



INFORMATION Redacted PURSUANT TO THE FREEDOM OF

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

CDR File Information

Vehicle Identification Number	1G1ZU64805F
Investigator	Daniel T. Riley
Case Number	71-586286682
Investigation Date	Monday, February 11 2008
Crash Date	Tuesday, November 13 2007
Filename	1G1ZU64805F
Saved on	Monday, February 11 2008 at 11:01:59 AM
Collected with CDR version	Crash Data Retrieval Tool 2.900
Reported with CDR version	Crash Data Retrieval Tool 2.900
Event(s) recovered	None

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
- -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.

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.





Hexadecimal Data





```
$44 FF FF FF FF FF 00
$45 FF FF FF FF FF 00
$46 FF FF FF FF FF 00
$47 FF FF FF FF FF 00
$48 FF FF FF FF FF 00
$49
   FF FF FF FF FF 00
   FF FF FF FF FF 00
$4A
$4B
   FF FF FF FF FF 00
$4C FF FF FF FF FF 00
$4D 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 OO
$51 F0 00 00 F0 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
$55 FF FF FF FF FF 00
$67
   A0 FF 00 00 00 00 00
$68 F8 F8 90 C0 00 00 00
   80 FF FF FF FF 00 00
$69
   FF FF FF 00 00 00 00
$6A
   FF FF FF FF FF 00
$6B
$6C FF FF FF FF FF 00
$6D FF FF FF FF FF 00
$6E FF FF FF FF FF 00
$6F
   FF FF FF FF FF 00
$70
   FF FF FF FF FF 00
   FF FF FF FF FF 00
$71
$72 FF FF FF FF FF 00
$73
   FF FF FF FF FF 00
$74
   FF FF FF FF FF OO
$75
   FF FF FF FF FF 00
   FF FF FF FF FF 00
$76
$77 FF FF FF FF FF 00
$78 F0 00 00 F0 00 00 00
$79 81 FF FF FF 00 00 00
$7A
   82 FF FF 00 00 00 00
$7B
   FF FF FF FF FF 00
$01
   41 55 36 35 32 38 52 34 32 37 34 31 33 52 38 43
$02
   41 OA 22 34
$03
   41 54 36 35 32 38 52 34 32 38 30 32 33 53 35 36
$04
    41 OA 22 34
$05
   FF FF FF FF
$06
$07
   $08 FF FF FF FF
$0D
   41 48 36 35 32 39 52 34 32 35 31 31 48 42 55 57
$0E
   01 59 D3 B3
$0F
   41 4A 36 35 32 39 52 34 32 33 38 31 47 4D 36 37
$10
   01 59 D3 B3
$13
   $14
   FF FF FF FF
$17
    FF FF FF FF
$18
$21
   31 12 66 1A D0 2E 91 9A
$22
   19 46
   31 5A 53 54 55 55 34
$23
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    31 5A 53 54 55 55 34
$25
    31 5A 53 54 55 55 34
$26
    31 5A 53 54 55 55 34
$40
   00 00
$41
   FF 30 00 66 00 18
$42
   F0 C4
    00 00 8C 80
$43
$44
   C6 0A 00 FC C0 C0
1G1ZU64805F
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\$	00000000000000000000000000000000000000	00B000002F500100333608D0033304F6001C00000000F640FFFFF80	00200000000000000000000000000000000000	00000000000000000000000000000000000000	00000000000000000000000000000000000000	00000000000000000000000000000000000000	0 0 0 0 0 0 F
\$2F \$30 \$31 \$32 \$33 \$34 \$35 \$36 \$37	FE 9D FF F8 FF FF FF FF	64 00 FF 80 FF FF FF FF 80	0E 00 FF FF FF FF FF FF	74 00 FF 80 FF FF FF FF	00 00 FF 00 FF FF FF FF	00 00 80 00 80 80 80 80 CA	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0



1G1ZU64805F



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$4B
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$4C FF FF FF FF FF 00
$4D FF FF FF FF FF 00
$4E
   FF FF FF FF FF 00
   FF FF FF FF FF 00
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$50 FF FF FF FF FF OO
$51 F0 00 00 F0 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
$55 FF FF FF FF FF 00
$67
   A0 FF 00 00 00 00 00
$68 F8 F8 90 C0 00 00 00
   80 FF FF FF FF 00 00
$69
   FF FF FF 00 00 00 00
$6A
   FF FF FF FF FF 00
$6B
$6C FF FF FF FF FF 00
$6D FF FF FF FF FF 00
$6E FF FF FF FF FF 00
$6F
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   FF FF FF FF FF 00
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$73
   FF FF FF FF FF 00
$74
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   FF FF FF FF FF 00
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$77 FF FF FF FF FF 00
$78 F0 00 00 F0 00 00 00
$79 81 FF FF FF 00 00 00
$7A
   82 FF FF 00 00 00 00
$7B
   FF FF FF FF FF 00
$01
   41 55 36 35 32 38 52 34 32 37 34 31 33 52 38 43
$02
   41 OA 22 34
$03
   41 54 36 35 32 38 52 34 32 38 30 32 33 53 35 36
$04
   41 OA 22 34
$05
   FF FF FF FF
$06
$07
   $08 FF FF FF FF
$0D
   41 48 36 35 32 39 52 34 32 35 31 31 48 42 55 57
$0E
   01 59 D3 B3
$0F
   41 4A 36 35 32 39 52 34 32 33 38 31 47 4D 36 37
$10
   01 59 D3 B3
$13
   $14
   FF FF FF FF
$17
    FF FF FF FF
$18
$21
   31 12 66 1A D0 2E 91 9A
$22
   19 46
   31 5A 53 54 55 55 34
$23
$24
   31 5A 53 54 55 55 34
$25
    31 5A 53 54 55 55 34
$26
   31 5A 53 54 55 55 34
$40
   00 00
$41
   FF 30 00 66 00 18
$42
   F0 C4
   00 00 8C 80
$43
$44
   C6 0A 00 FC C0 C0
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Rev. 4-19-2004

PRODUCT ALLEGATION RESOLUTION

PRELIMINARY INSPECTION BRAKE & ABS SYSTEMS					
Customer's Name:	S BRA		spection Date: {	[[02/11/2008	
Vehicle Brand:	{ Chevrolet			ou Maxx	
File #	{ 71-586286682	VIN:	10001. [
<u>1 110 11</u>	(71 20020002_	<u> </u>	(_10120000		
Mileage at Inspection: {	[_49,971_	Inspection Lo	ocation: {_Pellegrino	Chevrolet, Westville	e, NJ
Inspector's phone number: {	_215-460-6282 <u>Ir</u>	nspected By: {	Daniel T. Riley		
Section 1	II	NSPECTION	SUMMARY		
Briefly describe the custo	omer's allegation cond	cerning the k	orakes/abs:		
another vehicle. {					
incident was repaired priperformed on the brake stille. The mileage docume incident. Stated brake problem since the A road test of four miles was conducted during the components were inspection and accurately inspection and accurately	system during or since nted on the estimate in that she drove the verification. The braketed and appeared to be ing of the road test and were inspected and a pected a pected and a pected a pected and a pected a pected a pected and a pected and a pected and a pected and a pected a pected and a pected a pected and a p	raffic and over system open in proper of then felt normal the felt normal then felt normal the felt normal then felt normal t	rer long grades who perated normally the operating condition ormal thereafter. Armal. An OnStar of	ravelled 1,627 mile sey and she has no neere speeds of 50 re hroughout the road on. The steering fe All steering compo perator was conta	es since the of experienced the mph were reached d test. All brake elt tight for about onents, including cted during the
The driver's seat belt ext webbing or transfer of co locked when the belt was download was conducted the police report. results of the inspection:	emponent material fou s pulled quickly. The s d and is included with requested to be co	nd on any o eat belt light this file. Als ontacted at tl	f the driver's seat went out when th o included are ima	belt components. he belt was latched ages of the body re	The retractor I. A Vetronix epair estimate and
{					
<u>{</u>					
\ {					
{					
{					
{					
\ {					

Section 2

INTERVIEW - INCIDENT DETAILS

PROBLEM ALLEGATION DESCRIPTION

PRODUCT ALLEGATION RESOLUTION					
PRELIMINARY INSPECTION					
BRAKE & ABS SYSTEMS					
<u>Customer's Name:</u> {					
Vehicle Brand: {Chevrolet					
<u>File # {71-586286682VIN:</u>					
Interview mode:					
Provide a complete description of the incident according to the driver. Include information concerning the length of the drive immediately preceding the incident, the type of driving conditions, how many brake stops had occurred during this drive and, if the vehicle was pulling a trailer at the time of the incident, the estimated total weight of the cargo and trailer. Determine whether driver has experienced this type of behavior before. If so, how often? If so, has a dealer been contacted previously concerning the issue? {					
stated that body repairs were completed in Florida sometime in late November or early December of 2007. She has been driving the vehicle daily since the repairs were completed including a drive from Florida to New Jersey. There were no brake repairs performed during or since the collision repairs. The steering has intermittently felt hard to turn since the body repairs. She brought the vehicle to the body shop to complain about the steering but no repairs were performed. She has not brought the vehicle to a GM dealership for the steering complaint.					
{					
Also have the driver describe the operation of the brake system immediately before the incident and what happened at t					

Also have the driver describe the operation of the brake system immediately before the incident and what happened at the beginning and during the incident. Complete the table below.

PRODUCT ALLEGATION RESOLUTION PRELIMINARY INSPECTION BRAKE & ABS SYSTEMS

Customer's Name:

Insp	ection Date: {	{{02/11/	2008
------	----------------	----------	------

Vehicle Brand:	{ChevroletModel	
<u>File #</u>	{71-586286682VIN:	1G1ZU64805F
	Defend the Instident	At the Device of and Device of the
	Before the Incident	At the Beginning* and During the Incident
Brake operation (normal,	{ Normal	
fade, pull, grab, etc.)		feet depressing the pedal
	{	
	{	{
D		<u>{</u>
Brake pedal feel (normal, hard, spongy, etc.)	{Normal	{Unknown
naru, sporigy, etc.)	<u></u>	<u></u>
	{	{
Warning lights/messages	{ None	{ None_
displayed. Describe		
	{	{
	{	
Unusual odors (from	{None	{None
where?)		<u></u>
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	{
Other	{ N/A	{ N/A
{		
	{	{
	{	{
* The beginning of the incid	lent is the initiation of the braking sequend	ce during which the incident occurred.
Estimated vahiala speed: (_25-35 MPH at the beginning of	the incident according to the driver
Estimated vehicle speed. (_ 23-33 WiFi1 at the beginning of	the incluent according to the driver.
Describe what the driver di	d during the incident (pump brakes, steer,	, etc.)? Describe: {_Applied steady pressure as
hard as possible		, , , , , , , , , , , , , , , , , , , ,
[
	and this condition before O Describer (NI
has the driver ever experie	nced this condition before? Describe. {	NO
Surface where incident occ	:urred:	
	sphalt, G ravel, Crushed R ock, D irt or O the	er? Describe:
{Asphalt	· · · _ · · _ · · _ · · · _ · · · · · ·	
{		
	y, Icy or Other? (If other, specify:	
{Dry		_
Other comments or observ	ations that have not been covered? {	N/A
	·	
{		
<u>{</u>		
Section 2	INTERVIEW - VEHICLE	HICTORY

Source of information (name, address, phone number, & relationship if other than claimant):

Did the owner purchase the vehicle ⊠ New or ☐ Used? Purchase Date: **{_07/2005**___

			NSPECTIC CVCTEMC		
Customer's Name:	BRAR		SYSTEMS		2008
Vehicle Brand:	Chevrolet		-	_ ``_	
File #	71-586286682			64805F	
I IIC II	71-300200002	<u> </u>	(_101200		
{Claimant					
Comments:					
{					
Note to the inspector: In qu	estions 3-5 below, docu	ument <u>only</u> t	he information	n which relates to	o the incident/allegation.
Prior collision damage? (da {_None					
{					
Repaired by: {					
{					
Describe <i>existing vehicle co</i> {Ms. Aruta stated that th					
{					
Repairs outside of warranty (None					
Other <i>vehicle history</i> inform	•	ng interviewe	ed or GM Wai		
•					
Last brake maintenance (d {Unknown	• • •	om?):			
{					
Section 4	VE	HICLE INSI	PECTION		
The vehicle inspection docum your observations in the follow the GM representative's atter concern.	wing section, you will be	e following a	methodical in	nspection format	. You will also be directing
Take color photographs of	the following: (includ	de overview	and closeu	p photos of dan	naged areas)
A. Exterior:					
Front	VIN Left side				
Right side Rear	Left side				
Comments: {There was no	o visible damage				
{					
{					

PRODUCT ALLEGATION RESOLUTION PROFILMINARY INSPECTION

	PRELIMINARY INSPECTION
	Customer's Name: (1 02/11/2008
	Customer's Name: {
	File # {71-586286682VIN:
	<u> </u>
B.	Brakes: Front assemblies with calipers removed Rear assemblies with drums/calipers removed
Со	mments: {_All brake components appeared to be in proper operating condition.
{	
C.	Interior: Instrument panel & odometer {
Co {	mments: {There was no visible damage
{	
	Underhood: Engine compartment Master cylinder and brake fluid reservoir mments: {_There was no visible damage} Brake lines and hoses ABS/TCS Modulator
{_	
	Underbody: Scrapes or impact damage on the following: Fuel tank Tires/Wheels
Co	mments: {There was no visible damage
{_ {_	
F.	General Observations (Take photographs if applicable):
	ything on vehicle which is after-market:
	ything on vehicle which is a modification:

PRELIMINARY INSPECTION BRAKE & ABS SYSTEMS				
<u>Customer's Name:</u> {				
Vehicle Brand: { Chevrolet Model: { Malibu Maxx Model: }				
<u>File # {71-586286682VIN:</u>				
Other relevant information: {N/A				
{				

Section 5 BRAKES

Use the following table to identify what you did and what you found during the inspection of the brake system. Identify the tests and test results for the applicable items. Describe anything relevant to the allegation that is not in normal working condition, does not function properly or is a non production part. Record all diagnostic trouble codes found, the description of each current or history code and any other relevant data obtained using a scan tool.

	OBSERVATIONS/TEST RESULTS
Red brake warning light-note the operation of the light when the ignition key is turned "ON", also with park brake applied and released.	{_The light came on for several seconds when the ignition was turned on then went out and remained out. The light illuminated when the parking brake was applied and went out when it was released.
	{
Yellow ABS light-note the operation of the light when the ignition key is turned "ON"	{_ the light came on for several seconds when the ignition was turned on then went out and remained out
	{
Brake fluid level and condition- comment on the level, color, contamination, and smell	{_The fluid level was 3/8 inch below the full line. The appearance, odor and feel of the fluid was normal.
	{
Boost/booster/master cylinder-with engine "off", deplete the booster and hold the brake pedal, start engine and note pedal behavior. Turn the engine "off" and note the number of pedal applies required to deplete the booster. If engine operation is not possible, check the booster for proper vacuum hose connection.	{_The brake pedal held firm after the engine was started. The booster was depleted during the 3 rd brake application. The brake pedal felt normally power assisted when the engine was running.
External leakage? Check all hydraulic lines, connections, wheel cylinders (if	{None found
any), and ABS modulator connections.	{
Pedal travel, check per service manual. A pedal force gage is necessary for	{_A pedal force gauge was not available. The pedal travel felt normal.

PRELIMINARY INSPECTION BRAKE & ABS SYSTEMS

DRAKE & ADS SISTEMS			
Customer's Name:	<u>Inspection Date:</u> {{02/11/2008		
Vehicle Brand:	{_ChevroletModel: {_Malibu Maxx		
File #	{71-586286682VIN:		

proper check of pedal travel.	
1 -1	{
	{
Front brakes-note condition of	{_All front brake components appeared
calipers, rotors as to whether they	normal
are grooved, corroded, leaking, etc.	
are greetea, correada, rearang, etc.	
	1
Rear brakes describe the condition of	{_All rear brake components appeared normal
the rotors or drums (scored, smooth,	{_Aii real brake components appeared normal
corroded)	
corroded)	<u> </u>
Pads and linings-measure and record	{_L/F: 8/32 R/F: 8/32
lining thickness in inches or millimeters.	L/R: 4/32 R/R 3/32
Note condition.	
	{
ABS/TCS/SES system-check for codes,	{_Code "C0561 System Disabled Information Stored Invalid Serial
current and history	Data Received' was found stored as a history code. There were no
· · · · · · · · · · · · · · · · · · ·	current codes.
	Current codes.
	<u> </u>
Other(scan tool results, description of	{_There were four other history codes detected:
codes, etc.)	Vehicle Comm. Interface Module: B2476 Cellular Select Service
{	Switch
	Radio Module: U2100 Controller Area Network (Can) Bus
	Communication
	Body Control Module: U2125 Lost Communications with Mobile
	Communications Control System
	Radio and DVE Control Modules: B1325 Device Power 1 Circuit
	Voltage Below Threshold
	Voltage Below Threshold
	<u></u>
	1
Other Comments: {	
<u> </u>	
{	
BRAKE SYSTEM PERFORMANCE WHI	LE STOPPING ON A DRY LEVEL ROAD:
OBSERVATIONS: {A road test of fou	r miles through stop and go traffic and over long grades where speeds o
50 mph were reached was conducted.	
	, ,
{	
{	

			PRELIMINAL					
BRAKE & ABS SYSTEMS Customer's Name: Inspection Date: {{02/11/2008								
	Vehicle Bran	_					u Maxx	
	<u>File</u>	<u>#</u> { <u>71-5862</u>	86682VIN	<u>\:</u>	{_1G1ZU	64805	F	
		ERFORMANCE ON leither a wet nor a						
{								
{	nicle is not driveat	ole conduct a brake	torque test if nos	sihle	Start the e	naine i	nlace the tr	ansmission in Drive with the
foot c	on the brake. Slo	wly apply throttle ar	nd note the results	. Is t	he brake abl	e to ho	ld the vehic	e vehicle did not move.
								Drive and slowly apply the sthe vehicle to move.
The	vehicle began to	move forward at	approximately 20	002 R				
Secti			ТІ	RES				
	RE IDENTIFICAT a tread depth gau	<u>FION:</u> ge at four points an	ound the circumfe	rence	to determin	ne the a	verage trea	ad depth.
		ent than specified or				alibratio		
	TIRE BRAND	TIRE TYPE	TIRE SIZE	Р	RESSURE		DEPTH	NUMBERS *
	(Goodyear)	(Eagle GA)	(P205/70R15)		<u>(psi)</u>	<u>32r</u>	nds of inch	
LF	{Bridgestone	{Insignia	{_215/60R16_ 	{	22	_ {	5/32	
RF	{Bridgestone	{_{Insignia	{_{215/60R16	{	20	_ {	5/32	{OBX8 E20 4204
LR	{Bridgestone	{_{Insignia	{_{_215/60R16	{	24	_ {	7/32	{OBX8 E20 4204
RR	{Bridgestone	{_{Insignia	{_{_215/60R16	{	20	. {	5/32	{OBX8 E20 4204
								
* Not	e: DOT numbers	are found on the ir	nside of the tire, ac	djacei	nt to the rim.	ı		
etc.	ribe and photogra		tires, such as scra	apes,	marks due t	o impa	ct, cuts, tre	ad separation, flat spots
{								
-								
<u>{</u>								
2. TIRE PLACARD DATA:								
Record the following data: (located on driver's door edge or inside the decklid) SIZE PRESSURE (psi)								
TIRES {_215/60R16 {30								

PRELIMINARY INSPECTION BRAKE & ABS SYSTEMS

DRAKE & ADS SISTEMS			
Customer's Name:	<u>Inspection Date:</u> {{02/11/2008		
Vehicle Brand:	{Chevrolet Model:Malibu Maxx		
<u>File #</u>	{71-586286682VIN:		

Section 7	WHEELS
	damage to wheels and mountings, such as bent rims, impact marks, etc. e damage. All wheels appeared normal
{	
Section 8	SITE INSPECTION (If applicable)
site of the incident. Gene is done, it is important to	cts in the case and then document the basis of your decision concerning whether to inspect the eral Motors prefers site inspections as noted on the assignment sheet. If an inspection of the site move quickly so that valuable information is not lost. If an inspection of the site move quickly so that valuable information and approximately two thousand miles from almost three months prior to the inspection and approximately two thousand miles from
Section 9	Comment Overflow Sheet
Please use this page if	needed for additional comments from the inspection form. Please note the section and continued from prior to each comment.

	PRELIMINARY INSPECTION		
BRAKE & ABS SYSTEMS			
Customer's Name:	<u>Inspection Date:</u> {{02/11/2008		
Vehicle Brand:	{Chevrolet Model: {_Malibu_Maxx		
<u>File #</u>	{71-586286682VIN:	-	
	·		
Section 10	Other Report Information		
_			
Check here if ther	re was evidence of a "Fire-Related" event.		

According to NHTSA, "fire" means combustion or burning of material in or from a vehicle as evidenced by flame. The term also includes, but is not limited to, thermal events and fire-related phenomena such as smoke, sparks or smoldering, but does not include events and phenomena associated with a normally functioning vehicle, such as combustion of fuel within an engine or exhaust from an engine. Attachments: (Check all that apply)

⊠ Photographs □ Data Downloads □ Other Records

PRODUCT ALLEGATION RESOLUTION PRELIMINARY INSPECTION FIELD PHOTOGRAPHIC NOTES

Customer's Name:	{_	Inspection Date: {_02/11/2008
Vehicle Brand:	{ Chevrolet	Model: { Malibu Maxx

File # {_71-586286682____VIN: {_1G1ZU64805F

Inspector Daniel T. Riley

Neg.#	<u>Description</u>
1.	Information label from the left front door jam
2.	Exterior, front
3.	Exterior, left front
4.	Exterior, left side
5.	Exterior, left rear
6.	Exterior, rear
7.	Exterior, right rear
8.	Exterior, right side
9.	Exterior, right front
10.	Close up, front exterior
11.	Close up, left side front exterior
12.	Close up, right side front exterior
13.	Odometer before the road test
14.	Odometer after the road test
15.	Brake and accelerator pedals
16.	Measurment of the distance from the floor to the brake pedal when the pedals were raised completely
	(Measurement approximately 7 inches)
17.	Measurment of the distance from the floor to the brake pedal when the pedals were lowered completely
	(Measurement approximately 5 inches)
18.	Interior, left front
19.	Interior, left front
20.	Left front knee bolster area
21.	Interior, right front
22.	Interior, right front
23.	Right front knee bolster area
24. 25.	Steering wheel, side view from the right
25. 26.	Steering wheel, side view from the left Left side of the dashboard
20. 27,	Right side of the dashboard
27, 28.	Headliner and visor area
20. 29.	Rear interior
30.	Rear interior
31.	Driver's seat belt, stowed
32.	Driver's seat belt, latched
33.	Driver's seat belt latchplate
34.	Driver's seat belt latchplate, opposite side
35.	Driver's seat belt latchplate pass-through
36.	Driver's seat belt latchplate pass-through, opposite side
37.	Driver's seat belt D-Ring
38.	Driver's seat belt D-Ring, underside
39.	<u>Driver's seat belt buckle</u>
40.	Tachometer, speedometer and transmission gear indicator during the brake torque test
41.	Engine compartment, view from the front
42.	Engine compartment, view from the left
43.	Engine compartment, view from the right
44.	Brake fluid reservoir
45.	Brake fluid reservoir, cap removed

Document1

PRODUCT ALLEGATION RESOLUTION PRELIMINARY INSPECTION FIELD PHOTOGRAPHIC NOTES

46-51	Left front brakes and components
52-56	Right front brakes and components
57-61	Left rear brakes and components
62-66	Right rear brakes and components
67	Left front tire
68	Right front tire
69	Left rear tire
70	Right rear tire
71	Left front steering and suspension components
72	Left front steering and suspension components
73	Right front steering and suspension components
74	Right front steering and suspension components
75	<u>Underbody</u> , view from the front
76	<u>Underbody</u> , view from the rear
77	Scan tool depicting trouble code B2476
78	Scan tool depicting trouble code U2100
79	Scan tool depicting trouble code U2125
80	Scan tool depicting trouble code B1325
81	Scan tool depicting trouble code B1325
82	Scan tool depicting trouble code C0561
83	Scan tool depicting the number of trouble codes in the first 6 of 12 modules
84	Scan tool depicting the number of trouble codes in the last 6 of 12 modules
85	Electric steering assist assembly
86	Electric steering assist assembly



DATE

MFD BY GENERAL MOTORS CORP

2047 KG 4512 LB GVWR

GAWR FRT

1077 KG

2373 LB

GAWR RR

970 KG 2139 LB

VEHICLE SAFETY, BUMPER, AND THEFT PREVENTION STANDARDS IN EFFECT ON THE DATE OF MANUFACTURE SHOWN ABOVE. TYPE: PASS CAR

1G1ZU64805F

THIS VEHICLE CONFORMS TO ALL APPLICABLE U.S. FEDERAL MOTOR























PRNDL 4997 MM



























































































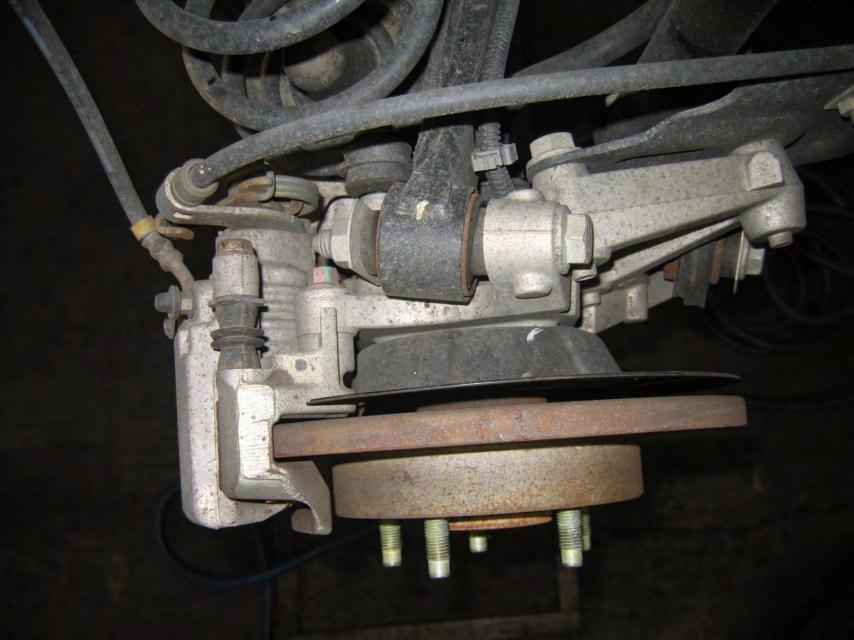














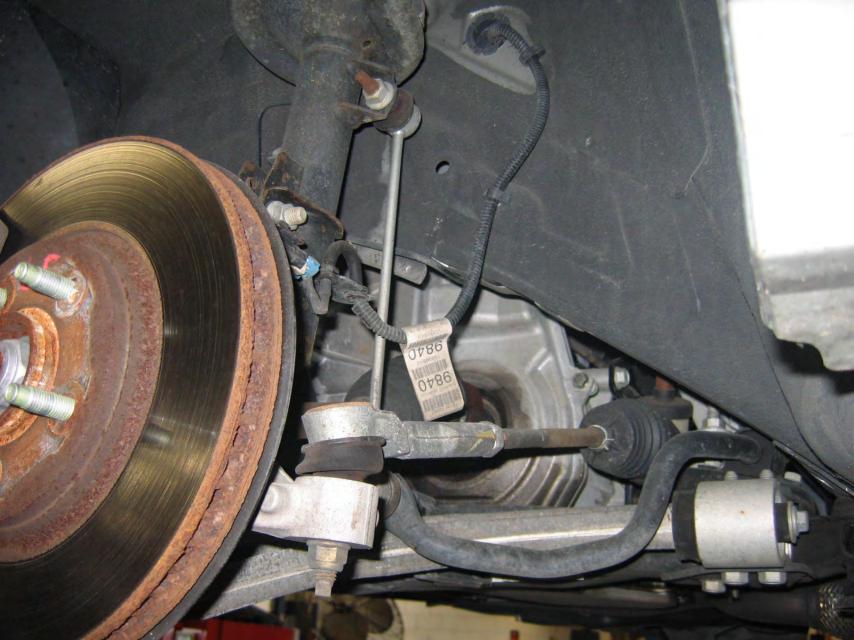


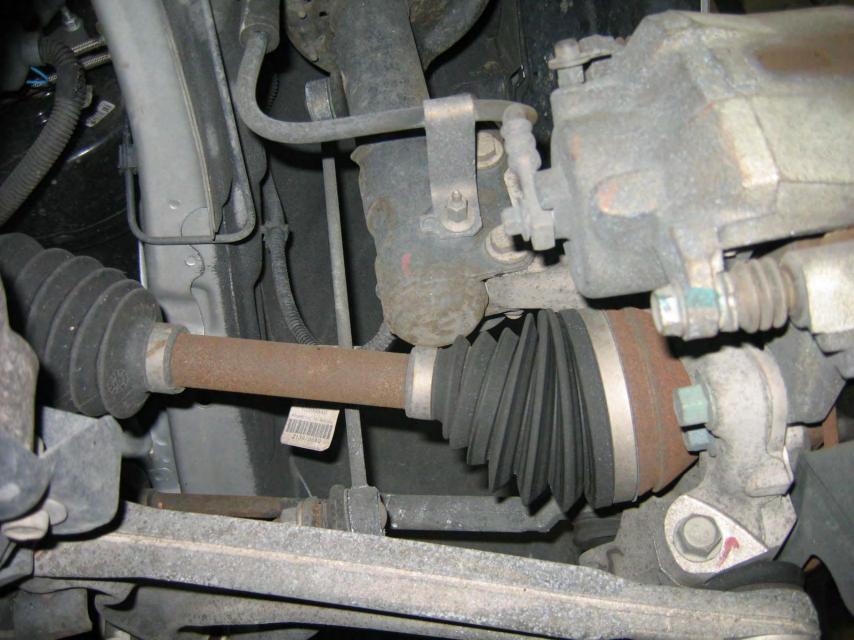




















Vehicle Comm. Interface Module B2476 Symptom 00 Cellular Phone Select Service Switch

Last Test:

Since Cleared:

History 1 / 6 Clear



TECH 2

DTCs Sorted By Priority

Radio
U2100
Symptom 00
Controller Area Network (CAN) Bus
Communication

Last Test: Passed

This Ignition: Passed

Since Clear:

Passed History 2 / 6

Clear DTCs

Body Control Module
U2125 Symptom 00
Lost Communications With Mobile
Communications Control System

Last Test:

This Ignition:

Since Clear:

Passed

Passed

Passed History 3 / 6

Clear BTCs

Radio B1325

Symptom 03 Device Power 1 Circuit Voltage Below

Threshold

Last Test:

Passed

This Ignition:

Passed

Since Clear:

Passed History

DVD B1325 Symptom 03 Device Power 1 Circuit Voltage Below Threshold

Last Test:

This Ignition:

Since Clear:

Passed

Passed

Passed History 5 /

DICs

EBCM
C0561
Symptom 71
System Disabled Information Stored
Invalid Serial Data Received

Last Test:

Passed

This Ignition:

Passed

Since Clear:

Passed History 6 / 6

Clear

DTC Information

ECU Name		Status	
Radio Body Control DVD EBCM	Module	2 1 1 1	4
	n. Interface M io Receiver	1 0 1 / 12 —	

DLC Pin : 1

Restart View All

DTC Information

ECU Name	Status
HVAC Control Module Instrument Panel Cluster	0
Power Steering Control Mo Supplemental Inflatable R Theft Determent Module	0 0 0
Theft Deterrent Module	12/ 12 —₩

DLC Pin: 1

Restart View All





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

January 31, 2011



Service Request: 71-590083082

Customer Relationship Specialist: Beau Casset

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu MAXX. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the column assembly that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$745.96.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

PALATINE IL EM

TO Secretary States of the Secretary Secretary

REIMBURSEMENT DEPT, PO BOX331TO DETROIT, MICH, 48232-5170

MEC 19 2007

4953542130

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12/14/67
17-Digit Vehicle Identification Number (VIN): 1612T62855F
Mileage at Time of Repair: 44646 Date of Repair: 1/24/07
Claimant Name (please print):
Street Address or PO Box Number:
City: WAYCONDA State: FLL, ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 759,19
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



MASTER AUTO REPAIR KLINIC INC.

330 S. MAIN STREET Wauconda, IL. 60084 Phone - 847-526-9800 Fax - 847-526-9855 1NVOICE 010103

INVOICE			Work C	Completed Date: 01/09/2007				
				2005 Chevrolet - Malibu 3.5				
	Lic # : Qdometer In : 44							
Wauconda, IL				Unit # :				
Home				Vin #: 1G1ZT62855F				
Cust ID: 1995				Hat #: Ref #	:			
Part Description / Number	Qty	List	Extended	Labor Description		Extended		
SENSOR AND COLUMN ASSY.				CK. STEERING		N/C		
15926870	1.00	389.25	389.25					
LIGHT BULB				TORQUE SENSOR - Remove & Repla		256.50		
3157	1.00	2.95	2,95	w/Adjustable Foot Pedals - [Includes: R	&I Steering			
				Column Assembly.] REPROGRAM NEW MOTOR MODUL	EACCV	75.00		
				SUBLET	JE MOOI.	73.00		
				CK. LIGHTS		10.00		
				REPLACE L/F TURN SIGNAL BUL	В.			
[Technicians : REITER, JEFF 9]				Daniel	CLAL)			
Org. Estimate \$590.49 Revisions	\$0.00	Curren	t Estimate \$ 5	90.49 Additional Cost Revised Estimate	Labor:	\$266.50		
				- n	Parts:	\$392.20 \$75.00		
	((TE	soh.	1/9/07	Sub:	\$733.70		
	IJ	J	TU		Tax:	\$ 25.40		
				aldown.	Total:	\$759.19		
[Payments -]					Bal Due:	\$759.19		

I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees permission to operate the car or truck herein described on street, highways or elsewhere for the purpose to testing and/or inspection. An express mechanic's lien is hereby acknowledged on above car or truck to secure the amount of repairs thereto. Warranty on parts and labor is one years or 12,000 miles whichever comes first. Warranty work has to be performed in our shop & cannot exceed the original cost of repair.

		/.	24/05		
SIGNATURE	Da	itc//	24/07	Time	
PAVIC MADY					

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 6230
PO B Phoenix, AZ 85082-2530



CHECK NO.

50-937

DATE 01/09/08

BB 000000498

XXXXXXXXXXXXX745 DOLLARS

AMOUNT

North American Operations General Motors Corporation Disbursement Account

VENDOR DUNS NO.

WAUCONDA IL

SIGNATURE

The Chase Manhattan Bank, N.A. Syracuse, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

DETACH BEFORE DEPOSITING CHECK

CHECK NO.

PAYMENT DATE VENDOR NAME 01/09/08 REGISTER NO. OESCRIPTION DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/08/08 VM 1-9RIY7A .71-590083082.1-9RIY7A 00.0000 745.96 .00 745.96 .00 1G1ZT62855F **H**3

ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

TOTAL

745.96

.00

745.96

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO.

DATE 01/09/08

XXXXXXXXXXXX490 DOLLARS

AMOUNT

North American Operations General Motors Corporation Disbursement Account

ROCKFORD ΙL

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

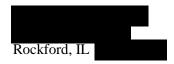
INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

The Chase Manhattan Bank, N.A. Syracuse, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. BB 000000245 PAYMENT DATE VENDOR NAME 01/09/08 REGISTER NO. INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/08/08 VM 1-9RBRY0 71-590094406.1-9RBRY0 00.0000 490,29 308 27 7 .00 490.29 1G1ZU64885F 8 . ار زن ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 490.29 TOTAL .00 490.29

January 31, 2011



Service Request: 71-590094406

Customer Relationship Specialist: Katrina Blake

Dear :

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu MAXX. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the column kit that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$490.29.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

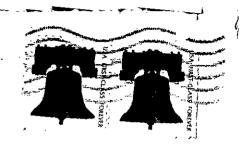
Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

tockford IL

CAROL STREAM IL 601



TEC 1 9 2001

Reimbursement Department P.O. Box 33170 Detroit MI 48232-5170

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12/13/07
17-Digit Vehicle Identification Number (VIN): <u>/6/Zu64885F</u>
Mileage at Time of Repair: 59,794 Date of Repair: 9/12/07
Claimant Name (please print):
Street Address or PO Box Number:
City: Rockford State: IL ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 490.29
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).





Lou Bachrodt Automai

CHEVROLET • JEEP • VOLKSWAGEN • BMW

(7070 CHERRYVALE N. BLVD.) P.O. Box 5647 - ROCKFORD, IL 61125 (815) 332-3000 • FAX: (815) 332-6913 www.bachrodt.com

DON PAGANO 09715/07 151103 CVČS388537 5130 LABOR RATE STOCK NO. ₩HT/ 59,794 DELIVERY MILES 05/30/06 VEAB/MAKE/MODEL 05/CHEVROLET/MALIBU ROCKFORD, IL ELLING DEALER NO. VEHICLE ID NO Z U 6 4 8 8 5 F PRODUCTION DATE ₩9712/07 COMMENTS MO: 59841 MISC----CODE-----DESCRIPTION-- - - CONTROL: "NO" - - - - - -27.83 27.83 JOB # A SM HAZZARDOUS WASTE/SHOP SUPPLIES TOTAL - MISC ESTIMATE - - -CUSTOMER HEREBY ACKNOWLEDGES RECEIVING ORIGINAL ESTIMATE OF \$169.95 (+TAX)
APPROVED REVISED ESTIMATE (# 1) OF \$690.00 (\$690.00 (+TAX) ON 09/15/07 AT 02:08pm BY NICK COMMENTS COMMENTS SPOKE WITH NICK --- EXPLAINED THE STEERING IS NOT ACTING UP GOT OK FOR VEHICLE TO BE DRIVEN OVERNITE 9/13/07 @ 3:10 TECHNICIAN CERTIFICATION-4780 STEVE R MILLER AC TOTALS----At Lou Bachrodt Automall we strive to Completely Satisfy our customers. If you feel for any reason that you cannot give us your highest satisfaction rating, please contact the TOTAL LABOR.... 562.45 TOTAL PARTS.... 0.00TOTAL SUBLET... 0.00 department manager. Our goal to be your number one provider. TOTAL G.O.G.... 0.00 TOTAL MISC CHG. TOTAL MISC DISC 27.83 We want to ensure that you understand your repairs. Please do not hesitate to ask for clarification. Your signature 0.00 TOTAL TAX..... 0.00 acknowledges that the repairs have been explained to you. **TOTAL INVOICE \$** 590.28 HARIGHAL CUSTOMER SIGNATURE 2007 PAGE 2 OF 2

[END OF INVOICE] 02:08pm

CUSTOMER COPY



Lou Bachrodt Automall

CHEVROLET . JEEP . VOLKSWAGEN . BMW

(7070 CHERRYVALE N. BLVD.) P.O. Box 5647 - ROCKFORD, IL 61125 (815) 332-3000 • FAX: (815) 332-6913 www.bachrodt.com

USTOMER NO. 151103		DON PAGANO		5130 TAG		"09715/07	CVC\$38853
		LABOR RATE		MILEAG	¹⁶ 59,794	W HT/	STOCK NO.
ROCKFORD, IL		ÖŠ/ČHEVROLE	T/MALIBU			05/30/06	DELIVERY MILES
		TGINOZU6	5 4 8 8 5	F		SELLING DEALER NO.	PRODUCTION DATE
		F.T. E. NO.		P. O. NO.		09/12/07	
9B# 1 CHARGES		COMMENTS					мо: 5984
READS POWER STEERING THAT IF YOU SHUT OFF C0545 STEERING WHEEL R/R COLUMN E7680 N/C ARTSQTYFP-NUMBER- 1 15926870	VEHICLE AND RI TORQUE INPUT	ESTART IT IT MAY SENSOR INTERM FAI	ILING	PRICE-	WARRANTY		
			TOTAL -	PARTS	WARRANTY 0.00		
DB# 1 TOTALS							
DB# 2 CHARGES	JOB# 1	JOURNAL PREFIX (:VCS 10R# 1	TOTAL	0.00		
				· · · · · · · · ·		•	
ABOR	MOTE START IS	TECH(S): INOPERATIVE/ BEEN	:4780		99.99	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	of Claimin
ABOR	MOTE START IS SWITCH ON HOO	TECH(S): INOPERATIVE/ BEEN D LATCH	4780 N LIKE THA		99.99	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	lot Claimin
ABOR	MOTE START IS SWITCH ON HOO	TECH(S): INOPERATIVE/ BEEN D LATCH	4780 N LIKE THA LABOR	TOTAL	•		ot Claimin
ABOR	MOTE START IS SWITCH ON HOO JOB# 2	TECH(S): INOPERATIVE/ BEEN D LATCH JOURNAL PREFIX C	4780 N LIKE THA LABOR CVCS JOB# 2	TOTAL	99.99 99.99		lot Claimin 86#2
ABOR	MOTE START IS SWITCH ON HOO JOB# 2 PECTION E COURTESY INS	TECH(S): INOPERATIVE/ BEEN D LATCH JOURNAL PREFIX C	4780 N LIKE THA LABOR CVCS JOB# 2	TOTAL	99.99 99.99		lot Claimin
ABOR	MOTE START IS SWITCH ON HOO JOB# 2 PECTION E COURTESY INS	TECH(S): INOPERATIVE/ BEEN D LATCH JOURNAL PREFIX C TECH(S): PECTION.	4780 N LIKE THA LABOR CVCS JOB# 2	TOTAL	99.99 99.99 99.99		lot Claimin
ABOR	MOTE START IS SWITCH ON HOO JOB# 2 PECTION E COURTESY INS	TECH(S): INOPERATIVE/ BEEN D LATCH JOURNAL PREFIX C TECH(S): PECTION.	LABOR LABOR CVCS JOB# 2 CVCS JOB# 3	TOTAL	99.99 99.99 99.99		lot Claimin
ABOR	MOTE START IS SWITCH ON HOO JOB# 2 PECTION E COURTESY INS JOB# 3 ICAL IN INSTALLATI	TECH(S): INOPERATIVE/ BEEN D LATCH JOURNAL PREFIX (PECTION. TECH(S): ON CHARGES	LABOR CVCS JOB# 2 CVCS JOB# 3	TOTAL	99.99 99.99 99.99		
ABOR	MOTE START IS SWITCH ON HOO JOB# 2 PECTION E COURTESY INS JOB# 3 ICAL IN INSTALLATI TORQUE SENSOR	TECH(S): INOPERATIVE/ BEEN D LATCH JOURNAL PREFIX (PECTION. TECH(S): ON CHARGES INTERM FAILING	LABOR LABOR 24780 CVCS JOB# 3	TOTAL	99.99 99.99 99.99 0.00		lot Claimin

ROCKFORD, IL 61112 (815) 332-3000

Customer Name

Courtesy Inspection 161741885F

(08/05)

	911 57111	venicle Identification Inumber
CHE	CKED and OKAY MAY REQUIRE FU	TURE ATTENTION REQUIRES IMMEDIATE ATTENTION
CHE		
•	Radiator, heater and air conditioning hoses for leaks and damage	BODY DAMAGE
$\bullet \circ \bullet$	Oil and/or fluid leaks	1 6 0 miles
\bullet \circ \bullet	Constant velocity (CV) boots (if equipped)	
●. ○ ●	Exhaust system (leaks, damage, loose parts)	
$\bullet \circ \bullet$	Drive Shaft, transmission, u-joint and shift linkage	
• 0 •	Steering and steering linkages and lubricate	
• 0 •	Inspect suspension	
\bullet \circ \bullet	Brake system (lines, hoses, parking brake & wheel bearings)	Office and the second s
\bullet \circ \bullet	Engine cooling system (hoses & clamps)	Signature: July
•	Accessory drive belt(s)	Window washer spray, wiper operation and wiper blades
• •	Check battery terminals	Windshield for cracks, chips and pitting
• •	Clutch operation	Operation of horn, interior lights and exterior lights
• •	Evaporative fuel system hoses and tubes	• Other
	BRAKES	CHECK TIRES RF
= OV	LF ● ○ ●	7/32 or greater TREAD DEPTH 7/32 or greater
O= 20%	6 - 50% LR ● ○ ●	4/32 to 6/32 3/32 or less 3/32 or less
	SS THAN 20%	LB 7/32 or greater 7/32 or greater
	Measurements Not raken hijs visit RR • () •	4/32 to 6/32 4/32 to 6/32
	The state of the s	3/32 or less 3/32 or less
Comments:		The Pressure Set to Feditory Resommended 25.
		FLUID SERVICES OK ADD SVC
		Window washer fluid level
		Brake Fluid
		Coolant (Dexcool) (Front / Rear) Differential
	RECOMMENDED SERVICES	(Front / Rear) Differential
	Mile Service	Fuel Induction / Injectors Fuel Induction / Injectors
- ◯ Next Sch	neduled Maintenance	Power Steering Fluid
Date	Time	Transfer Case (4WD Only)
Reason For M	laintenance	Transmission Fluid
		This Courtery Inspection Completed by Your Rachrodt Service Tear

I BACHROUT CHY 7070 CHERRYVALE N BLVD ROCKFORD IL 61112 815-332-3600

Tera 10.0001 Ref_Cd: U014

Sale

Entry Method: Swiped

Batch A: MASTERCARD 135

16:46:23

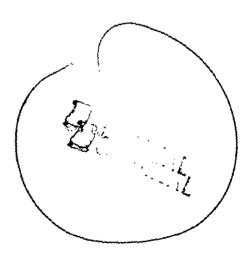
Inv#: 388537

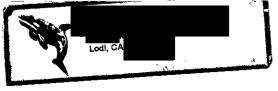
Appr Code: 871 44

Total:

598,28

Customer Cop. THANK 1001





STOCKTON/STKN CA 952 1 T 14 JAN 2008 PM



INFORMATION Redacted PURSUANT TO THE FREEDOM OF

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

Keimbursement Department P.D.BOX 33170 Detroit, MI 48232-5170

JAN 1 7 2008

4823235170

i70 - Hallahahballashhhaadhadhadhaadhaadh

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 01-02-2008
17-Digit Vehicle Identification Number (VIN): 1G ZT54835F
Mileage at Time of Repair: 49,946 Date of Repair: 07-24-2007
Claimant Name (please print):
Street Address or PO Box Num
City: LODI State: CALIF ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 149.95
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



195635

INVOICE

P.O. BOX 8349, STOCKTON, CA 95208 6441 HOLMAN ROAD * STOCKTON, CA 95212 (209) 475-6630 * (800) 242-4273

TOTAL

149.95

PAGE 1

BUS: SERVICE ADVISOR: 831 DAVID GIBBONS COLOR YEAR MAKE/MODEL LICENSE * MILEAGE IN / OUT TAG 05 CHEVROLET MALIBU 1G1ZT54835F 49946/49946 DEL. DATE PROD, DATE WARR, EXP. PROMISED PO NO. RATE PAYMENT INV. DATE 01JAN05 DD 01**JAN**2005 WAIT 25JUL07 0.00 CASH 28JUL07 R.O. OPENED READY DLR:06124 ENG:3.5 Liter SFI OPTIONS:

18:27 24JUL07 13:43 28JUL07

LODI

HOME

LINE OPCODE TECH TYPE HOURS LIST

A CUSTOMER STATES THE VEHICLE LOOSES POWER STEERING ASSISTANCE-GETS

VERY HARD TO TURN

G1 ADVISED CUSTOMER OF UNSAFE TO DRIVE CUSTOMER

DECLINED REPAIRS AT THIS TIME

87 CCC 149.95

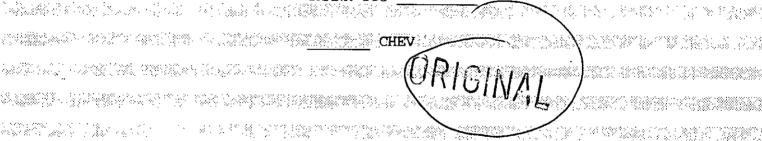
49946 scan test dtc c0545. performed diag, checked connections. battery is weak and needs to be replaced . performed diag for c0545,

intermittent problem. recommend new module and column. *************

VEHICLE UNSAFE TO DRIVE

ALL PARTS ARE NEW UNLESS OTHERWISE SPECIFIED

THANK YOU



ORIGINAL S DATE

ADDITIONAL AMOUNT

I ACKNOWLEDGE RECEIPT OF VEHICLE AND I HAVE RECEIVED A COPY OF THIS

hereby authorize the repair work herein set forth to thereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in dase of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the samplier or transporter. I

	, ,
DESCRIPTION	: TOTALS
LABOR AMOUNT	149.95
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	149.95
LESS INSURANCE	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	149 95

NOTICE TO CONSUMER: PLEASE READ IMPORTANT INFORMATION ON BACK.

Copyright 2000 ADP, Inc. SERVICE INVOICE #2 XSI2C

AUTHORIZED BY

CUSTOMER COPY

January 31, 2011



Service Request: 71-590245710

Customer Relationship Specialist: Joey Bravo

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the vehicle that you had repaired. We regret that we are unable to reimburse you the amount you requested because the vehicle was reported as salvaged by the State of California.

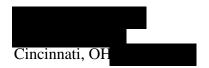
At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have any future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

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

February 1, 2011



Service Request: 71-590575786

Customer Relationship Specialist: Jerry Robinson

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the power steering motor that you had repaired. We regret that we are unable to reimburse you the amount you requested because the part replaced is not the part covered by this special coverage.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have any future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Cláim Submitted: 9-4-07
17-Digit Vehicle Identification Number (VIN): 1G12T52835 F
Mileage at Time of Repair: 53,879 Date of Repair: 9-4-07
Claimant Name (please print):
Street Address or PO Box Number:
City: CINCINNATI State: DHIO ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

0010291/GMR2V071129R07 Page 03 of 03

t i CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

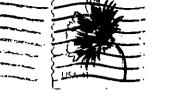
Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



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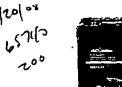


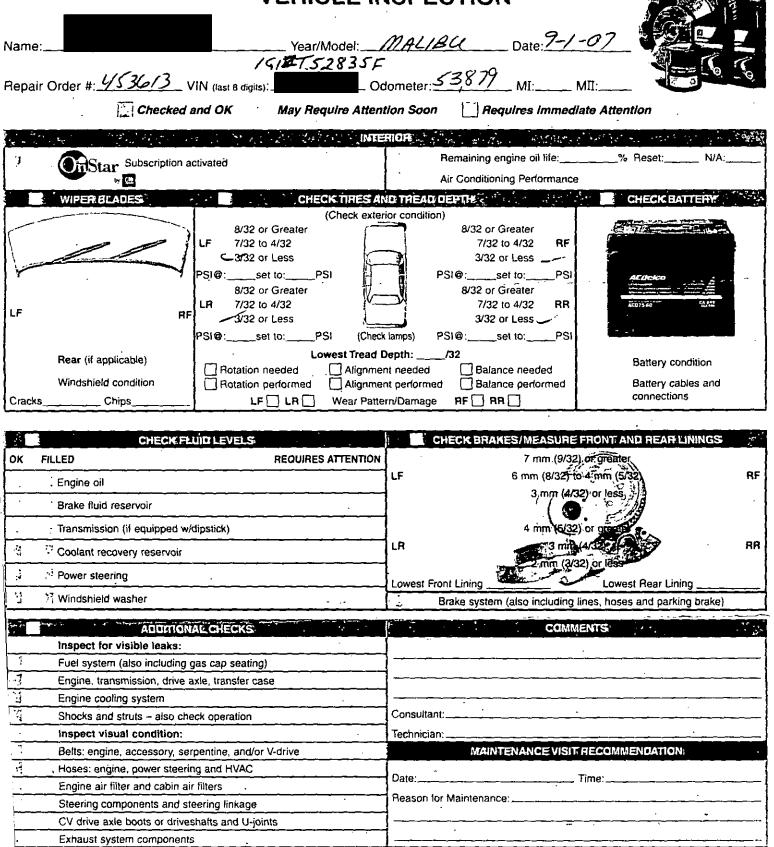
Reimbursement DEPARTMENT P.O BOX 33170 DETROIT, MI 48232-5170

Hallishakhilla Tahlan liki Ilka ku Hamalli



MULTI-POINT VEHICLE INSPECTION





SIMPLIFIED MAINTENANCE

ΜI ☐ Required Performed MII Required Performed

IO7. Cupyright all rights reserved

GLENWAY CHEVROLET

3015 Glenhills Way CINCINNATI, OH 45238 513-251-5555 www.glenwaychevrolet.com

SERVICE DEPARTMENT HOURS:

Monday and Wednesday 7:00AM - 7:00PM Tuesday, Thursday, Friday 7:00AM - 6:00PM Saturday



The Only Sure Way. Glenway.

Goodwrench Service

BODY SHOP

2300 Ferguson Rd. CINCINNATI, OH 45238 513-347-2680 Fax 513-347-2688 Body Shop Hours: Monday - Friday 8:00 AM - 5:00 PM

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GLENWAY CHEVROLET

- 3015 Glenhills Way CINCINNATI, OH 45238 513-251-5555

www.glenwaychevrolet.com

SERVICE DEPARTMENT HOURS:

Monday and Wednesday 7:00AM - 7:00PM

Tuesday,-Thursday, Friday 7:00AM ~6:00PM

Saturday



The Only Sure Way. Glenway.

Goodwrench Service

BODY SHOP

2300 Ferguson Rd. CINCINNATI, OH 45238 513-347-2680 Fax 513-347-2688 Body Shop Hours: . Monday - Friday 8:00 AM - 5:00 PM

> F YOU ARE UNABLE TO MARK COMPLETELY SATISFIED, PLEZ 15 CONTACT YOUR SERVICE 40 14 CF

MMEDIATELY

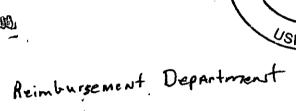
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USTOMER NO	57945		PĤĨ	LIP E PU	JRKISER	37	^{NO} 473	09/04/07	CVC\$453613
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Long view,



JAN 11 THOU

46232+5170 8050



Detroit, Mi. 46232-5170

Mollaladalladdaldadladladladladladla

P.D. Box 33170

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted:/- 7- 08
17-Digit Vehicle Identification Number (VIN): / GIZS5 2 F95 F
Mileage at Time of Repair: 67,538 Date of Repair: 12-06-07
Claimant Name (please print):
Street Address or PO Box Number:
City: Longview, State: Texas ZIP Code:
Daytime Telephone Number (include Area Code)
Evening Telephone Number (include Area Code)
Amount of Reimbursement Requested: \$
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense Lincurred for the repair covered by this letter. Claimant's Signature

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

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- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
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 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



KIN IS

2001 West Loop 281 Longview, TX 75604 903/759-4667 Fax: 903/295-6823 Mailing Address: P.O. Box 1529 Tyler, TX 75710

2 Opicinal

·			/		/	Luciosas	
9657	MELISSA WAC	SES //	83181 TAG NO	·	12/06/07	K1CS33903	
	LABOR RATE	LICENSE NO.	MILEAGE	67,538	OLOH	STOCK NO.	
	YEAR / MAKE / MODEL		/4 poon ca		DELIVERY DATE	DELIVERY MILES	
LONGVIEW, TX	05/CHEVROLI VEHICLE I.D. NO.				SELLING DEALER NO.	PRODUCTION DATE	
	1 G 1 Z S	52 F 9	5 F		B. O. DATE	<u> </u>	
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BOR····· 2 10K1Z DRIVEABILITY BUMP IN FRONT WHEN TURNINGSLACK FOUND STEERING RACK LEAKING REPLACED STEERING RACK AND SENT OU	TECH(S) IN STEERING		180.00 menufactu ers, unless			turer or supplier are theirs, not the do ss otherwise provided in writing and the buyer by the dealer."	
	NG RACK	272.35 TOTAL	272.35 - PARTS	272.35 272.35		PURCHA	
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AGE 1 OF 2 CUSTOMER COPY		[CONTINUED (ON NEXT PAGE)	05:35pm			

903/759-4667 Fax: 903/295-6823

Longview, TX 75604

PAGE 2 OF 2

CUSTOMER COPY

Mailing Address: P.O. Box 1529 Tyler, TX 75710

Original

				/		
CUSTOMER NO. 9657	ADVISOR MELISSA WA	GES	83181	AG NO.	12/06/07	K1CS33903
	LABOR RATE	LICENSE NO.	MILE	67,538	COLOR	STOCK NO.
LONGVIEW, TX	YEAR / MAKE / MODEL 05/CHEVROL	ET/MALIBU	/4 DOOR	SEDAN	DELIVERY DATE	DELIVERY MILES
LONGVIEW, IX	VEHICLE I.D. NO.	5 2 F 9	5 F		SELLING DEALER NO.	PRODUCTION DATE
	F. T. E. NO.		P. O. NO.		R. O. DATE 11/30/07	
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* [] VISA [] MASTERCARD [] DISCOVER	* *	TOTAL G	.O.G	0.00	nished to the buyer b	y the dealer."
* [] AMER XPRESS [] OTHER [] CHARGE	* *	TOTAL M	ISC DISC	-454.77 22.47		
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 THANK YOU FOR YOUR BUSINESS!!		, 0 , , 12		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	If you are	happy let your
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					US FOR	R SERVICE

[END OF INVOICE] 05:35pm

February 1, 2011



Service Request: 71-590603706

Customer Relationship Specialist: Pinkie Smith

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering rack that you had repaired. We regret that we are unable to reimburse you the amount you requested because the part replaced is not the part covered by this special coverage.

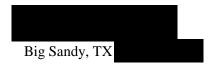
At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have any future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

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

February 1, 2011



Service Request: 71-590731515

Customer Relationship Specialist: Jasmine Cooper

Dear :

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the instrument panel cluster gauge that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$100.00.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

By Sandy, TK.

DEC 1 9 2001,

13 DEC 2007 PM 3 1

EAST TEXAS PODG

Reinbursement Deptersment P.O. Box 33170 Setroit, MI 48232-5170

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CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant					
Date Claim Submitted: 12-13-07					
17-Digit Vehicle Identification Number (VIN): 1G1ZT548X5F					
Mileage at Time of Repair: 59,456 Date of Repair: 10-10-07					
Claimant Name (please print):					
Street Address or PO Box Number:					
City: Big Sandy State: Texas ZIP Code:					
Daytime Telephone Number (include Area Code):					
Evening Telephone Number (include Area Code):					
Amount of Reimbursement Requested: \$\00.00					
The following documentation must accompany this claim form.					
Original or clear copy of all receipts, invoices, and/or repair orders that show:					
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt) 					
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter. Claimant's Signature:					

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



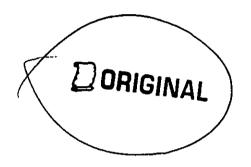






P. O. Box 1797 Gladewater, TX 75647 Phone 903-845-2132 Toll Free 800-259-2438 www.mckaig.net

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™00413		™®9/25/07			
TEM 0 0 5 MAKE CHEVROLET MODEMALIBU COLOR BROWN	BIG SANDY TX	TIME #9:28			
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-	(F)15926870 (COLUMN) 1	286.48			
	Total Labor				
	Total Parts				
(Tech:03) A	Total Repair (Warranty)	. 381.99			



Next Service unit of numeroni-viruer	w.c	INT.	CUSTOMER
1030 002 7200 0321 00 2220 022 722002	286.48	.00 Parts	.00
DISCLAIMER OF WARRANTIES Any warranties on the product sold hereby are those made by the manufacturer. The selfer hereby expressly disctains all warranties either expressed or implied, including any implied warranty of merchantability of fitness for a particular purpose, and neither assumes nor authorizes any person to assume for it any flability in connection with the sale of said products. Any limitation contained herein does not apply where producted by law.	.00 .00 381.99 .00	.00 Shop Supplie .00 Oil/Grease .00 Sub Total .00 Tax	.00 .00 .00 .00
CUSTOMER SIGNATURE	381.99	.00 Total	.00
Page 1 of 1 Job 00413 Reprint (1)			
00413 Customer Copy Labor Rate 70.00			

Chevrolet • Pontiac • Buick P.O. Box 1797

Gladewater, TX 75647

200744

CASH

Cash Receipt

11/15/07 17:23:02 C/D 2

Received (Check)

\$ 100.00 Check No.: 5003

Total-Received ---- \$ ----100.00-

220G 201

200744 00413

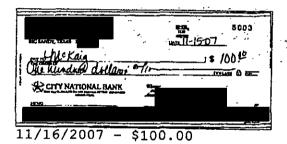
200744 200744 Check No. 5003

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North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

DATE
01/11/08



CHECK NO.

50-937 213

*****OO CENTS

North American Operations General Motors Corporation Disbursement Account

PAY TO THE ORDER

BIG SANDY TX

SIGNATURE

The Chase Manhattan Bank, N.A. Syracuse, New York

AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. 1 CHECK NO. BB 000000304 PAYMENT DATE VENDOR NAME 01/11/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT .00 01/10/08 VH 1-9RYKDH .71-590731515.1-9RYKDH 0000.000 100.00 (30 / 30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (30 / 30 (100.00 1G1ZT548X5F

ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

TOTAL

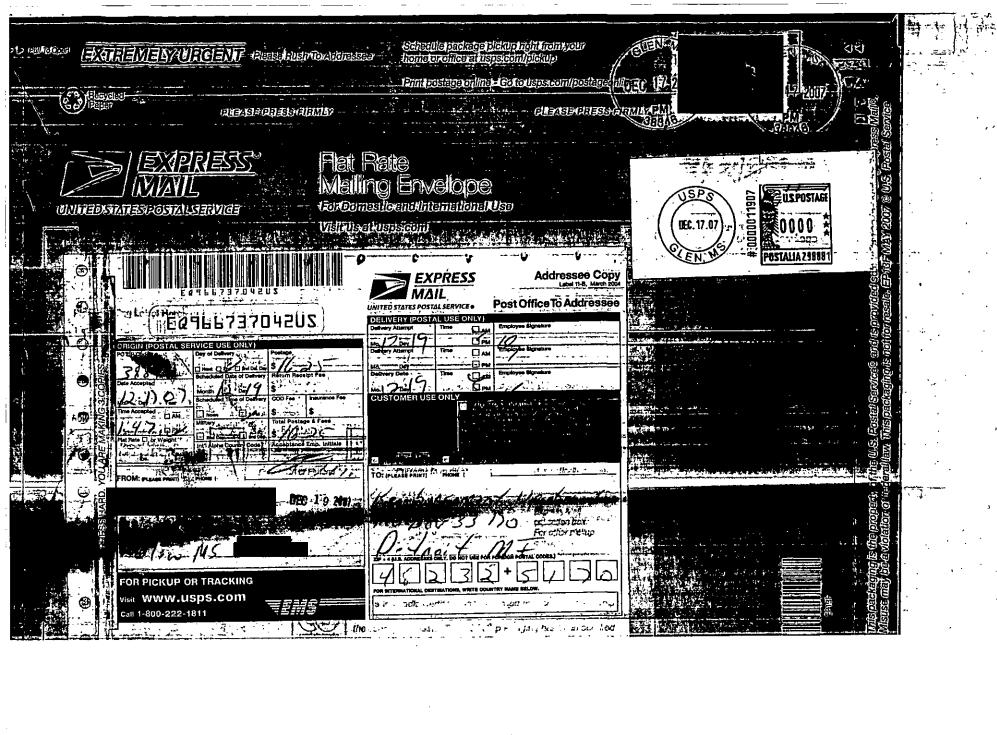
H3

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100.00

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 CHECK NO DATE. 01/17/08 86 XXXX64 CENTS North American Operations General Motors Corporation Disbursement Account GLENN MI ORDER OF The Chase Manhattan Bank, N.A. Syracuse, New York AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 **DETACH BEFORE DEPOSITING CHECK** VENDOR CHECK NO. 1 DUNS NO. BB 000000090 VENDOR NAME 01/17/08 REGISTER NO. DESCRIPTION DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT INVOICE DATE DISC. AMOUNT NET AMOUNT 01/16/08 VM 1-9SYINZ 71-590755107.1-9SYINZ 00.0000 574.64 574.64 ~ 00 2 1G2ZH528554 ne des la seco 38 ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 TOTAL 574.64 .00 574.64



Jesus said, "I am the way, the truth, and the life"

DEC 1 9 2081

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12/17/07
17-Digit Vehicle Identification Number (VIN): ユGユスは5よ8554
Mileage at Time of Repair: 53.132 Date of Repair: 8/31/47
Claimant Name (please print):
Street Address or PO Box Number:
City: GLEN State: MS ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 574, 64
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Pontiac Customer Assistance Center at 1.800.620.7668 (TTY 1.800.833.7668).



1701 HWY. 72 WEST CORINTH, MS 38834 (662)_287-1944

CVCS6192

(602) 282-1944 (600) 514-3740

	,		4		
6247	ADVISOR	- \	9805 TAG NO		08/31/07
UZTI	CRAIG FARLE	LICENSE NO.	MILEAGE		COLOR
	CABON HATE	LIGENSE NO.	MILENSE	52,132	1 /
	YEAR / MAKE / MODEL	.1		1 - 1 - 1 - 1	DELIVERY DATE
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	F. T. E. NO.		P.O. NO.		R. O. DATE
					08/31/07
BUSINESS PHONE	COMMENTS				
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THANK YOU FOR YOUR BUSINESS!!					COMP
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CUSTOMER SIGNATURE					generation o

DUPLICATE INVOICE

IMPORTANT

You will receive a survey from the manulacturer shortly. Your Complete Satisfaction is our goal. If for any reason you cannot give us a "Completely Satisfied" please contact our Service Dept. before mailing survey.

Frankie Blackmon of CORINTH (662) 287-1944

CVCS6192

STOCK NO.

DELIVERY MILES

PRODUCTION DATE

MO: 52132

DISCLAIMER OF WARRANTIES

"All expressed warranties, if any, by a manufacturer or supplier are theirs, not the dealers, unless otherwise provided in writing and furnished to the buyer by the dealer. Mississippi's Implied Warranty Law may give the buyer additional rights."

NOT RESPONSIBLE FOR LOSS OR DAMAGETO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

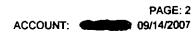
ENVIRONMENTAL COMPLIANCE CHARGE

Maintaining and repairing your car inevitably involves the use of chemicals and generation of wastes (solvents, oils, caustics, lead, asbestos, etc.) that must be stored, managed and disposed of instrict compliance with federal, state and local environmental regulations. We support these regulations and also believe our customers do too because they help ensure a safer, healthier environment for everyone. Complying with these regulations increases the cost of service.

Ordinarily, increased costs simply result in an increased hourly labor charge. This dealership has decided in lieu of raising its labor rate, to list a compliance charge on appropriate service bills because we believe our customers would be interested to know they are helping to pay for a cleaner environment.

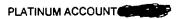
STATEMENT OF ACCOUNT

CITIZENS BANK-MAIN OFFICE PO BOX 910 **RUSSELLVILLE AL 35653**



TELEPHONE:256-332-1710

RANDY EUGENE SAINT SHEREDA SAINT POD ANGEL RENCHER



----- OTHER DEBITS -----

DESCRIPTION	DATE	AMOUNT
PURCHASE 08/14 CHEVRON 0208305 CORINTH MS 351892	08/15	25.02
PURCHASE 08/14 EXXONMOBIL 45607Q19 RIPLEY MS 345691	08/15	36,75
DDA POS 08/16 13:51 WAL Wal-Mart Sup 0105 WAL-SAMS CORINTH	08/16	113.58
MS		
DDA POS 08/16 13;19 WAL Wal-Mart Sup 0105 WAL-SAMS CORINTH	08/16	181.36
MS		
PURCHASE 08/18 EXXONMOBIL 45680Q19 CORINTH MS 210020	08/17	39.29
DDA POS 08/20 13:57 WAL-MART #0105 2301 HARPER ROAD CORINTH	08/20	9.34
MS		
DDA POS 08/19 10:45 WAL Wai-Mart Sup 0105 WAL-SAMS CORINTH	08/20	54.95
MS		
PURCHASE 08/20 EXXONMOBIL 45607Q19 RIPLEY MS 019627	08/21	4.85
PURCHASE 08/20 EXXONMOBIL 45607Q19 RIPLEY MS 019759	08/21	20.00
NORTHEAST MISSI PURCHASE 2201 CORIMS	08/22	20.00
PURCHASE 08/24 EXXONMOBIL 45680Q19 CORINTH MS 751150	08/27	8.22
PURCHASE 08/24 KRYSTAL 00004Q01 CORINTH MS 751624	08/27	21.97
PURCHASE 08/24 EXXONMOBIL 45680Q19 CORINTH MS 750594	08/27	40,49
PURCHASE 08/27 EXXONMOBIL 45607Q19 RIPLEY MS 026673	08/28	6.08
PURCHASE 08/27 EXXONMOBIL 45882Q19 CORINTH MS 173374	08/28	15,33
PURCHASE 08/27 CHEVRON 0209305 CORINTH MS 035371	08/28	20.00
DDA POS 08/28 12:41 WAL Wal-Mart Sup 0105 WAL-SAMS CORINTH	08/28	37,54
MS		
WAL-MART STORES PURCHASE 2207 CORIMS	08/28	225.61
PURCHASE 08/28 EXXONMOBIL 45680Q19 CORINTH MS 290479	08/29	20.00
STATE FARM RO 08 SFPP 09 S 1033868209	08/29	76.74
PURCHASE 08/29 EXXONMOBIL 45680Q19 CORINTH MS 552267	08/30	13.54
PURCHASE 08/29 EXXONMOBIL 45680Q19 CORINTH MS 550816	08/30	30.00
DDA POS 08/31 14:42 WAL-MART #0105 2301 HARPER ROAD CORINTH	08/31	44.60
MS		
PURCHASE 09/01 YAHOO *SPORTS 866-562-7228_CA 759095	09/04	4.95
PURCHASE 09/01 SONIC DRIVE IN #174Q63 CORINTH MS 793091	09/04	5.43
PURCHASE 09/01 EXXONMOBIL 45680Q19 CORINTH MS 790477	09/04	6.29
PURCHASE 09/01 EXXONMOBIL 45662Q19 CORINTH MS 606459	09/04	19.12
PURCHASE 09/01 EXXONMOBIL 45680Q19 CORINTH MS 789252	09/04	30.00
CAPITAL ONE ONLINE PMT 724639960155885	09/04	61.27
PURCHASE 09/04 CHEVRON 0209305 CORINTH MS 072443	09/05	15.00
NORTHEAST MISSI PURCHASE 2216 CORIMS	09/05	20.00
AT&T CARE CELLULAR 2128748500121	09/05	155.06
PURCHASE 09/04 FRANKIE BLACKMON OF CO CORINTH MS 069859	09/05	574.64

CONTINUED

PLEASE EXAMINE AND RECONCILE AT ONCE. IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS PHONE US AT 258-332-1710 OR WRITE US AT P.O. BOX 910, RUSSELLVILLE, AL 35853

February 1, 2011



Service Request: 71-590755107

Customer Relationship Specialist: CJ Parker

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$574.64.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530



CHECK NO.

DATE 01/23/08

XXXXXXXXXXXXX989 DOLLARS

XXXX14 CENTS

AMOUNT ****************

North American Operations General Motors Corporation Disbursement Account

FREDERICK MD

The Chase Manhattan Bank, N.A. Syractine, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

DETACH BEFORE DEPOSITING CHECK

CHECK NO.

PAYMENT DATE

01/23/08

VENDOR NAME REGISTER NO. DESCRIPTION

VENDOR DUNS NO

INVOICE DATE

BB 000000233

DOC. REFERENCE NUMBER

% OISC.

INVOICE AMOUNT

DISC. AMOUNT

NET AMOUNT

01/22/08 VM 1-9RV28I 71-590769774.1-9RV28I 0000.00 989.14 .00 989.14 161ZU54B35F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3

February 1, 2011

Frederick, MD

Service Request: 71-590769774

Customer Relationship Specialist: Jane West

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the power steering that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$989.14.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

Frederick MD

17 DEC 2007 PM 1 T

EREDERICK MD 217

USA First-Class

Reimbursement Department P.O. BOX 33170 Detroit, MI 48232-5170 DEC 1 9 2007

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12/15/07
17-Digit Vehicle Identification Number (VIN): 16-12054835F
Mileage at Time of Repair: 41280 Date of Repair: 1/18/07
Claimant Name (please print):
Street Address or PO Box Number:
City: Frederich State: Md. ZIP Code
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 989.74
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

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- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

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55152520125/20120/AUTO MALLS Fitz/Mall.com SINCE 1966





SUZUKI

114 Baughmans Lane FREDERICK MD 21702 301-696-9200 • 1-900-4AUTOMAL



Mazda Saab



	Vis	sit us at our we	ebsite: v	www.Fitz	com		/	
CUSTOMER NO	100640	KEVIN BIN	DEL	-(C	\$ 46 TAG NO.	367	™05 ⁶ /25/07	™cvcs622967
		₽ 98 ₹00	LICEUSE	NO	MILEAGE	38,195	CDARK BLUE M	^{sπ} F107436
FREDERIC	CK. MD	YOS/CHEVRO	LET/M	LIBU/L	T SEDAN	/	⁰ 08/20/05	DELIVERY MILES 197
	,	VETICI GID TO Z L	1 5 4	8-3-5	F		SEFAMPEALER NO.	PRODUCTION DATE
		F. T. E. NO.		P	0. NO	<u>-</u> .	ⁿ 05ÿ24/07	
		CONNENAMER YES		L				MO: 38208
LABUR & PAR! J# 1 10CVZLC	SHANER LOANER CAR UNITS): 0.00 TECH(5) -0063	 9	777777	INTERNAL	FOR YOUR INFORMATION AN	D ACKNOWLEDGEMENT
1001220	OWNER REQUESTED FITZGERALD LOANER NEEDED TRANSPORTATION PROVIOED TRANSPORTATION		37.3300	U		INTERNOL	TERMS AND CONDIT REPAIR ORDER PAYMENT TERMS: We only Master Card, Discover or American	S & INVOICES accept cash, check, Visa.
PARTSC)TY···FP·NUMBER·····DESCR1	[PTION		····UNIT	PRICE-		payment. No credit will be exter Full payment is due immediate	ndea
i			JOB #	1 TOTAL	PARTS	0.00	We reserve the right to requiparts and labor	
		JOB #	1 TOTAL	LABOR &	PARTS	0.00	We charge interest at .05% p more than 30 days uncler this a storage charge of \$45.00 per	epair order. You agree to pay
J# 2 19CVZ1	STEERING UNITS CUSTOMER STATES THE POWER STEERING		S):9963	В	•	147.00	completion of work.	. • -
<u>!</u>	SERVICE POWER STEERING LIGHT IS CO RECALIBRATED STEERING POSITION SER	OMING ON YSOR AND TORQUE	-			:	You agree to pay all costs of under this repair order includir Unless full payment is rect completion of work your vehi- uniform Commercial Code of the Uniform Code of Uniform	ewed within 30 days from cle may be sold under the
PARTS(TYFP-NUMBERDESCR	IPTION	JOB #	UNIT 2 TOTAL	PRICE - PARTS	0.00	due. You consent to reasonable	use of the vehicle for the
		J08 #		LABOR &		147.00	purpose of inspecting, testing, You understand that we do not	accept any responsibility for
J# 3 55CVCAM	IPAIGNS CAMPAIGN UNITS	S: 0.00 TECH(S):9963		•	0.00	damage or loss to any non- property or equipment left in or it is in our possession.	
	WE CHECKED FOR OPEN RECALLS AND THAT THIS TIME. NO WORK REQUIRED AT THIS TIME	HERE ARE NONE Ó	PEN				You agree to be bound by Program Agreement and the Vor vour agent accepts a Loal repairing your vahicle	dhicle Use Agreement if you her Car to use while we are
PARTSC	TYFP-NUMBERDESCRI	PTION	JOB #	UNIT 3 TOTAL	PRICE- PARTS	0.00	We warrant that the parts at Repair Order will be free workmanship for 90 days or 40 your vehicle to you, Any defect	of defects in material and 00 miles from when we return s in parts or labor covered by
		JOB #	3 TOTAL	LABOR &	PARTS	0.00	this warranty shall only be co- limited to repair or replaceme labor. No other express or imp	nt of the defective parts and
J# 4+02CVZ1		: 2.00 TECH(S):9963	8 8		180.00	By signing below you wait drive the vehicle.	e the requirement to test
	C/S CHECK FOR MAINT RIGHT FRONT AXLE SEAL IS LEAKING						Labor is charged by flat rate in tabor will be charged by clock	hour.
DADTO	REPLACED RIGHT FRONT AXLE SEAL	IDTION:			On to s		A charge equivalent to 10% of for environmental, disposal and vehicle	
JOB # 4	TYFP-NUMBERDESCRI 1 24203910 SEAL N	(IT 6.061 6		4 TOTAL	32.25	32.25 32.25		CHEMITAGE
		JOB #	4 TOTAL	LABOR &	PARTS	212.25	CUSTOMER'S NO CLAIMS WITHO	UT THIS INVOICE
MISCCO JOB # A	DEDESCRIPTIONSS SHOP SUPPLIES/ENVIRONMENT	ΓΑΙ CHC	CONTI	ROL NO		10.95	THAN	CYOU
30D # A	33 SHOP SUFFETES/ENVIRONMENT	IAL CHU		TOTAL -	MISC	10.95	l	
COMMENTS		· • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •		CUSTOMER'S E-	
APP 380.00 5 LM DN CELL D	0-25-07 KB DONE 215 5-25-07 KB						CUSTOMEF () CASH (PAYMENT CHECK NO
) CREDIT CARD
							CASHIER SIGNATURE	
							PAYMENT DATE/.	_ /
							CUSTOMER CALLED: BY	
PAGE 1 OF 2	CUSTOMER COPY		[CONTI	NUED ON N	NEXT PAGE) 0	2:14pm	DATE	TIME SF634839 Q-1080

AUTO MALLS FitzMall.com SINCE 1966



PAGE 1 OF 1



CUSTOMER COPY

114 Baughmans Lane FREDÉRICK, NO 21702 301-696-9200 • 1900 • UTOMALL





__ TIME _____SF634839 Q (08:06)

www.FitzMall.com Visit us at our websi TAG NO 665 "ຕັ້ຈໍຕຣິ630562 CUSTOMER NO **77/18/07** 100640 κ≅ΫΪΛ BI**N** 6546 MILEAGE `F107436 DARK BLUE M 41,280 ΜĎ DELIVERY MILES 197 08/20/05 CHEVROLET/MALIBU/LT SEDAN FREDERICK, MD FLUING DEALER NO PRODUCTION DATE EICHO 2 U 5 4 8 3 5 F P. O. NO MO: 41282 COMMENTS YES ABOR & PARTS --FOR YOUR INFORMATION AND ACKNOWLEDGEMENT 411.60 J# 1 19CVZ 4.20 TECH(S):734 UNITS: STEERING TERMS AND CONDITIONS FOR VEHICLE REPAIR ORDERS & INVOICES CUSTOMER STATES; POWER STEERING LIGHT COMING ON. STEERING FEELING TIGHT PAYMENT TERMS: We only accept cash, check, Visa, Master Card, Discover or American Express Bank Cards for payment. No credit will be extended. LIKE NO POWER STEERING DIAGNOSTIC FOUND CODES C0460,C0565,C0176 INTERNAL FAILURE AT Full payment is due immediately upon completion of work. STEERING COLUMN We reserve the right to require a reasonable deposit for REPLACED STEERING COLUMN AND RESET CODES parts and labor. We charge interest at .05% per day on amounts that due more than 30 days under this repair order. You agroe to pay a storage charge of \$45.00 per day beginning 48 hours after completion of work. PARTS-----QTY---FP-NUMBER------DESCRIPTION------UNIT PRICE-402.08 402.08 15926870 COLUMN 6.518 JOB # 1 JOB # 1 TOTAL PARTS 402.08 You agree to pay all costs of collecting any amounts due under this repair order including reasonable attorney fees. JOB # 1 TOTAL LABOR & PARTS 813.68 Unities full payment is received within 30 thys from completion of work your vehicle may be sold under the Uniform Communical Code of this State to pay any charges INTERNAL 0.00 TECH(S):734 LOANER CAR UNITS: J# 2 10CVZLQANER OWNER REQUESTED FITZGERALD LOANER CAR NEEDED TRANSPORTATION You consent to reasonable use of the vehicle for the purpose of inspecting, testing, and repairing it. PROVIDED TRANSPORTATION You understand that we do not accept any responsibility for damage or loss to any non-original equipment pursonal property or equipment left up or attached to the vehicle white it is in our possession. PARTS-----OTY---FP-NUMBER------DESCRIPTION------UNIT PRICE-JOB # 2 TOTAL PARTS 0.00 You agree to be bound by the Fitzgerald Loanor Car Program Agreement and the Vehicle Use Agreement if you or your agent accepts a Loaner Car to use while we are repaining your vehicle. JOB # 2 TOTAL LABOR & PARTS 0.00 We warrant that the parts and labor provided under this Repair Order will be tree of defects in material and workmanship for 90 days or 4000 miles from when we return MISC-----CODE-----DESCRIPTION------CONTROL NO-----JOB # A SS SHDP SUPPLIES/ENVIRONMENTAL CHG TOTAL - MISC your vehicle to you. Any defects in parts or labor covered by this warranty shall only be corrected at this location and is mitted to repair or replacement of the detective parts and labor. No other express or implied warranties are provided. APP PER MRS ZEMBOWER 830.00 7-18-07 OK TO HOLD FOR PARTS KB By signing below you walve the requirement to test drive the vehicle. LM AT WORK 204PM 7-18-07 DONE KB Labor is charged by flat rate manual unless you agree that labor will be charged by clock hour. TOTALS-----A charge equivalent to 10% of total repair order is included or environmental, disposal and misc, charges used on your TOTAL LABOR.... 411.60 CUSTOMER PAYMENT... 402.0B 0.00 TOTAL PARTS....) Cash.... () Check (Ck# TOTAL SUBLET...) Charge.. () Credit Card(..... 0.00 7.95 TOTAL G.O.G.... TOTAL MISC CHG. TOTAL MISC DISC CUSTOMER'S SIGNATURE CASHIER SIGNATURE..... 0.00 NO CLAIMS WITHOUT THIS INVOICE 20.51 PAYMENT DATE..... TOTAL TAX..... THANK YOU **TOTAL INVOICE \$** 842.14 *****ATTENTION ALL CUSTOMERS***** For Customer Convience We Offer A Night Drop / Early CUSTOMER'S E-MAIL ADDRESS Bird Service. The Night Drop Box Is Located Right Outside The Service Entrance. CUSTOMER PAYMENT Parts Designated With An Asterick (*) Indicates Lifetime () CHECK NO. 1 CASH Guarantee Applies For Customer Pay Repairs. () CREDIT CARD) CHARGE CASHIER SIGNATURE _ CUSTOMER SIGNATURE PAYMENT DATE ____ / _ _ _ / ___ . CUSTOMER CALLED, BY -----[END OF INVOICE] 02:05pm





PAGE 2 OF 2



SUZUKI

CUSTOMER COPY

114 Baughmors one FREDERIC (N) 21702 301-696-9200 4AUTOMALL



nazda saab

CUSTOMER CALLED BY _ __ _

[END OF INVOICE] 02:14pm



100640	KEVÎN BIND	EL	6546	6 TAG NO 3	67	"05/2 "	5/07	™ĈVĊ\$62296
	198.700	LICENSE NO	M	HLEAGE	38,195	ÖÄRK	BLUE M	1
FREDERICK, MD	ซึ่ง / ตั้น ยังหือเ	ET/MALIBU	/LT SE	EDAN		08/20	0705	DELIVERY LINES 197
· 	VIOS IN Z U	5 4 8 3	5 F			FAM	UER NO	PRODUCTION DATE
	E.T.E.NO		P.O NO	***************************************		°05′/24	4/07	
	CENTROLINER YES					l <u> </u>		мо: 3820
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STOMER PAYMENT () Cash () Check () Charge () Credit	(Ck#) t Card()	TOTAL L/ TOTAL P/ TOTAL SI	ARTS JBLET		327.00 32.25 0.00	PAYMENT T Master Card	AEPAIR OADER EAMS: We only Discover or Area	RS & INVOICES y accept cash, check, Vir inican Express Brink Cards
CASHIER SIGNATURE		TOTAL G TOTAL M	isc chg.		0.00 10.95	payment No	credit will be exte	anded My upon completion of worl
PAYMENT DATE	• • • • • • • • • • • • • • • • • • • •	TÖTAL MI TOTAL TA	ISC DISC AX	C	0.00 2.16	parts and lat	oor ,	iire a reasonable deposit
*****ATTENTION ALL CUSTOMERS***	***	TOTAL IN	VOICE	= \$	372.36	more than 30	D days under this arge of \$45.00 pe	er day on anxionts past d repail order. You agree to p r day beginning 48 hours at
For Customer Convience We Offer A Night Bird Service. The Night Drop Box Is Lo	t Drop / Early							collecting any amounts d ng reasonable attorney tees
Outside The Service Entrance. rts Designated With An Asterick (*) Indic arantee Applies For Customer Pay Repairs	cates Lifetime					completion (of work your ver	eived within 30 days he hele may be sold under t this State to pay any charg
and the Appriles For Suscenies Full Reputits	•					You conson	t to reasonable rspecting, testing	use of the vehicle for t
CUSTOMER SIGNATURE						damage or	foss to any non equipment left in o	il accept any responsibility -original equipment person rattached to the vehicle wh
						Program Agi	reement and the ' ni accepts a Loa	The Fitzgerald Loaner C Vehicle Use Agreement il y ner Car to use while we t
						Repair Ord workmanshii your vehicle this warranti limited to re	or will be free pitor 90 days or 40 to you. Any defect y shall only be co pair or replaceme	nd labor provided under to detects in material a 000 miles from when we retait in parts or labor covered precised at this location and and of the defective parts a which warranties are provided when warranties are provided.
						By signing drive the ve	below you wal hicle.	ve the requirement to ti
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FITZGFRALD AUTO MALL FRE 114 BAUGHMAN'S LANE FREDERICK, MD 21702

> c o P 18:03:43 07/18/2007 sale: 45

Transaction 4 card Type: Suiped 630562 ACC: 842.14 Entry: Invoice # Total:

Reference No 719921508010 018168 Response: APPROVAL 018168 Auth.Code: Sequence Number: Merchant Number 829992565300 72144906 0004

Terminal_ID: Terminal Number: FITZGERILU AUTO MALL FRE 114 BAUCHMIN'S LANE FREDERICK, ND 1702

COPY 05/25/2007 18:38:29 Sale

Transaction # <u> MasterCard</u> Card Type: Acc: Swiped Entry: 622967 Invoice # 372.36 Total:

Refer noe No.:

714522001538 649667 Auth Code: PROUNT 649667

Response Sequence Jumber :

Merchant_Number:

829992565300 72144906 Terminal_ID:

0004 Termina Number

CUSTOMER COPY

CLISTOMER COPY

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

February 2, 2011



Service Request: 71-590801432

Customer Relationship Specialist: Jerry Robinson

Dear :

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the power steering that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$709.44.

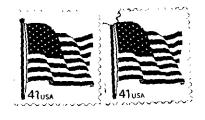
At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

Argenta, /C



Beimbursement Department Dec 19 P.O. Box 33170 Detroit, MI 48232-5170

48232+3170-70 B030

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CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12/15/07
17-Digit Vehicle Identification Number (VIN): 1627 H 548 05
Mileage at Time of Repair: 58,036 Date of Repair: 6/6/01 / 8/28/07
Claimant Name (please print):
Street Address or PO Box Number:
City: Argenta State: 1L ZIP Code
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$1352.27
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

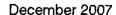
Your claim will be acted upon within 60 days of receipt.

If your claim is:

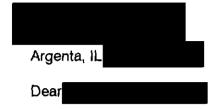
- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Pontiac Customer Assistance Center at 1.800.620.7668 (TTY 1.800.833.7668).









As the owner of a 2005 model year Pontiac G6, your satisfaction with our product is very important to us.

This letter is intended to make you aware that some 2005 model year Pontiac G6 vehicles may lose their power steering assist. This is caused by electrical input signals within the steering column assembly. If the power steering assist is lost, a chime will be heard and the DIC will display a Power Steering warning message. The Service Vehicle Soon light will also illuminate. The vehicle can still be steered in a safe manner but will require greater driver effort at low vehicle speeds or when stopped.

Do not take your vehicle to your Pontiac dealer as a result of this letter unless you believe that your vehicle has the condition as described above.

What We Have Done: General Motors is providing owners with additional protection for the steering column assembly. If this condition occurs on your 2005 Pontiac G6 within 7 years of the date your vehicle was originally placed in service or 70,000 miles, whichever occurs first, the condition will be repaired for you at **no charge.** Diagnosis or repair for conditions other than the condition described above is not covered under this special coverage program.

What You Should Do: Repairs and adjustments qualifying under this special coverage must be performed by a General Motors dealer. You may want to contact your GM dealer to find out how long they will need to have your vehicle so that you may schedule the appointment at a time that is convenient for you. This will also allow your dealer to order parts if they are not already in stock. Keep this letter with your other important glove box literature for future reference.

Reimbursement: The enclosed form explains what reimbursement is available and how to request reimbursement if you have paid for repairs for the special coverage condition. Your request for reimbursement, including the information and documents mentioned on the enclosed form, must be received by GM by December 31, 2008.

