRYON
CHARLOTTE, NC 28262
Jared G. Block, M.D., Medical Director

PAGE1

NAME: ACCOUNT NO:

MEDICAL RECORD NO.: 0003003951

M36119 COLL: 08/04/2008 11:15 REC: 08/04/2008 11:21 PHYS: BOUMAN, JERRY L

| TROPONIN I TROPONIN INTERPRETATION | 0.04 NORMAL <0.07 ng/ml 0.07-0.5 ng/ml >0.5 ng/ml | [<0.07] Normal Borderline Abnormal | ng/ri | STAT STAT STAT |
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COLL 08/04/2008 08:50 REC: 08/04/2008 11:22 PHYS: BOWMAN, JERRY L Specimen type: URINE

| DRUG SCREEN, ABUSED | | STAT |
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| BENZODIAZEPINE | NEGATIVE | STAT |
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| BAREITURATES | - | STAT |
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| | Threshold 200 ng/mL | |
| COCAINE | NEGATIVE | STAT |
| | Threshold 300 ng/mL | |
| OPIATE | NEGATIVE | STAT |
| | Threshold 2000 ng/mL | |
| | - | |

CONTINUED

PAGE

08/05/2008 04:02

CMC UNIVERSITY 8800 NORTH TRYON CHARLOTTE, NC 28262

PAGE2

Jared G. Block, M.D., Medical Director

NAME: ACCOUNT NO:

MEDICAL RECORD NO :

COLL: 08/04/2008 08:50 REC: 08/04/2008 11:22 PHYS: BOWMAN, JERRY L M36124 Specimen type: URINE

DRUG SCREEN, ABUSED

(CONTINUED) NEGATIVE

STAT

AMPHETAMINE

Threshold 1000 ng/mL

NEGATIVE

STAT

URINE HARIJUANA

Threshold 50 ng/mL

This screen is for medical purposes only and gives presumptive positive results. Positive results should be confirmed by GCMS. Unconfirmed positive screening results must not be used for non-medical purposes.



Radiology/Nuclear Medicing 1997

Exam: CT Head Scan w/o Contrast Result Status: Auth (Verified)

Performed Date: 8/4/2008 11:10:00

EDT

7078

Accession # 13640941

Clinical Information: 3T MVC R CHEST AND HEAD PAIN ;er 29

Requesting Provider: JERRY BOWMAN

DATE OF SERVICE: 8/4/2008 11:22:00 AM

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Verified By: JOHN HOWARD M.D. Date: 08/04/2008 Time: 11:30

Admit Date: 8/4/2008 08:27:00 EDTDisch Date: 8/4/2008 13:51:00

EDT

Admitting Dr: UNIVERSITY PHYSICIAN PEMA, MD

Attending Dr. JERRY L BOWMAN, MD

Printed: 9/15/2008 11:30 AM

Pt Name:

MRN#: Acct#:

DOB: Age: 66 years Sex: Female

Location: UEMJ

Page: 1 of 5



Radiology/Nuclear Medicine

Exam: DX Chest PA & Lat Result Status: Auth (Verified)

Performed Date: 8/4/2008 11:10:0

EDT

7263 Accession # 13640940

Clinical Information: 3T MVC R CHEST AND HEAD PAIN or 29

Requesting Provider: JERRY BOWMAN

EXAMINATION: CHI

CHEST TWO VIEWS

DATE OF SERVICE: 08/04/2008

HISTORY: MVC.

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D: 08/04/2008

1212

SC: 151

Dictated By: James Coumas, M.D.

Verified By: JAMES COUMAS M.D. Date: 08/04/2008 Time: 18:05

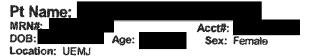
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EDT

Admitting Dr: UNIVERSITY PHYSICIAN PEMA, MD

Attending Dr. JERRY L BOWMAN, MD

Printed: 9/15/2008 11:30 AM



☐ Yes ☐ No Is it okey to speak about att aspects of your medical care in front of people who are accompanying you?



Carolinas HealthCare System

EMERGENCY DEPARTMENT FLOWSHEET

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| - | (F) Family (C) Caregiver | to Learn | | document assess | sed and identified needs. | 1 | List all that apply | List all that apply | education of |
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| 4.4 | + | 1 | +- | Diagnosis (Wha | at is my problem?) | and the second s | | L-A- | NO. |
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| Note: | SHIDKING Cet | MOITH INCHES | wm 00 | pant | Discharge / Dispo | sition | | * | |
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| | of Disposition: | | Expired: | entrementajo construcciones estra construcciones est | scharge Person: <u>V * V</u> | | od prior to discharg | V | |
| Dispos | sition with: | ⊠'Self | Family | ☐ Friend | Total Control of the | dian∪ ∪epane I Signs: T | | A BP | SaO2 |
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| □ Soc | cial | ☐ Inter | preter | | | | Admitted / Ten- | Report to: | DIP DOBS |
| O Lan | nguage | □ Lang | yuage Approt | priate Booklet oriate Handout | Patient Identified learn | ** A 16602 | | Sterred to: | |
| ☐ Reli | - | D Lan | mede Approt | priate Handout munication Device | | | LIN BOTH | □ Nurse □ Tran] Oxygen □ Mor | nitor |
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| □He | earing Impaire | d Pict | ture Handout | | ED VI | 3 | (WT) Wrong Time | (DNO) M | Aorrison's Olet Manual |
| □ Pal | atient Unrespor | nsive Tea | sch Caregiver | | | | (F) Family Unavail | flable (IT) in | nteractive Dovice |
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| 17 CMC | - University | (1) Vitals Reviewed V/S BPP | T RR Pox | window. |
| FMFRCENCY PH | YSICIAN RECORD | PHYSICAL EXAM | | |
| | | Exam limited as noted | In history other | - |
| MVC | (5) | General Appearance | _c-collar (PTA / in ED) / backboard | |
| DATES/4/18 TIME 1202 | PARCE A DESCRIPTION OF | Sho acute distress | mild / moderate / severe distress secondary to respiratory / pain | Server |
| DATENTAL NAME OF TO | On arrivalEMS Arrival / Direction | _dert | _anxious / lethargic | |
| HISTORIAN: prient spouse | paramedics caretaker | HEAD | see diagram | |
| _HX LIMITED BY | | no evidence of | Raccoon eyes / Battle's sign | |
| HPI | | 1 Crauma | | |
| chief complaint: MVC) Injury | 10: RI-WILT LET CLUSTUM | NECK | see diagram | |
| | | _ngn-tender | vertebral point-tenderness | |
| occurred: Just becarto armad | position in vehicle: | Spainless ROM | muscle spasm / decreased ROM | |
| Colored International Colored Transaction (Colored Transaction Colored Transaction Col | drive) passenger from bock | _trachea midline | pain on movement of neck | Market Control |
| | burned vehicle | , Mexus criteria neg | midline tenderness / distracting injury | |
| single-car accident / lost control / | fell asleep / unknown cause) | A sexus criteria rick | altered mental status | |
| | | | | |
| location of pain / | (-ngh-) -teft- | | | |
| Injuries: | shidr hip shidr hip | · / | 100 | |
| head face mouth | arm chigh arm thigh | (1 | | |
| neck (chest) abdomen | elbow knes elbow knes | 8 | | |
| back upper mid-lower | f-arm leg f-arm leg Wrist ankle | ` | I S I Wind | |
| radiating to (R/L) thigh/leg | hand foot hand foot | _ | | |
| | ! | ************************************** | | |
| severity of pain: | associated symptoms: lost consciousness (dazed) | EYES L PERRL | unequal pupils Rmm Lmm | |
| mild | duration: | ZEOMI ZTEKKL | EOM encrapment / palsysubconjunctival hemorrhage | |
| moderate | remembers: | Zeye nml inspection | 200000000000000000000000000000000000000 | |
| severe | (impact) coming to hospital | ENT | | - |
| severe | Soizure | EZNT nml Inspection | hemotympanum TM obscured by wax | |
| site of impact: | restraints: | | | |
| "P" = primary "S" = secondary | none lap / shoulder | no-dental injury | dental Injury / malocelusion | |
| | doesn't recall | inspection | | |
| | car | RESP / CVS | see diagram (on reverse) | |
| 1 it / // | all bag deployed pot deployed | Constructender | senderness / sest beh-bruising | mprovince-in- |
| | no air bag in vehicle | Zho acchymosis | | - |
| force (low) mod. high | thrown from vehicle ambulated at scene | ∠breath sounds nml | _spligting paradoxical movements | |
| direct glancing | long extrication | beart sounds rimi | decreased breath sounds | |
| | 1 | <u> </u> | wilesces / rases / riedicii | *************************************** |
| 500 | | | manifest one a secolar resemble | |
| ROS | ************************ | ABDOMEN | see diagram (on reverse) | |
| loss legling / power arms / legs | trouble breathing / chest pain | Inpn-tender | tenderness / guarding / rebound | |
| | loss of bladder function | np-organomegaly | mass / organomegaly | ***** |
| memoly loss | skin facerationrecent fever / illness | _no distention | FHTs. | agento-in up |
| double vision / hearing loss | pregnant confirmed w/ home test | GENITAL / RECTAL | perineal hematoma | |
| OOMDIS APPOUL LUCER IN STORE | hastinar continues as nonice test | _nml ext. inspection | blood at urethral measus | |
| nausea / vomitting | no other injuries | nml rectal exam | decreased rectal tone | |
| abdominal pain | : D all systems neg except as marked | heme negative stool | Management of the state of the | - |
| State of an | \$ ~ is \$ a & b * " a m + 4 a ^ v + 8 * a b + 8 * a b + 8 * a b + 4 | no vaginal bleeding | The state of the s | |
| | | NEURO / PSYCH | _confused / disoriented | <u> </u> |
| SOCIAL HX smoker | drug use / abuse | oriented x3 | _facial asymmetry | I |
| ETQH (recent / heavy / occasions | | _mood & affect nml | _unsteady / ataxic gait | |
| occupation | | ZCN's nml | _sensory / motor deficit | _ |
| FAMILY HX | ************************************** | Zensation & | _repests questions | |
| DACT MY COMING TO THE | and limenstrations are seen | motor nmi | | lasas |
| PAST HXnegative | m notes scree | | | |
| diabetes Type / Type 2 | a constant all one | Glasgow Coma Score | SCORE=IG | |
| Charles the the | | Eyes Open- spontaneou | sly (4) to voice (3) to pain (2) none (1) | |
| Surgeries / Procedures | appendectomy | Appendix new (3) concre | nted (4) inapprop. (3) incoherent (2) none (s (5) withdraws (4) flexor (3) exten (2) non |),,, |
| none /noncontributory | cholecystectomy | . LOSTEL WINDY POUNTS | - 1-7 TOTAL (1) ROTAL (2) ROTAL (2) ROTAL (2) ROTAL (3) ROTAL (3) ROTAL (4) ROTAL (5) ROTAL (| "(') |
| other | hysterectomy | | • | |
| ************** | | 4.5 | | |
| Medsnone / RN notes/tm | ospical med form reviewed | and the second s | · · · · · · · · · · · · · · · · · · · | profession |
| | | 082 | 17-00055 | GRADOLE . |
| AllergiesNKDA / seen and re | eviewed nursing notes | | 0300.39.51 | Parameter |
| | | | | COMMISSION |
| Page 1 of 2 | | ATT | PHY: 85325 PEMA UNIVERSITY PH | |
| - magneria es un | | (08/0 | 4/08 DOB F 66Y | |

| SKIN | see diagram | |
|--|--|--|
| ewarm, dry | crepitus / diaphoresis | T-Tenderness PIT-Point |
| Mact | z ecchymosis | Tendermens S-Swelling E-Ecchymesis |
| BACK | see diagram | Lace-Laceration \(\frac{1}{2}\) |
| Zio CVA | vertebral point-tenderness | A=Abrasion B=Boro W.T. W |
| tenderness | CVA tenderness (R/L) | (O=without m=mild |
| no vertebral | _muscle spasm / limited ROM | Try ~ Tenderness on |
| tendemess | | palpatian (severe) |
| EXTREMITIES | see diagram | |
| atradreatic | bony point-tenderness | |
| Delvis stable | painful / unable to bear weight | LABS |
| hips non-tender | pulse deficit | CBC- WBC= HCT= plazelets= |
| no pedal edema | | UA- normal WBC RBC bacteria |
| OMILROM | loint Exam | BHCG/urine preg- POS/NEG |
| Silat pulses nml | limited ROM / ligaments laxity | |
| Const barers | ioint effusion | Other labs |
| | | ED COURSE Timeunchanged improved re-examined Nexus criteria met / X-rays not indicated discussed with patient Nexus criteria, agrees with plan Practice for provided with a step for he regulated |
| | 13/1 | |
| 1.) | | |
| (_ | | _counseled patient to return to ED for worsening or persistent |
| 7 | * | symptoms or if unable to get follow up in recommended time |
| PROCEDURES | | |
| Wound Description | | Discussed with Additional history from: |
| 7 Marie Constitution of the Constitution of th | location | Dr. family caretaker paramedics |
| simple intermediate | | will see potient in: Critical Care- |
| superficial *subcut. | muscle linear stellate irregular | ED / hospital / office / transferminutes |
| | ad moderately / *heavily | Equipment of patient / family regarding Time excluded separately |
| distal NVT: neuro | 8 vascular status intact no cendon injury | lab () rad.) esuits diagnosis need for follow-up billable procedures |
| : anesthesia: local | digital blockml. | CATTOR TORRESONS |
| : lidoc 1% 2% epi/bi | carb marcaine 0.25% 0.5% LET | CLINICAL IMPRESSION MVC evaluation |
| prep: | | contusion arm R/L concussion |
| Becadine | | albour 8/1 |
| irrigated / washed w/ | saline debrided | inacture (Grade R/O) |
| minimal / mod. / * | | stabilized wrist R/L |
| wound explored | undermined | - restorative hand R/L laceration |
| foreign material remo | | head hip R/L |
| partially complete | * ************************************ | face thigh R/L |
| : minimal / mod. / * | | chest knee R/L sprain/strain |
| no foreign body ident | The state of the s | abdomen leg R/L neck thoracic lumbar |
| | losed with: wound adhesive / steri-strips | back ankle R/L sacral |
| SKIN- # | | shoulder R/L foot R/L |
| | terrupted running simple mottress (h/v) | |
| , | 0 vicryl / chromic | |
| | | DISPOSITION- Denome Obs / admissed transferred |
| *may indicate intermedia | terrupted running simple mattress (h/v) te repair *may indicate complex repair | DISPOSITION- |
| | | Ilme 130 / |
| XRAYS Interp | by me Reviewed by me Discsd w/ radiologist | to follow up as Neurologist, PMD, or VW in days 2 |
| C-Spine T-Spine L | S-Spine Pelvis | Rx given \ \ \(\frac{1}{2}\) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| nml / NAD | reversal / straightening of cerv. lordosis | work / school note |
| _no fracture | DJD / spondylosis / spurring | instructions given |
| _nml alignment | | |
| _soft dssues nml | | of alused to the inter Newschart |
| CXR | rib fracture | ill to mel and not to ache mark |
| MOI / NAD | infiltrate / acelectasis | Chamelotad |
| hounfiltraces | | The state of the s |
| nml heart size | | - Dans 607 (MO) |
| _nml mediastinum | | |
| Management of the second | The Post General Act and advance of the Control of | age reviewed / patient seen / test reviewed / agree with plan |
| OTHER : See seg | ALONG PORT | Discreted Addendum Progress Sheet see order set |
| CTOCAN | | See care sign out sheet progress note |
| CT SCAN | Produkturkaniski 20 dipadan ngaya isan gadadika na njeugaga kanina ngajagapi pis ito igilaga ngangkaganan ka nga angangganggangan ka samahagaga ay | |
| (head chest al | bdomen | |
| | er radiologist: verbal / written / dictated report | Employee 1 |
| 1-1 | Time possible principary monorando | |
| | I'm harver him man and good | 1 7 7021. 0044 |
| | 4 | <u>u000300-39-51</u> |
| MVC - 17 Page 2 of | ž . | The state of the s |
| | | ATT PHY: 85325 PEMA, UNIVERSITY PH |
| | | 08/04/08 DOB F 66Y |

| 2 | Æ. | C | Lab | 0 | E | C | | | 1 | 0 | E/) | С | Radiology | По | ₽) | ASC | Salahan Markatan Salahan Salah | |
|------------|-----------|------------|---|--|--|--|---|---|----------------|--------------------|--|--|------------------|-----------|--|--|--|---|
| 1 | te | Syl | | | | | Teoret | ol Level | | | 7 | 7 | CXR (pa & lat) | 11 | X | | CT Head | > |
| _ | · # | \V;(| DIFF) | - | † | | Pheny | - | | | 110 | | CXH (port) | 1 | 1110 | TIEV | CT Chest | |
| _ | 11 | / | BMP | | † | † | | ole Acid | | | | | C-Spine | 1 | *************** | | CT Helical | Ormania and an annual and a |
| | | | CMP . | | | | *************************************** | n level | | | | | Soft Tissue Necl | | *************************************** | | CT Abdom | nn |
| | Λ | | CPK-1 | | † | | | TETOH . | • | | <u> </u> | | T-spine | | | | CT Pelvis | U14 |
| | * | 17 | (Troponin | | 1 - 1 | | APAP | - | | | | | LS-spine | | | | US GB | *************************************** |
| | <i>4=</i> | -×- | Cardiac BNP | | 龙 | † | UOS" | 5 | | | | | Clavicle R L | # | | | US Pelvis | · |
| | | <u> </u> | D-dimer | İ | 16/2 | m | (JA-Di | 5 | ~ | | <u> </u> | | Shoulder R L | 1 | | | ~~~ | laneous |
| | | | PT | | 1 | 1'' | Send | | | | | | KUB | + | | | Hypothern | **** |
| | | | PTT | | | | UPT | *************************************** | | | | | Acute ABD Series | 1 | | | 02 @ | LPM |
| | | | Amylase | | † | | Urine | Cx | | | | | Humerus R L | | | | 02 Sat | - LLM |
| | | | Lipase | | t | | Wet P | *** | | | | | Elbow R L | | | | ABG R | anen Bir |
| | | | Liver panel | | | | | hlamydia | | | - | - | Forearm R L | + | | | EKG | DUITI AII |
| | | † | T4 | | 1 | | KOH | u.::30:0 | + | | 1 | | Wrist B L | # | | | Monitor | |
| - | | - | TSH | | | 1 | HSV | | | | 14 | | (fland R)L | # | | | Blood Gluc | ara Cr |
| | | † | Sed Rate | | † | † | | Screen | | | 00 | | Finger R L | + | | | Stat HgB | |
| | | | Mono spot | | † | t | | Cx draw & | hold | | MA | <u> </u> | Hip R L | - | | | Rectal T | · · · · · · · · · · · · · · · · · · · |
| | | | ABO/Rh | † | T | † | 1 | | | | | | Pelvis | 1 | | | Orthostati | PC |
| | | 1 | Type/cross | | 1 | † | | *************************************** | $\neg \neg$ | | † | † | Femur R L | 1 | | | NG tube s | |
| - | | l | Digoxin | <u> </u> | † | † | | | | | | | Knee R L | 1 | | | Foley size | |
| | <u> </u> | <u> </u> | VORL | 1 | 1 | † | | | | | | | Ankle R L | - | | | Old Chart | *************************************** |
| | | | Blood Cx sont | | † | † | Stricio | le Precauti | ons | | † | | Fool R L | - | | | Pastoral (| 20 |
| | | | Quant BHCG | Trans | non: | | å | | | | 1 | † | Toe R L | - | | - | Case Man | |
| | | 1 | | | | itor [] | Withou | ut Monitor | | | | - | | + | - | | 1 0000 1101 | # Actions |
| der ne | IV | /F / Tre | alment / Medic | ation / | Route | / Dose | | Start Time | Stop Initia | Time / Is | | iount used | Response / P | ain Scale | /Time | / Initials | Pump Used | Educati |
| ک۵ | | liste | mal 65 | رين | نهن |) × [| | IIS | | W | 7 | 10 | 20 2 | 125 | 0 | MANUFACTOR AND ASSOCIATION ASSOCIATION | | |
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| statement. | | Wli | NT G | uni | 511 | مام | \checkmark | | | | | | | | | | | |
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| 14 | 7 - 5 | | | | | | | | | | | | | | | | | |
| | TIME | | r Pulse | RR | | dra | 02: | | hythn | | | Site | | Time/Ini | tials | # Atte | mpls | D/C |
| | TIME | | | | | | | | | | | | | | tials | // Atte | mpis | D/C |
| | TIME | | | | | | | | | 1 1N #1 #1 #2 | | | | | tials. | / Atte | mpts | D/C |
| | | | T Pulse | RR | 8 | P | 023 | Set RI | | | | | Size | Time/Ini | | | | |
| Se | e Trer | A do | | RR e Sed | Bation | p See | O25 | Set RI | | 1 1N #1 #1 #2 | | | Size | Time/Ini | n PA/ | | mpts | |

08217-00055 0000300-39-51

ATT PHY: 85325 PEMA LINIVERSITY PH ! 66Y

Amount 200004 (2/08)

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Page 2

Output

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Time



and the saddology/Nuclear Medicine :

Exam: DX Hand

Result Status: Auth (Verified)

Performed Date: 8/4/2008 11:05:0

EDT

7308

Accession # 13640943

Clinical Information: 3T MVC R CHEST AND HEAD PAIN :er 29

Requesting Provider: JERRY BOWMAN

EXAM:

RIGHT HAND THREE VIEWS

DATE OF SERVICE:

08/04/2008

HISTORY:

MVC

Generalized osteopenia noted. Degenerative changes are seen. No discrete fracture of the visualized hand or wrist noted.

D: 08/04/2008 1207 SC: 151

Dictated By: James Coumas, M.D.

Verified By: JAMES COUMAS M.D. Date: 08/05/2008 Time: 15:06

Admit Date: 8/4/2008 08:27:00 EDTDisch Date: 8/4/2008 13:51:00

FDI

Admitting Dr: UNIVERSITY PHYSICIAN PEMA, MD

Attending Dr: JERRY L BOWMAN, MD

Printad: 0/15/2008 11:30 AM

Pt Name

MRN#: Acct#:

DOB: Age: 66 years Sex: Female ...

Page: 3 of 5





Exam: DX Rib Unilateral Result Status: Auth (Verified)

Performed Date: 8/4/2008 11:15:00

EDT

7319

Accession # 13640961

Clinical Information: 3T MVC R CHEST AND HEAD PAIN ;er 29

Requesting Provider: JERRY BOWMAN

EXAM:

RIGHT RIBS FOUR VIEWS

DATE OF SERVICE:

08/04/2008

HISTORY:

MVC now with right chest pain.

No discrete rib fracture seen. No evidence of a pneumothorax in the right hemithorax.

D: 08/04/2008 1206 SC: 151

Dictated By: James Coumas, M.D.

Verified By: JAMES COUMAS M.D. Date: 08/05/2008 Time: 15:06

Admit Date: 8/4/2008 08:27:00 EDTDisch Date: 8/4/2008 13:51:00

EDT

Admitting Dr: UNIVERSITY PHYSICIAN PEMA, MD

Attending Dr. JERRY L BOWMAN, MD

Printed: 9/15/2008 11:30 AM

Pt Name: MCKINNEY, VIRGINIA R
MRN#: Acct#:
DOB: Age: 66 years Sex: Female
Location: UEMJ

Page: 4 of 5



Radiology/Nuclear Medicine

Exam: DX Wrist Minimum 3 Views Result Status: Auth (Verified)

Performed Date: 8/4/2008 11:10:00

EDT

7325 Accession # 13640942

Clinical Information: 3T MVC R CHEST AND HEAD PAIN er 29

Requesting Provider: JERRY BOWMAN

EXAM:

RIGHT WRIST FOUR VIEWS

DATE OF SERVICE:

08/04/2008

HISTORY:

MVC

Generalized osteopenia noted. Carpal bones appear intact and align normally. Scaphoid is intact. Pronator quadratus fat pad maintained.

CONCLUSION:

No fracture about the right wrist

noted.

D: 08/04/2008 1207 SC: 151

Dictated By: James Cournas, M.D.

Verified By: JAMES COUMAS M.D. Date: 08/05/2008 Time: 15:06

Admit Date: 6/4/2008 08:27:00 EDTDisch Date: 8/4/2008 13:51:00

EDT

Admitting Dr: UNIVERSITY PHYSICIAN PEMA, MD

Attending Dr. JERRY L BOWMAN, MD

Printed: 9/15/2008 11:30 AM

Pt Name:

MRN#: Acct#:

DOB: Age: 66 years

Location: UEMJ

Acct#:

Sex: Female

Page: 5 of 5



ESIS/GM Central Claims Unit P.O. Box 300 Mail Code 482 C19 B61 Detroit, MI 48265-3000

800.888.0164 tel 313.665.0911 fax

Tiffini Hails Claim Administrator

February 5, 2009



RE:

Date of Event: August 4, 2008

File Number:

658844

Client:

General Motors Corporation

Dear

ESIS provides claims handling services to General Motors involving product liability claims.

Thank you for your patience during the course of our investigation.

A review of your claim involving a 2006 Chevrolet Cobalt has been completed.

ESIS must respectfully deny your claim for any damages.

If you have any questions or concerns, please give me a call. I can be reached at 800.888.0164, between 8:00 a.m. to 4:00 p.m.