If you have any questions or need any assistance, just contact your dealer or the Pontiac Customer Assistance Center between the hours of 8:00 AM and 11:00 PM, EST, Monday through Friday. They can be reached at 1.800.620.7668 (TTY 1.800.833.7668).



We are sorry for any inconvenience you may experience; however we have taken this action in the interest of your continued satisfaction with our products.

Scott Lawson

General Director,

Customer and Relationship Services

Enclosure 07126









1320 West Jackson Sullivan, Illinols 61951 (217) 728-4366







CUSTOMER NO. 16643	JEFF BRAND	ENBURG	640 TAG NO.		06/06/07	PNCS82707
	LAROR RAYE	LIČENŠE NO.	MILEAGE	8,⊅36	COLOR	8700K NO. T120088
ARCENTA	VEAR/WARE/WOODS	/G6/GT 4 D			02/17/05	DELIVERY MILES
ARGENTA, IL	VEHICLE I.D. NO.	· · · · · · · · · · · · · · · · · · ·	*		SELLING DEALER NO.	PRODUCTION DATE
	F. T. E. NO.		P. O. NO.		N. O. DATE 06/05/07	
	COMMENTS	·	\		00,00,00	MO: 58036
CUSTOMER STATES AT TIMES CAR HAS NO ICON FOR POWER STEERING COMES ON D DIAGNOSIS FOUND CODE CO550 PERFORMS	ISPLAY ANCE INTERNAL E	G AND THE LECTRICAL	******	253 . 38	The Seller, herein ex ranifes either express implied warranty of o	DF WARHANTIES pressly discialms all war or implied, including an marchantability or litnes
FAILURE CO564 CONFRIG ERROR CO545 INTERNAL FAILURE IN STEERING CONTRO PARTSQTYFP-NUMBER	FORQUE INPUT NO)L MODULE REPAL PTIONL	T LEARNED CED MODULE .IST PRICE-UNI	T PRICE- 343.74	343 . 74	nor authorizes any of It any liability in conne volticle or product.	se, and neither assume her person to easume for action with the sale of thi
ADION (353.78 308 # 1 TOTA	_ PARTS	343 74	CASH UNLESS	AIRS ARE STRICTLY SPECIFIED OTHER WORK BEING DONE
ATTO CORP SPECIAL CONTROL		TOTAL LABOR		597 . 1.2		all such repair work
MISCCODEDESCRIPTION		TOTAL		22 50 22 50	materials and equi	on of necessary parts proment as may be rea / to alleviate the com
TOTALS			•••••	 -	plaint set forth here	ein. I hereby agree tha atomary price for suc.
IT IS OUR SINCEREST DESIRE TO OFFER SERVICE BEYN CUSTOMERS EXPECTATIONS YOU MAY RECEIVE A SURVEY FROM THE MANUFACTURER I THE SERVICE YOU RECEIVED TODAY. PLEASE TAKE THE TIME TO READ AND COMPLETE THE SURVEY AND RETURN TO THE MANUFACTURER		TOTAL LA TOTAL PA TOTAL SU TOTAL G. TOTAL MI TOTAL MI TOTAL TA	RTS BLET D.G SC CHG. SC DISC	253 38 342 74 0 10 0 10 22 50 0 10 22 31	labor, parts, materi sums due you sha upon completion repairs; any unpa Interest at the rat (which is an annu	als and equipment. A il be pald immediatel of the necessari id balance shall bea e of 11/2% per monti lal percentage rate of
IF YOU HAVE ANY COMMENTS, PLEASE CONTACT OUR SERVICE DIRECTOR, BOB FREEMAN AT 217-728-4366 SERVICE MANAGER, JEFF BRANDENBURG AT 217-728-436 SERVICE CONSULTANT, DAN SEARS AT 217-728-4366	66	TOTAL IN	/OICE \$	642.83	repairs. In the ever amount due you, I of collection, inclu reasonable effort	rom the date of such at I fall to pay any such agree that your costs uding court costs and teys' fees, shall be
WE CERTAINLY APPRECIATE YOUR BUSINESS!!! CUSTOMER SIGNATURE			<u> </u>		you are not res damage to vehicle cle in case of fire, the	ne. I hareby agree the ponsible for loss o or articles left in vehi heft or any other cause not or for any delays
**************************************	E INVOIC	E AAAAAA		**	caused by unav- delays in parts shift or transporter. I he your employees particle herein highways or elsentesting and/or ins- mechanic's lien is	allability of parts of prents by the supplies reby grant you and/opermission to operate described on streets where for purpose of spection. An expressionary acknowledges ourseline amount of
PAGE 1 OF 1 CUSTOMER COPY		(END C	F INVOICE] 11:	37am		7 1375







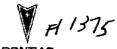


1320 West Jackson Sullivan, Illinois 61951 (217) 728-4366



709.44





6/6 642,83

NVOICE NO PNCS84278 STOCK NO T120088 DELIVERY MILES

344

MO: 60932

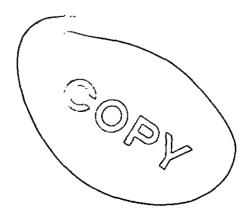
16643	JEFF BRAN	IDENBURG (TAG NO.	08/28/07
	LABOR RATE	LICENSE NO.	MILEAGE 60,932	COLOR
ARGENTA, IL	VEAR / MAKE / MODI	AC/G6/GT 4 DOOL		02/17/05
		н 5 4 8 0 5 4		SELLING DEALER NO.
	F. T. E. NO	P. 0	. NO.	08/21/07
	COMMENTS			
CUSTOMER STATES SERIVE ENGINE LITE AND STEERIN DIAGNOSIS FOUND INTERNA	N HOURS: 4.00 TECH STEERING COMES ON DISPLA IG GETS STIFFER WHEN LITE IL ELECTRICAL FAILURE IN PLACED STEERING COLUMN A	Y AND CHECK S ARE ON STEERING	328.00	DISCLAIME The Seller, herein ranties either exp implied warranty for a panicular p nor authorizes ar
PARTSQTYFP-NUMBER JOB # 1 1 15926870	COLUMN 6.518	·LIST PRICE·UNIT PR 359.00 35 JOB # 1 TOTAL PA	59.00 359.00	it any liability in c vehicle or produc TERMS: ALL F
.,,	JOB #	1 TOTAL LABOR & PA	RTS 687.00	CASH UNLES
TOTALS				I hereby author
IT IS OUR SINCEREST DESIRE TO OFFER CUSTOMERS EXPECTATIONS YOU MAY RECEIVE A SURVEY FROM THE MA THE SERVICE YOU RECEIVED TODAY.		TOTAL PARTS.	359.00 0.00 0.00	including instal materials and e sonably neces plaint set forth I shall pay you
PLEASE TAKE THE TIME TO READ AND CON THE SURVEY AND RETURN TO THE MANUFAC		TOTAL MISC I	0.00 OSIC	labor narts ma

IF YOU HAVE ANY COMMENTS, PLEASE CONTACT OUR SERVICE DIRECTOR, BOB FREEMAN AT 217-728-4366 SERVICE MANAGER, JEFF BRANDENBURG AT 217-728-4366 SERVICE CONSULTANT, DAN SEARS AT 217-728-4366

WE CERTAINLY APPRECIATE YOUR BUSINESS!!!

CUSTOMER SIGNATURE

PAGE 1 OF 1



TOTAL INVOICE \$

CUSTOMER COPY

[END OF INVOICE | 10:48am

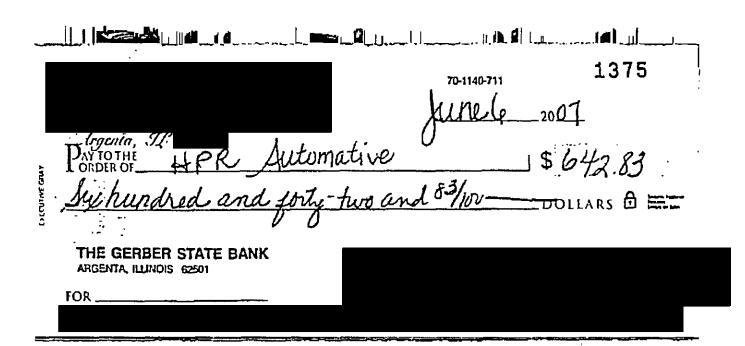
ER OF WARRANTIES

ein expressly disclaims all warrpress or implied, including any ty of merchantability or fitness purpose, and neither assumes any other person to assume for connection with the sale of this

REPAIRS ARE STRICTLY SS SPECIFIED OTHER-TO WORK BEING DONE.

norize all such repair work, allation of necessary parts. equipment as may be reassary to alleviate the comherein. I hereby agree that ur customary price for such labor, parts, materials and equipment. All sums due you shall be paid immediately upon completion of the necessary repairs; any unpaid balance shall bear interest at the rate of 11/2% per month (which is an annual percentage rate of 18%) computed from the date of such repairs. In the event I fail to pay any such amount due you, I agree that your costs of collection, including court costs and reasonable attorneys' fees, shall be recoverable from me. I hereby agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on vehicle to secure the amount of repairs

Copyright © 1998 The Reynolds and Beynolds Company ERAINTINVE SE610521 (03/03)



Account Number	Check Number	Date	Amount
	1375	6/8/2007 12:00:00 AM	642.83

080707

1214203681 06082007 0710-0030-1 ENT=4069 TRC=4054 PK=18

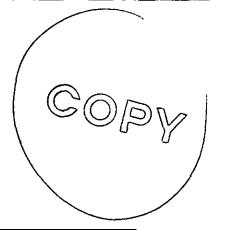
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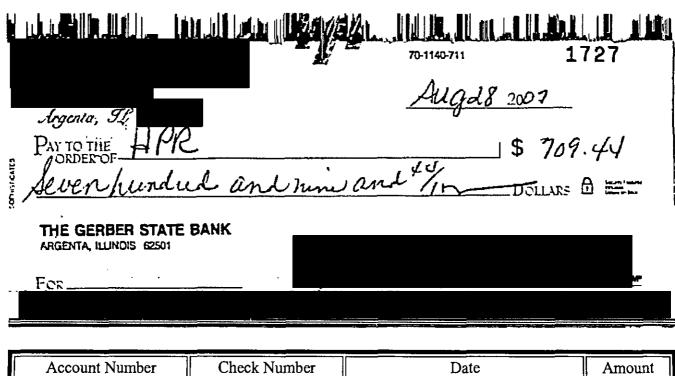
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For Deposit Only
HPR Automotive
Superstore - Sullivan

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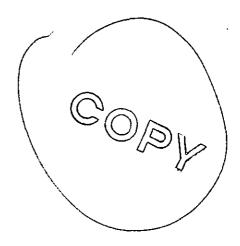
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For Deposit Only HPR Automotive Superstore – Sullivan



North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530



CHECK NO.

DATE: 01/11/08>

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North American Operations General Motors Corporation Disbursement Account

ARGENTA

The Chase Manhettan Bank, N.A. Syracuse, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. BB 000000130 PAYMENT DATE VENDOR NAME 01/11/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/10/08 | VM 1-9RVG59 71-590801432.1-9RVG59 00.0000 709.44 .00 709.44 1G2ZH548054 ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 709.44 .00 709.44 **TOTAL**

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

February 2, 2011



Service Request: 71-590929994

Customer Relationship Specialist: Katrina Blake

Dear :

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the column kit that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$545.54.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

Harrisburg, PA



Mathabatitathadhlaidhadhadhadhlaadh

Reimbursement Department
P.O. Box 33170
Detroit, MI 48232-5170

4823886170 B050

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12 14 07
17-Digit Vehicle Identification Number (VIN): 1612T54805F
Mileage at Time of Repair: 51,148 Date of Repair: 9(13)07
Claimant Name (please print):
Street Address or PO Box Number:
City: Harristurg State: PA ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ See Attached Sheet
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



To Whom It May Concern:

I've included copies of the work orders for my repair work. I wasn't sure if the light socket replacements are tied in with the steering column and therefore am not sure how much reimbursement I am due. I have also included copies of the work I had done before my warranty expired. I've had problems with the lights right after I bought the car and have replaced them often. I haven't had to replace any since the work was done on 9/13/07.

Thank you.



INVOICE

"We take care of you" 4201 CHAMBERS HILL ROAD HARRISBURG, PA 17111

PHONE (717) 564-2240 · Fax (717) 564-2473

www.turnerbuick.com

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0.00

GAS, OIL, LUBE SUBLET AMOUNT

MISC. CHARGES

TOTAL CHARGES LESS INSURANCE

SALES TAX

PLEASE PAY

THIS AMOUNT

LEWISBERRY, PA BUS: HOME:

PAGE 1

SERVICE ADVISOR: 107 JOSEPH M CONDELL LICENSE MILEAGE IN / OUT **TAG MAKE/MODEL COLOR YEAR 1G1ZT54805F 35410/35410 CHEVROLET MALIBU BLUE INV. DATE PAYMENT PROD. DATE WARR EXP PROMISED PO NO. RATE DEL. DATE 29NOV06 0.00 CASH 17NOV04 IS STK:104654 DLR:35630 ENG:3.5 Liter SFI OPTIONS: R O. OPENED READY 11:04 29NOV06 06:55 29NOV06 TOTAL NET LIST LINE OPCODE TECH TYPE HOURS A C/S THUMPING NOISE HEARD TURNING STEERING RIGHT OR LEFT CHECK & CAUSE: INTERMEDIATE STEERING SHAFT IS CORRODED E7700 SHAFT, STEERING INTERMEDIATE REPLACE (N/C)171 (N/C) 1 22687711 SHAFT KIT FC: 5W PART#: 22687711 COUNT: 1 CLAIM TYPE: AUTH CODE: 0.00 TOTAL LINE A: 0.00 0.00 OTHER: LABOR: PARTS: 0.00 *** STEERING SHAFT INTERMEDIATE ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN, SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE. TOTALS DESCRIPTION STATEMENT OF DISCLAIMER The factory warranty constitutes all of the warranties with respect to the sale of this itemitiems. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor outbridge and selections of the selection of the sel 0.00 LABOR AMOUNT PARTS AMOUNT 0.00

CUSTOMER COPY

CUSTOMER SIGNATURE

(DATE)

Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this

OPHIGHT 2000 ADP, Inc. SERVICE INVOICE #2 XSIZE

DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

(SIGNED)



INVOICE

LEWISBERRY, PA
HOME: BUS:

أعطال المتعاد

PAGE 1

"We take care of you"
4201 CHAMBERS HILL ROAD
HARRISBURG, PA 17111
PHONE (717) 564-2240 · Fax (717) 564-2473

HOME:			BUS:				ICOD. a	www.turnerbuick.com 175 ED C CLAPPER					
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BUICK COMPANY

INVOICE

"We take care of you" 4201 CHAMBERS HILL ROAD HARRISBURG, PA 17111

PAGE 2 LEWISBERRY : PA PHONE (717) 564-2240 · Fax (717) 564-2473 www.nirnerbuick.com HOME: BUS: CLAPPER SERVICE ADVISOR: 175 ED C LICENSE MILEAGE IN / OUT MAKE/MODEL YEAR COLOR 1G1ZT54805F 31444/31444 CHEVROLET MALIBU BLUE PROMISED PO NO RATE PAYMENT INV DATE PROD. DATE WARR EXP DEL DATE CASH 190CT06 0.00 17NOV04 IS STK:104654 DLR:35630 ENG:3.5 Liter SFI OPTIONS: R.O. OPENED READY 06:50 19OCT06 09:50 190CT<u>06</u> NET TOTAL LINE OPCODE TECH TYPE HOURS LIST N6614 WIRING AND/OR CONNECTOR INTERIOR/REAR

COMPARTMENT LIGHTING REPAIR OR REPLACE

136 W

(N/

FC: 6N PART#: COUNT: (CLAIM TYPE:

AUTH CODE:

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE C: 0.00

TIGHTEN LOOSE VANITY LIGHT CONNECTOR

IN REHALE OF SERVICING DEALER I HERERY CERTIFY THAT THE STATEMENT OF DISCLAIMER DESCRIPTION TOTALS

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

DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DA

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

TOTALS DESCRIPTION LABOR AMOUNT 0.00 PARTS AMOUNT 0.00 GAS, OIL, LUBE 0.00 SUBLET AMOUNT 0.00 MISC. CHARGES 0.00 TOTAL CHARGES 0.00 LESS INSURANCE 0.00 SALES TAX 0.00 PLEASE PAY

0.00

THIS AMOUNT

CUSTOMER COPY

CUSTOMER SIGNATURE

(SIGNED)

INVOICE

"We take care of you". 4201 CHAMBERS HILL ROAD HARRISBURG, PA 17111 PHONE (717) 564-2240 · Fax (717) 564-2473

PAGE 1

LEWISBERRY, PA HOME BUS:

www.turnerbuick.com SERVICE ADVISOR: 175 ED C CLAPPER LICENSE MILEAGE IN / OUT TAG MAKE/MODEL COLOR YEAR 29237/29237 CHEVROLET MALIBU 1G1ZT54805F BLUE PAYMENT INV DATE PROD DATE WARR EXP PROMISED PO:NO: DEL. DATE NOV04 R.O. OPENED OPTIONS: STK:104654 DLR:35630 ENG:3.5 Liter SFI READY 08:14 08SEP06 15:35 08SEP06 LINE OPCODE TECH TYPE HOURS LIST TOTAL A OWNER STATES BRAKES MAKE A GRINDING SOUND AND PULSATE AT TIME CAUSE: FRONT ROTORS OUT OF ROUND, REAR ROTORS CORRODED H0127 ROTOR ASSEMBLY FRONT BOTH R&R OR REPLACE (N/C) 171 FC: 01R01 PART#: COUNT: 0 CLAIM TYPE: AUTH CODE: OR H0137 ROTOR ASSEMBLY (N/C). 171 (N/C) 2 22705356 ROTOR (N/C)2 WARR-DIFF WARR-DIFF FC: 00R00 PART#: 22705356 COUNT: 4 CLAIM TYPE: AUTH CODE: B OR 0.00 OTHER: 0.00 TOTAL LINE A: RESURFACE FRONT ROTORS REPLACE REAR ROTORS B OWNER STATES LEFT SUNSHADE MIRROR COVER CAME OFF 57 WE SPECIAL-ORDERED THIS PART FOR YOU AND WILL CALL YOU WHEN IT ARRIVES

.171 C

0.00 LABOR: 0.00 OTHER:

(DATE)

TOTAL LINE B:

0.00 0.00

ORDERED PARTS

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

DEALER GENERAL MANAGER OR AUTHORIZED PERSON

STATEMENT OF DISCLAIMER The factory warranty constitutes all of the warranties with respect to the sale of this itemutems. The the sale of this item\tens. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a perticular purpose. Seller neither assumes nor authorizes any other person to connection with the sale of this item\(ferm. \) item/items.

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

0.00

CUSTOMER COPY

CUSTOMER SIGNATURE

(SIGNED)

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PAGE 1

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0.00

MISC. CHARGES

TOTAL CHARGES

LESS INSURANCE

SALES TAX

PLEASE PAY THIS AMOUNT

INVOICE

LEWISBERRY, PA HOME: BUS:

SERVICE ADVISOR: 175 ED C CLAPPER MILEAGE IN / OUT **⊗TAG**⊗ LICENSE MAKE/MODEL COLOR 1G1ZT54805F 29312/29312 BLUE 05 CHEVROLET MALIBU RATE PAYMENT INV DATE PROD DATE WARR EXP PROMISED PO NO: DEL DATE 13SEP06 0.00 17NOV04 IS OPTIONS: STK:104654 DLR:35630 ENG:3.5 Liter SFI R.O. OPENED READY 06:38 13SEP06 08:19 13SEP06 TOTAL LIST LINE OPCODE TECH TYPE HOURS A CLIENT STATES LEFT SUNSHADE MIRROR COVER CAME OFF - PART HERE CAUSE: SUNSHADE BROKEN AT LID AREA C2021 SUNSHADE AND/OR SUPPORT LEFT R&R OR REPLACE (N/C)171 (N/C) 1 10381583 SUNSHADE FC: 1D PART#: 10381583 COUNT: 1 CLAIM TYPE: AUTH CODE: VB 0.00 0.00 TOTAL LINE A: PARTS: LABOR: 0.00 OTHER: 0.00 LEFT SIDE SUNSHADE ----TOTALS ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY DESCRIPTION STATEMENT OF DISCLAIMER STATEMENT OF DISCLAIMER
The factory warranty constitutes all
of the warranties with respect to
the sale of this itemutems. The
Seller hereby expressly disclaims all
warranties either express or
implied, including any implied
warranty of merchentability or
fitness for a particular purpose.
Seller neither assumes nor
outhorizes any other person to
assume for it eny liability in
connection with the sale of this
Item/items. LABOR AMOUNT 0.00 PARTS AMOUNT 0.00 GAS, OIL, LUBE 0.00 SUBLET AMOUNT 0.00

CUSTOMER SIGNATURE

(DATE)

(SIGNED)

NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

DEALER, GENERAL MANAGER OR AUTHORIZED PERSON



SUTLIFF CHEVROLET CO. Box 1307/13th & Paxton Sts. Harrisburg, PA 17105 (717) 234-4444



SERVICE INVOICE

FED. I.D. #23-1610030

SO# 551765 DATE/TIME IN: 9/13/2007 7:18 DATE/TIME OUT: 9/13/2007 12:48 DOC COUNT: 2 PAGE: 1 SA: LEE HOKE 05 1G1ZT54805F1 2005 CHEVROLET MALIBU LS BLUE ENGINE: 3.5L V6 LIC.NO: PA HARRISBURG MILES IN/OUT 51148 / 51149 REPLACE STEERING COLUMN REPLACE STEERING COLUMN REPAIR 1 REPLACE STEERING COLUMN SALE TYPE: CUSTOMER PARS 156.60 OPCODE: CPA PRIMARY TECH: 046 ADMC DESC FP QTY PRICE SALE TYPE 15926870 COLUMN N 1 359.000 CUSTOMER PA PARTS GM 359.000 CUSTOMER PAY LINE TOTAL \$515.60 LINE 2 REPLACE LIGHT SOCKETS REPLACE LIGHT SOCKETS REPAIR .. 1 REPLACE R REAR BRAKE LIGHT SOCKET ORDERED R FRONT SALE TYPE: CUSTOMER PA \$34.80 OPCODE: CPA PRIMARY TECH: 046 DESC FP QTY PRICE SALE TYPE

15873724 SOC ASM N 1 7.000 CUSTOMER PAY \$7.00
9441839 BULB LP N 1 2.860 CUSTOMER PAY \$2.86
19168446 SPLICE KT N 3 8.290 CUSTOMER PAY \$24.87
19168447 SPLICE KT N 1 9.010 CUSTOMER PAY \$9.01 PARTS GM GM GM ··· GM: LINE TOTAL \$78.54

THANK YOU FOR CHOOSING SUTLIFF CHEVROLET

p 1	•	
	LABOR	\$191.40
	LABOR DISCOUNT	\$19.14
	PARTS	\$402.74
	TAX (Pennsylvania St)	\$34.50
	CUSTOMER TOTAL	\$609.50
CUSTOMER SIGNATURE	PAYMENT (Customer :)	(\$609.50)

SERVICE DEPARTMENTS

CAR - 13th & Paxton Streets 234-4444
TRUCK - Cameron & Paxton Streets 232-0033
COLONIAL PARK - 4949 Queen Ave. 541-5111



SUTLIFF CHEVROLET CO. Box 1307/13th & Paxton Sts. Harrisburg, PA 17105 (717) 234-4444



SERVICE INVOICE

FED. I.D. #23-1610030

SO# 553196 DATE/TIME IN: 9/25/2007 15:50 DATE/TIME OUT: 9/25/2007 16:49

SA: GAY LEWIS

PA

DOC COUNT: 1 PAGE: 1

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05

1G1ZT54805F

2005 CHEVROLET MALIBU LS BLUE

ENGINE: 3.5L V6 LIC.NO: GGZ9582

MILES IN/OUT 51583 / 51584

LINE 1 INSTALL SOCKET PART HERE

HARRISBURG

REPAIR 1 REMOVE HEADLIGHT AND RR AND SOCKET AND REPLACE

SALE TYPE: CUSTOMER PA \$87.00

OPCODE: CPA PRIMARY TECH: 163

PARTS

GM GM

 DESC
 FP QTY
 PRICE SALE TYPE

 15945363 SOCKET
 N 1
 9.800 CUSTOMER PAY
 \$9.80

 19168446 SPLICE KT N 3
 8.290 CUSTOMER PAY
 \$24.87

LINE TOTAL

\$121.67

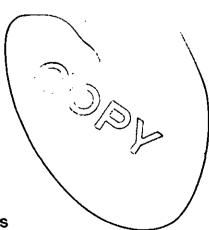
THANK YOU FOR CHOOSING SUTLIFF CHEVROLET

LABOR \$87.00 PARTS \$34.67
TAX (Pennsylvania St) \$7.30
CUSTOMER TOTAL \$128.97

CUSTOMER SIGNATURE

PAYMENT (Customer)

\$128.97



SERVICE DEPARTMENTS

CAR - 13th & Paxton Streets 234-4444 TRUCK - Cameron & Paxton Streets 232-0033 COLONIAL PARK - 4949 Queen Ave. 541-5111

SUTLIFF CHEVROFEF 13TH AND PAXTON STREETS HARRISBURG, PA 17105 (717)234-4444

Sale

Merchant ID: 542929802656777

Term ID: LK493049

09/13/07

12:56:57

Batch#: 000398

Inv #: 000019

Ticket: 551765

VISA

Entry Method: K

Seq.#: 0019

Appr Code: 012553

Total:

\$

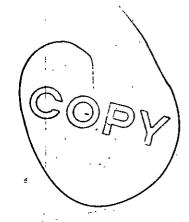
609.50

AVS Code: Z

CVV2 Code:

APPROVED

Customer Copy



SUTLIFF CHEVROLET 13TH AND PAXTON STREETS HARRISBURG, PA 17105 (717)234-4444

Sale

Merchant ID: 542929802656777

Term ID: LK493049

09/25/07

16:56:50

Batch#: 000407

Inv #: 000031

Ticket: 553196

VISA

Entry Method: S

Seq.#: 0031

Appr Code: 016551

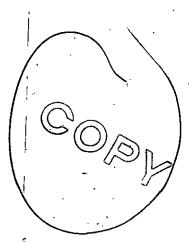
Total:

5

128.97

APPROVED

Customer Copy



North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 CHECK NO. DATE 01/11/08 ***************545,54 XXXXXXXXXXXXX545 DOLLARS XXXX54 CENTS North American Operations General Motors Corporation Disbursament Account in 😚 HARRISBURG PA 0 11 The Chase Manhattan Bank, N.A. Syracuse, New York AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. BB 000000124 VENDOR NAME 01/11/08 REGISTER NO. INVOICE DATE DOC, REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/10/08 71-590929994 VM 1-9RUGI3 .1-9RUGI3 00.0000 545.54 545.54 ..00 1G1ZT54805Å ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 **M3**

TOTAL

545.54

.00

545.54

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

January 19, 2011



Service request: 71-587969876

Vehicle Identification Number: 1G2ZG558264

Customer Relationship Specialist: Ryan Smith

Dear :

Thank you for allowing us the opportunity to review the claim you filed with the BBB involving your 2006 Pontiac G6. Unfortunately, our attempts to reach you by phone on 1/7/08 at 1:58pm, 1/8/08 at 1:18pm and 1/9/08 at 9:08 am were unsuccessful.

Therefore, we will not be able to take any further action regarding your concern until we have an opportunity to discuss this with you. We will continue to hold your file open for 10 days.

Please contact our Business Resource Center at 1-800-231-1841 Monday through Friday between 8:00 a.m. and 5:00 p.m., Eastern Time. Please refer to your service request number above when calling.

Sincerely,

General Motors Corporation

PA0005 V05112006

BBB AUTO LINE



December 27, 2007

RYAN SMITH
PONTIAC/GMC
P O BOX 33172
DETROIT MI 48232

Re:m01 PGM0761864: vs Pontiac/GMC Division

Dear Madam/Sir:

We have recently been contacted by one of your customers with a product complaint. Enclosed is information taken during the initial phone call.

You may contact the customer to resolve the complaint directly. Once the customer returns the completed *CCF*, the case will be opened, the 40 day clock will begin and all information received for the case will be sent to you.

Thank you for your participation in the BBB AUTO LINE program.

Sincerely,

John Ryan at Extension 529

BBB AUTO LINE Customer Claim Form

Case number: PGM0761864

Contact Date: 12/27/07

Start Date:

Please make any necessary corrections to the information below, <u>print</u> or verify your VIN number and lienholder/leasing company information at the bottom of this page, and complete the missing information in Section 4 on the next page (attach additional sheets as needed).

SECTION 1: CUSTOMER INFORMATION

Titled owner:			
Mailing address:			
City: crofotn		State: MD	Zip code:
Day phone:	Evening phone:		Cell phone:
Fax:	E-mail address:		
SECTION 2: VEHICLE INFOR	MATION		
Make: Pontiac/GMC	Model: G6	Year: 2006	Current mileage: 45000
Name(s) that appears on the veh	icle title:		•
Selling dealer/city/state: , ,			
Primary Servicing dealer/city/st	tate: walker pontiac,		
Acquired as new used [☐ demo ☐ leased — Is	the vehicle in your po	ossession? 🛛 yes 🗌 no
Purchase/lease date: 11/09/06	<u>M</u>	ileage at purchase/leas	se:
First repair attempt date: 11/12, How often is the vehicle used for business purposes (percentage	Number o	irst repair attempt mile of vehicles owned by the business:	eage: 25400 Transmission type:
Has the vehicle been in an accide	nt/had body damage? 🔲 y	∕es 🏿 no	Date of accident:
Description of damage:			
SECTION 3: DESIRED OUTCO	OME (Describe what vo	ou want done to re	solve vour concern)
To get out from under this de	-		
Please complete the missing		-	
VEHICLE INDENTIFICATION)N NUMBER		
Lienholder/Leasing Compa	any	Phon	ne Number
Account Number			

SECTION 4: VEHICLE PROBLEMS (List primary problem first)

Case Number: PGM0761864

Problem	Servicing dealer(s)	# of repair attempts	List the date, mileage, and days out of service for each repair attempt	Does the problem exist now?
Example:				
A/C won't cool properly	Any Dealer, Inc.	2	4/23/06 3,500 miles 5 days 6/10/07 12,700 miles 1 day	yes
tire		1		no
brakes		2		no
Steering rack		4		yes

lotal days out of service for all problems:	-
Signature of Titled Owner(s)	Date
I am submitting this dispute for resolution in the BBB AL	
under the BBB AUTO LINE Arbitration Rules.	

Please mail or fax this completed form with <u>copies</u> of all available repair orders, your vehicle registration, your sales agreement or lease agreement, and any other relevant documents (e.g., written correspondence with the manufacturer, etc.) to:

BBB AUTO LINE 4200 Wilson Blvd., Suite 800 Arlington VA, 22203-1838 Fax: 703-247-9700



BBB AUTO LINE PROGRAM SUMMARY

General Motors

General Motors has agreed to arbitrate certain claims covered by the applicable state lemon law. General Motors has also agreed to arbitrate certain warranty claims not covered by the lemon law. This *Program Summary* describes the claims that may be resolved through BBB AUTO LINE.

LEMON LAW CLAIMS

A claim seeking relief under the applicable state lemon law must meet all standards set out by that law. The claim must be received by BBB AUTO LINE within the time period for filing a legal action under that law. Please see the attached description of the applicable lemon law provisions.

[Note: **Florida** claims involving GM chassis or chassis cabs in motor homes may be filed with the Florida Pilot RV Mediation and Arbitration Program, and are not eligible for BBB AUTO LINE.]

If the claim meets all standards set out by the applicable lemon law, the arbitrator will award a refund or replacement vehicle including all remedies specifically provided by that law. In some states this may include reasonable attorney's fees if they can be recovered in a state-run arbitration program or, if no state-run program exists, in court. However, an arbitrator may not award any penalties or multiple damages.

Please note:

- The award will be reduced for the customer's use of the vehicle in accordance with the applicable lemon law.
- The arbitrator may adjust the award based on damage to the vehicle exceeding normal wear and tear.
- The arbitrator will decide whether the applicable lemon law permits an adjustment to the award for any trade-in over-allowance or debt from a previous transaction.
- The award will not include any manufacturer rebate or manufacturer-sponsored credit card earnings the customer received or used as a downpayment or capitalized cost reduction.

WARRANTY CLAIMS NOT COVERED BY THE LEMON LAW

A claim that does not meet all standards of the applicable lemon law must meet certain conditions. Please see the attached description of "non-lemon law" warranty claims that may be resolved through BBB AUTO LINE.

A claim seeking **repairs** or **reimbursement** for past repairs must be received by BBB AUTO LINE before the expiration of the General Motors Bumper-to-Bumper new vehicle warranty. A claim seeking **repurchase** or **replacement** must be received by BBB AUTO LINE within one year or 12,000 miles – whichever comes first – from the date the vehicle was first put into use.

CUSTOMER RESPONSIBILITIES

At the time of the repurchase or replacement transaction, the customer's vehicle must be currently registered. The customer will be responsible for turning over the vehicle with all of the original equipment and without abnormal wear or damage evident on the vehicle. The customer will also be responsible for providing clear title to the vehicle and signing all documents necessary to effect transfer of the title, including a power of attorney for title transfer.

CLAIMS THAT WILL NOT BE ARBITRATED

- Claims involving vehicles with a non-U.S. warranty, or salvaged, "total loss" or similarly branded titled vehicles.
- Claims alleging that an airbag failed to deploy or deployed when it should not have.
- Claims covered by insurance or by warranties of other manufacturers.
- Repair or reimbursement claims that are not covered by the General Motors New Vehicle Limited Warranty but are covered by a service contract.
- Claims involving a vehicle defect if the customer alleges either as part of the BBB
 AUTO LINE claim or at any other time that the vehicle defect has caused an
 accident or fire that resulted in damage to any vehicle or damage to property.
- Claims involving a vehicle defect if the customer alleges either as part of the BBB AUTO LINE claim or at any other time – that the vehicle defect has caused bodily injury.
- Claims seeking compensation for loss of wages, personal injury, or mental anguish.
- Claims seeking damages for fraud or other violations of law, punitive damages, penalties or multiple damages.
- Claims identical to any claim that was resolved by a previous mediation or arbitration, court action, settlement, or agreement between the customer and General Motors.

OTHER IMPORTANT INFORMATION

- The customer must own or lease the vehicle throughout the entire arbitration process.
- If the customer files suit or a state administrative action against General Motors prior to the completion of the arbitration process, General Motors will not be obligated to continue with the arbitration.
- A test drive may be taken in the vehicle only if the customer has liability insurance that satisfies his/her state's minimum requirements.

The BBB will let the parties know if other restrictions apply.

WARRANTY CLAIMS NOT COVERED BY THE LEMON LAW

Time Period for Filing Claims

A claim seeking **repairs** or **reimbursement** for past repairs must be received by BBB AUTO LINE before the expiration of the General Motors Bumper-to-Bumper new vehicle warranty.

A claim seeking **repurchase** or **replacement** must be received by BBB AUTO LINE within one year or 12,000 miles – whichever comes first – from the date the vehicle was first put into use.

Eligible Claims

Claims must be based on a defect in the vehicle's material or workmanship that is covered by the General Motors New Vehicle Limited Warranty.

Eligible Vehicles

Claims may be filed for cars; light duty trucks and vans up to 10,000 pounds G.V.W.R.; and GM chassis or chassis cabs in motor homes up to 21,000 pounds G.V.W.R.

The customer's vehicle must be:

- Owned or leased in the name of an individual **or** owned or leased by a business that owns or leases no more than three vehicles;
- Purchased or leased, registered, and normally operated in the United States, Puerto Rico or U.S. Virgin Islands; and
- Covered by a United States warranty.

Remedies for Warranty Claims

The arbitrator may award the following remedies:

- Repairs.
- Reimbursement for money the customer paid to repair the vehicle.
- Repurchase of the vehicle.
- Replacement of the vehicle if it was purchased or leased new.

Repairs/Reimbursement for Repairs

The arbitrator may award repairs to, or reimbursement for money paid for the repair of, defects in material or workmanship. If repairs are awarded, the arbitrator may not order a change in the vehicle's options or its design.

Repurchase or Replacement

If a repurchase or replacement is awarded in a claim that does not meet all standards of the applicable state lemon law, the arbitrator may award up to the following remedies:

- **Owned vehicle repurchase** The actual amount paid for the vehicle. This will not include taxes, fees, and finance charges.
- **Leased vehicle repurchase** To the lessor: pay-off amount pursuant to the lease. To the lessee: any trade-in allowance/downpayment and all base monthly payments actually paid, excluding all collateral charges (e.g., taxes, fees, and finance/lease charges).
- Replacement of a vehicle purchased or leased new The customer will receive a new and substantially identical vehicle (not including modifications or additions after the vehicle's purchase/lease) from the same model year or, if one is not available, from the next model year. If a replacement vehicle from the same or next model year is not available, the customer may receive a replacement vehicle from subsequent model years but will be required to pay the difference between the Manufacturer's Suggested Retail Price (M.S.R.P.) of the current vehicle and the M.S.R.P. of the replacement vehicle.

Important: Replacement is not an available remedy if the current customer purchased or leased a **used** vehicle.

Deductions/Exclusions from a Repurchase or Replacement Award

• The repurchase or replacement award will be reduced for the customer's use of the vehicle using the following formula:

Use # miles attributable to the customer Vehicle purchase Deduction/ = $\frac{\text{at the time of the arbitration hearing}}{100,000}$ x price or gross capitalized cost

- The award may be reduced based on damage to the vehicle exceeding normal wear and tear.
- The award will not include debt from a previous transaction.
- The award will not include any manufacturer rebate or manufacturer-sponsored credit card earnings the customer received or used as a downpayment or capitalized cost reduction.

STANDARDS OF THE MARYLAND LEMON LAW

The following is a brief explanation of most relevant provisions of the Maryland lemon law. The complete text of the lemon law can be found at Maryland Com. Law Code Ann. Sections 14-1501 *et seq.* and 14-2001 *et seq.*

VEHICLES COVERED

The Maryland lemon law covers vehicles registered in Maryland as a Class A passenger vehicle; Class D motorcycle; Class E truck with a 3/4 ton or less manufacturer's rated capacity; or Class M multipurpose vehicle.

The lemon law covers used vehicles, but does not cover motor homes or motor vehicles that are part of a fleet purchase or fleet lease of five or more motor vehicles.

CONSUMERS COVERED

The lemon law covers consumers who fall into any one of the following categories:

- 1. The purchaser, other than for purposes of resale, or the lessee of a new motor vehicle;
- 2. Any person to whom a new motor vehicle is transferred during the duration of the vehicle's warranty; or
- 3. Any other person who is entitled to enforce the warranty.

The rights available to a consumer under the lemon law inure to a subsequent transferee of a new motor vehicle for the duration of the applicable warranties. If a lessor permits the lessee to assign any interest in the lease or the motor vehicle, upon such assignment the rights available to a lessee under the lemon law inure to an assignee of the lessee's rights under the lease or a subsequent transferee of the motor vehicle.

VEHICLE CONVERTERS

The lemon law applies to vehicle converters.

LEMON LAW COVERAGE PERIOD

The lemon law defines a "manufacturer's warranty period" that extends until the earlier of the first 15,000 miles of vehicle operation or 15 months following the date of the motor vehicle's original delivery to the consumer.

PROBLEMS COVERED

The lemon law covers any defect or condition that substantially impairs the use and market value of the motor vehicle to the consumer. This is referred to as a nonconformity.

The lemon law provides manufacturers with an affirmative defense if it can be shown that the nonconformity is the result of abuse, neglect, or unauthorized modifications or alterations of the motor vehicle.

MANUFACTURER'S DUTY TO REPAIR

If a motor vehicle does not conform to all applicable warranties during the "manufacturer's warranty period", the consumer must report the nonconformity during the "manufacturer's warranty period" by sending written notice to the manufacturer, factory branch, or lessor by certified mail, return receipt requested. Notice of this procedure must be conspicuously disclosed to the consumer in writing at the time of sale or delivery of the motor vehicle.

The consumer must provide the manufacturer or factory branch, its agent or authorized dealer, or the lessor with an opportunity to cure the nonconformity. The manufacturer or factory branch, its agent or authorized dealer, or the lessor must correct the nonconformity at no charge to the consumer within 30 days of the manufacturer's receipt of the consumer's written notification, even if repairs are made after the expiration of the "manufacturer's warranty period".

MANUFACTURER'S DUTY TO REPURCHASE OR REPLACE A VEHICLE

If the manufacturer or factory branch, its agent or authorized dealer, or the lessor is unable to repair or correct any nonconformity after a reasonable number of repair attempts within the "manufacturer's warranty period", the manufacturer must, at the option of the consumer, either replace or repurchase the motor vehicle.

REASONABLE NUMBER OF REPAIR ATTEMPTS

The Maryland lemon law creates a *presumption* that a manufacturer has had a reasonable number of repair attempts if any of the following occurs within the "manufacturer's warranty period":

- 1. The same nonconformity has been subject to repair by the manufacturer or factory branch, its agent or authorized dealer four or more times but continues to exist;
- 2. The vehicle was out of service by reason of repair of one or more nonconformities for a cumulative total of 30 or more days; or
- 3. A nonconformity resulting in a braking or steering system failure has been subject to the same repair at least once, the manufacturer has been notified and given the opportunity to cure the nonconformity, and the repair does not bring the vehicle into compliance with the motor vehicle safety inspection laws.

The term of any warranty, the "manufacturer's warranty period", and the 30 day out-ofservice period are extended by any time during which repair services are not available to the consumer by reason of war, invasion, strike, or fire, flood, or other natural disaster.

NOTICE AND OPPORTUNITY TO REPAIR

The consumer must report the nonconformity during the "manufacturer's warranty period" by sending written notice to the manufacturer, factory branch, or lessor by certified mail, return receipt requested. Notice of this procedure must be conspicuously disclosed to the consumer in writing at the time of sale or delivery of the motor vehicle.

The consumer must provide the manufacturer or factory branch, its agent or authorized dealer, or the lessor with an opportunity to cure the nonconformity. The manufacturer or factory branch, its agent or authorized dealer, or the lessor must correct the nonconformity at no charge to the consumer within 30 days of the manufacturer's receipt of the consumer's written notification.

The dealer must notify the manufacturer of the existence of a nonconformity within 7 days when the motor vehicle is delivered to the same dealer for a fourth repair attempt of the same nonconformity, or when the vehicle has been out of service for repair of one or more nonconformities for a cumulative total of 20 days. The failure of a dealer to give such notice does not affect the consumer's rights under the lemon law.

DISPUTE RESOLUTION

If the manufacturer has established an informal dispute settlement procedure that complies with 16 C.F.R. Part 703, the consumer may but need not resort to that procedure before the provisions requiring refund or replacement apply. A consumer who has resorted to an informal dispute settlement procedure may not be precluded from seeking the rights or remedies available by law.

TIME PERIOD FOR FILING CLAIMS

An action on an owned vehicle must be commenced within three years of the date of the vehicle's original delivery to the consumer. An action on a leased vehicle must be commenced within one year after termination of the lease.

REMEDIES UNDER THE MARYLAND LEMON LAW

REPURCHASE OF AN OWNED VEHICLE

The Maryland lemon law provides that a manufacturer must pay the following amounts when it repurchases an owned vehicle under the lemon law:

- 1. The full purchase price; and
- 2. All license and registration fees, and any similar governmental charges;
- 3. Less a reasonable allowance for the consumer's use of the vehicle not to exceed 15% of the purchase price;
- 4. Less a reasonable allowance for damage not attributable to normal wear and not including damage resulting from a nonconformity.

Refunds must be made to the consumer and lienholder, if any, as their interests appear on the records of ownership maintained by the Motor Vehicle Administration.

The consumer may recover from the Motor Vehicle Administration the excise taxes originally paid by the consumer for the returned vehicle. The excise taxes that the consumer is entitled to recover are calculated based on the amount of the purchase price or any portion of the purchase price of the motor vehicle that is refunded to the consumer.

REPURCHASE OF A LEASED VEHICLE

The Maryland lemon law provides that a manufacturer must pay the following amounts when it repurchases a leased vehicle under the lemon law:

To the lessee:

The lemon law provides that it shall be construed to provide a mechanism through which the lessor and lessee are made whole for losses incurred as a result of a motor vehicle's nonconformity, defect, or condition. The Maryland Attorney General's Office has determined that an award making the lessee whole could include lease payments made by the lessee. The lemon law also requires that the manufacturer refund to the lessee:

- 1. All money paid during the period in which the vehicle was not available due to the defect, condition or nonconformity;
- 2. All sums paid by the lessee to repair the defect, condition or nonconformity;
- 3. All excise tax, license and registration fees and similar governmental charges;
- 4. Less a reasonable allowance for the lessee's unimpaired use of the vehicle.

To the lessor:

1. All amounts due to the lessor under the terms of the lease.

The lessor may not assess the lessee any prepayment penalty, early termination fees, or other charges resulting from return of the vehicle.

REPLACEMENT

When replacing a vehicle under the Maryland lemon law, the manufacturer must provide a comparable motor vehicle acceptable to the consumer. The reasonable allowance for use does not apply to a replacement.

When a leased vehicle is replaced, provided that the lessee meets the lessor's then current credit criteria with respect to the lease, the lessor must transfer the title of the defective motor vehicle to the manufacturer; accept title to the comparable replacement motor vehicle; transfer possession of the comparable motor vehicle to the lessee; and execute a lease agreement with the lessee with the same time period, terms and conditions of the original lease.

The Motor Vehicle Administration will allow a credit to the consumer against the excise tax imposed for the replacement vehicle in the amount of the excise taxes originally paid by the consumer for the returned vehicle. If the excise tax on the replacement vehicle exceeds the excise tax credit for the returned vehicle, the dealer will collect only that portion of excise tax due. If the excise tax credit on the returned vehicle exceeds the excise tax on the replacement vehicle, the consumer is entitled to recover a refund from the Motor Vehicle Administration of that excess.













VIA FAX ONLY

December 28, 2007

David Lantz
OURISMAN S WHEATON PLAZA CHEVROLET, INC.
11180 VIERS MILL RD
WHEATON, MD 20902-2553

Re:

Siebel Request: 71-587969876 2006 Pontiac G6 VIN # 1G2ZG558264

Dear Mr. David Lantz:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Ryan Smith

2006 G6 - 6CYL SEDAN		PONTIAC/GN	MC DIVIS	ION
41U BLACK	/V6G	GENERAL MO	OTORS COI	RPORATION
19B EBONY		100 RENAIS	SSANCE CI	ENTER
ORDER NO. HZZN5S/FDR STOCK	NO.	DETROIT	MI	48243-1114
VIN 1G2 ZG55 82 64		VEHICLE II	NVOICE 2	AD51402269
************* ***** ******	*****	*****	*****	*16*03202S
MODEL & FACTORY OPTIONS	MSRP	INV AMT	FLEET	
27G69 G6 - 6CYL SEDAN	20930.00	18523.05	TNVOTCE	05/20/05
C1U FLT-ENTERPRISE RENT A CAR FE9 50-STATE EMISSIONS F83 AXLE RATIO 3.05 LX9 ENGINE, 3.5L V6 SFI MX0 AUTOMATIC TRANSMISSION	0.00	0.00	SHIPPED	05/20/05
FE9 50-STATE EMISSIONS	N/C	N/C	EXP I/T	05/30/05
F83 AXLE RATIO 3.05	N/C	N/C	INT COM	05/31/05
LX9 ENGINE, 3.5L V6 SFI	N/C	N/C	PRC EFF	01/01/05
MX0 AUTOMATIC TRANSMISSION	0.00	0.00	KEYS G25	548 G2548
PCH PREMIUM VALUE PACKAGE INCLUD	ES 1475.00	1268.50	WFP-F Q	rr opt-1
* (4) 16" PAINTED ALLOY WHEE			FAN: (000805331
*AM/FM STEREO 6 DISC CD PLAY	ER		BANK: GI	MAC - 020
(REPLACES STD/OPT/PKG RADIO))		CHG-TO	03-202
* SUNROOF, POWER TILT & SLID				
VQ2 FLEET ORDERING AND ASSISTANC				
VX7 LONG TERM DAILY RENTAL PROGR				
V2G CREDIT IN LIEU OF FUEL	0.00	24.99-	MRM:	23030.00
1SZ PREMIUM PACKAGE DISCOUNT	500.00-	430.00-		
			1704070	
			DAN:	00006
			MEMO	1095.25

TOTAL MODEL & OPTIONS 21905.00 18836.56 ACT 231 19461.56 DESTINATION CHARGE 625.00 625.00

INVOICE DOES NOT REFLECT DEALER'S ULTIMATE COST BECAUSE OF MANUFACTURER REBATES, ALLOWANCES, INCENTIVES, HOLDBACK, FINANCE CREDIT AND RETURN TO DEALER OF ADVERTISING MONIES, ALL OF WHICH MAY APPLY TO VEHICLE.

THIS MOTOR VEHICLE IS SUBJECT TO A SECURITY INTEREST HELD BY GMAC.

REMIT TO GMAC NO. 020 VIN 1G2ZG558264 \$ 19461.56 INV 2AD51402269 DUE 05/31/05 DEALER 03-202













VIA FAX ONLY

December 28, 2007

Lyle Etzwiler WIN KELLY PONTIAC, BUICK, GMC, LLC 12421 AUTO DR CLARKSVILLE, MD 21029-1266

Re:

Siebel Request: 71-587969876 2006 Pontiac G6

VIN # 1G2ZG558264

Dear Mr. Lyle Etzwiler:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Ryan Smith

Case As	ssessmer	nt By:Ryan S	mith		Siebel/CARS Request #: 71-587969876			
Custom	er Name:				•			
Veh yea	r:2006		Make:Ponti		Model:G6	Current mileage:45,000		
Veh ID			In Service D	Date:5/21/2005	Purchased:Used	If used:		
	G558264							
What is	the custo	omer seekinç	j?To get out	of the vehicle.				
	VEHICLE REPAIR HISTORY							
	CUSTOMER'S PRIMARY SYMPTOM/CONCERN:							
Date:	RO#:	Mileage	: Days	Out: Descri	iption of Repair:			
CUSTO	MER'S PF RO#:	RIMARY SYM Mileage			iption of Repair:			
1								
		OM/CONCER						
OTHER Date:	R SYMPTO	OM/CONCER Mileage:		ut: Descri	ption of Repair:			
				ut: Descrip	otion of Repair:			
				ut: Descrip	otion of Repair:			
				ut: Descrip	otion of Repair:			
				ut: Descrip	ption of Repair:			
				ut: Descrip	otion of Repair:			

Team Lead Approval:

Total Days Out of Service:	(excluding day Collision Repairs)	s for customer pa	y reasons such as; Maintenance and
VEHICLE MEETS PRESUMPTION I	LEMON LAW?	YES:	NO:
What is customer eligible for (b States lemon law requirements	-	_	gibility Guidelines and the
DVM and/or DEALER RECOMMEN	DATION(s):		
CRS RECOMMENDATION & RATIO	DNALE (EXPLAIN):		
Decision reached by CRS:	Arbitrate case:	: S	Settle case:

Team Lead Approval:

Case Assessment By:Ryan	Smith	Siebel/CARS Request #: 71-587969876				
Customer Name:		7				
Veh year:2006	Make:Pontiac	Model:G6	Current mileage:45,000			
Veh ID	In Service Date:5/21/2005	Purchased:Used	If used:			
#:1G2ZG558264						
What is the customer seeking?To get out of the vehicle.						

VEHICLE REPAIR HISTORY

CUSTOMER'S PRIMARY SYMPTOM/CONCERN: Steering

Date: RO#: Mileage: Days Out: Description of Repair:

Date.		MITTEAGE.	Days Out.	Description of Repair.
11/20/06	209792	25,468	4	C/S steering is excessively noisy and making clunk noise when turning. Found Excessive clearance in left front outer tie rod and thumping in steering rack due to a loose pinion. Replaced tie rod and rack performed alignment test drove ok at this time.
8/28/07	191477	39,477	2	C/S clunking noises from steering, turning left right, same as before. Tech found knocking noise from steering rack. Replaced steering rack. Tech found right rim bent.

CUSTOMER'S PRIMARY SYMPTOM/CONCERN: Noise

Date: RO#: Mileage: Days Out: Description of Repair:

4/20/08	188021	31,980	*	C/S car makes a loud noise when driving cause Noise. Replaced Hub Bearing.

OTHER SYMPTOM/CONCERN: Wiper

Date: RO#: Mileage: Days Out: Description of Repair:

4/20/08	188021	31,980	*	Wiper blade replaced.

Team Lead Approval:

Total Days Out of Service: 6(excluding days for customer pay reasons such as; Maintenance and Collision Repairs)							
VEHICL	E MEETS	PRESUMPTI	ON LEMON LA	AW? YES:		NO:X	
What is customer eligible for (based upon the BBB Program Eligibility Guidelines and the States lemon law requirements for meeting presumption)?							
Customer ineligible based on age and mileage.							
DVM and/or DEALER RECOMMENDATION(s): i have no problem goodwilling the repair no expense. Beyond the parts warranty we would offer them OLC. We need to know if he will take the vehicle into the dlr for repairs with the repairs he will get a 12/12 parts warranty. I would give him both the OLC and the repairs but there is nothing more we will be doing beyond that. We will not repurchase the vehicle back.							
CRS RECOMMENDATION & RATIONALE (EXPLAIN): Customer was offered and received an OLC from CAC. CRS is not offering any goodwill to Customer. UTC letter sent out 1/9/2008. Customer has not contacted CRS back. Case closed with BBB on 1/8/2008 and CRS will be closing case out on 1/21/2008.							
Decisi	on reac	hed by CR	S: Arbitra	te case:		Settle case:	X

Team Lead Approval:









VIA FAX ONLY

December 28, 2007

Lance Dawson WALKER PONTIAC-BUICK-GMC 2404 CRAIN HWY S BOWIE, MD 20716-344

Re:

Siebel Request: 71-587969876 2006 Pontiac G6 VIN # 1G2ZG558264

Dear Mr. Lance Dawson:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Ryan Smith









VIA FAX ONLY

December 28, 2007

Lyle Etzwiler WIN KELLY PONTIAC, BUICK, GMC, LLC 12421 AUTO DR CLARKSVILLE, MD 21029-1266

Re:

Siebel Request: 71-587969876 2006 Pontiac G6 VIN # 1G2ZG558264

Dear Mr. Lyle Etzwiler:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
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Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Ryan Smith









VIA FAX ONLY

December 28, 2007

David Lantz
OURISMAN S WHEATON PLAZA CHEVROLET, INC.
11180 VIERS MILL RD
WHEATON, MD 20902-2553

Re:

Siebel Request: 71-587969876 2006 Pontiac G6 VIN # 1G2ZG558264

Dear Mr. David Lantz:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
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Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Ryan Smith

ADR File Checklist

SR Number:71-587969876	BBB Case: PGM0761864					
Customer: Make/Model/Year: Pontiac/G6 /2006	VIN:1G2ZG558264 In Service: 5/21/2005 Mileage:					
45,000	in service: 5/21/2005 inneage.					
Received Date: 12/27/2007 Day 15 Da						
Primary Concern: Tires, Batter, Steering	Rack					
Case Scan / Acknowledgement (24 hrs) Completion Date/Time:					
☐ Initial Calls (72 hrs):						
Customer	Completion Date/Time: 12/27/2007 / 2:03					
☑ Dealer Svc Mgr☑ Dealer Finance Mgr	Completion Date/Time: 12/28/2007 / 10:46 Completion Date/Time: /					
	Completion Date/Time: 12/28/2007 / 11:00					
⊠ Repair Orders Requested:	Received: 1/8/08					
☐ Sales Documents:	Received:					
⊠ BARS / Finance Sheet						
☐ Case Assessment (by Day 14):						
Lemon Law Eligible:	Yes ☐ No ⊠					
Presumption:	Yes No No					
☐ GM Position – Customer / BBB Due I	Date (7-10 days):					
☐ Settlement / Goodwill Offered Date:						
All Documents Attached (by Day 15)						
☐ Arbitration Date:						
◯ Closing Activities:						
Settlement	Completion Date/Time: 1/21/08 / 9:23					
Executive Summary	Completion Date/Time: 1/21/08 / 9:22					
Close Siebel	Completion Date/Time: 1/21/08 / 9:30					
AND TO IL WITH THE	N. J. /D 014055 0065					
AVM: Zach Winters Service Dealer: OURISMAN S WHEATO	Node/Box: 914055 8065					
David Lantz	ON PLAZA CHEVROLET, INC Svc Mgr:					
Selling Dealer:	Contact:					
NOTES:						

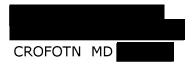
BBB AUTO LINE



January 8, 2008

Re:CC2 PGM0761864: Hromada vs Pontiac/GMC Division

1G2ZG558264



Dear Madam/Sir:

I would like to thank you for your interest in the BBB AUTO LINE program. Unfortunately, after carefully reviewing your claim and the program eligibility standards set out in the *Program Summary*, I have determined that your vehicle exceeds the mileage requirement for filing with the BBB AUTO LINE program.

I regret we will not be able to help you.

Sincerely,

John Ryan at Extension 529

CC: Ryan Smith













GENERAL MOTORS BUSINESS RESOURCE CENTER

VIA FAX ONLY

December 28, 2007

Lance Dawson WALKER PONTIAC-BUICK-GMC 2404 CRAIN HWY S BOWIE, MD 20716-344

Re:

Siebel Request: 71-587969876 2006 Pontiac G6 VIN # 1G2ZG558264

Dear Mr. Lance Dawson:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

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- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Ryan Smith

Ryan Smith BRC Customer Relationship Specialist Ph# 800-231-1841, prompt 9, prompt 5, extension 11638 FAX# 866-259-4612















12421 AUTO DRIVE . CLARKSVILLE, MARYLAND 21029 www.winksty.com (301) 854-CHEV 1-800-458-6640 (410) 988-982/: CHEVROLET • PONTIAC • BUICK • GMC • KIA • ISUZU • Collision Center

66281	CONNIE HILLEG		5840	11/24/06	PNCS209792
OURISMAN CHRYSLER JEEP DODGE	1	PRE CO. (ERC. AL)	25,468	Total case	Yarow No
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* [] CASH [] CHARGE II CREDIT CARD	TARAKKAKAKA	POTAL MISC DISC POTAL TAX	0.00	· V	
PAYMENT FOR ALL SERVICES IS OUT UPON COMPLETION	ne zue ar en	DTAL INVOICE \$	0.00	* .	· ,
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THANK YOU

THRE COOK MINST SE WELFMING FOR WAS VOURTHERINGS.

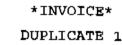
188021

1

2404 Crain Highway South Bowie, Maryland 20716

(301) 249-1000

WALKER PONTIAC-GMC TRUCK, INC.



Page



24 HR TOWING



CROFTON (301) 249-6213 HOME: BUS: PONTIAC SERVICE ADVISOR: 236 YVETTE TENNASSEE COLOR YEAR MAKE/MODEL VIN LICENSE MILEAGE IN/ OUT BLACK 06 PONTIAC G6 1G2ZG558264 31980/31980 PROD. DATE DEL DATE WARR EXP. PROMISED PO NO. PAYMENT RATE INV DATE 01JAN06 21:00 20APR07 0.00 CASH 23APR07 R.O. OPENED READY OPTIONS: 14:25 20APR07 14:25 23APR07 LINE OPCODE TECH TYPE HOURS TOTAL A CUSTOMER STATES CAR MAKES A LOUD NOISE WHEN DRIVING. CAUSE: NOISE GENR E2320....REPLACE RIHGT FRONT HUB BEARING. 461 (\mathbf{N}/\mathbb{C}) 1 22706425 HUB (N/C) FC: 4Q PART#: 22706425 COUNT: 1 CLAIM TYPE: W AUTH CODE: NJ PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00 B CUSTOMER STATES WHEN TURNING STREETING WHEEL IT MAKES A CLINKING NOISE. CAUSE: . GENR E7700...REMOVE STEERING SHAFT LUBE AND REINSTALL. 461 WP (N/C)1 12346241 LUBRICANT (N/C) FC: 2N PART#: 12346241 COUNT: 1 CLAIM TYPE: W AUTH CODE: NM PARTS:

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

LABOR:

0.00

I certify that this vehicle has been tested or test driven when needed and that the mechanic's work was performed satisfactorily. Manager's Initials

DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

STATEMENT OF DISCLAIMER The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all werenties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it nay liability in connection with the sale of this item/items. No Refunds after 10 days. No returns on Electrical or Special Order Parts. There will be a 10% charge on all returned parts. The factory warranty constitutes all

CUSTOMER SIGNATURE

0.00

************ DESCRIPTION LABOR AMOUNT PARTS AMOUNT GAS, OIL, LUBE, TIRES SUBLET, TOWING, STORAGE MISC., HAZ. WASTE, SHOP MAT. TOTAL CHARGES SALES TAX PLEASE PAY
THIS AMOUNT

0.00

TOTAL LINE B:

ALL PARTS ARE NEW UNLESS INDICATED.

0.00

OTHER:

CROFTON

188021

INVOICE

DUPLICATE 1

Page 2 WALKER PONTIAC-GMC TRUCK, INC.

2404 Crain Highway South Bowie, Maryland 20716 (301) 249-1000



24 HR TOWING (301) 249-6213

NET



TOTAL

HOME:		BUS:		P	ONTIAC	(301) 249-0213	TRUCKS
6.614.613	YEAR	MAKE/MODEL	SER	RVICE ADVISOR:			NASSEE
				ViN	LIGENSE	MILEAGE	N/OUT TAG
BLACK	06	PONTIAC G		558264		31980/3	1980
DEL DATE	PROD DAT	E WARR EXP.	PROMISED	FO No.	RATE	PAYMENT	INV DATE
01JAN06		2	1:00 20APR07		0.00	CASH	23APR07
RO OPEN	ED:	READA	OPTIONS:				

14:25 20APR07 14:25 23APR07

LINE OPCODE TECH TYPE

DEAR VALUED CUSTOMER,

WE WANT YOU TO BE "COMPLETELY SATISFIED" IF YOU HAVE ANY QUESTIONS OR CONCERNS, PLEASE FEEL FREE TO CALL ME. WE VALUE YOUR CONTINUED PATRONAGE THANK YOU ALWAYS FOR YOUR BUSINESS!

LIST

CHRIS MALONEY

(301)249-1000 X325

prime production of the produc

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

I certify that this vehicle has been tested or test driven when needed and that the mechanic's work was performed satisfactorily. Manager's Initials

DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The the sale of this Item/Items. The Seller hereby expressly dickins all warrenties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Sofier neither assumes nor authorizes any other person to assume for it eny liability in connection with the sale of this Item/Items. No Refunds after 10 days. No returns on Electrical or Special Order Parts. There will be a 10% charge on all returned parts. CUSTOMER SIGNATURE

STATEMENT OF DISCLAIMER

	IN-IN-LO
LABOR AMOUNT	0.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE, TIRES	0.00
SUBLET, TOWING, STORAGE	0.00
MISC., HAZ. WASTE, SHOP MAT.	0.00
TOTAL CHARGES	0.00
LESS	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00

191477

INVOICE

WALKER PONTIAC-GMC TRUCK, INC.

2404 Crain Highway South Bowie, Maryland 20716 (301) 249-1000

Page

1

24 HR TOWING



CROFTON

UNDER .		DIIC] ₩	(301) 249-62	13
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BLACK	06	PONTIAC	G6	1G2ZG	558264		39477/	39477
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		8 GEAR						(Ñ/Ĉ)
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PARTS:

PARTS:

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CLAIM TYPE: W

0.00 OTHER:

0.00

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0.00

,,,,TECH FOUND RIGHT REAR RIM BENT, AND UNDERCARRIA GE DAMAGE. ALL WORK ,,,, is guaranteed 12 months/ 12K MILES *********

C REQUEST WIPER BLADE REPLACE GENR NO WORK PERFORMED

COUNT: 1

AUTH CODE:

461 IPS:

0.00 LABOR:

OTHER:

0.00

TOTAL LINE C:

(N/C) 0.00

100.00

********* DEAR VALUED CUSTOMER,



WE WANT YOU TO BE "COMPLETELY SATISFIED" IF YOU HAVE ANY QUESTIONS-OR-CONCERNS PLEASE FEEL FREE TO CALL ME.WE VALUE YOUR CONTINUED PATRONAGE.THANK YOU ALWAYS FOR YOUR BUSINESS: KEN SNYDER

(301)249-1000 x325

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

I certify that this vehicle has been tested or test driven when needed and that the mechanic's work was performed satisfactorily. Manager's Initials

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON." STATEMENT OF DISCLAIMER
The factory warranty constitutes all
of the warranties with respect to
the sale of this item/items. The
Seller hereby expressly disclaims all
warranties either express or implied,
including any implied warranty of
merchantability or fitness for a
particular purpose. Seller neither
assumes nor authorizes any other
person to assume for it eny liability
in connection with the sale of this
item/items. No Refunds after 10
days. No returns on Electrical or days. No returns on Electrical or Special Order Parts. There will be a 10% charge on all returned parts.

CUSTOMER SIGNATURE

STATEMENT OF DISCLAIMER

100.00 TOTALS DESCRIPTION LABOR AMOUNT 0.00 PARTS AMOUNT 0.00 GAS, OIL, LUBE, TIRES 0.00 SUBLET, TOWING, STORAGE 0.00 MISC., HAZ. WASTE, SHOP MAT. 100.00 TOTAL CHARGES 100.00 LESS 0.00 SALES TAX 0.00PLEASE PAY THIS AMOUNT

ALL PARTS ARE NEW UNLESS INDICATED.

QUALISMAN'S CHRY JEEP INC. 12430 AUTO DRIVE CLARKSVILLE MD 21029 (410)988-8100

DATE \$\$/09/06 STOCK NO. AL DEAL NO. 25223



PURCHASER

VEHICLE SALES CONTRACT BUYERS FULL NAME F#ESI MANY R LAST CO-BUYERS MODDLE: LAST 0845/3 4 / CO NAME county) 1 / 2 % / 7 4 710 MEN MINOSON CT CROSTON 910 21154 DUYERS PHONE HOME STATE LIC. NO. CO-BUYERS PHONE HOME (DWY (STATE) CELL (1 LIC, NO. ALLSTATE INSURANCE CO REY ANTHONY SAN AGENTS FOLICY NO. PHONE NO. (301 1464-1500) ADDRESS 4369 WORTHVIFW DR EFFECTIVE DATE 80WIE 30 20716 **□USE**D ☐ DEMONSTRATOR SHORT TERM BENTAL MOORE PONTIAC SERIAL NUMBER COLDA 65 DOOR SEAAS 769610 STOCK NUMBER MI CARE DATE 16275558264 BASE PRICE OF VEHICLE (FOR NEW VEHICLES, INCLUDING ADDITIONAL MANUFACTURER ITEMS AS SHOWN OR WINDOW LABEL) FREIGHT CHARGE (INCLUDED IN MSRP) DEALER INSTALLED ITEMS AND CHARGES: DEALER PROCESSING CHARGE 991 00 (NOT REQUIRED BY LAW) THE RECYCLING FEE TUTAL. 74 TAX 52.43 61 🗹 🖟 SÉCURITY INTEREST 🔃 20, O'REGISTRATION FEES 128, 88 TEMPORARY TAGS 18, 88 TOTAL TITLE FEES αa ELECTRONIC REGISTRATION FEE 00 TOTAL CASH DELIVERED PRICE (fi), SERVICE CONTRACT TOTAL PURCHASE PRICE TOTAL CASH SUBMITTED WITH ORDER REBATES (RECEIPT IN LIEU OF SPECIAL FEVANCING) 0 ALLOWANCE FOR USED CAR TRADEAN AS APPRAISED Œ LESS BALANCE CIVING TO 8<u>/ A</u> CASH TO BE PAID AT TIME OF DELIVERY OODESCRIPTION OF TRADE-IN TOTAL CREDITS MODEL YEAR 15000BALANCE DUE CURRENT MILEAGE 3554 SERVAL NO. COLOR AGREEMENT TO ARBITRATE DISPUTES Purchaser(s) (also referred to as "you") and Dealer agree that if any Dispute (See paragraph 13 on the reverse) will be resolved by binding arbitration by a single arbitrator under the applicable rules of the afternative dispute resolution agency named below, with that arbitrator rendering a written decision with separate findings of fact and conclusion of law. An award by the arbitrator shall be final and binding on all parties to the proceeding. The arbitrator shall apply the substantive law of the State of Maryland and the arbitration shall take place in the county in which Dealer is located. All arbitration costs and expenses shall be borne as determined by the arbitrator. The arbitrator may not award punitive damages. You agree that class-wide arbitration of a Dispute may not be undertaken and that no claim arising from a Dispute (known or unknown) may be adjudicated in or be the basis for compensation as a result of any class action proceeding, Judgement on an award may be entered by either party in the highest local, state, or federal court, or before any administrative body. THE PARTIES UNDERSTAND THAT THEY ARE WAIVING THEIR RIGHTS TO JURY TRIAL AND CLASS CONSIDERATION OF ALL DISPUTES BETWEEN THEM NOT SPECIFICALLY EXEMPTED FROM ARBITRATION IN THIS ARBITRATION AGREEMENT. This front word beach of this buyer's order, along with other documents signed by Purchasse(s) in connection with this order, comprises the aretim agreement between the particle effecting this purchase. No oral agreements or understandings shall be brinding. Purchasen(s) antenumentages that herste has been given the opportunity to review all documents price to signify after any other and that herste has not signed any documents in hierar. By executing this Order, Purchasen(s) administrations between the second of the territe and has possived a fully completed obey. Purchasen(s) cardiacs habites in 15 years of age or other. Until made affective, this order is not brinking and Purchasen(s) may cannot and recover along. This Order is NOT VALID UNLESS SIGNED AND ACCEPTED BY DEALERTS AUTHORIZED REPRESENTATIVE. on Olerada Facinolation Agency Name and Address MATTOMAL ARBITRATION FORUM P.C. BOX 56191 MINNEAPOLIS, MYRNESOIA 55405

SIGNED:

1-827-655-7755

Buyer (and Co-Bu	var) Nama se	d Address (li	ncluding County a	ind Zip Code)	Creditor - Seller (Name a	nd Address)
†					ANTERNO ALAMAN A ANTERNO	ASTERNA MALE
A WAR WAS ASSESSED.		S		:	OURISMAN DE CHE	Y JEENS STAIL.
CROFTON HO	A	瓣鳃科 共代(2)	Mit.		CLARKSVELLE MO	(2015)
You the Buver (s	and Co-Buye	ar if anv) n	new him the web	iolo bolom for as	oh ov esdit Dr. si	
on ciedar aukhet a	e agreeme	nus on me i	rom and back o	ot this contract. Y	OU anree to nev the Sc	ning this contract, you choose to buy the vehicle eller (sometimes "we" or "us" in this contract) the
жиооти гурансы	a sono cinari	ice Unarge	according to t	de pavment sch	edule below. We will fi	gure your finance charge on a daily basis. The
Truth-in-Lending	Disclosures	neiow ste t	part of this contr	act.		
New/Used	Year	Make and Mode	,	Vehicle Identificati		
14047,0000	ICA			venicie kienincan	on Number	Primary Use For Which Purchased
		CALIVO				personal, family or household business
wah b	20 0 0	100	i i	(3.13.7 A)		, —
(1 × 2 × 4)	0.5000	<u> </u>	1 102/2055	9 <u>403</u>		agricultural
			IN-LENDING	DISCLOSURE	S	insurance. You may buy the physical damage
ANNUAL PERCENTAGE	FINA		Amount	_Total of	Total Sale	insurance this contract requires (see back) from
RATE	CHAF The de		Financed The amount of	Payments The amount you	Price The total cost of	anyone you choose who is acceptable to us. You are not required to buy any other insurance
The cost of	amoun	t the	credit provided	will have paid att	er vour purchase on	to obtain credit unless the box indicating
your credit as a yearly rate.	credit cost y		to you or on your behalf.	you have made a	all credit, including your down	Vendor's Single Interest is required is checked below. Your decision to buy or not to buy other
		I		acheduled.	payment of	insurance will not be a factor in the credit
G V			100000000000000		\$ 1500 00 ls	approval process. If any insurance is checked below, policies
	5		18609 72	\$ <u>21892.80</u>	<u> </u>	or certificates from the named insurance com- panies will describe the terms and conditions.
Your Payment Number of	Amou		Mhan Da			parameter and testing and continues.
Payments	Paym		When Pa Are I	Jue	1	Check the insurance you want and sign below:
. 60	362	. 8ව Mo	nthly beginning	12/09/2006		Optional Credit Insurance
Or As Follows:					, ,,,	☐ Credit Life: ☐ Buyer ☐ Co-Buyer ☐ Both
						Credit Disability (Buyer Only)
Late Charge, If pay	ment is not re	ceived in full	within 15 da	ays after it is due, y	ou will pay a late charge	Premium:
01\$	OF	% of the pa	ert of the payment	that is late, which	wer is <u>greater</u> .	Credit Life \$
Prepayment, if you Security interest.					1	Credit Disability \$
Additional Inform	etion: See thi	s contract ka	r more information	includina informati	on about nonpayment,	Insurance Company Name
default, any require	d repayment in	full before the	e scheduled date ar	nd security interest.		N/A
					· · · · · · · · · · · · · · · · · · ·	Home Office Address
ITEMIZATION OF AM	OUNT FINANC	ED				N / // Credit life insurance and credit disability insurance are not
1 Cash Price					•	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
A Cash Price of N	Actor Vehicle en	d Accessories		\$ _17733_11	_(A)	a factor in the credit approval process. They will not be
1. Cash Prio						provided unless you sign and agree to pay the extra cost.
	e Accessories					of the Itemization of Amount Financed, Credit 16
B Sales Tax				\$ 531.42		This insurance may not pay all you owe on this contract if
C Service Contra				\$ <u>4125.00</u>	(c)	required to Ottain credit, Your decision to buy or not to buy credit file insurance or credit disability insurance with not be a factor in the credit approval process. They will not be provided unless you sign and agree to pay the extra cost. If you choose this insurance, the cost is shown in Item 4A of the Itemization of Amount Financed. Credit "le insurance is based on your original payment schedule. This insurance may not pay all you owe on ms contract if you make late payments. Credit disability insurance does not cover any increase in your payment or in the number of payments.
(Seller may kee *See Service C						of payments. Coverage for credit life insurance and credit disability insurance ends on the original due date for the
D Debt Cancellati				s 870	(0)	last payment unless a different term for the insurance is
E Dealer Proce			(wei vd her	\$ 99.00		shown below.
F Freight Char		o (nor roque	ou of land	\$ N/A		
G. Other	0-			\$ 8.0	-, ,	
To Whom Pa	nd X/A					
H Other				\$ <u>`</u>	_(H)	Other Insurance
To Whom Pa	ud <u>W.J. St</u>					Type of Insurance Term
Total Cash Price					\$ 1 11 1 11 (1)	
2 Total Downpayment	t =					Premium \$ N/A
Trade-in (Ye	ear) (Mal	46)	(Model)			Insurance Company Name
Gross Trade	In Allowance		· · · · ·	\$		Home Office Adoress
	Made By Selie	г		s N/A		Proceedings Address
Equals Net 7	,			s N/A		I want the insurance checked above.
+ Cash	· A			s 1500 00	****	<u>x</u>
+ Olher <u>[₹]∜ /</u>			•	\$ <u>W/A</u>		Buyer Signature Date
,			and see 4H below)		\$ 15000, at (2)	X Co-Suver Signature Date
2. Uppoid Dalance of	Care Diana (1 -	· 0%			60 1 (2.5 () () /) and (, and analysis and speciments (1900)

Contract Number

(Seller may keep part of these emounts): A Cost of Optional Credit Insurance Peid to Insura Company or Companies. Life \$	#/A \$	THIS INSURANCE DOES NOT INCLUDE INSURANCE ON YOUR LIABILITY FOR BODILY BUJURY OR PROPERTY DAMAGE. WITHOUT SUCH INSURANCE YOU MAY NOT OPERATE THIS VEHICLE ON PURILIC HIGHWAYS. Returned Check Charge: You agree to pay a charge of \$			
Total Other Charges and Amounts Paid to Other 5 Amount Financed (3 + 4) VENDOR'S SINGLE INTEREST INSURANCE (VSI insurance the initial term of the contract to protect the Creditor for loss or day sole protection. This insurance does not protect your interest in the VSI insurance to the VSI insurance to the Creditor to loss or day.		*SERVICE CONTRACT: (Optional) You request a service contract written with the following company for the term below. The cost is shown in item 1C of the Itemszation of Amount Financed. Company FIGELIE WARRANTE SERVICES			
GAP PROTECTION: Optional Guaranteed Auto Protection (Guaranteed Financial United By State Contract unless you sign for it below and agree to pay a AMOUNT FINANCED. You may obtain optional GAP protection is acceptable to us. The GAP contract issued by the provider of the detail, if you want GAP protection, short below.	AP) to not required to obtain cradit. GAP protection will not be provided the additional cost shown below and in item 4(C) of the ITEMIZATION OF from a person of your choice that is authorized to sell such coverage and he protection will describe the terms and conditions of coverage in further Provider:	Buyer X Co-Buyer X			
OPTION: You pay no finance charge if the amount fit	nanced, item 5, is paid in full on or before	Year OFFICER NAME OF THE PARTY			
OPTION: You pay no finance charge if the amount financed, item 5, is paid in full on or before					
HOW THIS CONTRACT CAN BE CHANGED. This contract contains the entire accommend between you and the state of this contract. Any change to this contract must be in writing and we must sign it. No oral changes are binding. Buyer Sign's X Co-Buyer Signs X may part of this contract is not valid, all other parts stay valid. We may delay or refrain from enforcing any of our rights under this contract without losing them. For example, we see back for other important agreements. NOTICE TO RETAIL BUYER: Do not sign this contract without by the second of the secon					
you algn. Keep it to protect your legal rights. You agree to the terms of this contract. You confirm that before you signed this contract, we gave it to you, and you were free to take it and review it. You confirm that you received a completely filled-in copy when you signed it. Buyer Signs X Date 1/03/08 Co-Buyer Signs X Date 1/03/08					
does not have to pay the debt. The other owner agrees to the Other owner signs here	" was star and vernice gives to us in this contract.	s a person whose hame is on the title to the vehicle but			
Seller signs	Address By X				
Seller assigns its interest in this contract to	(4	Title			
OURISMAN'S CHRY JEEP 1AC.	Assigned without recourse	nee) under the terms of Salier's agreement(s) with Assignee. Assigned with limited recourse			
Seller	Ву	Title			

TEAR ALONG PERFORATION



MARYLAND STATE POLICE PURCHASER'S COPY

NO. 0537081

INSPECT THIS IS TO CERTIFY

PROVISIONS OF TRANSPORTATION AFFICLE, ANNOTATION THE SAFETY EQUIPMENT OF THE DESCRIBED EXCEEDS THE MINIMUM SAFETY STANDARDS.

STATION STAMP

CONTRACTOR CUMBED STORE WHEN PRESENTING TO THE WAS

STATION #63#69

Date of Certification

11180 Veins Mill Road

SEE REVERSE SIDE FOR IMPORTANT INSTRUCTIONS

CROPTON MD

Miscland Motov Vehicle Administration 9501 Bitchie Highway, N.E. Glen Burns, Maryland 21062

REGISTRATION CERTIFICATE

TAG NUMBER	unit #		STICKER NUMBER
TICLE MUYASER	<u> </u>		7540431
37746 Year Glass	195 p(ıs ·
06A	LN/A 16	entendarios m. 220551	
- 3700	R.COMB. WI. FEE OON/A 12	a :00	12/31/200
CWMEN'S DRIVEN SIC	CHBE/BOUNDEX ND.		DRJVER EICEHSE/SCOWUEX NO.
- M		N.	

IMPORTANT NOTICE:

Maryland Law requires this vehicle be insured at all times. Tags must be returned PRIOR to any cancellation of insurance on this vehicle.

Failure to comply will result in suspension of registration and penalty of up to \$2,500 per vehicle, per year.

BBB AUTO LINE Customer Claim Form

Case number: PGM0761864

Contact Date: 12/27/07

Start Date:

Please make any necessary corrections to the information below, <u>print</u> or verify your VIN number and lienholder/leasing company information at the bottom of this page, and complete the missing information in Section 4 on the next page (attach additional sheets as needed).

SECTION 1: CUSTOMER INFO	DRMATION			
Titled owner:				W
Mailing address:		****	· · · · · · · · · · · · · · · · · · ·	<u>, </u>
City: crofotn		State: MD 2	tip code:	
Day phone:	Evening phone:		Cell phone:	<u></u>
Fax:	E-mail address:			<u> </u>
SECTION 2: VEHICLE INFOR	MATION	ï		
Make: Pontiac/GMC	Model: G6	Year: 2006	Current mileage: 45	000
Name(s) that appears on the vehi	cle title:			,
Selling dealer/city/state: , , @	DURISMAN, CLARKS	THE MO - SOCO	eduna do noseewnek	althawh
Primary Servicing dealer/city/st	ate: walker pontiac,	car was puechosed	h parlow durisman	. Bouse, who
Acquired as new used	demo □ teased — Is t	:he vehicle in your pos	session? ⊠ yes □ no	
Purchase/lease date: 11/09/06	Mile	eage at purchase/leas	32776	1111
First repair attempt date: 11/12/		st repair attempt milea	ge: 2540 0 - <u>2</u> 5468	<u>,, </u>
How often is the vehicle used for business purposes (percentage		vehicles owned y the business:	Transmission type:	nual
Has the vehicle been in an acciden	it/had body damage? 🔲 ye	s 🗵 no	Date of accident:	
Description of damage:	<u>.</u>			*****
SECTION 3: DESIRED OUTCO	ME (Describe what you	want done to res	olve vour concern)	•
To get out from under this def			ore your concerny	
Please complete the missing	information in the box	below and on pag	je 2.	
VEHICLE INDENTIFICATION	N NUMBER 1 G 2 Z	655826	<u>.</u>	
Lienholder/Leasing Compa	ny <u>Ghzens auto</u> v	Mobile Phone	Number 1-817 - 265	- <u>32</u> 18
Account Number _	. 	mance		

Case Number: PGM0761864 SECTION 4: VEHICLE PROBLEMS (List primary problem first) Does the # of problem : repair List the date, mileage, and days out of exist Problem Servicing dealer(s) attempts service for each repair attempt now? 11/16/06 25468 23 days tire 1 no brakes 2 ΠQ 11116/06 25468 म प्रियाज सावश्री Steering rack *¥*3 yes ×128107 69477

Total days out of service for all problems: 27 days

Signature of Titled Owner(s)

I am submitting this dispute for resolution in the BBB AUTO LINE program, and I agree to arbitrate the dispute under the BBB AUTO LINE Arbitration Rules.

Please mail or fax this completed form with <u>copies</u> of all available repair orders, your vehicle registration, your sales agreement or lease agreement, and any other relevant documents (e.g., written correspondence with the manufacturer, etc.) to:

BBB AUTO LINE 4200 Wilson Blvd., Suite 800 Arlington VA, 22203-1838 Fax: 703-247-9700

Privileged and Confidential Information

Case Assessment By:Ryan S	Smith	Siebel/CARS Request #: 71-587969876				
Customer Name:						
Veh year:2006	Make:Pontiac	Model:G6	Current mileage:45,000			
Veh ID #:1G2ZG558264	In Service Date:5/21/2005	Purchased:Used	If used:			
What is the customer seeking?To get out of the vehicle.						

VEHICLE REPAIR HISTORY

CUSTOMER'S PRIMARY SYMPTOM/CONCERN: Steering

Date:	RO#: <u>1</u>	Mileage:	Days Out:	Description of Repair:
11/20/06	209792	25,468	4	C/S steering is excessively noisy and making clunk noise when turning. Found Excessive clearance in left front outer tie rod and thumping in steering rack due to a loose pinion. Replaced tie rod and rack performed alignment test drove ok at this time.
8/28/07	191477	39,477	2	C/S clunking noises from steering, turning left right, same as before. Tech found knocking noise from steering rack. Replaced steering rack. Tech found right rim bent.
			1	

CUSTOMER'S PRIMARY SYMPTOM/CONCERN: Noise

Date:	RO#:	Mileage:	Days Out:	Description of Repair:
4/20/08	188021	31,980	*	C/S car makes a loud noise when driving cause Noise. Replaced Hub Bearing.

OTHER SYMPTOM/CONCERN: Wiper

Date:	RO#: M	<u>llleage: L</u>	pays Out: D	description of Repair:
4/20/08	188021	31,980	*	Wiper blade replaced.

Team Lead Approval:

Privileged and Confidential Information

			(excluding Collision Re	. ,	reasons such as; M	laintenance and
VEHICLI	LIVILLIS	PRESUMPTI	ON LEWION LA	AVV: TES.	NO.X	
				on the BBB Prograning presumption)?	n Eligibility Guid	elines and the
Custom	er ineligib	le based on	age and milea	ge.		
<u>DVM and/or DEALER RECOMMENDATION(s)</u> : i have no problem goodwilling the repair no expense. Beyond the parts warranty we would offer them OLC. We need to know if he will take the vehicle into the dlr for repairs with the repairs he will get a 12/12 parts warranty. I would give him both the OLC and the repairs but there is nothing more we will be doing beyond that. We will not repurchase the vehicle back.						
CRS RECOMMENDATION & RATIONALE (EXPLAIN): Customer was offered and received an OLC from CAC. CRS is not offering any goodwill to Customer.						
Decisi	on reac	hed by CR	S: Arbitra	te case:	Settle case:	X

Team Lead Approval:

Date:

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

February 2, 2011



Service Request: 71-590967516

Customer Relationship Specialist: Lance Evans

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we are happy to inform you that we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$604.57.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 50-937 CHECK NO. 213 DATE **AMOUNT** 01/14/08 XXXXXXXXXXXXXX604 DOLLARS XXXXXXXXXXXXXX604.57 **XXXX57 CENTS** North American Operations General Motors Corporation Disbursement Account PAY TO THE ORDER OF ROCKAWAY The Chase Manhattan Bank, N.A. Syracute, New York AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO CHECK NO. BB 000000243 PAYMENT DATE VENDOR NAME 01/14/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/11/08 VH 1-9RMKT1 71-590967516.1-9RMKT1 00.0000 604.57 .00 604.57 1G2ZH548X54 ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIHBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 604.57 .00 604.57 TOTAL



REIMBURSEMENT DEPALLMENT PO BOX 33170 DETROITMI 48232-5170

4823235170 8050

Mallaladallitteittilladladladladladladla

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant				
Date Claim Submitted: 12/15/07				
17-Digit Vehicle Identification Number (VIN): 1622H548X54				
Mileage at Time of Repair: 46441 Date of Repair: 12/10/07				
Claimant Name (please print):				
Street Address or PO Box Number:				
City: ROCKANAY State: NJ ZIP Code				
Daytime Telephone Number (include Area Code):				
Evening Telephone Number (include Area Code):				
Amount of Reimbursement Requested: \$ 728,47				
The following documentation must accompany this claim form.				
Original or clear copy of all receipts, invoices, and/or repair orders that show:				
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt) 				
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter. Claimant's Signature:				

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

Repail Was done @ JIM SALERENS ALCTUMOTIVE 718.47
ENTERPRISE (ELRAC, INC) 10.00
728.47

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

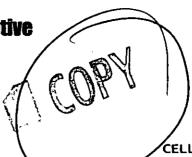
If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Pontiac Customer Assistance Center at 1.800.620.7668 (TTY 1.800.833.7668).







CUSTOMER NO.	14182	ADVISOR	CD 30	652	MO AACE	12/10/07	PNCS690882
	14107	ROBERT DECK	LICENSE NO.	034 MAE	44GF 46 AA1	COLOR BLUE/	STOCK NO. P6573I
		YEAR / MAKE / MODEL			40,441	DELIVERY OATE	DELIVERY MILES
ROCKAWAY	', NJ	05/PONTIAC/	G6 GT/4DR			09/03/07 SELLING DEALER NO.	42,664
		1G2ZH	5 4 8 x 5	1P.O.NO.		ALO, DATE	<u> </u>
				7. 0. 10.		12/10/07	REPRINT# 1
i.		COMMENTS					мо: 46443
ABOR & PARTS	STEERING/SUSPENSION	TECH(S)	:164	* ; *****	312:00	WE C)FFER:
	CUSTOMER STATES CAR HAD NO POWER S'CUSTOMER AUTHORIZES 1 HOUR DIAGNOS	TEERING.				 Shuttle Serv 	ice
	TECH PERFORMED SYSTEM CHECK AND NO FAILURE OF THE STEERING COLUMN. TE	TED INTERNAL					
	THE STEERING COLUMN. TECH CLEARED (CODES AND				 Low Cost Re 	Intais
		DTYON	HAT	T DOICE	•	We Gladly A	ccept:
JOB # 1	TYFP-NUMBER	6.518	OD A 1 TOTA	359.00	359.00 359.00	☐ Mastercar	 d
						□ Visa	-
		JOB # 1				☐ American	Evoroce
# 2"UZPNZUZ	CUSTONER STATES SES LIGHT WAS ON W	HEN IT HAD NO PO	:164 MER	aa V	1		Express
	STEERING. SEE JOB #1 FOR REPAIRS.					☐ Discover	
PARTSQ	TYFP-NUMBERDESCRI	PTION		T PRICE-		☐ Checks	
			IOB#2TÖTÄ				
		J08 # 2				i	
J# 3 <u>+</u> 01PNZ02	B CAR LUBE DIL FILTER PERFORM LUBE OIL AND FILTER SERVIC INCLUDES 24 PNT INSPECTION REQUESTED BY CUSTOMER SERVICE COMPLETED	E TECH(S)	:164 , , , , ,			Eadin	1 4
PARTSQ JOB # 3	TYFP-NUMBERDESCRI 1 25010792 FILTER	PTION 1.836	UNI XOB # 3 TOTA	T PRICE- 7.00 L PARTS	7.00 7.00	1 (0232) 0329	DROP OFF ERVICE AVAILABLI
			TOTAL LABOR				
3# 4+90PN Z03	COURTESY TRANS. RENT GAVE CUSTOMER RENTAL - NO CHARGE.	TECH(S)	:164		0.00	· · · · · · · · · · · · · · · · · · ·	•
PARTS0	TYFP-NUMBERDESCRI	PTION	UNI 108 # 4 TOTA	T PRICE-	0.00	* *	·
• •			TOTAL LABOR		•		-
1# E401DN740	AF ALIGN FRONT END						
OΒ. 3101 (11240	CUSTOMER STATES: ALIGN FRONT END FRONT END OUT OF ALIGNMENT PERFORM FRONT END ALIGNMENT.	iECII(S)):164 📜 . 🧻		98.00		
PARTSC	TYFP-NUMBERDESCR	PTION	UNI	T PRICE-			. •
			JOB # 5 TOTA		0.00		
		JOB # 5	TOTAL LABOR	& PARTS	98.00		
PAGE 1 OF 2	CUSTOMER COPY		[CONTINUED O	N NEXT PA	GEI 03:37nm		

Jim Salerno Automotive

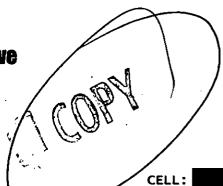
* A Breed Apart *

PONTIAC-BUICK-GMC
1005 ROUTE 10

RANDOLPH, NEW JERSEY 07869

TELEPHONE(973) 584-0806

FOR APPT/873) 584-2700



			\	CELL:	
14182	ROBERT DEC	KFR JR	652 44GP	12/10/07	PNCS69088
	LASOR RATE	LICENSE NO.	MILEAGE	BLUE/	этоск но. Р65731
	YEAR / MAKE / MODEL	<u> </u>	10, 11.	DELIVERY DATE	DELIVERY MILES
ROCKAWAY, NJ	VEHICLE LD. NO.	/G6 GT/4DR		09/03/07 SELLING DEALER NO.	42,664
	1 G 2 Z H	5 4 8 x 5 4	1 D. NO.	R.O.DATE	
	ET.E.NO.	R	D. NO.	12/10/07	REPRINT#
Interness MONE	COMMENTS				мо: 4644
O.G. & SUPPLIES B # 3 5.0 1995 COUPON MOTOR OIL @ SCCODEDESCRIPTION	1.870 /UN REMOVAL	TOTAL - 6	3.00 9.35 3.00 9.00 -46.86 -53.85 -2.45 -1.05 -14.70 -14.70 -106.85 -2.45 -1.05	 Shuttle Service Low Cost Residual We Gladly A Mastercar Visa American Discover Checks 	ice entals .ccept: d
ASHIER SIGNATURE EHICLE PICKED UP TIME DATE CUSTOMER SIGNATURE		TOTAL TAX.			
				BIRD S	DROP OFF ERVICE AVAILABL

Customer Copy

JIM SALERNO AUTOMOTIVE 1005 ROUTE 10 RANDOLPH, NJ 07869 973-584-0606

Card Type:

Acct #:

1653591716

Trans ID: Auth Code:

210116

Date:

10-DRC-2007

Time:

03:40:52 PM

Invoice:

690882

Total Amount: \$743.72

I AGREE TO PAY THE ABOVE TOTAL ACCORDING TO MY CARD ISSUER AGREEMENT.

PEI DAO

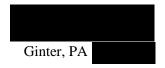
7:30A- 5:00P TU 7:30A- 67:30A- 6:00P TH 7:30A- 6 ΨE OWNER OF VEHICLE: 7:30A- 5:CCP SA 9:00A-18 FR **BRANCH ADDRESS:** 244L SU CLOSED LEDGEWOOD W RENTAL RENTAL AGREEMENT NO. F40742 777 L) 47 TYPE D 12/10/07 AM 0527)AY = 24 KOUR PERIOD START CHARGES IF DIFFERENT NO CHARGE FOR MILES **ORIGINAL VEHICLE** LICENSE NO ROURS S 10.00/HOUR 40 BILL 나는유민 Days a 34.00/DAY AGE OUT THI SALERNO-OWNER/GM 999584-2700 DRIVEN AEFERENCE NUMBER CONDITION AND PLED X ADDITIONAL AUTHORIZED DRIVER(S) - EXCEPT AS REQUIRED BY LAW, NONE REMNITTED WITHOUT OWNER'S WRITTEN APPROVAL INO DAMAGE WRITTEN APPROVAL
I REQUEST OWNERS F WHO IS UNDER MY CONTROL AND DIRECTION TO DRIVE VEHICLE FOR ME AND ON MY BEHALF.) AM RESPONSIBLE FOR MEIR ACTS WHILE THEY ARE DRIVING, AND FOR FULFILLING TERMS AND CONDITIONS OF TURNING THE SECOND OF THE SECOND O \\D USE OF VEHIC |{{|| 0 RE KLY IN THE STATE OF RENTAL AND THE FOLLOWING STATE(S): E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F OUT NJ NY CT DREY No Gaboline Refunds OPERATION IN ANY OTHER STATE OR COUNTRY WILL AFFECT YOUR LIABILITY AND RIGHTS UNDER THIS AGREEMENT .1/8_1/4_3/8 1/2 5/8 3/4 7/8 F RENTER DECLINES OFTIONAL DAMAGE RENTER ACCEPTS OPTIONAL DAMAGE OPTIONAL PRODUCTS NOTICE: WANTER (DW) AT FEE SHOWN IN OOL-UMN TO RIGHT. SEE OPTIONAL RENTER: X WAIVER (DW) AND ASSUMES DAMAGE WE OFFER FOR AN ADDITIONAL PRODUCTS NOTICE TO LEFT AND PAGE 3, PARAGRAPH 18, DW IS NOT INSUR-CHARGE THE FOLLOWING OPTIONAL Accepts DW PRODUCTS: DAMAGE WAIVER; Declines DW PERSONAL ACCIDENT INSUR-RENTER ACCEPTS OPTIONAL PERSONA ACCIDENT INSURANCE (PAI) AT FEE SHOWN IN COLUMN TO RIGHT. SEE OPTIONAL PRODUCTS NOTICE TO LEFT AND PAGE 3, PARAGRAPH 18. RENTER DECLINES OPTIONAL PERSONAL ACCIDENT RISURANCE (PAI). ANCE; AND SUPPLEMENTAL LIA-BENTER X BILITY PROTECTION. BEFORE DECIDING WHETHER TO PUR-Accepts PAI CHASE ANY OF THESE PRODeclines PAI HEN UCTS, YOU MAY WISH TO DETER-OPTIONAL SUPPLEMENTAL ON (SLP), SEE PAGE 2, RENTER ACCEPTS OPTIONAL SUPPLE-MENTAL LIABILITY PROTECTION (SLP) RENTER: X MINE WHETHER YOUR PERSONAL AT FEE SHOWN IN COLUMN TO RIGHT INSURANCE OR CREDIT CARD SEE OPTIONAL PRODUCTS NOTICE TO Declines SLP Accepts SLP LEFT AND PAGE 3, PARAGRAPH 17. PROVIDES YOU COVERAGE DUR-ACKNOWLEDGMENT OF THE ENTIRE AGREEMENT, PAGES 1 THROUGH 4.

I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS ON PAGES 1 THROUGH 4 OF THIS AGREEMENT AND BY MY SIGNATURE BELOW I AM THE "RENTER" UNDER THIS AGREEMENT BY SIGNING BELOW, I AM AUTHORIZING OWNER TO PROCESS CHARGES ON MY CREDIT CARD(S) AND OR DEBIT ING THE RENTAL PERIOD. THE FUEL a 3.60/GALLON PURCHASE OF ANY OF THESE BELOW, I AM AUTHORIZING OVINER TO PROCESS CHARGES ON MY CREDIT CARD(S) AND OR DEBI CARD(S), FOR ADVANCE DEPOSITS, INCREMENTAL, AUTHORIZATIONSDEPOSITS, AND CHARGE INCURRED, AS WELL AS PAYMENTS REFUSED BY A THIRD PARTY TO WHOM BILLING WAS DIRECTED. CERTIFY THAT THE DRIVERS LICENSE(S), PRESENTED IS CURRENTLY VALID AND IS NOT SUSPENDED PRODUCTS IS NOT REQUIRED TO AND CHARGES RENT VEHICLE DATE 12/10/07 DOMSECFE 5.00/DAY REPLACEMENT VEHICLE RENTE OWNE REP EMPL BIOCN TÀX 7.0 COLOR LICENSE NO WILL AMOUNT PAID BY DATE TIME MODEL **FCAR** 260.00 #CAUTH 12/11/07 MILEour DRIVEN **TOTAL CHARGES** LEVEL ACREED TO RENTER NO DAMAGE **DEPOSITS** O REFUNDS 10 AMOUNT DUE O CLOSED BY CASH CHECK CHAR PAID BY QUIT E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F RECEIPT OF CASH REFUND DATE AMOUNT (RECEIVED No Gasoline Refunds E 1/8 1/4 3/8 1/2 5/8 3/4 7/8 F

OWNER IS AN AFFILIATE OF ENTERPRISE RENT-A-CAR COMPANY, WHICH OWNS ALL RIGHTS TO ENTERPRISE NAMES AND MARKS.

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

February 2, 2011



Service Request: 71-590967795

Customer Relationship Specialist: Lance Evans

Dear :

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the instrument panel cluster that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we are happy to inform you that we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$472.79.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 50-937 CHECK NO. DATE **AMOUNT** 01/11/08 XXXX79 CENTS XXXXXXXXXXXXX472 DOLLARS North American Operations General Motors Corporation Disbursement Account GINTER ORDER The Chase Manhattan Bank, N.A. Syracuse, New York AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK CHECK NO. BB 000000193 PAYMENT DATE VENDOR NAME 01/11/08 REGISTER NO. DESCRIPTION DOC. REFERENCE NUMBER INVOICE DATE INVOICE AMOUNT % DISC. DISC. AMOUNT NET AMOUNT 01/10/08 VM 1-9RUHTC 71-590967795.1-9RUHTC 00.0000 472.79 .00 472.79 1G1ZT52885F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT\OR QUESTIONS CALL 800-462-8782 H3 TOTAL 472.79 .00 472.79 ALTOONA PA 166

L4 DEC 2007 FM 2 T NOTE USA First-Cla

Reimbursement Department P.O. Box 33170

Detroit, MI 48232-5170

48232+5170

70 Hallahallahaldhaallaallaallaallaall

| |*

CUSTOMER REIMBURSEMENT CLAIM FORM

[This section to be completed by Claimant						
	Date Claim Submitted: 12-14-07						
	17-Digit Vehicle Identification Number (VIN): \(\int G \) \(\frac{1 \text{Z T \text{S 2 8 8 F \}}{C 1 C 1						
	Mileage at Time of Repair: 67455 Date of Repair: 7-2-07						
	Claimant Name (please print):						
	Street Address or PO Box Number:						
*	City: Houtzdale State: PA ZIP Code:						
	Daytime Telephone Number (include Area Code):						
	Evening Telephone Number (include Area Code):						
	Amount of Reimbursement Requested: \$ 780.10						
	The following documentation must accompany this claim form.						
	Original or clear copy of all receipts, invoices, and/or repair orders that show:						
	 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt) 						
	My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.						
	Claimant's Signature						

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

or Ginter, PA 16651 (2:p is the same for both Towns)

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete the claim and offered the opportunity to resubmit the claim when the missing documentation is available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



BUTLER AUTOMOTIVE, INC. · CLEARFIELD, PA 16830-1455 · PHONE: (814) 765-9656 FED ID # 251858750 HOUTZDÁLE P/A CUSTOMER COPY PAGE 1 YEAR MILES IN MILES OUT TAG DATE MAKE VI STK/CUS 07/02/07 CHEVROLET 1G1ZT52885F 17932 67455 67458 SERVICE DATE NOTIFIED SVC ADV PROMISED DATE/TIMÉ LICENSE RATE PAYMENT INV. DATE 07/10/07 00:00 59.00 01 07/10/07 R.O. NUMBER TAX ID HOME PHONE **BUSINESS PHONE** 67382 REPAIR LINE 001 =========== CUSTOMER STATES SERVICE STEERING MESSAGE ON VEHICLE HARD TO STEER SCANNED SYSTEM FOUND CODE C0545 STORED DAIG FOUND FAULTY MOTOR AND COLUM WAS NECC TO REMOVE AND REPLACE STEERING COLUM AND MOTOR REASSEMBLE CHECKED OPERATION OK REPAIR

COMPLETE RELEASE VEHICLE

BILL CODE - CHANK YOU FOR BRINGING YOU

177.00 177.00

15926870RTOU-COLUMNORTOLATE LABOR

269.25

GM

GM

289.69 558.94 735.94

Payment Type - 01 0 780 YOUR SATISFACTION

IF OUR SERVICE WAS SATISFACTORY TELL YOUR FRIENDS. IF NOT. PLEASE TELL US IMMEDIATELY

THANK YOU

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

STATEMENT OF DISCLAIMER

THE FACTORY WARRANTY CONSTITUTES ALL OF THE WARRANTIES WITH RESPECT TO THE OF THE WARRANTIES WITH RESPECT TO THE SALE OF THIS TIEM/ITEMS. THE SELLER HERBY EXPRESSLY DISCLAIMS ALL, WARRANTIES EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABLITY OR FITNESS FOR A PARTICULAR PURPOSE. SELLER NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF ITS ITEM/ITEMS

LABOR ANIOUN1	177.00
PARTS AMOUNT	558.94
MISC. SALES	
MATERIALS	
TOTAL CHARGE	735.94
DEDUCTIBLE	
SALES TAX	44.16
OTHER PAY	

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

CUSTOMER SIGNATURE

CUSTOMER PAY 780.10

0150 2005 <u>09</u>/08 K **EXPIRATION** PRICE AMOUNT QTY. CLASS DESCRIPTION DATE Secuico CHECKED 28100014 BUTLES AUTOHOTIVE CLEARFIELD PA AUTHORIZATION AY 03822B SUB 2376220315 601100102002714 TAX ID-FOLIO / CHECK NO. / LIC. NO. STATE | REGJOEPT CLERK | TIP SIGN HERE MISC TOTAL RETAIN THIS COPY FOR YOUR RECORDS

Sidney St

Reimbursement Department P.D. BOX 33170 Detroit, MI 48232-5170

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

46232\$5170

DEC 1 9 2007.

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CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant				
Date Claim Submitted: August 22, 07				
17-Digit Vehicle Identification Number (VIN): 1G22H528554				
Mileage at Time of Repair: 51854 Date of Repair: AUG 22,07				
Claimant Name (please print):				
Street Address or PO Box Number:				
City: 51 dhey State: 04 ZIP Code				
Daytime Telephone Number (include Area Code)				
Evening Telephone Number (include Area Code)				
Amount of Reimbursement Requested: \$ 218.40				
The following documentation must accompany this claim form.				
Original or clear copy of all receipts, invoices, and/or repair orders that show:				
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt) 				
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.				
Claimant's Signature:				

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Pontiac Customer Assistance Center at 1.800.620.7668 (TTY 1.800.833.7668).



9374978157 2 6 7 6 3 9 *INVOICE* PAGE 2



3540 South County Rd. 25-A Troy, Ohio 45373

Sales: (937) 335-0068 * Service: (937) 335-0068 Parts: (937) 440-5773 * Toll Free: 800-860-6673

NET

SERVICE ADVISOR: 485 CHRIS TRABERT

LIŜ

MAKE/MODEL LICENSE ODOMETER IN/ OUT TAG COLOR YEAR FUSION ORA 05 PONTIAC G6 28554 51854/51854 DELIDATE PRODEDATE WARR EXP PROMISED RATE PAYMENT INV. DATE PO NO. 17:00 20AUG07 21APR05 DD 78.00 CASH 22AUG07

R:O: OPENED READY OPTIONS: STK:22432 DLR:41381

07:25 20AUG07 | 14:16 22AUG07

LINE OPCODE TECH TYPE HOURS
1 19153328 F-SENSOR FU

MISC PO#

SIDNEY OH

HOME

WP94

MISC OVN CHG PO#

WP94

DORIGINAL

(N/C)

TOTAL

(N/C)

(N/C)

FC: 01

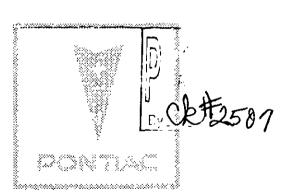
FC: 01

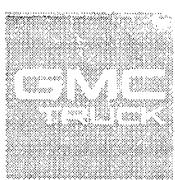
51854 3.20 FOUND A BULLETIN FOR THIS CONCERN. DRAIN GAS TANK AND REMOVED PER BULLETIN. CHECKED RESISTANCE ON GROUND AND GOT 249.5 OHMS. THEN FLIPPED TANK UPSIDE DOWN AND MEASURED RESISTANCE AGAIN AND GOT 65 OHMS. REMOVED SENDING UNIT AND RECHECKED AND GOT 249.5 AND 55. THIS IS OUT OF SPEC. INSTALLED NEW SENDING UNIT AND REMEASURED OUT OF TANK AND GOT 248 AND 40. REINSTALLED INTO TANK AND MEASURED ON GROUND AND GOT 248 OHMS, THEN FLIPPED OVER AND STILL READ 65 OHMS. REMOVED SENDING UNTI AND INSTALLED INTO NEW GAS TANK. REMEASURED AND GOT THE CORRECT READING OF 248 AND 40. ALL CHECKS GOOD AT THIS TIME.

MISC. MATERIALS CHARGE

10.00







WARRANTY STATEMENT AND DISCLAIMER: THE DEALER WARRANTS ALL NEW PARTS FROM THE ORIGINAL EQUIPMENT MANUFACTURER AND LABOR PERFORMED IN CONJUNCTION WITH REPAIRS COVERED BY THE VEHICLE MANUFACTURER'S WARRANTY FOR REPAIRS ARE THOUSAND ... 000). WHICHEVER COMES FIRST. ALL OTHER REPAIRS ARE WARRANTED FOR T. DAYS OR THOUSAND ... 000) MILES WHICHEVER COMES FIRST. ANY PART OR LABOR FALLS IN NORMAL SERVICE WITHIN THE STATE PERIOD THE DEALER WILL REPLACE THE DEFECTIVE PARTS AND/OR REPAIR ANY DEFECT IN WORKMANSHIP. EXCEPT FOR THE LIMITED WARRANTY GIVEN ABOVE THE DEALER DISCLAIMS ALL WARRANTIES. EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OR MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF SAID PARTS OR THIS REPAIR.

WARRANTY STATEMENT AND DISCLAIMER: THE DEALER HEREBY DISCLAIMS ALL WARRANTIES EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF ANY PARTS OR THIS . REPAIR. THIS DISCLAIMER IN NO WAY AFFECTS THE PROVISIONS OF ANY MANUFACTURER OR OTHER SUPPLIERS WARRANTIES.

SHOP SUPPLIES COSTS: We have added a charge equal to 5% of the cost of labor, not to exceed \$10.00 to the Repair Order for shop supplies used in connection with the repair.

ALL PARTS INSTALLED ARE NEW UNLESS OTHERWISE INDICATED,

INDICATED,

DESCRIPTION	TOTALS
LABOR AMOUNT	468.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	10.00
TOTAL CHARGES	478.00
LESS INSURANCE	0.00
SALES TAX	31.07
PLEASE PAY THIS AMOUNT	509.07

CUSTOMER SIGNATURE

SIDNEY, OH HOME BUS: PAGE 1 Solic: 3973-335-0088 *Service: 3973-355-0088 PAGE 1	9374978187	*INVOICE*	i roy, Unio	nty Rd. 25-A TROY. OH 45373			
FUSION ORA OS PONTIAC G6 FUSION ORA OS PONTIAC G6 G22H528554 105ELDATE RODO DATE WARRISHY PROMISES PER PONOS RATE: PAYMENT SINVIDATES PONOS DE PROMISES PRODUCTION PROMISES PER PONOS RATE: PAYMENT SINVIDATES PONOS DE PROMISES PER PONOS DE PONOS		PAGE 1	Parts: (937) 440-5773 * T	oll Free: 800-860-6673			
21APROS DD 17:08_20AUG07 21APROS DD 17:08_20AUG07 21H:18.0.O.OPENDININISTET READY-TILLED OPTIONS: STK:22432 DLR:41381 07:25_20AUG07 1.11E OPCODE TECH TYPE HOURS A CUSTOMER STATES THE CHECK STERRING LIGHT CAME ON AND THE VEHICLE WAS VERY HARD TO TURN, ADVISE CAUSE: COS50, CO460, CO545 100 REPAIR 621 LESTER, MARK LICH: CPC C8835 MODULE, INFLATABLE RESTRAINT STEERING WHEEL REPLACE 621 LESTER, MARK LICH: CPC C8835 MODULE, INFLATABLE RESTRAINT STEERING WHEEL REPLACE 621 LESTER, MARK LICH: CPC C8835 MODULE, STRING MARK LICH: CPC C8835 MODULE, STRING WHEEL 1 25805894 MOTOR E7680 COLUMN ASSEMBLY, STEERING REPLACE 621 LESTER, MARK LICH: CODES, DIAGNOSED COLUMN 51854 C0550, C0460, C0545 2.80 2 DIFFERENT FROBLEMS BLAGNOSED FROM CODES, DIAGNOSED COLUMN 51854 C0550, C0460 COLUMN ASSEMBLY STEERING WHOLE ASSEMBLY STEERING WHOLE ASSEMBLY STEERING WHOLE ASSEMBLY STEERING WHEEL CONTROL MODULE, REPLACED MODULE AND RECHECKED. CODES C0460 AND C0545 WERE STILL SETTING DUE TO A FUALYT SENSOR IN THE STEERING COLUMN. REPLACED COLUMN AND RELEARNED POSITIONS. ALL CHECKS GOOD AT THIS TIME. B CUSTOMER STATES THE GAS GAUGE IS STICKING AND WONT GO TO FULL ADVISE. CAUSE: FRANKING COLUMN AND RELEARNED POSITIONS. ALL CHECKS GOOD AT THIS TIME. B CUSTOMER STATES THE GAS GAUGE IS STICKING AND WONT GO TO FULL ADVISE. CAUSE: STRING PROBLEMS AND RELEARNED POSITIONS. ALL CHECKS GOOD AT THIS TIME. B CUSTOMER STATES THE GAS GAUGE IS STICKING AND WONT GO TO FULL ADVISE. CAUSE: FOR THE COLUMN ASSEMBLY	COLOR YEAR MAKE/MODEL						
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North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530



CHECK NO.

DATE 01/11/08

The Chase Manhattan Bank, N.A. Syracuse, New York

INVOICE DATE

XXXXXXXXXXXXXXZ37 DOLLARS

******90 CENTS**

AMOUNT ***************237.90

North American Operations General Motors Corporation Disbursement Account

SIDNEY UΗ

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 VENDOR DUNS NO. 1 BB 000000409 VENDOR NAME

DOC. REFERENCE NUMBER

DETACH BEFORE DEPOSITING CHECK CHECK NO.

PAYMENT DATE 01/11/08 DISC. AMOUNT NET AMOUNT

REGISTER NO. DESCRIPTION 01/10/08 VM 1-9S1ASK 71-591055925.1-9S1ASK 00.0000 237.90 .00 237.90 7.4

INVOICE AMOUNT

% DISC.

1G2ZH528554

ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

H3 **TOTAL**

237.90

.00 237.90 January 31, 2011



Service Request: 71-591055925

Customer Relationship Specialist: Al Dorsey

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column assembly that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$237.90.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

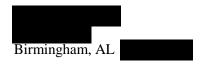
Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

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

February 2, 2011



Service Request: 71-591115312

Customer Relationship Specialist: Jane West

Dear :

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we are happy to inform you that we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$699.58.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

17 DEC 2007 PM 4 L

DEC 2 0 2007

Reinsburstment Dept 7.0. Box 33178 Defroit, MI 48232-5170

Adullahadalahadadhadahadhadhadhadhadh

CUSTOMER REIMBURSEMENT CLAIM FORM

l	This section to be completed by Claimant
	Date Claim Submitted: Dec 17, 2009
	17-Digit Vehicle Identification Number (VIN): TCTZUSY805F
	Mileage at Time of Repair: Date of Repair: Nov 28, 2807
	Claimant Name (please print):
	Street Address or PO Box Number:
	City: Brownsham State: KC. ZIP Code:
	Daytime Telephone Number (include Area Code):
	Evening Telephone Number (include Area Code):
	Amount of Reimbursement Requested: \$
	The following documentation must accompany this claim form.
	Original or clear copy of all receipts, invoices, and/or repair orders that show:
	 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
	My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
	_Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

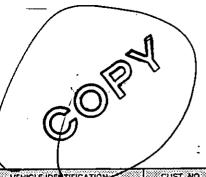
If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



BHAM, AL





Downtown Since 1916

1400 3rd Avenue North Ph: 205-716-3300
BIRMINGHAM, ALABAMA 35203
Service Dept. Fax: 205-718-3268
Body Shop Phone: 205-718-3227
e-mail: martyp@chevyman.com

CUSTOMER SIGNATURE

SERVICE ADVISOR DELMAR W HOVIES			e-mail:	martyp@chevymar	n.com
	DEATIFICATION	, NO: TAG NO.	P.O. NO.	PRINTED	INVOICE NO:
28NOV07 28NOV07 1G1ZU5480		T2627	PAY DELIVER	28NOV07	417487
TIME IN TIME READY YEAR MAKE & MODI	EL TELEPHON	ENO. LABO	RATE DATE	BY	S/A
07:21 13:32 05 CHEVROLET MAL	IBU	:	0.00 31DE	C04 55	3 222
MILEAGE IN MILEAGE OUT LICENSE NO.					·
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1 15926870 COLUMN	359.00 359.00	359.00		•	
,,,,53700 CS HAS NOISE IN STEERI					rds Chevrolet Co., s vehicle for repair,
STEERING COLUMN WAS MAKING NOSIF	REPLACED THE	·	•		dispute, claim or
STEERING COLUMN 3.5HRS ST 220 B GM OR AAA MULTIPOINT VEHICLE 1	NSPECTION		controversy of	any kind a	rising out of this
M25 GM OR AAA MULTIPOINT VE			•		o final and binding of the Customer's
INSPECTION	49. W.			-	arbitrator of the
220CSCR1	0.00		American Arbi	_	iation pursuant to
HAZARDOUS WASTE DESPOSAL AND SHO	DP SUPPLIES	25.00	4.0 00		Protocol Statement
400000000000000000000000000000000000000			•		Consumer Disputes d, however, the
	,		•	•	solve any dispute
Managaria managan ata 100 mm man atau atau atau atau atau atau atau at	Tananani Kilonoonin maanan m			-	n and/or mediation;
**************************************	0		•		ustomer may seek ount in controversy
Downtown Since 191					of the Small Claims
	· · · · · · · · · · · · · · · · · · ·				ourts of Alabama.
;	- 				c. shall provide a Process Protocol to
					of the Customer.
]			•
	DESCRIPTION	TOTALS			
	LABOR AMOUNT"	314.83	I hereby authorize to	he repair or service	e work herein set forth to
	PARTS AMOUNT	359.00	agree to pay for the	ne parts, labor, ar	b., Inc. (Edwards) and other charges. I agree any delays caused by the shipment of parts brant Edwards' employee on streets, highways. O
	GAS,OIL, LUBE SUBLET AMOUNT	0.00	unavailability of pa suppliers or transpo	rts or delays in torters. I hereby g	the shipment of parts brant Edwards' employee
	MISC. CHARGES	25.00	permission to oper elsewhere for the	ate the vehicle	on streets, highways of ting and/or inspection. the vehicle to secure th
A	TOTAL CHARGES	698.83	payment for repair	mechanic's lien in ins to the vehic les expressed or i	use vericle to secure the le. Edwards makes No molind INCLIDING AN
<i>f</i>	LESS INSURANCE	83.70	IMPLIED WARRAN	TY OF MERCHA	le. Edwards makes Ni mplied, INCLUDING AN NTABILITY OR FITNES In respect to parts. An
1	SALES TAX	34.56	Rody Shop repair	parts snall be that work lahor is w	of the manufacturer. Fo
	PLEASE PAY THIS AMOUNT	640.60	described in the E Limited Warranty	dwards Chevrole For Service Depa	t Co., Inc., Body Sho rtment mechanical work 12,000 miles, whicheve
		649.69	labor is warranted occurs first.	tor one year or	12,000 miles, whicheve
11 1110			,		

LET US KNOW HOW WE ARE DOING..THANK YOU, RICK, BILL, CHUCK DAVID AND CHARLIE YOUR SATISFACTION IS OUR #1 PRIORITY. WE APPRECIATE YOUR BUSINESS.





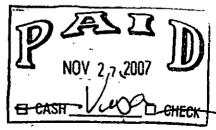
Downtown Since 1916

1400 3rd Avenue North Ph: 205-716-3300
BIRMINGHAM, ALABAMA 35203
Service Dept. Fax: 205-716-3266
Body Shop Phone: 205-716-3269
Body Shop Fax: 205-718-327

e-mail: martyp@chayyman.com

CUSTOMER SIGNATURE

ERVICE ADVISOR DELMAR W HOVIES				Body Sho	p Fax: 205- martyp@chevyn	716-3227
REPAIR ORDER DATE READY STOCK NO. VEHI	CLE IDENTIFICATION CUST	. NO. TA	G ND.	P.O. NO.	JAVOICE PRINTED	INVOICE NO.
7NOV07 27NOV07 1G1ZU5	1805F	Т2	610	· ·	27NOV07	7. 417406
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,,,53622 CS HAS POPPING IN ST	:	7 77	٠ ٦٩		TRATION) A	
URNING FOUND THE STEERING COL			As	an inducer	ent to Edw	ards Chevrolet Co.,
OIS CUSTOMER DECLINED ALL REP						r's vehicle for repair,
EST. ON REPAIR TO PASS SIDE						dispute, claim or
ST REPAIRS DECLINED					•	arising out of this
/220CSCR1	0.00	n				to final and binding
,,,53622 CUSTOMER DECLINED AL			arbi			of the Customer's
C/S FOG LIGHT NOT WORKING W/						arbitrator of the
NPF COULD NOT DUPILCATE C	\$105000 Y000Y00300					ciation pursuant to Protocol Statement
TIME, OPERATING AS DES	Secondaria dan Seriana					Consumer Disputes
TIME						led, however, the
220CSCR3	/	0				resolve any dispute
53622 CS FOG LIGHT NOT WOR	KING WITH SWITCH					on and/or mediation;
C FOUND NO PROBLEM AT THIS TI	ME NC 220					Customer may seek
"GM" OR AAA MULTIPOINT VEHICLE	"INSPECTION""					nount in controversy
M25 GM OR AAA MULTIPOINT	ŶĔĤICLE			-		of the Small Claims
INSPECTION	₹ i			•		courts of Alabama. nc. shall provide a
220CSCR1	0.00	0	6171			Process Protocol to
AZARDOUS WASTE DESPOSAL AND S	HOP SUPPLIES	4	E 76 '			of the Customer.
	ż					
·	PECCHINTION	CONTRACT A CA	*******	- -		
	DESCRIPTION	TOTALS		- L		
•	PARTS AMOUNT	44.	AR Ineu	one by Edwan	e repair or servi ds Chevrolet (ce work herein set forth to Co., Inc. (Edwards) and
	GAS,OIL, LUBE	0.0	O that	to pay for the Edwards is not	e parts, labor, i responsible for	Co., Inc. (Edwards) and and other charges. I agree any delays caused by the
• •	SUBLET AMOUNT	0.0	JU unava oo suppl	allability of par liers or transpor	ts or delays in rters. I hereby :	the shipment of parts by grant Edwards' employees on streets, highways or
	MISC. CHARGES	0.0	~ ∩ leisev	vhere for the	purpose of te	sting and/or inspection.
	TOTAL CHARGES	49.4 49.4	OV Jackov	nwiedae vour m	nechanic's lien is	n the vehicle to secure the
	LESS INSURANCE		* WAR	RANTIES, eithe	er expressed or	cle. Edwards makes NO implied, INCLUDING ANY ANTABILITY OR FITNESS
	SALES TAX	0.0		A PARIMINA	R PURPOSE w	ith receest to parte. Any
MESO	PLEASE PAY	U. •	Body	Shop repair v	vork, labor is v	at of the manufacturer. For varranted for one year as let Co., Inc., Body Shop
1010000	THIS AMOUNT	49.8	⊙≘⊗ Umit	od Warranty. F	or Service Dep	artment mechanical work, 12,000 miles, whichever
				rs first.	o, was you of	12,000 IIMOS, WINCINSTO
1/1 NOV - 0002 JU/			l l	•		



BHAM, AL

LET US KNOW HOW WE ARE DOING.. THANK YOU, RICK, BILL, CHUCK DAVID AND CHARLIE YOUR SATISFACTION IS OUR #1 PRIORITY. WE APPRECIATE YOUR BUSINESS.

EDMAROS CHEVROLET DUM 1400 THIRD AVE NORTH BRININGMM. AL 35203 2057163300 HID 18788290068756 Sale

ID: 06829068756 11/27/07 Batch #: 0550

DEBIT

4999

Appr Code: 186592

Invoice#: 000003

Total:

\$ 49.897

Customer Copy NO SIGNATURE REQUIRED

EDMAROS CHEVRULET DOMN 1480 THIRD AVE MORTH BRIMINGHAM, AL 35203 2057163390 MID #8788290068756

Sale

ID: 088290068756 11/28/07 Batch #: 9552

17:03:29

DEBIT

4999

Appr Code: 188278 Total:—

Invoice#: 000021

Customer Copy NO SIGNATURE REQUIRED

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 CHECK NO. ·** [100] [DATE AMOUNT 01/11/08 XXXXXXXXXXXXX699 DOLLARS North American Operations General Motors Corporation Disbursement Account BIRMINGHAM AL The Chase Manhattan Bank, N.A. Syracuse, New York AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK 1 CHECK NO. BB 000000278 PAYMENT DATE VENDOR NAME 01/11/08 REGISTER NO. DOC. REFERENCE NUMBER % DISC. INVOICE DATE INVOICE AMOUNT DISC. AMOUNT **NET AMOUNT** 01/10/08 VM: 1-9RXNIO .71-591115312.1-9RXNIO 00.0000 699.58 699.58 1G1ZU54805F 140 ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REINBURSEMENT\OR QUESTIONS CALL 800-462-8782 H3 TOTAL 699.58 .00 699.58 RFS 6224

Revised 8/02/2007

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

Privileged and Confidential Information

CASE ASSESSMENT

By: Cathy Paquette State: WI

Customer Name:	Service	Request: 71-591122075	BBB Case No.: PGM0830542		
Vehicle ID No.: 1G2ZF55B664	In Service Date: 3/28/2006	Vehicle is: New	BAC Code: 117455		
Year, Make & Model: 2006 Pontiac G6 Mileage at Time of BBB Filing 36000		Vehicle Purchased Used on: N/A at odometer {odometer}			
Lien holder: GMAC Other: {Name DVM Name: Mike Manzo Phone/Cell Number: 952-913-5499	·}	Sale Type: Purchase [CAM Name: Rob Johns Phone Number: 630-			
V	'EHICLE REP	PAIR HISTORY			

Throughout the entire form, use an asterisk (*) if day(s) out of service are already counted in another category.

PLACE A CHECKMARK IN THE BOX FOR THE MAJOR CONCERN BASED ON REPAIR ORDERS. USE "N/A" IF THERE WERE NO REPAIRS FOR THE COMPONENT GROUP.

x <u>Power Steering Gear</u>

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
12/28/07	146315	3	35741	Customer states there is a clunk in both sides in front over bumps. Can hear it backing out of driveway even worse when cold. Can hear it all the time though. Caused: Installed I shaft and extra padding around coolant reservoir. E7700 shaft, steering intermediate replace.

x Strut and Bearing

139264 7

19921

							
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:			
01/14/07	139264	*	19921	Customer states there is a clunk in left front. Failure in mount. Mount assembly, front strut bearing left replace.			
09/28/07	144421	*	31988	Customer states, check struts. Struts OK.			
x <u>Remote Start</u>							
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:			

Customer states the remote start will turn engine over but will not start. Not all the time. Cause: Started every time. Customers concern not

x Front Door

01/14/07

Date:	<u>RO #:</u>	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
11/06/0	06 137470	2	1500	Customer states the left front door makes a clunking noise when opening and closing. Door link not tightened properly. Link or spring, front door hold open left replace

duplicated

x Caliper M	ounts
-------------	-------

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
11/06/06	137470	*	1500	Customer states there is a clunking noise coming from the left front underside of vehicle. Cause: lubed caliper pins. Pin and or boot, caliper mounting front left replace
01/14/07	139264	*	19921	Customer states there is a clunking noise all the time when going over bumps. Lubed caliper pins and noise never went away. Bad strut. Replaced left front strut.

x Hub Bearing

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
09/28/07	144421	1	31988	Customer states he has a howling noise in the front right and it vibrates. Found failure in RF hub bearing replaced hub, tests OK. Bearing and hub assembly front wheel right replace

x Blower Motor

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
08/09/07	143278	5	143278	Customer states there is a humming noise coming from the blower motor. Failure in motor. Motor and /or fan, blower A/C R&R or replace.

x Molding

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
08/09/07	143278	*	143278	Customer states the exterior trim on the passenger rear door is pulling away from the body.

x Starter

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
06/05/06	134076	1	4956	Customer states the car would no shut off, the engine was rocking and all kinds of noises and after about 15 minutes it shut off but he has burnt wires and it smells like it was on fire. Starter burned up internally. Motor assembly, starter replace.

x <u>Tie Rod Ends</u>

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:		
12/05/07	145892	2	34976	Customer states there in the front when going over bumps. Rod end loose. Tie rod end and or adjuster sleeve left replace.		

x Radiator - Rattle

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:				
12/05/07	145892	*	34976	Customer states the radiator rattles. sided tape behind cool. reservoir.	Needed padding.	Install foam and 2		

$\begin{tabular}{ll} \hline Recall/Campaign (Not Related to Other Symptoms/Complaints) \\ \hline \end{tabular}$

<u>Date:</u> RO #: Days Out: Mileage: Description of Complaint and Repair Performed:
--

x Fuel Mileage

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:	
01/14/07	139264	*	19921	Customer states the vehicle gets 23-25 on highway driving all the time. Normal.	
x <u>Brakes</u>					
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:	
08/09/07	143278	*	143278	Customer states a shake felt in the vehicle when stopping / slowing down from highway speed. Also felt when slightly turning and on the brake. Rotors out of round. Pads. Disc brakes front R&R or replace. Pads. Disc brakes rear R&R or replace.	

x Tail Lamp

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:	
08/09/07	143278	*	143278	Customer requests the passenger rear tail light be ordered and replaced.	

X DAMAGE

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
08/09/07	143278	*	143278	Customer requests the PDR Tech inspect damage to passenger rear and repair as best as possible without repainting. Misc Sublet to dent wizard for PDR on right ¼ as best as possible and touch up.

x Tire

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
09/28/07 09/28/07	144421 144421	*	31988 31988	Customer states tire is leaking air. Found nail in left front – plugged tire Customer states the vehicle shimmes when driving 40 to 55 mph. Can feel it when letting off the accelerator pedal. It shimmes left and right not up and down. Rotate tires. (Front tires worn out, rotated to back, left front tire is choppy, needs tires soon, front and rear struts are fine.

THE STATE LEMON LAW READS:

Days out of service: 30 Days

Repairs 4

Time period 12 months / 12,000 miles

Does Lemon Law state nonconformity must continue to exist? y

If applicable, safety-related repairs {# of repair attempts} Safety-related time period {# of months} / {# of miles}

Number of repair attempts in the presumption period: 3

Total days out of service during the presumption period: 10

Total days out of service during customer's ownership: 21

Vehicle Meets Presumption of Lemon NO

PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

RECOMMENDATION AND RATIONALE

Reminder: Take into consideration 1) DVM/Svc Manager input 2) if there are any unrepaired defects, and 3) are the problems alone or cumulatively a "substantial impairment" of the vehicle's use, value or safety.

Customer did not have 4 repairs inside 12/12 and as such, does not appear to meet presumption for WI Lemon Law. The case was filed outside 12/12 and as such does not appear to be eligible for program summary. Will contact DVM with possible offer of \$1,000.00 OLC

CRS FINAL OFFER:	{REPAIR/REP/TRADE}:	DATE: {Date}	CUST {Accepted / Declined}
Goodwill: {Type}		Attorney Fees (if appli	cable): \${Amount}

TEAM LEAD APPROVING:	{Name}	Date: {Date}

2006	5 G6 - 4CYL SEDAN		PONTIAC/GN	MC DIVISIO	NC
38U	GG6 - 4CYL SEDAN EMERALD GREEN METALLIC LIGHT TAUPE	/L4G	GENERAL MO	OTORS CORE	PORATION
70B	LIGHT TAUPE		100 RENAIS	SSANCE CEN	ITER
ORDE	R NO. JGPBR7/TRE STOCK NO	•	DETROIT	MI 48	3243-1114
VIN	1G2 ZF55 B6 64		VEHICLE IN	WOICE 2AI	052033048
* * * *	* * * * * * * * * * * * * * * * * * * * * * * * * * *	*****	*****	******	L6*15522S
MODE	LL & FACTORY OPTIONS 59 G6 - 4CYL SEDAN	MSRP	INV AMT	RETAIL -	STOCK
2ZF6	59 G6 - 4CYL SEDAN	18865.00	17450.13	INVOICE (08/09/05
AP3	REMOTE VEHICLE STARTER SYSTEM	150.00	124.50	SHIPPED (08/09/05
FAD	SIMULATED WALNUT BURL ACCENTS 50-STATE EMISSIONS AXLE RATIO 3.91 CRUISE CONTROL, ELECTRONIC	N/C	N/C	EXP I/T (08/23/05
FE9	50-STATE EMISSIONS	N/C	N/C	INT COM (08/23/05
FX2	AXLE RATIO 3.91	N/C	N/C	PRC EFF (08/09/05
K34	CRUISE CONTROL, ELECTRONIC	N/C	N/C	KEYS G288	32 G2882
上出ら	ENGINE, 2.4L HO 4-CYL DOHC MFI	N/C	N/C	MF.B-F. O.L.	S Ob.LT
	AUTOMATIC TRANSMISSION				
PCI	DRIVER'S PACKAGE INCLUDES:	650.00	539.50	CHG-TO	15-522
	* PWR ADJ BRAKE & ACCEL. PEDALS	S			
	* FLOOR MATS, CARPET			SHIP WT:	3235
	* CARGO NET * (4) 16" PAINTED ALLOY WHEELS			HP:	
	* (4) 16" PAINTED ALLOY WHEELS			GMS:	18120.68
				SUPPLR:	18932.74
R6J	CUSTOMER DIALOG NETWORK LICENSE PLATE BRACKET, FRONT	0.00	16.50	MRM:	20290.00
VK3	LICENSE PLATE BRACKET, FRONT	N/C	N/C	MEMO	900.75
1SZ	DRIVER PACKAGE DISCOUNT	150.00-	124.50-		

TOTAL MODEL & OPTIONS	19515.00	18006.13	ACT 231	18045.68
DESTINATION CHARGE	625.00	625.00	H/B 261	585.45
LAM DEALER CONTRIBUTION		195.15	ADV 261	195.15
LAM GROUP CONTRIBUTION		195.15	EXP 65A	195.15

TOTAL 20140.00 19021.43 PAY 310 19021.43

MEMO: TOTAL LESS HOLDBACK AND

APPROX WHOLESALE FINANCE CREDIT 18153.00

INVOICE DOES NOT REFLECT DEALER'S ULTIMATE COST BECAUSE OF MANUFACTURER REBATES, ALLOWANCES, INCENTIVES, HOLDBACK, FINANCE CREDIT AND RETURN TO DEALER OF ADVERTISING MONIES, ALL OF WHICH MAY APPLY TO VEHICLE.

THIS MOTOR VEHICLE IS SUBJECT TO A SECURITY INTEREST HELD BY GMAC.

REMIT TO GMAC NO. 007 VIN 1G2ZF55B664 \$ 19021.43 INV 2AD52033048 DUE 08/23/05 DEALER 15-522



321 W. Prairie View Rd. Chippewa Falls, WI 54729 Phone: 715-726-1261

Fax: 715-726-9229



FAX

DATE: /-/4-08	•
TO: CATHY PAQUETTE	
COMPANY:	
PE: 71-591122075	
	ANILAMAN
	(P)
# of Pages	(including cover page)

BUICK.

PONTIAC

GMC

CADILLAC



GENERAL MOTORS BUSINESS RESOURCE CENTER

VIA FAX ONLY

January 9, 2008

Rick Robinson, Service Manager MARKQUART MOTORS, INC. 321 W PRAIRLE VIEW RD CHIPPEWA FALLS, WI 54729

Fax # 715-726-9229

Re:

Siebel Request: 71-591122075

2006 Pontiac G6

VIN # 1G2ZF55B664

Dear Mr. Robinson:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).
- Please ensure that all Social Security information is blacked out prior to sending this information

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Cathy Paquette

Cathy Paquette BRC Customer Relationship Specialist Ph#1-866-790-5700 ext 21725 FAX# 866-842-9444

01/14/08 MON

INVOICE
DUPLICATE 1

Page 1 of 2

Invoice #: 145892

Tag #: **T7084**



BUICK - PONTIAC - GMC - CADILLAC - OLDSMÖBILE

Tag #: 17004
Customer #: 52954

EAU CLAIRE,	VV 1		•	Custamer #	: DZ334			BUICK - PONTIAI	: - GMC - CADILLA	C - OLDSMOBILE
HOME EMAIL:		BUS:	CELL:	Service Advisor:	100 CHRIS VALL			321 W. Proirie Vs P hone 715.72	ew Rd. ♦ Chippowa (1261 ♦ Toll-free 1	Folls, WI 54729 .800.427.1266
COLOR	Y&AR		MAKE/MODEL	V	iN.	e ne Enti	SE::::::::::::::::::::::::::::::::::::	MILEAGE	Ń	MLEAGE OUT
GREEN38	06		PONTIAC G6	1G2ZF55B664			***	34976	3	34976
DEL DATE	PROD DATE	WARR EXP		PO NO BATE	PAYMENT	MAXXEA		RO DPENEC		READY
27MAR06		· 	17:00 06DEC07		CASH	O6DEC	:07	08:05 05DE	JU/ U8	:09 06DEC07
OPTIONS: STR:20	3247 DER: 15516 (ENGLES TRAIMXC			<u> </u>			LIST	NE	TOTAL
			USTOMER STATES THERE I JSE: ROD END LOOSE E8061 TIE ROD END AND/0 103 1 15944090 RO	OR ADJUSTER SLEEV WP4	-	PS				(N/C) (N/C)
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DISCLAIMER OF WARRANTIES: The dealer is not a party to any Manufacturer's warranty on parts or service contained herein. THE DEALER HERBEY EXPRESSLY DISCLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE WITH RESPECT TO ANY PARTS, LABOR OR MAGNOSTIC SERVICES FURNISHED UNDER THIS ORDER, BUYER SHALL NOT BE ENTITLED TO RECOVER FROM THE SELLING DEALER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS, OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES, NOTICE: YOU ARE ENTITLED TO INSPECT OR RECEIVE ANY COMPONENTS, LEARTS, OR ACCESSIONES REPLACED OR REMOVED BY THE SHIGP.

SERVICE DEPARTMENT OPEN

MONDAY - FRIDAY 7:30 AM TO 5:30 PM CALL [715] 726-9230 WE ACCEPT







LABOR AMOUNT
PARTS AMOUNT

GAS, OIL, LUBE
SUBLET AMOUNT
MISC. CHARGES
TOTAL CHARGES
LESS INSURANCE
SALES TAX
PLEASE PAY
THIS AMOUNT

BY CHAPTER ATCP 132, WIS.ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCO'SSIN DEPT. OF AGRICULTURE, HANDE AND CONSUMER PROTECTION, P.O. BOX 8911, MACSON, WISCONEM 503200 0031

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED

CUSTOMER SI

WORKORDER

Page 1 of 1

RO: 145892

TAG:

LICENSE:

SERVICE ADVISOR: 100 VALL	
COLOR YEAR MAKEMODEL 1883555DC 64	34976
GREEN38 06 PONTIAC G6 1G2ZF55B6 64 PAYMENT INV	DATE R.O. OPENED READY
CASH	05DEC2007 08:05
27MAR06 ** WATTER ** OPTIONS: STK:26247 DLR:15516 ENG:LE5 TRN:MX0	

A MISC

BUNDES FOR TESTED THERE IN THE FRONT WHEN GOING OVER BUNDS FOR TESTED W/ owner-operator, can hear a clunk in front on bumps buspension packed w/owner-operator, can hear a clunk in front on bumps buspension packed w/oce road slush from struty to frame Removed all winter debries to find touter the rod and Personal Louter the road and the road and reset to loose Replied touter tie rod end, reset to Road tested - no clunk for further rattle diagnostics from strips for radiated Durge tank, No rattle left added from strips for radiated Durge tank, No rattle left DESCRIPTIONS/INSTRUCTIONS

OU ARE ENTITIEST O A PRICE ESTIMATE FOR THE REPAIRS OU HAVE UITHORIZED. THE REPAIR PRICE MAY BE LESS THAN THE ESTIMATE, BUT face to face customer cuntact. IGNATURE WILL INDICATE YOUR ESTIMATE SELECTION.



21 W. Praicie View Rd.	٠	Chippeuro	Falls,	ΨŢ	517	10.
Phone 715,726,1261	٠	Tall-liee 1	BD0.4	27.1	1261	٠,٠

·		
TERMS: STRICTLY CASH UNKESS ARRANGEMENTS MADE. I hereby authorize the readi, work to be done along with the necess materials. You and your employees may operate vehicle for purposes testing, inspection or delivery at my risk. An express meclianit's lien is her ecknowledged on vehicle to secure the amount of repairs thereto. You will be held responsible for loss or damage to vehicle or articles but in vehicl case of fire, theit, or any other cause beyond your control.	sary s ed réby l not le in	1
	E	_

to you want the replaced parts you are	entitled to ? []	(as No
ayment will be made by: 🔲 Cosh	Crédit Card	Charge

IUI Aliii De Luage da 🗀 anau	
ACKNOWLEDGE RECEIPT OF A	COPY OF THIS AGREEMENT

mient.	
ALL	PARTS INSTALLED ARE NEW OR FACTORY
R	EBUILT UNLESS SPECIFIED OTHERWISE.

o, You will flot it in vehicle in	1. I request an astimate in writing before you begin rega	irs. X
Yos No	Please proceed with repairs, but call me before continuing if the price will in	exceed \$
REEMENT.	X	
ACOITIONAL WA	HK AUTHORIZED BY: DATE TIME NB. CALLED	NEW TOTAL ESPINATE

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AUTHORIZED BY:	DATE ::	√πM€. ,	. NO, CALLED	NEW TOTAL ESPRIATE
		AM		
		sh		

face to face customer contact.

Shop Representative Signature MOTOR VEHICLE REPAIR PRACTICES ARE WIS-AUMINITHE BUREAU OF CONSUMER THE BUREAU OF CONSUMER, OF CONSUMER AGRICULTURE, TRADE AND CONSUMER AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911.

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INVOICE

Page 1 of 1

Invoice #: 144892

Tag #: T7702

Customer #: 52954

Markouart MÕTORS

BUICX - PONTIAC - GWC - CADILLAC - OLOSMOBILE

EAU CLAIRE, WI HOME:

BUS:

CELL:

Service

.EMAIL:		• .		А	dvisor: 2	Kelly Mueller		P ##### / 15.72 to 120 1 ◆	Maj-free 1.800.427	7.1701
COLOR	YEAR	MAKE	E/MODEL		AIN	(LICENSE	MILEAGE IN	MILEA	TUO 2D
GREEN38	06	PONT	TIAC G6	1G2ZF5	5B664	·		32904	32	904
DEL DATE	PROD, DATE	WARR, EXP	PROMISED	PO NO.	RATE	ArweNI	INV. DATE	R.O. OPENED	REA	(DY
27MAR06			WAIT 220CT07		-	CASH	220CT07	09:01 220CT07	10:22 2	220CT07
OPTIONS: STR:2	6247 DER: 15516	ENG:LES:TRN:MXO								
			· · · · · · · · · · · · · · · · · · ·					LIST	NET	TOTAL
		1	MER STATES HE HAS	A CLUNK NO	ISE IN TH	E STEERING WHEN	TUNRING RIGHT	I ADN LEFT, CAN HEA	R IT SITTI	NG
			SEE RICK							
	-		POWER STEERING GEA LO GEAR ASSEMBLY I			· .				

File Copy

.119 WP4

15858368 GEAR FC: 2W

CAUSE: RIDE **Z7911 TWO WAY SHUTTLE**

TWO WAY SHUTTLE

119 WP4 (N/C)

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SERVICE DEPARTMENT OPEN MONDAY - FRIDAY 7;30 AM TO 5:30 PM

CALL (715) 726-9230 WE ACCEPT







₩.	LABUK ANIUUNI	383	0.00
Ä	PARTS AMOUNT	300	0.00
Ę.	GAS, OIL, LUBE	1000	0.00
DESCRIP	SUBLET AMOUNT		0.00
Ħ.	MISC. CHARGES	Ť	0.00
þ	TOTAL CHARGES	— (A)	0.00
	LESS INSURANCE	Š	0.00
o N	SALES TAX	900	0.00
	PLEASE PAY THIS AMOUNT		0.00

ADOD AMOUNT

MAZKSON, WISCONSIN 53708-0911

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED

BY CHAPTER ATCP 132, WIS.-ADM. CODE.

PEMILENDS TO CLARKE BY THE PUREAU OF CONSUMER

PROTECTION, WISCONSIN DEPT. OF AGRICUATURE,

TRADE AND CONSUMER PROTECTION, P.O. BOX 8911,

FAX

MON

BUS-

COLOR

GREEN38

27MAR06

Page 1 of 1

+ DIAG OF ELEC PIS = . 3HR

-
- 4H

JREMONT

AIRE, WL

DEL DATE PHOD DATE

PONTIAC G6

WARRJEXP. PROMISED

** WAITER **

2 MUELLER.KELLY

SERVICE ADVISOR: MILEAGE IN/OUT VIN 32904 1G2ZF55B6 64 READY RECVEDING D PAYMENT 220CT2007 09:01 CASH

OPTIONS: STK:26247 DLR:15516 ENG:LE5 TRN:MX0

06

TYPE WP4 TRCH. LINE OP CODE

DESCRIPTIONS/INSTRUCTIONS
CUSTOMER STATES HE HAS A CLUNK NOISE IN THE STEERING
WHEN TUNRING RIGHT ADN LEFT, CAN HEAR IT SITTING STILL
SEE RICK

RACK & PINION PROGRECY

EROOU

E 9740

- TAR

. 7HE

ARRANTY PARTS RETURNED PO# 144892 Date b۷ (AC

Markquart MOTORS BUICK - PONTIAC - GMC - CADILLAC - OLDSMOBILE

321 W. Proirie Ylaw Sd. ◆ Chippaem Folls, RV 54729 Phone 715,726,1261 ◆ Toll-field 1,800,427,1261

• · · · · · · · · · · · · · · · · · · ·	201110	N
	YOU ARE ENTITLED TO A PRICE ESTIMATE FOR THE REPAIRS YOU BAY	YE
TERMS: STRICTLY CASH UNLESS ARRANGEMENTS MADE	A ITAMBLED THE REPAIR PRICE MAY BE LESS THAN THE ESTIMATE, BU	씼
I harely authorize the repair work to be balle along with the hadden in	YOU ARE ENTREED TO A PRICE MAY BE LESS THAN THE ESTIMATE, BU AUTHORIZED. THE REPAIR PRICE MAY BE LESS THAN THE ESTIMATE, BU WILL MOT EXCEED THE ESTIMATE WITHOUT YOUR PERMISSION, YOU	ยห
materials. You and your employees may operate vehicle for purposes of neaterials. You and your employees may operate vehicle for purposes of sesting, inspection or delivery at my risk. An express mechanic's fee is barely necessary to be a self-to-self-to	AUTHORIZED, THE REPAIR PRICE MAY BE USS THAT PERMISSION, YOU WILL NOT EXCEED THE ESTIMATE WITHOUT YOUR PERMISSION, YOU SEGMATURE WILL INDICATE YOUR ESTIMATE SELECTION.	
testing, inspection of delivery at my hat, an explored repairs thereto. You will not acknowledged on vehicle to secure the amount of repairs thereto. You will not acknowledged on vehicle to secure the amount of repairs thereto.	l semples V	
acknowledged on vehicle to secure the amount of repairs mereto. For which the hald responsible for loss or damage to vehicle or articles left in vehicle in	1. I request an estimate in westing before you begin repairs. A	-
he hald responsible for loss of damage least control.	1 1 1	ነ .
case of fire, thete, or any other cause beyond your control.	1 1.30 N 1 H 2	.

of fige, thett, or any other cause beyond your	BC1-B OIL		
Do you want the replaced parts you are entit	Jed to ?	Yes	
DO 100 ment ent est			7

ALL PARTS INSTALLED ARE NEW OR FACTORY

Payment will be made by:	Cash	Credit Card	Charga
		OWN OF THE ACI	

ACKNOWLEDGE RECEIPT OF A	COPY OF THIS AGREEMENT.

s [] No Charge	Please proceed with repairs, but call me before continuin	g if the price will ex	**************************************
EMENT.	X	·	
- '	3. I do net want an estimate: X		
ADDITIONAL WO	OSIK AUTIKORIZED BY: DATE TIME	NO. CALLED	NEW YOTAL ESTIMATE

			Signature	
MOTOR VE	HICLE	repair é	RACTICES	A
	D BY	Chaptei	R ATCP	L

This vehicle received without face to face customer contact.

REGULATED BY CHAPTER ATCP 132, WIS-ADM, CODE, ADMINISTERED BY THE BUREAU OF CONSUMER: PROTECTION, WISCOMSIN DEFT, OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 63703-8911.

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INVOICE **DUPLICATE 1**

Page 1 of 1.

Invoice #: 144421

Tag #: T6556

Customer #: 52954



BINICK - PONTIAC - GAZC - CADILLAC - OLDSMOBILE

321 W. Proinie View Rd. ◆ Chippewo Folls, W. 54729 Phone 715.726.1261 ◆ Toll-Tree 1.600.427.1261

EAU CLAIRE, WI HOME

BUS:

CELL:

Service

Advisor: 2 KELLY MIJELLER

EMAIL:		Advisor: 2 /	ELLY MUELLER		- Plane	
COLOR YEAR	MAKE/MODEC	VIN		LICENSE	MILFAGE IN	MEEAGE OUT
GREEN38 06	PONTIAC G6	1G2ZF55B664			31988	31988 READY
	WARR EXP. PROMISED	PONO RATE	PAYMENT	INV.DATE	R.O. OPENED	
27MAR06	17:00 28SEP07		CASH	28SEP07	10:00 28SEP07	17:23 28SEP07
OPTIONS STIG 26 247 DLR:1561G ENG	ELES TRN:MXO				LIST	NET TOTAL
			TITE DIGUIT COONT	AND IT VIDDATE		1821 101315
	A CUSTOMER STATES HE HAS CAUSE: INSPECTED AND FOUN E2320 BEARING AND HUB	ID FAILURE IN RF HUB/E	EARING- REPALCE	ED HUBITESTS OF	C TESTS OK	. MUCI
	108 1 22706425 HU					(N/C) (N/C)
·	*****	*******	****	*****	***************	· ************************************
File	B CHECK STRUTS DT CHECKED OK FRONT A 108					0.00
	**********	*****	·***********	****	******	*********
Copy	C LEFT FRONT TIRE IS LEAKING TR FOUND NAIL IN LEFT F	3 AIR RONT- PLUGGED TIRE. CC		•		13.99
	****	********	******	*****	****	**************************************
	D CUSTOMER STATES THE VE PEDAL, IT SHIMMES LEFT AN ROT ROTATE TIRES	HICLE SHIMME WHEN D ND RIGHT NOT UP AND	RIVING 40 TO 55 DOWN	MPH, CAN FEEL I	T WHEN LETTING OF	
	108	CC ·				19.99
	******************	***********	F****	******	××+**********	*******
	FRONT TIRES WOI TO THE BACK, LE IS CHOPPY, NEED FRONT AND REAR	FT FRONT TIRE		Thank You	p ·	

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SERVICE DEPARTMENT OPEN MONDAY - FRIDAY 7:30 AM TO 5:30 RM CALL (715) 726-9230 WE ACCEPT







TRUOMA ROBAL		33.98
PARTS AMOUNT	800	0.00
GAS, OIL, LUBE		0.00
SUBLET AMOUNT		0.00
MISC, CHARGES		0.00
TOTAL CHARGES	X	33.98
LESS INSURANCE	Š	0.00
SALES TAX		1.87
PLEASE PAY THIS AMOUNT		35.85

CUSTON

Capyright 2004 ADP, Inc. 81912.2

X3SI2.270 1

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED

BY CHAPTER ATCP 132, WIS-ADM, CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MAD/SON, WISCONSIV 53700-8915.

THANK YOU!

EAU CLAIRE, WI		Page 1 of 1		TAC LICENSI		79
HOME: BUS:		SERVICE ADVISOR:		Y Mijleage in		I (Xo I
3.73.73.73.73.73.73.73.73.73.73.73.73.73	MAKE/MODEL PONTIAC G6	VIN 1G2ZF55B6 64	LICENSE	31988		T6556 J
GREEN38 06	R EXP PROMISED PO NO	BATE PAY	MENT INV. DATE	R.D. OPENED	4 0 H 24779	To A
27MAR06	17:00 28SEP07		SH [28SEP2007 1	0:00	100
OPTIONS: STK:26247 DLR:15516 ENG:L	E5 TRN:MXO	<u> </u>	The state of the s		5	1
# A DT WP4	DESCRIPTIONS/INSTRUCTIONS CUSTOMER STATES HE HAS A HOWL FRONT AND IT VIBRATES RIDV Front When Bew-	y resy- read	LIGHT by OSSEM HE		# # WANTY	NO W
	RM RF wholkerm	7		•	oder Con	E N
# B DT CC	Struks chechantak	•.				On the
# C TR Q CC	tale in tre- cont And sail in tre- Phys	see nail on in	tread may have	to Parch	tives cly	oped on sig
# D DT 8 CC	CUSTOMER STATES THE VEHICLE S 55 MPH. CAN FEEL IT WHEN LETT IT SHIMMES LEFT AND RIGHT NOT Front thes use and dock	SHIMME WHEN DRIVING	G 40 TO PEDAL, ムケナル ので	hopped-25	were - Indi	of Latation?
	Rotated Ins					· · · · ·
	7	5. 72270	6425	Malo		
	TERMS: STRICTLY CASH UNLESS ASRANGEMENTS MADE Intereby authorize the repair work to be done along with materials. You and your employees may operate velicite testing, inspection or delivery at my risk. An express mechan acknowledged on well-de to secure the amount of repairs the behalf responsible for loss or demage to vehicle or articles case of tire, their, or any other cause beyond your control.	th the necessary AUTHORIZED. THI for purposes of WILL NOT EXCES lic's lien is hereby rets, You will not 1. I request an est	INDICATE YOUR ESTIMATE SELECTION	PERMISSION YOUR	This vehicle red	
Markquart MOTORS BUICK-PONTIAC-GMC-CADILLAC-OLDSMOBILE		rd:Cherge AGREEMENT.		эхоева \$	Shop Representation VEHICLE REPARATE BY CHA	IIVE SIgnature IR PRACTICES ARE PTER ATCP 132, DMINISTERED BY
321 Y. Prointe View Rd.	CUSTO SECURIOR ALL PARTS INSTALLED ARE NEW OR FACTORY REBUILT UNLESS SPECIFIED OTHERWISE.	NAME X	DATE TIME A(O, CALLED) AM PM	_ <u></u> ''	MOTOR VEHICLE REPA REGULATED BY CHA MISADM. CODE, A RIS. EDIREAU ROTECTION, WISCO ROTECTION, P.O. BO. WISCONSIN 53703-89	
	DISCLAIMER OF WARRANTIES: The dealer is not a party to a THE DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRAWITH RESPECT TO ANY PARTS, LABOR OR D'AGNOST CONSCOUENTIAL DAMAGES, DAMAGES TO PROPERTY, O ENTITLED TO INSPECT OR RECEIVE ANY COMPONENTS, P.	TIC SERVICES FURNISHED UNDER	THIS ORDER, BUYER SHALL NOT	MERCHANTABILITY OR HE ENTITLED TO RECOV DME, OR ANY OTHER INC	FITHESS FOR A PART JER FROM THE SELU EDENTAL DAMAGES, I	ICULAR PURPOSE NG DEALER ANY NOTICE: YOU ARE

Page 1 of 2

Invoice #: 143278

Tag #: **T6844**

Customer #: 52954



BUTOK - PONTIAC - GMC - CADILLAC - OLDSMOBILE

321 W. Prairie View Rd. • Chippewa Ealls, WI 54729

EAU CLAIRÉ, WI HOME BUS:

CELL:

Service

EMAIL:			Advisor: 10	O CHRIS VALL	-	Phone 715.726.1261 +		
COLOR	YEAR	MAKEYMÖDEL	MIN		THEFTISE	MILEAGE IN		
GREEN38	06	PONTIAC G6	1G2ZF55B664			29604	296	
DEC DATE	PROD DATE	WARR EXP. PROMISED I	O NO. RATE	PAYMENT	INV. DATE	H,O. OPENED	**************************************)YY
27MAR06		17:00 09AUG07		CASH	13AUG07	10:20 09AUG07	1 5:50_13	3AUGU/
OPTIONS: STK:20	5247 DER: 15516 ENC	HIEG TRINIMXO				LIOT	NET	TOTAL
,				THE MOINE CONTRACT	UO EDONA TUE DI C	LIST	1461	TOTAL
		1 15863480 MOT	N, BLOWER A/C R&R O VP4 OR KIT	•	AG FROM THE BLO	WER MOTOR.		(N/C) (N/C) (N/C)
-		1 22737139 F-BL	OWER KI FC: 6C		• • •			(147 ~)
F	ile	B OWNER REPORTS A SHAKE FE WHEN SLIGHTLY TURNING AN CAUSE: ROTORS OUT OF ROUN HOO42 PADS, DISC BRAKE I	ID ON THE BRAKE, CH D	ECK AND ADVISE			LSO IS FELT	
Co	opy	125 \ H0043 PADS, DISC BRAKE I	VP4	_	Ď.	unk You UG 1 5 2007 A	· • * * * * • • • •	(N/C) (N/C)
		C OWNER REQUESTS THE PASS MISC REPLACED RIGHT REA	REAR TAIL LIGHT BE I R TAIL LAMP.	OROERED AND REI	PLACED.	VISA_ D		38,50
		141 (1 15242808 LAN	CCB IP			84.84	84.84	84.84
		**************************************	-	-			******** / ITHOUT	*****
		1	CCB					0,00
		SUBL SUBLET	* .					110.00
		E OWNER REPORTS THE EXTER	**************************************	S REAR DOOR IS F		1688)	****
		DISCLAIMER OF WARRANTIES: The dealer is not a Manufacturer's warranty on garts or service contained	herein. THE	ERVICE DEPÅRTMENT OPEN	:00 <u></u>	OR AMOUNT TS AMOUNT		

DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE WITH RESPECT TO AMY PARTS, LABOR OR DIAGNOSTIC SERVICES FURNISHED UNDER THIS ORDER, BUYER SHALL NOT BE ENTITLED TO RECOVER FROM THE SELLING DEALER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS, OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES. NOTICE: YOU

ARE ENTITLED TO INSPECT OR RECEIVE ANY COMPONENTS, PARTS, OR ACCESSORIES REPLACED OR REMOVED BY THE SHOP.

OPEN MONDAY - FRIDAY 7:30 AM TO 5:30 PM CALL [715] 726-9230 WE ACCEPT







PARTS AMOUNT GAS, OIL, LUBE SUBLET AMOUNT MISC. CHARGES TOTAL CHARGES LESS INSURANCE SALES TAX PLEASE PAY THIS AMOUNT

CUSTON

Coupight 2001 ADF, Inc. XISI2.260

MADISON, WISCONSIN 53703-0911.

MOTOR VEHICLE REPAIR PRACTICES ARE REQULATED MOTOR VEHILLE REPAIR AIRCRESS ARE REGULATED BY CHAPTER ATCP 132. WIS-ADM. CODE, ADMINISTERED BY THE BURSAU OF CONSUMER PROTECTION, WISCOMSN DEPT. OF AGRICULTURE, TRADE AND CONSUMEN PROTECTION, P.O. EOX B911,

WORKORDER

Page 1 of 2

RO: 143278

TAG:

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ررS;		Oc _r		SERVICE ADVISOR	: 100 VALL,CHI	
COLOR	YEAR	MAKEMI		4007EEEDG 6 /		29604
GREEN38	06	PONTIAC (1G2ZF55B6 64	YMENET INV. DATE	
DEL DATE	PROD DA	MINES AND	PROMISED POING	9	CASH	09AUG2007 10:20
27MAR06	· 	17:	00 09AUG07		SASFI	00/1042007 10/20
OPTIONS: STK:	26247 DLR:	15516 ENG:LE5 TRN:MX0	. <u>.</u>	·		
		-		-		

MISC

MISC

D MISC

LINE OF CODE

TYPE

CUSTOMER X

OWNER REPORTS A SHAKE FELT IN THE VEH WHEN STOPPING/SLOWING DOWN FROM HIGHWAY SPEED. ALSO IS FELT WHEN SLIGHTLY TURNING AND ON THE BRAKE. CHECK AND ADVISE ADVISE

ADVISE

AT Brokes products

rem brokes pulsate

rem brokes pulsate

OWNER REQUESTS THE PASS REAR TAIL LIGHT BE ORDERED AND REPLACED. (DAMAGEP)

ADDITIONAL WO

DESCRIPTIONS/INSTRUCTIONS
OWNER REPORTS INTERMITTENTLY THERE IS A HUMM NOISE
COMMING FROM THE BLOWER MOTOR.

OWNER REQUESTS THE PDR TECH INSPECT DAMAGE TO PASS REAR AND REPAIR AS BEST REPAINTING POSSIBLE WITHOUT ga wat

FT .011 :009 WARRANTY PARTS RETURNED ech #

Date



BUICK - PONTIAC - GMC - CADILLAC - OLDSMOBILE

32] Y. Prairie View Rd. . Chippewa Falls, WI 54729 Pliona 715.726.1261 • Tell-Tree 1.800.427.1261

ERMS: STRICTLY CASH UNLESS ARRANGEMENTS MADE	Y
become sembraize the renair work to be done along with the necessary i	Α
iologicle. You and your employees may neerally vehicle lot curposes of	17
sction. Increation or delivery at my risk. An express mechanic's earlis hereay.	15
cknowledged on velocia to secure the amount of repairs thereto. You will not	ı
e held responsible for loss or damage to vehicle or articles left in vehicle in	1
ase of fire, thete, or any other couse beyond your control.	1
Do you want the replaced parts you are entitled to ? Yes No	2

Do you want the replaced p	xarts you are	entitled to ? 🛄	Yes 🔲 Na
Payment will be made by:	Cash	Credit Cord	Charge

I ACKNOWLEDGE RECEIPT OF A COPY OF THIS	AGREEMENT.
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THE REPORT MADE AND ADDRESS OF EACT	SOV
ALL PARTS INSTALLED ARE NEW OR FACT	JIII -
REBUILT UNLESS SPECIFIED OTHERWISE	
THE DOTE TO THE TOTAL TO	

YOU ARE ENTITIED TO A PRICE ESTIMATE FOR THE REPAIRS YOU HAVE AUTHORIZED. THE REPAIR PRICE MAY BE LESS THAN THE ESTIMATE, BUT MILL NOT EXCEED THE ESTIMATE WITHOUT YOUR PERMISSION. YOUR SIGNATURE WILL INDICATE YOUR ESTIMATE SELECTION.

motor nover Blown metar Blown Kit Du 8/9/0

l request an	estinate in writing	bafora y	cu begin repairs	. · X_

repairs, but call me before continuing if the price will exceed \$	
x	

3. Taa nat warit s	III estiklate.	^		
RK AUTHORIZED BY:	DATE -	TIME	NO. CALLED	NEW TOTAL ESTIMATE
i	[

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hon.	Rente	sentat	ive :	Signa	ture	

This vehicle received without face to face customer contact.

MOTOR VEHICLE REMAR PRACTICES ARE REGULATED BY CHAPYER ATCP 132, WIS-ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONS'N DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 63708-8911.

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invoice #: 139264 *INVOICE*

Tag #:

Customer #:



BHICK - PONTIAC - GMC - CADILLAC - OLDSMOBILE

321 W. Paniria View Rd. . Chippena Folls, Fil. 54729 Phone 715 726 1261 A Tall-free 1,800,427,1261

EAU CLAIRE, WI HOME:

BUS:

:CFLL:

Page 1. of 1

Service

Advisor: 100 CHRIS VALL

EMAIL:					r materia constitutados	TO VIGOTI TE	*****************		FENSE	MILFAGE IN	MILEA	GE OUT
COLOR	YEAR	MAK	(E/MODEL			23888888284CJIN	***********	20032000 2003	OCCUPANT OF THE PROPERTY OF TH	19921	10	9921
GREEN38	06	PON	TIAC G6		1G2ZF	55 <u>8664</u>	I SOOM BOANDANE	(196 22288888	SOUTH TO SANTESSOUL	H O OPENED	i rė	ADY
DEL DATE	PRODUDATE	WARR EXP.	PROMISED		ONO	halbii	ANNUAL PROPERTY.	<u> </u>	4.455007	09:21 08FEB07	11:08	14FEB07
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OPTIONS: STK,26	247 DLR 15516 E	NG:LE5 TRN:MX0						() () (() (() () () () () (() () () () (LIST	NET	TOTAL

CUSTOMER STATES THE REMOTE START WILL TURN ENGINE OVER BUT NOT START, NOT ALL THE TIME. CAUSE: STARTED EVERYTIME

J9991 CUSTOMER CONCERN NOT DUPLICATED

.112 WP4

CUSTOMER STATES THERE IS A CLUNKING NOISE ALL THE TIME WHEN GOING OVER BUMPS. LUBED CALIPER PINS AND

NOISE NEVER WENT AWAY CAUSE: STRUT BAD E3851 STRUT, FRONT LEFT REPLACE

> 112 WP4 22716368 W-ABSORBER FC: 4X

CUSTOMER STATES THE VEHICLE GET 23-25 ON HWY DRIVING ALL THE TIME.

MISC NORMAL

112 IPS

1 DAY CAR RENTAL

CAUSE: RENTAL

27901 1 DAY CAR RENTAL

112 WP4

E** CUSTOMER STATES THER IS A CLUNK IN LEFT FRONT

CAUSE: FAILUR EIN MOUNT E3921 MOUNT ASSEMBLY, FRONT STRUT BEARING LEFT REPLACE

112 WP4

15836873 MOUNT FC: 4X

(N/C) (N/C)

0.00

(N/C)

(N/C)

(N/C)

(N/C)

(N/C)

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SERVICE DEPARTMENT OPEN

MONDAY - FRIDAY 7:30 AM TO 5:30 PM CALL 1715) 726-9230 WE ACCEPT







LABOR AMOUNT	888	0.00
PARTS AMOUNT		0.00
GAS, OIL, LUBE		0.00
SUBLET AMOUNT		0.00
MISC, CHARGES		0.00
TOTAL CHARGES		0.00
LESS INSURANCE	S	0.00
SALES TAX		0.00
PLEASE PAY THIS AMOUNT		0.00

CUSTON

Capplight 2004 ACP, Inc., 1-XHSIZ 250

MADISON, WISCONSIN 53700-8911.

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED

BY CHAPTER ATCP 132, WIS.-ADM. CODE,

ADMINISTERED BY THE BUREAU OF CONSUMER

PROTECTION, WISCONSIN DEPT, OF AGRICULTURE,

TRADE AND CONSUMER PROTECTION, P.O. BOX 8911.

-JUREMONT A AIDE MI

WORKORDER

Page 1 of 1

RO: 139264

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TAG:	
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claire, Wi			-			LICENSE:	
HOME:			APRIMOT	«Въщеов» — 400	UALI CHDIC		
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LINE OP CODE # A MISC	тесн. түре /Э мр4	DESCRIPTIONS/INSTRUCTICUSTOMER STATES THE REBUT NOT START. NOT ALL	אורידה פייהספיי הדוו.	TURN ENGINE OVI	ER	et e	
		Startes as per all 2-13-7- started for	ist try out	u design.	-2-14-7 -	etiti OK	
# B MISC	. I Tato a	വാവനവാനെ മനിന്ന്മ സമ്യവം	TO: A COSTINIZATION NO	ITEM ATT. WHIR THE	MK 777 477 - 4	7 - IIII / 77	per lufation
		Rt-Reard charl	mist - mot	atted Chassis nt orriva -	IND THE	LFS	3 OFFICE OF
# c MISC	12 WP4	WHEN GOING OVER BUMPS. NEVER WENT AWAY LT-Leard chink Mobil Corning from I motivel CUSTOMER STATES THE VE ALL THE TIME.	HICLE GET 23-25	gone ON HWY DRIVING			78/01
∮ ;		Coldant Rom	el .			\$ ***	PARTE SETURNEL
# D Z7901	WP4	1 DAY CAR RENTAL				/>	139264
E3921 .1		•			•	M	Pate 2-13-7
		TERMS: STRICTLY CASH UNLESS ARRANGEN. I. kareby, authorize the repair work to be directerials. You and your employees may or testing, inspection or delivery at my risk. An evaluation of the control of	one along with the accessory in perate vehicle for purposes of the spress mechanic's lien is bereton and species thereto. You will not	MILL NOT EXCEED THE EST SIGNATURE WILL INDICATE YO	IICE MAY BE LESS THAN IIMATE WITHOUT YOUR OUR ESTIMATE SELECTION	PERMISSION, YOUR	This wehigle received without face to face customer contact.
		be held responsible for loss or damage to wah case of fire, their, or any other cause beyond y	icle or articles left in vehicle in our control.	1. I request au estimaté în writ	ng beford you begin rapairs	X	
Ma Ma	rkauart	Do you want the replaced parts you are e		2. Please proceed with			
V	MOTORS	Payment will be made by: Cash		repairs, but call me before co	onlinuing if the price will ex	S	nop Representative Signature

сизтомен X 323 V). Prainie View Rd. 🔸 Chippewa Falls, Wi 54729 NO. CALLED ADDITIONAL WORK AUTHORIZED BY: TIME Phone 715.726.1261 + Toll-Iree F:800.427,1261 ALL PARTS INSTALLED ARE NEW OR FACTORY REBUILT UNLESS SPECIFIED OTHERWISE.

LACKNOWLEDGE RECEIPT OF A COPY OF THIS AGREEMENT.

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BUICK - PONTIAC - GALC - CADILLAC - OLDSMOBILE

EAU CLAIRE, WI

HOME

INVOICE

BUS:

Invoice #: 137470

Tag #:

Page 1 of 1

Customer #: 52954

CELL:

Service



BUICK - PONTIAC - GMC - CADILLAC - OLDSMOBILE

321 W. Pratife View Rd. Chippewa Folls, WI 59729 Phone 715,726,1261 Toll-Tree 1,800,427,1261

EMAIL:			Advisor: 10	O CHRIS VALL		Pliane 715,726,1261 🛊 1	
COLOR	YEAR	MAKE/MODEL	VIN		LICENSE	MILEAGE IN	MILEAGE OUT
GREEN38	06	PONTIAC G6	1G2ZF55B664			15000	15000
DEL DATE	PROD. DATE	WARR, EXP PROMISED	PO NO. RATE	PAYWENT	INVERTEE:	R.O. OPENED	READY
27MAR06		17:00 06NOV06		CASH	07NOV06	<u> 10:22 06NOV06 </u>	08:32_07NOV06
OPTIONS: STK:26	247 DLR:15516	ENGLES TRIVINXO					
- 1					*	LIST	NET TOTAL

CUSTOMER STATES THE LEFT FRONT DOOR MAKES A CLUNKING NOISE WHEN OPENING AND CLOSING CAUSE: DOOR LINK NOT TIGHTENED PROPERLY.

B4051 LINK OR SPRING, FRONT DOOR HOLD OPEN LEFT REPLACE

CUSTOMER STATES THERE IS A CLUNKING NOISE COMING FROM THE LEFT FRONT UNDERSIDE OF VEHICLE CALISE: LUBED CALIPER PINS

10031 PM AND/OR BOOT, CALIPER MOUNTING FRONT LEFT REPLACE

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SERVICE DEPARTMENT OPEN MONDAY - FRIDAY 7:30 AM TO 5:30 PM

CALL (715) 726-9230 WE ACCEPT







LABOR AMOUNT		0.00
PARTS AMOUNT		0.00
GAS, OIL, LUBE		0.00
SUBLET AMOUNT		0.00
MISC, CHARGES		0.00
TOTAL CHARGES	A	0.00
LESS INSURANCE		0.00
SALES TAX		0.00
PLEASE PAY THIS AMOUNT		0.00

CUSTO

MOTOR VEHICLE REPAIR PRACTICES AND RESIDENTED BY CHAPTER: ATCP 132. WIS-ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION. WISCOUSIN DEPT. OF ABBICULTURE,

TRADE AND CONSUMER PROTECTION, P.O. BOX 8911;

WORKORDER

needs 1315 estimate

Page 1 of 1

RO: 137470

TAG:

LICENSE:

BUS:	-	e)	SER	VICE ADVISOR:	100 VA	LL,CHRIS	
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GREEN38	06 F	PONTIAC G6	1G2Z	F55B6 64		1560CK	2019
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OPTIONS: STK:26247 DLR:15516 ENG:LE5 TRN:MX0

LINE OF CODE

,α€. WI

DESCRIPTIONS/INSTRUCTIONS

CUSTOMER STATES THE LEFT FRONT DOOR MAKES A CLUNKING NOISE WHEN OPENING AND CLOSING

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MISC

CUSTOMER STATES THERE IS A CLUNKING NOISE COMING FROM THE LEFT FRONT UNDERSIDE OF VEHICLE