Sincerely,

Tiffini Hails

PE10-005
GM
4/14/2010
ATTACHMENT
Q 03
Subject Legal
ATT

Service Request Detail 71-704589429 SR No. Ref No. Goodwiii No Goodwill Offered BRC Type PAR Account Site GW SubType Bus. Unit BRC Last Name First Name **Approval** Not Initiated PAR Area Daytime # Evening# UCC Steering - Wheel / Touch Controls Sub-Area Initiate PAR- Colfision Address City Council Bluffs Involved Dir Safety Yes State IA ZlpCd Con Acci Source 2/26/2009 09:49:42 AM Phone Updated Sorlal #IVIN 1G1AK18F687 Model Year 2008 Medium Priority License # CHEVROL Owner FABIANBR Chevrolet Make 2/23/2009 02:40:40 PM Warr. Start 04/22/2008 Status Open Opened Model Cobalt Mileage 18000 Sub-Status Closed Steering - 08 Chevrolet Cobalt Abstract Customer This is a BRC - PAR case Ido not assume IForward all inquiries to Brandy Fabien ext. 31065 Description

Pre-PAR

| PAR Notifier | Incident Date/Time Injuries | # Other Veh | # People in Veh. Ro | ad Surar | e Poso | Cond Fire Reports | Folice Report# |
|---------------------------|---|---|------------------------|------------------|----------------------------|--------------------------|---|
| Owner | 2/17/2009 01:55:00 PM Y | 0 | | ncrele | Dry | n/a | 2009011865 |
| Oriver Last N | ame Drive | r First Name | Height - | D) | | illiles | |
| | | | 5'6 | PP0509000000 | n/a | | |
| n/a | ent Lasi vame par Jami | once Agent Fir. | | 88-0080 | in Suran Bristol II | e Agency | |
| Incident Loc | Interstate 680 NW in Counciddiousss, | | | Inciden Desc | | | n the cust,causing it to hil to the guard rail. |
| Component | steering wheel lock to the right | | | | | | |
| Vehicle | Classic Chevrolet (Body Shop)712-966 | -2541 | | Demeg Desc | e de | | |
| Loc | | | | Addi In | lo Ref#84557 | 7 | |
| Emgcy Svc Names | Paltawattamie 70 County Jeffrey Brockmen | | | Maint L | oc Classic Che | volet | |
| PAR De | fail | *************************************** | | 190-1 | | | |
| Collision | Y Non Collision | Property Damage | N Thermal Evt | N | Spec Equip | After market Rims - | |
| Vehicle Speed | 70 | Weather Condition | Dry | | Prop Owner | n/a | Property n/a Type |
| Last Service Date | | Loc Last Service | | | Property Location | nia | Prop Est Repair Cost |
| Veb Est Repair Cost | \$0.00 | Spec Equip Installer | Friend | | Prop Damage Description | n/a | • |
| Primary Veh Uso | Personal | Inspection Type | Steering and Suspens | ion Sys | Inspected By | Inspection Not Performed | Inspection Date/Time |
| Veb Damage Description | side damage on the passenger side fro part to the suspension | to back - frt mi | isaligned, wheel damag | je, brokei | Explain Other | Steering | |

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on 2/26/2009

Page 1 of 10

PAR Injuries

| First Name DOB 10/05/87 | Location | | Phona # | | | Restraint Type 2 | |
|--|-------------------------|---|---|---|--------------------------------|---|---------------------------------------|
| | Occupant of | Owner's Vehicle | | Driver | | Seathelt | |
| >Collar bone and back was sore. >Shoulder scrapped/Cut Damage back - bounced | | Medical Rpt/ 7000659411 mm110484 | | Insalment Location Alegent Health Committospilat 631 N 6 St, Missourt V 7126422784 | mity Memorial | Incated By Section 1995 Joseph Piccolo Emergency Doctor Missouri Valey Hospital | e e e e e e e e e e e e e e e e e e e |
| Street Address 229 Lake St | | Gilya Council Bluffs | Sta (A | | | | ÷16 |
| Activities | | | | | | | |
| Orceled By 2/26/2009 09:56:28 AM RODRIJOS | Assigned To RODRIJOS | AGIIVITY TYPE BRC PAR | ESIS-Insurance Involvement | o Status Dona | Completed 2/26/2009 09:56:4 | | |
| Contact Last Name | Contact First | Name 36 | Account | | BAC Code | | |
| Comments Case was sent to ESIS. | | | | | | | |
| Jose Rodriguez ATX PAR Confidential Comments | | | | | | | |
| | | | | | | | |
| Created By 2/26/2009 09:54:28 AM RODRIJOS | Assigned To ESISBIOU | Activity Type Escalation | Activity Sub-Typ ESIS - Insurance Involvement | e Status In Progress | - Completed | Description Assigned to ESIS | 3 |
| Contact Last Name | Contact First | Name | Account | | SAC Code | | |
| Comments Insurance has started repairs on the vehic | de. | | | | | | |
| Confidential Comments | 100 pc | | | | A E GERM | | |
| | Assigned to FABIANER | Activity Type Inbound Cali Third Party | Activity Substyp Voice Mall Receiv | | 2/25/2009 04:47:4 | | e de |
| Contact Last Name | Contact First | Name | Account | | Sezu BAC Code (1992) | | |
| Patrio Gol your message 71-704589429 8 | 37203757 could | n'i make out what you sold as | to direbio involved | verify direbio and BAC i | o cond to company also | AZ * | |
| brandyfablan.par.atx | | | | | so statistical and | | |

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on 2/26/2009

Page 2 of 10

Activities

| Greated 2/25/2009 11:24:26 AM Contact Last Name | Created By KINZERTH | Assigned To RODRIJOS Contact Fire | Notify CRM | Activity Sub-Type Account | Status Done | Completed 2/26/2009 09:54:26 AM BAG Code | Description ESIS - Insurance Involvement |
|---|--------------------------|---|--------------------------------------|---|--------------------------|--|---|
| Received And Assigned | io ESIS | | | | | 2.4 | l |
| Jose Rodriguez ATX PAr Confidential Comments | | | | | | * * | |
| Greated 2/25/2009 11:15:53 AM | Signled By FABIANBR | Ansigned To FAEIANER | Activity Type Scheduled Follow-up | Activity Sub-Typs | Status Scheduled Alam | | Description |
| ESIS | | | | AGOURN | | BAC Code | |
| brandyfablan.panatx Confidential Comments | | | | | Section Control | | |
| Greated # 2/25/2009 11:15:28 AM | Crossed Byes FABIANDR | Assigned To FABIANBR | Activity Type Ownership Changed | Activity Stib-Type Ownership Escalated to BRC | Status Done | Sompleted ## 2/25/2009 11:15:28 AM | Description Ownership Escalated to BRC |
| Contact Last Name | | Contact First | Name | Account (1) | | BAC Code | |
| Confidential Comments | | | | | | | |

Report Generated for toporowm

on 2/26/2009

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Activities

| Created | | | | Activity Sub-Type | Status | - Completed | Description |
|--------------------------|----------|-------------|------------|----------------------------|--------|-----------------------|-----------------------------|
| 2/25/2009 11:14:25 AM | FABIANBR | KINZERTH | BRC PAR | ESIS-Insurance involvement | Done | 2/25/2009 11:24:25 AM | ESIS- Insurance Involvement |
| Contact Last Name | | Contact Fig | t Name () | Account and a second | | == + BAC Code == +7 | |
| ESIS- Insurance Involver | | | - | | | 2 | |

Customer was driving down 680 and going down down winding rds @ 70 mph and alleged that the stearing wheel locked up and caused a collision. Customer has insurance currently repairing veh. Mother has contacted legal counsel - unknown at this time or if he is retained. Forwarding case to ESIS due to insurance

brandyfablan.par.atx

Received and assigned for ESIS escalation Thaddeus KinzeriPAR Workflow/ATX Confidential Comments

| 2/25/2009 11:13:55 AM FABIANBR | Assigned To FABIANBR | Activity Type BRC PAR | Activity Sub-Type ESIS- Insurance Involvement | Status Done | 90mpleted 2/25/2009 11:14:24 AM | Description ESIS- Insurance Involvement |
|--------------------------------|-------------------------|--------------------------|---|----------------|------------------------------------|---|
| Contect Last Name | Contact Firs | Name | Account | | BAC Code | |
| SIS-Insurance Involvement | | | | | | |

Customer was driving down 680 and going down down winding rds @ 70 mph and alleged that the steering wheel locked up and caused a collision. Customer has insurance currently repairing veh. Mother has contacted legal counsel - unknown at this time or if he is retained. Forwarding case to ESIS due to insurance

brandyfablan.par.ab:

Confidential Comments

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on 2/26/2009

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Activities

| | | | Activity Type | Activity Sub-Type | Status | Completed | Description | |
|--|----------|----------|---------------|-------------------|--------|-----------------------|---------------|---------------|
| 2/25/2009 11:08:37 AM | FABIANER | FABIANBR | BRC PAR | Business Case | Done | 2/25/2009 11:13:49 AM | Business Case | Marie Control |
| | | | | Account | | BAC Code | | |
| Business Case | | | | | 6.0 | | | |
| ************************************** | | | | | | | | |

Customer was driving down 680 and going down down winding rds @ 70 mph and alleged that the steering wheel locked up and caused a collision. Customer has insurance currently repetring vals. Mother has contacted legal counsel - unknown at this time or if he is retained, Forwarding case to ESIS due to insurance

brandyfablan.par.etx Conliderala Comments

Cronted Created By Assigned To Activity Type 2/25/2009 10:31:37 AM FABIANBR FABIANBR Outbound Call Customer Activity Sub-Type Slatus Made Contact Done 2/25/2009 11:08:24 AM BAC Code

crs sts: I was calling to get some additional information.

cust sts:
-Friend told me to look on the internet and it happen to other people
-have no idea - my moms contacted you end she is walting for a lawyer to call back
-she is talking to a lawyer

crs sta:
-will send your case to central claims - 7-10 business days

brandyfablan.par.etx

brendyfelbien.par.etx Confidential Comments

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on 2/26/2009

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Activities

| Created Created By Assigned T 2/24/2009 04:35:65 PM FABIANBR FABIANBR Contact Last Name Contact Fi | Scheduled Follow-up | Status Completed Done 2/25/2009 11:08:34 / BAC Code 8AC Code | |
|--|---|--|---|
| | | | |
| Created Created By Assigned To 2/24/2009 04:34:13 PM FABIANBR FABIANBR Control of the Control of | inbound Call Customer Voice Mell Received | Status Completed Done 2/24/2909 04:34:30 F BAC Code | Description :: € € € |
| Lorte Van diper - ann Welters 71-704589429 can you 7 brandyfablan.par.abx Gonfidential Commonts | 123299789 or 7123552759 thank you | | |
| Created Created By Assigned To 2/24/2009 10:06:38 AM KINZERTH FABIANBR Contact Last Name Contact Fire | Ownership Changed | Status Completed Done 2/24/2009 10:06:38 A BAG Gode | Description M Service Request Ownership has changed FROM: MAGLASJO TO: FABIANDER |
| Confidential Comments | | | |

Report Generaled for toporowm

on 2/26/2009

Page 6 of 10

Activities

| Greated 2/24/2009 10:06:18 AM | KINZERTH | Assigned to FASIANBR | BRC PAR | Activity Sub-Type Initial Contact-AVM | Status Done | Completed 2/24/2009 04:45:10 PM | Description Called Patricio Pat Lorca |
|---|----------------|-------------------------|---------------|--|----------------|------------------------------------|---|
| Contact Last Name | | Conlact Fig | t Name | Account | | BAC Code | |
| | | | | | | | |
| Patricio Pat Lorca Node: 972075 Malibox: 8434 | | í | | | | | |
| crs sts: My name is Brandy Fablan with the Product Allegation Dept with GM. My Service Request number is The Customer's name is Their telephone number is The dealership involved is The Vehicle Involved is a Year, Make and Model with approximately miles . -The customer is allegingConcern You do not need to respond to this message unless you have any comments concerns or questions pls contact me at 866-790-5600 x 31085 | | | | | | | |
| brandyleblan.par.atx | | | 1.624 | | | | |
| Confidential Comments | | | | | | | |
| Croated | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | | |
| 2/24/2009 10:06:09 AM | KINZERTH | FABIANER | BRC PAR | Inilial Contact- Dealer | Done | Completed 2/24/2009 04:46:04 PM | Discription Called Todd Edwards Svc Adv Svc |
| Contact Lost Name | 502000 | Contact Firs | l Name | Account | | BAC Coda | CLASSIC CHEVROLET-CADILLAC |
| Comments Todd Edwards Sve Adv Sve CLASSIC CHEVROLET-CADILLAC 1010 34TH AVE COUNCIL BLUFFS IA 51501-8076 712-365-2541 | | | | | | | |
| cre sts: I was calling to g | et svc history | | | | | | |
| dir sis: -replaced 2 wheel studs for wheels and last time we changed out his clutch and all under warranty -Body Shop-then fix mechanical errors -send out EAA | | | | | | | |
| crs sts: Haven't had a tech look at it - steering locked up while driving -adv will send EAA and they will contact within 7-10 days | | | | | | | |
| brandy/ablen.pazatx Vordider/ilal Comments | 93.00 | | | | | | |

Report Generated for toporowm

on 2/26/2009

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Service Request Detail

Activities

| 2/24/2009 10:06:01 AM | KINZERTH | FABIANBR | Activity Type BRC PAR | Activity Sub-Type Initial Contact- Phone | Status Done | 2/25/2009 11:07:57 AM | Description Called Jacob Van Bibber |
|-----------------------|----------|----------------|--------------------------|---|----------------|-----------------------|-------------------------------------|
| Contact Last Name | | : Coolast Firs | l Name | Account | | BAC Code | |
| Comments | 975 | | | | | | |

crs sts: I was calling to get some additional information.

cust sis: Steering out interstate heading north
680, there are alot of turns 70 mph and locked up on a hard right - steering wheel wouldn't move at all
Went into a guardrait
-friend said it looked like the suspension probably broke on impect
-Police report stated veh malfunction
-don't have health - trying to car
-insurance stated they would pay for the body damages
-internet states

-reception disc

brandyleblan.par.etx Confidential Communic

| | | Assigned to | Activity Type | Activity Sub-Type | Status | Completed | Description |
|-----------------------|----------|---------------|---------------|-------------------|--------|-----------------------|-------------|
| 2/24/2009 10:05:53 AM | KINZERTH | FABIANBR | BRC PAR | Acknowledgement | Done | 2/24/2009 04:39:23 PM | Called |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| | | | | | | | |

7123299789/Cel# 7123552759

crs sts: I was calling to get some additional information.
-Need a little more info in regards to what happen when driving and it locked

 $\mbox{dir}\, sis:$ this is his mother and I am trying to handle this because he works nights -

crs sis: -will try in the morning -pis have him call me when he is available

brendyfablen par.abs Confidential Commants A CONTRACT STATE AND A STATE AND A STATE OF THE STATE OF

Report Generated for toporowm

an 2/26/2009

Page 8 of 10

Service Request Detail

Activities

| 2/24/2009 10:05:43 AM | | Assigned To FASIANER | Activity Type Notify CRM | Activity Sub-Type | Status | Completed | Description |
|--|--|--|---|---|------------------|--|--|
| Contact Last Name | | and the second of the second | | Account | Done | 2/24/2009 04:27:15 PM EAC COLD | File Assigned |
| Comments | | | | | | | |
| | | | | - A | | | |
| Confidential Comments | | | | | E | - 16 | l |
| Created - | - Created Ev | Assigned Te | Activity Typa | Activity Sub-Type | Status | ~ | |
| 2/24/2009 10:05:36 AM | KINZERTH | FABIANBR | Research | Activity Cauty (100 | Dane | 2/24/2009 04:27:11 PM | Descriptions Research VIN |
| Contact Last Name | | Contact Fire | it Name | Account | | BAC Code | I |
| enmene = - | | | | | | and the second s | |
| CRS researched VIN: | | | | | | | |
| no related claim history | | | | | | | |
| no previous related SR's | | | | | | | |
| no open recalls | | | | | | | |
| brandyfablan.par.atx Conficential Comments | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
| Created 2/24/2009 10:05:17 AM | Created EV | FABIANBR | BRC PAR | Activity Sub-Type Case Assigned | Status Done | Completed 2/24/2009 04:24:34 PM | Description: Assigned to Brandy Fablen x31065 |
| Created | Created EV | FABIANBR | BRC PAR | | | | |
| Created 2/24/2009 10:05:17 AM | Created EV | FABIANBR | BRC PAR | Case Assigned | | 2/24/2009 04:24:34 PM | |
| Greated 2/24/2009 10:05:17 AM Contact Lest Name | Created EV | FABIANBR | BRC PAR | Case Assigned | | 2/24/2009 04:24:34 PM | |
| Greated 2/24/2009 10:05:17 AM Contact Lest Name Somments | Created EV | FABIANBR Contact Fire | BRC PAR t Name | Case Assigned Account | | 2/24/2009 04:24:34 PM BAC Code | |
| Created 2/2/4/2009 10:05:17 AM Contact Lest Name Comments Confidential Comments Created | Created By KINZERTH Created By | FABIANER Contact Firs | BRC PAR L Name Activity Type | Case Assigned Account | Done Status | 2/24/2009 04:24:34 FM BAC Code Set 17: 200 Set Park 1 | Assigned to Brandy Fablan x31065 Descriptions on |
| Created 224/2009 10:05:17 AM Contact Last Name Johnneyus Confidential Comments | Created By KINZERTH Created By KINZERTH | FABIANBR Contact Fire | BRC PAR L Name Activity Type SR Opened | Case Assigned Account | Done Status Done | 2/24/2009 04:24:34 PM SAC Code | Assigned to Brandy Fabian x31065 |
| Greated 2/24/2009 10:05;17 AM Contact Last Name Summents Confidential Comments Created 2/24/2009 08:27:04 AM Contact Last Name | Created By KINZERTH Created By KINZERTH | FABIANER Contact Firs Assigned To MAGLASJO | BRC PAR L Name Activity Type SR Opened | Case Assigned Account Account Activity Sub-Type Account | Status Done | 2/24/2009 04:24:34 PM BAC Code | Assigned to Brandy Fabian x31065 Description to: SR in Status of Closed has been Re- |
| Created 2/24/2009 10:05:17 AM Contact Last Name Comments Confidential Comments Created 2/24/2009 08:27:04 AM Contact Last Name | Created By KINZERTH Created By KINZERTH | FABIANER Contact Firs Assigned To MAGLASJO | BRC PAR L Name Activity Type SR Opened | Case Assigned Account Account Activity Sub-Type | Status Done | 2/24/2009 04:24:34 FM 8AC Code BAC Code Completed 2/24/2009 08:27:04 AM | Assigned to Brandy Fabian x31065 Description to: SR in Status of Closed has been Re- |
| Greated 2/24/2009 10:05;17 AM Contact Last Name Summents Confidential Comments Created 2/24/2009 08:27:04 AM Contact Last Name | Created By KINZERTH Created By KINZERTH | FABIANER Contact Firs Assigned To MAGLASJO | BRC PAR L Name Activity Type SR Opened | Case Assigned Account Account Activity Sub-Type Account | Done Status Done | 2/24/2009 04:24:34 PM BAC Code | Assigned to Brandy Fabian x31065 Description to: SR in Status of Closed has been Re- |

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on 2/26/2009

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Service Request Detail

Activities

| Greated 2/24/2009 08:27:03 AM | Created By KINZERTH | AGEIGIDEUTO | Activity Type Activity SR Closed - Satisfied | y Sub-Type . Status Done | | Description |
|----------------------------------|------------------------|-------------|--|-----------------------------|---------|---|
| Contact Last Name | | | Name: Assount | | BARROSS | Service Request has been Clased Satisfied. |
| Comments | | | | | | |
| Confidential Comments | | | | | | |

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|-----------------------|------------|--------------|---------------|-------------------|--|--|---|
| 2/23/2009 03:09:21 PM | MAGLASJO | KINZERTH | Escalation | Initiate PAR | Done | AND DESCRIPTION OF THE PROPERTY OF THE PROPERT | Assigning activity to PAR QUEUE |
| Contact Last Name | | Contact Fire | t Name | Account | e el en el el el el el el el el el el el el el | BAC Code | • |
| | | | | | | | |

CRS advised that a person from the PAR Department will contact the customer within 2 business days

Received and assigned in PAR Thaddeus Kinzer/PAR Workflow/ATX Confidential Continents

Created By Assigned To Activity Type
2/23/2009 02:42:15 PM MAGLASJO MAGLASJO Inbound Call Customer Activity Sub-Type Status Description 2 2/23/2009 03:09:03 PM Complex Request Done Alleged product allegation-injury

Cust sis: There is an injury bec the steering wheel was locked up to the right.

Cust sks: Assistance

Crs adv:

information will be forwarded to the Product Allegation Department within the BRC.

AnnWalters/Mia/CAGT1/ivi0 Confidential Comments

UCC Information

| M40 Locked Steering - Wheel / Touch Controls |
|--|
|--|

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on 2/26/2009

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GM Vehicle Inquiry System Summary

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| | | | | | | • | cicil | <i>.</i> | | | | | |
|--------------------------------------|---------------------|---------------------------|--|-----------------|--------------|-------------|---|--------------|---------------------|-------------------|--|---|----------------|
| VIN: | | | IG1A | K18F687 | | | | | | | | | |
| | | | | | VEHI | CLE 1 | NFC | DRMATI | ON | | | *************************************** | |
| Merci Mode | handising l : | | IA | K37 -200 UPE | 8 COBALT 2 | 2-DOO | OR LS Warranty Start Da | | | Date : | Pate: 04/22/2008 | | |
| BARS Order Type: 70 - RETAIL - STOCK | | | | | | | | | | | | | |
| 101 CC | | | CLASSIC CHEVROLET-CADILLAC 1010 34TH AVE COUNCIL BLUFFS, IA 51501-8076 | | | | Selling Sou | rce : | | 13 - CHEVROLET | | | |
| | | | (7) | 2) 366-25 | 41 | J1J0 | /1-Or | 370 | Site Code : | | | 05630 | |
| | | | | | | | | | Business A Code: | ssocia | ite | 111942 | |
| Service Contract: No Branded T | | | | | ded Title : | No | | Warran | y Block : | No | PDI Sta | itus : | Paid |
| | | 1,000 miles and models | | | REQUI | RED I | TEI | LD ACTIO | ons | | | | |
| Vehic | le Has No | Curr | ent Rec | ord Of O | utstanding (| Campa | igns | | | | | | |
| | Antonio martino | | | | SERVICE I | NFOR | MA | TIONAL | ITEMS | | | | |
| Туре | Number | | nanana ana ana ana ana ana ana ana ana | | De | scripti | on | | | | Posted | Posted Date Stat | |
| EI | 08224 | 2.0 | L, 2.2L | , 2.4L EN | GINE OIL L | eak - | REF. TSB 08-06-01-017. 07/18/2008 See Bulleti | | | | See Bulletin | | |
| | | Office commonwell section | (|)N STAR | AND XM S | ATEL | LIT | E RADIO |) INFORMA | \TIO | N | | |
| OnSta Equip | - | No | OnSi | ar Status | N/A | l (loc | efer to Help page for details or:go to OnStar Online Enrollment ocated on the "OnStar" tab in GM InfoNET) or (888)ONSTAR1 88) 667-8271. | | | | | | |
| XM E | quipped | Yes | XM R | adio ID | T200X0HT | XM Statu | 5 | Inactive | www.xmm | idio.u | ige for deta m.ca or De: ST (1-877-4 | aler Hot | line |
| | | | | | APPLIC | ABLE | : W | ARRANT | ΈS | makani kananasa | | | |
| | | | Descri | ption | | *. | E | Rective Date | Effectiv Odomet | | End Date | 0 | End Iometer |
| | 00 BUMP LANTY | ER TO | BUM | PER LIM | ITED | | 04 | /22/2008 | 41 n | niles | 04/22/201 | 1 3 | 6041 miles |
| | 000 SHEE UGH LIM | | | | ERUST | | 04 | /22/2008 | 41 n | niles | 04/22/2014 | 4 10 | 0041 miles |
| 96/800 AND P | | RAL E | MISSIC | ON CATA | LYTIC CON | IV. | 04. | /22/2008 | 4 1 n | niles | 04/22/2010 | 5 8 | 0041 miles |

| 60/100000 POWERTRAIN COVERAGE LIMITED WARRANTY | 04/22/2008 | 41 miles | 04/22/2013 | 100041 miles |
|--|------------|----------|------------|--------------|
| 36/36000 FEDERAL EMISSION | 04/22/2008 | 41 miles | 04/22/2011 | 36041 miles |

CLAIM HISTORY

| R.O Date | R.O Number | Туре | Labor Operation | Odometer Reading |
|------------|---------------|------|--|---------------------|
| 01/05/2009 | 232810 | ij. | K3161 - SYNCHRONIZERS - 3RD-4TH - R&R OR REPLACE | 14379 miles |
| 01/05/2009 | 232810 | tt . | Z5001 - VIP FREIGHT/POSTAGE REIMBURESEMENT | 14379 miles |
| 12/14/2007 | A03757 | I | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | 0 miles |

CHECK HISTORY INFORMATION

| *************************************** | Vehicle Has No Associated Check History Information. | |
|---|--|--|
| | | |

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GM Vehicle Inquiry System Claim History

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| ** Colores and the color of the | Carlo Malanasana | ************ | - | | | Винения поможения выполня | | - | COST CONTRACTOR | | | | |
|--|--|--------------|---------|---|----------------------|---------------------------|--------------|--------|------------------|---|----------|--|--|
| VIN: | The second second | | 1G1 | AK18F687 | | | | | | | | | |
| | ······································ | | | CLAIM | HISTORY | | | | | | | | |
| Repair Or | der Date | e: 01 | /05/200 | Repair Order Number : | | | | ing: | ing: 14379 miles | | | | |
| Serviced By: | CLASS 1010 34 | SIC CH | EVROL | ET-CADILLAC | Selling Source: | | | | 13 - | 13 - CHEVROLET | | | |
| | COUN | CIL BL | UFFS, | IA 51501-8076 | Site Code : | | | | 0563 | 30 | | | |
| (712) 366-2541 | | | ı | | Business Associate C | | te Code | s v | 1119 | 200 - 100 - | | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Part | Part | | | rson ode | Line Total | Comments | | |
| 01/30/2009 | 974 | 01 | # | K3161 - SYNCHRONIZERS - 3RD-4TH - R&R OR REPLACE | 19207672 RING | 19207672 - RING | | N | //A | \$ 1201.56 | Ϋ́ | | |
| 01/30/2009 | 974 | 02 | # | Z5001 - VIP FREIGHT/POSTAGE REIMBURESEMENT | N/A | NVA | | N | VA. | \$ 18.37 | Y | | |
| | | | | | | _ | | | | | | | |
| Repair Ord | ier Date | : 12 | /14/200 | Repair Order Number : | A03757 | A03757 Odometer Readi | | | | ng: 0 miles | | | |
| Serviced By: | CLASS 1010 34 | IC CHI | EVROL | ET-CADILLAC | Selling Sou | rce: | | | 13 - CHEVROLET | | | | |
| | COUNC | CIL BL | UFFS, I | A 51501-8076 | Site Code: | | | | 05630 | | | | |
| | (712) 30 | 30-254 | | | Business A | ssociat | e Code | : | 111942 | | | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Par | ť | Auth Code | | erson Code | Line Total | Comments | | |
| 12/18/2007 | 857 | 01 | I | Z7000 - PRE- DELIVERY INSPECTION - BASE | NA | | N/A | 1 | ٧٨ | \$ 108.68 | N | | |

CHECK HISTORY

Vehicle Has No Associated Check History.

TIME

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GM Vehicle Inquiry System Vehicle Build

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Help

| I ATM | IGIAK18F687. | | |
|----------------------|--------------|---------------------------------|--|
| | | VEHICLE BUILD | |
| Merchandising Model: | IAK | 37 -2008 COBALT 2-DOOR LS COUPE | |

| Mer | rchandising Model : | 1AK37 -2008 COBALT 2-DOOR LS COUPE | | | | | | |
|------|---------------------------|--|---------------|------|--|--|--|--|
| Gro | ss Vehicle Weight Rating: | 1656 kg (3651 lb) Order Number: MMHZBP | | | | | | |
| Buil | ld Date : | 12/14/2007 | Build Plant : | 187A | | | | |

GMVIS is not the definitive source of GM Vehicle RPO information and is intended for service reference only. Should there be any questions about the vehicle's original build or RPO information please refer to the original vehicle invoice or window sticker.