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BUICK - PONTIAC - GMC - CADILLAC - OLDSMOBILE

321 W. Praine View Rd. . Chinneyo Folks WI 54729 Phone 715,726,1261 • Inline: 1,800,427,1261

TERMS: STRICTLY CASH UNLESS ARRANGEMENTS MADE	YOU ARE ENTITLED TO A PRICE ESTIMATE FOR THE REPAIRS YOU HAVE
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materials. You and your omployees may operate vehicle for purposes of l	WILL NOT EXCEED THE ESTIMATE WITHOUT YOUR PERMISSION. YOUR
testing, Inspection or delivery at my risk. An express mechanic's lien is hereby [SIGNATURE WILL INDICATE YOUR ESTIMATE SELECTION.
acknowledged on vehicle to secure the amount of repairs thereto. You will not	• • •
be he'd responsible for lass or damage to vehicle or articles left in vehicle in	1. 1 reruest an estimate in writing before you begin repairs. X
case of fire, theft, or any other cause beyond your control.	
Do you want the rootaged parts you are entitled to 7 Yes	2. Please proceed with

					_
Do you want the replaced p	arts you are	entitled to ?	Yes	No	
Service and Hills Serviced a bide	Conh	Coods t	Card [Charma	

I ACKNOWLEDGE RECEIPT OF A COPY O	IC THIS ACCRECAMENT
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CUSTOMER X

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ADDITIONAL W	OUK AUTHOAIZED BY:	DATE	TIME	ND. CALLED	NEW TOTAL

ropoles, but call me before continuing if the price will exceed

. !	Shop Representative S	ignatute	
٠	MOTOR VEHICLE REPAIR PRA	CTICES A	П
	WIS, ADM, CODE, ADMINI	STERED	B.
_	THE BUREAU OF	CONSUM	ΙĘ

This vehicle received without

face to face customer contact.

PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911

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INVOICE

CELL:

Invoice #: 134076

Tag # Customer # Markquart MÕTORS

RIJICK - PONTIAC - GMC - CADILLAC - GLOSMOBILE

321 W. Proirie View Rd. • Chippewa Folls, WL 54729 Phone 715,726,1261 • Tell-free 1,800,427,1261

Page 1 of 1

Service

Advisor: .	2 KELLY	MUELLER

COLOR	VFAR.	MAKE/MODEL		VIN		LICENSE	MILEAGEIN	MILEAUEUUE
ADEELIOO	20	DONTIAGOG	10	17755B664			4956	4956
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27MAR06		17:00 05JUN06	: ·	1 1	CASH	06JUN06	_07:54 05JUN06	11:09 06JUN06
OPTIONS STR:20	247 DLR: 15516 El	NG:LE5 TRN:MXO					(OT	NET TOTAL
					5 N		LIST	
		A SUSTONER STATES TH	E OAD IMOULD N	OT CULIT OFF	THE ENGINE M	IAS BOCKING AN	D ALL KIND OF NOISES	S AND AFTER

File Copy

CUSTOMER STATES THE CAR WOULD NOT SHUT OFF, THE ENGINE WAS ROCKIN ABOUT 15MIN. IT SHUT OFF BUT HE HAS BURNT WIRES AND IT SMELLS LIKE IT WAS ON CAUSE: STARTER BURNED UP INTERNALLY

J4640 MOTOR ASSEMBLY, STARTER REPLACE

WP4 103

89017756 W-STRTR REM

15319477 FUSE FC: 6C

103 WP4

CAUSE: RENTAL 27903 3 DAY CAR RENTAL

TOW IN

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C** 3 DAY CAR RENTAL

103

54, 11 Smells of Dire

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SERVICE DEPARTMENT OPEN MONDAY - FRIDAY 7:30 AM TO 5:30 PM

CALL (715) 726-9230 WE ACCEPT







PARTS AMOUNT		
GAS, OIL, LUBE		
SUBLET AMOUNT		
MISC. CHARGES		
TOTAL CHARGES		
LESS INSURANCE	S	
SALES TAX		

LABOR AMOUNT

PLEASE PAY THIS AMOUNT 0.00 0.00 0.00 0.00 0.000.00

(N/C)

(N/C)

(N/C)

(N/C)

0.00

0.00

THANK YOU!

X35/2,270 1

MOTOR VEHICLE HEPATH PRACTICES ARE REGULATED

BY CHAPTER ATCP 132, W/S,-ADM. CODE,

ADMINISTERED BY THE BUREAU OF CONSUMER

PROTECTION, WISCONSIN DEPT. OF AGRICULTURE,

TRADE AND CONSUMER PROTECTION, P.O. DOX B911,

afte. Wi

WORKORDER

Page 1 of 1

RO: 134076

TAG:

LICENSE:

BUS:				SE	RVICE ADV	ISOR: 2 M(JELLER,KELI	LY	
COLOR	YEAR	MAKI	EMODEL		VIN		LICENSE	MILEAGE IN/OUT	TAG
GREEN38	06	PONTIA	C G6	1G2	ZF55B6 6 4			4956	T501
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27MAR06			17:00 05JUN06			CASH		05JUN2006 07:54	·

OPTIONS: STK:26247 DLR:15516 ENG:LES TRN:MX0

LINE OP CODE TECH.

DESCRIPTIONS/INSTRUCTIONS CUSTOMER STATES THE CAR WOULD NOT SHUT OFF, THE ENGINE WAS ROCKING AND ALL KIND OF NOISES AND AFTER ABOUT 15MIN. IT SHUT OFF BUT HE HAS BURNT WIRES AND IT SMELLS LIKE IT WAS ON

8976525 Miks Kiger

WARRANTY PARTS RETURNE

Date

сиятемен X Кижител

Markquart MOTORS

BUICK - PONTIAC - GMC - CADIELAC - OLDSMOBILE

321 W. Prairie View Rd. . Chippewa Falls, WI 54729 Phone 715.726.1261 . Toll-free 1.800.427.1261

Do you want the replaced parts you are entitled to ? 🔲 Yes 📈 🕅 Payment will be made by: Cash Credit Card Chorne

I ACKNOWLEDGE RECEIPT OF A COPY OF THIS AGREEMENT.

ALL PARTS	INSTALLED	ARE NEW	OR FACTORY
REBUILT	UNLESS SP	ECIFIED OT	THERWISE.

	S. Ling Mot Maint !	an escliciato.	•
ADDITIONAL WO	ORK AUTHORIZED BY:	DATE	

NEW TOTAL ESTIMATE NO. CALLED

YOU ARE ENTITLED TO A PRICE ESTIMATE FOR THE REPAIRS YOU HAVE AUTHORIZED. THE REPAIR PRICE MAY BE LESS THAN THE ESTIMATE, BUT WILL NOT EXCEED THE ESTIMATE WITHOUT YOUR PERMISSION, YOUR SIGNATURE WILL INDICATE YOUR ESTIMATE SELECTION.

1. I request an estimate in writing before you begin repairs.

repairs, but call me before confinuing if the price will exceed

This vehicle received without face to face customer contact.

Shop Representative Signature

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATC? 132, WIS.ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN COPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.D. BOX 3811, MADISON. WISCONSIN 53708-8911.

DISCLAIMEN OF WARRANTIES: The dealer is not a porty to any Manufacturer's warranty on parts or service contained levelin.

THE DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE WITH RESPECT TO ANY PARTS, LABOR OR DIAGNOSTIC SERVICES FURNISHED UNDER THIS ORDER, BUYER SHALL NOT HE ENTITLED TO RECOVER FROM THE SELLING DEALER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROPERS, OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES, NOTICE: YOU ARE ENTITLED TO INSPECT OR RECEIVE ANY COMPONENTS, PARTS, OR ACCESSORIES REPLACED OR REMOVED BY THE SHOP. HOME

EMAIL:

EAU CLAIRE, WI

INVOICE

DUPLICATE 1

Page 1 of 1

CELL:

Invoice #: 146315

Tag #

Customer

Service

Advisor: 100 CHRIS VALL



BUICK - PONTFAC - GMC - CADILLAC - OLDSMOBILE

321 W. Peolrie View Rd. • Chippewo Folls, VVI 54729 Phone 715.726.1361 • Toll Tree 1,800.427.1261

· · · · · · · · · · · · · · · · · · ·	TOTION TOO OINING VALL	
COLOR YEAR MAKEMODEL	VIN LICENSE	MILEAGE IN MILEAGE OUT
GREEN38 06 PONTIAC G6	1G2ZF55B664	
DEL DATE PRODIDATE WARRIEXP PROMISED P	DNO. RATE PAYMENT DATE	35741 35741
	CASH 28DEC07	. 00.00 00DECO2 44.00 00DECO2
OPTIONS: STK:26247 DER:15516 ENG:LES TRN:MXO		09:03 26DEC07 14:38 28DEC07
		LIST NET TOTAL

CUSTOMER STATES THERE IS STILL A CLUNK IN BOTH SIDES IN FRONT OVER BUMPS. CAN HEAR IT BACKING OUT OF Α DRIVEWAY EVEN. WORSE WHEN COLD. CAN HEAR IT ALL THE TIME THOUGH CAUSE: INSTALLED I-SHAFT AND EXTRA PADDING AROUND COOLANT RESIVOIR E7700 SHAFT, STEERING INTERMEDIATE REPLACE

> 103 WP4 22687711 SHAFT KIT FC: 4X

(N/C) (N/C)

File Copy

2 DAY CAR RENTAL CAUSE: RENTAL

Z7901 1 DAY CAR RENTAL

(N/C)

DISCLAIMER OF WARRANTIES: The dealer is not a party to any Monufacturer's warrenty on parts or service contained herein. THE. DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARHANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE WITH RESPECT TO ANY PARTS, LABOR OR DIAGNOSTIC SERVICES FURNISHED UNDER THIS ORDER, BUYER SHALL NOT BE ENTITLED TO RECOVER FROM THE SELLING DEALER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS, OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES, NOTICE: YOU ARE ENTETLED TO INSPECT OR RECEIVE ANY COMPONENTS, PARTS, OR ACCESSORIES REPLACED OR REMOVED BY THE SHOP

SERVICE DEPARTMENT OPEN

MONDAY - FRIDAY 7:30 AM TO 5:30 PM CALL [715] 726-9230

WE ACCEPT







LABOR AMOUNT	_ 🔛	0.00
PARTS AMOUNT		0.00
GAS, OIL, LUBE		0.00
SUBLET AMOUNT	Ţ.	0.00
MISC. CHARGES	Ť	0.00
TOTAL CHARGES	A	0.00
LESS INSURANCE	S	0.00
SALES TAX		0.00
PLEASE PAY		

THIS AMOUNT

CUSTOM

MAXSON, WISCONSIN 53708-8911.

XX512.270_1

MOTOR VOICE, REPAIR PRACTICES ARE REGULATED

BY CHAPTER ATCP 132, WIS-ADM, CODE, ADMINISTERED BY THE DUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE,

THADE AND CONSUMER PROTECTION, P.D. BOX 0911,

THANK YOU!

Page 1 of 1

LICENSE:

HOME			ARBUGAE ADMICADI	100 VALL, CHRIS	•	
BUS:			SERVICE ADVISOR:	INCHASE	MILEAGE INJOUT	TAG
COLOR	YEAR	MAKEAMODEL	V N		35741	
GREEN38	06	PONTIAC G6	1G2ZF55B6 64	34 T 333 (61) 63 65 16 195	E D. OPENED	READY
	PROD DATE	WARR EXP. PROMISED	PO NO BATE TO SERVICE STATES	OLD	26DEC2007 09:03	· ·
27MAR06		17:00 27DEC07	CA	SH	200102007 00.00	
27141711100					·	

OPTIONS: STK:26247 DLR:15516 ENG:LE5 TRN:MX0

FINE OF CODE # A MISČ

TYPE WP4

DESCRIPTIONS/INSTRUCTIONS CUSTOMER STATES THERE IS STILL A CLUNK IN BOTH SIDES IN FRONT OVER BUMPS. CAN HEAR IT BACKING OUT OF

WHEN COLD. CAN HEAR IT ALL

27902

146315

Rec'd by YOU ARE ENTITLED TO A PRICE ESTIMATE FOR THE REPAIRS YOU HAVE AUTHORIZED. THE REPAIR PRICE MAY BE LESS THAN THE ASTIMATE, BUT WILL NOT EXCEED THE ESTIMATE WITHOUT YOUR JESTIMSSION, YOUR

Date 122707

MOTORS

BUICK - PONTIAC - CRAC - CADILLAC - OLDSMOBILE

32F VI. Projitie Visw Rd. + Chippewa Folls; WT 54729 Pecone 735,726,1261 - Toll-Irie 1,600,427,1261

TERMS: STRICTLY CASH UNLESS ARRANGEMENTS MADE LEMMS: STRICTLY CASH-UNLESS ARRANGEMENTS MADE.

1-hereby "Buthonize the repair work to be done along with the necessary meterials. You, and your employees may operate vehicle for purposes of testing, inspection or delivery at my risk, An express mechanic's lien is hereby acknowledged on vehicle to secure the amount of repairs thereto. You will not be held responsible for lass or damage to vehicle or orticles left in vehicle in

e of fire, their, or any other cause beyond your control.	
: Do you want the replaced parts you are entitled to 7 🛄 Yes 🛄]
Payment will be made by: Cash. Credit Card. C	;ł

I ACKNOWLEDGE RECEIPT OF A COPY OF THIS AGREEMENT.

CUSTOMES X

ALL PARTS INSTA	ALLED ARE NEW	OR FACTORY	ŀ
REBUILT UNLE			ŀ

I do not want an estimale. ароглома, уурак айтнойдер вү:

repairs, but call me before continuing if the price will exceed \$

HEN TOTAL ESTIMATE HO. CALLED.

Shop Representative Signature

This vehicle received without

face to face customer contact.

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS.AOM. CODE, ADM:MISTERED BY THE BUREAU OF CONSUMER. PROTECTION, WISCONSIN DEPT. OF AGRICULTURE; TRADE AND CONSUMER PROTECTION, P.O. BOX 3911; MADISON, WISCONSIN BAZONSUMER PROTECTION, P.O. BOX 3911; MADISON, WISCONSIN BAZONS. 9911 WISCONSIN 53708-8911.

DISCLAIMER OF WARRANTIES: The dealer is not a party to any Moratschare's warranty on paris of service contained herein.

THE DEALER HEREBY: EXPRESSLY DISCRAIMS: ALL WARRANTIES, EXPRESS OR HIMPLED; INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABULTY OR FITNESS FOR A PARTICULAR PURPOSE.

THE DEALER HEREBY: EXPRESSLY DISCRAIMS: ALL WARRANTIES, EXPRESS OR HIMPLED; INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABULTY OR FITNESS FOR A PARTICULAR PURPOSE.

WITH RESPECTIVED: ANY PARTS, DABOR OR DIAGNOSTID SERVICES FOR INDEX. FOR SERVICES FOR THIS FOR SERVICES VALUE DEGREE 17 TO THAT THAT SPEADUR OF THAT HOW SHOT SERVICES FURNISHED UNDER THIS GROUP, BUTTER SHARE BUTTER SHARE BUTTER SHARE BUTTER THE SECOND PROPERTY DAMAGES NOTICE: YOU ARE CONSCIUNTIAL DAMAGES TO PROPERTY; DAMAGES FOR LOSS OF TIME, LOSS OF TROFFTS, OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES. NOTICE: YOU ARE ENTITIED TO INSPECT OR RECEIVE ANY COMPONENTS; PARTS, OR ACCESSORIES REPLACED OR REMOVED BY THE SHOP













GENERAL MOTORS BUSINESS RESOURCE CENTER

VIA FAX ONLY

January 9, 2008

Rick Robinson, Service Manager MARKQUART MOTORS, INC. 321 W PRAIRIE VIEW RD CHIPPEWA FALLS, WI 54729

Fax # 715-726-9229

Re:

Siebel Request: 71-591122075

2006 Pontiac G6

VIN # 1G2ZF55B664

Dear Mr. Robinson:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).
- Please ensure that all Social Security information is blacked out prior to sending this information

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Cathy Paquette

Cathy Paquette BRC Customer Relationship Specialist Ph#1-866-790-5700 ext 21725 FAX# 866-842-9444

Overallowance/Negative Equity/Incentives Form (Non-Florida)

This form may be used to identify possible Overallowance or Negative Equity and to determine any customer incentives which were paid but may not be easily identifiable on a Bill of Sale.

You must determine the TRUE purchase price of a vehicle and identify any Overallowance, Negative Equity, and/or Incentives prior to arbitration or voluntary repurchase.

Section 1

Purchase Price	19086.25
(from Bill of Sale, before tax, tag, title, etc.)	
MSRP	- 20140.00
(from BARS Invoice screen)	
Subtract the MSRP from the Purchase Price	= -1053.75
(If positive, look for Overallowance)	

If the Purchase Price is greater than the MSRP but there was no trade-in, have the Dealer explain why the customer paid more than MSRP.

Section 2

••••	
Trade Allowance	0.00
(from Bill of Sale)	
Actual Cash Value (ACV)	- 0.00
(from ACV Statement)	
Subtract the ACV from the Trade Allowance	= 0.00
If positive, the Trade Allowance is higher than the ACV of the trade-in. This is Overallowance.	

Section 3

Trade Allowance	0.00
(from Bill of Sale)	
Payoff on Trade	- 0.00
(from Bill of Sale)	
Subtract the Payoff on Trade from the Trade Allowance	= 0.00
If negative, the Payoff on the Trade is higher that the Trade Allowance. This is Negative Equity.	

Section 4

Purchase Price	19086.25
(from Bill of Sale, before tax, tag, title, etc.)	
Incentives not included in the Purchase Price	- 0.00
(from BARS and Incentive Acknowledgement sheet)	
Do not include fuel-fill credit or Dealer incentives. GM Card points must be included.	
Overallowance/Negative Equity	- 0.00
(use the Overallowance from Section 2 or the Negative Equity from Section 3, whichever is larger)	
Subtract the Incentives and the Overallowance/Negative Equity from the Purchase	= 19086.25
Price. This is the Actual price of the vehicle that should be presented to the BBB on	
the Agreement to Arbitrate (ATA).	

If Overallowance/Negative Equity and/or Incentives (not included in Purchase Price) are found, verify with Team Lead before submitting information to BBB.

Privileged and Confidential Information

CASE ASSESSMENT

By: Cathy Paquette State: WI

	ame:			Service	Request: 71-591122075	BBB Case No.: PGM0830542
Vehicle ID N	lo.: 1G2Z	F55B664	Dat	Service te: 28/2006	Vehicle is: New	BAC Code: 117455
•		2006 Pontiac B Filing 3600			Vehicle Purchased Used	d on: N/A at odometer {odometer}
Lien holder: DVM Name:	GMAC Mike Mar] Other□:	{Name}		Sale Type: Purchase CAM Name: Rob Johns Phone Number: 630-	
			VEH	IICLE REF	PAIR HISTORY	
Throughout	the entire	form, use ar	n asterisk (*	') if day(s) o	ut of service are already c	ounted in another category.
		IN THE BOX OR THE COM			ERN BASED ON REPAIR C	ORDERS. USE "N/A" IF THERE
☐ <u>Power</u>	<u>Steering</u>	Gear				
Date:	RO #:	Days Out:	Mileage:	<u>Description</u>	of Complaint and Repair	Performed:
☐ <u>Strut a</u>	nd Poari					
Date:	RO #:	ng Days Out:	Mileage:	Description	of Complaint and Repair	Performed:
			Mileage:	Description	of Complaint and Repair	Performed:
	RO #:		Mileage:	Description	of Complaint and Repair	Performed:
<u>Date:</u>	RO #:		Mileage:		of Complaint and Repair	
Date: ☐ Remote	RO #: e Start RO #:	Days Out:				
<u>Date:</u> ☐ <u>Remote</u> <u>Date:</u>	RO #: e Start RO #:	Days Out:		Description		Performed:
Date: Remote Date: Front D Date: Caliper	RO #: e Start RO #: Door RO #:	Days Out: Days Out: Days Out:	Mileage:	<u>Description</u>	of Complaint and Repair of Complaint and Repair	Performed: Performed:
Date: Remote Date: Front D Date:	RO #: e Start RO #: Ooor RO #:	Days Out:	Mileage:	<u>Description</u>	of Complaint and Repair	Performed: Performed:

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repai	ir Performed:	
	<u></u>					
☐ <u>Blower</u>	<u>Motor</u>					
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair	ir Performed:	
☐ <u>Moldin</u>	<u>g</u>					
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair	ir Performed:	
☐ <u>Starter</u>						
Date:	RO #:	Days Out:	<u>Mileage:</u>	Description of Complaint and Repair	ir Performed:	
☐ <u>Tie Ro</u>		D 01		D ::: 10 1:: 15		
<u>Date:</u>	RO #:	Days Out:	Mileage:	Description of Complaint and Repair	ir Pertormed:	
☐ Susper	nsion - R	<u>attle</u>				
Date:	RO #: Campaig	<u>Days Out</u> : n (Not Rela	Mileage: ated to Ot	Description of Complaint and Repair her Symptoms/Complaints)	ir Performed:	
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repa	ir Performed:	
☐ <u>Other</u>						
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair	ir Performed:	
THE STATE LEMON LAW READS:						
Days out of service: 30 Days Repairs 4 Time period 12 months / 12,000 miles Does Lemon Law state nonconformity must continue to exist? y						
If applicable, safety-related repairs {# of repair attempts} Safety-related time period {# of months} / {# of miles}						
Number of repair attempts in the presumption period: Total days out of service during the presumption period: Total days out of service during customer's ownership: # of repair attempts # of Days # of Days						

Vehicle Meets Presumption of Lemon Law YES or NO

PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

RECOMMENDATION AND RATIONALE

Reminder: Take into consideration 1) DVM/Svc Manager input 2) if there are any unrepaired defects, and 3) are the problems alone or cumulatively a "substantial impairment" of the vehicle's use, value or safety.

{TEXT}

CRS FINAL OFFER:	{REPAIR/REP/TRADE}:	DATE: {Date}	CUST {Accepted / Declined}	
Goodwill: {Type}		Attorney Fees (if applicable): \${Amount}		

TEAM LEAD APPROVING:	{Name}	Date: {Date}
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Page 2/2

;;

7

PAGE 2/2 * RCVD AT 1/21/08 2:03:11 PM	Eactorn Ctandard Time *	* 01/D-ADTIV ADEAHCOT/4 *	: DNIC+000600 * CCID+746 607 04	14 * DUDATION (mm column 22)
FAGE DE ROYDAL DEDUG 2.03.11 FIN	Eastern Stanuaru Tillej	SYK.OFTINAKEQUESTIT	DMI9:300007 "C9ID:1 13 331 71	1 1 " DOKATION (IIIIII-55),01-32

		•					
200	G6 - 4CYL SEDAN EMERALD GREEN METALLIC		PONTIAC/G	MC DIVISI	ON		
38T	EMERALD GREEN METALLIC	/L4G	GENERAL MO	OTORS COR	PORATION		
							•
ORDI	ER NO. JGPBR7/TRESTOCK NO.		DETRONT	MI 4	6243-1114		
VIŃ	1G2 ZF55 B6 64	•	VEHICLE II	NVOIÇE 2A	D52033048		_
***	ER NO. JGPBR7/TRE STOCK NO. 1G2 ZF55 B6 64	****	****	*****	16*15522S		•
MODI	EL & FACTORY OPTIONS 59 G6 - 4CYL SEDAN 1	MSR₽	TMV VMT	RETAIL -	STOCK		•
2ZF	59 G6 - 4CYL SEDAN 11	BB 65. 00	17450.13	INVOICE	08/09/05		5
AP3	REMOTE VEHICLE STARTER SYSTEM	150,00	124.50	SHIPPED	08/09/05	-:	
EAD	SIMULATED WALNUT BURL ACCENTS	N/C	ii/C	EXP I/T	08/23/05		
ŁĖ 9	50-STATE EMISSIONS	. N/C	N/C	INT COM	08/23/05		
FX2	50-STATE EMISSIONS AXLE RATIO 3.91. CRUISE CONTROL, ELECTRONIC ENGINE, 2.4L HO 4-CYL DOEC MFI	N/C	· N/C	PRC EFF	08/09/05		
K34	CRUISE CONTROL, ELECTRONIC	N/C	N/C	KEYS XXX	XX XXXXXX XXX		
LE5	ENGINE, 2.4L HO 4-CYL DOHC MFI	N/C	11/C	WFP-F QT	R OPT-1		
MIK 0	AUTOMATIC TRANSMISSION DRIVER'S PACKAGE INCLUDES:	0.00	0.00	BANK: GM	AC - 007		
PCI			539.50	CHG-TO	15-522		
	* PWR ADJ BRAKE & ACCEL. PEDALS					•	
	* FLOOR MATS, CARPET * CARGO NET * (4) 16" PAINTED ALLOY WHEELS			SHIP WI:			•
	* CARGO NET		• • • • • • • • • • • • • • • • • • • •	HP:	19.3		
-	* (4) 16" PAINTED ALLOY WHEELS			GMS:	18120.68		
				SUPPLR:	18932.74	•	
R6.7	CUSTOMER DIALOG NETWORK	0_00	16:50	MRM:	20290 - 09	0.1	7 0
VK3	LICENSE PLATE BRACKET, FRONT	N/C	¥Τ/C	MEMO .	909-75	y c	-
lsz	DRIVER PACKAGE DISCOUNT	150.00-	124.50-				

19,422

19180

26247

TUTAL

20140.00 19021.43 PAY 310 19021.43

MEMO: TOTAL LESS HOLDBACK AND

APPROX WHOLESALE FINANCE CREDIT

18153.00

INVOICE DOES NOT REFLECT DEALER'S ULTIMATE COST BECAUSE OF MANUFACTURER REBATES, ALLOWANCES, INCENTIVES, HOLDBACK, FINANCE CREDIT AND RETURN TO DEALER OF ADVERTISING MONIES, ALL OF WHICH MAY APPLY TO VEHICLE.

THIS MOTOR VEHICLE IS SUBJECT TO A SECURITY INTEREST HELD BY GMAC.

WHITE BEAR LAKE SUPERSTORE

REMIT TO GMAC NO. 007 VIN 1G2ZF55B664

ð.q

987404486

Jan 14 08 02:18p OnLine 2000

Research

Case scan indicates .

SR # 1-426072308 Starter caught fire but satisfied with dealership

SR# 71-565893382 Dealer agreed to provide a GMPP or Motor Club to cust

SR# 71-575098437 Provided a GMPP for customer

Previous Goodwill GMPP 36/45,000 Major Guard with a \$100.00 deductable

GMVIS shows: 3 calls to roadside, one could not dupliate, one strut, one strut mounting assembly, one ling or spring, one pin or boot and caliper and one starter motor assembly

Extended Service Contracts: 36/45,000 major guard (goodwill gesture from CAC)

Open Recalls: None found at this time

Servicing DLR: Marquart Motors Inc

Selling Dealership: Marquart Motors Inc

VIN: 1G2ZF55B664

VIN Scan: No other SR's Found at this time, open or closed

Cathy Paquette/ADR/Chatham/21725

Sent By: Osseo Automotive Center; 7	, 15 597 2111;	Jan-15-	08 16:50:	Page 3/3
%THSDCS \$1804512120519NAODLRACO 2008 MALIBU 1LS 76U GOLDEN PEWTER METALLIC 83B TITANIUM ORDER NO. MMTG5Z/TRE STOCK N VIN 1G1 ZG57 B4 84	7PRT /L4G NO.	GENERAL M & SUBSIDI RENAISSAN DETROIT VEHICLE I	OTORS COR ARIES CE CENTER MI 4 NVOICE 1A	PORATION 8243-1114 D1548495* ******
MODEL & FACTORY OPTIONS 1ZG69 MALIBU 1LS B37 FLOOR MATS B86 BODY COLOR BODYSIDE MOLDINGS FE9 50-STATE EMISSIONS K05 ENGINE BLOCK HEATER LE5 ENGINE, 2.4L DOHC MFI ************************************	19345.00 80.00 150.00 N/C 75.00 N/C	INV AMT 18281.03 66.40 124.50 N/C 62.25 N/C	RETAIL - INVOICE SHIPPED EXP I/T INT COM PRC EFF KEYS GOO WFP-S QT BANK: GM CHG-TO	12/11/07 12/06/07 12/18/07 12/18/07 12/05/07 12/05/07 98 G0098 R OPT-1 AC - 007
**************************************	0.00	0.00	HP: GMS: SUPPLR: MRM:	3345 19.3 18744.68 19581.44 20300.00 832.50
		7'	861 C - 1 261 C +	* 331,
TOTAL MODEL & OPTIONS DESTINATION CHARGE LAM GROUP CONTRIBUTION	19 6 50.00 650.00		ACT 231 H/B 261 EXP 65A	589.50
TOTAL MEMO: TOTAL LESS HOLDBACK AND APPROX WHOLESALE FINANCE CR ************************************	EDIT ********* ULTIMATE CO HOLDBACK, FI OF WHICH MA	**************************************	********* E OF MANU DIT AND RI D VEHICLE	******* FACTURER ETURN TO
NELS GUNDERSON CHEVROLET, INC. PAGE 3/3 * RCVD AT 1/15/08 4:07:33 PM [Eastern Standard Time] * SVR:0PT	VIN \$ 1 DUE	TT TO GMAC 1G1ZG57B48 19282.43 IN 12/18/07	84: NV 1AD17: DEALER	18-045

PAGE 3/3 * RCVD AT 1/15/08 4:07:33 PM [Eastern Standard Time] * SVR:OPTIKAREQUEST/2 * DNIS:908602 * CSID:715 597 2111 * DURATION (mm-ss):01-08













GENERAL MOTORS BUSINESS RESOURCE CENTER

VIA FAX ONLY

January 9, 2008

Rick Robinson, Service Manager MARKQUART MOTORS, INC. 321 W PRAIRIE VIEW RD CHIPPEWA FALLS, WI 54729

Fax # 715-726-9229

Re:

Siebel Request: 71-591122075

2006 Pontiac G6

VIN # 1G2ZF55B664

Dear Mr. Robinson:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).
- Please ensure that all Social Security information is blacked out prior to sending this information

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Cathy Paquette

Cathy Paquette BRC Customer Relationship Specialist Ph#1-866-790-5700 ext 21725 FAX# 866-842-9444 Revised 8/02/2007

Privileged and Confidential Information

CASE ASSESSMENT

By: Cathy Paquette State: WI

Customer Name:	Service I	Request: 71-591122075	BBB Case No.: PGM0830542
Vehicle ID No.: 1G2ZF55B664	In Service Date: 3/28/2006	Vehicle is: New	BAC Code: 117455
Year, Make & Model: 2006 Pontiac G6 Mileage at Time of BBB Filing 36000		Vehicle Purchased Used	d on: N/A at odometer {odometer}
Lien holder: GMAC Other: {Name} DVM Name: Mike Manzo Phone/Cell Number: 952-913-5499	}	Sale Type: Purchase [CAM Name: Rob Johnson Phone Number: 630-6	

VEHICLE REPAIR HISTORY

Throughout the entire form, use an asterisk (*) if day(s) out of service are already counted in another category.

PLACE A CHECKMARK IN THE BOX FOR THE MAJOR CONCERN BASED ON REPAIR ORDERS. USE "N/A" IF THERE WERE NO REPAIRS FOR THE COMPONENT GROUP.

x Power Steering Gear

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
12/28/07	146315	3	35741	Customer states there is a clunk in both sides in front over bumps. Can hear it backing out of driveway even worse when cold. Can hear it all the time though. Caused: Installed I shaft and extra padding around coolant reservoir. E7700 shaft, steering intermediate replace.

x <u>Strut ar</u>	x Strut and Bearing					
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:		
01/14/07	139264	*	19921	Customer states there is a clunk in left front. Failure in mount. Mount assembly, front strut bearing left replace.		
09/28/07	144421	*	31988	Customer states, check struts. Struts OK.		
x Remote Start						
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:		
01/14/07	139264	7	19921	Customer states the remote start will turn engine over but will not start. Not all the time. Cause: Started every time. Customers concern not duplicated		
x <u>Front D</u>	<u>oor</u>					
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:		

<u>Date:</u> <u>RO #:</u> <u>Days Out:</u> <u>Mileage:</u> <u>Description of Complaint and Repair Permits 11/06/06 137470 2 1500 Customer states the left front door make</u>

Customer states the left front door makes a clunking noise when opening and closing. Door link not tightened properly. Link or spring, front door hold open left replace

x Caliper M	ounts
-------------	-------

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
11/06/06	137470	*	1500	Customer states there is a clunking noise coming from the left front underside of vehicle. Cause: lubed caliper pins. Pin and or boot, caliper mounting front left replace
01/14/07	139264	*	19921	Customer states there is a clunking noise all the time when going over bumps. Lubed caliper pins and noise never went away. Bad strut. Replaced left front strut.

x Hub Bearing

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
09/28/07	144421	1	31988	Customer states he has a howling noise in the front right and it vibrates. Found failure in RF hub bearing replaced hub, tests OK. Bearing and hub assembly front wheel right replace

x Blower Motor

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
08/09/07	143278	5	143278	Customer states there is a humming noise coming from the blower motor. Failure in motor. Motor and /or fan, blower A/C R&R or replace.

x Molding

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
08/09/07	143278	*	143278	Customer states the exterior trim on the passenger rear door is pulling away from the body.

x Starter

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
06/05/06	134076	1	4956	Customer states the car would no shut off, the engine was rocking and all kinds of noises and after about 15 minutes it shut off but he has burnt wires and it smells like it was on fire. Starter burned up internally. Motor assembly, starter replace.

x <u>Tie Rod Ends</u>

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
12/05/07	145892	2	34976	Customer states there in the front when going over bumps. Rod end loose. Tie rod end and or adjuster sleeve left replace.

x Radiator - Rattle

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:	
12/05/07	145892	*	34976	Customer states the radiator rattles. Needed padding. Install foam and 2 sided tape behind cool, reservoir.	

☐ Recall/Campaign (Not Related to Other Symptoms/Complaints)

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
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x Fuel Mileage

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
01/14/07	139264	*	19921	Customer states the vehicle gets 23-25 on highway driving all the time. Normal.
x <u>Brakes</u>				
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
08/09/07	143278	*	143278	Customer states a shake felt in the vehicle when stopping / slowing down from highway speed. Also felt when slightly turning and on the brake. Rotors out of round. Pads. Disc brakes front R&R or replace. Pads. Disc brakes rear R&R or replace.

x Tail Lamp

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
08/09/07	143278	*	143278	Customer requests the passenger rear tail light be ordered and replaced.

X DAMAGE

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
08/09/07	143278	*	143278	Customer requests the PDR Tech inspect damage to passenger rear and repair as best as possible without repainting. Misc Sublet to dent wizard for PDR on right ¼ as best as possible and touch up.

x Tire

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
09/28/07 09/28/07	144421 144421	*	31988 31988	Customer states tire is leaking air. Found nail in left front – plugged tire Customer states the vehicle shimmes when driving 40 to 55 mph. Can feel it when letting off the accelerator pedal. It shimmes left and right not up and down. Rotate tires. (Front tires worn out, rotated to back, left front tire is choppy, needs tires soon, front and rear struts are fine.

THE STATE LEMON LAW READS:

Days out of service: 30 Days

Repairs 4

Time period 12 months / 12,000 miles

Does Lemon Law state nonconformity must continue to exist? y

If applicable, safety-related repairs {# of repair attempts} Safety-related time period {# of months} / {# of miles}

Number of repair attempts in the presumption period: 3

Total days out of service during the presumption period: 10

Total days out of service during customer's ownership: 21

Vehicle Meets Presumption of Lemon NO

PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

RECOMMENDATION AND RATIONALE

Reminder: Take into consideration 1) DVM/Svc Manager input 2) if there are any unrepaired defects, and 3) are the problems alone or cumulatively a "substantial impairment" of the vehicle's use, value or safety.

Customer did not have 4 repairs inside 12/12 and as such, does not appear to meet presumption for WI Lemon Law. The case was filed outside 12/12 and as such does not appear to be eligible for program summary. DVM offered the customer a trade and he accepted. The DVM submitted the EPRA. RVDC case # 145096.

CRS FINAL OFFER:	{REPAIR/REP/TRADE}:	DATE: {Date}	CUST {Accepted / Declined}
Goodwill: {Type}		Attorney Fees (if appli	cable): \${Amount}

Т	EAM LEAD APPROVING:	{Name}	Date: {Date}	

ADR File Checklist

SR Number:71-591122075 Customer: Make/Model/Year: 2006/Pontiac /G6 36,000	BBB Case: PGM0830542 VIN:1G2ZF55B664 In Service: 3/28/2006	6 Mileage :
Received Date: 01/08/08 Day 15 D	ate: 01/22/08 Goes Acti	
Primary Concern: Steering gear, strut	<u> </u>	· -
mounts, hub bearing, blower motor, mou	iding, starter, tie rod ends, r	attie in frot end.
Case Scan / Acknowledgement (24 hrs	S) Completion Date/Time:	
☐ Initial Calls (72 hrs): ☐ Customer ☐ Dealer Svc Mgr ☐ Dealer Finance Mgr ☐ AVM	Completion Date/Time: Completion Date/Time: Completion Date/Time: Completion Date/Time:	/ / /
☐ Repair Orders Requested:	Received:	
☐ Sales Documents:	Received:	
☐ BARS / Finance Sheet		
☐ Case Assessment (by Day 14): Lemon Law Eligible: Presumption:	Yes	
☐ GM Position – Customer / BBB Due l	Date (7-10 days):	
☐ Settlement / Goodwill Offered Date:		
All Documents Attached (by Day 15)		
☐ Arbitration Date:		
☐ Closing Activities: Settlement Executive Summary Close Siebel	Completion Date/Time: Completion Date/Time: Completion Date/Time:	/ / /
DVM: Mike Manzo Service Dealer: Marquart Motors Inc Selling Dealer: Marquart Motors Inc	Node/Box: 630092 Svc Mgr: Contact:	8052
NOTES:		





Case Number: 145096

Originator Name: Michael Manzo 952-913-5499 mike.1.manzo@gm.com

01/14/2008 **Created Date:**

Vehicle Info

1G2ZF55B664 *VIN:

20140.0 10057495 MSRP: *TAC #: 2006 Year: Pontiac G6 Make: Model:

Vehicle Comments & TAC Explanation: 2/28/2007 13:46:19 SBD Template - RATCLIFF

*Date Reviewed with Customer: 01/14/2008 *Repurchase Mileage: 36000 03/27/2006 * Original Purchase Condition: New Original Purchase Date:

Vehicle Owner(s)

Entity Type Joint Owners

* Names(s) on Title: * Primary Owner:

* Address

* City * Day Phone: * E-mail:

Eau Claire

* Title State: WI

* Secondary Owner: Edward L Broome

WI * ZIP Code: * State * Home Phone: * Cell Phone:

Dealer Name: MARKQUART MOTORS, INC.

(715) 726-9229

1152

Account #:

* Fax Phone:

* Company: Wells Fargo

Repurchase

* Reason Front end noises from suspension components

UCC Codes

UCC 1 UCC 2 UCC 3 UCC 4 UCC 5

f1508

Vehicle Lien Holder

Type of Secured Interest: Standard Lien

Contact or Attention:

Address

City State WI ZIP Code: Day Phone: 800 559 3557 Fax: E-mail:

Original Selling Dealer

* Dealer #: 117455

Region: 50

(715) 726-1261 * Phone:

* Contact Name: Rick Robinson * Contact Title:Service Manager rrobinson@markqu.. E-Mail:

District:

Fax:

Repurchasing Dealer:

Dealer Name: NELS GUNDERSON CHEVROLET, INC. * Dealer #: 132665

Region: 50 District: 1651

(715) 597-3180 * Phone: (715) 597-2111 Fax:

* Contact Name: **Dennis Best** * Contact Title Sales Manager E-Mail:

Repair

* Contact Name: **Dennis Best** * Contact Title:Sales Manager

Vehicle Location:

* Dealer #: 132665 Dealer Name: NELS GUNDERSON CHE..

1651 Region: 50 District:

(715) 597-3180 * Phone: (715) 597-2111 Fax:

* Contact Name: **Dennis Best** * Contact Titleales Manager E-Mail:

January 17, 2008 Page 1 of 2





Case Number: 145096

Originator Name: Michael Manzo 952-913-5499 mike.1.manzo@gm.com

Created Date: 01/14/2008

Transaction

Details:

Siebel Request #: 71-591122075

State:

Source: **AVM Voluntary** Replacement VIN: 1G1ZG57B484

Compliance Date:

20300.0 MSRP:

* Disposition:Auction

* Type: Trade - New Finance

Year: 2008 Make: Chevrolet Model: Malibu

Compliance Type: N/A

Order #:

Repurchase:

Customer to pay \$.10 mile on 36000 miles. Customer to pay tax, title and license. Customer to pay difference in MSRP.

Disposition:

Repair noise(s) in front suspension and send vehicle to auction. Thanks

* Processing Instructions:

* Processing Instructions:

Transaction Details

<u>Group</u>	Responsible	<u>Formula</u>	Additional Explanation	<u>Value</u>
Usage	Customer	\$.10 per mile on	\$.10 mile on 36000 miles	3600.0
Sales Tax	Customer	NA .	Sales Tax	0
State/Gov Fees	Customer	NA	Fees	0
Upgrade Amount	Does Not Apply	NA	No Aftermarket Items	0
Negative Equity	Customer	NA	Negative Equity	0
Over Allowance Amount	Customer	NA	Over Allowance	0
				0

January 17, 2008 Page 2 of 2

Privileged and Confidential Information

CASE ASSESSMENT

By: Cathy Paquette State: WI

Customer Name:	Service	Request: 71-591122075	BBB Case No.: PGM0830542
Vehicle ID No.: 1G2ZF55B664	In Service Date: 3/28/2006	Vehicle is: New	BAC Code: 117455
Year, Make & Model: 2006 Pontiac G6 Mileage at Time of BBB Filing 36000		Vehicle Purchased Used	d on: N/A at odometer {odometer}
Lien holder: GMAC Other: {Name DVM Name: Mike Manzo Phone/Cell Number: 952-913-5499	}	Sale Type: Purchase [CAM Name: Rob Johns Phone Number: 630-	

VEHICLE REPAIR HISTORY

Throughout the entire form, use an asterisk (*) if day(s) out of service are already counted in another category.

PLACE A CHECKMARK IN THE BOX FOR THE MAJOR CONCERN BASED ON REPAIR ORDERS. USE "N/A" IF THERE WERE NO REPAIRS FOR THE COMPONENT GROUP.

x Power Steering Gear

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
12/28/07	146315	3	35741	Customer states there is a clunk in both sides in front over bumps. Can hear it backing out of driveway even worse when cold. Can hear it all the time though. Caused: Installed I shaft and extra padding around coolant reservoir. E7700 shaft, steering intermediate replace.

x <u>Strut aı</u>	nd Bearin	<u>ıg</u>				
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:		
01/14/07	139264	*	19921	Customer states there is a clunk in left front. Failure in mount. Mount assembly, front strut bearing left replace.		
09/28/07	144421	*	31988	Customer states, check struts. Struts OK.		
x Remote Start						
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:		
01/14/07	139264	7	19921	Customer states the remote start will turn engine over but will not start. Not all the time. Cause: Started every time. Customers concern not duplicated		
x <u>Front Door</u>						
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:		

<u>Date:</u>	<u>RO #:</u>	Days Out:	<u>Mileage:</u>	Description of Complaint and Repair Performed:
11/06/06	137470	2	1500	Customer states the left front door makes a clunking noise when opening and closing. Door link not tightened properly. Link or spring, front door hold open left replace

x Caliper M	ounts
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Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
11/06/06	137470	*	1500	Customer states there is a clunking noise coming from the left front underside of vehicle. Cause: lubed caliper pins. Pin and or boot, caliper mounting front left replace
01/14/07	139264	*	19921	Customer states there is a clunking noise all the time when going over bumps. Lubed caliper pins and noise never went away. Bad strut. Replaced left front strut.

x Hub Bearing

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
09/28/07	144421	1	31988	Customer states he has a howling noise in the front right and it vibrates. Found failure in RF hub bearing replaced hub, tests OK. Bearing and hub assembly front wheel right replace

x Blower Motor

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
08/09/07	143278	5	143278	Customer states there is a humming noise coming from the blower motor. Failure in motor. Motor and /or fan, blower A/C R&R or replace.

x Molding

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
08/09/07	143278	*	143278	Customer states the exterior trim on the passenger rear door is pulling away from the body.

x Starter

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>
06/05/06	134076	1	4956	Customer states the car would no shut off, the engine was rocking and all kinds of noises and after about 15 minutes it shut off but he has burnt wires and it smells like it was on fire. Starter burned up internally. Motor assembly, starter replace.

x <u>Tie Rod Ends</u>

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
12/05/07	145892	2	34976	Customer states there in the front when going over bumps. Rod end loose. Tie rod end and or adjuster sleeve left replace.

x Radiator - Rattle

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>					
12/05/07	145892	*	34976	Customer states the radiator rattles. Needed padding. Install foam and 2 sided tape behind cool, reservoir.					

☐ Recall/Campaign (Not Related to Other Symptoms/Complaints)

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
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x Fuel Mileage

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:		
01/14/07	139264	*	19921	Customer states the vehicle gets 23-25 on highway driving all the time. Normal.		
x <u>Brakes</u>	<u>S</u>					
Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:		
08/09/07	143278	*	143278	Customer states a shake felt in the vehicle when stopping / slowing down from highway speed. Also felt when slightly turning and on the brake. Rotors out of round. Pads. Disc brakes front R&R or replace. Pads. Disc brakes rear R&R or replace.		

x Tail Lamp

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
08/09/07	143278	*	143278	Customer requests the passenger rear tail light be ordered and replaced.

X DAMAGE

Date:	RO #:	Days Out:	Mileage:	<u>Description of Complaint and Repair Performed:</u>		
08/09/07	143278	*	143278	Customer requests the PDR Tech inspect damage to passenger rear and repair as best as possible without repainting. Misc Sublet to dent wizard for PDR on right ¼ as best as possible and touch up.		

x Tire

Date:	<u>RO #:</u>	Days Out:	<u>Mileage:</u>	Description of Complaint and Repair Performed:
09/28/07 09/28/07	144421 144421	*	31988 31988	Customer states tire is leaking air. Found nail in left front – plugged tire Customer states the vehicle shimmes when driving 40 to 55 mph. Can feel it when letting off the accelerator pedal. It shimmes left and right not up and down. Rotate tires. (Front tires worn out, rotated to back, left front tire is choppy, needs tires soon, front and rear struts are fine.

THE STATE LEMON LAW READS:

Days out of service: 30 Days

Repairs 4

Time period 12 months / 12,000 miles

Does Lemon Law state nonconformity must continue to exist? y

If applicable, safety-related repairs {# of repair attempts} Safety-related time period {# of months} / {# of miles}

Number of repair attempts in the presumption period: 3

Total days out of service during the presumption period: 10

Total days out of service during customer's ownership: 21

Vehicle Meets Presumption of Lemon NO

PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

RECOMMENDATION AND RATIONALE

Reminder: Take into consideration 1) DVM/Svc Manager input 2) if there are any unrepaired defects, and 3) are the problems alone or cumulatively a "substantial impairment" of the vehicle's use, value or safety.

Customer did not have 4 repairs inside 12/12 and as such, does not appear to meet presumption for WI Lemon Law. The case was filed outside 12/12 and as such does not appear to be eligible for program summary. DVM offered the customer a trade and he accepted. The DVM submitted the EPRA. RVDC case # 145096.

CRS FINAL OFFER: {REPAIR/REP/TRADE}:		DATE: {Date}	CUST {Accepted / Declined}		
Goodwill: {Type}		Attorney Fees (if applicable): \${Amount}			

TEAM LEAD APPROVING:	{Name}	Date: {Date}

STANDARD TRADE REPURCHASE WORKSHEET

<u>File Number</u> 71-591122075 <u>Old Vehicle VIN:</u>

Customer Name

Worksheet filled out by:
Tracy Ehrlinger
Date:

1G2ZF55B664

New Vehicle VIN: 1G1ZG57B484

January 17, 2008

TRADE REPURCHASE				
	¢40 505 60	G	19504 69 50	
Replacement Veh.Cost (231/237)	\$18,535.68	E	18594.68-59=	
Conversion / Upfit Cost State Sales Tax	\$0.00 \$0.00	N		
Additional Tax	\$0.00	E		
Reg./Lic./Title Fees (opt)	\$0.00	R		
Taxes Reimbursed on old vehicle	\$0.00	Α		
Doc fee	\$59.00	L	Doc fee taxed	
State Fees	\$0.00	М		
Items below not shown on new Bill of		0		
Cost to transfer Aftermarket Items	\$0.00	Т		
Unused portion of non-GMPP	\$0.00	0		
H/B, ADV, EXP	\$0.00	R		
Transportation Fees	\$0.00	S		
Misc. (Explain)	\$0.00	\perp		
Total Replacement Price	\$18,594.68			
State Sales Tax	\$210.05	_		
Additional Tax	\$0.00			
Reg./Lic./Title Fees (opt)	\$93.00	С		
New Aftermarket Items	\$0.00	U		
Fees (Explain)	\$0.00	S		
State Fees	\$0.00	Т		
Items below contibute to trade-in allo	owance	0		
Usage/Depreciation	\$3,600.00	М		
Damage	\$0.00	Е		
MSRP Upgrade	\$160.00	R		
MSRP Downgrade (deducted)	\$0.00			
Reimb. of Aft. Mkts on Old Unit	\$0.00			
Misc. Customer Credit	\$0.00			
Less Dealer Contribution to Cust	\$0.00			
-	A 4.000.05			
Total Customer Cost	\$4,063.05			
Trade Repurchase Amount	\$14,834.68			
Trade Reparendes Ameur	ψ14,004.00			
Attorney Fees	\$0.00			
Total Repurchase Amount	\$14,834.68			
Less Dealer Contribution to GM	\$0.00			
(30-day) Lien Payoff	\$11,895.56			
Good Through (02-14-08)				
Dealer Due to CM	NIA			
Dealer Due to GM	NA			a .
GM Due to Dealer	\$2,939.12		Authorized Signature	Date
NADA (Legal Only)	\$0.00		**This is a "work in process" unt	til approved
Est. Auction Price (Legal Only)	\$0.00		by a Authorized Representative*	
Projected (Loss)	-\$14,834.68		(Repurchase Group Only)	
i rojecteu (E033)	-ψ i τ ,υυ τ .υυ		(Nopulcilase Gloup Gilly)	F D 44/44/000=
				Form Rev 11/11/2005

BILL OF SALE	
Purchase Price (New Unit)	\$18,535.68
State Sales Tax	\$210.05
Additional Tax	\$0.00
Reg./Lic./Title Fees (opt)	\$93.00
New Aftermarket Items	\$0.00
State Fees	\$0.00
Fees	\$59.00
Less Dealer Contribution to Cust	\$0.00
Subtotal	\$18,897.73
Trade-In Allowance	\$14,775.68
Loan Payoff	\$11,895.56
Net Allowance	\$2,880.12
Cash on Delivery (Paid by GM)	\$59.00
Total Balance Due	\$15,958.61
Amount to Dealer for additional Fees	\$0.00
New Vehicle VIN: 1G1ZG57B484	
Form Rev 11/11/2005	



January 21, 2008

NELS GUNDERSON CHEVROLET, INC. Dennis Best 12721 NORWAY RD OSSEO, WI 54758

Dealer Confirmation Letter - Trade

Subject: Trade Redurchase

Customer:

Vehicle: 2006 Pontiac G6

VIN: 1G2ZF55B664

Ref SR:71-591122075 V-145096

Dear Dennis Best:

Thank you for assisting General Motors in the trade repurchase transaction for our mutual customer.

General Motors will issue a check in the amount of \$2,939.12 to NELS GUNDERSON CHEVROLET. INC.. Once all of the final repurchase paperwork has been sent back to the Reacquired Vehicle Disclosure Center (RVDC), General Motors will issue a check in the amount of \$11,895.56 to Wells Fargo Auto Finance.

When writing the sales agreement for the trade repurchase, please use the numbers below:

Replacement VIN:

1G1ZG57B484

New Vehicle Sales Price:

\$18,535,68 \$14,775.68

Used Vehicle Trade Value:

\$3,760.00

Trade Difference:

\$210.05

Taxes:

\$93.00

Reg/Lic/Title Fees:

Cash Paid on Delivery

\$59.00

Document Fees:

\$59.00

Dealer Processing Fee:

\$ 200.00 (Warranty Credit on your Account)

No cash back rebates or incentives of any kind are applicable towards this transaction.

*If shown above, Cash Paid on Delivery is included in the check to the dealership.

If you are in agreement with this offer, please sign and date below and return both pages of this agreement along with a Dealer signed/Bill of Sale to my attention at the following fax # 866-802-6668 by Tuesday January 22/2008. If you have any questions you may reach me at 866-802-6625 ext1108.

ERSON CHEVROLET, INC. 132665 Management Agent's Signature and Title.

NELS GUNDERSON CHEVROLET, INC. 132665 Management Agent's Printed Name and Title.

145096











GENERAL MOTORS BUSINESS RESOURCE CENTER

VIA FAX ONLY

January 9, 2008

Rick Robinson, Service Manager MARKQUART MOTORS, INC. 321 W PRAIRIE VIEW RD CHIPPEWA FALLS, WI 54729

Fax # 715-726-9229

Re:

Siebel Request: 71-591122075

2006 Poptiac G6

VIN # 1G22F55B664

Dear Mr. Robinson:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide mc with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).
- Please ensure that all Social Security information is blacked out prior to sending this information

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Cathy Paquette

Cathy Paquette **BRC** Customer Relationship Specialist Ph#1-866-790-5700 ext 21725 FAX# 866-842-9444

> General Motors Corp. - CARS - Logal, c/o MSX International, MC 336-105-000 1426 Pacific Drive, Auburn Hills, MI 48326

2001

BARS Document Display

2006 G6 - 4CYL SEDAN		PONTIAC/G	MC DIVISI	ИÇ	
38U EMERALD GREEN METALLIC	/L4G	GENERAL M	OTORS COR	PORATION	
70B LICET TAUFE ORDER NO. JGPBR7/TRE STOCK NO. VIN 1G2 ZF55 B6 64		100 REMAI	ESANCE CEI	VTER	
ORDER NO. JGPBR7/TRE STOCK NO.		DETROIT	MI 4	3243-1114	
VIN 1G2 ZF55 B6 64		VEHICLE I	VOICE 2A	052033048	
***********	****	****	*****	16*155228	
MODEL & FACTORY OPTIONS	MSRP	TIMA AMIL	RETAIL -	STOCK	
2ZF69 G6 - 4CYL SEDAN 18	865.00	17450.13	INVOICE (08/09/05	
AP3 REMOTE VEHICLE STARTER SYSTEM	150.00	124.50	SHIPPED (08/09/05	•
FAD SIMULATED WALNUT BURL ACCENTS	N/C	N/C	EXP I/T	08/23/05	
FE9 50-STATE EMISSIONS	N/C	14/C	INI COM (08/23/05	
FAD SIMULATED WALNUT BURL ACCENTS FE9 50-STATE EMISSIONS FX2 AXLE RATIO 3.91 K34 CRUISE CONTROL, ELECTRONIC LE5 ENGINE, 2.4L HO 4-CYL DOHC MFI MX0 AUTOMATIC TRANSMISSION FCI DRIVER'S PACKAGE INCLUDES: * PWB ADJ BRAKE & ACCEL, PEDALS	N/C	II/C	PRC EFF (08/09/05	
K34 CRUISE CONTROL, ELECTRONIC	N/C	31/C	KEYS XXXX	XXXXX X	
LE5 ENGINE, 2.4L HO 4-CYL DOHC MFI	N/C	11√¢	WFP-F QTE	R OPT-1	
MXO AUTOMATIC TRANSMISSION	0.00	000	BANK: GMZ	AC - 007	0
PCI DRIVER'S PACKAGE INCLUDES:	650.00	539.50	CHG-TO	15-522	
* PWR ADJ BRAKE & ACCEL. PEDALS				•	
* FLOOR MATS, CARPET			SHIP WT:	3235	
* CARGO NET		•	HP:	19.3	
* (4) 16" PAINTED ALLOY WHEELS			GMS:	18120.68	
			SUPPLR:	18932.74	
* FLOOR MATS, CARPET * CARGO NET * (4) 16" PAINTED ALLOY WHEELS R6J CUSTOMER DIALOG NETWORK	0.00	16.50	MRM:	20290 - 00	0/10
ARR TICENSE PLATE BRACKET, FRONT	N/C	M/C	MEMO	900-75	8-
1SZ DRIVER PACKAGE DISCOUNT	150.00-	124 50-			

19,422 1523700 18,9997

26247

19515.00 18006.13 ACT 231 18045.68
625.00 625.00 H/E 261 585.45
LAM DEALER CONTRIBUTION 195.15 ADV 261 195.15
LAM GROUP CONTRIBUTION 195.15 EXP 65A 195.15

TOTAL 20140.00 19021.43 PAY 310 19021.43

MEMO: TOTAL LESS HOLDBACK AND

APPROX WHOLESALE FINANCE CREDIT 18153.00

INVOICE DOES NOT REFLECT DEALER'S ULTIMATE COST BECAUSE OF MANUFACTURER REBATES, ALLOWANCES, INCENTIVES, HOLDBACK, FINANCE CREDIT AND RETURN TO DEALER OF ADVERTISING MONIES, ALL OF WHICH MAY APPLY TO VEHICLE.

THIS MOTOR VEHICLE IS SUBJECT TO A SECURITY INTEREST HELD BY GMAC.

REMIT TO GMAC NO. 007 VIN 1G2ZF553664

EXPLANATION OF PERSONAL OBLIGATION

(a) You have agreed on 03/27/2006 sale or loan) in the amount	(name of cust (date of trai	omer) and <u>M</u> nsaction) for	ARKQUART MC 2Nh Pontra (OTORS, INC.	(name	of mercha:	nt) made
(b) You will be liable and f	ully responsible for p	payment of the	ne above amo	ount even th	nough you m	ay not be e	ntitled to
any of the goods, services	or loan furnished the	reunder.					· .
(c) You may be sued in a though the customer named	d above may be wor	king or have	funds to pay	the amount	due.		
(d) This explanation is not executed must be consulted	the agreement under for the exact terms	er which you of your oblig	are obligated gations.	d, and the (guaranty or a	agreement y	ou have
(e) You are entitled now, o	r at any time, to one	free copy of	any docume	nt you sign	evidencing t	his transact	ion.
(f) The undersigned acknow	vledges receipt of ar	exact copy	of this notice	. .			

2004

22813 CONSUMER W.B.A. 4338 (8)04)

MOTOR VEHICLE CONSUMER SIMPLE INTEREST INSTALLMENT SALE AND SECURITY AGREEMENT



©Wis	sconsin Bar	ikers Ass	ociation 2003	3	ЗA	LE AND SEC 1. CREDIT S					J784W	GIAL HAKITTUTIUN PA	EDDUCTS CORPOR	MITON***
Goods Sold a	and Cred	it Regu	est. I pur	chased fro	m the u	ndersigned selle	r ("Se	eller") at th	e orl	ice and on the terms of a	separate	purchase	agreer	nent.
ho following	aboon i	and J	acknowle	adaa racal	nt of th	em, in satisfac	tory (condition.	l ⊬ec	quest that the sale be fin financial terms and conditi	nanced o	n the te	rms or	tnis
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the assumpti	on that	all inst	allments w	vill be paid	when d	ue.	4,114 ,	· · · · · · · · · · · · · · · · · · ·	/					
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(f) Name and Address. My legal name is as set forth below Section 6. The address of my principal residence is as set forth below Section 6. I will not change my legal name or address without providing at least 30 days prior written notice of the change to Seller. (g) Additional Covenants. I shall observe and comply with the Additional Provisions on the reverse side and shall not permit an event of default to														
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DEALER COPY

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BBB AUTO LINE



January 8, 2008

CATHY PACQUETTE PONTIAC/GMC P O BOX 33172 DETROIT MI 48232

Re:m01 PGM0830542: vs Pontiac/GMC Division

Dear Madam/Sir:

We have recently been contacted by one of your customers with a product complaint. Enclosed is information taken during the initial phone call.

You may contact the customer to resolve the complaint directly. Once the customer returns the completed *CCF*, the case will be opened, the 40 day clock will begin and all information received for the case will be sent to you.

Thank you for your participation in the BBB AUTO LINE program.

Sincerely,

John Ryan at Extension 529

BBB AUTO LINE Customer Claim Form

Case number: PGM0830542 Contact Date: 01/08/08

Start Date:

Please make any necessary corrections to the information below, <u>print</u> or verify your VIN number and lienholder/leasing company information at the bottom of this page, and complete the missing information in Section 4 on the next page (attach additional sheets as needed).

Account Number		FIIC	,
VEHICLE INDENTIFICATI Lienholder/Leasing Comp			
Please complete the missi	ng information in the bo	ox below and on	page 2.
Replacement of this vehicle more issues than have been - dealer can not work any mitime from technical.	listed above. Currently of	case open with Ted	chnical
Description of damage: SECTION 3: DESIRED OUTC	OME (Describe what yo	u want done to r	esolve your concern)
Has the vehicle been in an accid	ent/had body damage? 🔲 y	/es ∑ no	Date of accident:
First repair attempt date: 06/06 How often is the vehicle used for business purposes (percentage)	Number o	rst repair attempt m of vehicles owned by the business:	ileage: 4956 Transmission type:
Purchase/lease date: 03/28/0		ileage at purchase/le	
Acquired as ☑ new ☐ used		the vehicle in your p	possession? 🛛 yes 🔲 no
Primary Servicing dealer/city/s		10113, 111, 111	
Name(s) that appears on the vel Selling dealer/city/state: Marq		Falls, WI, WI	
Make: Pontiac/GMC	Model: G6	Year: 2006	Current mileage: 36000
SECTION 2: VEHICLE INFO			
Fax:	E-mail address: ⁰		
Day phone:	Evening phone		Cell phone:
City: Eau Claire		State: WI	Zip code:
Mailing address:			
Titled owner:			

Case Number: PGM0830542

SECTION 4: VEHICLE PROBLEMS (List primary problem first)

Problem	Servicing dealer(s)	# of repair attempts	List the date, mileage, and days out of service for each repair attempt	Does the problem exist now?
Example:			4/23/06 3,500 miles 5 days	
A/C won't cool properly	Any Dealer, Inc.	2	6/10/07 12,700 miles 1 day	yes
Power Steering Gear - 10/22/07		1		no
Strut and Bearing, Remote Start 02/14/07		1		yes
Front Door, Caliper Mounts 11/07/06		1		no
Hub Bearing Replaced - 09/28/07		1		no
Blower Motor - 08/13/07		1		no
Moulding Came Off - 08/09/07		1		no
Starter Burned 06/06/06		1		no
Tie Rods Both Repaired		1		no
Rattle in front End		3		yes

Total days out of service for all problems:	<u> </u>
Signature of Titled Owner(s)	Date
I am submitting this dispute for resolution in the BBB AI	UTO LINE program, and I agree to arbitrate the dispute

Please mail or fax this completed form with <u>copies</u> of all available repair orders, your vehicle registration, your sales agreement or lease agreement, and any other relevant documents (e.g., written correspondence with the manufacturer, etc.) to:

BBB AUTO LINE 4200 Wilson Blvd., Suite 800 Arlington VA, 22203-1838 Fax: 703-247-9700



BBB AUTO LINE PROGRAM SUMMARY

General Motors

General Motors has agreed to arbitrate certain claims covered by the applicable state lemon law. General Motors has also agreed to arbitrate certain warranty claims not covered by the lemon law. This *Program Summary* describes the claims that may be resolved through BBB AUTO LINE.

LEMON LAW CLAIMS

A claim seeking relief under the applicable state lemon law must meet all standards set out by that law. The claim must be received by BBB AUTO LINE within the time period for filing a legal action under that law. Please see the attached description of the applicable lemon law provisions.

[Note: **Florida** claims involving GM chassis or chassis cabs in motor homes may be filed with the Florida Pilot RV Mediation and Arbitration Program, and are not eligible for BBB AUTO LINE.]

If the claim meets all standards set out by the applicable lemon law, the arbitrator will award a refund or replacement vehicle including all remedies specifically provided by that law. In some states this may include reasonable attorney's fees if they can be recovered in a state-run arbitration program or, if no state-run program exists, in court. However, an arbitrator may not award any penalties or multiple damages.

Please note:

- The award will be reduced for the customer's use of the vehicle in accordance with the applicable lemon law.
- The arbitrator may adjust the award based on damage to the vehicle exceeding normal wear and tear.
- The arbitrator will decide whether the applicable lemon law permits an adjustment to the award for any trade-in over-allowance or debt from a previous transaction.
- The award will not include any manufacturer rebate or manufacturer-sponsored credit card earnings the customer received or used as a downpayment or capitalized cost reduction.

WARRANTY CLAIMS NOT COVERED BY THE LEMON LAW

A claim that does not meet all standards of the applicable lemon law must meet certain conditions. Please see the attached description of "non-lemon law" warranty claims that may be resolved through BBB AUTO LINE.

A claim seeking **repairs** or **reimbursement** for past repairs must be received by BBB AUTO LINE before the expiration of the General Motors Bumper-to-Bumper new vehicle warranty. A claim seeking **repurchase** or **replacement** must be received by BBB AUTO LINE within one year or 12,000 miles – whichever comes first – from the date the vehicle was first put into use.

CUSTOMER RESPONSIBILITIES

At the time of the repurchase or replacement transaction, the customer's vehicle must be currently registered. The customer will be responsible for turning over the vehicle with all of the original equipment and without abnormal wear or damage evident on the vehicle. The customer will also be responsible for providing clear title to the vehicle and signing all documents necessary to effect transfer of the title, including a power of attorney for title transfer.

CLAIMS THAT WILL NOT BE ARBITRATED

- Claims involving vehicles with a non-U.S. warranty, or salvaged, "total loss" or similarly branded titled vehicles.
- Claims alleging that an airbag failed to deploy or deployed when it should not have.
- Claims covered by insurance or by warranties of other manufacturers.
- Repair or reimbursement claims that are not covered by the General Motors New Vehicle Limited Warranty but are covered by a service contract.
- Claims involving a vehicle defect if the customer alleges either as part of the BBB
 AUTO LINE claim or at any other time that the vehicle defect has caused an
 accident or fire that resulted in damage to any vehicle or damage to property.
- Claims involving a vehicle defect if the customer alleges either as part of the BBB AUTO LINE claim or at any other time – that the vehicle defect has caused bodily injury.
- Claims seeking compensation for loss of wages, personal injury, or mental anguish.
- Claims seeking damages for fraud or other violations of law, punitive damages, penalties or multiple damages.
- Claims identical to any claim that was resolved by a previous mediation or arbitration, court action, settlement, or agreement between the customer and General Motors.

OTHER IMPORTANT INFORMATION

- The customer must own or lease the vehicle throughout the entire arbitration process.
- If the customer files suit or a state administrative action against General Motors prior to the completion of the arbitration process, General Motors will not be obligated to continue with the arbitration.
- A test drive may be taken in the vehicle only if the customer has liability insurance that satisfies his/her state's minimum requirements.

The BBB will let the parties know if other restrictions apply.

WARRANTY CLAIMS NOT COVERED BY THE LEMON LAW

Time Period for Filing Claims

A claim seeking **repairs** or **reimbursement** for past repairs must be received by BBB AUTO LINE before the expiration of the General Motors Bumper-to-Bumper new vehicle warranty.

A claim seeking **repurchase** or **replacement** must be received by BBB AUTO LINE within one year or 12,000 miles – whichever comes first – from the date the vehicle was first put into use.

Eligible Claims

Claims must be based on a defect in the vehicle's material or workmanship that is covered by the General Motors New Vehicle Limited Warranty.

Eligible Vehicles

Claims may be filed for cars; light duty trucks and vans up to 10,000 pounds G.V.W.R.; and GM chassis or chassis cabs in motor homes up to 21,000 pounds G.V.W.R.

The customer's vehicle must be:

- Owned or leased in the name of an individual **or** owned or leased by a business that owns or leases no more than three vehicles;
- Purchased or leased, registered, and normally operated in the United States, Puerto Rico or U.S. Virgin Islands; and
- Covered by a United States warranty.

Remedies for Warranty Claims

The arbitrator may award the following remedies:

- Repairs.
- Reimbursement for money the customer paid to repair the vehicle.
- Repurchase of the vehicle.
- Replacement of the vehicle if it was purchased or leased new.

Repairs/Reimbursement for Repairs

The arbitrator may award repairs to, or reimbursement for money paid for the repair of, defects in material or workmanship. If repairs are awarded, the arbitrator may not order a change in the vehicle's options or its design.

Repurchase or Replacement

If a repurchase or replacement is awarded in a claim that does not meet all standards of the applicable state lemon law, the arbitrator may award up to the following remedies:

- **Owned vehicle repurchase** The actual amount paid for the vehicle. This will not include taxes, fees, and finance charges.
- **Leased vehicle repurchase** To the lessor: pay-off amount pursuant to the lease. To the lessee: any trade-in allowance/downpayment and all base monthly payments actually paid, excluding all collateral charges (e.g., taxes, fees, and finance/lease charges).
- Replacement of a vehicle purchased or leased new The customer will receive a new and substantially identical vehicle (not including modifications or additions after the vehicle's purchase/lease) from the same model year or, if one is not available, from the next model year. If a replacement vehicle from the same or next model year is not available, the customer may receive a replacement vehicle from subsequent model years but will be required to pay the difference between the Manufacturer's Suggested Retail Price (M.S.R.P.) of the current vehicle and the M.S.R.P. of the replacement vehicle.

Important: Replacement is not an available remedy if the current customer purchased or leased a **used** vehicle.

Deductions/Exclusions from a Repurchase or Replacement Award

• The repurchase or replacement award will be reduced for the customer's use of the vehicle using the following formula:

Use # miles attributable to the customer # Deduction/ = # miles attributable to the customer # Deduction/ = # miles attributable to the customer # Deduction/ = # price or gross capitalized cost

- The award may be reduced based on damage to the vehicle exceeding normal wear and tear.
- The award will not include debt from a previous transaction.
- The award will not include any manufacturer rebate or manufacturer-sponsored credit card earnings the customer received or used as a downpayment or capitalized cost reduction.

STANDARDS OF THE WISCONSIN LEMON LAW

The following is a brief explanation of most relevant provisions of the Wisconsin lemon law. The complete text of the lemon law can be found at Wisconsin Statutes § 218.0171.

VEHICLES COVERED

The Wisconsin lemon law covers any motor driven vehicle that (1) is required to be registered or is exempt from registration as a nonresident or foreign-registered vehicle, and (2) a consumer purchases or accepts transfer of in Wisconsin. This includes a demonstrator or executive vehicle, but does not include mopeds, semitrailers, or trailers designed for use in combination with a truck or truck tractor.

The lemon law does not cover previously-owned vehicles.1

CONSUMERS COVERED

The lemon law covers any of the following "consumers":

- 1. The purchaser of a new motor vehicle, if the vehicle was purchased from a dealer for purposes other than resale;
- 2. A person to whom the motor vehicle is transferred during the warranty period unless the vehicle is transferred for purposes of resale;
- 3. A person who may enforce the vehicle's warranty; and
- 4. A person who leases a motor vehicle under a written lease.

The lemon law does not cover a former lessee who purchases the vehicle at the expiration of the lease term.²

VEHICLE CONVERTERS

The lemon law applies to vehicle converters.

PROBLEMS COVERED

The lemon law covers vehicle "nonconformities." A nonconformity is defined as a condition or defect that (1) is covered by an express warranty of the manufacturer³ applicable to the motor vehicle or to a component of the motor vehicle and (2) substantially impairs the use, value or safety of a motor vehicle. A nonconformity does not include a condition or defect that is the result of abuse, neglect, or unauthorized modification or alteration of a motor vehicle by a consumer.

¹ Schey v. Chrysler Corp., 228 Wis.2d 483 (Ct. App.), review denied 228 Wis.2d 174 (1999).

² Varda v. General Motors Corp., 242 Wis.2d 756 (Ct. App.), review denied 246 Wis.2d 174 (2001).

³ *Malone v. Nissan Motor Corp.*, 190 Wis.2d 437 (Ct. App. 1994); *Bushendorf v. Freightliner Corp.*, 13 F.3d 1024 (7th Cir. 1993).

MANUFACTURER'S DUTY TO REPAIR

A nonconformity must be repaired if, before the expiration of the warranty or one year after the vehicle's first delivery to the consumer – whichever is sooner, the consumer reports the nonconformity to the manufacturer, lessor, or the any of manufacturer's authorized dealers and makes the vehicle available for repair.

MANUFACTURER'S DUTY TO REPURCHASE OR REPLACE A VEHICLE

If after a reasonable attempt to repair the nonconformity is not repaired, the manufacturer must either repurchase the vehicle or, if the vehicle is owned, replace the vehicle. [The Wisconsin lemon law does not provide for replacement of a leased vehicle.]

REASONABLE NUMBER OF REPAIR ATTEMPTS

The Wisconsin lemon law defines "reasonable attempt to repair" as the occurrence of any of the following within the term of a vehicle's warranty or within one year after the vehicle's first delivery to a consumer, whichever is sooner:

- 1. The same nonconformity is subject to repair by the manufacturer, lessor, or any of the manufacturer's authorized dealers at least four times and the nonconformity continues. A nonconformity may be "subject to repair" if the vehicle was presented to the dealership for repair4; or
- 2. The vehicle is out of service for an aggregate of at least 30 days because of warranty nonconformities. A vehicle is out of service if it is not capable of rendering service as warranted due to a nonconformity, even though the vehicle may be in possession of the consumer and may still be driven by the consumer⁵, as long as the consumer provided notice and made the vehicle available for repair.⁶

NOTICE

To receive a replacement or refund, a consumer must notify the manufacturer to request one of these remedies and must offer to transfer title of the motor vehicle to the manufacturer.

DISPUTE RESOLUTION

If a manufacturer participates in an informal dispute settlement procedure and that procedure has been certified by the Department of Transportation as complying with applicable regulations, a consumer may not bring an action in court under the lemon law unless the consumer first resorts to that informal dispute settlement procedure.

⁴ Chmill v. Friendly Ford-Mercury of Janesville, Inc., 144 Wis.2d 796 (Ct. App. 1988).

⁵ Vultaggio v. General Motors Corp., 145 Wis. 2d 874 (Ct. App. 1988).

⁶ Carl v. Spickler Ent., Ltd., 165 Wis. 2d 611 (Ct. App. 1991).

⁷ Berends v. Mack Truck, Inc., 252 Wis.2d 371 (Ct. App. 2002).

This information is not intended as legal advice. Please direct specific questions to your legal counsel. © 2003, Council of Better Business Bureaus, Inc.

REMEDIES UNDER WISCONSIN LEMON LAW

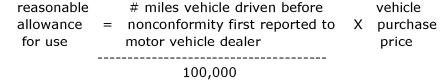
REPURCHASE OF AN OWNED VEHICLE

The Wisconsin lemon law sets out the following amounts that a manufacturer must pay when it repurchases an owned vehicle under the lemon law:

- 1. The full purchase price (not including any cash rebate⁸);
- 2. Sales taxes paid by the consumer, as well as any other amounts paid by the consumer at the point of sale;
- 3. Finance charges incurred by the consumer; and
- 4. Collateral costs, which are defined as expenses incurred by a consumer in connection with the repair of a nonconformity, including the costs of obtaining alternative transportation;
- 5. Less a reasonable allowance for the vehicle's use.

Refunds must be made to the vehicle owner and to any holder of a perfected security interest in the vehicle, as their interests may appear. When the manufacturer provides the refund, the consumer must return the nonconforming motor vehicle to the manufacturer and provide the manufacturer with the certificate of title and all endorsements necessary to transfer title to the manufacturer.

The Wisconsin lemon law provides that a reasonable allowance for a vehicle's use is subtracted from the amounts that a manufacturer must pay when it repurchases a vehicle under the lemon law. This reasonable allowance for use may not exceed the amount set out in the following formula for an owned motor vehicle:



In computing the reasonable allowance for use of a motorcycle, the denominator should be changed from 100,000 to 20,000.

REPURCHASE OF A LEASED VEHICLE

The Wisconsin lemon law sets out the following amounts that a manufacturer must pay when it repurchases a leased vehicle under the lemon law:

To the lessor: The current value of the written lease. This is defined as –

1. The total amount for which the lease obligates the consumer during the period of the lease remaining after its early termination;

This information is not intended as legal advice. Please direct specific questions to your legal counsel. © 2003, Council of Better Business Bureaus, Inc.

⁸ Church v. Chrysler Corp., 221 Wis.2d 460 (Ct. App. 1998).

- 2. The motor vehicle dealer's early termination costs [any expenses or obligation the lessor incurs as a result of early termination]; and
- 3. The value of the motor vehicle at the lease expiration date if the lease sets forth that value;
- 4. Less the motor vehicle lessor's early termination savings [any expenses or obligation the lessor avoids as a result of early termination of the lease and the vehicle's return]. This includes any interest charges the lessor would have paid to finance the motor vehicle. If the lessor does not finance the vehicle, the early termination savings includes the difference between the total amount for which the lease obligates the consumer during the period of the lease term remaining after the early termination and the present value of that amount at the date of the early termination.

To the lessee:

- 1. The amount the consumer paid under the written lease; and
- 2. Any sales tax and collateral costs [expenses incurred by a consumer in connection with the repair of a nonconformity, including the costs of obtaining alternative transportation];
- 3. Less a reasonable allowance for the vehicle's use.

When the manufacturer provides the refund, the consumer must return the nonconforming motor vehicle to the manufacturer. The lessor must provide to the manufacturer the certificate of title and all endorsements necessary to transfer title to the manufacturer.

The Wisconsin lemon law provides that a reasonable allowance for a vehicle's use is subtracted from the amounts that a manufacturer must pay when it repurchases a vehicle under the lemon law. This reasonable allowance for use may not exceed the amount set out in the following formula for a leased motor vehicle:

```
reasonable # miles vehicle driven before total amount for allowance = nonconformity first reported to X which the lease for use manufacturer, dealer, or lessor obligates consumer 100,000
```

In computing the reasonable allowance for use of a motorcycle, the denominator should be changed from 100,000 to 20,000.

REPLACEMENT OF AN OWNED VEHICLE

The Wisconsin lemon law provides that a replacement vehicle must be a comparable new vehicle. A demonstrator may be a comparable replacement if the returned vehicle

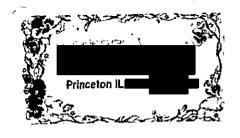
was also a demonstrator. The reasonable allowance for use does not apply to a replacement. 10

When the manufacturer replaces a vehicle, it must also refund any collateral costs [expenses incurred by a consumer in connection with the repair of a nonconformity, including the costs of obtaining alternative transportation].

When the manufacturer provides the replacement motor vehicle, the consumer must return the nonconforming motor vehicle to the manufacturer and provide the manufacturer with the certificate of title and all endorsements necessary to transfer title to the manufacturer.

⁹ Dussault v. Chrysler Corp., 229 Wis.2d 296 (Ct. App. 1999).

¹⁰ Chmill v. Friendly Ford-Mercury of Janesville, Inc., 144 Wis. 2d 796 (Ct. App. 1988).



BLOOMINGTON 18 DEC 2007 PM 2 L



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

Reinbursement Department P.O. Box 33170 Detroit, MI 48232-5170

PIFE: 2 0 2007

4823245170

Madhalada Barkhila a Manthala a Mhana M

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12 - 17 - 07
17-Digit Vehicle Identification Number (VIN): 1612T54805F
Mileage at Time of Repair: 47490 Date of Repair: 08/09/07
Claimant Name (please print):
Street Address or PO Box Number:
City: Drince ton State: ILL ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature;

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261



CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).

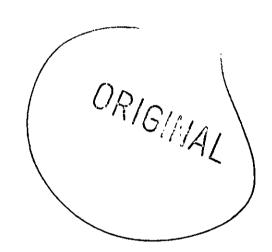


More Smiles Per Mile



116 S Spalding Street Spring Valley IL 61362 Phone 815-663-2711 Fax 815-664-2820

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	W/C	INT.	r ·	CUSTOMER
Any warranties on the product sold hereby are those made by the manufacturer. The selfer hereby expressly discialins all warranties either expressed or implied, including any implied warranty of merotrantability of fitness for a particular purpose, and neither assumes nor authorizes any person to assume for it any liability in consisting will this calls of said products. Any limbition contained basis indeed not announteen contained by the		00	Labor Parts Sublet Waste Dispos Oil/Grease Sub Total	225.00 359.00 .00 11.25 .00 595.25 23.14
Page 1 of 1 Job 00339 Reprint (1) 00339 Customer Copy		.00	Total (Cash)	

Princeton, IL

Service Request: 71-591925959

Customer Relationship Specialist: Michelle Rivers

Dear :

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column sensor that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$618.39.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530





213

DATE 01/22/08 XXXXXXXXXXXXX618 DOLLARS *******39 CENTS ***************618.39** PRINCETON IL

North American Operations General Motors Corporation Disbursement Account

AMOUNT

DISC. AMOUNT

The Chase Manhattan Bank, N.A. Syracuse, New York

BB 000000028

INVOICE DATE

VENDOR DUNS NO

VENDOR NAME

AUDIT

DOC. REFERENCE NUMBER

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 % DISC. INVOICE AMOUNT

DETACH BEFORE DEPOSITING CHECK

CHECK NO. PAYMENT DATE

01/22/08 NET AMOUNT

REGISTER NO. DESCRIPTION 01/18/08 VM 1-9TJKNH 71-591929959.1-9TJKNH 00.0000 618.39 .00 618.39 1G1ZT54805F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 618.39 .00 618.39 TOTAL

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

February 3, 2011



Service Request: 71-592333799

Customer Relationship Specialist: Anne Parks



Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu MAXX. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$574.82.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

18 DEC 2007 PM 6 T Columbus, Chara DEC 2 0 2007 einbursement Department P.O. Box 33170 Detroit, Michigan 48232-5170 Minulley Little Month by Bullet Harde Hald

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: December 14, 2007
17-Digit Vehicle Identification Number (VIN): 1612762895F
Mileage at Time of Repair: 6/475 Date of Repair: 10/20/07
Claimant Name (please print):
Street Address or PO Box Number:
City: Columbus State: Ohio ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 537.00
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

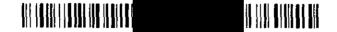
Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).







BOBB CHEVROLET
P.O. BOX 06351
567 LIVINGSTON AVENUE AT PARSONS
COLUMBUS, OHIO 43206-0351
(614) 228-4567

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PAGE 1 OF	2	CUSTOMER COPY		CONTINUED	ON NEXT PAGE	05:29pm		





BOBB CHEVROLET

P.O. BOX 06351 567 LIVINGSTON AVENUE AT PARSONS COLUMBUS, OHIO 43206-0351 (614) 228-4567

CUSTOMER NO 142224	ADVISOR	<u></u>	TAG NO.		INAOSE PAIS	INVOICE NO.
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COLUMBUS. OH	YEAR/WAKE/WOOL 05/CHEVR	: ROLET/MALIBU MA	хх		DELIVERY DATE	DELIVERY MILES
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PAGE 2 OF 2	CUSTOMER COPY	[END OF	INVOICE]	05:29pm		

THE BOBB CHEVROLET CO. 567 E LIVINGSTON AVE. COLUMBUS, OH 43206

10/22/2007

Merchant ID:

17:32:42 000000000700886

Terminal ID:

01002368

218181790997

CREDIT CARD

VISA SALE

CARD #

INVOICE

0037

Batch #:

000129 013217

Approval Code: Entry Method:

Swiped Online

Approved: **SALE AMOUNT**

\$657.78

CUSTOMER COPY

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
PO Box 62530

Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530



CHECK NO.

50-937 213

DATE 01/17/08

XXXXXXXXXXXXX574 DOLLARS

****82 CENTS

... 1k.

North American Operations General Motors Corporation Disbursement Account

TO THE ORDER

COLUMBUS OH

SIGNATURE

The Chase Manhattan Bank, N.A. Syracuse, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK CHECK NO. BB 000000299 PAYMENT DATE VENDOR NAME 01/17/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/16/08 .71-592333 799.1-9T48SX .00 - VH:1-9T48SX 00.0000 574.82 574.82 1G1ZT62895F 4 Del 2 . . . ; ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT\OR QUESTIONS CALL 800-462-8782 H3 TOTAL 574.82 .00 574.82 APSJUCK

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 50-937 213 CHECK NO. DATE AMOUNT 02/22/08 ****************708.54 XXXXXXXXXXXXX708 DOLLARS XXXX54 CENTS North American Operations General Motors Corporation Disbursement Account PAY TO THE ORDER MESA AZ The Chase Manhattan Bank, N.A. Syracuse, New York AUDIT North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. 1 BB 000000540 PAYMENT DATE VENDOR NAME 02/22/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC, REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT **HET AMOUNT** 02/21/08 | VM 1-9YJHHD .71-59238Q354.1-9YJHHD 708.54 00.0000 708.54 .00 1G1ZT54875F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REINBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 708.54 .00 708.54 **TOTAL**

Mesa, AZ

PHOENIX AZ 850 TO DEC TATE PHOLIT

ICEC 18 2007

Reim bursement Department

P.O. BOX 33170

Detroit, MI 48232-5170

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CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12-12-07
17-Digit Vehicle Identification Number (VIN): I G IZT 54875 F.
Mileage at Time of Repair: 43722 Date of Repair: 9-5-07
Claimant Name (please print):
Street Address or PO Box Number:
City: Mesa State: AZ ZIP Code: _
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 736.33
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

Enclosures (4)

(



CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1,800,630,2438 (TTY 1,800,833,2438).



311081

INVOICE

PowerO. Chevrolet Superstition Springs

6330 E. SUPERSTITION SPRINGS BLVD. MESA, ARIZONA 85206 (480) 615-4500

PAGE 1

DUPLICATE 2

HOME: BUS: SERVICE ADVISOR: 837 RAUL BEJARANO COLOR YEAR MAKE/MODEL VIN LICENSE MILEAGE IN / OUT TAG CHEVROLET MALIBU 1G1ZT54875F <u>43722</u> /43722 INV. DATE DEL. DATE PROD. DATE WARR EXP. PROMISED PO No RATE PAYMENT 01JAN05 IS 01JAN05 8:00 05SEP07 CASH 06SEP07 R.O. OPENED READY OPTIONS: DLR:12603 ENG:3.5 Liter SFI 13:18 06SEP07 09:30 05SEP07 LINE OPCODE TECH TYPE HOURS LIST NET TOTAL A PERFORM 45,000 MILE SERVICE (MINIMUM) TIRE ROTATE, RESET TIRE MON CHECK AIR FILTER, INSPECT COOLANT LEVEL) DO NOT DO OIL CHANGE, 02 * MAINTENANCE - CUSTOMER STATES CPC 55.00 339 0.00 PARTS: LABOR: 55.00 OTHER: 0.00 TOTAL LINE A: 55.00 43722 DECLINED ALL BUT ROTATE TIRES 030 ROTATED ALL FOUR TIRES ******************* B CUSTOMER STATES POWER STEERING DOES NOT WORK, INTERMITTENT, PS LIGHT WAS ON 03 STEERING 320.64 339 320.64 CPC 359.00 359.00 1 15926870 6518 COLUMN 359.00 LABOR: 320.64 OTHER: PARTS: 0.00 TOTAL LINE B: 679.64 43722 STEERING COLUME FALLED INTERNAL, 300 REPLACED POWER STEERING COLUME ASSEMBLY RECALIBRATE AND TESTED CLEARED CODES CHECKED TESTED GOOD C MULTI-POINT INSPECTION MPI MULTI-POINT INSPECTION (N/C)339 IPS 0.00 0.00 LABOR: PARTS: 0.00 OTHER: 0.00 TOTAL LINE C: 43722 ******** D** 1 DAY RENTAL (WE ARE PAYING) 70 * SUBLET -CUSTOMER STATES (N/C)339 IPS SUBL RENTAL PO#311081 (N/C)IPS 0.00 0.00 OTHER: 0.00 TOTAL LINE D: PARTS: 0.00 LABOR: LIMITED WARRANTY

LIMITED WARRANTY

AS IS: THE ONLY WARRANTIES APPLYING TO THIS PARTICS) ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER. THE SELLING DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES ETHER EXPRESS OR IMPLIED INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THIS PARTICS JAND/OR SERVICE. BUYER SHALL NOT BE ENTITLED TO RECOVER FROM THE SELLING DEALER ANY CONSEQUENTAL DAMAGES, DAMAGES TO PROPERTY, DAMAGED FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS, OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

ENVIRONMENTAL SERVICE CHARGE - A token charge is included for HAZARDOUS WASTE DISPOSAL and supplies used or your vehicle. Applicable supply items include but are not limited to the following items: Nuts, bolts, washers, tape, pins, serospray, sheller, solvent, rags, carburetor cleaner, towels, solder, battery cleaner, wire, window sealer, etc.

TERMS: CASH OR ACCEPTABLE CREDIT CARD UNLESS PRIOR ARRANGEMENTS MADE.

I hereby authorize the below repair work to be done along with the necessary materials. You and your employees may operate vehicle for purposes of testing, inspection or delivery at my risk. An express mechanic's lien is acknowledged on vehicle to secure the amount of repairs thereins. You will not be held responsible for loss or damages to said vehicle or any articles left therein in case of fire, theft, accident or other causes beyond your control. If it becomes necessary for you to employ a collection agency or any attorney to collect this account, I the undersigned, agree to pay all court costs plus a reasonable attorney's fee and/or collection agency fee.

	DESCRIPTION	TOTALS
	LABOR AMOUNT	
)	PARTS AMOUNT	
;	GAS, OIL, LUBE	
,	SUBLET AMOUNT	
	MISC. CHARGES	
	TOTAL CHARGES	
	LESS INSURANCE	
9	SALES TAX	
t	PLEASE PAY THIS AMOUNT	

10f4

Copyright 2000 ADP, Inc. SERVICE INVOICE #2 XSIZC

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DITC.

311081

Power O. Chevrolet **Superstition Springs**

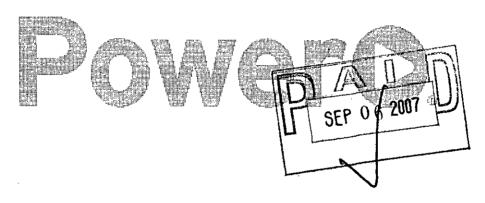
6330 E. SUPERSTITION SPRINGS BLVD. MESA, ARIZONA 85206 (480) 615-4500

DUPLICATE 2

INVOICE

PAGE 2

HOME:			BUS:		SER	VICE ADV	SOR:	337 RAU	L BEJAF	ONAS		
COLOR	YEAR		MAKE/MODEL			VIN		LICENSE		AGE IN /	OUT TA	G
	05			ALIBU	 1G1 <i>Z</i> '	T54875F			437	722/4	3722	
DEL, DATE	PROD.	DATE	WARR, EXP.	PROMIS	ED	PO NO.		RATE	PAYMEN		INV. DATE	
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01JAN05 DD				18:00 0	5SEP07	<u> </u>	ļ		CASH	١٥	6SEP07	
R.O. OPEN	ED		READY	OPTION		R:12603 I	ENG:3.5	_Liter		<u> </u>		
09:30 05SE	P07	13:	18 06SEP	7								
LINE OPCOD	E TE	CH T	YPE HOURS	5				LIST	1	VET	TOTAL	
43722						•			-	-	·	-





LIMITED WARRANTY AS IS: THE ONLY WARRANTIES APPLYING TO THIS PARTIS) ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER. THE SELLING DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES EITHER EXPRESS OR IMPLIED INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF THIS PART(S) AND/OR SERVICE, BUYER SHALL NOT BE ENTITLED TO RECOVER FROM THE SELLING DEALER ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGED FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFITS, OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

ENVIRONMENTAL SERVICE CHARGE - A token charge is included for HAZARDOUS WASTE DISPOSAL and supplies used on your vehicle. Applicable supply items include but are not limited to the following items: Nuts, bolts, washers, tape, pins, aerospray, shellac, solvent, rags, carburetor cleaner, towels, solder, bettery cleaner, wire, window sealer, etc.

TERMS: CASH OR ACCEPTABLE CREDIT CARD UNLESS PRIOR ARRANGEMENTS MADE.

I hereby authorize the below repair work to be done along with the necessary materials. You and your employees may operate vehicle for purposes of testing, inspection or delivery at my risk. An express mechanic's lian is acknowledged on vehicle to secure the amount of repairs thereto. You will not be held responsible for loss or damages to said vehicle or any articles left therein in case of fire, theft, accident or other causes beyond your control. If it becomes necessary for you to employ a collection agency or any attorney to collect this account, I the undersigned, agree to pay all court costs plus a reasonable attorney's fee and/or collection agency fee.

	28.90
DESCRIPTION	TOTALS
LABOR AMOUNT	375.64
PARTS AMOUNT	359.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	734.64
LESS INSURANCE	0.00
SALES TAX	28,90
PLEASE PAY	
THIS AMOUNT	763.54



Gate Hours 7 a.m.-9 p.m. (7 days a week)

www.centralselfstorage.com

Howard & JIII Payne
Project Managers

107 N. Ellsworth Road Mesa, AZ 85207-8731 Phone:480-984-4036 Fax: 480-358-0586 Office:Hours: Mon.-Fri. 10 a.m. - 6 p.m. Saturday: 8 a.m. - 4 p.m. Sunday: 10 a.m. - 2 p.m.

POWER CHEVROLET SUPERSTITION 6330 E SUPERSTITION SPGS BLV MESA AZ 85206 480-615-4500

Sale

ID: 74263861 Ref #: 0005 09/06/07 14:18:34 Batch #: 739

VISA

Appr Code: 00679A Inv#: 311081 Total: \$ 763.54

> Customer Copy NAM.AUTONATIONDIRECT.COM LOCATIONS NEB SITE ADDR

763.54

- 57.20 Less

- 57.20 Less

- 706.34

Rental See Statement
+ 29.99 Rental See

Rate Information

YOUR RATE MAY VARY ACCORDING TO THE TERMS OF YOUR AGREEMENT. NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION ABOUT YOUR ACCOUNT.

	Corresponding	Daily	
	ANNUAL	FINANCE	Average
	PERCENTAGE	CHARGE	Daily
Type of Balance	RATE		Balance
PURCHASE(S)	5.90%	.01616%	\$0.00
CASH ADVANCE(S)	23.49%	.06435%	\$313.70
OVERDRAFT ADVANCE	23.49%	.06435%	\$14.09

Composite ANNUAL PERCENTAGE RATE 94.22% Days in Billing Cy	
	41A 1 E
I COMPOND MINIORE FERVERIAGE RATE 27.2276 DAYS IN DIMINI CY	<i>H</i> 10

Transactions

Trans Post	Reference Number	Description	Credits	Charges
09/04 09/04	24455017R42QM2DKV	WAL-MART #3833 MESA (SE) AZ		43.13
09/05 09/05	74492157T618JFVGT	CASH WELLS FARGO C/A #603 MESA AZ		200.00
09/05 09/05	5	CASH ADVANCE TRANSACTION*FINANCE CHARGE*		10.00
09/05 09/05	24792627V60Z0SXRS	DRIVETIME MESA MESA AZ		413.15
09/06 09/06	24164077T0H1NWL32	ENTERPRISE RENT-A-CAR MESA AZ		29,99
09/06 09/06	24164077T8204YNFZ	POWER CHEVALT 16600033 MESA AZ		763.54
09/07 09/07	24226387SAFXT4V3R	WM SUPERCENTER APACHE JUNCTI AZ		190.73
09/09 09/09	24493987X5V38D10A	CARUSO'S ITALIAN RSTR GILBERT AZ		59.00
09/10 09/10	74492157Y618LQWG5	CASH WELLS FARGO C/A #603 MESA AZ		200.00
09/10 09/10		CASH ADVANCE TRANSACTION*FINANCE CHARGE*		10.00
09/11 09/11	1 74465427ZEHM6LBSR	OVERDRAFT TO 5382720927		25.00
09/11 09/11	I	OVERDRAFT TRANSACTION *FINANCE CHARGE*		10.00
09/17 09/17	7 244356585TP985XF5	EYEMASTERS #96 MESA AZ		49.50
09/17 09/17	7 244356585TP985XH7	EYEMASTERS #96 MESA AZ		144.95
	PERIODIC *FINANCE CHAR	RGE* PURCHASES \$0.00 CASH ADVANCE \$3.37		3.37

Wells Fargo News

Earn valuable rewards with the Wells Fargo Enhanced
Rewards® program. Simply use your Wells Fargo Credit Card
for your everyday, travel, and online shopping needs. We
offer exciting rewards such as airline tickets, cash
rebates, gift cards, name-brand merchandise and more!
Points earned with your Wells Fargo Credit and Check Card
will appear in the rewards summary of your credit card
statement. For more information or to review redemption
options, log on to www.WellsFargoRewards.com or call us at
1-877-517-1358.

Paid by:



February 3, 2011



Service Request: 71-592380354

Customer Relationship Specialist: Michael Brent

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we are happy to inform you that we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$708.54.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 CHECK NO. DATE **AMOUNT** XXXXXXXXXXXXX728 DOLLARS ***************728.18 01/18/08 ***18 CENTS North American Operations General Motors Corporation Disbursement Account **BELZONI MS** INFORMATION Redacted PURSUANT TO THE FREEDOM OF The Chase Manhattan Bank, N.A. Syracuse, New York INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. BB 000000104 PAYMENT VENDOR NAME 01/18/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/17/08 | VM 1-9T820R .71-592402968.1-9T820R 00.0000 728.18 .00 728.18 1G1ZT54835F

TOTAL

ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

728.18

H3

.00

728.18

February 3, 2011



Service Request: 71-592402968

Customer Relationship Specialist: Pinkie Smith

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we are happy to inform you that we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$728.18.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

Belgani MS.



DEC 2 0 2007

Reimbursement Dept.

P. D. Bry 33,170

Detroit, MI. 48232-5170

170 BOS0

Madadadadadahadhadhadhadhaadh

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12-11-07
17-Digit Vehicle Identification Number (VIN): <u>IG/CT54タ3 S</u> F
Mileage at Time of Repair: 1-31-06
Claimant Name (please print):
Street Address or PO Box Number:
City: VAZOO CITY State: M5. ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 40.45 7.70.55
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).





PAGE 1 OF 1

CUSTOMER COPY

AFAN 1Jackson (601) 948-5788

CLISTOMER NO.	9322			ČŸ	NDA WIL	KINSON	2580 TA	G NO.	07/05/06	CVCS42754
				LABO	R RATE	i.	MILEA	47,991	SILVER/	STOCK NO.
BELZONI	MS			~65.	CHEVRO	LET/MALIE	U/4 DOOR	SEDAN	DELIVERY DATE	DELIVERY MILES
02220113	, ,,,,					Γ 5 4 8 3			SELLING DEALER NO.	PRODUCTION DATE
					E. NO.		P. O. 140.		¹ 07765/06	
F		BUSINESS PH	HONE	СОМ	MENTS	-	_ 			MO: 47991
JOB# 1 CHAR	GES								STATEMENT (OF DISCLAIMER
LABOR J# 1 45CVZ	STE	TATES TO CI RING IS ELI	HECK POWE ECTRICAL (R STEERIN ON THIS (S):7670 UID MESSAGE	•••••	36.00	The factory wan of the warrantion the sale of this Seller hereby e	ranty constitutes all es with respect to s item/items. The xpressly disclaims
J0B# 1 TOTA	LS			· · · · · · · · · ·				26.00		either express or ig any implied war-
İ			10D	# 1 10HE	NAI DEETA	LAB CVCS JOB		36.00 36.00	ranty of mercha	antability or fitness ourpose. Seller nei-
MISCOLLO	IDF DF	SCDIDTION						30.00	ther assumes r	nor authorizes any
MISCCO JOB # A						TOT	AL - MISC	3.60 3.60		assume for it any action with the sale
COMMENTS WAITER				· · · · · · · · · · · · · · · · · · ·						-
TECHNICIAN C	ERTIFICATION 7670		HE	rman lee	ROBINSON		67		CUSTOM	R SIGNATURE
TOTALS			•••••				• • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •		
************	*******	*****	*****	***** *		TOTAL	LABOR PARTS	36.00 0.00		
* [] CASH	[] CHECK	CK NO.	C] *		TOTAL	SUBLET G.O.G	0.00)
* [] VISA	[] MASTE	RCARD	[] DISCO	VER *		TOTAL	MISC CHG. MISC DISC	0.00 3.60 0.00	ORIGIN	IAI /
* [] AMER	XPRESS [] OTHER	[] CHA	RGE *		TOTAL	TAX	2.77		IAL
*******	******	******	******	*****		TOTAL	INVOICE \$	42.37	\setminus \setminus	
OUR GOAL IS YOU MAY RECE IF FOR ANY F "COMPLETELY TOM EDWARDS	IVE A SERVIC REASON YOU CA SATISFIED" F	E SATISFA AN NOT ANS PLEASE CAL	CTION SUR WER ALL Q	VEY FROM UESTIONS	WITH			·	HEREBY CERTIF MATION CONTA ACCURATE UN	SERVICING DEALER, I Y THAT THE INFOR- INED HEREON IS ILESS OTHERWISE ES DESCRIBED WERE
CUST(************************************	MER SIGNATUF		UPLIC	ATE	INVOI	C E ***	*****	*****	PERFORMED AT OWNER. THERE FROM THE API VEHICLE OR OT PART REPAIRE UNDER THIS CLANECTED IN ANY VEHICLE OR OR OR OR OR OR OR OR OR OR OR OR OR	T NO CHARGE TO WAS NO INDICATION PEARANCE OF THE HERWISE, THAT ANY DOR REPLACED AND HERWISE OR MISUSE. ORTING THIS CLAIM FOR (1) YEAR FROM PAYMENT NOTIFICA-WICING DEALER FOR MANUFACTURER'S

[END OF INVOICE] 12:26pm



PAGE 1 OF 1

CUSTOMER COPY

Jackson (601) 948-5788

CUSTOMER NO. 9322		CINDA WILK	TNSON	2580 TAG N	ó.	01/22/07	CVCS49537
		LABOR RATE	Tri	MILEAGE			STOCK NO.
LOS SOMINSON		YEAR / MAKE / MODEL		. / 4		DELIVERY DATE	DELIVERY MILES
BELZONI, MS		05/CHEVROL			EDAN	SELLING DEALER NO.	PRODUCTION DATE
		VETICE ID 100 Z T	5 4 8 3			<u> </u>	PRODUCTION DATE
		F. T. E. NO.		P. O. NO.		"01722/07	
	BUSINESS PHONE	COMMENTS		t <u>_</u>			MO: 62818
JOB# 1 CHARGES	************					STATEMENT (OF DISCLAIMER
CUSTOMER STA	MESSAGE COMES ON D IN FOR TORQUE INPU EOCCURS THEN STEER JOB#	1 JOURNAL PREFIX	G WHILE STEERING ROUE INPUT PLACING LABOI CVCS JOB#	R 1 TOTAL	72.00 72.00 72.00	of the warrantied the sale of this seller hereby end all warranties implied, including ranty of merchastor a particular pather assumes rother person to	anty constitutes all es with respect to s item/items. The xpressly disclaims either express or g any implied war- untability or fitness purpose. Seller nei- nor authorizes any assume for it any
JOB # A 100 SHO	P SUPPLIES		TOTA	L - MISC	7.20 7.20		ection with the sale is.
COMMENTSWAITER	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •				ļ	
TECHNICIAN CERTIFICATION-						сизтомі	ER SIGNATURE
6746	CHR		674				
TOTALS				• • • • • • • • • • • • •	• • • • • • • • • •	//	
*	CK NO. [CARD [] DISCOV] * * ER *	TOTAL TOTAL TOTAL TOTAL	LABOR PARTS SUBLET G.O.G MISC CHG. MISC DISC TAX	72.00 0.00 0.00 0.00 7.20 0.00 5.54	ORI	GINAL
**********	******	****	TOTAL	INVOICE \$	84.74		
OUR GOAL IS 100% TOTAL CU YOU MAY RECEIVE A SERVICE IF FOR ANY REASON YOU CAN "COMPLETELY SATISFIED" PL TOM EDWARDS AT 746-1172.	SATISFACTION SURV NOT ANSWER ALL QU EASE CALL OUR SERV	EY FROM GM. ESTIONS WITH	CE ****	******	******	HEREBY CERTIF' MATION CONTA ACCURATE UN SHOWN. SERVICI PERFORMED AT OWNER. THERE FROM THE API VEHICLE OR OTI PART REPAIRE UNDER THIS CLI NECTED IN ANY V DENT, NEGLIGE RECORDS SUPP ARE AVAILABLE THE DATE OF I	SERVICING DEALER, I'Y THAT THE INFOR- NINED HEREON IS ILESS OTHERWISE SO DESCRIBED WERE NO CHARGE TO WAS NO INDICATION PEARANCE OF THE HERWISE, THAT ANY DOR REPLACED AND HEEN CON- NAY WITH ANY ACCI- CORTING THIS CLAIM POR THIS CLAIM POR THIS CLAIM PAYMENT NOTIFICA- NICING DEALER FOM MANUFACTURER'S

[END OF INVOICE] 12:26pm



1420 East Broadway · Yazoo City, MS 39194

Jackson (601) 948-5788

CUSTOMER NO. 9322		ČTNDA WILK	THEON 21	580 TAG NO.	01/29/07	***CVC\$49793
JJLL		LINDA WILK	TUSON 2		<u> </u>	STOCK NO.
					SILVER/	STOCK NO.
BELZONI, MS		05/CHEVROL	ET/MALIBU/4 (DOOR SEDAN	DELIVERY DATE	DELIVERY MILES
		VETICE I.D TO Z T	5 4 8 3 5 F		SELLING DEALER NO.	PRODUCTION DATE
		F. T. E. NO.	P. O.	NO.	°01/29/07	
F	BUSINESS PHONE	COMMENTS			<u> </u>	MO: 63368
JOB# 1 CHARGES		1			STATEMENT O	F DISCLAIMER
LABOR	THE CHERTHETON)	, piode annier
CUSTOMER STAT	ING/SUSPENSION ES POWER STEERING MES GETS REAL HARD	SAGE COMING ON):6/46 DISPLAY	0.00	of the warranties	nty constitutes all s with respect to item/items. The
PARTSQTYFP-NUMBER 1 159268	DESCRI	PTION	UNIT PE	RICE- 94.90 394.90	Seller hereby ex	pressly disclaims
1 159200	OLUMN	0.518	TOTAL - PA	94.90 394.90 NRTS 394.90	1	ither express or any implied war-
JOB# 1 TOTALS				***	ranty of merchar	ntability or fitness
			PARTS		for a particular po	urpose. Seller nei- or authorizes any
			CVCS JOB# 1 TO		other person to	assume for it any
COMMENTS			***************************************		of this item/items	ction with the sale
TECHNICIAN CERTIFICATION 6746	CHDIC (OTEFIN	6746		,	
TOTALS					CUSTOME	SIGNATURE
******************		*	TOTAL LABOR TOTAL PARTS TOTAL SUBLE	0.00 394.90		
* [] CASH [] CHECK	_	*	TOTAL SUBLET	T 0.00		
* [] VISA		*	TOTAL G.O.G. TOTAL MISC (TOTAL MISC (CHG. 0.00 DISC 0.00	1/)
* [] AMER XPRESS []	OTHER [] CHARGE	* *	TOTAL TAX	, 27.64	1/	
******	`*********	r*	TOTAL INVO	CE \$ 422.54	ORIG	INAL/
OUR GOAL IS 100% TOTAL CUS YOU MAY RECEIVE A SERVICE IF FOR ANY REASON YOU CAN "COMPLETELY SATISFIED" PLE TOM EDWARDS AT 746-1172.	SATISFACTION SURVEY F NOT ANSWER ALL QUESTI	ONS WITH				
						RVICING DEALER, I
CUSTOMER SIGNATURE					MATION CONTAI	NED HEREON IS .ESS OTHERWISE
**************************************	* DUPLICAT	EINVOIC	; E *********	********	SHOWN. SERVICE: PERFORMED AT OWNER. THERE W FROM THE APPI VEHICLE OR OTH PART REPAIRED UNDER THIS CLAI NECTED IN ANY W DENT, NEGLIGEN	S DESCRIBED WERE NO CHARGE TO /AS NO INDICATION EARANCE OF THE ERWISE, THAT ANY OR REPLACED M HAD BEEN CON- AY WITH ANY ACCI- NOE OR MISUSE.
and Reynolds Price					RECORDS SUPPO ARE AVAILABLE F THE DATE OF PA TION AT THE SERV	IRTING THIS CLAIM OR (1) YEAR FROM AYMENT NOTIFICA- VICING DEALER FOR MANUFACTURER'S

PAGE 1 OF 1

CUSTOMER COPY

[END OF INVOICE] 12:25pm



1420 East Broadway • Yazoo City, MS 39194

Jackson (601) 948-5788

CUSTOMER NO.	9322		LINDA V	wILK]	INSON	J		580 TAG N	0.	NVOICE ONT /07	**CVC\$49859
	-		LABOR RATE		Ţ					SILVER/	STOCK NO.
BELZONI,	. MS		VEAR/MAKE/ 05/CHE	WOOEL VROLI	ET/MA	LIBU	<u>-</u> 1/4	DOOR S	EDAN	DELIVERY DATE	DELIVERY MILES
			VEHICLE I.D NO							PELLING DEALER NO.	PRODUCTION DATE
)			F. T. E. NO.					D. NO.		『01731/07	
F			COMMENTS	_		···					мо: 63476
l	GES									STATEMENT C	F DISCLAIMER
JABOR J# 1 45CVZ	STEERING/ CUSTOMER STATES F STEERING MESSAGE FAULTY TORQUE INF R&R STEERING COLL CUSTOMER PREPAID	'SUSPENSION POWER STEERING GETS APPEARS PUT SENSOR IMN	7	ECH(S)	:6746		••••		220.32	of the warrantie the sale of this Seller hereby ex all warranties	anty constitutes all s with respect to s item/items. The expressly disclaims either express or
	TYFP-NUMBER -1 15926870 1 15926870	COLUMN CDLUMN	6.518 6.518			TOTAL	F	194.90 159.00	-394.90 359.00 -35.90	ranty of mercha for a particular p ther assumes n	g any implied war- ntability or fitness surpose. Seller nei- or authorizes any assume for it any
JOB# 1 TOTA 	LS					LABOR PARTS	₹		220.32 -35.90	liability in conne	ction with the sale
		JOB# 1.	JOURNAL PR	REFIX	CVCS	JOB#	1 7	OTAL	184.42		
MISCCO JOB # A	DEDESCRIPT 100 SHOP SU	TIONPPLIES			CONT			IISC	22.03 22.03	CUSTOME	R SIGNATURE
	ERTIFICATION 6746	CHRIS G	RIFFIN			6746					
************ * [] CASH * [] VISA	CHECK CK [] CHECK CK [] MASTERCARD XPRESS [] OTHE	NO. [] DISCOVER	* * * * * * *		T T T T	OTAL L OTAL S OTAL S OTAL O OTAL P OTAL P	ABOR PARTS SUBLE 3.0.0 1ISC 1ISC	T CHG. DISC	220.32 -35.90 0.00 0.00 22.03 0.00 14.45	FAOUIC	SINAL)
******	*******	************	 *		TO	'AL II	NVC	ICE \$	220.90	f 	
YOU MAY RECE IF FOR ANY F "COMPLETELY TOM EDWARDS	100% TOTAL CUSTOME IVE A SERVICE SAT REASON YOU CAN NOT SATISFIED" PLEASE AT 746-1172.	ISFACTION SURVEY FI ANSWER ALL QUESTIO	ONS WITH MGR.	0 I C	E	****	****	****	*****	HEREBY CERTIFY MATION CONTA ACCURATE UNI SHOWN, SERVICE PERFORMED AT OWNER, THERE VEHICLE OR OTHPART REPAIRE UNDER THIS CLANECTED IN ANY VEHICLE OR OTHERE OR SUPPORT ARE AVAILABLE FOR THE DATE OF THO AT THE SER	IS DESCRIBED WERE NO CHARGE TO NAS NO INDICATION PEARANCE OF THE IERWISE, THAT ANY O OR REPLACED IM HAD BEEN CON- VAY WITH ANY ACCI- NCE OR MISUSE FOR (1) YEAR FROM NAYMENT NOTIFICA- WICING DEALER FOR MANUFACTURER'S
PAGE 1 OF 1		CUSTOMER COPY				[END	OF	INVOICE]	12:24pm	(SIGNED) DEALER GENERAL WAYA	DER OR AUTHORIZED PERSON (2015)



Current Date:

December 17, 2007

February 02, 2007

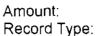
Account Number:

Capture Date: Item Number:

60000932161 Posted Date: February 02, 2007

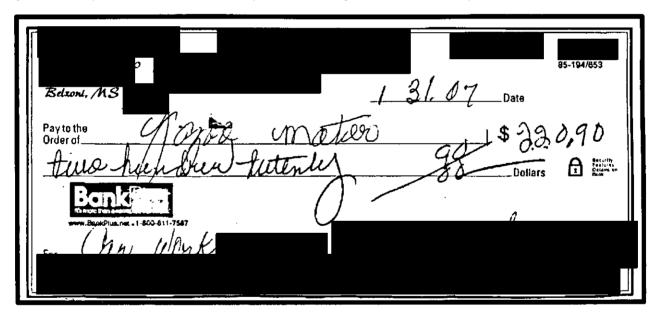
Posted Item Number: 600932161

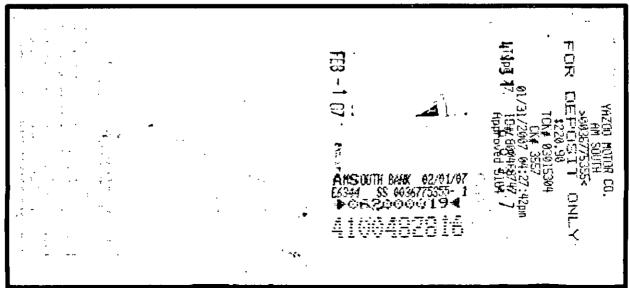
\$220.90 Debit





The image below represents an official copy of the original document as processed by our institution.





North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO.

DATE 01/24/08

The Chase Manhattan Bank, N.A. Syracuse, New York

XXXXXXXXXXXXXX625 DOLLARS

XXXX30 CENTS

AMOUNT ***************

North American Operations General Motors Corporation Disbursement Account

SANDOWN NH

AUDIT

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

VENDOR DUNS NO. BB 000000267

1

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

CHECK NO.

DETACH BEFORE DEPOSITING CHECK

VENDOR NAME

PAYMENT DATE 01/24/08 REGISTER NO DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT **HET AMOUNT** 01/23/08 VH 1-9U612P 71-992864139.1-9U612P 00.0000 625.30 625.30 .00 1G2ZG528X54 ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3



PORTSMOUTH NH 038

Reimbursement Department p.o. Box 33170 Defroit, MI 48232-5170

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: Decambe: 15,2007
17-Digit Vehicle Identification Number (VIN): 16226528X54
Mileage at Time of Repair: 48,198 Date of Repair: 6/25/07
Claimant Name (please print):
Street Address or PO Box Number:
City: Sandown State: NH ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 649.25
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

0001107/GMR2V071129R14

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your_claim_will_be_acted_upon_within_60.days-of-receipt.

If your claim is:

- Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete the claim and offered the opportunity to resubmit the claim when the missing documentation is available...

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Pontiac Customer Assistance Center at 1.800.620.7668 (TTY 1.800.833.7668).







BETLEY CHEVROLET-BUICK, Inc.

50 No. Main St. P.O. Box 248

Route 28 By-Pass

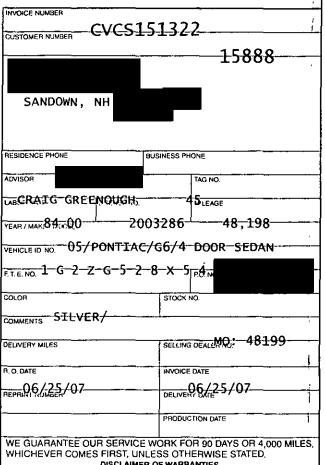
DERRY, N.H. 03038

(603) 434-1546

Toll Free 1-800-472-1546

Fax (603) 434-1336

www.betley.com



DISCLAIMER OF WARRANTIES

Any warranties on the product sold here by are those made by the manufacturer. The seller, BETLEY CHEVROLET-BUICK, Inc., hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and BETLEY CHEVROLET-BUICK, Inc. neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products; therefore, with respect to the seller, the product is sold "As is" and the entire risk as to the quality and performance of the product is with the buyer and/or manufacturer, and if the product proves defective after purchase, the buyer and/or manufacturer, not the seller, shall assume the entire cost of all necessary servicing or repair.

L	-6-6-		SPACE
JOB# 1 CHARGES LABOR J# 1 45CVZ01 STEERING CONC	(C O		
PERFORM DIAGNOSTIC TE FIND FAILURE IN INPUT R & R STEERING COLUMN REASSEMBLE AND CLEAR	TO REPLACE WITH NEW CODES - REPROGRAMMED AND SET	YSTEM TO SPEC	251.61
PARTSQTYFP.NUMBER			359.00 359.00
) JOB# 1 TOTALS		LABOR PARTS	251.61 359.00
JOB# 2 CHARGES	JOB# 1 JOURNAL PREFIX	CVCS JOB# 1 TOTAL	610.61
LABOR	RVICE TECH(S 00 MILE SERVICE DUE TO TIME OR MILEAGE ANGE ENGINE OIL & FILTER, CH ES & SET PRESSURE.):17751 IECK & TOP	10.00
PARTSOTY FP - NUMBER	DESCRIPTION OIL/FILTER W/W-SOLV FILTER. 1.836	UNIT PRICE- 13.95 **** **** **** TOTAL PARTS	13.95 **** **** **** 13.95
JOB# 2 TOTALS		LABOR PARTS	10.00 13.95
	JOB# 2 JOURNAL PREFIX		23.95
MISCCODEDESCRIPTION- JOB # A EF ENVIRONMENTA JOB # A SS SHOP SUPPLIE	L FEES S	TOTAL - MISC	2.00 12.69 14.69
	84.00 (+TAX) ·	; 17 AT 12:10pm	-





BETLEY CHEVROLET-BUICK, Inc.

50 No. Main St. P.O. Box 248

Route 28 By-Pass

DERRY, N.H. 03038

(603) 434-1546

Toll Free 1-800-472-1546

Fax (603) 434-1336

www.betley.com

INVOICE NUMBER CUSTOMER NUMBER CVCS1	5132	
SANDOWN, NH		- 15888 ■
RESIDENCE PHONE	BUSINESS PH	ONE '
ADVISOR		TAG NO.
LAB GRAIG GREENOUGH	4	5LEAGE
YEAR/MAK 84000 20	03286	48,198
VEHICLE ID NO. 05/PONTIAC	C/G6/4	DOOR SEDAN
FTE.NO-1-G-2-Z-G-5-2	-8-x-5	₽ 4 7
COLOR	STOCK	NO.
COMMENTS STLVER/		
DELIVERY MILES	SELLING	TO DEALEMQ: 48199
R.O DATE	INVOICE	
REPRICTO 100 March 100 Mar	DELIVE	06/25/07
		CTION DATE
WE GUARANTEE OUR SERVIC WHICHEVER COMES FIRST, U	NLESS OTH	KERWISE STATED.
Any warranties on the product sold his seller, BETLEY CHEVROLET-BUICK, either express or implied, including an a particular purpose, and BETLEY CHE		ose made by the manufacturer. The expressly disclaims all warranties, ranty of merchantability or fitness for ICK, Inc. norther assumes nor autho-

rizes any other person to assume for it any liability in connection with the sale of said products; therefore, with respect to the seller, the product is sold "As Is" and the entire risk as to the quality and performance of the product is with the buyer and/or manufacturer, and if the product proves detective after purchase, the buyer and/or manufacturer, not the

seller, shall assume the entire cost of all necessary servicing or repair.

TOTAL LABOR....
TOTAL PARTS.... [] CASH CK NO. [[] CHECK TOTAL SUBLET... 0.00 TOTAL G.O.G.... 0.00 [] VISA MASTERCARD [] DISCOVER TOTAL MISC CHG. 14.69 TOTAL MISC DISC 0.00 * [] AMER XPRESS [] OTHER [] [] CHARGE 0.00 TOTAL TAX.....

IMPORTANT !!!

TOTAL INVOICE \$

649.25

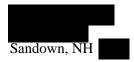
You may receive a customer satisfaction survey in the mail in the next few weeks. If for any reason you can not grade us "COMPLETELY SATISFIED" please contact the Service Manager Gregg Walker @ gwalker@betley.com Your COMPLETE SATISFACTION is our #1 goal. THANK-YOU FOR YOUR BUSINESS!!

CUSTOMER SIGNATURE

[END OF INVOICE]

CUSTOMER COPY

February 3, 2011



Service Request: 71-592868139

Customer Relationship Specialist: Lance Evans

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we are happy to inform you that we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$625.30.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

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

January 31, 2011



Service Request: 71-589669213

Customer Relationship Specialist: Pinkie Smith

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu MAXX. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$516.20.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

Shelby NC

CHARLOTTE MC 282

773 1 9 2007i

REIMBURSEMENT DEPARTMENT P.O. BOX 33170 DETROIT, MI. 48232-5170

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12-14-07
17-Digit Vehicle Identification Number (VIN): /c/z/62805/
Mileage at Time of Repair: 4442/ Date of Repair: 5-1-06
Claimant Name (please print):
Street Address or PO Box Number: _
City: SHELBY State: NC ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 516 20
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

COL 18 COLO 4 CO 185 MAR IS AND REPORT FOR A SERVICE AND SHOWING A REPORT OF A DECISION OF A SERVICE AND A SERVICE

Chevrolet P.O. Box 909989 Milwaukee, WI 53209-9989



Inhilalaadhibdhaachdahashdaaaddsadad

07126 1G1ZT62805F121418 13 0009418

SHELBY, NC

Customer Number: 4094

Invoice No: 12615

INVOICE

CARTER CHEVROLET



200 WEST DIXON BLVD. SHELBY, NC 28152 MAIN: 704-482-4341 SERVICE: 704-484-6050

BODY SHOP: 704-484-6046

SMARTER... WHEN YOU BUY FROM CARTERI

SHELBY, NO Home: Bus: Email:

Cell:

SERVICE ADVISOR: 206 USA BINGHAM

COLOR	YEAR		MAKE/MO	DEL	T CEN	VIOLAD	, 10011.	LICENSE		IN / OUT	TAG
BURG	05	(CHEVROL	ET MALIBU	1G1Z7	62805F		17377	44421	44421	
DEL. DATE	PROD.	DATE	WARR EX	Р. Р	ROMISED	PO NO).	RATE	PAYMENT	INV. D	ATE
01JAN05			DEADV		PTIONS: FNO.2	. <u> </u>			CASH	01MA	Y06

R.O. OPENED | READY | OPTIONS: ENG:3.5 Liter SFI

13:54 01MAY06 16:14 01MAY06

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL

A INTERMITTENT POWER STEERING MESSAGE ON DIC - W/LOSS OF POWER STEERING-IF CUSTOMER CUTS VEH OFF AND RESTARTS VEH SOMETIMES IT WILL RESET POWER STEERING

OL INTERMITTENT

246 CM

1 88967179 S/COL REM

162.50 162.50 359.00 325.00 325.00

,,,,SCANNED SYSTEM FOUND DTC CODE CO545 IN STEERING SYSTEM--TEST & DIAG

,,,,TO LOWER STEERING COLUMN HAS SHORT IN IT -- REPLACED CALUMN AND

,,,,REPROGRA M TO CORRECT

HAZ MAT'L/SUPPLIES

5.95



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

DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

STATEMENT OF DISCLAIMER The factory warranty constitutes all The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for 8 particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

CUSTOMER SIGNATURE

THIS AMOUNT

DESCRIPTION		TOTALS
LABOR AMOUNT	\$	162.50
PARTS AMOUNT	\$	325.00
GAS, ÓIL, LUBE	\$	0.00
SUBLET AMOUNT	\$	0.00
MISC. CHARGES	\$	5.95
TOTAL CHARGES	\$	493,45
LESS INSURANCE	\$	0.00
SALES TAX	\$	22.75
PLEASE PAY	## <u>1</u> %:::::::	

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



снеск No.

50-937

DATE 01/09/08

XXXXXXXXXXX516 DOLLARS

XXXX20 CENTS

North American Operations General Motors Corporation Disbursement Account

SIGNATURE

AUDIT

The Chase Manhattan Bank, N.A. Syracuse, New York

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

CHECK NO.

PAYMENT DATE

01/09/08

DETACH BEFORE DEPOSITING CHECK

VENDOR NAME REGISTER NO.

VENDOR DUNS NO.

BB 000000036

DOC. REFERENCE NUMBER INVOICE DATE

% DISC.

INVOICE AMOUNT

DISC. AMOUNT

NET AMOUNT

01/08/08 71-589669213 VM 1-9R4WXG 1-9R4WXG 00,0000 516,20 .00 516.20 1G1ZT62805F

al m ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3

TOTAL

516.20

.00

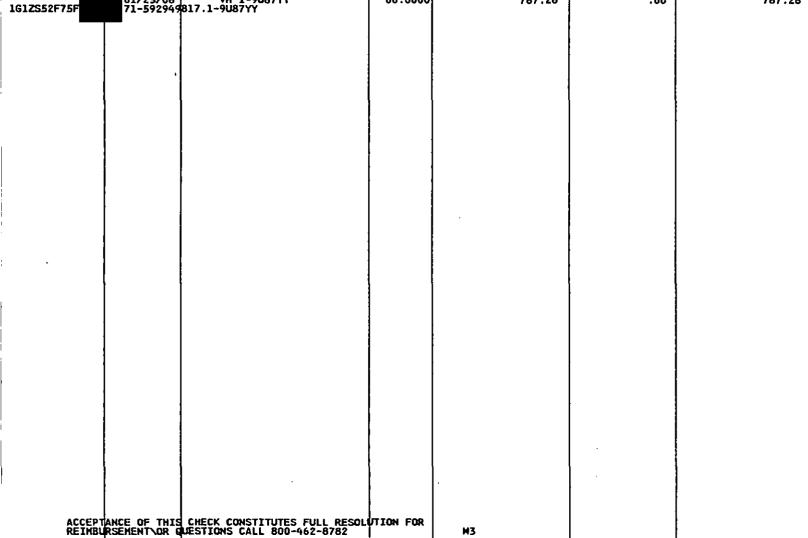
North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO.

50-937 213

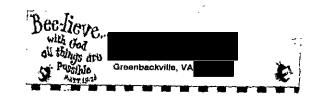
DATE AMOUNT 01/24/08 XXXXXXXXXXXXXX787 DOLLARS XXXX28 CENTS ****************787.28 North American Operations General Motors Corporation Disbursement Account GREENBACKVILLE VA ORDER INFORMATION Redacted PURSUANT TO THE FREEDOM OF The Chase Manhattan Bank, N.A. Syracuse, New York INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) AUDIT North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO CHECK NO. BB 000000392 PAYMENT DATE VENDOR NAME 01/24/08 REGISTER NO. DESCRIPTION DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT INVOICE DATE DISC. AMOUNT NET AMOUNT 01/23/08 VM 1-9U87YY 71-592949817.1-9U87YY 00.0000 787.28 .00 787.28



TOTAL

787.28

.00



HAMPTON ACRES VA 233

128 DEC 2007 PM 5 L



DEC 2 1 2007

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

4823235170

ldullahahdalladhdaullladhulladhamll

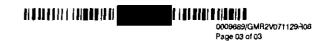
CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12/18/07
17-Digit Vehicle Identification Number (VIN): IGIZS52F75F
Mileage at Time of Repair: 63/88 Date of Repair: 4/19/07
Claimant Name (please print):
Street Address or PO Box Number:
City: Green backville State: Virginia ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 787.28
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261



CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete the claim and offered the opportunity to resubmit the claim when the missing documentation is available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



21687

249354

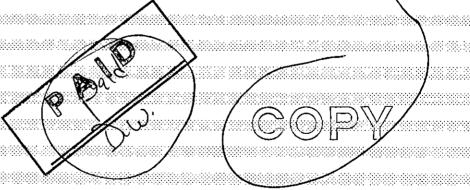
<u>Courtesy</u>

INVOICE

Cadillac (S) Cadillac

Delmarva's Hometown Dealer!

2531 North Salisbury Blvd. Direct Service Lines 97 (410) 749-7098 (410) 749-7100 SALISBURY, MD. 21802-1838 SALISBURY, MD PAGE 1 (410) 749-7097 HOME: BUS: SERVICE ADVISOR: 472 STEPHEN TOWNSEND
LICENSE MILEAGE IN OUT COLOR YEAR MAKE/MODEL TAC BLUE CHEVROLET MALIBU 1G1ZS52F75F 63188/63188 PROMISED DEL DATE PROD. DATE WARR EXP. RATE INV. DATE 04 DEC 04 WAIT 19APR07 CASH 19APR07 R.O. OPENED READY OPTIONS: STK: 105136 DLR: 14063 ENG: 2. 2 Liter MFI DOHC TRN: MX0 07:49 19APR07 13:01 19APR07 LINE OPCODE TECH TYPE HOURS LIST TOTAL A CUST STS POWER STEERING LIGHT IS COMING ON THE DASH - CHECK AND ADVISE E7680 DIAGNOSIS, REPLACED STEERING COLUMN ASSEMBLY AND PROGRAMMED 491 CC95 380.00 380.00 1 15926870 COLUMN 359.00 359.00 359.00 PARTS: 359.00 LABOR: 380.00 OTHER: 0.00 TOTAL LINE A: 739.00 *************** CUSTOMER PAY SHOP SUP/HAZ MAT FOR REPAIR ORDER 28.89 ALL GM PARTS HAVE A 12 MONTH 12000 MILE WARRANTY INCLUDING LABOR UNLESS SPECIFIED OTHERWISE. FOR YOUR CONVENIENCE WE NOW OFFER EVENING HOURS MON AND WED EVENINGS UNTIL 7:30 P.M. FROM ALL OF US AT COURTESY CHEVROLET, OLDS CADILLAC---THANK YOU



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

The factory warming constitutes all of the warmings with respect to the sale of this item/tieris. The Sealer hearby approach disching all warmings of other exposes or implied, including any implied warming of merchantality or fitness for a particular purpose. Seller neither sammes nor assume for it any hability in connection with the sale of this item/tieris.

STATEMENT OF DISCLAIMER

DESCRIPTION TOTALS LABOR AMOUNT 380.00 PARTS AMOUNT 359.00 GAS, OIL, LUBE 0.00 SUBLET AMOUNT 0.00 MISC. CHARGES 28.89 TOTAL CHARGES <u>767.89</u> LESS INSURANCE 0.00 SALES TAX <u> 19. 39</u> PLEASE PAY

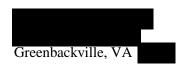
787.28

THIS AMOUNT

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

(DATE) CUSTOMER SIGNATURE

February 3, 2011



Service Request: 71-592949817

Customer Relationship Specialist: Marv Henry

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$787.28.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.





To;	Ger	eral Motors	From:	<u>-</u>	
Fax:	866	-962-2868	Pages:	3	
Phone:	1-80	0-204-0261	Date:	1/15/2008	
Re:	Reir	mbursement	CC:		
□ Urge	ent	□ For Review	☐ Please Comment	☐ Please Reply	□ Please Recycle

• Comments: Please find a copy of the reimbursement form and invoice for a repair that I had parformed on my vehicle. I originally sent this information in on December 18, 2007 but it was suggested, by a representative that I fax a copy as well. The case reference number in association with this reimbursement form is 71-592949817. This is in response to a letter that I received from General Motors.

My contact information is on the claim form.

Thank you and have a wonderful day.

07126

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12/18/07
17-Digit Vehicle Identification Number (VIN): 1612852F75
Mileage at Time of Repair: 63/86 Date of Repair: 4/19/07
Claimant Name (please print):
Street Address or PO Box Number:
City: Green backuille State: VA ZIP Code:
Daytime Telephone Number (include Area Code): _
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 787.28
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

21687

249354

Courtesy

⊏⊒Chevrolet ⊘Oldsmobile ∰*Caddlac* *INVOICE* D dmarvo's Hometown Dealer!

1531 North Salisbury Blvd.

Direct Service Unes (410) 749-7097 (410) 749-7098 (410) 749-7100 S/LISBURY, MD, 21802-1838 SALISBURY, MD PAGE 1 HOME: BUS: 472 STEPHEN TOWNSEND <u>SERVICE_ADVI</u>SOR: COLOR MAKE/MODEL AT AR U 1G1ZS52F75F 05 CHEVROLET MALIBU BLUE <u>63188/63188</u> RATE RAYMERE DEL DATE 04DEC04 DD WAIT 19APRO7
OPTIONS: ST CASH 19APR07 READY STK: 105136 DLR: 14063 ENG: 2.2 Liter MFI DOHC TRN: MXO 07:49 19APR07 13:01 19APR07 LIST NET
A CUST STS POWER STERRING LIGHT IS COMING ON THE DASH -- CHECK AND ADVISE E7680 DIAGNOSIS, REPLACED STEERING COLUMN ASSEMBLY AND PROGRAMMED 380.00 491 CC95 359.CO 1 15926870 COLUMN 359.00 359.00 PARTS: 359.00 LABON: 380.00 CTBER: 0.00 TOTAL LINE A: 739.00 Had pro legerapy race. Bry sprelegarappi yo CUSTOMER PAY SHOP SUP/HAZ MAT FOR REPAIR ORDER 28.89 ALL GM PARTS HAVE A 12 MONTH 12000 MILE WARRANTY INCLUDING LABOR UNLESS SPECIFIED 3 - 6 4 BO BERNER OF BERNER FOR FOR FOR FEET (SECTOR FOR BEET) OTHERWISE. FOR YOUR CONVENIENCE WE NOW OFFER EVENING HOURS MON AND WED EVENINGS UNTIL 7:30 P.M. FROM ALL OF US AT COURTESY CHEVROLET, OLDS
CAOTLLAC THANK YOU a valas valas palais valas kasas kasas kasas kasas kasas ta or 1900 km kasas kasa <u>ar san dag sagrago kelara, malalahan merupakan bidakan dagan Jawa Jawa Baratan di Baratan dagan Jawa Jawa Jawa</u> recorded the content of the content of the first file and the content of the cont a ilia da laba kan ilia kan kan kanda kan kan kan kan kan kan kan kan da 1960 (1961). Ka de recident con the Tan William Reserve ... E.....uu. Lia paalaasi laaluaasi laad ah interior

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DRAIGR, CENERAL MANAGER OR AUTHORIZED PERSON (SIGNED)

STATEMENT OF DISCLAIMER De lettery wearanty controller all of the warmeness with respect to the warmeness with respect to the warmeness with respect to the warmeness with respect to the warmeness warmeness and warmeness and warmeness of may be a supplied to the warmeness of a puriously purpose, seller neither surmeness nor authorities. neither sources nor a say other person to for it may fishibly in an with the sale of this a willow river

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TOTALS CONTROL CRIPTION LABOR / MOUNT 380.00 PARTS A HOUNT 359.00 GAS, OIL LIBE 0.00 SUBLET VMOUNT 0.00 MUSC. CLIARGES <u> 28. 89</u> TOTAL CHARGES 767.89 LESS INCURANCE 0.00 SALES T.X <u> 19. 39</u> PLEASE PAY 787.28

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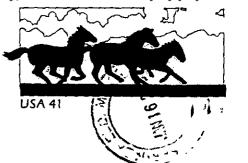
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THIS ALTOUNT

Indian Orchard, MA

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



Reinbursement Department P.O. Box 33170 Detroit, MI 48232-5170

JAN 2 1 2008

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 0ct-3,2007
17-Digit Vehicle Identification Number (VIN): 1617552Fa5F
Mileage at Time of Repair: 62260 Date of Repair: 10-3-07
Claimant Name (please print):
Street Address or PO Box Number:
City Indian Orchard State: MA ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code): SAME
Amount of Reimbursement Requested: \$ 628.49 (625.49)
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



CHEVROLET

INVOICE

BALISE CHEVROLET

440 West Columbus Ave., Springfield, MA 01105 Service (413) 734-6498 Fax (413) 734-4421

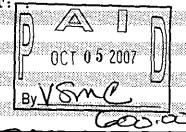
ORIGINALPAGE 1 INDIAN ORCHARD, MA HOME: BUS: ERVICE ADVISOR: 4976 ANDREA J DULUDE COLOR YEAR MAKE/MODEL VIN LICENSE MILEAGE IN/ OUT TAG SILVER 05 CHEVROLET MALIBU 1G1ZS52F25F <u>62260/62260</u> DEL DATE PROD. DATE WARR. EXP. PROMISED PO NO. RATE PAYMENT INV. DATE 09FEB05 IS 17:01 030CT07 CASH 050CT07 R.O. OPENED READY OPTIONS: STK: C10870L DLR: 32027 ENG:2.2 Liter MFI DOHC TRN:A AXL:RAY 030CT07 050CT07 LINE OPCODE TECH TYPE HOURS LIST TOTAL A CUST STATES THE POWER STEERING LIGHT CAME ON AND THE WHEEL LOCKED UP, PLEASE ADVISE INFO REPLACED POWER STEERING RACK 8836 CPC 187.00 187.00 1 15858368 GEAR 272.35 272.35 272.**3**5 A4W FOUR WHEEL ALIGNMENT 8836 CPC 1.40 89.95 89.95 INFO REPLACED POWER STEERING TORQUE SENSOR 8836 CPC 2.00 183.31 183.31 1 15926870 COLUMN 359.00 359.00 359.00 2 9594683 NUT, WHL 8.68 8.68 17.36 62260 REPLACED STEERING COLUMN DUE TO A DEFECTIVE TORQUE SENSOR REPLACED RACK-N-PINION GEAR DUE TO A LOOSE RIGH T SHAFT. ALIGNED VEHICLE B 205-6898 PHONE CUSTOMER CONTACT PHONE NUMBER 99 MR SUBLET LIC#: N CPC 0.00 EST: 0.00 030CT07 13:52 SA: 497

EST: 50.00

030CT07

13:52 SA: 497

CONTACT:



ARE YOU "COMPLETELY SATISFIED" WITH THE SERVICE WE PROVIDED? IF NOT, PLEASE CALL US AT 413 -734-6498. YOU MAY RECEIVE A SURVEY FROM CHEVROLET. WE AT BALISE APPRECIATE YOU COMPLETING THE SURVEY AS IT HELPS US TO SERVE YOU BETTER IN THE FUTURE. WE ARE ALSO EXPANDING OUR PARTS & SERVICE DEPT. TO BETTER SERVE YOU.

BALLISE 08.49

CHEVROLE

BALISE CHEVROLET

440 West Columbus Ave., Springfield, MA 01105 Service (413) 734-6498 Fax (413) 734-4421

STATEMENT OF DISCLAIMER

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

DESCRIPTION	TOTALS
LABOR AMOUNT	460.26
PARTS AMOUNT	648.71
GAS, OIL, LUBE	_ 0.00
SUBLET AMOUNT	0.00
MISC./ENVIR. CHARGES	0.00
TOTAL CHARGES	1108.97
LESS INS./COUPONS	0.00
SALES TAX	32.44
PLEASE PAY THIS AMOUNT	1141 41

Work Order: R000001

Chevrolet: Malibu: 2005-07 (except 2004-05 Classic): except SS Models

Front: Left

Actual . Before	Specified Range
-1.0°	-1.6° -0.1°
	2.3° 3.8°
0.12°	0.00° 0.20°

Camber Caster Toe SAI Included Angle Turning Angle Diff.

Actual	Before	Specified Range
-0.7°		-1.2° 0.4°
		2.3° 3.8°
0.12°		0.00° 0.20°
		

Front: Right

Front

Cross Camber Cross Caster Cross SAI Total Toe Cross Turn Diff.

Actual	Before	Specified Range			
-0.3°		-1.2° 0.4°			
		-0.8° 0.8°			
0.24°		0.00° 0.40°			

Rear : Left

Actual Before Specified Range
-1.0° -1.3° -0.3°
0.09° 0.00° 0.20°

Camber Toe

		=		
Actual	Before	Specified Range		
-0.9°	-1.3° -0.3°			
0.04°		0.00° 0.20°		

Rear: Right

Rear

Cross Camber Total Toe Thrust Angle

Actual	Before	Specified Range			
-0.1°	Ţ				
0.12°		0.00° 0.40°			
0.03°		-0.30° 0.30°			

SALES DRAFT

BALISE CHEVROLET/OLDS P O BOX 2320 SPRINGFIELD, MA 01101 TERMINAL 0965500

279020801939 10/05/2007 16:49:13

MIC AUTH. TRANS. ID. MPLBUTUNU INVOICE 29034 He2 AUTH. CODE 042072

SALE TOTAL

\$100.00

CUSTOMER COPY

SALES DRAFT

BALISE CHEVROLET/OLDS P O BOX 2320 SPRINGFIELD, MAL01101 TERMINAL 0965508

279020801999 10/05/2007 16:47**:**93

AUTH, TRANS. ID. 167278749878244
INVOICE 29033 He2
AUTH, CODE 138149

SALE TOTAL

\$500.00

CUSTOMER COPY

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO.

³ DATE → ⁴ 02/15/08

*******577 DOLLARS

XXXX85 CENTS

AMOUNT

North American Operations General Motors Corporation Disbursement Account

INDIAN ORCHARD MA ORUMA.

The Chase Manhattan Bank, N.A. Syracuse, New York

AUDIT

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK CHECK NO. BB 000000279 PAYMENT DATE VENDOR NAME 02/15/08 REGISTER NO DESCRIPTION DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT INVOICE DATE DISC. AMOUNT NET AMOUNT .00 02/14/08 VM-1-9XTS4F 71-592974690.1-9XTS4F 00.0000 577.85 577.85 1G1ZS52F25F . .; 9. 8. ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REINBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 TOTAL 577.85 .00 577.85 February 3, 2011



Service Request: 71-592973690

Customer Relationship Specialist: Jane West

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we are happy to inform you that we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$577.85.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

CHECK NO.

DATE 02/04/08

\$1.0 \$2.0 0.000

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year and some of the govern

AMOUNT 5 1995 ********************************

PAY TO THE ORDER OF

SPRINGFIELD OH

North American Operations General Motors Corporation Disbursement Account \$ 75

The Chase Manhattan Bank, H.A. Syracuse, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. BB 000000135 VENDOR NAME 02/04/08 REGISTER NO. INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 02/01/08 . VM 1-9UF00C 71-593089831.1-9UF00C 00,0000 100.00 100.00 ·. 00 1G2ZG528054 <u>్లా</u>ల్లు 448/14 ar Super-

TOTAL

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ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT\OR GUESTIONS CALL 800-462-8782

100.00

.00

February 3, 2011



Service Request: 71-593089831

Customer Relationship Specialist: Faye Saunders

Dear

We sincerely regret that you experienced a concern with your 2005 Pontiac G6, which resulted in an unexpected repair expense to you.

We value you as a Pontiac owner and your satisfaction with our products is a high priority. As we discussed over the phone, we believe you are entitled to a reimbursement. We have enclosed a check in the amount of \$100.00.

We look forward to keeping you in our Pontiac family. If you have any future questions, please feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

BILLINGS, MT

RETURN RECEIPT REQUESTED



8E05 6269 2000 0661 2002

UNITED STATES

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18 ZII.

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

REIMBURSEMENT DEPARTMENT P.O. BOX 33170 **DETROIT, MI 48232-5170**

4623235170 8050

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CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant				
Date Claim Submitted: 12-13-67				
17-Digit Vehicle Identification Number (VIN): 1G1ZT 5 2805 F				
Mileage at Time of Repair: 41,447 Date of Repair: 03-09-07				
Claimant Name (please print):				
Street Address or PO Box Number:				
City: BILLINGS State: MONTANA ZIP Code:				
Daytime Telephone Number (include Area Code):				
Evening Telephone Number (include Area Code):				
Amount of Reimbursement Requested: \$ 702.11				
The following documentation must accompany this claim form.				
Original or clear copy of all receipts, invoices, and/or repair orders that show:				
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt) 				
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter. Claimant's Signature:				

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261



CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



DENNY MENHOLT

CHEVROLET HUMMER

3000 KING AVE. WEST - BOX 80430 **BILLINGS, MONTANA 59108** PHONE (406) 896-3100

S ORIGINAL

CUSTOMER NO. 38475		TONE SPAUL	DING	2404 TG NO	0566	\\\03\/0\\\9/07\\	CVCS520127
		LABOR RATE	1	MILEAGE	•	CHARCOAL/	STOCK NO.
BILLINGS, MT		YEAR/MAKE/MODEL 05/CHEVROL	ET/MALIBU	/4 DOOR S	ÈBAN	DELIVERY DATE	DELIVERY MILES
.,		TG TO Z T	5 2 8 0	5 F		SELLING DEALER NO.	PRODUCTION DATE
		F.T. E. NO.		P. O. NO.	J.:	ⁿ 03709/07	REPRINT# 1
	BUSINESS PHONE	COMMENTS					мо: 41449
TOTALS					******	STATEMENT	OF DISCLAIMER
[.] E E. E	CK NO. [] RCARD [] DISCOVER] OTHER [] CHARGE ***********************************	* * *	TOTAL P TOTAL S TOTAL G TOTAL M TOTAL M	ABOR ARTS UBLET0.G ISC CHG. ISC DISC AX	368.80 0.00 0.00 21.81 0.00 0.00	The factory warranty constitutes all of the warranties with respect to the sale of the item/items. The Seller hereby expressed disclaims all warranties, either express of implied including any implied warrants.	

CUSTOMER SIGNATURE

DUPLICATE INVOICE

702.11 authorizes any other person to assume for it any liability in connection with the sale of this item/items. In the event (Frontier Chevrolet) takes any action to enforce its rights, whether hereunder or otherwise, (Customer) agrees to pay all of (Frontier Chevrolet) costs and expenses, including reasonable attorney's fees.

> FOR PROPER DISPOSAL OF MATERI-ALS GENERATED AS A RESULT OF REPAIRS TO YOUR VEHICLE, A FEE FOR DISPOSAL OF HAZARDOUS WASTE WILL BE MADE AT THE RATE OF 5% OF THE LABOR CHARGE, MINI-MUM CHARGE - \$2.00 MAXIMUM CHARGE - \$35.00.

> LIMITED WARRANTY: LABOR GUAR-ANTEED 90 DAYS OR 4,000 MILES, WHICHEVER COMES FIRST, PARTS AND ACCESSORIES ARE COVERED 12 MONTHS OR 12,000 MILES, WHICH-EVER COMES FIRST, FROM DATE OF DEALER INSTALLATION. A FINANCE CHARGE WILL APPLY IF BALANCE IS UNPAID ONE MONTH FROM CLOSING DATE. FINANCE CHARGES ARE COM-PUTED AT A RATE OF 11/2% PER MONTH - A.P.R. = 18%.

Thank your For Business

PAGE 2 OF 2

CUSTOMER COPY

[END OF INVOICE] 02:07pm

DENNY MENHOLT

CHEVROLET A HUMMER

> 3000 KING AVE. WEST - BOX 80430 **BILLINGS, MONTANA 59108** PHONE (406) 896-3100



USTOMER NO. 38475		TONE SPAULDING	2404 TAG NO 056	6	103 09 /07	CVC\$52012
		LABOR RATE L			CHARCOAL/	STOCK NO.
DTI I TNES - MT		YEAR/MAKE/MODEL 05/CHEVROLET/MALIBU			DELIVERY DATE	DELIVERY MILES
BILLINGS, MT		VEHICLE 1.0 NO. Z T 5 2 8 0			SELLING DEALER NO.	PRODUCTION DATE
		F.T.E.NO.	P. O. NO.		[₽] 03709/07	DEDDANT#
	TBUSINESS PHONE	COMMENTS			03/09/07	REPRINT#
NR# 1 CHARGES						MO: 4144
IS A WARNING VERIFIED COM AN INTERNAL	ITES THAT THE POWER S' CHIME THAT COMES ON	TECH(S):2589 TEERING GETS STIFF AND THERE 645 SYMPTOM 00, FOUND SENSOR VERIFIED FIX		11.50	The factory warranty warranties with resp item/items. The Sel disclaims all warrant implied, including an merchantability or fi	ect to the sale of the ler hereby expressives, either expressives in implied warranty tness for a particu
ARTSQTYFP-NUMBE 1 15926	RDESC 870 COLU	RIPTION······LIST PRICE-UN] NN 6.518 388.80 TOTAL	368.80 3	68.80 68.80	purpose. Seller ne authorizes any other it any liability in con of this item/items. I Chevrolet) takes any	person to assume to nection with the so n the event (Front
1 101ALS		LABOR PARTS		11.50	rights, whether here (Customer) agrees t	aunder or otherwis
OB# 2 CHARGES	JOB#	JOURNAL PREFIX CVCS JOB#		00 20	Chevrolet) costs and reasonable attorney	d expenses, includi
CUSTOMER REC PERFORMED VE PERFORMED VE OF NEEDED RE	UESTS VEHICLE INSPEC HICLE INSPECTION HICLE INSPECTION AND PAIRS	ADVISED SERVICE CONSULTANT			REPAIRS TO YOU FOR DISPOSAL WASTE WILL BE MOF 5% OF THE LAB MUM CHARGE - CHARGE - \$35.00.	OF HAZARDON MADE AT THE RA BOR CHARGE, MII
ISCCODEDES DB # A SS SHC	CRIPTION	2 JOURNAL PREFIX CVCS JOB# CONTROL NO TOTAL		21.81 21.81	LIMITED WARRAM ANTEED 90 DAYS WHICHEVER COM AND ACCESSORII 12 MONTHS OR 12 EVER COMES FIRE DEALER INSTALLA CHARGE WILL API UNPAID ONE MON DATE. FINANCE CI PUTED AT A RA MONTH - A.P.R. = 1	G OR 4,000 MILE MES FIRST. PAR ES ARE COVERI ,000 MILES, WHIC ST, FROM DATE (ATION. A FINANCE PLY IF BALANCE ITH FROM CLOSIN HARGES ARE CO ITE OF 1½% PI 18%.
					Thank For Bu	your your siness

PAGE 1 OF 2

CUSTOMER COPY

[CONTINUED ON NEXT PAGE] 02:07pm

DENNY MENHOLT FRONTIER C 3000 KING AVE WEST BILLINGS, MT 59102

MAR 10, 2007 08:42AM

TERM :

5

MERCH: 342600532580

REF #: 001

ACT #:

CARD : VISA

SALE:

\$ 702.11

RETR REF#: 706916512175

APPROVAL CODE: 441642

I AGREE TO PAY ABOVE TOTAL AMOUNT ACCORDING TO CARD ISSUER AGREEMENT

SIGNATURE

CUSTOMER COPY

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO. 213

DATE 01/18/08

The Chase Manhattan Bank, N.A. Syracuse, New York

XXXXXXXXXXXXX702 DOLLARS

XXXX11 CENTS

AMOUNT ***************702.11

North American Operations General Motors Corporation Disbursement Account

PAY TO THE ORDER OF

BILLINGS MT

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

CHECK NO.

PAYMENT DATE

01/18/08

DETACH BEFORE DEPOSITING CHECK

VENDOR NAME

BB 000000209

REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/17/08 VM 1-9TDDHQ 71-593175289.1-9TDDHQ 00.0000 702.11 .00 702.11 1G1ZT52805F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 M3

TOTAL

702.11

.00

702.11

February 3, 2011



Service Request: 71-593175289

Customer Relationship Specialist: Anne Parks

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$702.11.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530

CHECK NO.

50-937

DATE 02/15/08

The Chase Manhattan Bank, N.A. Syracuse, New York

AMOUNT -*****************609.80

North American Operations General Motors Corporation Disbursement Account

CEDAR RAPIDS -10-;O

SIGNATURE

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

HNFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

VENDOR DUNS NO.

BB 000000361

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

CHECK NO.

09/15/08

DETACH BEFORE DEPOSITING CHECK

PAYMENT VENDOR NAME

ENDOR NAME		<u> </u>		Phoenix,	AZ 85082-	2530	DATE	02/15/08	3
REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBE	iR .	% DISC.	INVOICE AN	TOUNT	DISC. AMOUNT	NET AMOUN	T
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REIMBU	RSEMENT OR QUES	ECK CONSTITUTES FUL TIONS CALL 800-462-	.E RESULUI	TON LOK	M3				

TOTAL

609.80

.00

609 . 80

79AN 2 4 2008 10 1 + Danactmen

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

48232+5170 bhilliadhliadhadhadhadhadhaadh

DES MOINES IA 503

ji J

Cedar Rápids, IA

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 1/22/08
17-Digit Vehicle Identification Number (VIN): 1/62-Z 6-528854
Mileage at Time of Repair: 43024 Date of Repair: 8/10/07 + 7/23/07
Claimant Name (please print):
Street Address or PO Box Number:
City: <u>Cedar Rapids</u> State: <u>IA</u> <u>ZIP Code: _</u>
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ See 71-5931-83066 else 64.84
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense Lincurred for the repair covered by this letter. -Claimant's Signature

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261



CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- Approved, you will receive a check.
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Pontiac Customer Assistance Center at 1.800.620.7668 (TTY 1.800.833.7668).



BENSON MOTOR INC MID AMERICA BEVERAGE BODIES









100 South 16th				•		
STOMER No. 28467	DAVID A	SCARLETT	326 TAG	No.	07/23/07	BUCS15822
	LABOR RATE 80.00	LICENSE No.	MILEAGI	42,640	COLOR /	STOCK No.
	YEAR / MAKE / MC			72,010	DELIVERY DATE	DELIVERY MILES
AMES, IA	05/PONTI				SELLING DEALER NO.	PRODUCTION DATE
	F. T. E. No.	G 5 2 8 8 5	P.O. No.		R.O. DATE	
BUSINESS PHONE	COMMENTS				07/23/07	
BOR & PARTS			·	·		MO: 4264
STEERING HOUR POMER STEERING WILL RANDOMLY QUIT THE ROAD, MAY WORK AGAIN AFTER RI TECH II SCAN YIELDED CO545 SYMPTO TORQUE SENSOR DIC. UNABLE TO DUP! FOUND LARGE POWER WIRE FOR AUDIO NEXT TO COLUM WIRING WHICH MAY CO NO TROUBLE FOUND AT THIS TIME, RI WIRING.	ESTART, ADVISE OM 00 STEERING LICATE CONCERN EQUIPMENT RUN) AUSE ELECTRICAI	E DRIVING DOWN COLUMN SHAFT AT THIS TIME. NING RIGHT L INTERFERENCE	. '	64.00	·	
	J08 #	1 TOTAL LABOR &	PARTS	64.00		
SCCODEDESCRIPTION		·····CONTROL NO··		3.20		
B # A SS SHOP SUPPLIES B # 1 ISUSTU ISU STUDENT DISCOUNT		TOTAL -	MICC	-6.40 -3.20		
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STOMER HEREBY ACKNOWLEDGES RECEIVING		• • • • • • • • • • • • • • • • • • • •				
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BENSON MOTOR INC MID AMERICA BEVERAGE BODIES









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20407		ADVISOR	BILL C	106	No.	INVOICE DATE	INVOICE No.
		MATTHEW LABOR RATE	LICENSE No.	496	-	08/10/07 COLOR	BUCS1616
		80.00			43,024	7	0.001.10.
		YEAR / MAKE / I		 		DELIVERY DATE	DELIVERY MILES
MES, IA		05/PONT					
		VEHICLE I.D. No.	2 G 5 2 8 8	5 4		SELLING DEALER NO.	PRODUCTION DATE
		F. T. E. No.		P.O. No.		R.O. DATE	
						08/09/07	REPRINT#
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			TOTAL	INVOICE \$	609.80		•
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CUSTOMER SIGNAT					41	l	/-
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CUSTOMER SIGNAT	•						

February 3, 2011



Service Request: 71-593183066

Customer Relationship Specialist: Lance Evans



Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we are happy to inform you that we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$609.80.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.



BEC 19 ME



Reimbursement Department P.O. BOX 33170 Aetroit, MI 48232-5170

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

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CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant								
Date Claim Submitted: 12/14/07								
17-Digit Vehicle Identification Number (VIN): 1G1ZT52895F								
Mileage at Time of Repair: 38,404 Date of Repair: march 20, 2007								
Claimant Name (please print):								
Street Address or PO Box Number:								
City: Cedar City State: Ut ZIP Code:								
Daytime Telephone Number (include Area Code):								
Evening Telephone Number (include Area Code):								
Amount of Reimbursement Requested: \$ 680.10								
The following documentation must accompany this claim form.								
Original or clear copy of all receipts, invoices, and/or repair orders that show:								
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt) 								
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense Lincurred for the repair covered by this letter.								
Claimant's Signature:								

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261



CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

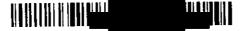
Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete the claim and offered the opportunity to resubmit the claim when the missing documentation is available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



to more if wan concern: When we poid for this repair job We charged an account to Bradghaw Cheurolet and paid them payments with the was paid off. there recepts are included in this litter. - We paid: \$100.00 on Mar 21st, 2007 5100.00 on April 5th, 2007 3) \$1 250.00 on May 10th, 2007 4) \$ 230.10 on Jun 05th, 2007 \$630,10



THE HEARTBEAT OF SOUTHERN UTAH SINCE 1927 360 North Main St. Cedar City, Utah 84720 Bus. Phone (435) 586-6595 Fax (435) 586-0125

SERVICE ADV	ISOR DAVID	JULANDER	(€ §		T E				(435) 586-012 radshawchev.c	
REPAIR ORDER:	DATE READY	STOCK NO.	VEHICLE IDENTIFIC	AVION	CUST.	Ю. ТА	G NO:	.O. NO.	INVOICE PRINTED	INVOICE NO.
20MAR07	21MAR07	. 10	G1ZT52895F:					1	21MAR07	36251
TIME IN	TIME READY	YEAR	MAKE & MODEL		TELEPHONE A	. OI	CUST PAY	DELIVERY DATE	PREPARED BY	S/A
14:07	16:53	05 CHEVRO	LET MALIBU				0.00	27JAN	05 71	710
MILEAGE IN	MILEAGE OUT	LICENSE NO.								
38404	38404	630UDY								

1	A CODI DIALED VER MILE DIDILAR TOMER DIBERTIO	1
	MESSAGE ON RADIO, CHECK AND ADVISE	
	E7680 CHECK SYSTEM, FOUND ELECTRONIC	
	POWER STEERING COLUMN HAS FAILED,	
	REPLACE COLUMN ASSEMBLY AND PROGRAM	
	715 CPC 282.00	
	1 15926870 COLUMN 359.00 359.00	
	B** GM GOODWRENCH MULTI-POINT INSPECTION	
	GW GM GOODWRENCH MULTI-POINT INSPECTION	
	715 INT	(N/C)

CUST STATES WEH WILL DISPLAY POWER STEERING

Business Hours:

Monday - Friday 8:00 a.m. - 5:00 p.m.

Sales/Service (435) 586-6595

Body Paint & Glass (435) 586-2511

Parts Dept. (435) 586-2416

Wrecker (After Hours) (435) 590-1187

Early Bird Drop-off Available

on North Side of Service Dept.

THANK YOU!

WE

APPRECIATE

SUBLET AMOUNT MISC. CHARGES TOTAL CHARGES 641.00 LESS INSURANCE SALES TAX 39.10 PLEASE PAY THIS AMOUNT 680.10

DESCRIPTION

LABOR AMOUNT

PARTS AMOUNT

GAS,OIL, LUBE

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

AS A GOODWRENCH SERVICE PLUS DEALER WE OFFER

- COMPETITIVE UP-FRONT PRICING
- COURTESY TRANSPORTATION (FREE SHUTTLE)

TOTALS

282,00

359.00

0.00

0.00

0.00

0.00

- LIFETIME GUARANTEE (SEE US FOR DETAILS)
- ASE CERTIFIED TECHNICIANS
- LUBE, OIL & FILTER ONLY \$24.95 (MOST CARS)
- CONVENIENT SERVICE HOURS (7AM 6PM)

YOUR PATRONAGE!

> CUSTOMER COPPERAL MANAGER OR AUTHORIZED PERSON (SIGNED)

DATE

16676

COMMENT AMOUNT PAID BY 100.00 CHK ROA

CEDAR CITY 23130

TOTAL RECEIVED: \$100.00

DATE-TIME: 05APR2007 15:22

CASHIER: LORNA

LOCATION: CASH DRAWER:

BRADSHAW CHEVROLET BUICK

ACCOUNTING DISTRIBUTION

CO	JOURNAL	co	ACCOUNT	AMOUNT	CONTROL	CONTROL2
1	56	1	20202	100.00		
		1	22000	-100.00	23130	

BRADSHAW CHEVROLET CO RECEIPT

17038

AMOUNT 250.00 PAID BY CHK COMMENT ROA

CEDAR CITY UT

TOTAL RECEIVED:

\$250.00

DATE-TIME: 10MAY2007 14:55

CASHIER: KRIS

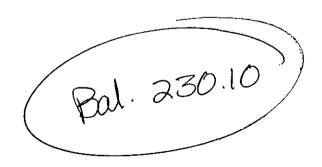
LOCATION:

CASH DRAWER:

BRADSHAW CHEVROLET BUICK

ACCOUNTING DISTRIBUTION

CO JOURNAL CO ACCOUNT AMOUNT CONTROL CONTROL2
1 56 1 20202 250.00
1 22000 -250.00 23130



BRADSHAW CHEVROLET CO RECEIPT

17274

AMOUNT 230.10

PAID BY CHK

COMMENT ROA

CEDAR CITY 23130

TOTAL RECEIVED:

\$230.10

DATE-TIME: 05JUN2007 14:50

CASHIER: KRIS

LOCATION: CASH DRAWER:

BRADSHAW CHEVROLET BUICK

ACCOUNTING DISTRIBUTION

CO	JOURNAL	CO	ACCOUNT	AMOUNT	CONTROL	CONTROL2
1	56	1	20202	230.10		
		1	22000	-230.10	23130	

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO.

DATE 01/18/08

XXXXXXXXXXXXXXX680 DOLLARS

****10 CENTS

AMOUNT *****************680.10

TO THE

VENDOR DUNS NO

VENDOR NAME

CEDAR CITY UT

North American Operations General Motors Corporation Disbursement Account

The Chase Manhattan Bank, N.A. Syracuse, New York

BB Q00000111

ALIDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

DETACH BEFORE DEPOSITING CHECK

CHECK NO.

PAYMENT DATE

01/18/08

REGISTER NO. DESCRIPTION INVOICE AMOUNT % DISC. DOC. REFERENCE NUMBER INVOICE DATE DISC. AMOUNT THUOMA T3R 01/17/08 | VM 1-9787EG .71-593286913.1-9787EG 00.0000 680.10 .00 680.10 1612T52895F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 680.10 .00 680.10 TOTAL

February 3, 2011



Service Request: 71-593286913

Customer Relationship Specialist: Diana Smith

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the instrument panel cluster that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$680.10.

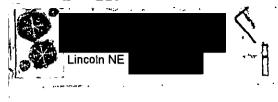
In order to assure completion of this special coverage, we are requesting that you contact your local dealership to set up an appointment to have your vehicle inspected.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.



LINCOLN NE 68

18 DEC 2007 PM 1 T



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

DEC 2 0 20931

Reimbursement Department PO Boy 33170

MI.

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12/17/07
17-Digit Vehicle Identification Number (VIN): /G/ZT548/5F
Mileage at Time of Repair: 55676 Date of Repair: 6-25-07
Claimant Name (please print):
Street Address or PO Box Number:
City: LINCOIN State: NE ZIP Code
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense Lincurred for the renair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261



CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

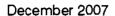
Your claim will be acted upon within 60 days of receipt.

If your claim is:

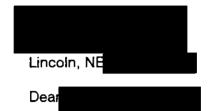
- Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).









As the owner of a 2005 model year Chevrolet Malibu, your satisfaction with our product is very important to us.

This letter is intended to make you aware that some 2005 model year Chevrolet Malibu vehicles may lose their power steering assist. This is caused by electrical input-signals within the steering column assembly. If the power steering assist is lost, a chime will be heard and the DIC will display a Power Steering warning message. The Service Vehicle Soon light will also illuminate. The vehicle can still be steered in a safe manner but will require greater driver effort at low vehicle speeds or when stopped.

<u>Do not take your vehicle to your Chevrolet dealer as a result of this letter unless you believe</u> that your vehicle has the condition as described above.

What We Have Done: General Motors is providing owners with additional protection for the steering column assembly. If this condition occurs on your 2005 Chevrolet Malibu within 7 years of the date your vehicle was originally placed in service or 70,000 miles, whichever occurs first, the condition will be repaired for you at no charge. Diagnosis or repair for conditions other than the condition described above is not covered under this special coverage program.

What You Should Do: Repairs and adjustments qualifying under this special coverage must be performed by a General Motors dealer. You may want to contact your GM dealer to find out how long they will need to have your vehicle so that you may schedule the appointment at a time that is convenient for you. This will also allow your dealer to order parts if they are not already in stock. Keep this letter with your other important glove box literature for future reference.

Reimbursement: The enclosed form explains what reimbursement is available and how to request reimbursement if you have-paid for repairs for the special coverage condition. Your request tor reimbursement, including the information and documents mentioned on the enclosed form, must be received by GM by December 31, 2008.

If you have any questions or need any assistance, just contact your dealer or the Chevrolet Customer Assistance Center between the hours of 8:00 AM and 11:00 PM, EST, Monday through Friday. They can be reached at 1.800.630.2438 (TTY 1.800.833.2438).





We are sorry for any inconvenience you may experience; however we have taken this action in the interest of your continued satisfaction with our products.

Scott Lawson

General Director,

Customer and Relationship Services

Enclosure 07126



011 10 001 F10 000 100 100 100 1

Chevrolet P.O. Box 909989 Milwaukee, WI 53209-9989

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07126 1G17T54815E

13 0007279

LINCOLN, NË

12-16-07

Reimbursement Department PO Box 33170 Detroit, MI 48232-5170

RE: Reimbursement for power steering assist

VIN: 1G1ZT54815F

Enclosed please find the necessary documentation for a \$50.00 refund for power steering work done on the 2005 Chevrolet Malibu with the above VIN.

As you can see, this repair was made in June of this year since we were having problems before you sent out notification.

The address on the HUSKER AUTO GROUP ticket was that of my son. He was driving the automobile at the time of repair and used his address.

Please send a \$50.00 refund to me at the address shown on the claim form.

Thank you,



INVOICE

Invoice #:506389

·· Tág #: T9569

Page 1 of 2

Service

Customer #: 325621

HUSKER AUTO GROUP Chevrolet, Pontiac, Cadillac & GMC

6833 Telluride Drive, Lincoln, NE 68521 (402) 479-7582 - (866) 583-3001

www.huskerautogroup.com

NET

LIST

TOTAL

300.14 409.26

(N/C)

EMAIL:			Ad	lvisor: 2874 HE	ATH WEST	ER 7	•		Customer Copy
COLOR	YEAR	M/	KE/MODEL		VIN		LICENSE	MILEAGE IN	MILEAGE OUT
TAN	.05	CHEVRO	OLET MALIBU	1G	1ZT54815F			55676	55676
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.		PAYMENT	INV. DATE	R.O. OPENED	READY
05JAN05		05JAN2005	17:30 28JUN07		109.95	GE	14DEC07	10:58 25JUN07	15:47 29JUN07
OPTIONS: ENG:3.	5 Liter SFI	WD4.7	7	1.0.			. <u>)</u>		

Service Department Hours

BUS:

OMAHA, NE

HOME

Monday - Friday 7:00 AM to 7:00 PM

Saturday 8:00 AM to 5:00 PM

Join Our

e-V.I.P. Club

15% Off

Your Next Service

Then receive by e-mail:

Exclusive Service & Parts Discounts

Warranty Updates

Recall Notices

New/Used Vehicle **Specials**

See Cashier for details land1a 270_1

LINE OPCODE TECH TYPE HOURS A C/S POWER STEERING LIGHT KEEPS POPPING UP S130 STEERING/SUSPENSION ČĎ 2901

300.14 409.26 1 15926870 COLUMN 55676 FAULTY POSITION SENSOR IN COLUMN .5 DIAG + 2.8 REPLACE COLUMN FOUND CODE C0460 #00, B1325 #03-FOLLOWED TREE STEERING-MESSAGE CAME BACK NEEDS SENSOR CO NOT APPROVE CO CAME BACK AND WANTED JOB DONE-REMOVED AND \ REPLACED COLUMN-LAST ATTACHING STEERING WHEEL FOUND THREADS FOR WHEEL PREDAMMAGED SEE LINE D

B C/S CD PLAYER INOP S180 ENGINE/BODY ELECTRICAL

22734878 RADTO 55676 CD PLAYER FAULTY .5 DIAG/+ 11.0 U2103 & U2100, b1325-tryed to reset radio, AND PULLED FUSE TO CYCLE B+-FOUND CD PLAYER NEEDS RERPLACED-CO NOT APPROVED-ALSO IN PROCEDU APPROVED-ALSO IN PROCEDURE CHARGED AND TESTED BATTERY-FAIDED TEST NEEDS BATTERY-CO NOT APPROVED CO CAME BACK AND WANTED NEW INSTALL INSTALL NEW AND CAL SET

C** ADD-ON OPERATION/GOODWILL APPROVED BY PARTS' WARRANTY CAUSE:

ADD ADD-ON OPERATION/GOODWILL APPROVED BY FC: PART#: COUNT:

CLAIM TYPE: AUTH CODE:

55676 LINES A AND D

D** C/S POWER STEERING LIGHT KEEPS POPPING UP CAUSE':

MISCELLANEOUS SUPPLIES AND MATERIALS:

A charge is included for materials and/or hazardous waste disposal (if applicable) used on your vehicle. Material items are: Nuts. bolts. washers, tape, pins, aerospray, shellac, solvent, rags, carburetor cleaner, towels, solder, battery cleaner, wire, window sealer, etc.

DISCLAIMER OF WARRANTIES: The factory warranty constitutes all of the warranties with either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and the seller neither assumes not authorizes any other person to assume

To Our Customers: We have found it is not prectical to itemize the supplies and materials used on each repair job. To do so would considerably add to our cost and labor charges. A standard charge for supplies and materials is made on each repair order The amount of this charge will be 15% of the total labor charge, up to a maximum of \$45,00. This will be shown in the totals section of this invoice. Experience has shown that

CUSTOMER SIGNATURE

APPOINTMENTS: (402) 479-7582

LABOR AMOUNT	
PARTS AMOUNT	
GAS, OIL, LUBE	
SUBLET AMOUNT	T C
MISC. CHARGES	Ĭ
TOTAL CHARGES	
ADJUSTMENTS	S
SALES TAX	
PLEASE PAY THIS AMOUNT	

THANK YOU!

INVOICE

Invoice #:506389

Page 2 of 2

Customer #: 325621

Service

HUSKER AUTO GROUP Chevrolet, Pontiac, Cadillac & GMC

6833 Telluride Drive, Lincoln, NE 68521 (402) 479-7582 - (866) 583-3001

www.huskerautogroup.com

NET

TOTAL

EMAIL:			Advisor: 28/4 HE	AIH WESII	er y	·		Customer Copy
COLOF	YEAR	/ MAKE/MODEL		VIN			MILEAGE IN	MILEAGE OUT
TAN.	05	CHEVROLET MALIBU	1G1	ZT54815F			55676	55676
DEL DAT	E PROD, DATE	WARR. EXP. RROMISED	PO NO.		PAYMENT	INV. DATE	R.O. OPENED	READY
05JANC)5	05JAN2905 17:30 28JUNG	07	109.95	GE	14DEC07	10:58 25JUN07	15:47 29JUN07
OPTIONS: EI	NG:3.5 Liter SFI	1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /		-			1X1 271	

Service Department Hours

BUS:

OMAHA, NE

Monday - Friday 7:00 AM to 7:00 PM

Saturday 8:00 AM to 5:00 PM

Join Our

e-V.I.P. Club 15% Off

Your Next Service

Then receive by e-mail:

Exclusive Service & Parts Discounts

Warranty Updates

Recall Notices

New/Used Vehicle Specials

See Cashier for details

LINE OPCODE TECH TYPE HOURS E7680 COLUMN ASSEMBLY, STEERING - REPLACE

2901 WC

15926870 COLUMN 21044092 RETAINER FRT FREIGHT

1 FRT FREIGHT FC: 6C

PART#: 15926870

COUNT: 1 CLAIM TYPE: B AUTH CODE: G

55676 NEW COLUMN HAS DISTORTED THREADS FOR S WHEEL 2.8 FOR NEW COLUMN FINISHING UP LINE A REPAIR LAST ATTACHING STEER ING WHEEL AND FIND THREADS FOR HOLD DOWN ARE PREDAMMAGED STEERING WHEEL WON'T FASTEN DOWN-HAD TO REMOVE COLUMN AGAIN AND INSTALL NEW COLUMN THIS ONE HAS GOOD THREADS AND CLEARED CODES TEST DRIVE WITH CAL PREFORMED OK

SUBL ENTERPRISE RENTAL CPOL

CUSTOMER HAS FIRST EXTENDED FOR \$1270.64 CUT HAS \$50.00 DEDUCT FAX TO 214-637-7482 AUTH#9014V.

30.00

30,00

YOU MAY RECEIVE A CUSTOMER SATISFACTION SURVEY FROM THE VEHICLE MANUFACTURER
IF YOU ARE LESS THAN "COMPLETELY SATISFIED"
PLEASE CONTACT US AT 402-479-7500
TOM CRAFT [GM.] DIRECT LINE 479 7520 KATIE WINFREY [IMPORTS] DIRECT LINE (47.9)

LIST

MISCELLANEOUS SUPPLIES AND MATERIALS:

A charge is included for materials and/or hazardous waste disposal (if applicable) used on your vehicle. Material items are: Nuts, bolts, washers, tape, pins, aerospray, shellac, solvent, rags, carburetor cleaner, towels, solder, battery cleaner, wire, window sealer, etc.

respect to the sale of this itemitisms. The sales hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or litness for a particular purpose, and the sales neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products.

To Our Customers: We have found it is not practical to itemize the many supplies and materials used on each repair job. To do so would considerably add to our costs and labor charges. A standard charge for supplies and materials is made on each repair ordor. The amount of this charge will be 15% of the total labor charge, up to a maximum of \$45.00. This will be shown in the totals section of this invoice. Experience has shown that our average charge covers the basest minimum of these items resulting in a savings to our

CUSTOMER SIGNATURE

APPOINTMENTS: (402) 479-7582

LABOR AMOUNT 435.07 PARTS AMOUNT 798.96 GAS, OIL, LUBE 0.00 SUBLET AMOUNT 30.00 MISC. CHARGES 0.68 TOTAL CHARGES 1264.7 **ADJUSTMENTS** 1*2*70 64 **SALES TAX** 55.93 PLEASE PAY THIS AMOUNT

THANK YOU!

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO. 213

DATE 01/22/08

XXXXXXXXXXXXXX50 DOLLARS

****00 CENTS

AMOUNT **************

North American Operations General Motors Corporation Disbursement Account

TO THE ORDER OF

The Chase Manhattan Bank, N.A. Syracuse, New York

LINCOLN NE

AUDIT

VENDOR DUNS NO.

BB 000000326

1

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

DETACH BEFORE DEPOSITING CHECK

CHECK NO. PAYMENT DATE

01/22/08

VENDOR NAME REGISTER NO. DESCRIPTION

INVOICE DATE

DOC. REFERENCE NUMBER

% DISC.

INVOICE AMOUNT

DISC, AMOUNT

NET AMOUNT

01/21/08 | VH 1-9TCJLS .71-593489652.1-9TCJLS 00.0000 50.00 .00 50.00 1G1ZT54815F

ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

TOTAL

H3

50.00

.00

50.00

February 3, 2011



Service Request: 71-593489652

Customer Relationship Specialist: Gavin Sanders

Dear :

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the power steering assist that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$50.00.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

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

February 3, 2011



Service Request: 71-593584750

Customer Relationship Specialist: Diana Smith

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$858.01.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO.

50-937 213

DATE 01/22/08

XXXX01 CENTS

AMOUNT *****************

North American Operations General Motors Corporation Disbursement Account

TO THE ORDER OF

HOMER GLEN IL

The Chase Manhattan Bank, N.A. Syracuse, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

CHECK NO. PAYMENT DATE

VENDOR NAME

VENDOR DUNS NO

BB 000000005

1

01/22/08

DETACH BEFORE DEPOSITING CHECK

REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/18/08 VM 1-9TIFJA 71-593584750.1-9TIFJA 00.000 858.01 .00 858.01 1G1ZT54815F

ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

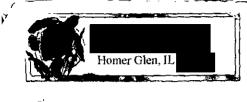
TOTAL

H3

858.01

.00

858.01





FOX VALLEY IL SOS



Reinburgement Department P.O. Box 33170 Detroit, MI. 48232-5170

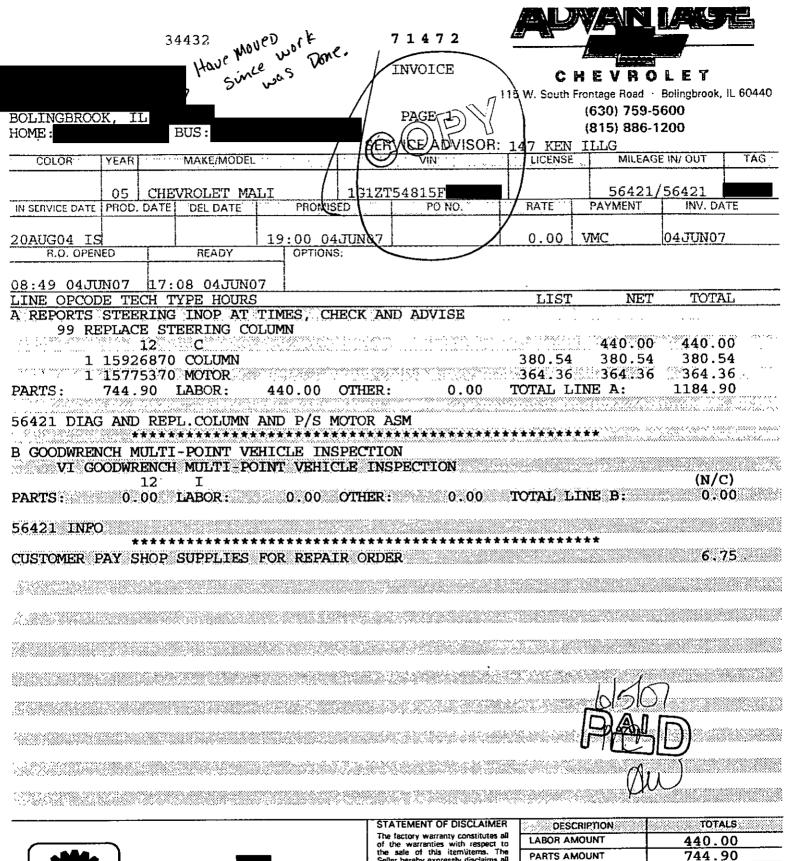
CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: Dec. 17, 2007
17-Digit Vehicle Identification Number (VIN): 1612T54815F
Mileage at Time of Repair: 56,42 Date of Repair: June 4, 2007
Claimant Name (please print):
Street Address or PO Box Number:
City: Homer Glew State: IL. ZIP-Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 1,251.78
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261







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

DESCRIPTION	IUIALS
LABOR AMOUNT	440.00
PARTS AMOUNT	744.90
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
ENV CHARGE/SHOP SUPPLIES	6.75
TOTAL CHARGES	1191.65
AMAZING DISCOUNTS	0.00
SALES TAX	60.13
PLEASE PAY THIS AMOUNT	1251.78

CUSTOMER SIGNATURE

ADVANTAGE CHEVY 115 N FRONTAGE RD BOLINGBROOK, IL 60440

Sale

ID: 72349384 06/04/07 Batch #: 156

Ref N: 6018 17:28:53

MAST

Appr Code: 055628

Invoice#: ₹₹₹₹

Total:

-- \$ 1251.78

Customer Copy THANK YOU!

FINANCE CHARGE Payments & Credits Previous Balance Minimum Payment Transactions New Balance **Due Date** \$321.54 \$321.54 \$0.00 \$1,420.61 \$1,420.61 \$42.00 Jul. 10, 2007 May. 10, 2007 — Jun. 15, 2007 Page 1 of 1 PLEASE PRY AT LEAST THIS AMOUNT

MasterCard Platinum Account

Your Account Information

TOTAL CREDIT LINE \$1,500.00 TOTAL AVAILABLE CREDIT \$79.39 CREDIT LINE FOR CASH \$1,500.00 **AVAILABLE CREDIT FOR CASH** \$79.39

Finance	Cha	rges	(Please	see reverse	for	important	into	rmation)
			ce rate ed to	Periodic rate	Co	rrespondir APR	ıg	FINANCE CHARGE
Purchases Cash	-		\$0.00 \$0.00	0.05247% 0.05545%	-	~19.15% 20.24%		~ -\$0.00 \$ 0.00



At Your Service 1-800-903-3837 To call Customer Relations or to report a lost or stolen card:

ANNUAL PERCENTAGE RATE applied this period: 0.00%



Send payments to: Capital One Bank · P.O. Box 60024 · City of Industry, CA 91716-0024



Sond inquiries to: Capital One · P.O. Box 30285 · Salt Lake City, UT 84130-0285 IMPORTANT INFORMATION ABOUT YOUR GRACE PERIOD; If you pay your balance in full every month by your due date, you will enjoy an interest-free grace period of 25 days on new purchases. Paying by your due date also helps you avoid late fees. Please see the back of your statement for more details and thank you for your business.

Payments, Credits & Adjustments 28 MAY PAYMENT

\$321.54-**Transactions** ENTERPRISE RENT-A-CAR BOLINGBROOK IL \$48.05 10 MAY DRIVER: LAUX THOMA RENTAL#: D142965 PH#: 630-378-1100

RETURN: 05/10/07 - BOLINGBROOK 3....10 MAY.... SPORTS AUTHORITY #0600 BOLINGBROOK IL \$11.53 7 ELEVEN #29910 Q39 BOLINGBROOK IL **18 MAY** \$2.14 MELIER INC #169 Q01 BOLINGBROOK IL 5 **21 MAY** \$8.54 04 JUN 6 ADVANTAGE CHEVY BOLINGBROOK IL \$1,251,78 **11 JUN** U-HAUL-A1-STORAGE-IN # ROMEOVILLE IL \$83.55 **13 JUN** SHELL OIL 27442227701 SUMMIT IL \$15.02

Capital One Home Loans offers a variety of no hassle home loan products, including first mortgages, refinance and dobt consolidation loans, as well as home equity loans and lines of credit. Our team of experienced professionals understands that your situation is unique so your loan solution should be too. You'll have the one-on-one attention i the same personal loan consultant from call to close. Visit www.capitalonehomeloans.com for more information. Capital One is an Equal Housing Lender,

0035 506

15 070615

PAGE 1 of 3

COLR240A

01086056

141548

PLEASE RETURN PORTION BELOW WITH PAYMENT

CapitalOne |

what's in your wallet?"

New Balance

Minimum Payment

Due Date

\$1,420.61

\$42.00

Jul. 10, 2007

PLEASE PAY AT LEAST THIS AMOUNT

Amount Endosed

Capital One Bank Idadaallidaaalli P.O. Box 60024 City of Industry, CA 91716-0024 Urbanallla dasHalladkindha alabahahahahahall

Account Number:

Please print address or phone number changes below using blue or black ink.

Address

Home Phone

Alternate Phone

E-mail address

ര

AIL ID NUMBER

141548

BOLINGBROOK, IL likallindaldidilandiladallinlistimiddak uew address

Homer Glen, IR.

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO. 213

DATE 01/22/08

XXXXXXXXXXXXXX504 DOLLARS

******50 CENTS**

AMOUNT *****************504.50

North American Operations General Motors Corporation Disbursement Account

BB 000000195

MCHENRY MS

The Chase Manhattan Bank, N.A. Syracuse, New York

VENDOR DUNS NO.

VENDOR NAME

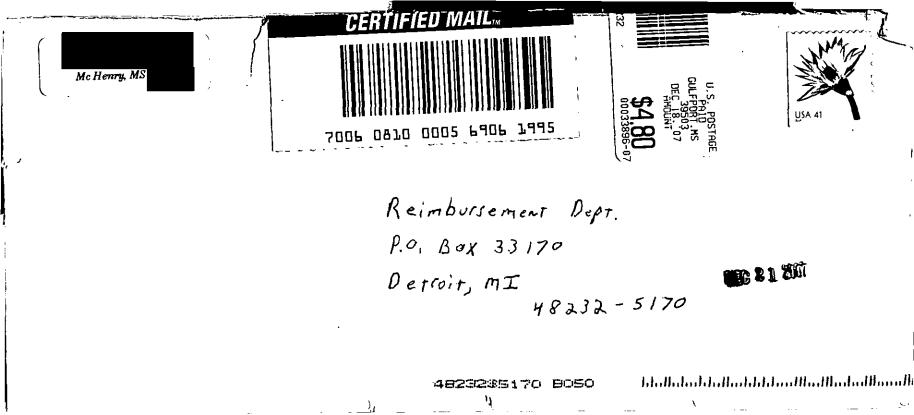
North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

DETACH BEFORE DEPOSITING CHECK

CHECK NO.

PAYMENT DATE 01/22/08

REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/21/08 VH 1-9TWH8C 71-594281301.1-9TWH8C 0000.00 504.50 .00 504.50 1G2ZH528054 ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEHENT OR QUESTIONS CALL 800-462-8782 H3



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 17 DeC 07
17-Digit Vehicle Identification Number (VIN): 1622 H 5 2 80 5 4
Mileage at Time of Repair: 38,415 Date of Repair: 17 Jan 07
Claimant Name (please print):
Street Address or PO Box Number:
City: mcHenry State: ms ZIP Code
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter. Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261



Page 03 of 03

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Pontiac Customer Assistance Center at 1.800.620.7668 (TTY 1.800.833.7668).



11011 AUTO MALL PARKWAY D'IBERVILLE, MISSISSIPPI 39540 (228) 392-1515

PAGE 1 OF 2

CUSTOMER COPY



3517 BIENVILLE BLVD. OCEAN SPRINGS, MS 39564 (228) 872-1525







CUSTOMER NO.	30744	ĴÏMMY GARI	IER :	25326 TAG	"01"/17"/07	"PNES13350
_		LABOR RATE	LICENSÉ NO.	MILEAGE 38,41	5 BL ACK/	\$16410A
MCHENRY,	MS	YEAS / PONTIA	C/G6/4 DOOR	SEDAN	ზ5731705	DELIVERY MILES 19
MCHENKI,	1413		5 2 8 0 5		SELLING DEALER NO.	PRODUCTION DATE
		F. T. E. NO.	<u> </u>	P. O. NO.	'01% ቹ5/07	
		COMMENTS				
ABUR & PARTS # 1 068UZ	STEERING/SUSPENSION POWER STEERING INOP REPLACED STEERING COLUMN AN		S):22276	√300.0	SERVICE D MON FRI. 7:0	
PARTS·····Q DOB # 1 DOB # 1	TYFP-NUMBER 1 15926870 1 15775370	-DESCRIPTION COLUMN 6.518 MOTOR 6.605	LIST PRICE-UNIT 359.00 330.84 JOB # 1 TOTAL	F PRICE- 359.00 359.0 330.84 330.8 PARTS 689.8	4 4 ALL EXPRE	
•		JOB #	1 TOTAL LABOR 8	§ PARTS 989.8		ANY, BY MAN' OR SUPPLIE
# 2 01BUZ	MAINTENANCE REPLACE WIPER BLADES REPLACED DRIVER WIPER BLADE		S):22276	12.0	O ARE THEIR DEALERS, UI	S, NOT THE NLESS OTHE IDED IN WRI
ARTSQ OB # 2 OB # 2	TYFP-NUMBER 1 15779415 1 15779416	BLADE 10.146 BLADE 10.146	36.00 36.00 JOB # 2 TOTA	36.00 36.0 36.00 36.0 L PARTS 72.0	ING AND F THE BUYER ER. MISSISS	
		JOB #	2 TOTAL LABOR (& PARTS 84.0	THE BUYER	
# 3 01BUZ03	-F1P1 LOF CUSTOMER STATES: PERFORM LO SERVICE INCLUDES: LUBE, CHA PERFORM LOF SERVICE AS ABOV	F. (F1P1) NGE OIL & FILTER, SAF		INTERN	RIGHTS.	
ARTSQ 10B # 3 JOB # 3 JOB # 3	TY FP-NUMBER	-DESCRIPTION OIL CHANGE KIT OIL FLTR 1.836 OIL10W30Q 8.800	LIST PRICE-UNI JOB_# 3 TOTA	INTERN INTERN INTERN	AL AL	
		JOB #	3 TOTAL LABOR	& PARTS 0.	00 1 9	\sim
)# 4 05BUZ04	MISC. NOISE CHECK LOUD TIRE NOISE COMING FROM TIRE DESIGN NO REPAIR DONE	HOURS: TECH	(S):22276	0.) 	
PARTSC	RTYFP-NUMBER	-DESCRIPTION	LIST PRICE-UNI JOB # 4 TOTA	T PRICE- L PARTS 0.	00	
			4 TOTAL LABOR	& PARTS 0.	00	
)# 5+21BUZ	RENTAL	HOURS: TECH	(S):22276	INTERN	AL Thom	6. Van
PARTS(TYFP-NUMBER	DESCRIPTION	LIST PRICE-UNI JOB # 5 TOTA		00 711 -	k You, preciate usiness!
	•	J0B #	5 TOTAL LABOR	& PARTS 0.	oo we ap	preciate
	PO#VEND INV#-INV.DATI 133507 653059 01/16/0			INTERN		usiness!

. [CONTINUED ON NEXT PAGE] 10:39am

11011 AUTO MALL PARKWAY D'IBERVILLE, MISSISSIPPI 39540 (228) 392-1515



3517 BIENVILLE BLVD. OCEAN SPRINGS, MS 39564 (228) 872-1525







CUSTOMER NO. 30744	JIMMY GARN	IER	25326 TA		"01717/07	"ÞNES133507
	LABOR RATE	LICENSE NO.	MILEAGE	38,415	Brack/	*16410A
MCHENRY, MS	Y65/P6NYTA	/G6/4 DOO	R SEDAN		፝ ପઽ፞፞፞፟፝ጛ፟ጟ፝ጟ፞፞፞	DELIVERY MILES 13,319
	VENCE DAOZ H	5 2 8 0	5 4		SELLING DEALER NO.	PRODUCTION DATE
	F. T. E. NO.	. Printed Po	P. O. NO.	•	'01%15/07	
	COMMENTS					
	· d		SUBLET	0.00		EPT. HOUAS
MISCCODEDESCRIPTION	SPOSAL		- MISC	5.00 5.00	MON FRI. 7:0	0 A.M. + 5 2 . F
COMMENTSMANOAL SERVICE DEPT			• • • • • • • • • • • • • • • • • • • •			
TOTALS·····						ESSED - WAR- ANY, BY MANU-
IMPORTANT! IN THE NEAR FUTURE YOU WILL RECEIVE FROM GENERAL HOTORS. IF FOR ANY REASON YOU CAN A COMPLETELY SATISFIED RATING, PLEASE CALL BERI 392-1515 OR 872-1525. YOUR COMPLETE SATISFACTION IS OUR NO. 1 CONCERT THANK YOU	NOT GIVE US NARD DUBUISSON	TOTAL PA TOTAL SI TOTAL G TOTAL HI TOTAL H	ABOR VRTS JBLET O.G ISC CHG. ISC DISC VX	312.00 761.84 0.00 0.00 5.00 0.00 75.52	FACTURER ARE THEIR DEALERS, UI WISE PROVI	OR SUPPLIES IS, NOT THE NLESS OTHES DED IN WRITH URNISHED TO BY THE DEALS
. CUSTOMER SIGNATURE		TOTAL IN	VOICE \$	1154,36	ER. MISSISS WARRANTY	IPPI'S IMPLIED LAW MAY GIVE R ADDITIONAL

Thank You, We appreciate your business!

PAGE 2 OF 2

CUSTOMER COPY

[END OF INVOICE] 10:39am

SALES DRAFT

MANDALL PONTIAC BUICK 11011 AUTO MALL PARKWAY D'IBERVILLE, MS 39540 TERMINAL 0567379

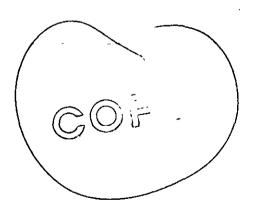
827160070880 01/17/2007 17:31:48

VS AUTH. TRANS. ID. 087017812388718 INVOICE 70024 He2 AUTH. CODE 006991

SALE TOTAL

\$1154.35

CUSTOMER COPY



February 4, 2011



Service Request: 71-594281301

Customer Relationship Specialist: Doniel Prickett

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the instrument panel cluster that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$504.50.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.





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

CDR File Information

Vehicle Identification Number	1G2ZG528154
Investigator	H.V.SMITH JR.
Case Number	71-594402934
Investigation Date	Tuesday, January 29 2008
Crash Date	Thursday, January 17 2008
Filename	1G2ZG528154
Saved on	Tuesday, January 29 2008 at 10:13:10 AM
Collected with CDR version	Crash Data Retrieval Tool 3.04
Reported with CDR version	Crash Data Retrieval Tool 3.04
EDR Device Type	airbag control module
Event(s) recovered	None

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 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. 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:

-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

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.

\$01	00	03	00	00	00	00	00
\$02	30	00	00	00	00	00	00
\$03	02	00	00	00	00	00	00
\$04	02	00	00	00	00	00	00
\$05	00	00	00	00	00	00	00
\$06	00	0A	00	00	0A	69	82
\$07	00	20	00	00	00	00	00
\$08	DC	83	00	00	00	00	00
\$09	00	58	58	00	00	00	00
\$0A	00	00	00	00	00	00	00
\$0B	3C	01	01	0F	00	00	00
\$0C	80	00	80	00	00	00	00
\$0D	FF	35	C0	00	00	00	00
\$0E	40	00	00	00	00	00	00
\$0F	ΒA	00	00	00	00	00	00
\$10	47	32	5A	47	35	32	38
\$11	31	35	34	31	34	37	36
\$12	34	35	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	03	03	02	03	00	00	00
\$18	02	02	00	00	00	00	00
\$19	07	07	00	00	00	00	00
\$1B	3F	30	00	66	00	78	0.0
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\$1D	00	00	00	00	00	00	00
\$1E	4F	4F	00	00	00	00	00
\$1F	20	00	00	00	00	00	00
\$20	40	00	00	00	00	00	00
\$21	FF	01	00	00	70	00	00
\$22	00	88	00	00	00	00	00
\$24	00	00	00	00	00	00	00
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\$25							
\$26	00	00	00	00	00	00	00
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\$2D	00	00	00	00	00	00	00
\$2E	00	FF	F0	11	51	00	00
\$2F	00	FE	11	53	00	00	00
\$30	9D	00	00	00	00	00	00
		FF	FF	FF	FF	80	00
	FF						
\$32	F8	80	FF	80	00	00	00
\$33	FF	FF	FF	FF	FF	80	00
\$34	FF	FF	FF	FF	FF	80	00
\$35	FF	FF	FF	FF	FF	80	00
\$36	FF	FF	FF	FF	FF	80	00
\$37	F8	80	F8	0F	0F	CA	FE
\$38	FF	80	C0	80	FF	C0	FC
\$39	FF	FF	FF	FF	FF	80	00
\$3A	FF	FF	FF	FF	FF	80	00
\$3B	7F	0F	1F	1F	3F	00	00
\$3C	FF	FF	FF	FF	FF	FF	C0
\$3D	FF	FF	FF	FF	FF	FF	00
\$3E	FF	FF	FF	FF	00	00	00
\$3F	00	00	F0	00	00	00	00
\$40	ΕO	FF	00	00	00	00	00
\$41	F8	F8	90	00	00	00	00
\$42	80	F			FF	00	00
1C27C5						0.0	0.0

1G2ZG528154





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   82 FF FF 00 00 00 00
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   F8 F8 90 C0 00 00 00
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   81 FF FF FF 00 00 00
$7A 82 FF FF 00 00 00 00
$7B FF FF FF FF FF 00
   41 55 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$01
$02
   01 02 03 04
$03
   41 54 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$04
   01 02 03 04
$06 FF FF FF FF
$07
   $08
   FF FF FF FF
$0D
   41 48 35 36 36 36 52 34 33 30 38 33 32 54 54 48
$0E
   01 5A 39 A4
$0F
   41 4A 35 36 36 36 52 34 33 30 39 32 33 33 4C 31
$10
   01 5A 39 A4
$13
   FF FF FF FF
$14
$18 FF FF FF FF
$21
   31 12 66 1A 5E 11 91 9A
$22
   69 82
$23
    32 5A FA FA FA FA 32
$24
    32 5A FA FA FA FA 32
$25
   32 5A FA FA FA FA 32
$26
   32 5A FA FA FA FA 32
$40
   00 00
$41
    3F 00 00 06 00 18
   10 C4
$42
$43 00 00 8C 80
1G2ZG528154
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FIELD PHOTOGRAPHIC NOTES

DIVISION:	Pontiac	REF#	71-59440293	34
VIN:	1G2ZG52815	34		
CLAIMANT	'S NAME (LAS	T,FIRST)		
INSPECTOR	: H. VERNON	SMITH, JR		EAA
215-364-626	0			
INSPECTIO	N DATE:	1-29-08	MILEAGE:	41,127

PHOTO ID. NUMBER AND DESCRIPTION

1,2.	Vehicle and Case ID
18.	Odometer reading 41,127
43.	Odometer reading 41,132 – 5 mile road test
17,19.	No dash cluster warning lamps displayed
3,45,67,12,13	14,15. No body damage
	34. Damaged wheels and tires right side
40,41.	Right rear wheel chamber alignment out of spec. Rear suspension bent
42.	Steering wheel off center
31,32,38.	Front suspension, no damage evident
20,21.	Erie Insurance estimate does not include bent R/R suspension
22,23,24,25.	Steering trouble codes

EAA Inspection Request

Data: 1/29/09		
Date: <u>1/28/08</u>	Vehicle Inform	ation
TO: <u>EAA</u> EAA/SPX Field Coordinator	VIN#: 1G2Z0	
Phone: 586-582-5835	Year/Make:	2005 Pontiac
Fax: 586-582-5840	Model:	G6
Email: eaafc@servicesolutions.spx.com	Contact's Name	
Email. <u>caare@scrvicesolutions.spx.com</u>	Contact's Num	ber:
T C4 1 ' XX'' '11	Vehicle Location	on: O'Neil Buick-GMC
From: Stephanie Wissmiller		
PAR Customer Relations Mgr		Varminster, PA
Emails stanbania vyisamillan@amaymant aam		Salvage/Auction Yard:
Email: stephanie_wissmiller@gmexpert.com Phone: 866-790-5600 ext.	ms. Auj. Manic	:
or 866-790-5700 ext.41007	Phone #:	
Fax: 866-775-9476	Claim or Salva	ge ID #:
Mailing Address:		
GM PAR Investigations	Claimant Infor	
7401 E. Ben White	-	71-594402934
Building 3	Claimant Name	
Austin, TX 78741	Claimant Home	
11450111, 111 707 11	Claimant Work	
	Claimant Cell #	#:
	Address:	
		nville, PA
	R CRM via voicemail/email o	f inspection date.
	mate Required	
	PAR File information	
∠ Contact PA Please Use Form(s):	R CRM After Inspection	
Accelerator/Throttle Control	Restraint-SIR/Seatbelts	Seats
Brake/ABS/TCS/VSES	Side Impact	Power Sliding Door
Steering/Suspension/Tires/Wheels	Inadvertent Deployment	OnStar
Engine Exhaust/Odor	Transmission/Transaxle	OTHER:
Engine Stalling	Thermal Events	
	_ Incinal Events	<u> </u>
Special Instructions: Interview Owner? Yes No	Vetronix Requested	Obtain Fire/Police Report
Other (define)	vetronix Requested	Obtain Fire/Fonce Report
	be rushed if e-mailed by one of	the following:
RUSH (Name of Team Manager or Ops M	Igr Approving the Rush):	-
<u> </u>	EAA Internal Use Only	
To: SA:	Date E-Mailed to SA :	
From: EAA Field Coordinator	Due Date:	
	EAA SA Use Only	
Case Acceptance/Investigation: YES	NO	
Case receptance/myesuganon. 1 LS	1 1110	

Date Report Uploaded to EAA FTP SITE:

GM-PAR-Chassis, Rev. 06/20/97

(page 1 of 6)

PRODUCT ALLEGATION RESOLUTION PRELIMINARY INSPECTION

STEERING, SUSPENSION, AXLE, TIRE & WHEEL SYSTEMS

Division: Pontiac Ref# 71-594402934 VIN: 1G2ZG528154
Claimant's Name (LAST, First)
Inspected By: H. Vernon Smith, Jr. Organization: EAA Phone: (215) 364-6260 x Inspection Date: 1-29-08 Mileage at Inspection: 41,127
I INSPECTION SUMMARY
Following the inspection, summarize the tests and observations:
Driver's mother stated her son, was on Centennial Drive, a residential area in Warminster, PA. Turning at a curve in the road he heard a warning buzzer. All the dash lights came on and the steering locked up. Unable to turn the wheel he hit the curb. Inspection showed no mechanical defects. No dash warning lamp. Per service manager roads snow covered night of incident.
Tech II scan – no PCM or ABS codes. Electronic steering trouble codes C0550 and C0176 displayed. See photos and page 5. Five mile stop/go road test, steering wheel off center to the RIGHT. Normal steering power assist. Please advise O'Neil Service Manager Mike Dedicato, 215-672-0900 GM's position and handling of this matter ASAP.
II INTERVIEW - VEHICLE HISTORY
Note to the inspector: In questions 3-5 below, document only the information which relates to the incident/allegation. 1. Name, address & phone number of person being interviewed: 1. Name, address & phone number of person being interviewed: 2. Prior collision damage (date, description, etc.) None Repaired by:
 Describe existing vehicle conditions at the time of the incident(e.g. warning lights "On", tires worn, etc.): Warning buzzer all dash lamps came on. Repairs outside of warranty (what, when, by whom?): unknown Other vehicle history information (from person being interviewed or GM Warranty History)? None relevant
6. Last maintenance (date, description, by whom?): Unknown
III INTERVIEW - INCIDENT DETAILS
If vehicle is a truck, or a car trailering cargo at the time of the incident, estimated total weight of cargo and trailer: lbs, Load description: Load location:

Describe the following:	Before the Incident	At the Beginning* and During the Incident
Steering (normal, other)	Normal	Hard steering, not possible to control vehicle
Suspension (normal, other)	Normal	Normal
Engine (normal, other)	Normal	Normal
Transmission (normal, other)	Normal	Normal
Electrical (normal, other)	Normal	Normal
Warning lights/messages	None	All dash lamps came on
Unusual noises (from where?)	None	Warning buzzer
Smoke/steam (from where?)	None	None
Other	None	None

^{*}The beginning of the incident is the start of the sequence which resulted in the incident.

Exact incident location: centennial Dr Warminster PA.

Surface where incident occurred:

Type: Concrete, ASPHALT, Gravel, Crushed Rock, Dirt, or Other? Describe:

Condition: Wet, Dry, Icy, or Other? _ If other, specify: Snow

Estimated vehicle speed 15 MPH Source of estimate: Driver's mother, Mrs. Irwin

Incident occurred while: Accelerating, turning, Braking, Coasting, Driving normally: Turning

What did you do after you realized something was wrong? Describe: Continued to try and steer through the bend in the road.

Any other comments or observations that have not been covered? Owner had received GM information letter on electronic steering problems prior to incident.

IV VEHICLE INSPECTION

The vehicle inspection documents the physical evidence via color photographs and written observations. By recording your observations in the following section, you will be following a methodical inspection format.

Take color photographs of the following:

A. Exterior:

Front

Right side

Rear

VIN

Left side

Comments: No damage

B. Corner assemblies, if applicable:

Struts/shocks

Springs

Control arms

Ball joints

Steering knuckles

Axle assemblies

Comments: R/R suspension bent – not included in Erie Insurance repair estimate.

C. Interior:

Instrument panel & odometer

Comments: No warning lamps displayed.

D. Underhood:

Engine compartment
Steering linkage
Steering
Power steering lines/hoses, connections/clamps

Comments: Power

E. Underbody:

Steering linkage

Scrapes or impact damage on the following:

Fuel tank
Tires/Wheels
Etc.

Comments: Right side tires and wheels damaged

F. General Observations (Take photographs if applicable):

Anything on vehicle which is after-market: No

Anything on vehicle which is a modification: No

Anything on vehicle which is unusual, out-of-place, etc.: No

Other relevant information: None

V CHASSIS INSPECTION

Record your observations and measurements for the sections and questions which relate to the incident and items which were inspected. Write N/A for sections and questions unrelated to the customer allegation.

A. STEERING, SUSPENSION, WHEELS, AXLES:

Use the following table to identify what you did and what you found during the inspection. Identify the tests and test results for the applicable items. Describe anything relevant to the allegation that is not in normal working condition, does not function properly or is a non production part. Take appropriate photographs, and indicate whether or not a photograph was taken.

	(page 4 of 6)
	OBSERVATIONS/TEST RESULTS
Steering system	Trouble codes in electronic system. Steering wheel off center
Steering linkage	No defects
Gear/rack and pinion	
Steering column, ignition	No defects
switch, intermediate shaft	
Steering pump, drive, hoses,	
connections, flow, pressure	
PS fluid level and condition	Electronic steering
Steering knuckle	Normal
Suspension components - LF	Normal
RF	Normal
LR	Normal
RR	Misaligned
Rear axle assembly	No damage
Deformation to the frame	
	OBSERVATIONS/TEST RESULTS
Describe evidence of axle/	None evident
suspension/ tire contact with	
frame, body or components	
Describe contact of the	None evident
under- carriage with the road	
surface (road, shoulder, curb,	
or grass)	
Electronic level control	None
system/components	
Engine (normal, other)	Normal
Electrical (normal, other)	Normal
Warning lights/messages	None
Wheels (damage/impact	Right front & rear wheel and tire damage
marks)	
Codes/numbers for failed	See below
components. Describe	
Other Vetronix	No event recorded

B. ECM/PCM	B. EC	M/P	CM
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Stored codes? (Y/N) \underline{Y} If yes, list code number and description.

CODE C0550 C0170	COUNTS	DESCRIPTION Steering module internal electronic failure Steering system thermal error temperature high	
Other co	omments:		-

- C. <u>ROAD-SENSING SUSPENSION/SPEED-SENSITIVE SUSPENSION</u> (Fill out this section for suspension allegations on vehicles equipped with road-sensing suspensions/speed-sensitive suspensions)
- 1. Enter Diagnostics per the service manual and record any current or history codes. (Enter "none" if no codes are present)

CURF			DE	COUDTION		
CODE	<u> </u>		<u>DE</u>	SCRIPTION		
HISTO	_		DE	SCRIPTION		
	= 					
Follo	w the procedure	s in the service r	nanual to determin	ne the cause of t	he stored codes wh	ich relate to the
allega	ation. State which	ch procedures we	ere followed, reco	rd the results of	each test, and state	the root cause of
			require disassem ed to be disassem		nts. Follow the prodi	edure in the
2. Ins	spect the system	n wiring, connect	ions, and compon	ents for damage	e. Indicate whether t	the damage was
		ent. Comments:	iono, una compon	onto for damage	inalogio mionio	ino damago wao
3 04	ner comments:					
3. Ou	ier comments.					
D TI	RE INSPECTION	I				
		<u>.</u>				
1. <u>ID</u>	ENTIFICATION:					
					AVE. TREAD	
	TIRE BRAND	TIRE TYPE	TIRE SIZE	PRESSURE	DEPTH	
	(Goodyear)	(Eagle GA)	(<u>P205/70R15)</u>	<u>(psi)</u>	32nds of inch	
LF	<u>Federal</u>	<u>657</u>	215/60R16	<u>27</u>	<u>8</u>	
RF	<u>Federal</u>	<u>657</u>	215/60R16	<u>25</u>	<u>8</u>	
LR	<u>Federal</u>	<u>657</u>	215/60R16	<u>27</u>	<u>8</u>	
RR	<u>Federal</u>	<u>657</u>	215/60R16	<u>26</u>	<u>8</u>	
		to tires, such as		ue to impact, cu	ts, tread separation	, flat spots etc.
	IDEWALL MARK	(ED				
LR _					·	
RR S	IDEWALL CUT					

2. TIRE PLAC	ARD DATA:		,		
Record the	•	on driver's door edge or i	•		
	<u>SIZE</u>	PRESSURE (psi)	PRESSURE AT MAXIMUM LOAD(psi)		
TIRES	215/60R16	<u>30</u>			
SPARE TIRE					
		VI SITE INSPECT	TION		
Make a diagram of the incident scene showing where the vehicle started, the path of the vehicle, and all points of impact. Make measurements and record on the diagram. Inspect the scene for tire marks. Take color pictures and enter comments below. If significant other vehicle or property damage occurred, take pictures of the damage, if possible, and make notes as necessary. Comments: Not relevant					
		VII Other Report Inf	ormation		
Check here if there was evidence of a "Fire-Related" event. According to NHTSA, "fire" means combustion or burning of material in or from a vehicle as evidenced by flame. The term also includes, but is not limited to, thermal events and fire-related phenomena such as smoke, sparks or smoldering, but does not include events and phenomena associated with a normally functioning vehicle, such as combustion of fuel within an engine or exhaust from an engine.					
Attachments:	(Check all that apply)				





CDR File Information

Vehicle Identification Number	1G2ZG528154
Investigator	H.V.SMITH JR.
Case Number	71-594402934
Investigation Date	Tuesday, January 29 2008
Crash Date	Thursday, January 17 2008
Filename	1G2ZG528154
Saved on	Tuesday, January 29 2008 at 10:13:10 AM
Collected with CDR version	Crash Data Retrieval Tool 3.04
Reported with CDR version	Crash Data Retrieval Tool 3.04
EDR Device Type	airbag control module
Event(s) recovered	None

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 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. 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:

-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

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.

\$01 \$02	00 30	03	00	00	00	00	00
\$03	02	00	00	00	00	00	00
\$04	02	00	00	00	00	00	00
\$05	00	00	00	00	00	00	00
\$06	00	0A	00	00	0A	69	82
\$07	00	20	00	00	00	00	00
\$08	DC	83	00	00	00	00	00
\$09 \$0A	00	58 00	58 00	00	00	00	00
\$0B	3C	01	01	0F	00	00	00
\$0C	80	00	80	00	00	00	00
\$0D	FF	35	C0	00	00	00	00
\$0E	40	00	00	00	00	00	00
\$0F	BA	00	00	00	00	00	00
\$10 \$11	47 31	32 35	5A 34	47 31	35 34	32 37	38 36
\$12	34	35	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 03	34	00	00
\$17 \$18	03 02	03	02 00	00	00	00	00
\$19	07	07	00	00	00	00	00
\$1B	3F	30	00	66	00	78	00
\$1C	3F	00	00	06	00	18	00
\$1D	00	00	00	00	00	00	00
\$1E \$1F	4F 20	4F 00	00	00	00	00	00
\$20	40	00	00	00	00	00	00
\$21	FF	01	00	00	70	00	00
\$22	00	88	00	00	00	00	00
\$24	00	00	00	00	00	00	00
\$25 \$26	00	00	00	00	00	00	00
\$27	FF	00	FF	00	00	00	00
\$2A	00	00	00	00	00	00	00
\$2B	00	00	00	00	00	00	00
\$2D	00	00	00 F0	00 11	00 51	00	00
\$2E \$2F	00	FF FE	11	53	00	00	00
\$30	9D	00	00	00	00	00	00
\$31	FF	FF	FF	FF	FF	80	00
\$32	F8	80	FF	80	00	00	00
\$33 \$34	FF FF	FF	FF	FF	FF	80	00
\$3 4 \$35	FF	FF FF	FF FF	FF FF	FF FF	80	00
\$36	FF	FF	FF	FF	FF	80	00
\$37	F8	80	F8	0F	0F	CA	FE
\$38	FF	80	C0	80	FF	C0	FC
\$39	FF	FF	FF	FF	FF	80	00
\$3A \$3B	FF 7F	FF OF	FF 1F	FF 1F	FF 3F	00	00
\$3C	FF	FF	FF	FF	FF	FF	C0
\$3D	FF	FF	FF	FF	FF	FF	00
\$3E	FF	FF	FF	FF	00	00	00
\$3F	00	00	F0	00	00	00	00
\$40 \$41	E0 F8	FF F8	00 90	00	00	00	00
\$42	80	FF	FF	FF	FF	00	00
16276						-	-

1G2ZG528154



1G2ZG528154



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$43 FF FF FF 00 00 00 00
$44 FF FF FF FF FF 00
$45 FF FF FF FF FF 00
$46 FF FF FF FF FF 00
$47
   FF FF FF FF FF 00
$48
   FF FF 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
   FF FF FF FF FF 00
$4C
$4D
   FF FF FF FF FF 00
$4E FF FF FF FF FF 00
$4F FF FF FF FF FF 00
$50 FF FF FF FF FF 00
$51 F0 00 00 F0 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
$55
   FF FF FF FF FF 00
$67
   A0 FF 00 00 00 00 00
$68
   F8 F8 90 C0 00 00 00
$69
   80 FF FF FF FF 00 00
$6A FF FF FF 00 00 00 00
$6B FF FF FF FF FF 00
$6C FF FF FF FF FF 00
$6D FF FF FF FF FF 00
   FF FF FF FF FF 00
$6E
$6F
   FF FF FF FF FF 00
$70 FF FF FF FF FF OO
$71
   FF FF FF FF FF 00
$72 FF FF FF FF FF 00
$73
   FF FF FF FF FF 00
$74
   FF FF FF FF FF 00
$75 FF FF FF FF FF 00
$76 FF FF FF FF FF 00
$77 FF FF FF FF FF 00
$78
   FO 00 00 FO 00 00 00
$79
   81 FF FF FF 00 00 00
$7A 82 FF FF 00 00 00 00
$7B FF FF FF FF FF 00
   41 55 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$01
$02
   01 02 03 04
$03
   41 54 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$04
   01 02 03 04
$06 FF FF FF FF
$07
   $08
   FF FF FF FF
$0D
   41 48 35 36 36 36 52 34 33 30 38 33 32 54 54 48
$0E
   01 5A 39 A4
$0F
   41 4A 35 36 36 36 52 34 33 30 39 32 33 33 4C 31
$10
   01 5A 39 A4
$13
   FF FF FF FF
$14
$18 FF FF FF FF
$21
   31 12 66 1A 5E 11 91 9A
$22
   69 82
$23
    32 5A FA FA FA FA 32
$24
    32 5A FA FA FA FA 32
$25
   32 5A FA FA FA FA 32
$26
   32 5A FA FA FA FA 32
$40
   00 00
$41
    3F 00 00 06 00 18
   10 C4
$42
$43 00 00 8C 80
```