OPTION CODES

| AK5 - DRIVER & RIGHT FRONT PASSENGER AIR BAGS | ALO - SENSOR INDICATOR INFLATABLE RESTRAINT, FRT PASS/CHILD PRESENCE DETECTOR |
|---|---|
| AR9 - DELUXE FRONT BUCKET SEAT | ASF - HEAD CURTAIN SIDE AIRBAGS, FRONT/REAR |
| AT8 - RESTRAINT PROVISIONS CHILD, RR SEAT, RR FACING | C67 - ELECT. FRONT AIR CONDITIONER |
| DC8 - MIRROR, O/S MANUAL FLDG, BLK | D36 - MIRROR I/S R/V TILT |
| FEI - SUSPENSION SYSTEM-SOFT RIDE | FE9 - FEDERAL EMISSIONS |
| FR6 - 3.84 FINAL DRIVE TRANSAXLE RATIO | IPB - INTERIOR TRIM DESIGN |
| J41 - BRAKE, FRONT DISC/REAR DRUM | K64 - 115 AMP GENERATOR |
| LOD - ASSEMBLY PLANT - LORDSTOWN,OHIO | L61 - 2.2L DOHC 4 CYL ENGINE |
| MM5 - TRANSMISSION, 5 SPEED MANUAL | M86 - MANUAL 5 SPEED TRANSMISSION |
| NT7 - FEDERAL EMISSION TIER 2 | N45 - 3 SPOKE STEERING WHEEL |
| PGI - 15" STEEL WHEEL | QTU - P195/60R15 TOURING BW TIRES |
| R9N - PROCESSING CODE - SEAT | SLM - STOCK ORDERS |
| UQ4 - BASE SPEAKER SYSTEM | US8 - AM/FM STEREO, CD PLAYER & MP3 FORMAT |
| U2K - XM SATELLITE RADIO-SERVICE FEE EXTRA. 1ST 3 MONTHS INCL. | VK3 - FRONT LICENSE PLATE BRACKET |
| VT7 - OWNERS MANUAL ENGLISH | V73 - STATEMENT OF VEHICLE CERT U.S. /CANADA |
| ILS - ILS BASE PACKAGE | 1SZ - OPTION PACKAGE DISCOUNT |

| 14B - GRAY | 14I - GRAY |
|--------------------|--------------------|
| 6AR - FRONT SPRING | 7AR - FRONT SPRING |
| 74U - VICTORY RED | 8AA - REAR SPRING |
| 9AA - REAR SPRING | |

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GM Vehicle Inquiry System Summary

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| Help | | | | | | | | | | | | | | | |
|---|---------------------------|-----------------|---------|---------------------------------|----------|---------------------|------------------------|--------------------|----------------------------------|---|--|---|-------------------|----------------------|--|
| VIN: 1G1AK18F687 | | | | | | | | | | | | | | | |
| | VEHICLE INFORMATION | | | | | | | | | | | | | | |
| Merc Mode | ha ndis ing i : | | | K37 -200 UPE | 8 COBA | LT 2- | DOOI | R LS | 3 | Warranty | Start | Date : | 04/22/2 | 008 | |
| BARS | Order T | ype: | 70 | - RETAI | L - STO | CK | | | | | en en en en en en en en en en en en en e | | | | |
| Delive | ering Deal | er: | 10 | ASSIC C 10 34TH . UNCIL I | AVE | | | | | Selling Sou | rce : | | 13 - CHEVROL | | |
| | | | | 2) 366-2 | | 9 162 | J1JU. | 1-0U | 70 | Site Code : | | | 05630 | | |
| | | | | | | | | | | Business A Code: | ssocia | ite | 111942 | | |
| Serv | ice Contr | act: | No | Brat | nded Tit | le: | No | | Warran | ly Block : | No | PDI Sta | tus : | Paid | |
| Announce | | | | | | Marine and a second | CONTRACTOR DESCRIPTION | | D ACTI | ONS | | | | | |
| Vehic | le Has No | Curre | ent Rec | ord Of C | utstand | ling C | ampai | gns | | | | | | | |
| | | itanogumania mi | | | SERVI | CE IN | FOR | MA' | TIONAL | ITEMS | | | | - | |
| Туре | Number | | | | | Des | criptic | m | | | | Posted | Date | Status | |
| EI | 08224 | 2.0 | L, 2.2L | , 2.4L EN | IGINE C | OIL LE | AK- | REF | 7. TSB 08 | SB 08-06-01-017. 07/18/2008 Sce Bulletin | | | | | |
| | | | |)n staf | K AND X | ar md | TELI | JIT | E RADIC | INFORM | TIO | N | | | |
| OnSta Equip | ••• | No | OnS | ar Statu | s N/A | | (loca | ated | Help pag on the "C 7-8271. | e for details)nStar" tab in | or:go o GM | to OnStar C InfoNET) o | Inline E (888) | nrollment DNSTARI | |
| XM E | quipped | Yes | XM R | adio ID | T200X(| 28-6 2 8 | XM Status | | Inactive | www.xmm | g.oibr | ige for detai m.ca or Dea ST (1-877-4 | der Hot | line 7). | |
| | | | | | AP) | PLIC/ | ABLE | WA | RRANT | IES | | , | • | | |
| Description | | | | | | 8 | ffective Date | Effectiv Odomet | | End Date | .0 | End dometer | | | |
| 36/36000 BUMPER TO BUMPER LIMITED WARRANTY | | | | | s | 04/ | 22/2008 | 41 n | niles | 04/22/201 | 3 | 6041 miles | | | |
| 72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY | | | | | | | 04/ | 22/2008 | 41 n | niles | 04/22/2014 | 10 | 0041 miles | | |
| 96/800 AND P | 00 FEDER CM | AL E | MISSIC | ON CATA | LYTIC | CON | ٧, | 04/ | 22/2008 | 41 n | niles | 04/22/2010 | 8 | 0041 miles | |

| 60/100000 POWERTRAIN COVERAGE LIMITED WARRANTY | 04/22/2008 | 41 miles | 04/22/2013 | 100041 miles |
|--|------------|----------|------------|--------------|
| 36/36000 FEDERAL EMISSION | 04/22/2008 | 41 miles | 04/22/2011 | 36041 miles |

CLAIM HISTORY

| R.O Date | R.O Date R.O Number Type | | Type Labor Operation | | | | | |
|------------|--------------------------|---|--|-------------|--|--|--|--|
| 01/05/2009 | 232810 | ť | K3161 - SYNCHRONIZERS - 3RD-4TH - R&R OR REPLACE | 14379 miles | | | | |
| 01/05/2009 | 232810 | | Z5001 - VIP FREIGHT/POSTAGE REIMBURESEMENT | 14379 miles | | | | |
| 12/14/2007 | A03757 | I | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | 0 miles | | | | |

CHECK HISTORY INFORMATION

| Vehicle Has No Associated | Check History Information. |
|---------------------------|----------------------------|
| | |

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GM Vehicle Inquiry System Claim History

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| VIN: | | | 1G1 | AK18F687 | | | | | William mana | | | |
|-----------------|---|---------|--|---|------------------|---------|--------------|--------|-----------------|---------------|-------------|--|
| | | | ······································ | CLAIM I | HSTORY | | | | Stanion company | | | |
| Repair Or | ler Date | 22 01 | /05/200 | Repair Order Number : | 232810 | Odor | neter R | cad | ing: | | 14379 miles | |
| Serviced By: | CLASS 1010 34 | IC CH | EVROL | ET-CADILLAC | Selling Sou | trce : | | | 13 - | CHEVROL | .et | |
| Dy: | COUN | CIL BL | UFFS, | IA 51501-8076 | Site Code : | | | | 0563 | 30 | | |
| | (712) 3 | 66-254 | 1 | | Business A | ssocial | e Code | 9 9 | 1119 |)42 | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Part | | Auth Code | | rson ode | Line Total | Comments | |
| 01/30/2009 | 974 | 01 | # | K3161 - SYNCHRONIZERS - 3RD-4TH - R&R OR REPLACE | 19207672 RING | - | N/A 1 | | VA. | \$ 1201.56 | Y | |
| 01/30/2009 | 974 | 02 | # | Z5001 - VIP FREIGHT/POSTAGE REIMBURESEMENT | N/A | | WA | N | VΑ | \$ 18.37 | Y | |
| | Marronner versamina | | | | | 1 | | | | | | |
| Repair Ord | Repair Order Date: 12/14/2007 Repair Order Number: A03757 Odometer Re | | ead | ading: 0 miles | | | | | | | | |
| Serviced By: | CLASS 1010 34 | IC CHI | EVROL | ET-CADILLAC Selling Source: 13 - CHE | | CHEVROL | ET | | | | | |
| <i>D</i> , . | COUNC | IL BL | UFFS, I | A 51501-8076 | Site Code: | | | | 0563 | 05630 | | |
| | (712) 3 |)O-L)4: | | | Business A | ssociat | e Code | • | 1119 | 42 | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Par | ť | Auth Code | | erson Code | Line Total | Comments | |

CHECK HISTORY

NA

WA

N/A

\$ 108.68

N

27000 - PRE-**DELIVERY**

TIME

INSPECTION - BASE

Vehicle Has No Associated Check History.

01

857

12/18/2007

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ESIS/GM Central Claims Unit P.O. Box 300 Mail Code 482 C19 B61 Detroit, MI 48265-3000 800.888.0164 tel 313.665.0911 fax

5

March 4, 2009

Julie Jett
Claims Administrator

Council Bluffs IA

RE:

Claimant:

Our File No.:

Our Client:

General Motors Corporation

Date/Event:

2/17/2009

VIN:

1G1AK18F687

Dear

I am writing to confirm our conversation of 3/4/2009 during which you agreed to allow us to inspect your 2008 Chevrolet Cobalt and retrieve data from the air bag system. I estimate the inspection will take about 2 hours.

As part of the inspection, we will likely take photographs and measurements. Also, your vehicle is equipped with an air bag Sensing and Diagnostic Module (SDM). As explained in the Owner's Manual, in addition to its other functions, the SDM records information about the air bag system and other crash related data in an air bag deployment event and some near-deployment crashes. The SDM in your vehicle also records the following precrash data: vehicle speed, throttle position, brake application and engine RPM for 5 seconds prior to the deployment or near deployment event. As part of our investigation, we will download the SDM data using the Vetronix Crash Data Retrieval software. We will provide you with a copy of that data at the time we retrieve it or as soon after as is practical.

Please note the potential GM uses of this crash data once GM has a copy in its files. Once collected, the SDM crash data is available for GM's research needs. Also, in summary form, this information may be provided to non-GM organizations (i) which have a reasonable need for it, (ii) which have a demonstrated ability to utilize such data, and (iii) which are expected to use it for studies aimed at improving safety to the benefit of the public at large, the auto industry, or GM. However, information which ties SDM crash data to a particular vehicle, such as VIN, owner name, or date and location, will generally not be disclosed by GM other than (a) to the involved owner/lessee or his/her designated agent, (b) in response to an official request of police or similar government office, (c) for research where appropriate confidentiality is maintained and need is shown, (d) as part of GM's defense of litigation involving the subject vehicle or other GM products, or (e) as otherwise required by law.

Please note that you have an obligation and responsibility to ensure that the subject vehicle and it related components are maintained and preserved in their immediate post-incident condition for as long as you intend to pursue a claim and/or cause of action against General Motors.

If you have any additional questions about our upcoming inspection, you can contact me at 1.800.888.0164 Monday through Friday from 8:00 AM to 4:30 PM.

Sincerely,

Julie Jett

A Risk Managament Services Company- One of the ACE Group of Companies

CD IOC CODIL CADILLAC BODY SHOP

1010 34TH AVE

COUNCIL BLUFFS, IA. 51501

FAX: 712-366-7798

FEDERAL TAX ID# 420646357

CD IOC CD IOC

CLASSIC CHEVROLET CADILLAC ADDRESS:

1010-34TH AVENUE

CITY STATE: COUNCIL BLUFFS, IA

ZIP: 51501-

HOME PHONE:

PAX:

INSP DATE:

CONTACT:

PHONE 2:

PHONE 1:

OWNER: ADDRESS:

CITY STATE: COUNCIL BLUFFSI, IA ZIP:

CLAIM#:

POINT OF IMPACT: 0

INS. CO: BRISTOL WEST

*=USER-ENTERED VALUE

EC=REPLACE ECONOMY

TE=PARTL REPL PRICE

STATE:

PHONE 1: FAX:

CONTACT:

VIN: MILEAGE:

ACCING CIL#:

LIC#:

BODY COLOR: RED

CONDITION:

E=REPLACE OEM

UE=REPLACE OF SURPLUS

ET=PARTL REPL LABOR

TT=TWO-TONE N=ADDITIONAL LABOR

AA=APPEAR ALLOWANCE

UM=REMAN/REBUILT PRT EU=REPLACE SALVAGE
OE=REPLACE PXN OE SRPLS PC=PXN RECONDITIONED

L=REFINISH

CG=CHIPGUARD RI=R&I ASSEMBLY

RP=RELATED PRIOR

NG=REPLACE NAGS

03/05/09

STEVE GOODSPEED

(888)800-5685

(712)366-8404

(712)366-7798

UC=RECONDITIONED PRT

CARY SOMERLA

1G1AK18F687

EP=REPLACE PXN

PM=PXN REMAN/REBUILT

IT=PARTIAL REPAIR

BR=BLEND REFINISH

SB=SUBLET P=CHECK

UP=UNRELATED PRIOR

2008 CHEVROLET COBALT LS 2DOOR COUPE 4CYL GASOLINE 2.2

CODE: U2362A/D OPTNS D/24

OPTIONS:

I=REPAIR

TWO-STAGE - EXTERIOR SURFACES TWO-STAGE - INTERIOR SURFACES

| OP GDE | MC DESCRIPTION | MFG.PART NO. | PRICE | aj% b% | HOURS R |
|-----------------|---|----------------------|--------------------|--------|------------------|
| ar en 100 ap 20 | the time of the the the time the time the time the time time time time time time time tim | | 100 pp 400 400 400 | *** | 69 69 60 60 60 m |
| E 0158 | REINF, FRONT FENDER | RT 15832633 GM PART | 36.05 | | 0.2*1 |
| L 0158 | REINF, FRONT FENDER | RT REFINISH | | | 0.4*4 |
| | | 0.3*SURFACE | | | |
| | | 0.1 TWO STAGE | | | |
| E 0656 | ABSORBER, STRUT | R/F 15876216 GM PART | 162.51 | | 1.0*2 |
| | NO AFTERMARKET PER N | APA AND OREILLYS | | | |

2008 CHEVROLET COBALT LS 2DOOR COUPE CD LOG NO 17027-1

| BR0257 | 13 PANEL, BODYSIDE OTR RT BLEN | D REFINISH | | 1.4 | 4 |
|--------|--------------------------------|-----------------|---------------|-------------|----|
| | BLEND RT UNISIDE AND RT A PI | LLAR FOR COLORI | MATCH TO FEND | er and door | |
| | | 0.5 BLEND | | | |
| | | 0.6 TWO STAGE | SETUP | | |
| | | 0.3 TWO STAGE | | | |
| E 0218 | APPLIQUE, FRT DOOR F RT 2587 | 6411 GM PART | 28.18 | 0.2 | 1 |
| | REMOVED DOOR TAPE FOR DOOR R | EFINISH | | | |
| E 0410 | SHIELD, QUARTER PANE RT 1524 | 1193 GM PART | 32.01 | 0.3 | 1 |
| | LINER CRACKED | | | | |
| EC | HEADLAMP BULB ECON | OMY PART | 3.25* | | 1* |
| | | | | | |

7 ITEMS

MC MESSAGE (S)

13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE

| FINAL CALCULATIONS & ENTRIES GROSS PARTS OTHER PARTS PAINT MATERIAL PARTS & MATERIAL TOTAL TAX ON PARTS @ | | | 7.000% | 258.75 3.25 54.00 316.00 18.34 |
|---|-------|-------------|---------------|--|
| LABOR | RATE | REPLACE HRS | REPAIR HRS | |
| 1-SHEET METAL | 48.00 | 0.7 | | 33.60 |
| 2-MECH/ELEC | 75.00 | 1.0 | | 75.00 |
| 3-FRAME | 60.00 | | W. Commonwell | |
| 4-REFINISH | 48.00 | 1.8 | | 86.40 |
| 5-PAINT MATERIAL | 30.00 | | | |
| LABOR TOTAL | | | | 195.00 |
| TAX ON LABOR | | @ | 7.000% | 13.65 |
| SUBLET REPAIRS | | | | |
| TOWING | | | | |
| STORAGE | | | | |
| | | | | |
| GROSS TOTAL | | | | 542.99 |
| | | | | |
| NET TOTAL | | | | 542.99 |
| | | | | |

SHOPLINK UF967 ES CD LOG 17027-1 DATE 03/12/09 12:40:36AM R6.37 CD 02/09

PXN: NO GEOCODE

HOST LOG

(C) 1998 - 2008 AUDATEX NORTH AMERICA, INC.

1.0 HRS WERE ADDED TO THIS EST. BASED ON AUDATEX TWO-STAGE REFINISH FORMULA.

THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF AFTERMARKET CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. ANY WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THESE PARTS RATHER THAN THE MANUFACTURER OF

2008 CHEVROLET COBALT LS 2DOOR COUPE CD LOG NO 17027-1

YOUR VEHICLE.

THIS DAMAGE REPORT IS AN ESTIMATE ONLY, BASED ON THE VISUAL INSPECTION OF YOUR VEHICLE. THE ESTIMATE INCLUDES ONLY THE ITEMS SPECIFIED ABOVE. IT IS NOT UNCOMMON DURING THE COURSE OF THE REPAIR PROCESS TO FIND ADDITIONAL DAMAGES NOTIFICATION OF ADDITIONAL PARTS AND/OR DAMAGES WILL BE REPORTED PROMPTLY TO YOUR INSURANCE CARRIER OR TO THE RESPONSIBLE PARTY. ADDITIONAL PARTS AND LABOR WILL BE INCLUDED IN A SUPPLEMENTAL BILLING, IN ADDITION TO THE ORIGINAL AMOUNT OF THE ESTIMATE. IT IS OUR INTENT, AND OUR RESPONSIBILTY TO RETURN YOUR VEHICLE TO ITS PRE-ACCIDENT CONDITION, FOCUSING ON YOUR SAFETY AND THE VALUE OF YOUR VEHICLE. ALL REPAIRS ARE MADE FOR YOU, THE OWNER. ALL PAYMENTS, DEDUCTABLES, OR PAYMENT ARRANGEMENTS ARE THE SOLE RESPONSIBILTY OF THE OWNER, AND MUST BE MADE TO THE DELIVERY OF YOUR REPAIRED VEHICLE. WE APPRECIATE THE OPPORTUNITY TO SERVE YOU. THANK YOU FOR CHOOSING CLASSIC CHEVROLET CADILLAC

Date: Estimate ICh Estimate Version: Committed

2/21/2009 04:49 PM 9020111

Profile tD: Council Bluffs

Property Damage Appraisers

PO Box 241005, Omaha, NE 68124 (402) 552-0899 Fax (402) 552-0898

Damage Assessed By: Cary Sommerla

Appraised for: JAMIE GUARDI C

csommerla4pda@att.net

THIS IS NOT AN AUTHORIZATION TO REPAIR. ALL ESTIMATES ARE SUBJECT TO INS. CO. REVIEW TO ASSURE ACCURACY, COST EFFECTIVENESS AND THAT ACCEPTED INDUSTRY REPAIR STANDARDS ARE MET. ALL COSTS OF REPAIRS ARE THE SOLE RESPONSIBILITY OF THE VEHICLE OWNER, WHO ULTIMATELY MUST AUTHORIZE ALL REPAIRS. NO SUPPLEMENTS WILL BE HONORED WITHOUT THE PRIOR INSPECTION BY PROPERTY DAMAGE APPRAISERS.

PDA SPECIFIES THAT ALL REPAIRS 4/OR PART REPLACEMENTS LISTED HEREIN BE MADE IN STRICT ACCORDANCE WITH THE MANUFACTURER'S SPECIFICATION. ********

THIS ESTIMATE IS BASED ON VISIBLE DAMAGES AT THE TIME ON INSPECTION. ADDT'L DAMAGES MAY RESULT AFTER VEHICLE IS UNDER REPAIR, IF SO THE REPAIR FACILITY IS REQUIRED TO CONTACT PDA TO ADDRESS THESE COSTS. THIS ESTIMATE MAY INCLUDE REPLACEMENT PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR VEHICLE. WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THESE PARTS RATHER THAN THE MANUFACTURER OF YOUR VEHICLE.



Mitchell Service: 910411

Description: 2008 Chevrolet Cobalt LS Body Style: VIN:

2D Cpe 1G1AK18F687. Mileage:

17,465

OEMALT: Cotor

Options:

License:

Drive Train:

2.2L Inj 4 Cyl 5M FWD

Search Code: 708

ALUMALLOY WHEELS, AIR CONDITIONING, POWER STEERING, POWER BRAKES TILT STEERING WHEEL, ELECTRIC DEFOGGER, 5 SPEED MANUAL TRANSMISSION AM-FM STEREO/CDPLAYER(SINGLE), PASSENGER-FRONT AIR BAG, FRONT WHEEL DRIVE

L-4 ENGINE, 2-DOOR, DRIVER-FRONT AIR BAG

ESTIMATE RECALL NUMBER: 02/21/2009 16:49:36 9020111

Mitchell Data Version:

JAN_09_A

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E Weeklala Liaminn

2/21/2009 04:49 PM Date: 9020111

Estimate ID: Estimate Version: 0

Committed Profile ID: Council Bluffs

| Line | Entry Number | Labor Type | Operation | Line Item Description | Part Type/ Part Number | Dollar Labor Amount Units |
|------|------------------|---------------|--------------------------|-------------------------------------|---------------------------|------------------------------|
| 1 | 001598 | BDY | OVERHAUL | FRT BUMPER COVER ASSY | £ 470 5 4 x 500 1 x 500 1 | 2.4 8 |
| 2 | 000011 | BDY | REMOVEREPLACE | FRT BUMPER COVER | ** ORP CAPA | 258.00 INC # |
| 3 | AUTO | REF | REFINISH | FRT BUMPER COVER | mid man is | C 26 |
| 4 | 003471 | BDY | REMOVEREPLACE | FRT BUMPER EMBLEM | 10359862 GM PART | 44.25_ INC 16.48 |
| 5 | 003648 | BOY | REMOVEREPLACE | R FRONT COMBINATION LAMP ASSEMBLY | ** QUAL REPL PART | 199.00 INC |
| 6 | AUTO | BDY | CHECK/ADJUST | HEADLAMPS | Appendict a contr | QA |
| 7 | 000166 | BDY | REMOVE/REPLACE | R FENDER PANEL | 15793420 GM PART | 135.27 1A # |
| 8 | AUTO | REF | REFINISH | R FENDER OUTSIDE | thidage antium | C 20 |
| 9 | AUTO | REF | REFINISH | R ADD TO EDGE FENDER | | C O.S |
| 10 | 002622 | BDY | REMOVE/REPLACE | R FENDER ADHESIVE NAMEPLATE | 15223484 GM PART | 4.75 Q.1 |
| 11 | 000172 | BDY | REMOVE/REPLACE | R FENDER LINER | 15289946 GM PART | 31.90 INC |
| 12 | 000172 | BDY | REMOVE/REPLACE | ALLOY WHEEL 2019949 | OUAL REPL PART | 398.98 0.6 ALO |
| 13 | UV201# | DUT | HEMUVENETLAGE | RS LIMITED 8 SPOKE . | organia recruit ranti | |
| 14 | 000255 | BDY | REMOVE/REPLACE | WHEEL VALVE STEM 2@2.00 | ** OUAL REPL PART | 4.00 ° |
| 15 | 900500 | MCH. | ADDILLABOR OP | REMOUNT/SPIN BALANCE RT. SIDE TIRES | Subjet | 1 / / |
| 16 | 002836 | MCH | REMOVEREPLACE | R FRT SUSP STEERING KNUCKLE -M | 25923941 GM PART | X 25.90 (0.4) PR 68 |
| | 001715 | BOY | REMOVE/INSTALL | R FRT OTR BELT MOULDING | Comme district | 1332 |
| 17 | ~ ~ ~ ~ ~ ~ | | | | | 0.3 # |
| 18 | 001703 000808 | BDY BDY | REMOVE/INSTALL REPAIR | R FRT REAR VIEW MIRROR | Existina | 5.0*# |
| 19 | | | | R FRT DOOR SHELL | EXAMY | C 1.6 |
| 20 | AUTO | REF | REFINISH | R FRT DOOR OUTSIDE | | INC |
| 21 | 001705 | BDY | REMOVEANSTALL | R FRT DOOR TRIM PANEL | | 0.8 # |
| 22 | 001711 | BDY | REMOVE/INSTALL | R FRT OTR DOOR HANDLE | | C 22 |
| 23 | 001744 | REF | REFINISH | R QUARTER PANEL OUTSIDE | | C 0.5 |
| 24 | 001748 | REF | REFINISH | R QUARTER PANEL EDGE | | INC # |
| 25 | 001750 | REF | BLEND | R FUEL DOOR | \$100 - 7 - 4.5 | 0.2* |
| 26 | 900500 | BDA . | REMOVE/INSTALL | ANTENNA | Existing | V2" |
| 27 | | | | R&R Time Used in R&I Operation | On the San | 79.95 ° 0.0° |
| 28 | 900500 | WCH. | ALION | FOUR WHEEL ALIGNMENT | Sublet | 10.0°\$ |
| 29 | 001881 | BDY | REPAIR | R SIDE BODY PANEL ASSEMBLY -S | Existing | 1.7 # |
| 30 | 001797 | GLS | REMOVE/INSTALL | R QUARTER GLASS | ALALIA MEN MANT | |
| 31 | 002298 | BDY | REMOVEREPLACE | QTR GLASS ADHESIVE | "QUAL REPL PART | × 20.00 ° |
| 32 | 001917 | BOY | OVERHAUL. | REAR BUMPER COVER ASSY | | 0.4 |
| 33 | 001921 | BDY | REMOVEREPLACE | REAR ADD WILS | | 4 |
| 34 | 002302 | BDY | REPAIR | REAR BUMPER COVER | Ezisting | 15*# |
| 35 | AUTO | REF | REFINISH | REAR BUMPER COVER | | C 2.8 |
| 36 | AUTO | BDY | REMOVEREPLACE | REAR ADD WILT, LTZ MODEL | | 0.4 |
| 37 | 936012 | | ADDILCOST | HAZARDOUS WASTE DISPOSAL | | ×2.00 · 3.0 |
| 38 | AUTO | REF | ADDL OPR | CLEAR COAT | | 19 1 (g) |
| 39 | 933003 | REF | ADD'L OPR | TINT COLOR | | × 5.00 - 0.3 |
| 40 | 933018 | REF | ADD'L OPR | MASK FOR OVERSPRAY | | 5.00 * 0.3* |
| 41 | AUTO | | ADDIL COST | PAINTMATERIALS | | × 502.40 ° |

* - Judgment Item

C - Included in Clear Coat Calc

SIOUX PLATING CO. 428 E. 9TH ST. SOUTH SIOUX CITY NE 68776 (800) 642-1158

-- GM1000733C --- GM2503282 25

258.00 199.00

ESTIMATE RECALL NUMBER: 02/21/2009 16:49:36 9020111

Mitchell Data Version: JAN_09_A

1 | Drailed Warehar

67010

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Page 2 of 4

Bull 3 25 tax

Estimate ID: 9020111 Estimate Version:

Date: 2/21/2009 04:49 PM

Committed

Profile ID: Council Bluffs

Estimate Totals

| ĝ. | Labor Subtotals Body Refinish Glass Mechanical | 25.3 16.0 1.7 | Addri Labo Amoun 48.00 X 5.0 48.00 X 5.0 48.00 0.0 75.00 0.0 | Sublet Amount 0 0.00 0 0.00 0 0.00 0 0.00 | Totals 1,214.40 T 773.00 T 81.60 T 248.35 T | • | Part Replacement Summary Taxable Parts Sales Tax Total Replacement Parts Amoun | 0 | 7.000% | Amount 1,276.41 89.35 1,365.76 |
|-------------|--|---|--|---|---|-----------|---|---|--------|--|
| | | Labor | Tex @ | 7.000 % | 162.21 | | | | | |
| | Labor Summary | 44.9 | | | 2,479.56 | | | | | |
| 111. | Additional Costs Taxable Costs | Sales Tax | @ | 7.006% | Amount 507,40 35,52 | IV. | Adjustments Insurance Deductible Customer Responsibility | | | Amount 500,00- |
| | Total Additiona | I Cosis | · · | | 542.92 | | Cusioner responsibility | | | 300.00 |
| | | | | | | 1. 11. | Total Labor: Total Replacement Parts: Total Additional Costs: Gross Total: | | | 2,479.56 1,365.76 542.92 4,388.24 |
| | | | | | | IV. | Total Adjustments: Net Total: | | • | 500.00- 3,888.24 |
| 9990 | cint(s) of Impact Right Side (P) | | | | | | | | | Chap |
| | Insurance Co: Address: Work Phone: Fax Phone: | 9100 KEYST INDIANAPOL | | | | | tion Site: Classic Chevrolet Council Bluffs, IA ion Date: 2/18/2009 | | | Ro |
| | Body Shop: Address: Telephone: Fax Phone: Slete Lic. No: | 1010 340: Av Council Bluff (712) 368-25 (712) 366-77 | re. 1s., IA 51501 IA1 | | | | | | | |

IS UNDERSTOOD THAT THE BODY SHOP LISTED ABOVE, IF ONE IS LISTED, AGREES TO COMPLETE & GUARANTEE ALL REPAIRS LISTED ABOVE FOR THE AMOUNT LISTED ABOVE, UNLESS A DIFFERENT AMOUNT IS LISTED HERE \$

THE OWNER OF THE VEHICLE FOR WHICH THIS ESTIMATE IS WRITTEN IS REQUIRED TO PRESENT THE REPAIR FACILITY WITH A COPY OF THIS ESTIMATE AT WHICH TIME VEHICLE IS REPAIRED. FAILURE TO DO SO MAY RESULT IN ADDT'L EXPENSE TO OWNER.