FIELD PHOTOGRAPHIC NOTES

DIVISION:	Pontiac	REF#	71-59440293	34
VIN:	1G2ZG52815	34		
CLAIMANT	'S NAME (LAS	T,FIRST)		
INSPECTOR	: H. VERNON	SMITH, JR		EAA
215-364-626	0			
INSPECTIO	N DATE:	1-29-08	MILEAGE:	41,127

PHOTO ID. NUMBER AND DESCRIPTION

1,2.	Vehicle and Case ID
18.	Odometer reading 41,127
43.	Odometer reading 41,132 – 5 mile road test
17,19.	No dash cluster warning lamps displayed
3,45,67,12,13	14,15. No body damage
	34. Damaged wheels and tires right side
40,41.	Right rear wheel chamber alignment out of spec. Rear suspension bent
42.	Steering wheel off center
31,32,38.	Front suspension, no damage evident
20,21.	Erie Insurance estimate does not include bent R/R suspension
22,23,24,25.	Steering trouble codes

GM-PAR-Chassis, Rev. 06/20/97

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PRODUCT ALLEGATION RESOLUTION PRELIMINARY INSPECTION STEERING, SUSPENSION, AXLE, TIRE & WHEEL SYSTEMS

STEERING, SUSPENSION, AXLE, TIKE & WHEEL STSTEMS				
Division: Pontiac Ref# 71-594402934 VIN: 1G2ZG528154				
Claimant's Name (LAST, First)				
Inspected By: H. Vernon Smith, Jr. Organization: EAA Phone: (215) 364-6260 x Inspection Date: 1-29-08 Mileage at Inspection: 41,127				
I INSPECTION SUMMARY				
Following the inspection, summarize the tests and observations:				
Driver's mother stated her son, was on Centennial Drive, a residential area in Warminster, PA. Turning at a curve in the road he heard a warning buzzer. All the dash lights came on and the steering locked up. Unable to turn the wheel he hit the curb. Inspection showed no mechanical defects. No dash warning lamp. Per service manager roads snow covered night of incident.				
Tech II scan – no PCM or ABS codes. Electronic steering trouble codes C0550 and C0176 displayed. See photos and page 5. Five mile stop/go road test, steering wheel off center to the RIGHT. Normal steering power assist. Please advise O'Neil Service Manager Mike Dedicato, 215-672-0900 GM's position and handling of this matter ASAP.				
II INTERVIEW - VEHICLE HISTORY				
Note to the inspector: In questions 3-5 below, document only the information which relates to the incident/allegation. 1. <i>Name, address & phone number</i> of person being interviewed: Mrs. Irwin, 805 New Road, Churchville, PA 18966, ph. 215-393-7706 2. <i>Prior collision</i> damage (date, description, etc.) None				
Repaired by:				
3. Describe existing vehicle conditions at the time of the incident(e.g. warning lights "On", tires worn, etc.):				
Warning buzzer all dash lamps came on.				
4. Repairs outside of warranty (what, when, by whom?): unknown				
5. Other vehicle history information (from person being interviewed or GM Warranty History)? None relevant				
6. Last maintenance (date, description, by whom?): Unknown				
III INTERVIEW - INCIDENT DETAILS				
If vehicle is a truck, or a car trailering cargo at the time of the incident, estimated total weight of cargo and trailer: lbs, Load description: Load location:				

Describe the following:	Before the Incident	At the Beginning* and During the Incident
Steering (normal, other)	Normal	Hard steering, not possible to control vehicle
Suspension (normal, other)	Normal	Normal
Engine (normal, other)	Normal	Normal
Transmission (normal, other)	Normal	Normal
Electrical (normal, other)	Normal	Normal
Warning lights/messages	None	All dash lamps came on
Unusual noises (from where?)	None	Warning buzzer
Smoke/steam (from where?)	None	None
Other	None	None

^{*}The beginning of the incident is the start of the sequence which resulted in the incident.

Exact incident location: centennial Dr Warminster PA.

Surface where incident occurred:

Type: Concrete, ASPHALT, Gravel, Crushed Rock, Dirt, or Other? Describe:

Condition: Wet, Dry, Icy, or Other? _ If other, specify: Snow

Estimated vehicle speed 15 MPH Source of estimate: Driver's mother, Mrs. Irwin

Incident occurred while: Accelerating, turning, Braking, Coasting, Driving normally: Turning

What did you do after you realized something was wrong? Describe: Continued to try and steer through the bend in the road.

Any other comments or observations that have not been covered? Owner had received GM information letter on electronic steering problems prior to incident.

IV VEHICLE INSPECTION

The vehicle inspection documents the physical evidence via color photographs and written observations. By recording your observations in the following section, you will be following a methodical inspection format.

Take color photographs of the following:

A. Exterior:

Front

Right side

Rear

VIN

Left side

Comments: No damage

B. Corner assemblies, if applicable:

Struts/shocks

Springs

Control arms

Ball joints

Steering knuckles

Axle assemblies

Comments: R/R suspension bent – not included in Erie Insurance repair estimate.

C. Interior:

Instrument panel & odometer

Comments: No warning lamps displayed.

D. Underhood:

Engine compartment
Steering linkage
Steering
Power steering lines/hoses, connections/clamps

Comments: Power

E. Underbody:

Steering linkage

Scrapes or impact damage on the following:

Fuel tank
Tires/Wheels
Etc.

Comments: Right side tires and wheels damaged

F. General Observations (Take photographs if applicable):

Anything on vehicle which is after-market: No

Anything on vehicle which is a modification: No

Anything on vehicle which is unusual, out-of-place, etc.: No

Other relevant information: None

V CHASSIS INSPECTION

Record your observations and measurements for the sections and questions which relate to the incident and items which were inspected. Write N/A for sections and questions unrelated to the customer allegation.

A. STEERING, SUSPENSION, WHEELS, AXLES:

Use the following table to identify what you did and what you found during the inspection. Identify the tests and test results for the applicable items. Describe anything relevant to the allegation that is not in normal working condition, does not function properly or is a non production part. Take appropriate photographs, and indicate whether or not a photograph was taken.

	(page 4 of 6)
	OBSERVATIONS/TEST RESULTS
Steering system	Trouble codes in electronic system. Steering wheel off center
Steering linkage	No defects
Gear/rack and pinion	
Steering column, ignition	No defects
switch, intermediate shaft	
Steering pump, drive, hoses,	
connections, flow, pressure	
PS fluid level and condition	Electronic steering
Steering knuckle	Normal
Suspension components - LF	Normal
RF	Normal
LR	Normal
RR	Misaligned
Rear axle assembly	No damage
Deformation to the frame	
	OBSERVATIONS/TEST RESULTS
Describe evidence of axle/	None evident
suspension/ tire contact with	
frame, body or components	
Describe contact of the	None evident
under- carriage with the road	
surface (road, shoulder, curb,	
or grass)	
Electronic level control	None
system/components	
Engine (normal, other)	Normal
Electrical (normal, other)	Normal
Warning lights/messages	None
Wheels (damage/impact	Right front & rear wheel and tire damage
marks)	
Codes/numbers for failed	See below
components. Describe	
Other Vetronix	No event recorded

B. ECM/PCM	B. EC	M/P	CM
------------	-------	-----	----

Stored codes? (Y/N) \underline{Y} If yes, list code number and description.

CODE C0550 C0170	COUNTS	DESCRIPTION Steering module internal electronic failure Steering system thermal error temperature high		
Other comments:			-	

- C. <u>ROAD-SENSING SUSPENSION/SPEED-SENSITIVE SUSPENSION</u> (Fill out this section for suspension allegations on vehicles equipped with road-sensing suspensions/speed-sensitive suspensions)
- 1. Enter Diagnostics per the service manual and record any current or history codes. (Enter "none" if no codes are present)

CURF						
CODI	<u> </u>	<u>DESCRIPTION</u>				
HIST	=		DE	SCRIPTION		
	= 					
Follo	w the procedure	s in the service r	nanual to determin	ne the cause of t	he stored codes wh	ich relate to the
allega	ation. State which	ch procedures we	ere followed, reco	rd the results of	each test, and state	the root cause of
			require disassem ed to be disassem		nts. Follow the prodi	edure in the
2. In:	spect the system	n wiring, connect	ions, and compon	ents for damage	e. Indicate whether t	the damage was
		ent. Comments:	iono, una compon	onto for damage	inaloute Wiletiler	ino damago wao
3 041	her comments:					
<u>J. Oli</u>	ner comments.					
D TI	RE INSPECTION	1				
1. <u>ID</u>	ENTIFICATION:					
					AVE. TREAD	
	TIRE BRAND	TIRE TYPE	TIRE SIZE	PRESSURE	DEPTH	
	(Goodyear)	(Eagle GA)	(<u>P205/70R15)</u>	<u>(psi)</u>	32nds of inch	
LF	<u>Federal</u>	<u>657</u>	215/60R16	<u>27</u>	<u>8</u>	
RF	<u>Federal</u>	<u>657</u>	215/60R16	<u>25</u>	<u>8</u>	
LR	<u>Federal</u>	<u>657</u>	215/60R16	<u>27</u>	<u>8</u>	
RR	<u>Federal</u>	<u>657</u>	215/60R16	<u>26</u>	<u>8</u>	
		to tires, such as		ue to impact, cu	ts, tread separation	, flat spots etc.
	IDEWALL MARK	(ED				
LR _						
RR S	IDEWALL CUT			,		

2. TIRE PLAC	CARD DATA:		,	
Record the	• • • • • • • • • • • • • • • • • • • •	on driver's door edge or i	•	
	<u>SIZE</u>	PRESSURE (psi)	PRESSURE AT MAXIMUM LOAD(psi)	
TIRES	215/60R16	<u>30</u>		
SPARE TIRE				
		<u> </u>		
VI SITE INSPECTION				
Make a diagram of the incident scene showing where the vehicle started, the path of the vehicle, and all points of impact. Make measurements and record on the diagram. Inspect the scene for tire marks. Take color pictures and enter comments below. If significant other vehicle or property damage occurred, take pictures of the damage, if possible, and make notes as necessary. Comments: Not relevant				
VII Other Report Information				
Check here if there was evidence of a "Fire-Related" event. According to NHTSA, "fire" means combustion or burning of material in or from a vehicle as evidenced by flame. The term also includes, but is not limited to, thermal events and fire-related phenomena such as smoke, sparks or smoldering, but does not include events and phenomena associated with a normally functioning vehicle, such as combustion of fuel within an engine or exhaust from an engine.				
Attachments: (Check all that apply)				

1G2ZG528154

MANUFACTURE SHOWN ABOVE.

TYPE: PASS CAR

-71-594402934

THICLE CONFORMS TO ALL VEHICLE SAFETY, BUMPER, AND EFFECT ON THE DATE OF MANUFA 1G2ZG528154





































Overdrive

ERIR INSURANCE GROUP ERIE INSURANCE P.O. BOX 195 SOUTHAMPTON, PA 18966-3518 [215] 237-2394 FAR: (215) 237-2941

ESTIMATE OF BU

Insured	McItten By: THOMA Adjustes:	S WERER \$136765 01/22/2009 09:48 AM (808)822-3743
Address		Claim
Evening:		Type of Loss: Collision Point of Impact: 21. Undercerriage
	O'NEIL BOICK 869 W. STREET RD WARMINSTER, PA	REPAIR_SROP
Repair Facility:	O'NEIL BUICK 869 W.STREET RO	Business: (2151672-0900

License 7005 PONT G6 6-3.56-FI 4D SED blk Int. VIN: 1G2ZG528154 Lie: Air Conditioning PA Prod Date: Odometer: 41127 ear Delogger Tilt Wheel Intermittent Wipers Body Side Moldings Keyless Entry Dual Mirrora Clear Coat Paint Power Brakes Power Steering Power Windows Power Mirrors Power Locks Power Trunk/Tailgate FM Radio AM Radio Driver Air Bag 4 Wheel Disc Brakes Recline/Lounge Seats Passenger Air Bag Bucket Seats Automatic Transmission

Full Wheel Covers

	NO.	OP.	DESCRIPTION	QTY	EXT. PRIC	E LABOR	THIAT
	1 2**	Repl	WHEELS RECOND RT/Front Wheel, alloy 16"	1	185.00	m Incl.	
	3		RECOND RT/Rear Wheel, alloy 16"	1	185.00	m Incl.	
N	4		A/M r/frt tire federal 215-60-16	1	99.39		
	5#		network tire 800-342-0004	1			
	6#	Subl 1	Four Wheel Alignment	1	69.95	T	
	7#		tire tax	2	2.00	X	

REPUBLIE OF RECORD

NO		DESCRIPTION	1 779	XT. PAICE	LABOR PAINT
38 108 118	Publ Ext	To Valverston To disposal To disposal To Nount/Balance To the suspension To disposent to determine Any add'! To call for supplement		3.00 Y 2.00 X 29.90 Y	
		Subtotals		376.24	

A/P WITH MARRY AT SHOP FOR REPAIR & RENTAL DAYS, PRIOR DERT TO DECREED

Parts Sublet/Niso.	100.00
BURTOTAL	576.24
Sales Tax . \$ \$73.24 8 8.00008	34.33
FOTAL COST OF REPAIRS	6 616 93
ADJUSTMENTS	
Deductible	
TOTAL ADJUSTMENTS	# 500,00 # 349,57
NET COST OF REPAIRS	A PVARIO

Vehicle owner must authorize all repairs, ERIE INSURANCE reserves the right to reinspect all supplements before payment is made, THIS IS NOT AN AUTHORISATION

Steering

F0: Diagnostic Trouble Codes (DTC)

F1: Data Display

F2: Special Functions

F3: Snapshot

DTC Information

ECU Name

Status

Power Steering Control Mo

DTCs Sorted By Priority

Power Steering Control Module C0550 Symptom 39 Electronic Control Unit (ECU) Performance Internal Electronic Failure

Last Test:

Passed

This Ignition:

Passed

Since Clear:

Passed History

1/2

Clear DTCs

BTCs Sorted By Priority

Power Steering Control Module
C0176 Symptom 54
System Thermal Error Temperature High

Last Test:

This Ignition:

Since Clear:

Passed

Passed

Passed History 2/

Clear

Brakes

F0: Diagnostic Trouble Codes (DTC)

F1: Data Display

F2: Special Functions

F3: Snapshot

F4: Module ID Information

DTC Information

ECU N	Name		Status
Body EBCM	Control	Module	1 1
PCM			0

DTCs Sorted By Priority

EBCM C0550 Symptom 00 Electronic Control Unit (ECU) Performance

Last Test: Passed

This Ignition:

ar:

assed distory

Vehicle Identification Select one of the following Service Categories

Engine Controls
Engine Cooling
Engine Electrical

DTC Information ECU Name Status PCM 0

PCH

D

All

OLC Pin : 14,



























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

January 31, 2011



Service Request: 71-589672107

Customer Relationship Specialist: Michael Winters

Dear :

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the loss of power steering that you had repaired. We regret that we are unable to reimburse you the amount you requested because the part replaced is not the part covered by this special coverage.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have any future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

Breezy Point, NY

BROOKLYN NY 112 WALL IS DEC 2007 PM 2 L

DEC 19 2001.

Reimbursement Department P.O. Box 33170

Detroit, MI 48232-5170 النستناليناسالساللسلالماللياساليلياسال

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12 15 07
17-Digit Vehicle Identification Number (VIN): 1612552F05F
Mileage at Time of Repair: 55,483 Date of Repair: 9 1007
Claimant Name (please print):
Street Address or PO Box Number:
City: Rocknway Point, State: New YORK ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 429.05 Plus ?? Please see
The following documentation must accompany this claim form. breakdown of bill on page 2
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



7184740889

33087





INVOICE

DUPLICATE 2

3712 Rouse 9 South . Freebold, NJ 07728 SALES 732,462,1324 SERVICE 732,462,1576 WARRANTY INFORMATION

THIS AMOUNT

ROCKAWAY DOTN'T PAGE 1 NEED TO SEE REVERSE SIDE FOR IMPORTANT HOME: BUS: SERVICE ADVISOR: 7 BILL LICENSE MILEAGE IN / OUT TAG COLOR YEAR MAKE/MODEL VIN 1G1ZS52F05F 55483/55486 SILVER MET CHEVROLET MALIBU PAYMENT INV. DATE PROMISED DEL. DATE PROD. DATE WARR, EXP. PO NO RATE 11SEP07 17:00 11SEP07 CCP 120CT04 20CT2001 0.00 OPTIONS: R.O. OPENED READY STK:5241 ENG:2.2 Liter MFI DOHC TRN:A 11:39 11SEP07 16:49 11SEP07 LIST NET TOTAL LINE OPCODE TECH TYPE HOURS A CUST STATES REPLACE FOUR TIRES 04CVZMB4 MT./BAL. (4) TIRES 69.95 69.95 29 CC 73.00 73.00 292.00 **4 TIRES TIRES** 6.00 4 TIRE-TAX 1.50 1.50 4 STEM STEM 1.00 1.00 4.00 B OUICK LUBE PLUS 80CVZ06 OUICK LUBE PLUS (N/C)29ICALL (N/C) 1 89029265 FILTER (N/C) 5 89021632 OIL FREE SERVICE CHECK 01CVZ02 FREE SERVICE CHECK CC 0.00 0.00 29 *********** D 2/4 WHEEL ALIGNMENT FEA 2/4 WHEEL ALIGNMENT 69.95 69.95 29 ************** E CUST STATES CK CD OPERATION. 98 NEEDS RADIO REPLACED 29 CC 0.00 0.00 PARTS & LABOR \$550.00 + TAX, ADVISED CUSTOMER F** STEERING RACK HAS EXCESSIVE PLAY E9740 GEAR ASSEMBLY, POWER STEERING - REPLACE 29 CC 149.25 149.25 1 15858368 GEAR 277.80 277.80 277.80 *************** G** FUEL INJECTION SERVICE W/AIR FILTER FI PERFORMED FUEL INJECTION SERVICE & REPLACED AIR FILTER ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT. ALCOHOLD OF MISCHES DECORDS. SUPPORTING THIS DESCRIPTION TOTALS STATEMENT OF DISCLAIMER The factory warranty constitutes all of the warranties with respect to the sale of this hamiltons. The Seller hereby expressly disclaims all warranties either express or LABOR AMOUNT PARTS AMOUNT warranties either express or implied, including any implied warranty of merchantability or fitness for a perticular purpose. Seller neither essurees authorize GAS, OIL, LUBE SUBLET AMOUNT ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE. MISC. CHARGES Seller neither essumes nor authorizes any other person to assume for it any liability in connection with the sale of this **TOTAL CHARGES** LESS INSURANCE SALES TAX (SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON CUSTOMER SIGNATURE PLEASE PAY

7184740889

33087



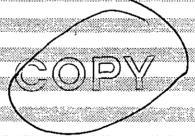


INVOICE

DUPLICATE 2

3712 Rouse 9 South . Freebold, NJ 07724

ROCKAWAY POINT. NY	PAGE 2	SALES 732.462.1324 SERV NEED TO SEE REVERSE SIDI				
HOME:	SERVICE ADVISOR:	RVICE ADVISOR: 7 BILL PEAK				
COLOR YEAR MAKE/MODEL	VIN		EIN / OUT TAG			
	4.44 POPO ED ED	5540	2/55406			
SILVER MET 05 CHEVROLET MALIBU DEL DATE PROD DATE WARR EXP. PROMISE	1G1ZS52F05F D PO NO.	RATE PAYMENT	3/55486 INV. DATE			
120CT04 IS 120CT2007 17:00 11 R.O. OPENED READY OPTIONS		0.00 CCP 2 Liter MFI DOHC	11SEP07			
<u> </u>	51K:5241 ENG:2.	2_brcer_MF1_bonc	IRNIA			
11:39 11SEP07 16:49 11SEP07	<u> </u>					
LINE OPCODE TECH TYPE HOURS 29 CC		LIST NE	T TOTAL 5 84.15			
1 INJ INJ CLEANER		24.99 24.9				
1 19166106 FILTER AS		9.66 9.6	6 9.66			
1** INSPECT BRAKES	**********	*****				
05CVZ06 SERVICE REAR BRAKES						
29 CC		49.7	5 49,75			
JUSTOMER PAY ENVIRO/SUPPLIES FOR REL	AIR ORDER	******	15.00			
	SINCE 1937 A NAME Y	OU CAN TRUST"				
T	DATE PAID					
POST TO CONTROL CONTROL SECTION CONTROL CONTRO	PAYMENT METHOD		i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de			
!	•		<u> </u>			
]: 	AMOUNT \$		<u> </u>			
			•			



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

The factory warranty constitutes all of the warranties with respect to
the safe of this item\terns. The
Seller hereby expressly disclaims ell warranties either express or
warmenties althou accourage or
MOLIMINES COURS ANTHONY OF
implied, including any implied
warranty of merchantability or
fitness for a particular purpose.
Seller neither essumes nor
authorizes any other person to
assume for it any fiability in
connection with the sale of this
item/items.
ilaiyi(ana.

CUSTOMER SIGNATURE

STATEMENT OF DISCLAIMER

DESCRIPTION	IOTALS
LABOR AMOUNT	423.05
PARTS AMOUNT	614.45
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	15.00
TOTAL CHARGES	1052.50
LESS INSURANCE	61,45
SALES TAX	73.67
PLEASE PAY THIS AMOUNT	1064.72

(SIGNED)	DEALER,	GENERAL	MANAGER	OR AUTH	ORIZED PERSON	DAT

031000640 09/14/2007 6315841612

his is a LEGAL COPY of our check. You can use i the same way you would se the original check.

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↓Do not endorse or write below this line,↓ PAY TO THE ORDER OF COMMERCE BANK, N.A. FOR DEPOSIT ONLY WHITE BELT CHEVROLET OF FREEHOLD, LLC OF FREEHOLD, icarintfalii Her fa L. of this C quality deficing a forest on order i Her first Constitution (General Hersen of Hersen William of Hersen William of Hersen Street for the second will a second will a of Hersen Street for the second of the second for the second of the second for the second of the second for the second of the second for the second of the second for the second of the second for the second of the second of the second for the second of the second of the second for the second of the second of the second of the second for the second of the second o



MIDLAND / ODESSA 18 DEC 2007 PN 2 L



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

DEC 2 4 2007

Reinbursement Department Po Bof 33170 Detroit MI 48232-5170

Adadlaladdaffaddaladaaffaaffaa'~llbaadff 4823245170

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 12/18/07 17-Digit Vehicle Identification Number (VIN): 16/2754855F
17-Digit Vehicle Identification Number (VIN): 16-12-75-48-55-F
Mileage at Time of Repair: 28482 Date of Repair: 10-23-07
Claimant Name (please print):
Street Address or PO Box Number:
City: Midland State: TX ZIP Code:
Daytime-Telephone-Number-(include-Area-Gode):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ 6466
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0251

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



ALL WHERICAN INCORPLET 4:30 test wall street HIGHAND, IX. 7570?

#ERMIMAL 1.6.: 8017340c5(for Parts or)

1100:

MERCHANT 4:

9505146112

MASTERCARD

SALE RECORD #: 17 DATE: GCT 23, 07 BATCH: 822

000017 TIPE: 13:12

992912

કુપી _{સં}:

TOTAL

\$646.66

無字風便時

I ABREE TO PAY HEAVE TOTA, AUGUST ACCORDING TO CARD ISSUER HORESTEIN (MERCHHOT HORESTEIN IF CRECTI VOOCHER)

CUSTOMER COPY

123009

ALL AMERICAN CHEVROLET OF MIDLAND #11

INVOICE

4100 W. Wall Street Midland, TX 79703 Phone: (432) 694-9601

Fax: (432) 681-1013

PAGE 1

MIDLAND, TX HOME BUS:

SERVICE ADVISOR: 484 KEVIN HILLIS COLOR YEAR MAKE/MODEL LICENSE MILEAGE IN/ OUT TAG SSSSSSS SSSS VINC correcte CHEVROLET MALIBU 1G1ZT54855F <u> 2</u>8482/**2**8482 GALAXY-SII 05 PROD. DATE WARR EXP. PROMISED PO NO. RATE PAYMENT INV. DATE DEL DATE 230CT07 11DEC04 IS 18:00 25OCT07 0.00 CASH STK:5F176034 DLR:07375 1) LIFETIME OIL R.O. OPENED READY OPTIONS: STANDARD, LSSP, 274182 08:58 17OCT07 11:42 23OCT07

LINE OPCODE TECH TYPE HOURS

LIST A CUSTOMER STATES THAT STEERING WHEEL MAKES A POPPING CRUNCHING SOUND

CAUSE: EXCESIVE PLAY IN THE STEERING COLUMN

STEER STEERING

80985 CCRC

183.00 183.00 13.85 13.85 1 12346241 LUBRICANT 13.85

1 15926870 COLUMN

368.33 368.33 368.33

NET

TOTAL

0.00

78482 EXCESIVE PLAY IN THE STEERING COLUMN 80985-I TEST DROVE VEHICLE TO CONFIRM COMPLAIN I THEN CHECKED SI FOR BULLETINS AND FOUNDDOC ID 1973984 FOR CLUNK/KNOCK NOISE AT STEERING THE DOCUMENT STATES SPRAY GREASE INTO I SHAFT I SPRAYED GREASE INTO I SHAFT AND TEST DROVE AND NOISE IS STILL THERE I THEN USED THE CHASIE EARS AND HEARD NOISE AT STEERING COLUMN. REPLACED STEERING COLUMN DUE TO EXCESSIVE PLAY CAUSING CLUNK NOISE IN STEERING. ORIGINAL

B CUSTOMER STATES THAT COOLANT LIGHT IS ON SEEM LOW ON FLUID EL ELECTRICAL

80985 CCRC

78482

C** 2-WHEEL ALIGNMENT CAUSE: ALIGN COMPLETED 2WA 2-WHEEL ALIGNMENT

20501 CCRC

49.95 49.95

78482 ALIGN COMPLETED FRT ENDALIGN COMPLETED 20501 1.0

YOU MAY RECEIVE A SATISFACTION SURVEY BY MAIL. IF YOU'RE UNABLE TO MARK COMPLETELY, SATISFIED TO ALL THE QUESTIONS, PLEASE CONTACT OUR SERVICE MANAGER.

YOUR SATISFACTION IS OUR #1 GOAD THANK Y FOR CHOOSING ALL AMERICAN CHEVROLET. 2007 YOU

> ALL AMERICAN CHEVROLET OF MIDI AND

ON DEHALF OF SERVICING DEALER. I HEREPY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR THEREWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT. NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR ILLY YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE. "I acknowledge notice and oral approval of an increase in the original estimated price. TOTALS DESCRIPTION Signature or initials' LABOR AMOUNT 232.95 NOTICE PURSUANT TO \$70.001, TEXAS PROPERTY CODE I am the person or agent acting on behalf of the person, who is obligated to pay for the repair of the motor vehicle subject to the repair agreement. I understand that the vehicle is subject to repossession in accordance with 96.06. Texts Business and Commerce Code. If payment for the report of the motor vehicle by a check, money order or a credit card transaction is stopped, dishonored because of insufficient funds, no funds, or because the maker or drawer of the order or the credit card holder has no account or the account upon which it is drawn or credit card account as been closed. PARTS AMOUNT 382.18 GAS, OIL, LUBE 0.00 SUBLET AMOUNT 0.00 no account or the account upon which it is drawn or credit card account has been closed.

STATEMENT OF DISCLAIMER AND ARBITRATION AGREEMENT
The factory warranty constitutes all of the warranties with respect to the sale of the irentities. The Seller berby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or library to a particular purpose. Seller neither assumes nor authorizes any other person of the dealership arising from or neited to this vehicle or this transaction will be settled by mandatory, and binding arbitration purpose. Seller addition and to the declaration and 9 U.S.C. 5 1 et. a.eg., The arbitration shall be conducted by a single arbitrator. The arbitrator may grant whatever relief the parties may be entitled to at law or in equity. HAZARDOUS WASTE FEE 0.00 TOTAL CHARGES 615.13 LESS INS/DED/DIS 0.00 SALES TAX 31.53 CUSTOMER SIGNATURE PLEASE PAY THIS AMOUNT 646.66

ALL AMERICAN CHEVROLET OF MIDLAND #11

> 4100 W. Wall Street Midland, TX 79703 Phone: (432) 694-9601

Fax: (432) 681-1013

NET

INVOICE

MIDLAND, TX HOME : CONT: N/A BUS: CELL:

SERVICE ADVISOR: 68693 JUSTIN BUILTA LICENSE

. PAGE 1

TAG MAKE/MODEL MILEAGE IN/ OUT COLOR YEAR VIN COFFE CD 29474/29474 GALAXY-SIL 05 CHEVROLET MALIBU 1G1ZT54855F INV. DATE PAYMENT RATE PROD: DATE WARR EXP. PROMISED PO NO. DEL DATE

08NOV07 0.00 CASH 18:00 07NOV07 11DEC04 IS STK:5F176034 DLR:07375 1)LIFETIME OIL R.O. OPENED READY OPTIONS:

STANDARD, LSSP, 274182

10:10 07NOV07 13:28 08NOV07

LINE OPCODE TECH TYPE HOURS LIST A CUSTOMER STATES: CHECK FOR NOISE IN STEERING COLUMN WHILE DRIVING

CAUSE: BOLT MISSING STEER STEERING

80985 WCM4

(N/C)

TOTAL

29474 MISSING BOLT DUPLICATED CUSTOMER COMPLAINT THEN REMOVED STEERING WHEEL KICK PANEL AND FOUND THAT THERE WAS A MISSING BOLT FOR THE STEERING COLUMN TO THE CROSS MEMBER INSERTED NEW BOLT THEN REASSEMBLED

> YOU MAY RECEIVE A SATISFACTION SURVEY BY MAIL. IF YOU'RE UNABLE TO MARK COMPLETELY SATISFIED TO ALL THE QUESTIONS, PLEASE CONTACT OUR SERVICE MANAGER.

YOUR SATISFACTION IS OUR #1 GOAL. THANK YOU FOR CHOOSING ALL AMERICAN CHEVROLET.

CHEVROLET

DORIGINAL

Signature or initials" NOTICE PURSUANT TO \$70.001, TEXAS PROPERTY CODE I am the person or agent acting on behalf of the person, who is obligated to pay for the repair of the motor vehicle subject to the repair agreement, i understand that the vehicle is subject to repost session in accordance with \$9.609, Texas Business and Commerce Code. If payment for the repair of the motor vehicle by a check, money order or a credit card transaction is stopped, dishonared because of insufficient funds, no funds, or because the maker or drawer of the order or the credit card holder has no account or the account upon which it is drawn or credit card account has been closed. STATEMENT OF DISCLAIMER AND ABSITRATION AGREEMENT The factory warmity constitutes all of the warrantee with respect to the tale of this itenfitemen. The Seller hereby expressely disclaims all warrantee either express or implied, including any impoled warranty of	THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REMACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE	DESCRIPTION LABOR AMOUNT PARTS AMOUNT GAS, OIL, LUBE SUBLET AMOUNT HAZARDOUS WASTE FEE TOTAL CHARGES LESS INS/DED/DIS SALES TAX	0.00 0.00 0.00 0.00 0.00 0.00 0.00
CUSTOMER SIGNATURE	RECHECK DUALTY, GENERAL MANAGER OR AUTHORIZED PERSON (CATT)	PLEASE PAY THIS AMOUNT	0.00

February 7, 2011



Service Request: 71-594483994

Customer Relationship Specialist: Anne Parks

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$581.72.

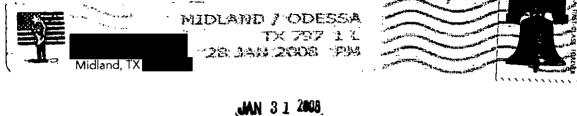
At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 50-937 CHECK NO. 213 DATE **AMOUNT** 01/23/08 ****72 CENTS ***************581.72 North American Operations General Motors Corporation Disbursement Account TO THE ORDER MIDLAND TX The Chase Manhattan Bank, N.A. Syracuse, New York AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO 1 CHECK NO. BB 000000200 PAYMENT DATE VENDOR NAME 01/23/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT HET AMOUNT 01/22/08 | VM 1-9TYPTH 71-594483994.1-9TYPTH 00.0000 581.72 .00 581.72 1G1ZT54855F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 .00 TOTAL 581.72 581.72



Anne Parks Customer Asst. Specialist Chevalet Division General Motors Corp. P. 0 Bof 33170 Detroit, Mi 48232-5170

1/28/08 ANNE PARKS: Thank you so much for your time and work you put in on my car claim -I appreciate you so much - I am a 74 year old widow with a fifed Income with health Issues-I received my check in the mail Saturday Jan 26/08 a Rappy Customer Midland TX

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 50-937 CHECK NO. 213 AMOUNT DATE 01/24/08 XXXXXXXXXXXXX579 DOLLARS XXXX62 CENTS ***************579.62 North American Operations General Motors Corporation Disbursement Account LYNCHBURG SC The Chase Manhattan Bank, N.A. Syracusa, New York AUDIT North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. B8 000000320 PAYMENT DATE VENDOR NAME 01/24/08 REGISTER NO. DESCRIPTION DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT INVOICE DATE 01/23/08 VM 1-9U6TBC .71-594586610.1-9U6TBC 00.0000 579.62 .00 579.62 1G1ZT54805F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 579.62 .00 579.62 TOTAL

Hynch burg, S.C. USA 41

Reimbursement Department. P.O. Box 33170 Detroit, MI 48232-5170

4<u>8232</u>+5170

.70 Madaladdadadaamamamadaaam

GOLUMBIA SC 292

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant						
Date Claim Submitted: 10/14/06						
17-Digit Vehicle Identification Number (VIN): 161 TT 54805 F	۔۔· <u>۔</u>					
Mileage at Time of Repair: 45,984 Date of Repair: 10 / 10 / 06						
Claimant Name (please print)						
Street Address or PO Box Number:						
City: Lynch burg State: S.C. ZIP Code:						
Daytime Telephone Number (include Area Code)						
Evening Telephone Number (include Area Code):						
Amount of Reimbursement Requested: \$ 579.62						
The following documentation must accompany this claim form.						
Original or clear copy of all receipts, invoices, and/or repair orders that show:						
The name and address of the person who paid for the repair.						
 The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. 	<u></u>					
The total cost of the repair expense that is being claimed.						
Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)						
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.						
Claimant's Signature						

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

0010678/3MR2V071129R08 Page 03 of 03

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



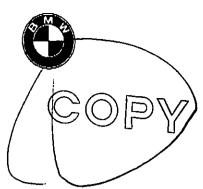


NEWSOME OF FLORENCE, INC

2199 DAVID McLEOD BLVD. FLORENCE, S.C. 29501 (843) 662-8711



Mercedes-Benz



CUSTOMER NO.	123417		DESSE		204 ^{TAG NO.} 2741	MT6716/06	™&\$C\$113500
			LABOR RATE	LICENSE NO.	1	STLVER/	STOCK NO
			VEAD /MAVE /MANDI	<u> </u>	43,984	<u> </u>	DO INTO A CONTROL OF THE PARTY
TIMMONSV	ILLE, SC		TOS/CheVRoL	ET/Malibu		DELIVERY DATE	DELIVERY MILES
	,		TGTOZ T	5 4 8 0 5	F	SELLING DEALER NO.	PRODUCTION DATE
			F. T. E. NO.		D. NO.	6.10712/06	
		BUSINESS PHONE	COMMENTS			10/12/00	1000
							MO: 45984
PARTS	OWNER STATES PLEASE CHECKED AND REMOVED AND CALIBRATED S TYFP-NUMBE 1 15926 SS SHO ARGE	RING: DEPARTHENT: HOUSES TANT THE VEH LOOSES (AND ADVISE) FOUND TORQUE SENSOR REPLACED STEERING CO SESNORS. R. DESC 870 COLU	POMER STEERING A FAULTY LUMN. RESET LIGHT RIPTION- MN 6.518 JOB # 1 ER CARD / AMEX SFIED *** kind or nature n connection described ccordance with can Arbitration idate by way of subject to	Z866	PRICE - 359.00 3		7 2006
PAGE 1 OF 1		. *CCOUNTING COP	Y	[END OF	INVOICE] 05:31pm		

February 7, 2011



Service Request: 71-594586610

Customer Relationship Specialist: Jane West

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$579.62.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO.

DATE 02/07/08

***************169 DOLLARS**

****60 CENTS

AMOUNT **************169.60**

North American Operations General Motors Corporation Disbursement Account

The Chase Manhattan Bank, N.A. Syracuse, New York

BB 000000629

INVOICE DATE

VENDOR DUNS NO

VENDOR NAME

AUDIT

DOC. REFERENCE NUMBER

MIRAMAR FL

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

INVOICE AMOUNT

DETACH BEFORE DEPOSITING CHECK

CHECK NO. PAYMENT DATE

DISC. AMOUNT

02/07/08 NET AMOUNT

REGISTER NO. DESCRIPTION 02/06/08 | VM 1-9V85HQ 71-59476\$503.1-9V85HQ 00.0000 169.60 .00 1G2ZH528654

% DISC.

169.60 H3

ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

TOTAL

169.60

.00

169.60



TSEC 2 8 3007



Reimbursement Department P.O. BOX 33170 Dedroit, MI 48232, 5170

Idallaladalladaladalam))...Madadhanill

4423245170

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant						
Date Claim Submitted: 12-18-07						
17-Digit Vehicle Identification Number (VIN): 1622 H528654						
Mileage at Time of Repair: 44.37 Date of Repair: 11-17-07						
Claimant Name (please print):						
Street Address or PO Box Number:						
City: Miramar State: FL ZIP Code:						
Daytime Telephone Number (include Area Code): _						
Evening Telephone Number (include Area Code):						
Amount of Reimbursement Requested: \$ 16Q-00						
The following documentation must accompany this claim form.						
Original or clear copy of all receipts, invoices, and/or repair orders that show:						
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt) 						
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.						
Claimant's Signature:						
Please mail this claim form and the required documents to:						
P.O. Box 33170 Detroit, MI 48232-5170						

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair-would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

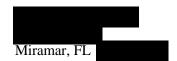
Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Pontiac Customer Assistance Center at 1.800.620.7668 (TTY 1.800.833.7668).





MOR than TIRES 1625 N. State Road 7 (441 & 7 Hollywood, FL 33021	āft)		DATE // / / / O / AM PM NAME CITY	STATE	INVOIC	PHONE WHEN	0352 N READY NO
Tel: (954) 967-1927 • Fax: (954) 9			MIRAMAN	FL			
	EAGE LIC. TA	\G #	IRES. PHONE	BUS. PHONE			
VIN#			SERVICE DESCR	IPTION		LABOR AN	IOUNT
PART NUMBER & DESCRIPTION	AMOUN	NT T					
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TOTAL PA	RTS						_
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*** THIS CHARGE REPRESENTS COST AND PROFITS TO THE MOT FACILITY FOR MISCELLANEOUS SHOP SUPPLIES OR WASTE D	OR VEHICLE REPAIR	[FS	403.7185] [FS 403.718]		PARTS	20	•
I hereby authorize the above repair work to be done along with necessary materials. You and your	PLEASE READ CA	REFULLY,	CHECK ONE OF THE STATEMENTS BELOW	*GAS, SOLVENT. E	NVIRO. CHG		
tion or delivery at my risk. An express mechanics lien is admovfedge on above vehicle to secure the mount of motion therein. You will not be held responsible for loss or damages to vehicle	AND SIGN: I UNDE A WBATTEN ESTIN	RSTAND MATE. IF M	THAT UNDER STATE LAW, I AM ENTITLED TO 1Y FINAL BILL WILL EXCEED \$50.00.		SUBTOTAL	160	
countides left in vehicle in case of fire, theft accident or any other clause. I agree to pay macrostal interest or all accounts until paid plus collection fees, attermy's less and any other others or I REQUEST A WRIT			EN ESTIMATE.		TAX	9	6.0
constitute payment when the check has cleared the bank and taute or any creck to clear will permit you to enter ornio my premises for the purposes of repossessing the vehicle in order to safety and clean it further enter that your lien, claim or rights may be assigned by you at any time.	REPAIR COSTS D	D NOT EX	t a written estimate as long as the (Ceed \$. The shop may	' 	TOTAL	169	60
to anyone. It has been brought to my attention that my off pairs may be returned to nile of the charge if I wish by stating same on work order, and also by statues address order an estimate of repairs posted in the waiting area. I acknowledge receipt of a copy of this order as an estimate of repairs	NOT EXCEED THIS	AMOUNT	WITHOUT MY WRITTEN OR ORAL APPROVAL		DEPOSIT		
to make, and agree to dischifutions and listed above ORDERED BY	Signed:		11/17/07		BALANCE		

February 7, 2011



Service Request: 71-594765503

Customer Relationship Specialist: Celeste Rodela

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the loss of power steering that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$169.60.

In order to assure completion of this special coverage, we are requesting that you contact your local dealership to set up an appointment to have your vehicle inspected.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

50-937 213 North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 снеск No. DATE AMOUNT 01/24/08 XXXXXXXXXXXXXX557 DOLLARS ****26 CENTS **************557.26** North American Operations General Motors Corporation Disbursement Account HERMANN MO The Chase Manhattan Bank, N.A. Syracuse, New York AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. BB 000000246 PAYMENT DATE VENDOR NAME 01/24/08 REGISTER NO DESCRIPTION DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT NET AMOUNT INVOICE DATE DISC. AMOUNT 01/23/08 VM 1-9U4HVZ 71-594803587.1-9U4HVZ 00.0000 557.26 .00 557.26 1G1ZT528X5F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 TOTAL 557.26 .00 557.26

February 7, 2011



Service Request: 71-594803587

Customer Relationship Specialist: Roxy King

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$557.26.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

Hermann, Mo

Re imbursement Department P.O. Box 33170
Det roit, MI 48232-5170

4823245170

Adultahadadhadddhaalladhaallaannill

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: Doc. 14, 2007
17-Digit Vehicle Identification Number (VIN): 1G17T528X5F
Mileage at Time of Repair: Date of Repair:
Claimant Name (please print)
Street Address or PO Box Number:
City: Lemann State: 40 ZIP Code:
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code): Same as Cubove
Amount of Reimbursement Requested: \$ 1025.26
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.
Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261



CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

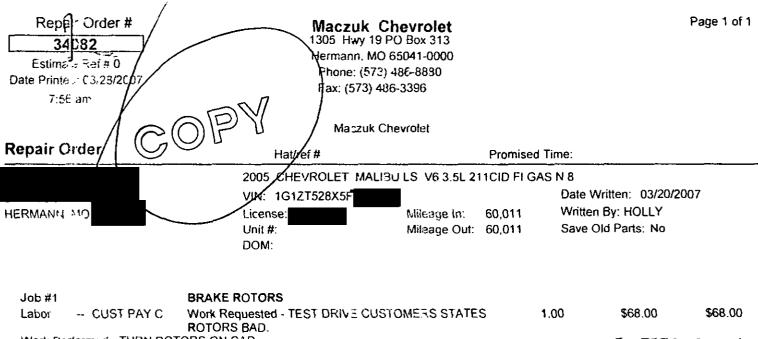
Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete the claim and offered the opportunity to resubmit the claim when the missing documentation is available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).





Work Performed - TURN ROTORS ON CAR SubTotal: \$68.00 Job #2 POWER STEERING IS INOP. AFTER **DRIVING. TEST DR...** Labor **OUST PAY C** Work Requested - POWER STEERING IS INCP. AFTER 2.50 \$68.00 \$170.00 DRIVING. TEST DRIVE Work Per Immed - FOUND FAULT CODE C0545 STEERING WHEEL TORQUE INPUT SENSI... TEST SYSTEM AND REMOVE AND REPLACE STEERING COLUMN. 88967179 1,00 \$359.00 \$359.00 Part COLUMN \$529.00 SubTotal:

using the supplied parts may void any warrentys on labor of repair as determined by shop

lesso which

ssee's usage thereof. proof of insurance is required to rent any cars

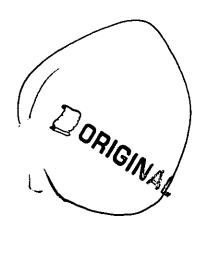
9882 8 /08

\$238.00 Labor: Sublet: \$0.00 \$0.00 Misc. Discount: \$0.00 Hazmat: \$5.00 Supplies: \$0.00 Tax: \$23.26

\$359.00

Parts.

Total: \$625.26



SEC HART OTH BEFREENA UTTEN DOOD OF GALERYE

RECORD NUMBER : 3/32 FOULTH A PARAMETER FOULTH D

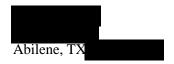
625.26

PLES PRINT CARD

1

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

February 7, 2011



Service Request: 71-594817629

Customer Relationship Specialist: Gavin Sanders

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the power steering column that you had repaired. Although we regret that we are unable to reimburse you the full amount you requested, we will reimburse you for the amount that pertains to the special coverage. We have enclosed a check in the amount of \$106.00.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

ABILENETY FRE 20 DEC 2007 PM 2 L Reinbursenent Department PO BOX 33170 Detroit, MI 48232-5170 DEC 2 4 2007. Thidhdaddalladddadlladladladllaadl

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant
Date Claim Submitted: 121907
17-Digit Vehicle Identification Number (VIN): 1612552F75F
Mileage at Time of Repair: 5019 Date of Repair: 618107
Claimant Name (please print):
Street Address or PO Box Number:
City: Abile of State: ZIP Code
Daytime Telephone Number (include Area Code):
Evening Telephone Number (include Area Code):
Amount of Reimbursement Requested: \$ <u>\130</u>
The following documentation must accompany this claim form.
Original or clear copy of all receipts, invoices, and/or repair orders that show:
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter. Claimant's Signature:

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete the claim and offered the opportunity to resubmit the claim when the missing documentation is available

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).





PAPER TIGER PRINTING INC.

PAGE 1 OF 3

LAWRENCE HALL CHEVROLET CADILLAC BUICK PONTIAC GMC



1385 So. Danville

ABILENE, TEXAS 79605

325-695-8800

1-800-568-7158

CELL: INVOICE DATE CUSTOMER NO. 100537 1031 06/08/07 CVCS421215 LON BEASLEY LICENSE NO. 50.699 YEAR/MAKE/MODEL EUVERY DATE DELIVERY MILES 05/CHEVROLET/MALIBU/4 DOOR SEDAN ABILENE, TX SELLING DEALER NO. PRODUCTION DATE 1 G 1 Z S 5 2 F 7 5 F OBATE 06/06/07 RESIDENCE PHONE COMMENTS MO: 50699 JOB# - 1 CHARGES -----LABOR ----J# 1 45CVZ STEERING/SUSPENSION TECH(S):113 160.00 SIERRING/SUSPENSION TECH(S):113
CUST STATES POWER STEERING INOP, CUST CAN CYCLE IGNITION
SWITCH AND POWER STEERING WILL BE OK AWHILE----ADVISE
AUTH #462405-20735 FOR 1245.50 INCLUDES 2 DAY RENTAL
CUST OWES 100.00 DEDUCT PLUS 30.00 FOR ALIGNMENT
AMERICAN FINANCIAL WARRANTY-FAX 281-334-4811
FOUND CODES C0545, C0460, U2109. STEERING SENSOR SHORTED.
INSTALLED STEERING COLUMN. DISCLAIMER OF WARRANTIES: Any warranties on the products sold hereby are those made by the manufacturer. The Seller. LAWRENCE HALL CHEVROLET CADILLAC, hereby expressly PARTS------QTY----FP-NUMBER--------DESCRIPTION-----disclaims all warranties, either 15926870 **COLUMN 6.518** 359.00 1 359.00 express or implied, including any 359.00 TOTAL - PARTS implied warranty of merchant-JOB# 1 TOTALS----ability or fitness for a particular 160.00 LABOR purpose, and LAWRENCE HALL 359.00 PARTS CHEVROLET CADILLAC neither JOB# 1 JOURNAL PREFIX CVCS JOB# 1 TOTAL 519.00 assumes nor authorizes any other JOB# 2 CHARGES ----person to assume for it any liabil-LABOR - - ity in connection with the sale of SUSPENSION CONCERN TECH(S):113 J# 2 45CVZ03 104.00 CUST STATES BUMPING NOISE COMING FRT END /STEERING WHEN said products. HITTING BUMPS ---- ADVISE FOUND STEERING GEAR BUSHINGS WORN CAUSING NOISE. INSTALLED GEAR. PARTS-----QTY---FP-NUMBER--------UNIT PRICE---- DESCRIPTION----15858368 GEAR 6.508 372.35 372.35 100.00 15858368 CORE RETURN 100.00 ORIGINAL TOTAL - PARTS 272.35 JDB# 2 TOTALS-----104.00 LAROR PARTS 272.35 JOB# 2 JOURNAL PREFIX CVCS JOB# 2 TOTAL 376.35 JOB# 3 CHARGES -----LABOR-----J# 3+02CVZ QUALITY CONTROL TECH(S):144 COMPLETE A QUALITY CONTROL CHECK+ QUALITY CONTROL COMPLETED JOB# 3 TOTALS-----JOB# 3 JOURNAL PREFIX CVCS JOB# 3 TOTAL 0.00 JOB# 4 CHARGES-----"Our Goal at Lawrence Hall Chevrolet is to exceed your LABOR -SHOCKS/STRUTS 96.00 J# 4+45CVZ09 TECH(S):113 expectations." LT FRT SHOCK LEAKING OIL

[CONTINUED ON NEXT PAGE] 03:03pm



LAWRENCE HALL CHEVROLET CADILLAC **BUICK PONTIAC GMC**



1385 So. Danville **ABILENE, TEXAS 79605** 325-695-8800 1-800-568-7158

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							express	or implied, including
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"Our Goal at Lawrence Hall Chevrolet is to exceed your

expectations."

PAGE 2 OF 3

[CONTINUED ON NEXT PAGE] 03:03pm



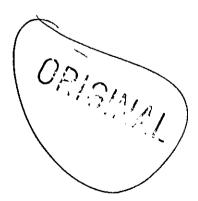
LAWRENCE HALL CHEVROLET CADILLAC **BUICK PONTIAC GMC**



1385 So. Danville **ABILENE, TEXAS 79605** 325-695-8800 1-800-568-7158

	<u>GM</u>	
l	PARTS	

CUSTOMER NO.	ADVISOR		TAG NO	- 1	INVOICE DATE	INVOIDENO.
100537	LON BEASLEY		<u>50</u>	1031	<u>06/08/07</u>	CVCS421215
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-TOTALS	 				·	
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* [] AMEX [] CHARGE COUPON [] PO	* *	TOTAL MISC DI		0.00 64.14	the man	ufacturer. The Seller.
* JAMEX JCHARGE COOPON JPO	*	TOTAL TAX		04.14		CE HALL CHEVROLET
**********	** 7	TOTAL INVOIC	E \$	1351.50		
THE WALL TO LAND DURING THE						IC, hereby expressly
THANK YOU FOR YOUR BUSINESS!!						all warranties, either
					express o	or implied, including any
	<u>.</u>				implied v	warranty of merchant-
CUSTOMER SIGNATURE					ability or	fitness for a particular
****** DUPLICAT	EINVOICE	*****	*****	*****	numose	and LAWRENCE HALL
						LET CADILLAC neither
						nor authorizes any other
					person to	assume for it any liabil-
					ity in con	inection with the sale of
					said prod	ucts.



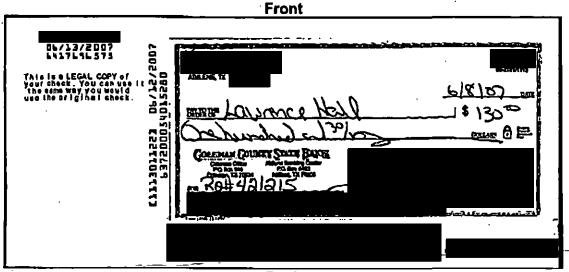
"Our Goal at Lawrence Hall Chevrolet is to exceed your expectations."

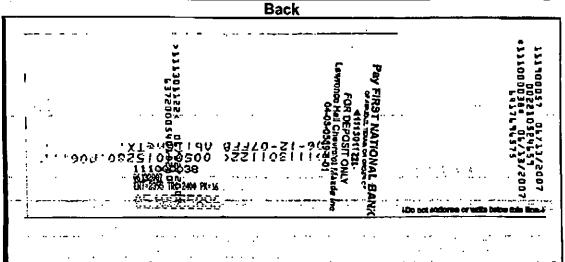
PAGE 3 OF 3

PAPER TIGER PRINTING INC. - ABILENE, TEXAS

[END OF INVOICE] 03:03pm

Print Close



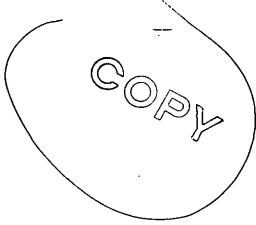


Item's Information

Bank: Date: 6/13/2007 Ck: 1266 Amt: \$130.00

Loc: 1 DocSrc: 1 Dist.#: 2 CapDate: 6/13/2007 TranCode: 63 Sequence: 1012470 RunNbr: 1 Debit/Credit: DB





North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO.

DATE 01/24/08

*************106 DOLLARS

XXXX00 CENTS

AMOUNT ************

North American Operations General Motors Corporation Disbursement Account

ABILENE TX

AUDIT

VENDOR DUNS NO 000000176 BB

The Chase Manhattan Bank, N.A. Syracuse, New York

ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530

CHECK NO.

PAYMENT DATE

01/24/08

DETACH BEFORE DEPOSITING CHECK

VENDOR NAME REGISTER NO. DESCRIPTION DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT HET AMOUNT 01/23/08 VH 1-9U509A 71-594817629.1-9U509A 00.0000 106.00 .00 106.00 1G1ZS52F75F

TOTAL

106.00

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106.00

DVD P&DC KEARNY NO 070 19 DEC 2007 PM 7 T Rein bursement Department P.O. Box 33170 PLED & & COM Detroit, MI 48232-5170 INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant						
Date Claim Submitted: 12-14-07						
17-Digit Vehicle Identification Number (VIN): 1 G I Z S 5 2 F 5 5 F						
Mileage at Time of Repair: 45184 Date of Repair: 6-4-07						
Claimant Name (please print):						
Street Address or PO Box Number:						
City: Rah way State: UJ ZIP Code:						
Daytime Telephone Number (include Area Code):						
Evening Telephone Number (include Area Code):						
Amount of Reimbursement Requested: \$ 5 95.70						
The following documentation must accompany this claim form.						
Original or clear copy of all receipts, invoices, and/or repair orders that show:						
 The name and address of the person who paid for the repair. The Vehicle Identification Number (VIN) of the vehicle that was repaired. What problem occurred, what repair was done, when it was done, and who did it. The total cost of the repair expense that is being claimed. Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt) 						
My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.						
Claimant's Signature:						

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
 the claim and offered the opportunity to resubmit the claim when the missing documentation is
 available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



SULLIVAN CHEVROLET INC

10 WEST WESTFIELD AVENUE ROSELLE PARK NJ 07204 908-241-1414

908-241-1037



				98361 G1ZS5	identicaelo 2F55F	######################################	DATE 007 06/04/07	22000
RAHWAY		ŊJ		(AR NO	KK SVROLBT	MALIBU	GOLD	7AG NO.
CUST.MO.	LICENSE	ROME PROME	MORE		STOCK B	00/00/00	SERV.ADV.	
	DELT	v. DATE DEGIV.)		15184	06/04/07			

DISPOSAL OF HAZARDOUS WASTE The State of N.J. requires that all hazardous waste (Oil, Solvents, Anti-freeze, etc.) must be disposed by a licensed contractor in an environ- ion to our concern for the environment

mentally safe manner. The charges for disposal of hazardous waste reflects our conformity to state law in addit-

LIME OP. CODE FAIL-CD TECH. HOURS/QTY TYPE AMOUNT CUSTOMER STATES CK STEERING HARD AT TIMES REPL COLUMN

15926870 S/COL REM A6 6513

---**178.00** 376.95 554.95 Line Total....

178.00 Labor 376.95 Parts 1.78 Shop SUPPLIES 38.97 SalesTax 595.70 TOTAL-AMOUNT

CUSTOMER COPY - PAGE 01

STATISCHE OF DISCLASSES.

The factory werranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all surrenties either express or implied, including any implied surrenty of merchantability or fitness for a particular purpose. Seller seither assumes nor enthorises any other person to assume for it any liability in connection with the sale of this item/items.

On behalf of servicing dealer, I hereby certify that the information contained hereon is accurate unless otherwise shown. Exerunty services described were performed at no charge to owner. There was no indication from the appearance of the vehicle or otherwise, that any part repaired or replaced under this claim had been connected in any way with any excident, negligence or wisese. Nectoric supporting this claim are svallable for (1) year from the date of payer cation at the servicing dealer for imspection by menufacturer's empresentative.