ESTIMATE RECALL NUMBER: 02/21/2009 16:49:38 9020111

Mitchell Data Version: JAN_09_A

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Page 3 of 4

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AUTHORIZATION FOR USE AND/OR DISCLOSURE OF CONFIDENTIAL MEDICAL INFORMATION

I, the undersigned, hereby authorize the following Authorized Health Care Providers to make the authorized use and/or disclosure of confidential information contained in my medical records to ESIS at the address below:

| Name, address, telephone number of medical provider: | |
|--|-----|
| Alegent Health - Community Wemon al Mo-11alle | |
| Name, address, telephone number of medical provider: | X |
| Jennie Ed 933 Elwercest Co. Bluffet car 2 712291 | 400 |
| Name, address, telephone number of medical provider: | 1- |
| Physical Therafy Health Center West 3434 Whork Sun | 179 |
| Name, address, telephone number of medical providere | 1 |
| | |
| Name, address, telephone number of medical provider: | ļ |
| | |
| Name address Advances and Advan | 1 |
| Name, address, telephone number of medical provider: | |
| | h |
| | j |

I understand that the purpose(s) for which this information is to be used and/or disclosed is for a product liability claim against General Motors Corporation for an incident which occurred on or about 2/17/2009.

The confidential information from my medical records and/or x-rays to be disclosed has no limitations as to the dates of visits or injuries to be disclosed. I understand that full disclosure is authorized. This includes interviews of doctors, EMTs, and other attendants regarding all matters relating to my examination, diagnosis, care, and treatment.

I understand that:

- I have a right to inspect or copy my confidential information that is to be used or disclosed.
- If my confidential health information is disclosed to someone who is not required to comply with the federal
 privacy protection regulations, then such information may be re-disclosed by the recipient and would no
 longer be protected.
- I may revoke this authorization at any time with respect to any Authorized Health Care Provider by notifying such Authorized Health Care Provider in writing of my revocation of this authorization and delivering to such Authorized Health Care Provider my revocation by mail or personal delivery. ESIS requests a copy of such revocation.
- The above-listed medical providers may not condition (withhold or refuse) treating me on whether I sign this Authorization.

A photocopy of this Authorization can be accepted with the same authority as the original.

| Veloted Name of Patlents | Date of Birth |
|--|----------------------------------|
| Blufts In | Social Security Number |
| Signature of Patient or Personal Representative* | 312-09 |
| Retainments to convidual. | Authority to act for individuale |

*If you are a personal representative signing this Authorization, please provide a description of your relationship to the individual and a description of your authority to act for the individual below.

EXPIRATION OF AUTHORIZATION: THIS AUTHORIZATION FOR USE AND/OR DISCLOSURE OF CONFIDENTIAL MEDICAL INFORMATION WILL REMAIN IN EFFECT FOR AS LONG AS MY CLAIM AGAINST GENERAL MOTORS CORPORATION IS PENDING UNLESS IT IS EXPRESSLY REVOKED IN WRITING BY ME AS NOTED ABOVE.

ESIS -- General Motors Claims PO Box 300 M/C 482-C19-B61 Detroit, MI 48265-3000 Claim Number: Claims Administrator: Julie Jett

ESIS is the third-party administrator for General Motors Corporation.

*1AR3 5/03

MAIL REPORTS TOlows Department of Transportation Offices of Oriver Services P.O. Box 9204 Des Moines, lower 50308-9204

Iowa Department of Transportation INVESTIGATING OFFICERS REPORT OF MOTOR VEHICLE ACCIDENT

| he | Enforcement Case | e Number. | | | |
|------------|------------------|------------------------|--|--|--|
| 2009011866 | | | | | |
| | | NAMES AND DESCRIPTIONS | | | |

| | Des Moine | a, iowa | 50300-92 | 104 | |)/ | | OF I | NOTO | R VI | EHICLI | EAC | CIDE | NT | Legal Intervention? | | Proper Proper | |
|-----|---|--|-----------------|-----------------|---|--|--|--|--------------------------|----------------|--|--------------------|----------------------------|--|-------------------------------|------------------------|---|------------------------|
| L. | Oste of Accident Time of Accident County Accident County Accident O2/137/2009 13:53 Hrs. Pottawattamle - 78 If socident occurred outside of city finits | | | | | | Acde | mi oc | thw berec | iin con | Deporate limits of (city) Location Literal Description NB/EB Interstate 0580 and C and NW Railway | | | | | | | |
| 0 | show general vic | | and the start | Lancorda | "NIA" | | NAME AND ADDRESS OF THE OWNER, TH | NAMED AND POST OFFICE AND PARTY OF THE PARTY | ily "NIA | /a | MODELLE CONTROL OF CON | ************* | | | 101111 (4.48 L | CHIAAD | 73 | |
| A | On Road, Street, or Highway: "NIA" | | | | | | At h | | Son with | | | | | | | | | |
| T | Note: Unless at tocation from a c | | | | | | | | | | | | | | X-Coordinati | ı: 002 | 58578 | <u> </u> |
| 0 | Distance "N/A" | | Direction N/A" | | and | Dist | | | | ection (A** | | of | delerikken (Sed | | Y-Coordinate | | NAMES AND ADDRESS OF THE PARTY | |
| N | Milaposi Numbe "N/A" | if | 180 | Or | | STATE OF THE PARTY | SECULAR PROPERTY. | ction, b | | | d crossing | onsortenen ASSA | | | If DiMGed Hi (Gerdinal) Tr | avel D "NJA | rection | e Proute |
| | Oriver's Home - | Last | | | First | | | | u | iddie | | | | Suax | Phone | | | enderthiopymynicyment |
| | Address | (ACTION ACTION A | | | MRS V W 1M 0 | | | City COUN | CIL BLU | JFFS | | | Antonia (Contraction) | State IA | 76 | | | |
| | Date of Bath 10/06/1987 | Driver | s License | Numb | 6 f | onggeneraccountere | AND SECULIAR | | on Charge | | | | Cration | Charge 1 | | | | |
| | Gender Male | State IA | Class C | E " | Endorseme NONE | Res BS | trictions | | on Charge | | | | | Charge 2 | | | | |
| | Alcohol Test Given? | Test | Results: | | | | | - Citation Charge Code 3 Citation Charge 3 Citation Charge Code 4 Citation Charge 4 | | | | | | | | | | |
| u | 1 - None | <u>L</u> | | 1 - N | *************************************** | | | <u> </u> | | 1 | **** A | | *-b 4 | 10 | 1 5 | ath 🕏 | 12 | |
| N | Seating Position 01 Injury Status 2 Occupant Protection | | | | | ous T | Airbag Deployment 5 Airbag Switch Status 1 Ejection Transported by: | | | | Ejection 1 | Ejection P | m A | Lead | ped 1 | | | |
| ï | MISSOURI VALLEY HOSP | | | | MO VLLY RESCUE | | | | | | | 0×0000000000000000 | | | | | | |
| T | Ourse's Name. | . i sel | | | First | | | | | | | Sum | ž | Owner Com | pany Hame | | nemanania da sere | |
| 001 | Advan | | | | | | | CDUNCIL BLUFFS | | | | State IA | 7.0 | | | | | |
| | Ensurance Co. Name | | | | | | Insurance Policy # | | | | | | License Ptate | .# | State IA | Year 2009 | | |
| | VIN No. Year Make 1G1AK18F687 2008 Chevrolet - CHEV | | | | V | Moc CB | | *************************************** | | \$194 2D | } | | Tows YES | | roxima pay or F | le Cost to leplace | | |
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| | Commercial Trailer Attached to S License Plate s Power Unit | | | | | State | Year | Attach Traßer | | | | 13 | State Year | Emergent Versite Ty | y pe 1 | Em Sta | argency tra 3 | |
| | Carrier Name | rista. | | | | | Addres | 155 | | | | | City | | 5 | tals | Ζip | |
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| SOCIAL MANAGEMENT CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONT | |

NARRATIVE

Describe what happened (refer to vehicles by number)

DRIVER OF UNIT # 1 STATED A MECHANICAL PROBLEM CAUSED HIM TO STEER TO THE RIGHT AND CAUSED HIM TO HIT THE GUARDRAIL ON THE WEST SIDE OF THE BRIDGE, CAUSING DAMAGE TO THE RIGHTSIDE OF VEH # 1.

| Officer BROCKMAN JEFFREY | 5 mm - 4 mm - 8 | Time Officer Hotsled of Ac 13:55 | Steril Hrs. | Time Officer Antiver 14:13 | d Al Scene Has |
|---|------------------------------|-------------------------------------|--------------------|-------------------------------|-------------------|
| Name of Agency Iowa State Patrol - Dist 15 | Date of Report 02/17/2009 | investigation made at scene? Yes | 71.0 | | |
| Report Reviewed By: KIRKBRIDE, RANDY | Date Reviewed 02/23/2009 | Agency Specific ISP | Other Technical In | vestigation Agency | |

HealthPort P.O. Box 409875 Atlanta, GA 30384-9875 Fed Tax ID 58 - 2659941 (770) 754 - 6000



Invoice #: 4/8/2009 Customer #: 1467467

JULIE JETT ACE ESIS PO BOX 300 MLCD 482 C19 B61 DETROIT, MI 48265 Bill to:

JULIE JETT ACE ESIS PO BOX 300 MLCD 482 C19 B61 DETROIT, MI 48265 Records from:

ALEGENT HEALTH COMM MEM HOSP 631 NORTH 8TH ST MISSOURI VALLEY, NE 51555

Requested By: ACE ESIS

Patient Name:

DOB: SSN:



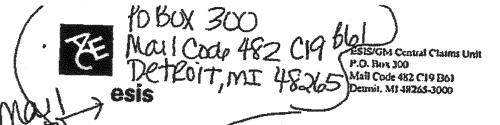
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| Terms: Net 30 days | Please remi | t this amount: \$3 | 0.49 (USD) | |

HealthPort P.O. Box 409875 Atlanta, GA 30384-9875 Fed Tax ID 58 - 2659941 (770) 754 - 6000

| Invoice | |
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| Check # | |
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Please return stub with payment.

Please include invoice number on check.
To pay invoice online, please go to www.HealthPortPay.com or call (770) 754 6000.



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Julle Jett Claums Administrator

March 26, 2009

Alegent Tealty Community Memorial Hospital

631 N. 8 Stryet

Missuuri Willex IA 51555

Attention Medical Records Department

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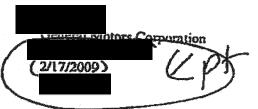
Our File No.:

Our Client:

Patient Name:

Date/Livent:

Date of Birth:



Dear Sits or Madam:

ESIS is the third party administrator handling claims on behalf of General Motors Corporation.

Please provide me with a complete copy of above incident.

medical records and medical bills for the

Enclosed please find the Authorization for Use and/or Disclosure of Confidential Medical Information form for your file. If there is a copying charge for these records, please forward the records along with your invoice and your Tax Identification Number.

Thank you for your cooperation.

Sincerely,

Julie Jett

Claims Administrator

Enclusure

Samed &

26652505

A Rich Management Services Company- One of the ACE Group of Companies

<u>AUTHORIZATION FOR USE AND/OR DISCLOSURE OF CONFIDENTIAL MEDICAL INFORMATION</u> I, the undersigned, hereby authorize the following Authorized Health Care Providers to make the authorized use and/or disclosure of confidential information contained in my medical records to ESIS at the address below: Name, address, telephone number of medical provider: 412020 Name, address, tricphone gombie of medical providers Name, address, telephone number of medical providers I understand that the purpose(s) for which this information is to be used and/or disclosed is for a product liability claim against General Motors Corporation for an incident which occurred on or about 2/17/2009. The confidential information from my medical records and/or x-mys to be disclosed has no limitations as to the dates of visits or injuries to be disclosed. I understand that full disclosure is authorized. This includes interviews of doctors, EMTs, and other attendants regarding all matters relating to my examination, diagnosis, care, and treatment. I understand that: I have a right to inspect or copy my confidential information that is to be used or disclosed. If my confidential health information is disclosed to someone who is not required to comply with the federal privacy protection regulations, then such information may be re-disclosed by the recipient and would no longer bo protected. I may revoke this authorization at any time with respect to any Authorized Health Care Provider by notifying such Authorized Health Caro Provider in writing of my revocation of this authorization and delivering to such Authorized Health Care Provider my revocation by mail or personal delivery. ESIS requests a copy of such The above-listed medical providers may not condition (withhold or refuse) treating me on whether I sign this Authorization. A photocopy of this Authorization can be accepted with the same authority as the original. Printed Name of Pallent Dat-

of you are a personal representative signing this Authorization, please provide a description of your relationship to the individual and a description of your authority to act for the individual below.

EXPIRATION OF AUTHORIZATION: THIS AUTHORIZATION FOR USE AND/OR DISCLOSURE OF CONFIDENTIAL MEDICAL INFORMATION WILL REMAIN IN EFFECT FOR AS LONG AS MY CLAIM AGAINST GENERAL MOTORS CORPORATION IS PENDING UNLESS IT IS EXPRESSLY REVOKED IN WAITING BY ME AS NOTED ABOVE.

ESIS — General Motors Claims PO Box 300 M/C 482-C19-B61 Datroit, MI 48265-3000

Oztawani

Claim Number: Claims Administrator: Julie Jett

ESIS is the third-party administrator for General Molors Corporation.

ALEGENT HEALTH CONSENT TO OUTPATIENT SERVICES COMMUNITY MEMORIAL HOSPITAL



Authorization for Medical Treatment: I authorize the physician(s), therapist(s), their assistants and/or designees in charge of my medical care to administer any treatment as may be necessary or advisable in my diagnosis and treatment at Alegent Health Facility(s). This authorization includes, but is not limited to routine diagnostic procedures, rehabilitation therapy laboratory tests, x-rays, and transfusions of shood or blood products. I also authorize copies of the medical records to be released to other physicians and healthcare facilities as deemed nocessary by any physician(s) or therapist(s) whose care I am under. I am aware that the practice of mediche is not an exact science and I acknowledge that no guarantees have been made to me as to results of examination and treatment received at this Facility(s). I acknowledge that my care is under the direction of my treating physician(s) and the Facility(s) will follow the instructions of my physician(s) in the provision of said care.

Patient Rights: I, the undersigned, have received a suparate document informing me of my rights and responsibilities as a patient.

Personal Valuables: Facility(s) shall not be liable for my loss of or damage to any personal property.

Assignment of Facility Benefits: I hereby assign all insurance banefits and/or Medicare/Medicald benefits to Facility(s) and authorize direct payment to Facility(s). This assignment specifically includes, but is not limited to, major medical and disability insurance proceeds and benefits. This assignment also includes proceeds and benefits accruing under any settlement, structured or otherwise, or awarded in judgment for personal injuries caused by a third party. I agree to pay for any and all charges not paid pursuant to this assignment. A photocopy of this assignment shall be as valid as the original.

Assignment of Professional Benefits: I hereby assign all insurance benefits and/or Medicare/Medicaid benefits to all physician(s), therapist(s) and/or medical professionals providing services to me and authorize direct payment to physician(s) and therapists(s). This assignment specifically includes, but is not limited to, major medical and disability insurance proceeds and benefits. This assignment also includes proceeds and benefits accruing under any settlement, structured or otherwise, or awarded in judgment for personal injuries caused by a third party. I agree to pay for any and all charges not paid pursuant to this assignment. A photocopy of this assignment shall be as valid as the original.

Authorized Representative: I hereby authorize Facility(s), its agents and representatives to act on my behalf to recover benefit daims, appear adverse benefit determinations, and to take any action deemed necessary to obtain payment for services provided to me by Facility(s).

Statement of Responsibility: I understand that I am financially responsible to the Facility(s) as the potient, porent, guardian, conservator or insured for all charges not covered by the above assignments. Charges may include medical insurance deductibles, coinsurance, or out-of-pocket expenses. I authorize Facility(s) or physician(s) to access and review my credit report for purposes related to billing or collection of accounts payable to Facility(s) or physician(s).

Authorization to Release Information to Insurance Company/Third Party Payor: I hereby authorize Fecitiy(s), any authorized healthcare provider, including Veleran's administration or governmental hospital, any insurance company or any other person, institution, or organization to release my medical record to any person, corporation, workers' componisation carrier, governmental agency (or representative thereof) which is, or may be, liable under any contract or governmental program to this Facility(s), the patient, or a family member for all or part of the Facility's charge. This Facility(s) will endeavor to protect the confidentiality of my medical records. However, this Facility(s) shall not be table by reason of its release of said medical records or any part thereof when responding in good faith to an apparently valid release.

Noncovered Medicare/Medicald Services: The Medicare and Medicald Programs have certain inpatient, outpatient and observation hospital admissions that are excluded from coverage, including but not limited to: cosmetic surgery, non-medically related certal surgery, routine diagnostic workups, routine physical exams, and oral drugs. I acknowledge I am financially responsible for all charges incurred if my medical chart indicates my admission is for any of the foregoing treatments.

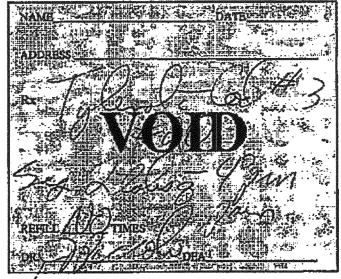
Please initial: Market acknowledge receipt of Alegent Health's Notice of Privacy Practices.

The undersigned certifies that he or she has read the foregoing, is the patient, patient's guardian, power of attorney, parent or is duly authorized by or on behalf of the parent to execute the above and accept its terms.

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PICCOLD JOSEPH T 02/17/08
JONES CHRISTIAN W yler Rural Hospitals Alegent Health Community Skimerial - Mo Valley 712-642-2784 Mercy - Coming Memorial - Schayter



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| ZWI) require time off work/school estimated time | 20m - 44 | <u> М.Б.</u> |
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WHITE: Medical Records YELLOW: Patient



This is your healthcare

SEX N AGE 21
WHN 110464 DOB (0/08/1987
PICCOLO JOSEPH T 02/17/09
JOHES OMBISTIAN W

The Patient was given the following documents on Jan 21, 2009

Acetaminophen/Codeine (Oral) (Tablet, Capsule, Liquid) - DrugNote, English

CareNotes™ System

Page 1 of 4



This is your healthcare



The Patient was given the following documents on Nov 17, 2007

Naproxen (Oral) (Tablet, Liquid, Tablet, Enteric Coated, Tablet, Extended Release) - DrugNote, English



Y SERVICES RECORD



| Chief Complaint Related History: | |
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COMMUNITY MEMORIAL HOSPITAL 631 North Eighth Street Missouri Valley, IA 51555

| EMERGENCY ROOM | |
|---|------------------------|
| Patient Name: | Medical Record Number: |
| Attending Physician: Joseph T Piccolo, MD | Encounter Number: |
| Admission Date: 02/17/2009 | Discharge Date: |

This is a 21-year-old gentleman that a short time ago was invoked with a single vehicle MVA. Apparently, he was going around the comer, heading east on 680 on his way to Shelby, lowa. He was just off of northbound I-29. His steering column apparently coked up, apparently, there has been a recall for that problem on the Chevrolet Cobalt. He apparently went into the abutment a couple times and was able to stop his vehicle. He was restrained. He has some pain over his clavicle. His airbags did not deploy. He was backboarded and G-collared and brought here, but was ambulatory at the scene.

OBJECTIVE:

General: A healthy appearing 21-year-old centileman, C-collared and backboarded. He is awake and afert with pupils that are equally reactive.

Nose and Throat: Negative.

Necic: Nontender on palpation and with passive range of motion, no tenderress, so

the C-collar was removed.

Back: Showed no costovertebral angle tenderness. No spinous tenderness.

Pelis: No pelvio tendemess.

Extremities: No extremity tenderness or lower leg extremity tendemess, so the backboard was removed. He has an abrasion and tenderness over the left clavicle. I see no deformity, but x-X-ray was performed and it was negative.

Lungs: Clear. Heart: Regular. Abdomen: Benign.

IMPRESSION:

- Abrasion, contusion left clavicle.
- Status post motor vehicle accident.

PLAN: His tetanus is up-to-date. He was given some Naprosyn and Tylenol with codeine, as needed for pain. He will be sore for a few days. He will return with any acute problems.

D: 02/17/2009 03:14 PM /JTP Job: 4392489 SR

EMERGENCY ROOM Page 1 of 2

COMMUNITY MEMORIAL HOSPITAL 631 North Eighth Street Missouri Valley, IA 51555

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| Admission Date: 02/17/2009 | Discharge Date: |

T: 02/18/2009 09:05 AM /nsm Doc: 09

CC: Joseph T Piccolo, MD Christian W Jones, MD

If this report for the electronic medical record does not contain the Practitioner's electronic signature, it is not complete and thus not considered the final legal document.

Joseph T Piccolo, MD EMERGENCY REPORT

Signed by PICCOLO MD, JOSEPH on 21-Feb-2009 08:14:16 -0580

EMERGENCY ROOM Page 2 of 2

MR#: 110484

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| Adm DTime: Nurse Sta: | 02/17/2009 14:35 | | Ata Dr. | Piccolo, Jose | ph T |
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| Alrg: | Not Assessed | | | | |
| | | THE SE | t Result *** | | |
| Order Name: | Clavicle | | | Observation Dti | rme: 02/17/2009 14:53 |
| Result Name: | Clavicle | | | Result Status: | Final Resul: |
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| *******EIW | L REFORT***** | • | | | |
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| | ERVICES REPORT | ******* | ****** | **** | |
| PP NAME: | | | | | |
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| | :JOSEPH PICCOLO | | | | |
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| Date: 02/3 | | | | | |
| Examination | 1 ** | | | | |
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| IMPRESSION: | | .13. | | | |
| | le negative for | acute fracture. | | | |
| GGE/sjc | | | | | |
| Interpretin | g Physician:GRE | KORY G. ECKERT, M.D. | • | | |
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| Comments | | | | | |
| Result Comme | nis: | | | | |
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| Requisition Cor | nments: | | | | |
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Pt Name:
Rm/Bod:

MRN: 110484

Page 1 of 1

Clavicle Results Report

ORE_0128.pt Version 1.00 Printed By, Elderbaum, Danitz Medical Records T Printed On: 08-Apr-09 09:15 Claims Administrator: Claim Number:

Date of Event:

Julie Jett

2/17/2009

CONSENT TO DEVELOP WAGE INFORMATION

| I, the undersigned, hereby authorize and requ | test that my employer, |
|--|---|
| | Employer Name |
| Shelby Jowa | Employer Address |
| 712-207-2636 | Employer Phone Number |
| release information related to my earnings an | id loss of earnings to: |
| ESIS – General Motors Claims PO Box 300 Mail Code 482-C20-D71 Detroit, MI 48265-3000 | |
| Printed Name of Employee* | I Date CDC 42 |
| TANGE PARTY AND PROPERTY. | Date of Birth |
| Address, City, State and Zip | Social Security (Statement of Statement of St |
| Signature of Employee* \$45160 | Date Signed 3 - 12 - 0 9 |
| The you are a personal representative signing relationship to the individual and a description | this Authorization, please provide a description of your not your authority to act for the individual below. |
| Relationship to individual: $\underline{Se/f}$ | |
| Authority to act for individual: | A second |

THIS AUTHORIZATION FOR USE AND/OR DISCLOSURE OF CONFIDENTIAL WAGE INFORMATION WILL REMAIN IN EFFECT FOR AS LONG AS MY CLAIM AGAINST GENERAL MOTORS CORPORATION IS PENDING UNLESS IT IS EXPRESSLY REVOKED IN WRITING AT AN EARLIER TIME.



ESIS/GM Central Claims Unit P.O. Box 300 Mail Code 482 C19 B61 Detroit, MI 48265-3000 800.888.0164 tel 313.665.0911 fax

Julie Jett Claims Administrator

March 26, 2009

Mcnards
9 East Street
Shelby Iowa 51570
Attention: Personnel Manager

RE:

Our File No.:

Our Client:

General Motors Corporation .

Employee Name:

Date/Event:

2/17/2009

Date of Birth:

10/6/1987

ESIS is the third party administrator handling claims on behalf of General Motors Corporation.

The claimant named above is presenting a claim against General Motors Corporation. We understand that this person is your employee.

Please assist us in giving this matter fair consideration by answering the questions listed below and returning this form to the above listed address. Attached is the Consent to Develop Wage Information form for your file.

Thank you for your cooperation.

Sincerely,

JULE JULE
Julie Jett
Claims Administrator

Enclosure

| How Long Employed? 9/9/88-to 3/35/6/Weel | dy wage: Gross _ <u>348,21</u> | Net: 272.21 Caverage |
|---|--------------------------------|------------------------|
| Absent because of the above dated accident from _ | 2/20/09 + 2/ | 25/09 |
| Was this person paid during his/her absence? | D If so, how much? | · |
| Time Lost from work during six-month period prior | r to accident 1 days | Mandy-move-supermonana |
| Other accidents (give date, place apd TVDs) | one | |
| Signature | Title | Date 4-8-0-7 |

A Rish Management Services Company-One of the ACE Group of Companies





CDR File Information

| User Entered VIN | 1G1AK18F687 |
|----------------------------|--|
| User | Tom Ellingsworth |
| Case Number | 667691 |
| EDR Data Imaging Date | Thursday, March 12 2009 |
| Crash Date | Tuesday, February 17 2009 |
| Filename | 1G1AK18F687 CDR |
| Saved on | Thursday, March 12 2009 at 10:14:48 AM |
| Collected with CDR version | Crash Data Retrieval Tool 3.1.1 |
| Reported with CDR version | Crash Data Retrieval Tool 3.1.1 |
| EDR Device Type | airbag control module |
| Event(s) recovered | None |

IMPORTANT NOTICE: Robert Bosch LLC recommends that the latest production release of Crash Data Retrieval software be utilized when viewing, printing or exporting any retrieved data from within the CDR program. This ensures that the retrieved data has been translated using the most recent information including but not limited to that which was provided by the manufacturers of the vehicles supported in this product.

Data Limitations

Recorded Crash Events:

There are two types of recorded crash events. The first is the Non-Deployment Event. A Non-Deployment Event records data but does not deploy the air bag(s). The minimum SDM Recorded Vehicle Velocity Change, that is needed to record a Non-Deployment Event, is five MPH. A Non-Deployment Event contains Pre-Crash and Crash data. The SDM can store up to one Non-Deployment Event. This event can be overwritten by an event that has a greater SDM recorded vehicle velocity change. This event will be cleared by the SDM, after approximately 250 ignition cycles. This event can be overwritten by a second Deployment Event, referred to as Deployment Event #2, if the Non-Deployment Event is not locked. The data in the Non-Deployment Event file will be locked, if the Non-Deployment Event occurred within five seconds of a Deployment Event. A locked Non Deployment Event cannot be overwritten or cleared by the SDM.

The second type of SDM recorded crash event is the Deployment Event. It also contains Pre-Crash and Crash data. The SDM can store up to two different Deployment Events. If a second Deployment Event occurs any time after the Deployment Event, the Deployment Event #2 will overwrite any non-locked Non-Deployment Event. Deployment Events cannot be overwritten or cleared by the SDM. Once the SDM has deployed an air bag, the SDM must be replaced.

Data:

- -SDM Recorded Vehicle Velocity Change reflects the change in velocity that the sensing system experienced during the recorded portion of the event. SDM Recorded Vehicle Velocity Change is the change in velocity during the recording time and is not the speed the vehicle was traveling before the event, and is also not the Barrier Equivalent Velocity. For Deployment Events, the SDM will record 220 milliseconds of data after deployment criteria is met and up to 70 milliseconds before deployment criteria is met. For Non-Deployment Events, the SDM can record up to the first 300 milliseconds of data after algorithm enable. Velocity Change data is displayed in SAE sign convention.
- -Maximum Recorded Vehicle Velocity Change is the maximum square root value of the sum of the squares for the vehicle's combined "X" and "Y" axis change in velocity.
- -Event Recording Complete will indicate if data from the recorded event has been fully written to the SDM memory or if it has been interrupted and not fully written.
- -SDM Recorded Vehicle Speed accuracy can be affected by various factors, including but not limited to the following:
 - -significant changes in the tire's rolling radius
 - -final drive axle ratio changes
 - -wheel lockup and wheel slip
- -Brake Switch Circuit Status indicates the open/closed state of the brake switch circuit.
- -Pre-Crash data is recorded asynchronously.
- -Pre-Crash Electronic Data Validity Check Status indicates "Data Invalid" if:
 - -the SDM receives a message with an "invalid" flag from the module sending the pre-crash data
 - -no data is received from the module sending the pre-crash data
 - -no module is present to send the pre-crash data
- -Driver's and Passenger's Belt Switch Circuit Status indicates the status of the seat belt switch circuit, except: The Passenger Belt Switch Circuit Status for 2005 vehicles is available only on the Cadillac STS. The Passenger Belt Switch Circuit Status for 2006 Chevrolet Cobalt Sport Coupe (AP) model vehicles, with the option package that includes Recaro brand seats (RPO ALV), always reports a default value of "Buckled," because there is no passenger belt switch with the Recaro seat option.
- -The Time Between Non-Deployment to Deployment Events is displayed in seconds. If the time between the two events is greater than five seconds, "N/A" is displayed in place of the time. If the value is negative, then the Deployment Event occurred first. If the value is positive, then the Non-Deployment Event occurred first.
- -If power to the SDM is lost during a crash event, all or part of the crash record may not be recorded.
- -The ignition cycle counter relies upon the transitions through OFF->RUN->CRANK power-moding messages, on the GMLAN communication bus, to increment the counter. Applying and removing of battery power to the module will not increment the ignition counter.





-Steering Wheel Angle data is displayed as a positive value when the steering wheel is turned to the right and a negative value when the steering wheel is turned to the left, except for Cadillac STS model vehicles with StabiliTrak 3.0 systems (RPO JL7). For Cadillac STS model vehicles with StabiliTrak 3.0 systems (RPO JL7), when the steering wheel is turned to the right, a negative value will be displayed and when the steering wheel is turned to the left, a positive value will be displayed. The Steering Wheel Angle data is reported in 16 degree increments.

Data Source:

All SDM recorded data is measured, calculated, and stored internally, except for the following:

- -Vehicle Status Data (Pre-Crash) is transmitted to the SDM, by various vehicle control modules, via the vehicle's communication network
- -The Belt Switch Circuit is wired directly to the SDM.





Hexadecimal Data

Data that the vehicle manufacturer has specified for data retrieval is shown in the hexadecimal data section of the CDR report. The hexadecimal data section of the CDR report may contain data that is not translated by the CDR program. The control module contains additional data that is not retrievable by the CDR system.

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Comments

SIR data being downloaded via the DLC at the claimant's residence in Council Bluffs, IA, using the vehicle battery for power. The SIR lamp illuminates, flashes and extinguishes. Mileage is 18,364. Tom Ellingsworth and Jacob Van Bibber are present

Disclaimer of Liability

The users of the CDR product and reviewers of the CDR reports and exported data shall ensure that data and information supplied is applicable to the vehicle, vehicle's system(s) and the vehicle ECU. Robert Bosch LLC and all its directors, officers, employees and members shall not be liable for damages arising out of or related to incorrect, incomplete or misinterpreted software and/or data. Robert Bosch LLC expressly excludes all liability for incidental, consequential, special or punitive damages arising from or related to the CDR data, CDR software or use thereof.

PE10-005
GM
4/14/2010
ATTACHMENT
Q03
SUBJECT LEGAL
ATTACHMENT

| SR No. | 1-420664758 | Ref No. | | Goodwill | *************************************** | | | BRC Type | PAR |
|-------------|------------------------------|-------------|--|--------------|---|---|---|-----------|---|
| Account | | Site | | GW SubType | • | *************************************** | | Bus. Unit | BRC |
| .ast Name | | First Name | MONOCOURA DE COMPANSA DE COMPA | Approval | Not Initiate | d | ************ | Area | PAR |
| Daytime # | | Evening # | | UCC | Steering - | General | | Sub-Area | Initiate PAR- Collision |
| ddress | n. | City Ha | withorne | Involved Dir | Hawthome | Automobile ! | Sales | Safety | Yes |
| itate | NJ ZipCd | Con Acct | | Source | Phone | *************************************** | *************************************** | Updated | 7/14/2006 2:55:07 PM |
| iorial #VIN | 1G1AK52F267 | Model Year | 2005 | Priority | Medium | License # | CHEVROL | Owner | MERZTIFD |
| flake | Chevrolet | Warr. Start | 04/14/2005 | Status | Open | *************************************** | | Opened | 7/12/2006 4:29:31 PM |
| Nodel | Cobalt | Mileage | 23000 | Sub-Status | | *************************************** | *************************************** | Closed | 771 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| bstract | Cust calling about veh wreck | | | Astr. Astr. | - | | *************************************** | Cioseo | |

Pre-PAR

| PAR Notifier | Incident | Date/Time | Injuries # Oth | rVeh #F | ennle in Re | ad Surfa | ra Pos | d Cond. Fire Rej | |
|---------------------------|--|---------------------|--|-----------------------|--|--|-----------------------------|--|---|
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| Kusic | | | Carolyn | (SINE DIIS) (NE | CHARLES CONTRACTOR CON | # '97-6600 | | ise/Agency Assurance | |
| Incident Loc | Plaza Rd, ab | out 150 feet away | from Berdan S | ŧ | | Incide: Desc | t Came off : back left b | 208 hw, left on Pla ecause veh locke | za Rd, through the intersection, going around a curb, could not pull |
| Component | Powersteerin | g, it locked and cu | st could not m | ove the whe | el | - | | | |
| Vehicle Loc | 700 Federal i | | | | | Dama(Desc | • | side door jam, hit a | telephone poli, car is totalled, "a ball of metal sitting on an engine" |
| Emgcy Svc Names | | er, patrolman | | | | Add'i le | | | RECED |
| PAR Del | tail | | ************************************** | | ······································ | Maint I | oc Hawthorne | Chevrolet | JULIVED |
| Collision | Y No | on Collision | Prop | | Thermal Evt | N | Spec Equip | no | -0/4 |
| Vehicle Speed | 40 | | Weat Cond | | ining | ottomoromoromy or party of the control of the contr | Prop Owner | The state of the s | Property Type |
| Last Service Date | 6/21/2006 | | Loc L Servi | | | | Property Location | | Prop Est Repair Cost |
| Veh Est Repair Cost | | | Spec Insta | Equip no ler | | | Prop Damage Description | | |
| Primary Veh Use | Personal | | Inspe Type | ction | | | Inspected By | | inspection Date/Time |
| Veh Damage Description | | | | | | dananana (kanan-tahan-tah | Explain Other | TOTAL THE TAX AND AN ARTHUR SECTION AND AN ARTHUR SECTION AS A SECTION | |

Report Generated for TOPOROWM on 7/17/2006

PAR Injuries

Phone # Seating Pos Restraint Type
Occupant of Owner's Vehicle Driver Lap and shoulder seatbelts

| District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District Name | District N

Left knee sprained, Right ring finger broken, Left shoulder Did not receive it injury (seatbelt? impact? cust does not know) MiRJ still not done, family doctor thinks there may be something torn? Pending MRI when it is approved

 Street Address
 City
 State
 Zip Code

 123 2nd Ave
 Hawthorne
 NJ
 07506-2409

Activities

Created Created By Assigned To Activity Type Activity Sub-Type Status Completed Description
7/14/2006 2:55:08 PM MERZTIFD MERZTIFD Ownership Changed Ownership Escalated to BRC

Contact Last Name Contact Even Name Account BAC Code

Confidential Comments

Created By Assigned To Activity Type Activity Sub-Type Status Completed Description
7/14/2006 2:51:28 PM MERZTIFD MERZTIFD PAR Case Assessment Injury Major Done 7/14/2006 2:54:19 PM With Injury Major
Contact Last Name Contact First Name Account BAC Code

Type of Injury:Left knee sprained, Right ring finger broken, Left shoulder injury (seatbelt or impact caused) cust family dr thinks that there is something wrong but will not be able to tell until a MRI is done

Tiffany merz/par/21196

Confidential Comments

Report Generated for TOPOROWM on 7/17/2006

Page 2 of 9

Activities

| Created Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description | 569 |
|---|-------------|----------------------------------|-------------------|--------|----------------------|--------------|------------|
| 7/14/2006 2:51:27 PM MERZTIFD | MERZTIFD | Outbound Call Field Rep/Whisi | | Done | 7/14/2006 2:53:19 PM | Notification | |
| Contact Last Name | Contact Fir | l Name | Account | | BAC Code | | |
| Comments Notified of forwarding to ESIS | | | | | | l | |
| see inital call | | | | | | | |

Tilfany merz/par/21196

Confidential Comments

| Created Created P | APPENDENCE OF THE PARTY AND ADDRESS OF | Activity Type | Activity Sub-Type | Status . | Completed | Description |
|--|--|----------------------|-------------------|----------|----------------------|--------------|
| 7/14/2008 2:51:27 PM MERZTIF | D MERZTIFD Contact En | Outbound Call Dealer | 71 | Done | 7/14/2006 2:53:03 PM | Notification |
| | Voine sa an | a Marie | Account | | BAC Code | |
| Comments Notified of forwarding to ESIS | | | | | | |

see inital call

Tiffany merz/par/21196

Confidential Comments

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type Status Complete: | |
|---|------------|--|---|------------------------------------|--|
| 7/14/2006 2:51:27 PM | MERZTIFD | ESISBIQU | Escalation | In Progress | The state of the s |
| Contact Last Name | | Contact Firs | Name | | <u>-</u> |
| GPPROVIDE FOR THE STATE OF THE | | 8 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | Z. CAC COU | |
| Comments | | | | | |
| Confidental Communication | | | | | |
| | | | | | |
| | | | *************************************** | | |
| Contact Last Name Comments Confidential Comments | | | | Account BAC Cod | Injulreis le |

Report Generated for TOPOROWM on 7/17/2006

Page 3 of 9

Activities

| Created Created By 7/14/2006 2:51:26 PM MERZTIFD | Assigned To MERZTIFD | Activity Type BRC PAR | Activity Sub-Type Close | Status Done | Completed 7/14/2006 2:52:26 PM | Description Sent to ESIS |
|--|-------------------------|--------------------------|----------------------------|----------------|-----------------------------------|--------------------------|
| Contact Last Name Comments | Contact Firs | f Name | Account | | BAC Code | |
| Final Business Case Summary | (100) | | | | | |

Cust alleges that the power steering locked up causing accident. Due to cust injuires case will be sent to ESIS

Tiffany Merz/par/21196

Confidential Comments

| Greated Greated By Assigned To Activity Type Activity Sub-Type | Status | Completed | Description |
|--|--------|-----------|----------------------------------|
| 7/14/2006 2:51:21 PM | Done | | 1-420664758, BRC PAR Case Assess |
| Contact Last Name Account | | BAC Code | Injury Major |
| Comments | | | |
| Confilents | | | |

| Created | | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|----------------------|----------|-------------|---------------------|-------------------|--------|----------------------|-------------|
| 7/14/2006 9:16:57 AM | MERZTIFD | | Scheduled Follow-up | | Done | 7/14/2008 2:51:18 PM | Follow up-2 |
| Cantact Last Nama | | CANAMETS | Name | Account | | BAC Code | |
| COMMENS | | | | | | | |
| 1-5 | | | | | | | |

Tiffany merz/par/21196

Confidential Comments

Report Generated for TOPOROWM on 7/17/2006

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Activities

| | | Activity Type | Activity Sub-Type | Status | Completed | Description |
|-----------------------|---------------|-------------------|-------------------|--------|----------------------|-------------------------------------|
| | MERZTIFD | Ownership Changed | | Done | 7/13/2006 9:46:25 AM | Service Request Ownership has |
| Contact Last Name | Control Cirst | Name | Account | | BAC Code | changed FROM: ALVEARMI TO: MERZTIFD |
| Comments | | | | | | |
| | | | | | | |
| Confidential Comments | | | | | | |

| Preated | | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|---------------------|----------|--------------|---------------|-------------------------|--------|----------------------|-------------|
| /13/2006 9:45:28 AM | JACKSOLI | MERZTIFD | BRC PAR | Initial Contact- Dealer | Done | 7/13/2006 5:27:43 PM | Called |
| Contact Last Name | | Contact Firs | t Name | Account | | BAC Code | |

Comments

Summary:Crm spoke with Svc Mgr@Hawthorne Automobile Sales Company

Crm advised that was calling to advise of PAR case. Crm advised that cust is alleging that the power steering locked up causing cust accident

Crm left message

Tiffany merz/par/21196

Confidential Comments

| | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|-------------------------------|--------------|---------------|-------------------|--------|----------------------|-------------|
| 7/13/2008 9:45:28 AM JACKSOLI | MERZTIFD | BRC PAR | Acknowledgement | Done | 7/14/2006 9:16:36 AM | Called |
| Contact Last Name | Contact Firs | l Name | Account | | BAC Code | |

Comments

Summary:Crm advised that have recieved case in PAR. Crm left direct phone number and extension.

Crm left message

Tiffany merz/par/21196

Confidential Comments

Report Generated for TOPOROWM on 7/17/2006

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Activities

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|----------------------|------------|---------------|---------------|------------------------|--------|----------------------|-------------|
| 7/13/2006 9:45:28 AM | JACKSOLI | MERZTIFD | BRC PAR | Initial Contact- Phone | Done | 7/14/2006 2:51:15 PM | Called |
| Contact Last Name | | Contact First | Name | Account | | BAC Code | |
| | | Na. | | | | | |

Summary:Crm advised that was calling to go over case.

Crm confirmed pre par and par detail screen

Cust states that we know everything. Cust states that she is not sure how we would inspect the veh if we needed to because the damage is right at the

Cite: No

Cust states that she is going to hire a attorney to handle the entire accident.

Crm advised that the case is going to be sent over to ESIS for her injuiries. Crm adised that someone from central claims will be in contact w/her in 7-10 business days, Crm advised that we she does hire a attorney that central claims can work w/attorney.

tiffany merz/par/21196

| Created 7/13/2006 9:45:27 AM | Orenied By JACKSOLI | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|------------------------------|------------------------|------------------------|------------------|-------------------|--------|-----------------------|---------------|
| Contact Last Name | JACKSULI | MERZIIFU MODISCIEIS | Notify CRM | Account | Done | 7/13/2006 12:40:13 PM | File Assigned |
| | | | MANUE TO SERVICE | As some | | BAC Cade | |
| Comments | | | | | | | |
| Confidential Comments | | u.ju. | | | | | |
| | | | | | | | |

Report Generated for TOPOROWM on 7/17/2006

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Activities

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description | |
|----------------------|------------|--------------|---------------|-------------------|--------|-----------------------|----------------|------------|
| 7/13/2006 9:45:27 AM | JACKSOLI | MERZTIFD | Research | | Done | 7/13/2006 12:52:08 PM | Researched VIN | *sometimes |
| Contact Last Name | | Contact Firs | Name | Account | | BAC Code | | |

Comment

Summary:Crm preformed case scan and found no related recalls but did find legal file where power steering pump is listed as a UCC 1-346113516

Tiffany merz/par/21196

Confidential Comments

| 240000000000000000000000000000000000000 | | | | | | | |
|---|------------|--------------|---|----------------------|--|----------------------|---------------------------|
| Created | Created By | Assigned to | Activity Type | Activity Sub-Type | Status | Completed | Description |
| 7/13/2006 9:45:27 AM | JACKSOLI | MERZTIFD | BRC PAR | Initial Contact- AVM | Done | 7/14/2006 9:11:52 AM | Heintz Robert 914055 8474 |
| | | | Several and the second | | 2012/2010/00/00/00/00/00/00/00/00/00/00/00/00/ | | , |
| Contact Last Name | | Contact Firs | . Name | Account | | BAC Code | ' |

Comments

Summary:Crm advised AVM of cust allegation. Crm advised that due to the injuries in the case it is being fowarded to central claims for handling. Crm advised if he has any additional info that it would be appricated

Tiffany merz/par/21198

Confidential Comments

| Created 7/13/2006 9:45:26 AM | Created By JACKSOLI | Assigned To MERZYIFD | Activity Type BRC PAR | Activity Sub-Type Case Assigned | Status Done | Completed 7/13/2006 12:40:03 PM | Description Assigned File to Tiffany Merz an |
|------------------------------|------------------------|-------------------------|--------------------------|------------------------------------|----------------|------------------------------------|--|
| Contact Last Name | | Contact Firs | t Name | Account | | BAC Code | Ext.21196 |
| Comments | | | | | | | |
| Confidential Comments | ent, en exe | | | | | | |

Report Generated for TOPOROWM on 7/17/2006

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Activities

| Created Created By Assigned To Activity Type Activity Sub-Typ 7/13/2006 9:45:24 AM | e Status Done | Completed 7/13/2006 9:45:39 AM | Description 1-420664758, BRC PAR Assignor |
|--|------------------|-----------------------------------|--|
| Contact Last Name Contact First Name Account | | BAC Code | |
| Comments | | | |

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|----------------------|------------|--------------|---------------|-------------------|--------|----------------------|---------------------------------|
| 7/12/2006 5:22:50 PM | ALVEARMI | JACKSOLI | Escalation | Initiate PAR | Done | 7/13/2006 9:25:15 AM | Assigning activity to PAR QUEUE |
| Contact Last Name | | Contact Firs | f Name | Ассонпі | | BAC Code | |
| pontour cust manne | | - Juniaum na | 1.00 | | | B10 9045 | |

CRM advised that a person from the PAR Department will contact the customer within 2 business days

miguel aivear/ab/cac/temp

Received and assigned in par.

Linette Jackson/abr/par workflow

Confidential Comments

| Created | Created By | Assigned To | Activity Type | Activity Sub-Type | Status | Completed | Description |
|----------------------|------------|--------------|-----------------------|-------------------|--------|----------------------|--|
| 7/12/2006 5:06:41 PM | ALVEARMI | ALVEARMI | Inbound Call Customer | Complex Request | Done | 7/12/2006 5:10:42 PM | Alleged product allegation - collision |
| Contact Last Name | | Contact Firs | Name | Account | | BAC Code | caused by powersteering |

Cust states: had a collision due to the powersteering locking up on a curb, which caused cust to hit a pole

Cust seeks: legal assistance

CRM adv: cust's info will be forwarded to the Product Allegation Department within the BRC

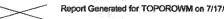
miguel alvear/abt/cac/temp Confidential Comments

Report Generated for TOPOROWM on 7/17/2006

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UCC Information

| UCC Code | Symptom | Description |
|----------|-------------|--------------------|
| M01 | Inoperative | Steering - General |
| | | |



1G1AK52F257

R.O

Number

R.O Date

VIN:

Odometer

Reading

GM Vehicle Inquiry System Summary

<u>Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title</u>

Help

| A ELA : | | 1.0 | 117717 | C321.237 | | | | * W4-2 6 08 S.H. H2 | | | |
|-----------------|--------------|---------------|--------|---------------------------|---------|-------------------|--------------------|----------------------------|----------|--------|-----------------|
| | | | | VEHICL | E IN | FORMAT | ION | | | | |
| Merch | andising M | lodel : | 1A | K69 -2005 COBALT 4-D | OOR | SEDAN | Warranty S | tart D | ate : | 04/14/ | 2005 |
| BARS | Order Typ | e: | 70 | - RETAIL - STOCK | | | | | | | |
| Delive | ring Dealer | • • | | WTHORNE CHEVROL | EΤ | | Selling Sour | ce: | | 13 - C | HEVROLET |
| | | | HA | BOX 8 WTHORNE, NJ 0750 | 7-000 | 8 | Site Code : | | | 02127 | |
| | | 7 | (97 | 73) 427-1560 | | | Business Ass | sociat | e Code : | 11121 | 1 |
| Serv | ice Contrac | t: | No | Branded Title : | No | Warra | nty Block: | No | PDI S | atus : | Paid |
| | | | | REQUIRE | ED FI | ELD ACT | IONS | | | | |
| Туре | Number | | | Desci | ription | | | | Poste | l Date | Status |
| RC | <u>05046</u> | A/C S WIRI | | EM WIRING AND DUA | VL ST | AGE AIRE | BAG MODUL | Æ | N. | /A | Closed |
| | | | | SERVICE INI | ORM | IATIONA | LITEMS | | | | |
| Vehicl | le Has No C | urrent | Rec | ord Of Outstanding Ser | vice I | nformatio | 1 | | | | |
| | | | C | ON STAR AND XM SAT | rell | ITE RADI | O INFORM | ATIO | N | | |
| Vehicl | le Has No A | ssociat | ed O | n Star or XM Radio Inf | forma | tion. | | | | | |
| | | | | APPLICA | BLE ' | WARRAN | TIES | | | | |
| | | De | escri | ption | | Effective Date | Effectiv Odomet | | End Da | te | End Odometer |
| 36/360 | 000 BUMPE | R TO E | BUM | PER | | 04/14/200: | 15 1 | niles | 04/14/20 | 08 | 36015 miles |
| 72/100 THRO | | META | AL C | OVERAGE RUST | | 04/14/200: | 5 15 1 | miles | 04/14/20 | 11 | 100015 miles |
| 96/800 AND I | | AL EM | ISSI | ON CATALYTIC CONV | | 04/14/200: | 15 1 | miles | 04/14/20 | 13 | 80015 miles |
| 36/500 | 000 CALIFO | RNIA | EMI | SSIONS | | 04/14/200: | 15 1 | miles | 04/14/20 | 08 | 50015 miles |
| 84/700 | 000 CALIFO | RNIA | SELI | ECT COMPONENT | | 04/14/2005 | 5 15 r | niles | 04/14/20 | 12 | 70015 miles |
| 60/600 | 000 POWER | TRAIN | I - U. | S. | | 04/14/2005 | 5 15 r | niles | 04/14/20 | 10 | 60015 miles |
| | | | | CLA | IM H | ISTORY | | | | | |
| | | | | | | | | | | | |

Labor Operation

| 03/21/2006 | 275856 | # | J6441 - VALVE, EVAPORATIVE EMISSION CANISTER VENT SOLENOID - REPLA | 25286 | miles |
|------------|--------|---|---|-------|-------|
| 03/21/2006 | 275856 | # | Z7901 - 1-DAY COURTESY TRANSPORTATION | 25286 | miles |
| 11/01/2005 | 267249 | # | B4181 - CYLINDER, FRONT DOOR LOCK - LEFT - R&R OR REPLACE | 15752 | miles |
| 11/01/2005 | 267249 | # | Z7901 - 1-DAY COURTESY TRANSPORTATION | 15752 | miles |
| 11/01/2005 | 267249 | # | Z5001 - VIP FREIGHT/POSTAGE REIMBURESEMENT | 15752 | miles |
| 09/14/2005 | 263829 | # | R0754 - RADIO RECEIVER-RETURN TO AC/DELCO ESC | 11997 | miles |
| 09/13/2005 | 263829 | # | N4187 - INSTRUMENT CLUSTER-ASSEMBLY RETURN TO AC DELCO ESC | 11997 | miles |
| 09/13/2005 | 263829 | F | Z7200 - CORPORATE PARTS RETURN REIMBURSEMENT | 11997 | miles |
| 09/09/2005 | 263829 | # | R0760 - RECEIVER, RADIO - REMOVE, REPAIR, AND REPLACE | 11997 | miles |
| 09/09/2005 | 263829 | # | N4180 - CLUSTER ASSEMBLY, INSTRUMENT PANEL - R&R OR REPLACE | 11997 | miles |
| 09/09/2005 | 263829 | # | E7680 - COLUMN ASSEMBLY, STEERING - REPLACE | 11997 | miles |
| 09/09/2005 | 263829 | # | Z7903 - 3-DAY COURTESY TRANSPORTATION | 11997 | miles |
| 06/28/2005 | 258526 | # | R0754 - RADIO RECEIVER-RETURN TO AC/DELCO ESC | 5598 | miles |
| 06/10/2005 | 257200 | # | R0760 - RECEIVER, RADIO - REMOVE, REPAIR, AND REPLACE | 4358 | miles |
| 06/07/2005 | 256967 | # | R0754 - RADIO RECEIVER-RETURN TO AC/DELCO ESC | 4086 | miles |
| 06/06/2005 | 256845 | # | V1359 - 05046 - REWIRE AIRBAG AND INSTALL JUMPER HARNESS | 4051 | miles |
| 06/06/2005 | 256845 | # | Z7910 - 1-WAY SHUTTLE COURTESY TRANSPORTATION | 4051 | miles |
| 01/26/2005 | A39823 | I | Z7000 - PRE-DELIVERY INSPECTION - BASE TIME | 0 | miles |

CHECK HISTORY INFORMATION

| Check Date | R.O Number | Labor Operation | Odometer Reading |
|---------------|---------------|---------------------------|---------------------|
| 11/10/2005 | N/A | Z7090 - CAS REIMBURSEMENT | 0 miles |
| 11/10/2005 | N/A | Z7090 - CAS REIMBURSEMENT | 0 miles |

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VIN:

1G1AK52F257

GM Vehicle Inquiry System Claim History

<u>Home</u> - <u>Summary</u> - <u>Claim History</u> - <u>Vehicle Build</u> - <u>Vehicle Component</u> - <u>Delivery Information</u> - <u>Dealer Information</u> - <u>Service Contract</u> - <u>Warranty Block</u> - <u>Branded Title</u>

<u>Help</u>

| ANA: | | | 1.01 | CLAIM H | TIS | TORY | | | | | |
|---------------|--------------|---------|--------------------|--|-----|---------------------|----------|--------------|----------------|---------------|-------------------|
| Repair Ord | ler Date | : 03 | /21/2006 | T Danais Ordan | T | 75856 | Odom | eter Re | ading : | | 25286 miles |
| Serviced | | | E CHEV | ROLET | Se | elling Sou | rce : | | 13 - | CHEVROL | ET |
| By: | | HORN | | 7507-0008 | Si | te Code : | | | 0212 | 7 | |
| | (973) 42 | 27-1560 |) | | В | usiness A | ssociate | Code: | 1112 | 11 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Pa | rt | Auth Code | | | Comments |
| 03/28/2006 | 677 | 01 | # | J6441 - VALVE, EVAPORATIVE EMISSION CANISTER VENT SOLENOID - REPLA | | 2199314 VALVE | 2 - | N/A | N/A | \$ 78.60 | ¥ |
| 03/28/2006 | 677 | 02 | # | Z7901 - 1-DAY COURTESY TRANSPORTATION | | N/A | | N/A | N/A | \$ 42.00 | <u>Y</u> |
| Repair Ord | | | /01/2009 E CHEV | Repair Order Number: | L | 67249 elling Sou | | eter Re | | CHEVROL | 15752 miles ET |
| By: | PO BOX | | E, NJ 03 | 7507-0008 | Si | te Code : | | | 0212 | 7 | |
| | (973) 42 | | | | Bı | usiness A: | ssociate | Code: | 1112 | 11 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | | Par | t | Auth Code | Person Code | Line Total | Comments |
| 11/11/2005 | 638 | 01 | # | B4181 - CYLINDER, FRONT DOOR LOCK - LEFT - R&R OR REPLACE | | 12451813 CYLIND | - 2 | E | N/A | \$ 200.84 | Y |
| 11/11/2005 | 638 | 02 | # | Z7901 - 1-DAY COURTESY TRANSPORTATION | | N/A | | N/A | N/A | \$ 42.00 | Y |
| 11/11/2005 | 638 | 03 | # | Z5001 - VIP FREIGHT/POSTAGE REIMBURESEMENT | | N/A | | N/A | N/A | \$ 12.50 | Y |

| Repair Ord | ler Date | : 09 | /14/2005 | Repair Order Number : | 263829 | Odom | eter Re | ading: | | 11997 miles |
|-----------------|---------------------------|-------|----------|---|-------------------|---|--------------|----------------|---------------|-------------|
| Serviced By: | MODEI 318 RO SPRINC | OSEVI | ELT | CS 7 10977 | Selling Sou | VARIOUS AND SECURIOR | | 45 - A | A/C DELC | O |
| - | | | | | Business A | ssociate | Code: | 1921 | 06 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Par | t | Auth Code | Person Code | Line Total | Comments |
| 09/30/2005 | 626 | 02 | F | Z7200 - CORPORATE PARTS RETURN REIMBURSEMENT | N/A | | N/A | N/A | \$ 17.00 | Y |
| 09/23/2005 | 624 | 01 | # | N4187 - INSTRUMENT CLUSTER-ASSEMBLY RETURN TO AC DELCO ESC | 8 | 1 | N/A | N/A | \$ 139.27 | Y |
| 09/23/2005 | 624 | 01 | # | R0754 - RADIO RECEIVER-RETURN TO AC/DELCO ESC | 15272189 RADIO | 9 - | В | N/A | \$ 208.18 | <u>Y</u> |

| Repair Ord | ler Date | : 09 | /09/200: | Repair Order Number : | 263829 | Odom | eter Ro | ading | g: | | 11997 miles |
|---------------|--------------------|--------|----------|--|-------------------|----------|--------------|------------|-------|-------------------|-------------|
| Serviced | Land to the second | | E CHEV | ROLET | Selling Sou | rce : | | 1 | 3 - (| CHEVROL | ET |
| By; | | HORN | | 7507-0008 | Site Code: | | | 0 | 212 | 7 | |
| | (973) 42 | :/-150 | U | | Business A | ssociate | e Code : | 1 | 112 | l I | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Par | t | Auth Code | Pers Co | | Line Total | Comments |
| 09/23/2005 | 624 | 01 | # | R0760 - RECEIVER, RADIO - REMOVE, REPAIR, AND REPLACE | N/A | | N/A | N/A | Α | \$ 86.68 | Y |
| 09/23/2005 | 624 | 02 | # | N4180 - CLUSTER ASSEMBLY, INSTRUMENT PANEL - R&R OR REPLACE | N/A | | N/A | N/A | A | \$ 69.34 | Y |
| 09/23/2005 | 624 | 03 | # | E7680 - COLUMN ASSEMBLY, STEERING - REPLACE | 10394224 COLUM | - 1 | N/A | N/A | A | \$ <i>777.</i> 75 | Y |
| 09/23/2005 | 624 | 04 | # | Z7903 - 3-DAY COURTESY TRANSPORTATION | N/A | | N/A | N/J | A | \$ 126.00 | Y |

| Repair Or | der Date : | 06/28/2005 | Repair Order Number : | 258526 | Odometer Read | ing: | 5598 miles |
|-----------|------------|------------|--------------------------|-----------------|---------------|------|------------|
| Serviced | MODEL E | LECTRONIC | S | Selling Source: | | | A/C DELCO |
| | | | | | | | |

| By: | 318 RO | | | 8 | Site Code: | | 19050 |) | |
|---------------|--------------|--------|--------|---|---------------------|--------------|----------------|---------------|----------|
| | SPKING | J VALI | LEY, N | Y 10977 | Business Associate | Code: | 1921 |)6 | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Part | Auth Code | Person Code | Line Total | Comments |
| 09/09/2005 | 620 | 01 | # | R0754 - RADIO RECEIVER-RETURN TO AC/DELCO ESC | 15272189 - RADIO | В | N/A | \$ 208.18 | Y |

| Repair Ord | ler Date | : 06/ | 10/2005 | Repair Order Number : | 257200 | Odom | eter Re | ading: | | 4358 miles |
|---------------|--|------------------------------|-----------------------|--------------------------|--|---|------------------|----------------|---------------|------------|
| Serviced | HAWTI PO BOX | | E CHEV | ROLET | Selling Sou | rce: | | 13 - (| CHEVROL | ET |
| By: | HAWT | HORNI | * | 7507-0008 | Site Code: 02127 | | | | 7 | |
| | (973) 42 | 27-1560 |) | ı | Business Associate Code: 111211 | | | | | |
| | ACCOMPANY DESCRIPTION OF THE PARTY OF THE PA | and the second second second | CONTRACTOR CONTRACTOR | | SECURE ADMINISTRATION OF THE PROPERTY AND ADMINISTRATION OF THE PARTY AND ADMINISTRATION OF TH | CONTRACTOR | Harrison Company | | | - |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Par | t | Auth Code | Person Code | Line Total | Comments |

| Repair Ord | Order Date: 06/07/2005 Repair Order Number: | | | 256967 Odometer Reading: | | | | 4086 miles | | |
|-----------------|---|-------|------|---|---|---------------|--------------|----------------|---------------|----------|
| Serviced By: | MODEI 318 RO | OSEVE | ELT | | Selling Source: 45 - A/C DELCO Site Code: 19050 | | | | | |
| · | SPRING VALLEY, NY 10977 | | | Business Associate Code: | | | | 192106 | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Par | * 1 | Auth Code | Person Code | Line Total | Comments |
| 06/17/2005 | 596 | 01 | # | R0754 - RADIO RECEIVER-RETURN TO AC/DELCO ESC | 19115070 |) | N/A | N/A | \$ 164.77 | Y |

| Repair Or | pair Order Date: 06/06/2005 Repair Order Number: | | | 256845 Odometer Read | | ding: | ing: 4051 miles | | | | |
|---------------|--|------|--------|--------------------------------------|--|-------|-----------------|----------------|----------------|----------|--|
| Serviced | | | E CHEV | ROLET | Selling Sou | rce : | | 13 - C | 13 - CHEVROLET | | |
| By: | PO BOX 8 HAWTHORNE, NJ 07507-0008 (973) 427-1560 | | | 7507-0008 | Site Code : Business Associate Code : | | | 02127 | 02127 | | |
| | | | | | | | | 11121 | 111211 | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Pa | rt | Auth Code | Person Code | Line Total | Comments | |
| 06/10/2005 | 594 | 01 | # | V1359 - 05046 - REWIRE AIRBAG AND | 1578551 HARNE | - | N/A | N/A | \$41.98 | Y | |

| | | | | HARNESS | | | | | |
|------------|-----|----|---|---|-----|-----|-----|---------|---|
| 06/10/2005 | 594 | 02 | # | Z7910 - 1-WAY SHUTTLE COURTESY TRANSPORTATION | N/A | N/A | N/A | \$ 5.00 | Y |

| Repair Ord | rder Date : 01/26/2005 Repair Order Number : | | | | A39823 Odometer Reading: | | | | 0 miles | | |
|---------------|--|------|--------|---|--------------------------|------|--------------|----------------|----------------|----------|--|
| Serviced | | | E CHEV | ROLET | Selling Sou | rce: | | 13 - C | 13 - CHEVROLET | | |
| By: | PO BOX 8 HAWTHORNE, NJ 07507-0008 (973) 427-1560 | | | 7507-0008 | Site Code : | | 02127 | 02127 | | | |
| | | | | | Business Associate Code: | | | 11121 | 111211 | | |
| Cycle Date | Cycle Nbr | Case | Туре | Labor Operation | Pa | rt | Auth Code | Person Code | Line Total | Comments | |
| 02/01/2005 | 557 | 01 | I | Z7000 - PRE-DELIVER' INSPECTION - BASE TIME | Y N/A | | N/A | N/A | \$ 95.35 | N | |

CHECK HISTORY

| Check Date | 11/10/2005 | Check Number | | 900797659 | Checl | heck Amount | | \$ 3000.00 | Odometer Reading | 0 miles |
|-----------------|------------|--------------|-----------|------------|-------|-------------|---|------------|------------------|---------|
| R.O Number | | N/A | Reaso | n Code | | 98 | C | omponent C | ode | N/A |
| Labor Operation | | | Z7090 - (| CAS REIMBI | JRSEM | IENT | | | | |

| Check Date | 11/10/2005 | Check N | Vumber | 900797661 | Chec | (Amou | nt \$ 1500.00 | Odometer Reading | 0 miles |
|-----------------|------------|---------|-----------|------------|-------|--------|---------------|------------------|---------|
| R.O Number | | N/A | Reaso | n Code | | 98 | Component C | ođe | N/A |
| Labor Operation | | | Z7090 - (| CAS REIMBI | JRSEM | ENT | | | |

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GM Vehicle Inquiry System Vehicle Build

<u>Home - Summary - Claim History - Vehicle Build - Vehicle Component - Delivery Information - Dealer Information - Service Contract - Warranty Block - Branded Title</u>

<u>Help</u>

| - | | | | | | | |
|--------------|-----|-------------|--|--|--|--|--|
| 18 | 'IN | 1G1AK52F257 | | | | | |
| i a | T/A | 1G1AK32F237 | | | | | |
| BERRY | | | | | | | |

VEHICLE BUILD

| Merchandising Model: | AK69 -2005 COBALT 4-DOOR SEDAN | | | |
|------------------------------|--------------------------------|----------------------|------|--|
| Gross Vehicle Weight Rating: | 1709 kg (3768 lb) | Order Number: HVHGDT | | |
| Build Date : | 01/26/2005 | Build Plant : | 157A | |

OPTION CODES

| AK5 - DRIVER & RIGHT FRONT PASSENGER AIR BAGS | AR9 - DELUXE FRONT BUCKET SEAT |
|--|---|
| B34 - FLOOR MATS | B35 - REAR FLOOR MATS |
| C67 - ELECT. FRONT AIR CONDITIONER | DC8 |
| DT4 - ASHTRAY AND LIGHTER | FE1 - SUSPENSION SYSTEM-SOFT RIDE |
| FY1 - TRANS/AXLE 3.63 RATIO | IPB - INTERIOR TRIM DESIGN |
| J41 - POWER DISC FRONT BRAKES | K64 - 115 AMP GENERATOR |
| LOD - ASSEMBLY PLANT - LORDSTOWN,OHIO | L61 - 2.2L DOHC 4 CYL ENGINE |
| MN5 - 4 SPEED AUTO TRANSMISSION | MX0 - 4-SPD. AUTO. TRANS. W/OVERDRIVE |
| NC7 - FEDERAL EMISSIONS OVERRIDE | NE1 - 50-STATE EMISSIONS |
| NU1 - CALIF EMISSIONS LEV 2 | N46 - 4 SPOKE STEERING WHEEL |
| PG1 - 15" STEEL WHEEL | QTU - P195/60R15 TOURING BW TIRES |
| R6M - NEW JERSEY SURCHARGE | R9U - GM ACCESS - AUTOBOOK IDENTIFIER |
| SLM - STOCK ORDERS | UQ4 - BASE SPEAKER SYSTEM |
| UIC - AM/FM STEREO W/CD AND CLOCK | VK3 - FRONT LICENSE PLATE MOUNT |
| VM3 - CONSUMER INFORMATION LABEL | V73 - STATEMENT OF VEHICLE CERT U.S. /CANADA |
| ISA - BASE PACKAGE | 1SZ - OPTION PACKAGE DISCOUNT |
| 14B - GRAY | 14I - GRAY |
| 6AR - FRONT SPRING | 7AR - FRONT SPRING |
| 8AA - REAR SPRING | 9AA - REAR SPRING |
| 95U - ULTRA SILVER METALLIC | |
| NO - OPINI DIDAEM MICIATRIC | |

To Whom It May Concern:

I am requesting finalization of repairs on my 2005 Chevy Cobalt. At this time the vehicle is currently at Hawthorne Chevrolet for the eighth attempt of repairs as I wait patiently while their team of technicians are trying to resolve this situation. The conflict is an electrical issue; the high beam and/or brake sensor in the dashboard comes on, the stereo locks reading 'lock' or 'error,' the CD will not eject and the sound and time display will not adjust at that current time. Also the Power steering acts as manual making it difficult to control steering to the right. All problems are intermittent and reset when the vehicle is shut off.

The Inconvenience of several attempts of contacting the division of General Motors and the dealership has caused loss of wages and the risk of losing my job due to so many absences. In addition to the inconvenience this has caused me, it costs me \$20 daily for a rental car.

I believe this car is unreliable and very unsafe. It has the potential to harm myself and others to where general motors would be liable for any damage caused by the malfunction of this vehicle. I feel this issue has been handled unprofessionally, which leaves me with no further option but to act upon in a lawful manner.

Lori Peccini





CDR File Information

| Vehicle Identification Number | 1G1AK52F257: 1997 1997 1997 1997 1997 1997 1997 19 |
|--|---|
| Investigator | Patrick Burley |
| Case Number | 512930 |
| Investigation Date | August 2nd, 2006 |
| Crash Date | June 28th, 2006 |
| Filename | 1G1AK52F257 PECCINI.CDR |
| Saved on | Tuesday, August 1 2006 at 07:48:24 PM |
| Collected with CDR version | Crash Data Retrieval Tool 2.800 |
| Collecting program verification number | 9238B95E · |
| Reported with CDR version | Crash Data Retrieval Tool 2.800 |
| Reporting program verification number | 9238B95E |
| interface used to collected data | Block number: 00 Interface version: 4A Date: 11-08-05 |
| Event(s) recovered | Checksum: 7500 Deployment |

SDM Data Limitations

SDM Recorded Crash Events:

There are two types of SDM recorded crash events. The first is the Non-Deployment Event. A Non-Deployment Event is an event severe enough to "wake up" the sensing algorithm but not severe enough to deploy the air bag(s). It can contain Pre-Crash and Crash data. The SDM can store up to one Non-Deployment Event. This event can be overwritten by an event that has a greater SDM recorded vehicle forward velocity change. This event will be cleared by the SDM after the ignition has been cycled 250 times. The second type of SDM recorded crash event is the Deployment Event. It also can contain Pre-Crash and Crash data. The SDM can store up to two different Deployment Events, if they occur within five seconds of one another. Deployment Events cannot be overwritten or cleared from the SDM. Once the SDM has deployed the air bag, the SDM must be replaced.

The data in the Non-Deployment Event file will be locked after a Deployment Event, if the Non-Deployment Event occurred within 5 seconds before the Deployment Event unless a Deployment Level Event occurs within 5 seconds after the Deployment Event, then the Deployment Level Event will overwrite the Non-Deployment Event file.

SDM Data Limitations:

- -SDM Recorded Vehicle Forward Velocity Change reflects the change in forward velocity that the sensing system experienced during the recorded portion of the event. SDM Recorded Vehicle Forward Velocity Change is the change in velocity during the recording time and is not the speed the vehicle was traveling before the event, and is also not the Barrier Equivalent Velocity. This data should be examined in conjunction with other available physical evidence from the vehicle and scene when assessing occupant or vehicle forward velocity change. For Deployment Events and Deployment Level Events, the SDM will record 220 milliseconds of data after deployment criteria is met and up to 70 milliseconds before deployment criteria is met. For Non-Deployment Events, the SDM will record up to the first 300 milliseconds of data after algorithm enable. The minimum SDM Recorded Vehicle Forward Velocity Change, that is needed to record a Non-Deployment Event, is 5 MPH.
- -Maximum Recorded Vehicle Velocity Change is the maximum recorded velocity change in the vehicle's combined "X" and "Y" axis.
 -Calculated Principal Direction of Force (PDOF) is the arctangent of the maximum observed lateral velocity change divided by the maximum observed longitudinal velocity change. PDOF is displayed where zero degrees is located at the front of the vehicle, with 90 degrees is displayed to the right side of the vehicle and so on, clockwise around the vehicle.
- -Event Recording Complete will indicate if data from the recorded event has been fully written to the SDM memory or if it has been interrupted and not fully written.
- -SDM Recorded Vehicle Speed accuracy can be affected if the vehicle has had the tire size or the final drive axle ratio changed from the factory build specifications.
- -Brake Switch Circuit Status indicates the status of the brake switch circuit.
- -Pre-Crash Electronic Data Validity Check Status indicates "Data Invalid" if the SDM receive an invalid message from the module sending the pre-crash data.
- -Driver's and Passenger's Belt Switch Circuit Status indicates the status of the seat belt switch circuit. The Passenger Belt Switch Circuit Status for 2006 Chevrolet Cobalt Sport Coupe (AP) model vehicles, with the option package that includes Recaro brand seats (RPO ALV), will always report a default value of "Buckled".
- -The Time Between Non-Deployment and Deployment Events is displayed in seconds. If the time between the two events is greater than 5 seconds, "N/A" is displayed in place of the time. If the value is negative, then the Deployment Event occurred first. If the value is positive, then the Non-Deployment Event occurred first.
- -If power to the SDM is lost during a crash event, all or part of the crash record may not be recorded.
- -The Ignition cycle counter relies upon the transitions through OFF->RUN->CRANK power-moding messages, on the GMLAN communication bus, to increment the counter. Applying and removing of battery power to the module will not increment the ignition counter.

SDM Data Source:

- All SDM recorded data is measured, calculated, and stored internally, except for the following:
- -Vehicle Status Data (Pre-Crash) is transmitted to the SDM, by various vehicle control modules, via the vehicle's communication





network.

-The Belt Switch Circuit is wired directly to the SDM.





System Status At AE

| Vehicle Identification Number | **1AK52F |
|--|----------|
| Low Tire Pressure Warning Lamp (If Equipped) | Invalid |
| Vehicle Power Mode Status | Run |
| Remote Start Status (If Equipped) | Inactive |
| Run/Crank Ignition Switch Logic Level | Active |
| Brake System Warning Lamp (If Equipped) | OFF |

System Status At 1 second

| Transmission Range (If Equipped) | Fourth Gear |
|---|-------------|
| Transmission Selector Position (If Equipped) | Fourth Gear |
| Traction Control System Active (If Equipped) | Invalid |
| Service Engine Soon (Non-Emission Related) Lamp | OFF |
| Service Vehicle Soon Lamp | OFF |
| Outside Air Temperature (degrees F) (If Equipped) | 74.3 |
| Left Front Door Status (If Equipped) | Closed |
| Right Front Door Status (If Equipped) | Closed |
| Left Rear Door Status (If Equipped) | Unused |
| Right Rear Door Status (If Equipped) | Unused |
| Rear Door(s) Status (If Equipped) | Closed |

Pre-crash data

| Parameter | -2 sec | -1 sec |
|---|---------|---------|
| Reduced Engine Power Mode | OFF | OFF |
| Cruise Control Active (If Equipped) | Invalid | Invalid |
| Cruise Control Resume Switch Active (If Equipped) | Invalid | Invalid |
| Cruise Control Set Switch Active (If Equipped) | Invalid | Invalid |

Pre-crash data

| Parameter | -5 sec | 4 sec | -3 sec | -2 sec | -1 sec |
|---|---------|---------|---------|---------|---------|
| Vehicle Speed (MPH) | 65 | 62 | 58 | 55 | 44 |
| Engine Speed (RPM) | 2304 | 2176 | 1984 | 1792 | 1280 |
| Percent Throttle | 21 | 20 | 17 | 16 | 14 |
| Accelerator Pedal Position (percent) | 0 | 0 | 0 | 0 | 0 |
| Antilock Brake System Active (If Equipped) | Invalid | invalid | Invalid | Invalid | Invalid |
| Lateral Acceleration (feet/s²)(If Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |
| Yaw Rate (degrees per second) (If Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |
| Steering Wheel Angle (degrees) (If Equipped) | 0 | 0 | 0 | 0 | 0 |
| Vehicle Dynamics Control Active (If Equipped) | Invalid | Invalid | Invalid | Invalid | Invalid |



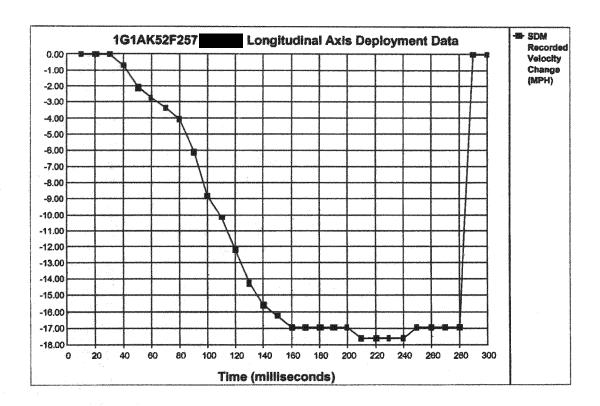


System Status At Deployment

| Ignition Cycles At Investigation | 5922 |
|---|------------|
| SIR Warning Lamp Status | <u>OFF</u> |
| SIR Warning Lamp ON/OFF Time (seconds) | 655200 |
| Number of Ignition Cycles SIR Warning Lamp was ON/OFF Continuously | 5921 |
| Ignition Cycles At Event | 5922 |
| Ignition Cycles Since DTCs Were Last Cleared | 254 |
| Driver's Belt Switch Circuit Status | BUCKLED |
| Diagnostic Trouble Codes at Event, fault number: 1 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 2 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 3 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 4 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 5 | N/A |
| Diagnostic Trouble Codes at Event, fault number: 6 | N/A |
| Driver First Stage Time Algorithm Enabled to Deployment Command Criteria Met (msec) | 34 |
| Driver Second Stage Time Algorithm Enabled to Deployment Command Criteria Met (msec) | 50 |
| Passenger First Stage Time Algorithm Enabled to Deployment Command Criteria Met (msec) | 34 |
| Passenger Second Stage Time Algorithm Enabled to Deployment Command Criteria Met (msec) | 50 |
| Time Between Events (sec) | N/A |
| Driver First Stage Deployment Loop Commanded | Yes |
| Driver Second Stage Deployment Loop Commanded | Yes |
| Driver Side Deployment Loop Commanded | No |
| Driver Pretensioner Deployment Loop Commanded | Yes |
| Driver (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No |
| Driver (Initiator 2) Roof Rall/Head Curtain Loop Commanded | No |
| Driver Knee Deployment Loop Commanded | No |
| Passenger First Stage Deployment Loop Commanded | `Yes |
| Passenger Second Stage Deployment Loop Commanded | Yes |
| Passenger Side Deployment Loop Commanded | No |
| Passenger Pretensioner Deployment Loop Commanded | Yes |
| Passenger (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No |
| Passenger (Initiator 2) Roof Rail/Head Curtain Loop Commanded | No |
| Passenger Knee Deployment Loop Commanded | No |
| Second Row Left Side Deployment Loop Commanded | No |
| Second Row Left Pretensioner Deployment Loop Commanded | No |
| Third Row Left Roof Rail/Head Curtain Loop Commanded | No |
| Second Row Right Side Deployment Loop Commanded | No |
| Second Row Right Pretensioner Deployment Loop Commanded | No |
| Third Row Right Roof Rail/Head Curtain Loop Commanded | No |
| Second Row Center Pretensioner Deployment Loop Commanded | No |
| Driver 2nd Stage Deployment Loop Commanded for Disposal | No |
| Passenger 2nd Stage Deployment Loop Commanded for Disposal | No |
| Multiple Event Counter | O |
| An Event(s) Preceded the Recorded Event(s) | No |
| An Event(s) was in Between the Recorded Event(s) | No |
| An Event(s) Followed the Recorded Event(s) | No |
| The Event(s) Not Recorded was a Deployment Event(s) | No |
| The Event(s) Not Recorded was a Non-Deployment Event(s) | No |
| Crash Record Locked | Yes |
| Vehicle Event Data (Pre-Crash) Associated With This Event | Yes |
| Deployment Event Recorded in the Non-Deployment Record | No |
| Event Recording Complete | Yes |
| Estimated Principal Direction of Force (PDOF) degrees | 295 |



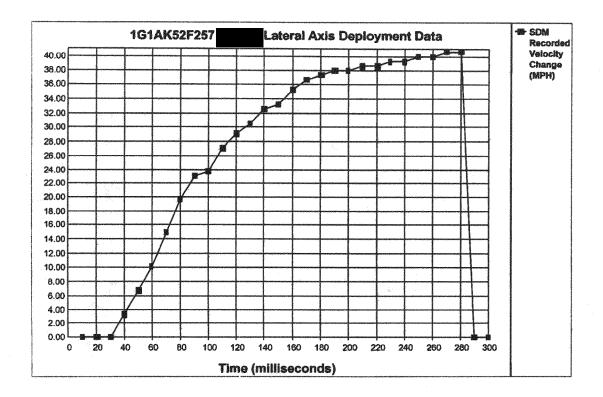




| Time (milliseconds) | 10 | 20 | 30 | 40 | 50 | 60 | 70 | 80 | 90 | 100 | 110 | 120 | 130 | 140 | 150 |
|--|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Longitudinal Axis Recorded Velocity | 0.00 | 0.00 | 0.00 | -0.68 | -2.03 | -2.71 | -3.39 | -4.07 | -6.10 | -8.81 | -10.17 | -12.20 | -14.23 | -15.59 | -16.27 |
| Time (milliseconds) | 160 | 170 | 180 | 190 | 200 | 210 | 220 | 230 | 240 | 250 | 260 | 270 | 280 | 290 | 300 |
| Longitudinal Axis Recorded Velocity | -16.95 | -16.95 | -18.95 | -16.95 | -16.95 | -17.62 | -17.62 | -17.62 | -17.62 | -16.95 | -16.95 | -16.95 | -16.95 | 0.00 | 0.00 |







| Time (milliseconds) | 10 | 20 | 30 | 40 | 50 | 60 | 70 | 80 | 90 | 100 | 110 | 120 | 130 | 140 | 150 |
|--|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| Lateral Axis Recorded Velocity Change (MPH) | 0.00 | 0.00 | 0.00 | 3.39 | 6.78 | 10.17 | 14.91 | 19.66 | 23.05 | 23.72 | 27.11 | 29.15 | 30.50 | 32.54 | 33.21 |
| Time (milliseconds) | 160 | 170 | 180 | 190 | 200 | 210 | 220 | 230 | 240 | 250 | 260 | 270 | 280 | 290 | 300 |
| Lateral Axis Recorded Velocity Change (MPH) | 35.25 | 36.60 | 37.28 | 37.96 | 37.96 | 38.64 | 38.64 | 39.31 | 39.31 | 39.98 | 39.99 | 40.67 | 40.67 | 0.00 | 0.00 |





Hexadecimal Data

This page displays all the data retrieved from the air bag module. It contains data that is not converted by this program.

| 001 | 00 | 00 | 00 | 00 | ^^ | 00 | 00 | |
|------|-----|-----|------------|----|-----|-----|-----|--|
| \$01 | 08 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$02 | 30 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$03 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$04 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$05 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$06 | .00 | OA | 00 | 03 | OA | 00 | 00 | |
| \$07 | 00 | 20 | 00 | 00 | 00 | 00 | 00 | |
| \$08 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$09 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$0A | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$0B | 00 | 00 | 05 | OF | 00 | 00 | 00 | |
| \$0C | 00 | 00 | 00 | | 00 | 00 | 00 | |
| | | | | 00 | | | | |
| \$0D | 00 | 00 | 40 | 00 | 00 | 00 | 00 | |
| \$0E | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| SOF | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$10 | 00 | 00 | 00 | 00 | | 00 | 00 | |
| \$11 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$12 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$13 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$14 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$15 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$16 | 03 | 06 | 0C | 16 | 34 | 00 | 00 | |
| \$17 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$18 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$19 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$1B | 3F | 30 | 00 | 66 | 00 | 78 | 00 | |
| \$1C | 3F | 00 | 00 | 02 | 00 | 18 | 00 | |
| \$1D | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$1E | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$1F | 20 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$20 | 40 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$21 | 00 | 00 | 00 | 00 | FO | 00 | 00 | |
| \$22 | 00 | 97 | 00 | 00 | 00 | 00 | 0.0 | |
| \$24 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$25 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$26 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$27 | FF | 00 | PF | 00 | 00 | 00 | 00 | |
| \$2A | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$2B | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$2D | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| S2E | 00 | FF | F0 | 17 | 21 | 00 | 00 | |
| \$2F | 00 | FE | 17 | 22 | 00 | 0.0 | 00 | |
| \$30 | 9D | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$31 | 0.0 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$32 | 00 | 00 | 00 | 80 | 00 | 00 | 00 | |
| \$33 | 23 | 29 | 2C | 33 | 35 | 00 | 00 | |
| \$34 | 14 | 10 | 1 F | 22 | 24 | 00 | 00 | |
| \$35 | 47 | 59 | 5D | 63 | 69 | 00 | 00 | |
| \$36 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$37 | 00 | 00 | 00 | 04 | 04 | 00 | E2 | |
| \$38 | 7F | 00 | 40 | 00 | 03 | CO | 00 | |
| \$39 | 00 | | 00 | 00 | 00 | 80 | 00 | |
| \$3A | 00 | 00 | 00 | | .00 | 80 | 00 | |
| \$3B | 03 | 06 | 0C | 00 | 00 | 00 | 00 | |
| \$3C | 00 | 00 | 00 | | 00 | 00 | CO | |
| \$3D | 31 | 41 | 4B | 35 | 32 | 46 | 00 | |
| \$3E | 35 | 53 | 98 | 23 | 00 | 00 | 00 | |
| \$3F | 00 | 00 | 90 | 00 | 00 | 00 | 00 | |
| \$40 | 00 | 00 | 00 | 00 | 00 | 00 | 00 | |
| \$41 | F8 | F8 | 90 | 00 | 00 | 00 | 00 | |
| \$42 | 80 | PP | PP | PF | PF | 00 | 00 | |
| 724 | 90 | E F | E E | EE | EF | UU | UU | |

1G1AK52F257





```
$43 FF FF FF 00 00 00 00
$44 FF FF FF FF FF OO
$45 FF FF FF FF FF FF 00
$46 FF PF FP FP FF 00
$47
    FF FF FF FF FF 00
$48 FF PF FF FF FF 00
$49
   FF FF FF FF FF 00
$4A FF FF FF FF FF 00
$4B FF FF FF FF FF 00
$4C FF FF FF FF FF OO
$4D FF FF FF FF FF 00
$4E
   FF FF FF FF FF OO
$4F FF FF FF FF FF 00
$50 PP PP PP PP FP OO
$51 FO 00 00 FO 00 00 00
$52 81 FF FF FF 00 00 00
$53 FF FF FF 00 00 00 00
$54
    82 FF FF 00 00 00 00
    FF FF FF FF FF OO
$55
$67 A0 A5 00 00 00 00 00
$68 DO DO 00 00 00 00 00
$69
   00 FF F0 17 21 00 00
$6A FE 17 22 00 00 00 00
$6B 00 00 00 00 00 00 00
$6C 00 00 00 00 00 00 00
$6D 00 00 00 00 00 00 00
$6E 00 00 00 00 00 00 00
SSF
    05 FF OA FD OF FC 00
$70
   16 PB 1D FA 22 F7 00
$71 23 F3 28 F1 2B EE 00
$72 2D EB 30 E9 31 E8 00
$73
    34 E7 36 E7 37 E7 00
$74 38 E7 38 E7 39 E6 00
$75 39 B6 3A E6 3A E6 00
$76
    3B E7 3B E7 3C E7 00
    3C E7 00 00 00 00 00
$77
$78 FO 00 00 00 00 00 00
$79 80 00 00 00 00 00 00
$7A 80 00 00 00 00 00 00
$7B 11 19 11 19 00 00 00
$01 41 55 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
    01 02 03 04
$02
$03 41 54 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$04 01 02 03 04
$05 42 55 FF PP FF PP PF FF FF FF FF FF FF FF FF
$06 FF FF FF FF
    42 54 PF FF $07
$08
    FF FF FF FF
    41 48 34 37 30 35 52 34 33 34 38 31 32 44 4C 58
SOD
$0E 01 5A 4B 31
    41 4A 01 02 03 04 52 45 41 32 03 09 01 00 01 01
SOF
    01 02 03 04
$10
$13 42 52 PF PF PF FF $14 PF PF PF PF
     42 54 PP FP PP FF FP FP FP FF FF FF FF FF FF
$17
$18 FF FF FF FF
    31 12 66 1A B6 87 91 9A
$21
     94 32
$22
     31 41 FA FA FA FA 32
$23
    31 41 FA FA FA FA 32
$24
     32 41 FA FA FA FA 32
$25
$26
    32 41 FA FA FA FA 32
$40
    00 00
    3F 00 00 02 00 18
$41
$42
     10 C4
$43 00 00 8C 80
```





```
$44 C6 00 00 FC C0 C0
$45 07 01 07 01 05 01
$46 FF 1A 1A 64 64
$47 OA 64 02 04 04 05 OA 06 04 OA 00 00 FA 00 00 PF 04 64
$48 18 08 08
$B0 58
$B1 FD FE 00
$B2 FF FF FF FF FF
$B4 41 53 39 34 33 32 32 33 30 54 33 51 20 20 20 20
$B7 50 AA 01 0F 01
$B8 54 41 68 04 02
$C1 30 46 30 31
SCA 30 46 30 31
$CB 00 E8 B0 18
$CC
    00 E8 B0 18
$D1 00 00
$DB 00 00
$DC 00 00
```





Comments

@I.A.A., Cartaret, N.J. Alone at the time of the download.

Mileage is unknown. No supression switch.

Both front air bags have deployed. Vehicle has not been repaired. Downloaded through the A.L.D.L. / D.L.C.





Ignition Data

Data Location DPID \$2F Bytes 3-4

Data Value (Hex) Parameter Descriptor \$1722 Ignition Cycles at Investigation

Translated Value Units 5922 cycles

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Vehicle Status Data (Pre-Crash)

| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value | |
|------------------------|------------------|--|------------------|----------|
| DPID Pack \$31 Byte 1 | \$00 | Accelerator Pedal Position (-1 sec) | 0 | % full |
| | | | | throttle |
| DPID Pack \$31 Byte 2 | \$00 | Accelerator Pedal Position (-2 sec) | 0 | % full |
| | | | | throttle |
| DPID Pack \$31 Byte 3 | \$00 | Accelerator Pedal Position (-3 sec) | 0 | % full |
| | | | ^ | throttle |
| DPID Pack \$31 Byte 4 | \$0 0 | Accelerator Pedal Position (-4 sec) | 0 | % full |
| | | | 0 | throttle |
| DPID Pack \$31 Byte 5 | \$00 | Accelerator Pedal Position (-5 sec) | 0 | % full |
| | *** | | N. et at La | throttle |
| DPID \$31 Byte 6 bit 7 | \$00 | Accelerator Pedal Position Validity Status | Valid | |
| DPID \$32 Byte 3 bit 7 | \$00 | Cruise Control Active (-1 sec) If Equipped | No | |
| DPID \$32 Byte 3 bit 6 | \$00 | Cruise Control Active (-2 sec) If Equipped | No | |
| DPID \$32 Byte 3 bit 5 | \$00 | Cruise Control Resume Switch Active (-1 sec) If Equipped | No | |
| DPID \$32 Byte 3 bit 4 | \$00 | Cruise Control Resume Switch Active (-2 sec) If Equipped | No | |
| DPID \$32 Byte 3 bit 3 | \$00 | Cruise Control Set Switch Active (-1 sec) If Equipped | No | |
| DPID \$32 Byte 3 bit 2 | \$00 | Cruise Control Set Switch Active (-2 sec) If Equipped | No | |
| DPID \$32 Byte 3 bit 1 | \$00 | Reduces Engine Power Mode (-1sec) | OFF | |
| DPID \$32 Byte 3 bit 0 | \$00 | Reduces Engine Power Mode (-2sec) | OFF | |
| DPID \$32 Byte 4 bit 7 | \$80 | Cruise Control Active Validity Status If Equipped | Invalid | 0/ 4-11 |
| DPID \$33 Byte 1 | \$23 | Throttle Position (-1 sec) | 14 | % full |
| | | | 40 | throttle |
| DPID \$33 Byte 2 | \$2 9 | Throttle Position (-2 sec) | 16 | % full |
| | _2 | | 4 =9 | throttle |
| DPID \$33 Byte 3 | \$2C | Throttle Position (-3 sec) | 17 | % full |
| | | | 20 | throttle |
| DPID \$33 Byte 4 | \$33 | Throttle Position (-4 sec) | 20 | % full |
| | | | | throttle |
| DPID \$33 Byte 5 | \$35 | Throttle Position (-5 sec) | 21 | % full |
| | | | | throttle |
| DPID \$33 Byte 6 bit 7 | \$00 | Throttle Position Validity Status | Valid | P-P-4 |
| DPID \$34 Byte 1 | \$14 | Engine Speed (-1 sec) | 1280 | RPM |
| DPID \$34 Byte 2 | \$1C | Engine Speed (-2 sec) | 1792 | RPM |
| DPID \$34 Byte 3 | \$1F | Engine Speed (-3 sec) | 1984 | RPM |
| DPID \$34 Byte 4 | \$22 | Engine Speed (-4 sec) | 2176 | RPM |
| DPID \$34 Byte 5 | \$24 | Engine Speed (-5 sec) | 2304 | RPM |
| DPID \$34 Byte 6 bit 7 | \$00 | Engine Speed Validity Status | Valid | |

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| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value | |
|---------------------------|------------------|--|------------------|---------|
| DPID \$35 Byte 1 | \$47 | Vehicle Speed (-1 sec) | 44 | MPH |
| DPID \$35 Byte 2 | \$5 9 | Vehicle Speed (-2 sec) | 55 | MPH |
| DPID \$35 Byte 3 | \$5D | Vehicle Speed (-3 sec) | 62 | MPH |
| DPID \$35 Byte 4 | \$63 | Vehicle Speed (-4 sec) | 62 | MPH |
| DPID \$35 Byte 5 | \$69 | Vehicle Speed (-5 sec) | 65 | MPH |
| DPID \$35 Byte 6 bit 7 | \$00 | Vehicle Speed Validity Status | Valid | |
| DPID \$36 Byte 1 | \$00 | Steering Wheel Angle (-1 sec) If Equipped | 0 | degrees |
| DPID \$36 Byte 2 | \$00 | Steering Wheel Angle (-2 sec) If Equipped | 0 | degrees |
| DPID \$36 Byte 3 | \$00 | Steering Wheel Angle (-3 sec) If Equipped | 0 | degrees |
| DPID \$36 Byte 4 | \$00 | Steering Wheel Angle (-4 sec) If Equipped | 0 | degrees |
| DPID \$36 Byte 5 | \$00 | Steering Wheel Angle (-5 sec) If Equipped | . 0 | degrees |
| DPID \$36 Byte 6 bit 7 | \$00 | Steering Wheel Angle Validity Status If Equipped | Valid | |
| DPID \$37 Byte 1 bit 7 | \$00 | Antilock Brake System Active (-1 sec) If Equipped | No | |
| DPID \$37 Byte 1 bit 6 | \$00 | Antilock Brake System Active (-2 sec) If Equipped | No | |
| DPID \$37 Byte 1 bit 5 | \$00 | Antilock Brake System Active (-3 sec) If Equipped | No | |
| DPID \$37 Byte 1 bit 4 | \$00 | Antilock Brake System Active (-4 sec) If Equipped | No | |
| DPID \$37 Byte 1 bit 3 | \$00 | Antilock Brake System Active (-5 sec) If Equipped | No | |
| DPID \$37 Byte 2 bit 7 | \$00 | Traction Control System Active (-1 sec) If Equipped | No | |
| DPID \$37 Byte 3 bit 7 | \$00 | Vehicle Dynamics Control Active (-1 sec) If Equipped | No | |
| DPID \$37 Byte 3 bit 6 | \$00 | Vehicle Dynamics Control Active (-2 sec) If Equipped | No | |
| DPID \$37 Byte 3 bit 5 | \$00 | Vehicle Dynamics Control Active (-3 sec) If Equipped | No | |
| DPID \$37 Byte 3 bit 4 | \$00 | Vehicle Dynamics Control Active (-4 sec) If Equipped | No | |
| DPID \$37 Byte 3 bit 3 | \$00 | Vehicle Dynamics Control Active (-5 sec) If Equipped | No | |
| DPID \$37 Byte 4 bits 3-0 | \$04 | Transmission Range (-1 sec) If Equipped | Fourth Gear | |
| DPID \$37 Byte 5 bits 3-0 | \$04 | Transmission Selector Position (-1 sec) If Equipped | Fourth Gear | |
| DPID \$37 Byte 6 bit 7 | \$00 | Service Engine Soon (Non-Emission Related) Lamp (1 sec) | OFF | |
| DPID \$37 Byte 6 bit 6 | \$00 | Service Vehicle Soon Lamp (1 sec) | OFF | |
| DPID \$37 Byte 6 bit 3 | \$00 | Brake System Warning Lamp If Equipped | OFF | |
| DPID \$37 Byte 6 bit 1 | \$00 | Low Tire Pressure Warning Lamp If Equipped | OFF | |
| DPID \$37 Byte 7 bit 7 | \$E2 | Antilock Brake System Active Validity Status If Equipped | Invalid | |
| DPID \$37 Byte 7 bit 6 | \$E2 | Traction Control System Active Validity Status If Equipped | Invalid | |
| DPID \$37 Byte 7 bit 5 | \$E2 | Vehicle Dynamics Control Active Validity Status If Equipped | Invalid | |
| DPID \$37 Byte 7 bit 4 | \$E2 | Transmission Range Validity Status If Equipped | Valid | |
| DPID \$37 Byte 7 bit 3 | \$E2 | Transmission Selector Position Validity Status If Equipped | Valid | |
| DPID \$37 Byte 7 bit 2 | \$E2 | Service Engine Soon (Non-Emission Related) / Service Vehicle | Valid | |
| | * · | Soon Lamp Validity Status | | |
| DPID \$37 Byte 7 bit 1 | \$E2 | Low Tire Pressure Warning Lamp Validity Status If Equipped | Valid | |
| DPID \$38 Byte 1 | \$7F | Outside Air Temperature (-1 sec) If Equipped | 74.3 | |
| DPID \$38 Byte 2 bit 7 | \$00 | Outside Air Temperature Validity Status (-1 sec) If Equipped | Valid | |





| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value | Units |
|---------------------------|------------------|--|------------------|--|
| DPID \$38 Byte 5 bits 7-6 | \$03 | Left Front Door Status (-1 sec) If Equipped | Closed | yesaya a a a a a a a a a a a a a a a a a a |
| DPID \$38 Byte 5 bits 5-4 | \$03 | Right Front Door Status (-1 sec) If Equipped | Closed | |
| | | Rear Door(s) Status (-1 sec) If Equipped | Closed | |
| DPID \$38 Byte 5 bits 3-2 | \$03 | | Unused | |
| DPID \$38 Byte 5 bits 1-0 | \$03 | Left Rear Door Status (-1 sec) If Equipped | 7 107 77 22 12 | |
| DPID \$38 Byte 6 bits 7-6 | \$C0 | Right Rear Door Status (-1 sec) If Equipped | Unused | |
| DPID \$38 Byte 7 bit 7 | \$00 | Left Front Door Validity Status If Equipped | Valid | |
| DPID \$38 Byte 7 bit 6 | \$00 | Right Front Door Validity Status If Equipped | Valid | |
| DPID \$38 Byte 7 bit 5 | \$00 | Rear Door(s) Validity Status If Equipped | Valid | |
| DPID \$38 Byte 7 bit 4 | \$00 | Left Rear Door Validity Status If Equipped | Valid | |
| DPID \$38 Byte 7 bit 3 | \$00 | Right Rear Door Validity Status If Equipped | Valid | |
| DPID \$39 Byte 1 | \$00 | Lateral Acceleration (-1 sec) If Equipped | 0 | feet/sec ² |
| | 7 9 9 | Lateral Acceleration (-2 sec) If Equipped | 0 | feet/sec ² |
| DPID \$39 Byte 2 | \$00 | | ñ | feet/sec² |
| DPID \$39 Byte 3 | \$00 | Lateral Acceleration (-3 sec) If Equipped | 0 | feet/sec² |
| DPID \$39 Byte 4 | \$00 | Lateral Acceleration (-4 sec) If Equipped | 0 | |
| DPID \$39 Byte 5 | \$00 | Lateral Acceleration (-5 sec) If Equipped | 0 | feet/sec² |
| DPID \$39 Byte 6 bit 7 | \$80 | Lateral Acceleration Validity Status If Equipped | Invalid | |
| DPID \$3A Byte 1 | \$00 | Yaw Rate (-1 sec) If Equipped | 0 | |
| DPID \$3A Byte 2 | \$00 | Yaw Rate (-2 sec) If Equipped | 0 | |
| DPID \$3A Byte 3 | \$00 | Yaw Rate (-3 sec) If Equipped | 0 | |
| DPID \$3A Byte 4 | \$00 | Yaw Rate (-4 sec) If Equipped | 0 | |
| | | Yaw Rate (-5 sec) If Equipped | 0 | |
| DPID \$3A Byte 5 | \$00 | | Invalid | |
| DPID \$3A Byte 6 bit 7 | \$80 | Yaw Rate Validity Status If Equipped | 119 & Cition | |





VIN Data

| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value Units |
|---------------------------|------------------|--|------------------------|
| DPID \$3D Byte 1 | \$31 | Vehicle Identification Number (VIN) Digit 3 | 1 |
| DPID \$3D Byte 2 | \$41 | Vehicle Identification Number (VIN) Digit 4 | Α |
| DPID \$3D Byte 3 | \$4B | Vehicle Identification Number (VIN) Digit 5 | K |
| DPID \$3D Byte 4 | \$35 | Vehicle Identification Number (VIN) Digit 6 | 5 |
| DPID \$3D Byte 5 | \$32 | Vehicle Identification Number (VIN) Digit 7 | 2 |
| DPID \$3D Byte 6 | \$46 | Vehicle Identification Number (VIN) Digit 8 | F ** |
| DPID \$3E Byte 1 | \$35 | Vehicle Identification Number (VIN) Digit 10 | 5 |
| DPID \$3E Byte 2 bits 7-4 | \$53 | Vehicle Identification Number (VIN) Digit 12 | 5 |
| DPID \$3E Byte 2 bits 3-0 | \$53 | Vehicle Identification Number (VIN) Digit 13 | 3 |
| DPID \$3E Byte 3 bits 7-4 | \$98 | Vehicle Identification Number (VIN) Digit 14 | 9 |
| DPID \$3E Byte 3 bits 3-0 | \$98 | Vehicle Identification Number (VIN) Digit 15 | 8 |
| DPID \$3E Byte 4 bits 7-4 | \$23 | Vehicle Identification Number (VIN) Digit 16 | 2 |
| DPID \$3E Byte 4 bits 3-0 | \$23 | Vehicle Identification Number (VIN) Digit 17 | 3 |

Multiple Event Data

| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value Units |
|---------------------------|------------------|---|------------------------|
| DPID \$3F Byte 1 bit 7 | \$00 | An Event(s) Preceded the Recorded Event(s) | No |
| DPID \$3F Byte 1 bit 6 | \$00 | An Event(s) was in Between the Recorded Event(s) | No |
| DPID \$3F Byte 1 bit 5 | \$00 | An Event(s) Followed the Recorded Event(s) | No |
| DPID \$3F Byte 1 bit 4 | \$00 | The Event(s) Not Recorded was a Deployment Event(s) | No |
| DPID \$3F Byte 1 bit 3 | \$00 | The Event(s) Not Recorded was a Non-Deployment Event(s) | No |
| DPID \$3F Byte 1 bits 2-0 | \$00 | Multiple Event Counter | 0 |

Power Mode Data

| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value Units |
|---------------------------|------------------|---|------------------------|
| DPID \$3F Byte 3 bits 7-6 | \$90 | Vehicle Power Mode Status If Equipped | Run |
| DPID \$3F Byte 3 bit 5 | \$90 | Remote Start Status If Equipped | Inactive |
| DPID \$3F Byte 3 bit 4 | | Run/Crank Ignition Switch Logic Level If Equipped | Active |





Deployment Event Data

| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value | Units |
|------------------------|------------------|---|------------------|---------|
| DPID \$67 Byte 1 bit 7 | \$A0 | Crash Record Locked | Yes | |
| DPID \$67 Byte 1 bit 5 | \$A0 | Vehicle Event Data (Pre-Crash) Locked For This Event | Yes | |
| DPID \$67 Byte 2 | \$A5 | Event Recording Complete | Yes | |
| DPID \$68 Byte 1 bit 7 | \$D0 | Driver 1st Stage Deployment Loop Commanded | Yes | |
| DPID \$68 Byte 1 bit 6 | \$D0 | Driver 2nd Stage Deployment Loop Commanded | Yes | |
| DPID \$68 Byte 1 bit 5 | \$D0 | Driver Side Deployment Loop Commanded | No | |
| DPID \$68 Byte 1 bit 4 | \$D0 | Driver Pretensioner Deployment Loop Commanded | Yes | |
| DPID \$68 Byte 1 bit 3 | \$D0 | Driver (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No | |
| DPID \$68 Byte 1 bit 2 | \$D0 | Driver (Initiator 2) Roof Rail/Head Curtain Loop Commanded | No | |
| DPID \$68 Byte 1 bit 1 | \$D0 | Driver Knee Deployment Loop Commanded | No | |
| DPID \$68 Byte 2 bit 7 | \$D0 | Passenger 1st Stage Deployment Loop Commanded | Yes | |
| DPID \$68 Byte 2 bit 6 | \$ D0 | Passenger 2nd Stage Deployment Loop Commanded | Yes | |
| DPID \$68 Byte 2 bit 5 | \$D0 | Passenger Side Deployment Loop Commanded | No | |
| DPID \$68 Byte 2 bit 4 | \$D0 | Passenger Pretensioner Deployment Loop Commanded | Yes | |
| DPID \$68 Byte 2 bit 3 | \$D0 | Passenger (Initiator 1) Roof Rail/Head Curtain Loop Commanded | No | |
| DPID \$68 Byte 2 bit 2 | \$D0 | Passenger (Initiator 2) Roof Rail/Head Curtain Loop Commanded | No | |
| DPID \$68 Byte 2 bit 1 | \$D0 | Passenger Knee Deployment Loop Commanded | No | |
| DPID \$68 Byte 3 bit 7 | \$00 | Second Row Left Side Deployment Loop Commanded | No | |
| DPID \$68 Byte 3 bit 6 | \$00 | Second Row Left Pretensioner Deployment Loop Commanded | No | |
| DPID \$68 Byte 3 bit 5 | \$00 | Third Row Left Roof Rail/Head Curtain Loop Commanded | No | |
| DPID \$68 Byte 3 bit 3 | \$00 | Second Row Right Pretensioner Deployment Loop Commanded | No | |
| DPID \$68 Byte 3 bit 4 | \$00 | Second Row Right Side Deployment Loop Commanded | No | |
| DPID \$68 Byte 3 bit 2 | \$00 | Third Row Right Roof Rail/Head Curtain Loop Commanded | No | |
| DPID \$68 Byte 3 bit 1 | \$00 | Center Rear Pretensioner Deployment Loop Commanded | No | |
| DPID \$68 Byte 4 bit 7 | \$00 | Driver 2nd Stage Deployment Loop Commanded for Disposal | No | |
| DPID \$68 Byte 4 bit 6 | \$00 | Passenger 2nd Stage Deployment Loop for Disposal Commanded | No | |
| DPID \$69 Byte 1 bit 7 | \$00 | SIR Warning Lamp Status | OFF | |
| DPID \$69 Bytes 2-3 | \$FFF0 | SIR Warning Lamp ON/OFF Time Continuously | 655200 | seconds |
| DPID \$69 Bytes 4-5 | \$1721 | Number of Ignition Cycles SIR Warning Lamp was ON/OFF | 5921 | cycles |
| 01 10 400 Dy(00 4 0 | W I rac t | Continuously | | |
| DPID \$6A Byte 1 | \$FE | Ignition Cycles Since DTCs Were Last Cleared | 254 | cycles |
| DPID \$6A Bytes 2-3 | \$1722 | Ignition Cycles at Event | 5922 | cycles |
| DPID \$6B Bytes 1-2 | \$0000 | DTC number for fault #1 | N/A | |
| DPID \$6B Byte 3 | \$00 | DTC fault type for fault #1 | \$00 | |
| DPID \$6B Bytes 4-5 | \$0000 | DTC number for fault #2 | N/A | |
| DPID \$6B Byte 6 | \$000 \$00 | DTC fault type for fault #2 | \$00 | |
| DPID \$6C Bytes 1-2 | \$000 | DTC number for fault #3 | N/A | |

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| 1 2 14 - |
|--------------|
| <u>Units</u> |
| |
| |
| |
| |
| |
| |
| |
| MPH |
| - |





| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value | |
|--|------------------|---|------------------|-----|
| DPID \$73 Byte 3 | \$36 | SDM Recorded Vehicle Velocity Change for Axis #1 (170 msec) | 36.60 | MPH |
| DPID \$73 Byte 4 | \$E7 | SDM Recorded Vehicle Velocity Change for Axis #2 (170 msec) | -16.95 | MPH |
| DPID \$73 Byte 5 | \$37 | SDM Recorded Vehicle Velocity Change for Axis #1 (180 msec) | 37.28 | MPH |
| DPID \$73 Byte 6 | \$E7 | SDM Recorded Vehicle Velocity Change for Axis #2 (180 msec) | -16.95 | MPH |
| DPID \$74 Byte 1 | \$38 | SDM Recorded Vehicle Velocity Change for Axis #1 (190 msec) | 37.96 | MPH |
| DPID \$74 Byte 2 | \$E7 | SDM Recorded Vehicle Velocity Change for Axis #2 (190 msec) | -16.95 | MPH |
| DPID \$74 Byte 3 | \$38 | SDM Recorded Vehicle Velocity Change for Axis #1 (200 msec) | 37.96 | MPH |
| DPID \$74 Byte 4 | \$E7 | SDM Recorded Vehicle Velocity Change for Axis #2 (200 msec) | -16.95 | MPH |
| DPID \$74 Byte 5 | \$39 | SDM Recorded Vehicle Velocity Change for Axis #1 (210 msec) | 38.64 | MPH |
| DPID \$74 Byte 6 | \$E6 | SDM Recorded Vehicle Velocity Change for Axis #2 (210 msec) | -17.62 | MPH |
| DPID \$75 Byte 1 | \$39 | SDM Recorded Vehicle Velocity Change for Axis #1 (220 msec) | 38.64 | MPH |
| DPID \$75 Byte 2 | \$E6 | SDM Recorded Vehicle Velocity Change for Axis #2 (220 msec) | -17.62 | MPH |
| DPID \$75 Byte 3 | \$3A | SDM Recorded Vehicle Velocity Change for Axis #1 (230 msec) | 39.31 | MPH |
| DPID \$75 Byte 4 | \$E6 | SDM Recorded Vehicle Velocity Change for Axis #2 (230 msec) | -17.62 | MPH |
| DPID \$75 Byte 5 | \$3A | SDM Recorded Vehicle Velocity Change for Axis #1 (240 msec) | 39.31 | MPH |
| DPID \$75 Byte 6 | \$E6 | SDM Recorded Vehicle Velocity Change for Axis #2 (240 msec) | -17.62 | MPH |
| DPID \$76 Byte 1 | \$3B | SDM Recorded Vehicle Velocity Change for Axis #1 (250 msec) | 39.99 | MPH |
| DPID \$76 Byte 2 | \$ E 7 | SDM Recorded Vehicle Velocity Change for Axis #2 (250 msec) | -16.95 | MPH |
| DPID \$76 Byte 3 | \$3B | SDM Recorded Vehicle Velocity Change for Axis #1 (260 msec) | 39.99 | MPH |
| DPID \$76 Byte 4 | \$E7 | SDM Recorded Vehicle Velocity Change for Axis #2 (260 msec) | -16.95 | MPH |
| DPID \$76 Byte 5 | \$3C | SDM Recorded Vehicle Velocity Change for Axis #1 (270 msec) | 40.67 | MPH |
| DPID \$76 Byte 6 | \$E7 | SDM Recorded Vehicle Velocity Change for Axis #2 (270 msec) | -16.95 | MPH |
| DPID \$77 Byte 1 | \$3C | SDM Recorded Vehicle Velocity Change for Axis #1 (280 msec) | 40.67 | MPH |
| DPID \$77 Byte 2 | \$E7 | SDM Recorded Vehicle Velocity Change for Axis #2 (280 msec) | -16.95 | MPH |
| DPID \$77 Byte 3 | \$00 | SDM Recorded Vehicle Velocity Change for Axis #1 (290 msec) | 0.00 | MPH |
| DPID \$77 Byte 4 | \$00 | SDM Recorded Vehicle Velocity Change for Axis #2 (290 msec) | 0.00 | MPH |
| DPID \$77 Byte 5 | \$00 | SDM Recorded Vehicle Velocity Change for Axis #1 (300 msec) | 0.00 | MPH |
| DPID \$77 Byte 6 | \$00 | SDM Recorded Vehicle Velocity Change for Axis #2 (300 msec) | 0.00 | MPH |
| DPID \$77 Byte 0 DPID \$78 Byte 1 bit 7 | \$F0 | Driver Belt Switch Circuit Status | BUCKLED | |
| DPID \$78 Byte 1 bit 6 | \$F0 | Driver Belt Switch Circuit Status Monitored | Yes | |
| DPID \$78 Byte 1 bit 5 | \$F0 | Passenger Belt Switch Circuit Status | BUCKLED | |
| DPID \$78 Byte 1 bit 4 | \$F0 | Passenger Belt Switch Circuit Status Monitored | Yes | |
| DPID \$78 Byte 1 bit 3 | SFO | Front Center Belt Switch Circuit Status | UNBUCKLED | |
| DPID \$76 Byte 1 bit 2 | \$F0 | Front Center Belt Switch Circuit Status Monitored | No | |
| DPID \$78 Byte 2 bit 7 | \$00 | Second Row Left Belt Switch Circuit Status | UNBUCKLED | |
| DPID \$78 Byte 2 bit 6 | \$00 \$00 | Second Row Left Belt Switch Circuit Status Monitored | No | |
| DPID \$78 Byte 2 bit 5 | \$00 \$00 | Second Row Center Belt Switch Circuit Status | UNBUCKLED | |
| | \$00 \$00 | Second Row Center Belt Switch Circuit Status Monitored | No | |
| DPID \$78 Byte 2 bit 4 DPID \$78 Byte 2 bit 3 | \$00 | Second Row Right Belt Switch Circuit Status | UNBUCKLED | |





| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value | Units |
|-------------------------------|------------------|--|-------------------|---|
| DPID \$78 Byte 2 bit 2 | \$00 | Second Row Right Belt Switch Circuit Status Monitored | No | |
| DPID \$78 Byte 3 bit 7 | \$00 | Third Row Left Belt Switch Circuit Status | UNBUCKLED | |
| DPID \$78 Byte 3 bit 6 | \$00 | Third Row Left Belt Switch Circuit Status Monitored | No | |
| DPID \$78 Byte 3 bit 5 | \$00 | Third Row Center Belt Switch Circuit Status | UNBUCKLED | |
| DPID \$78 Byte 3 bit 4 | \$00 | Third Row Center Belt Switch Circuit Status Monitored | No | |
| DPID \$78 Byte 3 bit 3 | \$00 | Third Row Right Belt Switch Circuit Status | UNBUCKLED | |
| DPID \$78 Byte 3 bit 2 | \$00 | Third Row Right Belt Switch Circuit Status Monitored | No | |
| DPID \$78 Byte 4 bit 7 | \$00 \$00 | Driver Seat Position Status | Rearward | |
| | \$00 | Driver Seat Position Status Monitored | No | |
| DPID \$78 Byte 4 bit 6 | \$00 \$00 | Passenger Seat Position Status | Rearward | |
| DPID \$78 Byte 4 bit 5 | | Passenger Seat Position Status Monitored | No | |
| DPID \$78 Byte 4 bit 4 | \$00 \$20 | Automatic Passenger SIR Suppression System Validity Status at AE | | |
| DPID \$79 Byte 1 bit 7 | \$80 | / Passenger SIR Suppression Switch Circuit Status Validity Status at | | |
| | | | | |
| | *** | AE Automatic Passenger SIR Suppression System Status at AE / | | |
| DPID \$79 Byte 1 bit 0 | \$80 | Passenger SIR Suppression Switch Circuit Status at AE | | |
| | *** | Passenger SIK Suppression Switch Circuit Status at AL | | |
| DPID \$7A Byte 1 bit 7 | \$80 | Automatic Passenger SIR Suppression System Validity Status at | | |
| | | First Deployment Command / Passenger SIR Suppression Switch | | |
| | | Circuit Status Validity Status at First Deployment Command | | |
| DPID \$7A Byte 1 bit 1 | \$80 | Automatic Passenger SIR Suppression System Status at First | | |
| | | Deployment Command / Passenger SIR Suppression Switch Circuit | | |
| | | Status at First Deployment Command | 0 | |
| DPID \$79 Bytes 2-3 | \$0000 | SDM Synchronization Counter | No rollover | |
| DPID \$79 Byte 4 bits 7-6 | \$00 | Rollover Sensor Message Status | | |
| DPID \$79 Byte 4 bit 5 | \$00 | Side Air Bag(s) Were First Commanded to Deploy Due to Side Impact Event | No | |
| mmin amo m. s. s. t. t. s | *** | Side Air Bag(s) Were First Commanded to Deploy Due to Rollover | No | |
| DPID \$79 Byte 4 bit 4 | \$00 | | | |
| | *** | Event | Last message | |
| DPID \$79 Byte 4 bits 3-0 | \$00 | Rollover Sensor Status | received | |
| | | | contained errors | |
| | | or of the Commencian Custom Volidity Status / | Commented Circles | |
| DPID \$7A Byte 1 bit 7 | \$80 | Automatic Passenger SIR Suppression System Validity Status / | | |
| | | Passenger SIR Suppression Switch Circuit Validity Status | | |
| DPID \$7A Byte 1 bit 1 | \$80 | Automatic Passenger SIR Suppression System Status / Passenger | | |
| - | | SIR Suppression Switch Circuit Status | 0 | **** |
| DPID \$7A Byte 2 | \$0 0 | Rollover Sensor - Time Between Successive Side Deploys | 0 | msec |
| DPID \$7A Byte 3 | \$00 | Rollover Sensor - Time From Rollover Enable to Deploy | 0 | msec |
| DPID \$7B Byte 1 | \$11 | Driver 1st Stage Time From Algorithm Enable to Deployment | 34 | msec |
| man from the same one Brown . | • • | Command Criteria Met | | *************************************** |





| Data Location | Data Value (Hex) | Parameter Descriptor | Translated Value | Units |
|------------------|------------------|--|------------------|---------|
| DPID \$7B Byte 2 | \$19 | Driver 2nd Stage Time From Algorithm Enable to Deployment | 50 | msec |
| | | Command Criteria Met | | |
| DPID \$7B Byte 3 | \$11 | Passenger 1st Stage Time From Algorithm Enable to Deployment | 34 | msec |
| | | Command Criteria Met | | |
| DPID \$7B Byte 4 | \$19 | Passenger 2nd Stage Time From Algorithm Enable to Deployment | 50 | msec |
| • | | Command Criteria Met | | |
| DPID \$7B Byte 5 | \$00 | Driver Side or Roof Rail/Head Curtain Time From Algorithm Enable | 0 | msec |
| | • • • | to Deployment Command Criteria Met | | |
| DPID \$7B Byte 6 | \$00 | Passenger Side or Roof Rail/Head Curtain Time From Algorithm | 0 | msec |
| | | Enable to Deployment Command Criteria Met | | |
| DPID \$7B Byte 7 | \$00 | Time Between Events | 0 | seconds |

| ⁹⁶ 05 | Page 1 of 1 LIFE | al New Jersey Pol | lice Crash Inv | estigation Report 🔑 Repor | | ☐ Change Report |
|-------------------|--|---|--|--|--|--|
| ⁹⁷ 01 | 1 Case Number FA2006-013183 | 10 Crash Occured Or: | PU | VZA ROAD 11 Speed | | 118951 |
| ⁹⁶ 06 | 2 Police Dept of Cod Pair Lawn Police 01 | At Intersection | | of: BERDAN AVE | 12 Route No. Suffix 13 M | inegal Limit 1180 |
| | 3 Station/Precinct 3/06 | 150 5 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | 19 C) To: 1 | 7 M M (b) | |
| 99 07 | 4 Date of Cresh 5 Day of Week | 6 Time 7 Munic | cipality 8 Total | Ramp From | 20 Routs/Name 22 Longitude | NB EB 118a 118a |
| ¹⁰⁰ 01 | 06/28/06 Wed | 02:59 02 | !17 - | 01 - 1 - | | 1190 |
| ¹⁰¹ 02 | 1 | | 25 Ins. Code 5 | 3 Veh No. 54 Policy No. | 1 56 | ins. Code |
| 102 | Perfect Ped [28 Driver's First Name | Pedaloyciist Resp. to Emergen | | Parked Ped D | Pedalcyclist Resp. to Emergency [| HILA Run 120 02 |
| 103 | 27 Number and Street | | F | AND PROPERTY. | Substitution of the control of the c | 121 |
| 02 | and Street 28 City | | 1 00 1 | 7 Number and Street | | 80 Eyes |
| 104 01 | HAWTHORNE | NJ State | | 8 City | State Zip | |
| 105 | 31 State 32 Odverte License No NJ P20954856 | 33,008 | *********** | 11 State 82 Driver's Licensee No | 83 DCB mm dd yy | 64 Explans |
| L | 35 Ourse's Seel Name | Last Name | 12/2008 | 5 Owner's First Name Initial | Last Name | 122 |
| | SAME AS DRIVER | | | Diver | Page (1461)10 | 123 |
| 108 | 36 Number and Street | | 1 | 8 Number nd Street | · | 124 |
| ** | 37 City | State Zp | | 7 City | State Zip | |
| 107 | 38 Meio 39 Model CHEVY COBOLT | 40 Color 41 Year SILVER 2005 | A State 6 | 8 Males 69 Model | 70 Color 71 Year 72 Plata No. | 73 8146 |
| 108 01 | 4VIN 1G1AK52F25 | | | 4 VN | | Expires |
| 109 | 46 Vahidie Ramoved To Daven Left : | Scene Towed 47 | | 8 Vehicle Removed To Driven Left at | Scene Towed 77 Authority | |
| 110 | ALL POINTS TOWING | Disabled | Ofiver Police | The state of the s | Timboria . | Police 128 |
| 01 | 48 Alcohol/Drug Test Given: No Yes Refused | 134 Crash Diagram (NOT TO SC UTILIT) | | | 76 Alcohol/Onig Test Given: No Yes R | |
| •- | Type: Breath Blood Utline | A POLE | | | Type: [] Breach [] Blood | C I Mare |
| 112 | Results: O% Pending | | | | | ending 1284 52 |
| 113 | 49 Hazardous Material Name or On Board Spill Placard | PW B | | | 79 Hazardous Material | isine or 1286 |
| 114 | | | | - RV | Cas Scard Spill | No. 129c |
| 115 | 50 Carrier No. Quspor Que | | | | 80 Carrier No. USDOT | □Cener 1286 _ |
| 116 01 | 51 Commencial Vehicle Weight | | | | | |
| 117 | -10,000 lbs | | | PLAZA RO | 81 Commenced Vehicle Weight | 1234 |
| | 10,001 · 28,000 lbs 26,001 lbs | | | ICAZA NO | 10,001 - 28,000 lbs | 129b |
| | 52 Carrier Name | \triangleleft -N | | | 82 Carler Nama | 1296 |
| | 135 Cresh Description | A \$20 Prop 100 A \$10 Prop 100 A \$10 | | | *************************************** | 129d |
| | CONTROL ON THE WET RO | 9 NUK IMBOUND PLAI ADWAY, AND SLID IN | ZA RU APPRO TO A UTILITY | OX. 150 FEET NORTH OF BE POLE. DRIVER 1 WAS ENT | rdan ave. Vehicle 1 l Raped in Vehicle 1 am | muse |
| | EXTRICATED BY THE FAIR | AWN HEAVY RESCUE | ESQUAD. | | | 130 02 |
| 1 | DRIVER 1 HAD AN ODOR O AT THE HOSPITAL AND SE | FALCOHOLIC BEVERA | AGE ON HER I POLICE I AR I | BREATH. A BLOOD SAMPLI | E WAS TAKEN FROM DR | NER 1 131 02 |
| | na | ு காவர்கள் காவர்கள் இருவாகு இருக்கு இன்ற இ | · ···································· | , more to the through E foreign. | | 132 |
| | | | | | | 153 |
| | 136 Damage To Other Property PSE | 3 UTLILTY POLE#752 | :3FA | | | |
| | Oper. 137 Charge Madisple C | | | per. 139 Charge Autiliple Charges | | ons No. |
| | 141 Officer's Signature | | 18025745 142 | Badge No. 162 Teniewed By | Bagiga No. 144 Case Status | |
| | LONNII | MERGLER | T 24 | 163 Jeans | /32 □ Pending 図 s of Occupants - If Decessed, Data & Tim | The state of the s |
| | ^ 1 01 01 04 23 F | 10 08 2 09 08 | | DECCIMI 1 001 - 400 0 | ECOND AVE, HAWTHORNE, NJ | water- |
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| | , - - - - - | | | | | |
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| | 0 | | | | EARCHEL | |
| | E | *** 40 4 44 | | | INDEXED | |
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,这一句话,她就是一句话,也是不是一句话,这一句话,也是一句话,也是一句话,也是一句话,也是一句话,也是一句话,也是一句话,也是一句话,也是一句话,也是一句话, 一句话:"我是一句话,我们就是一句话,我们就是一句话,我们就是一句话,我们就是一句话,我们就是一句话,我们就是一句话,我们就是一句话,我们就是一句话,我们就是一

NJTR-1 (rev. 07/2005)





CONVENIENT SERVICE HOURS: MONDAY THRU FRIDAY 7:00 AM TO 7:00 PM SATURDAY 8:00 AM TO 4:00 PM

HAWTHORNE CHEVROLET

1180 GOFFLE ROAD HAWTHORNE, N.J. 07506 TEL. (973) 427-1560

Getting Bigger and Better

CVCS263829





SEBVICE &

24 HOUR TOWING SERVICE

0201/CVCS262920

CELL: 973-248-7489 CUSTOMER NO NVOICE DATE INVOICE NO. 63348 JOHN MCGARRY 6707 09/16/05 CVCS263829 LARCIN BATE STOCK NO. 11.997 **ULTRA SILV** 056440 VEAR / MAKE / MORE DELIVERY DATE DELIVERY MILES 05/CHEVROLET/COBALT/COBALT 4DR 04/14/05 PRODUCTION DATE HAWTHORNE, NJ 1G1AK52F257 09/09/05 COMMENTS MO: 11998 LABOR & PARTSCHASSIS FLECTRICAL
CUSTOMER STATES: RADIO SHOWS ERROR MESSAGE.,,SOP PART
INTERNAL PROBLEM
PERFORM DIAGNOSTIC TESTING, REPLACE RADIO WITH UPDATED
EVOLUMES OF JCD. **EXCHANGE OL/6D** PARTS-----QTY---FP-NUMBER----------DESCRIPTION------LIST PRICE-UNIT PRICE-JOB # 1 TOTAL PARTS 0.00 JOB # 1 TOTAL LABOR & PARTS 0.00 CUSTOMER STATES: INTERMITTANT BRAKE LIGHT COMES ON
SOFTMARE UPGRADE
INTERMITTANT
REPLACE IP CLUSTER AND REPROGRAM T PRICE-UNIT PRICE-TOTAL PARTS PARTS------QTY---FP-NUMBER--------DESCRIPTION-----0.00 JOB # 2 TOTAL LABOR & PARTS 0.00CUSTOMER STATES: FEW TIME RECENTLY WHEN TURNING RIGHT INTERMITTANT PERFORM DIAGNOSTIC TESTING, REPLACE STEERING 1 10394224 COLUMN KI 6.518 JJ WARRANTY JOB # 3 TOTAL PARTS 0.00 JOB # 3 TOTAL LABOR & PARTS 0.00 U# 4 16CVZA

CUSTOMER STATES: INTERMITTANTLY HIGHBEAN INDICATOR LIGHT
COMES ON AND STAYS ON DASH IP RELATED TO JOB 2 0.00 CUSTOMER STATES: INTERMITTANT HARD BANG SHIFT WHEN
STOP AND START OFF ACCELERATING
ROAD TEST SEVERAL TIMES... NO CODES
COULD NOT DUPLICATE ANY ABNORMAL CONDITION AT THIS TIME
WASHINGTON BUSINESS JOB # 4 TOTAL LABOR & PARTS 0.00

PAGE 1 OF 3

ACCOUNTING COPY

[CONTINUED ON NEXT PAGE] 03:57pm

NOTICE TO CONSUMER: PLEASE READ IMPORTANT INFORMATION ON REVERSE SIDE

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800.888.0164 tel 313.665.0911 fax

August 16, 2006

Diane R. Evans, AIC Claims Administrator

Hawthorne, NJ

RE:

Claimant:

Our File No.:

Our Client:

General Motors Corporation Date/Event:

June 28, 2006

Vehicle:

2005 Chevrolet Cobalt

VIN:

1G1AK52F257

Dear

ESIS is the third party claim administrator on behalf of General Motors for matters involving product liability.

This letter is to advise you that your claim is being forwarded to the Field Performance Assessment Department of General Motors to be evaluated. If you have questions, please contact me at the number above. Thanks for your cooperation in this matter.

Sincerely,

Diane R. Evans, AIC Claims Administrator

800.888.0164 tel 313.665.0911 fax

August 16, 2006

Diane R. Evans, AIC Claims Administrator

Hawthorne, NJ

RE:

Claimant:

Our File No.:

512930

Our Client:

General Motors Corporation

Date/Event:

June 28, 2006

Vehicle:

2005 Chevrolet Cobalt

VIN:

1G1AK52F25

Dear

ESIS is the third party claim administrator on behalf of General Motors for matters involving product liability.

This letter is to advise you that your claim is being forwarded to the Field Performance Assessment Department of General Motors to be evaluated. If you have questions, please contact me at the number above. Thanks for your cooperation in this matter.

Sincerely,

Diane R. Evans, AIC Claims Administrator

800.888.0164 tel 313.665.0911 fax

5

July 18, 2006

Diane R. Evans, AIC Claims Administrator

Hawthorne, NJ

RE:

Claimant:

Our File No.:

Our Client:

General Motors Corporation

Date/Event: 6/28/06

Subject vehicle: 2005 Chevrolet Cobalt

VIN: 1G1AK52F257

Dear

I am writing to confirm our conversation of today, July 18, 2006 during which you agreed to allow us to inspect your 2005 Chevrolet Cobalt and retrieve data from the Sensing and Diagnostic Module. I estimate the inspection will take about 2-3 hours.

As part of the inspection, we will likely take photographs and measurements. Also, your vehicle is equipped with an air bag Sensing and Diagnostic Module (SDM). As explained in the Owner's Manual, in addition to its other functions, the SDM records information about the air bag system and other crash related data in an air bag deployment event. This data does include the vehicle speed, throttle position, brake application and engine RPM for 5 seconds prior to the deployment or near deployment event. As part of our investigation, we will download this data and provide you with a copy of this data and the translation of the Supplemental Inflatable Restraint (SIR) data.

Please note the potential GM uses of this crash data once GM has a copy in its files. Once collected, the SDM crash data is available for GM's research needs. Also, in summary form, this information may be provided to non-GM organizations (i) which have a reasonable need for it, (ii) which have a demonstrated ability to utilize such data, and (iii) which are expected to use it for studies aimed at improving safety to the benefit of the public at large, the auto industry, or GM. However, information which ties SDM crash data to a particular vehicle, such as VIN, owner name, or date and location, will generally not be disclosed by GM other than (a) to the involved owner/lessee or his/her designated agent, (b) in response to an official request of police or similar government office, (c) for research where appropriate confidentiality is maintained and need is shown, (d) as part of GM's defense of litigation involving the subject vehicle or other GM products, or (e) as otherwise required by law.

If you have any additional questions about our upcoming inspection, you can contact me at 1.800.888.0164 Monday through Friday from 7:30 AM to 4:00 PM.

Sincerely,

Diane R. Evans, AIC

C: File

800.888.0164 tel 313.665.0911 fax

Diane R. Evans, AIC Claims Administrator

Hawthorne, NJ

RE:

Claimant:

Our File No.:

Our Client:

General Motors Corporation

Date/Event:

6/28/06

Subject vehicle:

2005 Chevrolet Cobalt

VIN:

1G1AK52F257

Dear

ESIS provides administrative claims handling services to General Motors (GM) in connection with product liability claims against GM. They have referred your claim to our office for further handling. Please address all future correspondence to my attention.

So we may further investigate your claim, we request that you provide us with the following information:

- All medical records concerning the injuries suffered as a result of this accident; An
 Authorization for Use and/or Disclosure of Confidential Medical Information form is
 enclosed to assist our office in obtaining these records. Please provide the names and
 complete addresses for all medical providers who treated the injuries sustained in the above
 incident;
- 2. Original photographs (or color copies) taken by you, or someone on your behalf, of the vehicle that is the basis of your claim;

When we have received this information, we will be in a better position to consider your claim. Should you have any questions regarding this letter or your claim, please do not hesitate to contact me directly at 800.888.0164, Monday through Friday, 8:00 a.m. to 4:30 p.m., EST

Sincerely,

Diane R. Evans, AIC