(SIGNED) DEALER, GREENL MARKOTE OR AUTHORISED PRESON (DATE) COSTONER SIGNATURE

SULLIUAN CHEUROLET 10 WEST WESTFIELD ROSELLE PARK, HJ 07204

TERMINAL 1.0.:

94993702

MERCHANT B:

310138940937002

SULLIVAN CHEVROLET INC 10 WEST WESTFIELD AVENUE ROSELLE PARK NJ 07204 908-241-1414 908-241-1037

BATCH: 888493 BATCH: 808493 INU: 4
DATE: JUN 64: 07
AUTH NO: 129352

TOTAL

\$595.78

HORMA E

I AGREE 10 PAY ABOVE 101AL AMOUNT ACCORDING 10 CARD ISSUED AGREEMENT (MERCMANT AGREEMENT IF CREDIT VOUCHER)

CUSTOMER COPY

	VEH	icle ii	ENTIFICATION	MILEAGE OUT	DATE	OUT	INVOICE NO.
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DELTY, MILES	MILEAG	IN.	DATE IN	IN-SERV DATE		//	
0	451	84	06/04/07	00/00/00			

DISPOSAL OF HAZARDOUS WASTE The State of N.J. requires that all hazardous waste (Oil, Solvents, Anti-freeze, etc.) must be disposed by a licensed contractor in an environ-

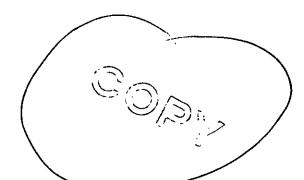
mentally safe manner. The charges for disposal of hazardous waste reflects our conformity to state law in addit-

LINE OP. CODE FAIL-CD TECH. HOURS/QTY TYPE AMOUNT CUSTOMER STATES CK STEERING HARD AT TIMES REPL COLUMN

> A6 6513 15926870 S/COL REM

~~~C 178.00 376.95 Line Total.... 554.95

Labor 178.00 376.95 Parts Shop SUPPLIES 1.78 SalesTax 38.97 TOTAL-AMOUNT 595.70



#### CUSTOMER COPY - PAGE 01

constitutes all of the wayrenties with respect to the sale of this item/items. The Seller bereby expressly disclaims all sarranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Soller maither assumes now exthorises any other person to assume for it may liability in connection with the sale of this item/items.

CUSTOME STORETON

On behalf of servicing dealer, I hereby certify that the information contained hereon is accurate values otherwise shown. Marranty services described were performed at no charge to owner. There was no indication from the appearance of the vehicle or otherwise, that may part repaired or replaced under this claim had been connected in any way with any accident, negligence or edense. Records supporting this claim are evallable for (1) year from the date of payment motification at the servicing dealer for inspection by manufacturar's representative.

(SIGNED) DEALER, GENERAL MARAGER OR AUTHORISED MERSON (DATE)

#### February 7, 2011



Service Request: 71-594829945

Customer Relationship Specialist: Anne Parks

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$595.70.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 50-937 CHECK NO. 213 DATE AMOUNT 01/24/08 XXXXXXXXXXXXX595 DOLLARS XXXX70 CENTS **\*\*\*\*\*\*\*\*\*\*\*\***595.70 North American Operations General Motors Corporation Disbursement Account PAY TO THE ORDER OF RAHWAY NJ The Chase Manhattan Bank, N.A. Syracuse, New York AUDIT North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO 1 CHECK NO. 900952630 BB 000000280 PAYMENT DATE VENDOR NAME 01/24/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/23/08 | VM 1-9U59YZ .71-594829945.1-9U59YZ 00.0000 595.70 .00 595.70 1G1ZS52F55 ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REINBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 595.70 .00 TOTAL 595.70

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 50-937 213 CHECK NO. DATE AMOUNT **\*\*\*\*\*\*\*\*\*\*\***623.62 01/25/08 XXXXXXXXXXXXX623 DOLLARS XXXX62 CENTS North American Operations General Motors Corporation Disbursement Account BELLAIRE TX The Chase Manhattan Bank, N.A. Syracuse, New York AUDIT North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. 1 CHECK NO. BB 000000377 PAYMENT DATE VENDOR NAME 01/25/08 REGISTER NO. DESCRIPTION DOC. REFERENCE NUMBER INVOICE AMOUNT INVOICE DATE % DISC. DISC. AMOUNT NET AMOUNT 01/24/08 VM 1-9UHLER .71-594830346.1-9UHLER 00.000 .00 623.62 623.62 161ZU54845F

H3

TOTAL

623.62

.00

623.62

23.50

ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REINBURSEMENT OR QUESTIONS CALL 800-462-8782

#### February 7, 2011



Service Request: 71-594830346

Customer Relationship Specialist: Gavin Sanders



Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the power steering assist that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$623.62.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.



HOUSTON TX 772

19 DEC 2007 PM 8 L

TOTAL CONFORT TIFFANY

Reimbusement Dept.

PO BOX 33170

Detroit, MI 48232-5170

DEC 2 6 2007

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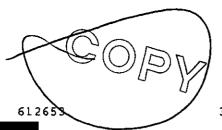
### **CUSTOMER REIMBURSEMENT CLAIM FORM**

| This section to                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | be completed by Clair    | nant              |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------|--|--|--|--|
| Date Claim Submitted: 12 18                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 3/07                     |                   |  |  |  |  |
| 17-Digit Vehicle Identification Number                                                                                                                                                                                                                                                                                                                                                                                                                                                    | r (VIN): 1612U           | 54845F            |  |  |  |  |
| Mileage at Time of Repair: 43,786                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Date of Repair:          | 09/06/07          |  |  |  |  |
| Claimant Name (please print):                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                   |  |  |  |  |
| Street Address or PO Box Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                          |                   |  |  |  |  |
| City: Bellaire Sta                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ite: <u>TX</u>           | ZIP Code:         |  |  |  |  |
| Daytime Telephone Number (include                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Area Code):              | <del></del>       |  |  |  |  |
| Evening Telephone Number (include                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Area Code):              |                   |  |  |  |  |
| Amount of Reimbursement Requester                                                                                                                                                                                                                                                                                                                                                                                                                                                         | d: \$ <u>023.62</u>      |                   |  |  |  |  |
| The following documentation must ac                                                                                                                                                                                                                                                                                                                                                                                                                                                       | company this claim for   | m.                |  |  |  |  |
| Original or clear copy of all receipts, in                                                                                                                                                                                                                                                                                                                                                                                                                                                | nvoices, and/or repair o | orders that show: |  |  |  |  |
| <ul> <li>The name and address of the person who paid for the repair.</li> <li>The Vehicle Identification Number (VIN) of the vehicle that was repaired.</li> <li>What problem occurred, what repair was done, when it was done, and who did it.</li> <li>The total cost of the repair expense that is being claimed.</li> <li>Payment for the repair in question and the date of payment.</li> <li>(copy of front and back of cancelled check, or copy of credit card receipt)</li> </ul> |                          |                   |  |  |  |  |
| My signature to this document attest request reimbursement for the expentage Claimant's Signature:                                                                                                                                                                                                                                                                                                                                                                                        |                          |                   |  |  |  |  |
| Claimant's Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                          |                   |  |  |  |  |

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261



377348

#### DAVIS CHEVROLET

2277 SOUTH LOOP WEST HOUSTON, TEXAS 77054 (713) 794-2500

\*INVOICE\*

| BELLAIRE.   |            |                         |                  |          | PAGE 1               |            | CHEVROL           | ET            |
|-------------|------------|-------------------------|------------------|----------|----------------------|------------|-------------------|---------------|
| HOME        |            | BUS:                    |                  | SER      | VICE ADVISO          | R- 45 MART | ANO VALDES        | <b>2</b>      |
| COLOR       | YEAR       | MAKE/MODEL              |                  |          | VIN                  | LICENSE    |                   | E IN/ OUT TAG |
| MAROON      | 05 CHE     | VROLET MA               | LIBU             | 1 G1 Z U | 54845F               |            | (42786)           | 42786         |
| DEL DATE    | PROD. DATE | WARR EXP.               | PROMIS           | ED       | PO NO.               | RAIL       | PAYMENT           | INV. DATE     |
| 05 MAR05 IS | 3          |                         | 18:00 07         | SEP07    |                      | 94.00      | CASH              | 06SEP07       |
| R.O. OPEN   | IED        | READY                   | ОРТІОНЅ          | DLR      | :30161 ENG           | :3.5_Llter | SFI               |               |
| 07:57 06SE  |            | 40 06SEPO               | l l              |          |                      |            |                   |               |
| LINE OPCOL  |            |                         |                  |          |                      | LIST       |                   | TOTAL         |
| A STEERING  |            | T TIMES-H.<br>D REPAIRS | AS HAD CC        | DES SE   | T-AL GOMEZ           | CHECKED-A  | DVISE~            |               |
|             | 22         | CPC                     |                  |          |                      |            | 235.00            | 235.00        |
|             | 15926870   |                         |                  |          |                      | 359.00     |                   | 359.00        |
|             |            |                         |                  |          | SENSOR CP            |            |                   |               |
| STEERING (  | COLUMN AN  | D REPROGR               | AMED STEE        | RING C   | CLUMN NOTE           | REAR BRAK  | E PADS            |               |
|             | ****       | ******                  | *****            | ****     | ******               | ******     | ***               |               |
| B CUSTOMER  |            |                         |                  |          |                      |            |                   |               |
| EW SE       | ERVICE CO  | NTRACT AU               | THORIZATI        | ON INF   | O companie o sessoro |            |                   |               |
|             | 99         | CPC                     | 3<br>3           |          | 665370231943         | ž.         | 0.00              | 0.00          |
|             | ****       | *****                   | *****            | ****     | ***                  | *****      | ***               |               |
|             |            | S002000                 | grossandossand 🖁 | ANK YO   | U FOR YOUR           | BUSTNESS   | \$79.845CCCC9699C |               |

THÀNK YOU FOR YOUR BUSINESS OPEN MONDAY THROUGH PRIDAY 6 AM TO 7 PM

| item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.  X  SIGNATURE OF PEISON RESPONSIBLE OR AGENT FOR PERSON RESPONSIBLE FOR PAYMENT  MOTICE PURSUAMY TO 170.001, TEXAS PROPERTY CODE. | CITHERWAS, I HAI ANY ART REPAILED ON REPAILED UNDER THIS CLAIM AND REEN CONNECTED IN ANY WAY WITH ANY ACCEDENT, INGLIDENCE OR MEUER RECORDS SUPPORTED THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE | LABOR AMOUNT PARTS AMOUNT           | 235.00<br>359.00<br>0.00<br>0.00<br>0.00<br>594.00 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|----------------------------------------------------|
| NOTICE PUBLICANT TO 170,001, TEXAS PROPERTY CODE                                                                                                                                                                                                                                                                                                                                                                                                           | AVAILABLE FOR (1) YEAR FROM THE DATE                                                                                                                                                                                                     | TOTAL CHARGES                       |                                                    |
| THIRTEL S SINDERT TO REPOSSESSON IN ACCORDANCE WITH ASSOCIATION OF THE STOPPED LINE OF THE COLOR OF THE REPOSSESSON OF THE WITH ASSOCIATION OF THE STOPPED DEHONORED BEAUTH OF THE VIBELLE IS STOPPED DEHONORED BEAUTH OF THE VIBELLE IS STOPPED DEHONORED BEAUTH OF THE VIBELLE IS TOPPED DEHONORED BEAUTH OF THE VIBELLE IS STOPPED TO THE ORDER HAS NO ACCOUNT ON WHICH IT IS DRAWN HAS REPOSSED.                                                       | Inches which departed of electronists electron in                                                                                                                                                                                        | LESS INSURANCE SALES TAX PLEASE PAY | 29.62                                              |
| X SIGNATURE OF PERSON RESPONSIBLE OR AGENT FOR PERSON RESPONSIBLE FOR PAYMENT                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                          | THIS AMOUNT                         | 623.62                                             |

Page 2 of 2 Sufficient cultural

### ÁNSACTIONS (CONTINUED)

| ians<br>Pato | Reference Number                                   | Merchant Name or Transaction Description  | Amo<br>Credit                           | ount<br>Debit |
|--------------|----------------------------------------------------|-------------------------------------------|-----------------------------------------|---------------|
| zate         | Melerence Number                                   | Merchant Name or Transaction Description  | Oredit                                  | Debi          |
|              | 102707 1 W                                         | IAH BWI                                   |                                         |               |
|              | 2 W                                                | BWI IAH                                   |                                         | /             |
| 9/05         | 74246517249554005360515                            | BED BATH & BEYOND #62 MEYERLAND TX        | X (0.81 /                               | <b>,</b>      |
|              | 24792627249655249057617                            | CONTINENTAL 0052153065287 HOUSTON TX      |                                         | 208.30        |
|              | 102707 1 W                                         | IAH BWI                                   |                                         |               |
|              | 2 W                                                | BWI IAH                                   |                                         |               |
|              |                                                    |                                           |                                         |               |
|              | 24164077249494530201751                            | BORDERS BOOKS 01000769 HOUSTON TX         | /                                       | 48.92         |
|              | 24610437251004029043175                            | HEB GROCERY #352 HOUSTON TX               | . /                                     | 18.04         |
| 09/07        | 24401407251001357300819                            | USPS 4806509550 BELLAIRE TX               |                                         | 6.55          |
| 9/07         | 74445007251962987748928                            | OFFICE MAX HOUSTON TX                     | W 16.23                                 | . •           |
|              | 24351787251132757269695                            | SOLUTIONS 800-3429988 OR                  |                                         | 54.98         |
|              | 24445007251962987749004                            | OFFICE MAX HOUSTON TX                     | -                                       | 17.0          |
|              | 24653007250900013615987                            | CHUCK DAVIS CHEVROLET HOUSTON TX          | •                                       | 623.62        |
|              |                                                    |                                           |                                         |               |
|              | 24088027253253274323200                            | TAMPICO SEAFOOD RESTAURAN HOUSTON TX      |                                         | 52.39         |
|              | 24492157254206864500268                            | HUMANE FARMING ASSOC SAN RAFAEL CA        |                                         | 150.00        |
| 09/10        | 24445007254966651058946                            | CVSPHARMACY #6240 Q03 HOUSTON TX          |                                         | 8.62          |
| 09/10        | 24445007254966651059027                            | CVS PHARMACY #5273 Q03 BELLAIRE TX        |                                         | 18.4          |
|              | 24129427254100002012807                            | SFTY CNTRL 7074720288 707-472-0219 CA     |                                         | 51.7          |
|              | 24246517254207199700452                            | MOTHERS AGAINST DRUNK DR 5152466930 TX    |                                         | 100.00        |
|              | 24792627254207699500050                            | DEBORAH COOPER-NEWLAND D BELLAIRE TX      |                                         | 98.0          |
|              |                                                    | _                                         |                                         | 100.0         |
|              | 24210737255286188900781                            | AIPAC 304-725-7050 DC                     |                                         |               |
|              | 74692167255000045491559                            | CHARLOTTE RUSSE 244 HOUSTON TX            | W 14.06 /                               |               |
|              | 24445007255967834116386                            | NORDSTROM #0730 Q18 HOUSTON TX            |                                         | 150.4         |
| 09/11        | 24445007255967834116469                            | NORDSTROM #0730 Q18 HOUSTON TX            |                                         | 104.7         |
| 09/11        | 24610437255004042548990                            | CENTRAL MARKET-HOUSTON HOUSTON TX         |                                         | 65.2          |
|              | 24610437255072025030666                            | ANTI DEFAMATION LEAGUE NEW YORK NY        |                                         | 100.0         |
|              | 24445007256969100054282                            | SPORTS AUTHORITY #0225 HOUSTON TX         |                                         | 12.9          |
|              | 24445007256969100054365                            | GALLERIA HOUSTON TX HOUSTON TX            |                                         | 12.9          |
|              |                                                    | CAROLI MILANO HOUSTON TX                  |                                         | 63.8          |
|              | 24323027256118065012571                            |                                           |                                         |               |
|              | 2 24013397256014716422768                          | SUPER CUTS #8212 HOUSTON TX               |                                         | 24.9          |
|              | 2 24610437256004044021854                          | HEB GROCERY #352 HOUSTON TX               |                                         | 25.9          |
| 09/12        | 2 24388947256038398411517                          | FTD*FTD.COM 501-8336470 IL                |                                         | 56.9          |
| 09/16        | 24071057260987193642383                            | MIA BELLA TRATTORIA HOUSTON TX            |                                         | 68:8          |
|              | 7 24761977260509505012396                          | BERINGS BISSONNET HOUSTON TX              |                                         | 112.5         |
|              | 7 24610437261004033082381                          | SEARS ROEBUCK 1237 HOUSTON TX             | <u> </u>                                | 75:.7         |
|              | 24055247263206069800072                            | BCWBREAST CARE CENTER HOUSTON TX          |                                         | 30.0          |
|              |                                                    | WHOLEFDS BEL 10134 SWH HOUSTON TX         | · · — · — · · · · · · · · · · · · · · · | 48.5          |
|              | 24445007263977290035889                            |                                           |                                         | 2.5           |
|              | 0 24129427263100003652279                          | CITY OF HOUSTON PARKIN HOUSTON TX         |                                         | 4.670.0       |
|              | 24755427263642636004304                            | LIMMUD NY 212-2846968 NY                  |                                         | 1,578.0       |
| 09/20        | 24755427263642636004312                            | LIMMUD NY 212-2846968 NY                  |                                         | 75.0          |
| 09/19        | 9 24326847263357262011205                          | S.L.M.T. PARKING GARAGE HOUSTON TX        | ~~                                      | 7.0           |
|              | 0 24129427263100003652253                          | CITY OF HOUSTON PARKIN HOUSTON TX         |                                         | 19            |
|              |                                                    |                                           |                                         |               |
|              | 24610437264004042017979                            | HEB GROCERY #352 HOUSTON TX               |                                         | 63.4          |
|              | 0 24445007264978916506955                          | CVS PHARMACY #5273 Q03 BELLAIRE TX        |                                         | 43.7          |
| 09/20        | 24387757264004014222898                            | MICHAELS #9444 HOUSTON TX                 |                                         | 6.9           |
| 09/21        | 1 24607947264206955500767                          | PIAZZA CAFE HOUSTON TX                    |                                         | 9.1           |
| 09/21        | 1 24717057265582650652994                          | AMERICAN AI 0012128392305 AA.COMAA RES TX | <del></del>                             | 210 0         |
|              | 110307 1 Q                                         | STL BWI                                   |                                         | 218.8         |
|              | 2 N                                                |                                           |                                         |               |
| 00,00        |                                                    | BWI STL                                   |                                         |               |
|              | 3 24610437267004032865798                          | HEB GROCERY #322 HOUSTON TX               |                                         | 16.0          |
|              | 1 74610437193004045549573                          | CENTRAL MARKET-HOUSTON HOUSTON TX         | 3.99 0                                  | 6             |
| 09/24        | 1 24792627268655268046083                          | CONTINENTAL 0052153935702 HOUSTON TX      |                                         | 518.7         |
|              | 122007 1 U                                         | STL IAH                                   |                                         | 610.7         |
|              | 2 U                                                | IAH EWR                                   |                                         |               |
|              | 3 UO                                               |                                           |                                         |               |
| 00/04        |                                                    | EWR STL                                   |                                         |               |
|              | 1 24445007268983890237003                          | CVS PHARMACY #5273 Q03 BELLAIRE TX        |                                         | 6.8           |
|              | 24299167268904429103622                            | JCPENNEY STORE 0870 HOUSTON TX            |                                         | <108.4        |
| 09/24        | 24445007268983890237185                            | CVS PHARMACY #5273 Q03 BELLAIRE TX        | <del></del>                             | 23.3          |
| 09/24        | 24326847268357267012302                            | S.L.M.T. PARKING GARAGE HOUSTON TX        |                                         | 5.0           |
| 09/24        | 24492157268849052634334                            | PAYPAL *ELBREN7 402-935-7733 CA           | <del></del>                             | 3,0           |
| 09/26        | 24301377269118000120414                            | THREE BROTHERS BAKERY HOUSTON TX          |                                         | 4.2           |
|              |                                                    |                                           |                                         | /14.7         |
|              | 24692167269000246044081                            | TM *JERSEY BOYS 214-373-8000 FL           |                                         | 181.3         |
| 09/20        | 74761977269509514012334                            | BERINGS BISSONNET HOUSTON TX              | 112.58                                  |               |
|              | 24427337269040002747056                            | TUESDAY MORNING #0027 HOUSTON TX          |                                         | 18.3          |
| 03/20        |                                                    |                                           |                                         |               |
| 09/27        | 24692167270000304163069<br>24401407269001354495166 | PROBLEM SOLVERS INTER 800-719-1217 VA     |                                         | 70.9          |

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

January 31, 2011



Service Request: 71-589704476

Customer Relationship Specialist: Jane West

Dear

Thank you for contacting us recently regarding the steering column notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this steering column.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a steering column notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$399.74.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.



Rimbursement Daych. P. O. B 0 4 3 3 1 70 Detroit, Meiligan 48 232 - 5 170

#### **CUSTOMER REIMBURSEMENT CLAIM FORM**

| This section to be completed by Claimant                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| Date Claim Submitted: 163.22, 2008                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |  |
| 17-Digit Vehicle Identification Number (VIN): 1612552F45F                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |  |
| Mileage at Time of Repair: 54,789 Date of Repair: 5EPT. 25, 2007                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |
| Claimant Name (please print):                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |  |
| Street Address or PO Box Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |
| City: RIDGE State: N.Y. ZIP Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |
| Daytime Telephone Number (include Area Code)                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |
| Evening Telephone Number (include Area Code): 5 AME AS ABOUE                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |
| Evening Telephone Number (include Area Code): 5 AME AS ABOUE  Amount of Reimbursement Requested: \$ 339.50 (costof LABOR)                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |  |
| The following documentation must accompany this claim form.                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |  |  |
| Original or clear copy of all receipts, invoices, and/or repair orders that show:                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |
| <ul> <li>The name and address of the person who paid for the repair.</li> <li>The Vehicle Identification Number (VIN) of the vehicle that was repaired.</li> <li>What problem occurred, what repair was done, when it was done, and who did it.</li> <li>The total cost of the repair expense that is being claimed.</li> <li>Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)</li> </ul> |  |  |  |  |  |
| My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.                                                                                                                                                                                                                                                                                                      |  |  |  |  |  |
| Claimant's Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |  |

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

#### **CUSTOMER REIMBURSEMENT PROCEDURE**

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

#### If your claim is:

- Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
  the claim and offered the opportunity to resubmit the claim when the missing documentation is
  available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



Tel. 22, 2008 To whom It may Concern, Enclosed please find the claim form and all the necessary payers needed for the claim. If you need anything else, please call or write to me Thank you for looking into This matter. Sincerely Ridge, K.y.

CARGE MAGAIN Unlimpted of Suffolk LLC mazpa HATIUUBI 112 (Mediford Asse.), Mediford, New York 11763 SALES 631-758-2200 NICE 631-289-2060\* PARTS 631-475-0708 N.Y.S. REPAIR SHOP NO. R 70778SO PAINTED: VEHICLE: IDENTIFICATION CLST. NO. DANGICE NO 1G1ZS52F45F 25SEP07 153961 IVA ∵ 05 CHEVROLET MALIBU 97.00 800 800 A C/S CHECK FOR NO POWER STEERING AND POWER 339.50 339.50 359.00 359.00 359.00 .,,,REPLACED POWER STEERING COLUMN B \$97.00 CHARGE TO CUSTOMER FOR REPAIRS NOT COVERED BY GM OR EXTENDED WARRANTY NO DIAG \$97.00 CHARGE TO CUSTOMER FOR 90 DAYS / 4000 MILES ON REPAIRS REPAIRS NOT COVERED BY GM OR EXTENDED WARRANTY NO EXCEPTIONS. UNLESS OTHERWISE STATED 0.00 ALL PARTS AND ACCESSORIES CJ CHECK WARRANTED FOR ONE YEAR ALL PARTS INSTALLED ARE NEW OR FACTORY REBUILT UNLESS SPECIFIED **OTHERWISE** DESCRIPTION TOTALS LABOR AMOUNT I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to which or arreles left in which it case of fire, then, or any other cause beyond your control or for any delays caused by unavailability of parts or control or for any delays caused by unavailability of parts or control or for any delays caused by supplier or transporter. I hereby grant you and/or your employees permission to operate the valued herein described on stream. Inglusys or selewhere for the purpose of testing and/or inspection. An express mechanic's len is hereby acknowledged on above which to secure the amount of repairs thereto. 339.50 PARTS AMOUNT 359.00 GAS,OIL, LUBE 0.00 SUBLET AMOUNT 0.00MISC. CHARGES 0.00 TOTAL CHARGES 698.50 LESS INSURANCE 0.00 SALES TAX I HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF 60.24 PLEASE PAY THIS AMOUNT Chevrolet may contact you by mailing a survey Question #16 is based on our efforts for you This survey is a grade card of your service team @ Chevy 112 & "NOT" the Chevy product. If you are unable to answer Question #16 completely satisfied contact our service mngr Tom Fontana to correct our shortcomings on ferall of striveng dealer, I herely certify that the producation contarted negleon is accurate edless otherwise Shown services described well menorated at no charge to owner there was no indication. From the appearance of DEALER, GENERAL MANAGER OR AUTHORIZED FERSON DATE

CUSTOMER COPY

RIDGE, NY

DATE READY

25SEP07

TIME READY

09:28

54792

MDEAGE OUT

EXCEPTIONS.

\*\* PRE-INVOICE \*\*

SERVICE ADVISOR

WALTERS

21 SEP07

TIME IN

13:27

MILEAGE IN

54789

PAULETTE SEWELL

STOCK NO.

CE1564X

LICENSE NO

531 CPC

CPC

STEERING LIGHT CAME ON DASH 99 REPLACED STEERING COLUMN

1 15926870 COLUMN

531

We sincerely thank you

for choosing Mazda 112,

Chevrolet 112 and

Hyundai 112 for all your

vehicle maintenance and repairs.

Please contact our service

manager if any problem

arises with the work

performed. Our goal is

total customer satisfaction!

CHECK CONTROL NO. INVOICE | INVOICE

54599

CARS UNLIMITED OF SUFFOLK, LLC
DBA NESSNEER 112 CHEVROLET & /OR
ISSUED BY: MARYANN CARUSO MAZDA 112 SALES &/OR HYUNDAI 112
MEDFORD, NY 11763

PAGE 1

|                      |                 |                       |                           | MEDFORD, N |                          |               |
|----------------------|-----------------|-----------------------|---------------------------|------------|--------------------------|---------------|
| INVOICE<br>STOCK NO. | INVOICE<br>DATE | PURCHASE<br>ORDER NO. | COMMENT/V.I.N.            | AMOUNT     | DISCOUNT/<br>ACCOUNT NO. | NET<br>AMOUNT |
|                      | 101207          |                       | GOODWILL<br>REIMBURSEMENT |            |                          | 359.0         |
|                      |                 |                       |                           | 54599      |                          | -359.0        |
|                      |                 |                       |                           | 154508     | 26300                    | 359.0         |
|                      |                 |                       |                           | · ·        |                          |               |
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|                      | ]               |                       |                           |            |                          |               |
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| · ?                  |                 | <del></del>           |                           | *========= |                          |               |
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|                      | ] }             |                       |                           |            |                          |               |
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|                      |                 |                       |                           |            |                          |               |
|                      |                 |                       |                           |            |                          |               |
|                      | <u> </u>        |                       |                           | TOTAL      | 20203                    | 359.0         |

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530



50-937 CHECK NO. 213

DATE 03/10/08

**\*\*\*\*74 CENTS** 

AMOUNT **\*\*\*\*\*\*\*\*\*\*\*\***399.74

North American Operations General Motors Corporation Disbursement Account

PAY TO THE ORDER

RIDGE NY

SIGNATURE

The Chase Manhattan Bank, N.A. Syracuse, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. BB 000000090 PAYMENT DATE VENDOR NAME 03/10/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 03/07/08 VH 1-A29PG2 71-589704476.1-A29PG2 00.0000 399.74 .00 399.74 1G1ZS52F45F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEHENT OR QUESTIONS CALL 800-462-8782

H3

TOTAL

399.74

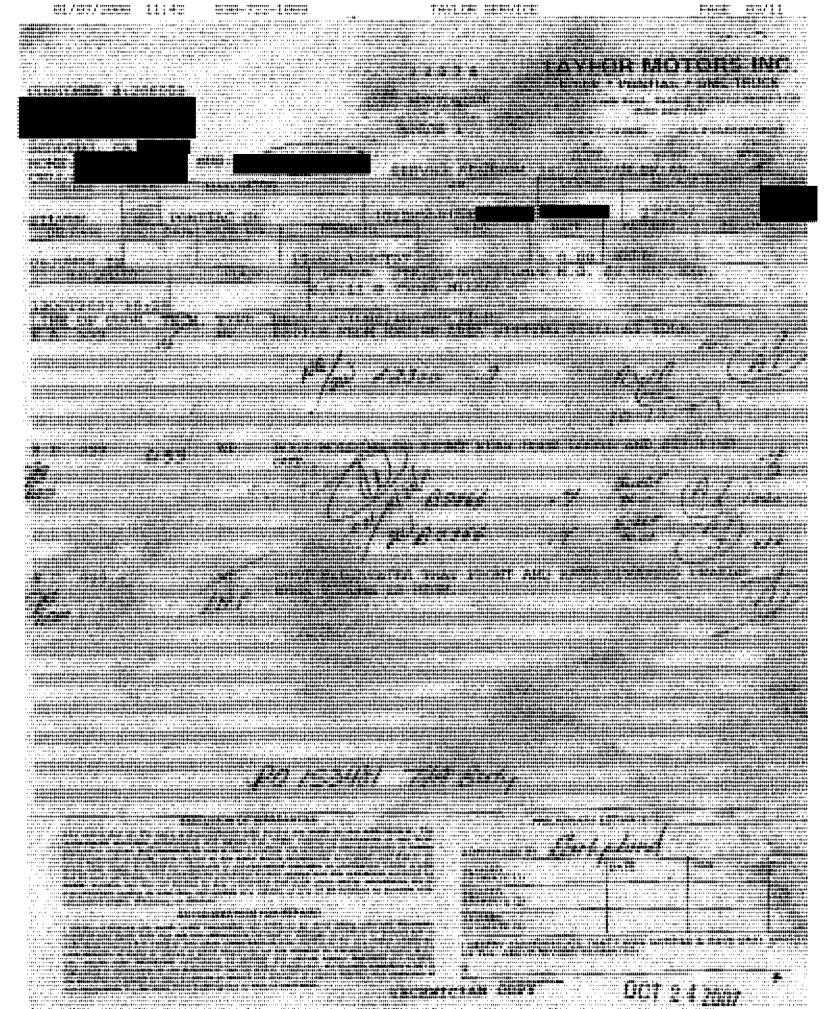
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399.74

01/07/2008 11:42 530-722-1089 TAYLOR SERVICE PAGE 01/11

| COMPLAINT                                             |           |          | LAB                             | OR RE                    | COR        | 0 21902                                      |
|-------------------------------------------------------|-----------|----------|---------------------------------|--------------------------|------------|----------------------------------------------|
| NEK MES COULD NOT VERING                              | EMP<br>NO | OPER (   | COST                            | ΕĻΑ                      | PSED<br>ME | TIME CLOCK                                   |
| NEK GARS COULD NOT VERING<br>AT THIS TOWN             | - 189     |          | MARKET VALGO.<br>Portugal valgo |                          |            |                                              |
|                                                       | 127       | (A)      |                                 |                          | 1.2        | OFFOCTO2 AMI                                 |
| CORRECTION:                                           | 1         | Ľ./      |                                 |                          |            | ON OCTAL AND                                 |
| COMPLEMENT                                            |           | <b>1</b> |                                 |                          | n          | OFFOCT02 am1                                 |
| COMPLAINT:                                            | 120       | ピソ       |                                 |                          | 10         | ON OCTO2 AM                                  |
| NY 4 CONTRE TO SAME ON 151.                           |           | ير برا   | 5.00                            |                          | /          | OFFOCTOS PM                                  |
| IN IT ME COURTED HEAR THEY                            | 45-72     | <b></b>  | 7                               |                          | 18         | ON DCTO3 PM                                  |
| COMPAN ORDERETT CONTROLLAND                           | #         |          |                                 |                          |            | All Delivers with the control of the control |
| laceo control usey                                    |           |          |                                 |                          |            | OFF                                          |
| COMPLAINT:                                            |           |          |                                 |                          |            | ON                                           |
| CAUSE:                                                |           |          |                                 |                          |            | OFF                                          |
|                                                       |           |          |                                 |                          |            | ON                                           |
| CORRECTION:                                           |           |          |                                 |                          |            | OFF                                          |
|                                                       |           |          |                                 |                          |            | ON                                           |
| COMPLAINT                                             |           |          |                                 | 7 P. 1.5                 |            | OFF                                          |
| CÀUSE:                                                |           |          |                                 |                          |            |                                              |
|                                                       |           |          |                                 |                          | <u> </u>   | ON                                           |
| CORRECTION                                            |           |          |                                 | 3                        |            | ØFF                                          |
|                                                       |           |          |                                 |                          |            | ON                                           |
| COMPLAINT                                             |           |          |                                 |                          |            | OFF                                          |
| CAUSE                                                 |           |          |                                 | itus Kraji<br>Hada Hayar |            | ON                                           |
|                                                       |           |          |                                 | 1.00 .x407<br>2.00 P.A.  |            | OFF                                          |
|                                                       |           |          |                                 |                          |            | ON                                           |
| GORRECTION:                                           |           |          | 9 44 46 404                     | 11/1940                  |            | ÖFF                                          |
| COMPLAINT                                             |           |          |                                 |                          |            | 33,000                                       |
| CAUSE:                                                |           |          |                                 |                          |            | ON                                           |
|                                                       |           |          |                                 |                          |            | OFF                                          |
|                                                       |           |          |                                 |                          |            | ON                                           |
| CORRECTION:                                           |           |          |                                 |                          |            | OFF                                          |
|                                                       |           |          |                                 |                          |            | ØN                                           |
| COMPLAINT:<br>CAUSE:                                  |           |          |                                 |                          |            | OFF                                          |
| - <del>C. C. del> |           |          |                                 |                          |            | ON                                           |
|                                                       |           |          |                                 |                          |            |                                              |
| CORRECTION:                                           |           |          |                                 |                          |            | OFF                                          |
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|                                                       |           |          |                                 |                          |            | ON                                           |
|                                                       |           |          |                                 |                          |            | OFF                                          |
|                                                       |           |          |                                 |                          |            | ON                                           |

**INFORMATION Redacted PURSUANT TO THE FREEDOM OF** www.taylormotorsredding.com INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) TAYLOR MOTORS INC. 206003 21902 BUICK \* PONTIAC \* GMC TRUCK WARRANTY 2525 Churnoreek Road · Redding, California 96002-1128 (530) 222-1200 BAR # A.C. 009835 EPA # CAD028948016 REDDING. CA PAGE 1 Р В GMC HOME: BUS: 23-356 57-372 40-404 SERVICE ADVISOR: CELL: BRIAN 380 William : con MAKEMODEL LICENSE STEAT I MILEAGEIN / OUT TAG 06 PONTIAC **G6** 1G2ZH558164 DEL. DATE WARR EXP E of Name RATE PAYMENT INV. DATE <u>06JUN06</u> <u>7:00 020CT07</u> WARR R.O. OPENED READY **OPTIONS:** STK:206003 1) GMPP SO DED. M.G. 6.6.11 @ 75046 MILES. <u>09:10 020CT07</u> 07:56 100CT07 LINE OPCODE TECH TYPE HOURS LIST NET8 HVAC CONTROL FOR PASSENGER STDE, HAS DIM ILLUMINATION. CAUSE: D0362 CONTROL, HEATER AND ADE CONDITIONING REPLACE 120 WP 0.70 15831511 CONTROL 123.63 176.61 123.63 FC: 1B 15831511 PART#: COUNT: 1 CLAIM TYPE: AUTH CODE: V5 1680 5650 TLABOR REPLACED HVAC CONTROL HEAD FOR POOR ILLUMINATIO N IN PASSENCER SIDE 18013 COST, SALE, & COMP TOTALS 10511 0 A buyer of this product in California has the right to have this product serviced or repaired during the warranty period. The warranty period will be extended for the number of whole days that the product has been out of the puyer's hands for warranty repairs. If a defect exists within the warranty period, the warranty will not expire until the defect has been fixed. The warranty period will also be extended if the warranty repairs have not been DESCRIPTION TOTALS Thank you for this LABOR AMOUNT 56.50 opportunity to serve you. It is our aim to PARTS AMOUNT <u> 123.63</u> perform all the repairs requested on this repair GAS, OIL, LUBE 0.00 performed due to delays caused by circumstances beyond the control of the puyer, or if the warranty repairs did not remedy the defect and the buyer solifies the manufacturer or seller of the failure of the repairs within 60 days SUBLET AMOUNT 00 Ò order to your complete MISC. CHARGES 00 ο. satisfaction. If our ifter they were completed. If, after a reasonable number of attempts, the lefect has not been fixed, the buyer may return this product for a epiacoment or a refund subject, in either case, to deduction of a reasonable sharge for usage. This time extension does not affect the protections or emedies the buyer has under other laws. TOTAL CHARGES service was satisfactory 180.13 tell your friends, if not, LESS INSURANCE 00 please tell us SALES TAX 0 00 immediately. DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (SIGNED) (DATE) PLEASE PAY Thank you THIS AMOUNT 180. 13



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|                                                                         | AR ORREST.  | 4576         | LABO           | R REGOR      | D 22278         |
|-------------------------------------------------------------------------|-------------|--------------|----------------|--------------|-----------------|
| COMPLAINE<br>CAUSE:                                                     | EMP.        | OPEA<br>NO   | COST           | ELAPSED      | TIME CLOCK      |
| A PRINCE WENT TOREN                                                     |             | 133          |                | 7.0 7.0 10.0 | OFFOCT12 PMI    |
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| COMPLAINT: CAUSE:                                                       | 199         | 2            |                | 10           | ON UCI 12 FM    |
| O THOMAS ON HE SUSPENDED                                                |             |              |                | a            | OFFOCT12 PM     |
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| MCD9 & ADHESIVE.                                                        |             | L            |                | . 2          | OFF OCT12 PM    |
| O COMPLAINT REPLACED RT BODY SHOL                                       | <i>[43]</i> | <b>3</b>     |                |              | ON OCT12 PM     |
| CAUSE MEDGS:                                                            |             |              |                |              | OFF             |
| Thoras than all soles The To                                            |             | an ver dat   |                |              | ON              |
| SUBSERVINGURINE NOVE N/ 11/2 FIRE<br>51/12 CW GET AL 5/KB TO STAKE      |             |              |                |              | OFF<br>ON       |
| CHORED SHLS                                                             |             |              | 4.5 S          |              | OFF OCT 22 FIL  |
| CAUSE                                                                   | 43:         | 3            |                | 10           | ON BG122 Pt     |
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| CORRECTION                                                              |             |              |                |              | ON              |
| COMPLAINT                                                               |             |              |                |              | OFF             |
| CAUSE                                                                   |             | \$2 <b>5</b> |                |              | ON              |
|                                                                         |             |              |                |              | OFF             |
| CORRECTION                                                              |             |              |                |              | ON              |
| COMPLAINT                                                               |             |              |                |              | OFF             |
| CAUSE.                                                                  |             |              |                |              | OFF             |
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| CORRECTION                                                              |             |              | (G) (6) (F)    |              | ÖFF             |
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| GOMPEAINT:<br>CAUSE                                                     |             |              |                |              | ÖFF             |
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|                                                                         |             |              |                |              | OFF SE          |
|                                                                         |             |              | 994            |              | GN <sup>®</sup> |
| これが、大きな機能は複雑ななとものできだった。ことにはいい。 こうじゅうかんしゅうさい コード・カー・フェール カーライン アンディー・アンド | NED HERY    | :::          | (54) 50 ESP    | 医髓膜炎 经国际条    | OFF 🚜           |

| 610                                                | PART NO. AND DESCRIPTION                 | PRI(                                             | Æ              |                        |                  | American Truck/Auto Body Shop                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                       |                                                                                                                                                                                                                                   |               |
|----------------------------------------------------|------------------------------------------|--------------------------------------------------|----------------|------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
|                                                    |                                          | 7 . 1                                            |                | *********              |                  | 7024 Highway 273                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 1.15                                  | 210                                                                                                                                                                                                                               | 10            |
|                                                    |                                          |                                                  | <del>  </del>  |                        | <del> </del>     | Anderson, Canomia 90(0)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                       | Z.IU.                                                                                                                                                                                                                             | 7.0           |
| *                                                  |                                          |                                                  |                | <del>-</del>           | <del>  -</del> - | 7024 Highiyay 273 Anderson, California 96007 B.A.R. No. AK082553 (630) 365-0077 FAX (630) 365-0079                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | :                                     |                                                                                                                                                                                                                                   |               |
|                                                    |                                          |                                                  | <del>   </del> | <del></del>            | -                | Mire.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ence                                  | DATE                                                                                                                                                                                                                              | · ·           |
| - (5)                                              |                                          |                                                  | -              |                        | -                | ADDRESS CUSTOMERS O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | : :                                   | 11-19                                                                                                                                                                                                                             | (Z)           |
| 20 - 1<br>- 120 - 1                                |                                          |                                                  |                |                        |                  | CHOER WRITE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | NBY                                   | PROMISED                                                                                                                                                                                                                          |               |
|                                                    |                                          |                                                  |                | <del></del> :          | <del>  .</del>   | CIFY, STATE, ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <del></del>                           | -                                                                                                                                                                                                                                 | A.M.          |
|                                                    | DY HOUSE                                 |                                                  |                |                        |                  | HONG PHONE BUG. PHONE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | EXT.                                  | ODOMETER IN                                                                                                                                                                                                                       | P.M.          |
|                                                    |                                          |                                                  |                |                        |                  | YEAR, MAKE AND MODEL LICENSE INJURY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                       | 1 1                                                                                                                                                                                                                               |               |
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|                                                    | 201                                      | <del>,,                                   </del> |                | <del></del>            | ļ                | Irms.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                       |                                                                                                                                                                                                                                   |               |
|                                                    | 240                                      |                                                  | <u> </u>       | <del></del>            | ļ                | DESCRIPTION OF WORK ::                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                       | AMOUN                                                                                                                                                                                                                             |               |
|                                                    | 00000                                    | <del></del>                                      |                | ·                      | <u> </u>         | ☐ LEGGE ☐ CHARLES ☐ CHARLES ☐ TRAINS.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ☐ DIFF.                               |                                                                                                                                                                                                                                   |               |
|                                                    | 7710                                     | <del></del>                                      |                |                        | <u> </u>         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                       |                                                                                                                                                                                                                                   |               |
|                                                    |                                          | J.,                                              |                | <del></del>            |                  | A d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 6 .                                   |                                                                                                                                                                                                                                   |               |
|                                                    |                                          | · .                                              |                | ~ <del>~ ~ ~ ~ ~</del> |                  | PAIN 2 MUSC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                       |                                                                                                                                                                                                                                   |               |
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|                                                    | <u>, 183,53,193,193,144 € 157,7 € 13</u> | <u>. · .  </u> -                                 | 5/2<br>5/2     |                        |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | · · · · · · · · · · · · · · · · · · · |                                                                                                                                                                                                                                   | -             |
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|                                                    | ACCESSORIES                              |                                                  |                |                        |                  | Limited more maken                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                       | 10                                                                                                                                                                                                                                |               |
| : : `                                              | 10 # 12278                               |                                                  |                |                        |                  | LIGHT AND, OF COMBASS O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ACCESSORIES                           |                                                                                                                                                                                                                                   | Q#            |
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|                                                    | Patt 1C3401                              |                                                  |                |                        |                  | 5 15 M M M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | AND GREASE<br>Jelet Repairs           | <b> </b>                                                                                                                                                                                                                          | ┝╌┤           |
|                                                    | 18/10/18/                                | .                                                |                |                        |                  | Thereby sugrected the above repair work to be done along with the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <del></del>                           |                                                                                                                                                                                                                                   |               |
|                                                    |                                          |                                                  |                |                        | <br>             | I hereby surfrontes the above repair work to be done along with the necessary materials. You and your employees may operate above vehicle for purposee of fasting, inspection, or delivery at my risk. An express mechanise ten is acknowledged on above vehicle to secure the amount of repairs therefor. It is also provinced that you will not be field responsible for kines or damage to care or efficies left in care. In case of itre, theft or any other cause beyond your control.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | ISTE DISPOSAL                         |                                                                                                                                                                                                                                   | $\vdash$      |
|                                                    |                                          |                                                  |                |                        | -                | the structure of repairs theoreto. It is also enderstood that you will not be had responsible for loss or damage to care or profiles left in care. If it case of the, then it of any other parase havend your control.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ا .<br>ا درون                         |                                                                                                                                                                                                                                   | <del>  </del> |
| <del>; · · · · · · · · · · · · · · · · · · ·</del> |                                          |                                                  | <b></b> -      | <u> </u>               | <u> </u>         | and a men ambien lent sedant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | TAX                                   | 4 1                                                                                                                                                                                                                               | 1 I           |

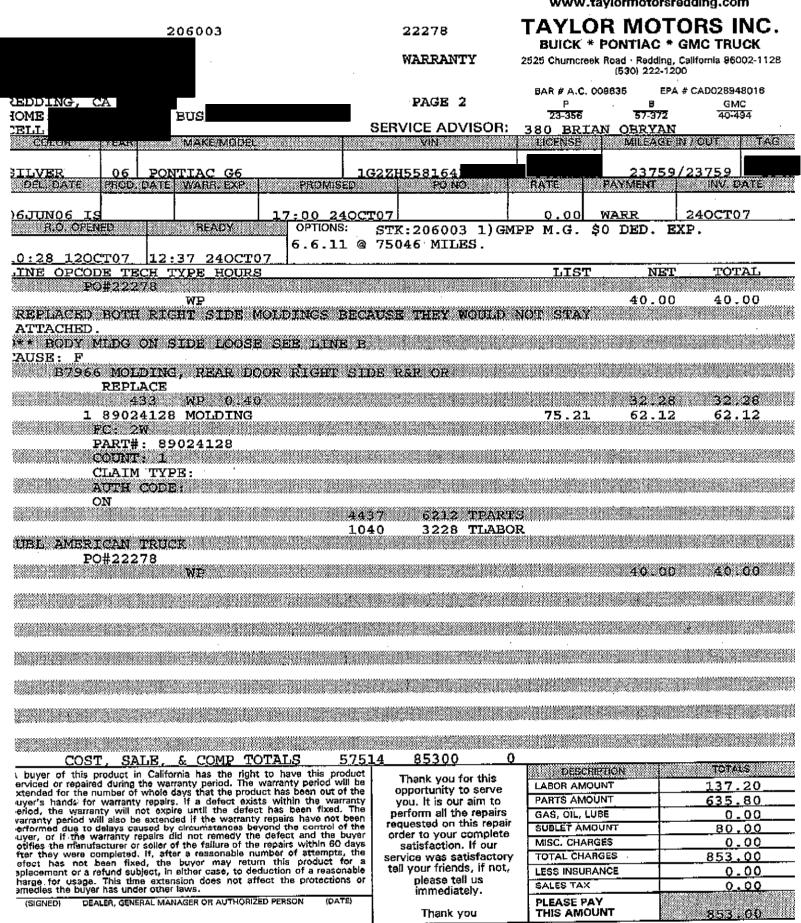
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| 206003                                                                                                                                                                                                                                                                                                               |                     | 22278                                               | TAYLOR MO                                |                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------------------------------------------|------------------------------------------|------------------------------------------------|
|                                                                                                                                                                                                                                                                                                                      |                     | WARRANTY                                            | 2525 Churncreek Road - Redd<br>(630) 222 |                                                |
| REDDING, CA                                                                                                                                                                                                                                                                                                          | <u> </u>            | PAGE 1                                              | BAR # A.C. 009B35                        | EPA # CAD028948016<br>GMC                      |
| HOME: BUS:                                                                                                                                                                                                                                                                                                           |                     | SERVICE ADVISOR:                                    | 23-356 57-37<br>380 BRIAN OBRY           | AN                                             |
| CC MAKEMODEL                                                                                                                                                                                                                                                                                                         |                     | VID                                                 | EICENSE MILEA                            | SEIN/OUT TAG                                   |
| SILVER 06 PONTIAC G6 DEL DATE PEOD DATE WARR EXP                                                                                                                                                                                                                                                                     | 1G<br>-ROMISED      | 2ZH558164                                           | 23.7<br>FIATE PAYMENT                    | 59/23759<br>INV BAGE                           |
| R.O OPENED READY C                                                                                                                                                                                                                                                                                                   | 00 240CT<br>PTIONS: | STK:206003 1)GME                                    | 0.00 WARR<br>PP M.G. \$0 DED.            | 24OCT07<br>EXP.                                |
| 10:28 12OCT07 12:37 24OCT07                                                                                                                                                                                                                                                                                          | .6.11 @             | 75046 MILES.                                        |                                          |                                                |
| LINE OPCODE TECH TYPE HOURS RATTLE FROM ENGINE AREA SITTLE CAUSE:                                                                                                                                                                                                                                                    | NG SALEMA           | AT IDES                                             | LIST N                                   | ET TOTAL                                       |
| L2300 CONVERTER, OXIDATION                                                                                                                                                                                                                                                                                           | CATALIZE            | IC REPLACE                                          |                                          | 70.51                                          |
| 165 WP 0.90<br>1 15788696 CONVERTER                                                                                                                                                                                                                                                                                  |                     |                                                     | 72.<br>472.11 462.                       | 67 462.67                                      |
| 2 22642792 STUD<br>4 11516076 NUT                                                                                                                                                                                                                                                                                    |                     |                                                     | 3.51 2.<br>3.72 2.                       | 97 11.88                                       |
| 1 22687911 GASKET<br>1 22734961 GASKET                                                                                                                                                                                                                                                                               |                     |                                                     | 4.74 3.<br>4.09 3.                       | 26 3,26                                        |
| 1 24505057 GASKET<br>FC: 2W                                                                                                                                                                                                                                                                                          |                     |                                                     | 14.25 11.                                | 37 11.37                                       |
| PART#: 15788696<br>COUNT: 10                                                                                                                                                                                                                                                                                         |                     |                                                     |                                          |                                                |
| CLAIM'TYPE:<br>AUTH CODE:                                                                                                                                                                                                                                                                                            |                     |                                                     |                                          |                                                |
| NO                                                                                                                                                                                                                                                                                                                   |                     | 1 49856 TPARTS                                      |                                          |                                                |
| RATTLE COMING FROM FLEX TUBE O                                                                                                                                                                                                                                                                                       |                     | ipe, re- placed                                     | flex Tube.                               |                                                |
| 3 BODY MOLDING ON RIGHT REAR DO                                                                                                                                                                                                                                                                                      |                     |                                                     | JT -                                     |                                                |
| B7866 MOLDING, FRONT DOOR :<br>REPLACE                                                                                                                                                                                                                                                                               | RIGHT SI            | DE R&R OR                                           |                                          |                                                |
| 120 WP 0.40<br>1 89024126 MOLDING                                                                                                                                                                                                                                                                                    |                     |                                                     | 90.94 75.                                | 28 32.28<br>12 75.12                           |
| FC: 2W<br>FART#: 89024126                                                                                                                                                                                                                                                                                            |                     |                                                     |                                          |                                                |
| COUNT: 1<br>CLAIM TYPE:                                                                                                                                                                                                                                                                                              |                     |                                                     |                                          |                                                |
| AUTH CODE:<br>ON                                                                                                                                                                                                                                                                                                     | 536                 | 6 7512 TPARTS                                       | :                                        |                                                |
| UBL AMERICAN TRUCK                                                                                                                                                                                                                                                                                                   | 72                  | 0 3228 TLABOR                                       |                                          |                                                |
| A buyer of this product in California has the right to have serviced or repaired during the warranty period. The warranty                                                                                                                                                                                            | period will be      | Thank you for this opportunity to serve             | DESCRIPTION LABOR AMOUNT                 | TOTALS                                         |
| ouver's hands for warranty repairs. If a defect exists within period, the warranty will not expire until the defect has been                                                                                                                                                                                         | the warranty        | you. It is our aim to<br>perform all the repairs    | PARTS AMOUNT<br>GAS, OIL, LUBE           |                                                |
| ouyer's hands for warranty repairs. If a defect exists within period, the warranty will not expire until the defect has between any period will also be extended if the warranty repairs it performed due to delays caused by circumstances beyond the puyer, or if the warranty repairs did not remedy the defect a | control of the      | requested on this repair<br>order to your complete  | SUBLET AMOUNT                            |                                                |
| TOTITIES THE INSTRUBECTURE OF SHIEL OF THE TRUBE OF THE TEPPHS OF                                                                                                                                                                                                                                                    | stamme the          | satisfaction. If our                                | MISC. CHARGES                            |                                                |
| eplacement or a refund subject, in either case, to deduction of                                                                                                                                                                                                                                                      | roduct for a        | service was satisfactory tell your friends, if not, | TOTAL CHARGES LESS INSURANCE             | <u>-</u>                                       |
| charge for usage. This time extension does not affect the periodies the buyer has under other laws.                                                                                                                                                                                                                  | rotections or       | please tell us<br>immediately.                      | SALES TAX                                | nannannoog oo oo oo oo oo oo oo oo oo oo oo oo |
| (SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON                                                                                                                                                                                                                                                                | (DATE)              | Thank you                                           | PLEASE PAY<br>THIS AMOUNT                |                                                |

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PAGE 08/11 01/07/2008 11:42 TAYLOR SERVICE 530-722-1089 - Books and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the st

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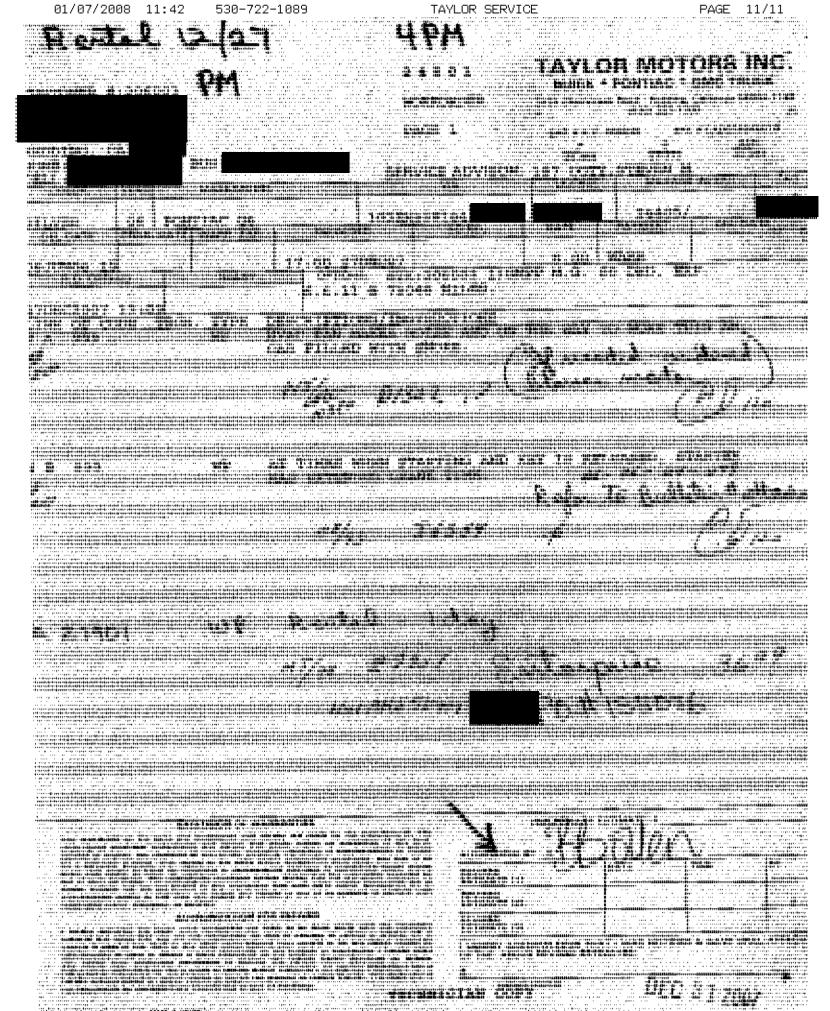
| COMPLAINT: Replaced bellers                      |                                         | LABOR RECORD 23/                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                           |                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
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| COMPLAINT: Replicated belley  CAUSE FOR THE CORE | EMP.<br>NO:                             | OPER<br>NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | COST                                                      | ELAPS!<br>TIME | D TIME CLOC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |
|                                                  | 526                                     | 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                           |                | OFFNOVZJEN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |
| CORRECTION:                                      |                                         | 1/2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                           |                | 2 08 90097                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |
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| CAUSE                                            | Vilaka Prakasi                          | <i>₽</i> 4€                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                           |                | OFF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |
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TAYLOR MOTORS INC. 206003 23666 BUICK \* PONTIAC \* GMC TRUCK CHAEL CAREY WARRANTY 2525 Churncreek Road - Redding, California 96002-1128 (530) 222-1200 BAR # A.C. 009835 EPA # CAD028948016 EDDING, CA PAGE 1 В GMC BUS 23-356 57-372 40-494 ME SERVICE ADVISOR: <u>:Lt</u> STEVEN M DOTY 187 LICENSE MILEAGE IN / OUT MAKEMBBEL TAG COLOR YEAR 06 PONTIAC G6 PROD DATE WARR EXP 1G2ZH558164 LVER 25204/25204 PROMISED POING RATE PAYMENT INV. DATE DEL. DATE 27NOV07 28NOV07 JUN06 WARR R.O. OPENED HEADY OPTIONS: \$0 DED. STK:206003 1)GMPP M.G. EXP. 75046 MILES. 6.6.11 @ :07 27NOV07 10:47 28NOV07 NE OPCODE TECH TYPE HOURS NET TOTALENGINE WILL NTO CRANK AT TIMES AND HAS TO BE JUMPED. ALSO CORRISTON AT POSITIVE TERMINAL OF BATTERY. USE: FAIL CODE 4G1RK-RL-B2 NO110 BATTERY ONE REPLACE 526 WP 0.50 1 19001627 BATTERY 106.58 106.58 106.58 FC: 4G1RK PART#: 19001627 COUNT: 1 CLAIM TYPE: AUTH CODE: oe10658 TPARTS 8527 1200 4036 TLABOR EPLACED FAILED BATTERY AFTER TESTING, CLEANED ACID DAMAGE, TESTED SYSTEM--OK. SER 213990 HARGING 9727 14694 Ö & COMP TOTALS uyer of this product in California has the right to have this product riced or repaired during the warranty period. The warranty period will be anded for the number of whole days that the product has been out of the er's hands for warranty repairs. If a defect exists within the warranty od, the warranty will not expire until the defect has been fixed. The ranty period will also be extended if the warranty repairs have not been ormed due to delays caused by circumstances beyond the centrol of the er, or, if the warranty repairs did not remedy the defect and the buyer fies the manufacturer or seller of the failure of the repairs within 60 days r they were completed. If, after a reasonable number of attempts, the lock has not been fixed, the buyer may return this product for a accument or a refund subject, in either case, to deduction of a reasonable ge for usage. This time extension does not affect the protections or adies the buyer has under other laws.

SIGNED) DEALER, GENERAL MANAGER OF AUTHORIZED PERSON (DATE) COST SALE TOTALS DESCRIPTION Thank you for this LABOR AMOUNT 40.36opportunity to serve PARTS AMOUNT 06.58 you. It is our aim to perform all the repairs GAS, OIL, LUBE . 00 requested on this repair SUBLET AMOUNT 00 order to your complete MISC. CHARGES 0.00 satisfaction. If our service was satisfactory TOTAL CHARGES <u> 146.94</u> tell your friends, if not, LESS INSURANCE 0.00 please tell us SALES TAX 0.00 immediately. PLEASE PAY SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON Thank you THIS AMOUNT 146.94

#### WARRANTY COPY















## GENERAL MOTORS BUSINESS RESOURCE CENTER

## **VIA FAX ONLY**

| January 11, 2008                                                                                                                                                                                                                                                                                                                                                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Rosa Tinoco<br>800-334-2406 ext. 211<br>Idaho                                                                                                                                                                                                                                                                                                                                                                                                |
| Re:  BBB case #PGM0762111 2006 Pontiac G6 VIN # 1G2ZH558164                                                                                                                                                                                                                                                                                                                                                                                  |
| To Whom It May Concern:                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Manufacturer's Position:                                                                                                                                                                                                                                                                                                                                                                                                                     |
| General Motors regrets that seems of the warranty. General Motors regrets that seems of the warranty.                                                                                                                                                                                                                                                                                                                                        |
| has filed a complaint in regards to the sun visor mirror coming off, remote start feature failure, right rear passenger door molding, and fuel cap replacement due to check engine light, rattle in the steering/engine compartment, CD player failure, sunroof rattling, brakes, and steering system.                                                                                                                                       |
| has only been in once for the following repairs; sun visor mirror, right rear passenger door molding, fuel cap, CD player. has been in twice for the following repairs; remote start feature, sun roof rattle, and brakes. She has been in three times for a rattle in steering/engine compartment.                                                                                                                                          |
| California Lemon Law specifies a presumption period of 18 months from original purchase or 18,000 miles whichever comes first with 4 or more repairs for the same concern. There have been no safety issues with the vehicle and no concern has been addressed more than 3 times. General Motors does not feel that the vehicle meets presumption or that there has been significant impairment to the nse, value, or safety of the vehicle. |
| has also indicated on her Better Business Bureau claim form that all of her concerns have been addressed, and that there are no current issues with the vehicle. This confirms that General Motors has fulfilled our obligations under the warranty and the vehicle currently meets all General Motors specifications. General Motors would not agree to repurchase or replace the vehicle.                                                  |
| Sincerely,                                                                                                                                                                                                                                                                                                                                                                                                                                   |

Pat Alarcon BRC Customer Relationship Specialist Ph# 800-231-1841, prompt 9, prompt 5, extension 11148 FAX# 866-278-1780

# BUICK - PONTIAC - SMETRUCK

| DATE /               | 1-08                    |          | <del></del> . |            |            |
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TAYLOR MOTORS INC. 7665 BUICK \* PONTIAC \* GMC TRUCK CUSTOMER #:206003 WORKORDER 2525 Churncreek Road · Rodding, California 96002-1128 (530) 222-1200 PAGE 1 EPA # CAD028948016 ; BAR # A.C. 009835 REDDING, CA GMC Р A 23:356 57-372 40-494 BUS: HOME: SERVICE ADVISOR: 193 FOWLER CELL: LICENSE MILEAGE IN/ OUT COLOR YEAR MAKE/MODEL 1G2ZH558164 1528 PONTIAC G6 LICUID INVSDATE RATE PAYMENT PROD DATE! WARE EXP PROMISED: PO NO DESIGNATION WARR 0.00 06JUN06 IS 00 18JUL06 R.O. OPENED READY OPTIONS: STK: 206003 18JUL2006 11:38 DESCRIPTIONS/INSTRUCTIONS TECH TYPE OP CODE CAME OFF 66 709 026 C 94934

#### **EXCLUSION OF WARRANTIES**

Any warranties on the parts and accessories sold hereby are made by the manufacturar. The undersigned purchaser understands and agrees that dealer makes no worrenties of any kind, express or implied, and discletins all warranties, including warranties of merchantability or fitness for a particular purpose, with regard to the parts and/or accessories purchased; and that in no avoid shall dealer be liable for incidental or consequential damages or commercial lessos orising out of such purchases. The undersigned purchaser further agrees that the warranties excluded by dealer, include, but are not limited to any warranties that such parts and/or accessories are of marchantable quality or that they will enable any vehicle or any of its systems to perform with reasonable safety, efficiency, or comfort.

## **AUTHORIZATION FOR REPAIRS**

hereby authorize the repair work hereinafter set forth to be done along with the necessary material and agree that you are not responsible for loss or demage to validle or articles left in vehicle in case of fire, theft or any other cause beyond your control or for any delays caused by unaveilability of parts or delays in parts shipments by the aupplier or transporter. I hereby grant your and/or your employees permission to go operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's ligh is hereby acknowledged on above vehicle to secure the emount of repairs thereto. The dealership is not responsible for damages from freezing this to look of excitations. not responsible for damages from freezing due to lack of antifreeze.

PRELIMINARY ESTIMATE AUTHORIZED BY REVISED ESTIMATE (1) TIME BY: REVISED ESTIMATE (2) REVISED ESTIMATE (3)

I HEREBY ACKNOWLEDGE THAT I WAS NOTIFIED & GAVE ORAL APPROVAL OF THE ABOVE REVISED ESTIMATES:

TECHNICIAN COPY

JUL 20 2006

HAGE.

60/70

| COMPLAINT:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                       |            | <u>LA</u> | BOF           | REC         | OR        | 7665        |
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| CAUSE: Replaced mirror as per                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | EMP.                                  | OPER<br>NO | co        | ST            | ELAF        | SED<br>VE | TIME CLOC   |
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| <br>  MS + SUPPLIES CALL TOLL FREE 1-(800)-ADP-ADP-ADP TO REORDER # 6001971-17342                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 1                                     |            | İ         |               |             | ľ         | ON 🖣        |

not responsible for damages from freezing due to lack of antifreezo.

== 07 2008-

TAYLOR MOTORS INC. 469 BUICK \* PONTIAC \* GMC TRUCK CUSTOMER #:206003 2525 Churncreek Road · Redding, California 96002-1128 WORKORDER (530) 222-1200 EPA # CADO28948016 PAGE 1 BAR # A.C. 009835 GMC P В REDDING, CA 40-494 23-356 57-372 BUS: HOME SERVICE ADVISOR: 187 DOTY STEVEN M CELL MILEAGE INVOLUTION TAG MICENSE MAKEMODER COLOR 5130 1G2ZH558164 LIQUID SIL PONTIAC G6 06 STATUTE DE ANTERIOR PAYMENT POING MARK RATE PROCEDATE WARR EXP PROMISED BEL DATE CASH Ο. 00 07SEP06 17:00 06JUN06 STK: 206003 OPTIONS: R.O. OPENED READY 07SEP2006 11:31 DESCRIPTIONS/INSTRUCTIONS LINE OF CODE .18 31 **EXCLUSION OF WARRANTIES** PRELIMINARY ESTIMATE \$ Any warranties on the parts and accessories sold hereby are made by the manufacturer. The undersigned purchaser understands and agrees that dealer makes no warranties of any kind, express or implied, and disclaims all warranties, including warranties of merchantability or fitness expross or implied, and disclaims all warranties, including warranties of merchantability or fitness for a particular purpose, with regard to the parts and/or accessories purchased; and that in no event shall dealer be liable for incidental or consequential damages or commercial losses arising out of such purchase. The undersigned purchaser further agrees that the warranties excluded by deplar, include, but are not limited to any warranties that such parts and/or accessories are of merchantable quality or that they will enable any vehicle or any of its systems to perform with reasonable safety, afficiency, or comfort. AUTHORIZED BY X. BY DATE TIME REVISED ESTIMATE (1) REVISED ESTIMATE (2) **AUTHORIZATION FOR REPAIRS** REVISED ESTIMATE (3): I hereby authorize the repair work hereinafter set forth to be done along with the nocessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in caze of fire, theft or any other cause beyond your control or for any delays caused by unavellability of perts or delays in parts shipments by the supplier or transporter. I hereby grent you and/or your employees permission to operate the vehicle herein described on streets, highways or obsewhere for the purpose of testing and/or inspection. An express mochanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. The dealership is not responsible for damages from freezing due to tack of antifreezo. I HEREBY ACKNOWLEDGE THAT I WAS NOTIFIED & GAVE ORAL APPROV

TECHNICIAN

01/07/2008 10:28 530-722-1089 TAYLOR SERVICE PAGE 05/09 LABOR RECORD COMPLAINT: ELAPSED TIME OPER TIME CLOCK EMP COST CAUSE: NO: NO. OFF SEP07 PM ON SEP07 PM CORRECTION: OFF COMPLAINT ON CAUSÉ: OFF ON CORRECTION: OFF ON COMPLAINT: CAUSE: OFF ON OFF CORRECTION: ON COMPLAINT OFF CAUSE: ON **OFF** CORRECTION: QN. OFF COMPLAINT: ON CAUSE: OFF QΝ CORRECTION: OFF COMPLAINT: ON CAUSE: OFF. ON OFF CORRECTION: ON COMPLAINT: OFF CAUSE: ФN OFF CORRECTION: ON OFF ÖΝ OFF NO DOX FORMS + SUPPLIES CALL TOLL FREE 1-(900)-ADP-ADP TO RECRDER # 6001971-17342

01/07/2008 10:28 530-722-1089 TAYLOR SERVICE PAGE 07/09 LABOR RECORD COMPLAINT: ELAPSED TIME OPER EMP TIME CLOCK COST CAUSE: NO. NO OFF SEPOLS PM ON LEDIB PH CORRECTION: OFF SEP記6 PM1 COMPLAINT: ON SEP26 PM1 CAUSE: OFF SEMZIS PM ON SEP26 PMI CORRECTION: OFF ON COMPLAINT: CAUSE: OFF NO OFF ON COMPLAINT: OFF CAUSE: ON OFF CORRECTION: ON OFF COMPLAINT: ON 1 CAUSE: OFF ΟN CORRECTION: OFF COMPLAINT: ON. CAUSE: OFF ON. OFF CORRECTION: ON COMPLAINT: OFF CAUSE: ON OFF. CORRECTION: ΟÑ OFF ON OFF ON FORMS + SUPPLIES CALL TOLL FREE 1-(800)-ADP-ADP-ADP TO REORDER # 5001971-17342

www.taylormotorsredding.com

TAYLOR MOTORS INC. 9818 206003 BUICK \* PONTIAC \* GMC TRUCK WARRANTY 2525 Churncreek Road \* Redding, California 96002-1128 (530) 222-1200 MICHAEL CAREY BAR # A.C. 009835 EPA # CAD028948016 PAGE 1 REDDING, CA ρ В GMC 57-372 40-494 23-356 HOME BUS SERVICE ADVISOR: 187 M DOTY STEVEN CELL MILEAGEIN/OUT TAG COROR MAKE/MODEL LICENSE National Bridge PONTIAC G6 1G2ZH5581641 LLVER RATE PAYMENT INV DATE DEL DATE PROD. DATE WARR EXP. PROMISED PO NO. 28SEP06 WARR 0.00 17:00 30SEP06 **30/UUC30 OPTIONS:** STK: 206003 "R.O. OPENED READY 11:10 18SEP06 TOTAL LINE OPCODE TECH TYPE HOURS A SERVICE ENGINE LIGHT IS ON. CAUSE: 11020 CAP, FUEL TANK REPLACE 38.91 38.91 0.50 WP 411 15.54 1 15258231 CAP FC: 2L PART#: 15258231 COUNT: 1 CLAIM TYPE: AUTH CODE: 1554 TPARTS 1110 3891 TLAHOR 1680 FAILED TEST. REPLACED CAP CAP--GAS SCAN AND FOUND EVAP LEAK. TESTED AND CLEARED CODE. PASSENGER REAR DOOR. FRONT EDGE OF 2\*\* MOLDING LOOSE AT TAUSE: ADHESIVE WEAK REAR DOOR RIGHT LOWER R&R OR B7963 MOLDING, REPLACE 31.12 31.12 0.40WP 120 COUNT: 0 40 PART#: CLAIM TYPE: AUTH CODE: ON O TPARTS 0 TLABOR 3112 960 re-secured molding. 8557 0 & COMP TOTALS SALE. A buyer of this product in California has the right to have this product serviced or repaired during the warranty period. The warranty period will be extended for the number of whole days that the product has been out of the buyer's hands for warranty repairs. If a defect exists within the warranty period, the warranty will not expire until the defect has been fixed. The warranty period will also be extended if the warranty repairs have not been performed due to delays caused by circumstances beyond the control of the buyer, or if the warranty repairs did not remedy the defect and the buyer notifies the manufacturer or saller of the failure of the repairs within 60 days after they were completed. If, after a reasonable number of attempts, the defect has not been fixed, the buyer may return this product for a replacement or a refund subject, in althor case, to deduction of a reasonable charge for usage. This time extension does not affect the protections or COST, TOTALS DESCRIPTION Thank you for this LABOR AMOUNT 70.03 opportunity to serve PARTS AMOUNT 15 54 you. It is our aim to 0.00 perform all the repairs GAS, OIL, LUBE requested on this repair 0.00 SUBLET AMOUNT order to your complete 0.00 MISC. CHARGES satisfaction. If our 85.57 TOTAL CHARGES service was satisfactory tell your friends, if not, 0.00 LESS INSURANCE charge for usage. This time extension does not affect the protections or remedies the buyer has under other laws. please tell us 0.00 SALES TAX immediately. PLEASE PAY DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (SIGNED) 85.57 THIS AMOUNT Thank you

| CHISTOMER #-206003                                                                                          |                                                                                                                                                                                         | 1 2 3<br>WORK                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                         | BUICK * PONTIA<br>2525 Churncreek Road • Re- | OTORS INC.<br>C * GMC TRUCK<br>dding, Callfornia 96002-1128<br>22-1200 |
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| REDDING, CA                                                                                                 |                                                                                                                                                                                         | PAGE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 1                       | BAR # A.C. 009835                            | EPA # CAD028948016<br>B GMC                                            |
| HOME:                                                                                                       | BUS                                                                                                                                                                                     | SERVICE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ADVISOB: 1              |                                              | 372 40-494                                                             |
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| Any warranties on the parts and<br>undersigned purchaser understand<br>express or implied, and disclaims in | CLUSION OF WARRANTIES accessories sold hereby pro made by the send agrees that dealer makes no war all warrantles including warrantles of man- ard to the pans and/or accessories purch | chantability or fitness                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | PRE<br>AUTHORIZED BY    | EMINARY ESTIMATE \_<br>XB BY                 | 32.00                                                                  |
| event shall dealer be liable for inc<br>out of such purchase. The undersi                                   | idental or consequential damages of coming<br>igned purchasor further agrees that the wi<br>of to sow warranties that such parts and/                                                   | arranties excluded by<br>or accessories are of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | REVISED<br>ESTIMATE (1) | DATE                                         | TIME BY                                                                |
| merchantable quality or that they reasonable safety, afficiency, or co                                      | will enable any vehicle or any of its syst                                                                                                                                              | ams to perform with                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | REVISED<br>ESTIMATE (2) |                                              | 1-1                                                                    |
| I hereby authorize the repair wo                                                                            | thoracal low for herains  the hardinator set forth to be dane along  the responsible for loss of damage to whe  y other cause beyond your control of for                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | REVISED<br>ESTIMATE (3) |                                              | DIED & GAVE OBAL ADDROV                                                |
| unavallability of parts or delays in<br>you and/or your employees per                                       | n parts shipments by the supplier of transl<br>mission to operate the vehicle heroin C                                                                                                  | lescribed on strees,<br>less maching's lien is                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | OF THE ABOVE RE         | /LEDGE THAT I WAS NOTI<br>VISED ESTIMATES:   | FIED & GAVE ORAL APPROV                                                |
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Taylor Motors Inc. 2525 Churn Creek Rd Redding, CA 96002 530-222-1200 4-Jun-07

Redding, CA

# Steve,

Here is a list of the current CD's that were left in my CD player when it was replaced. Any questions please feel free to call me @

# 2006 Pontiac G6 V6

| Carrie Underwood<br>Clay Walker<br>Chris Cagle | Some hearts<br>Greatest hits<br>Chris Cagle<br>Konvicted | 14.88<br>12.88<br>15.88<br>13.88 |
|------------------------------------------------|----------------------------------------------------------|----------------------------------|
| Akon<br>Gretchen Wilson<br>Ne-Yo               | On of the boys<br>because of you                         | 12.88<br>13.88                   |
|                                                | Tax 7.25%                                                | 84,28<br>6.11                    |
|                                                | TOTAL =                                                  | \$ 90.39                         |





## Tech2 Pass Thru: Final Instructions



# Programming Complete.

# Warranty Claim Code

Record this code on the warranty repair order (if applicable).

# Post Programming Instructions:

If there are no Controller Specific Instructions, turn ignition off for 30 seconds to reset the controller.

# Controller Specific Instructions:

After programming, you must run "Setup SDM Primary Key in BCM" from the Tech 2.

VIN: 16KFK13017J

Print

lew C

Cancel

530-722-1089

TAYLOR SERVICE

PAGE 04/12

(800) 666-5469 FAX (800) 272-3(

Instruments Sales and Service, Inc.

GM radios, clusters & accessories:

Ford radios & accessories: Heavy duty parts:

invoices@instrumentsales.com

(800) 227-7234 FAX (800) 544-1;

(800) 333-7976 FAX (800) 333-4t FA<del>3(\* (303</del>) 286-30

Send payments to: ISS, 16427 NE Airport Way, Portland, OR 97230

For invoice copies:

FED ID# 93-10717

Bill To:

TAYLOR MOTORS INC

PO BOX 492295 REDDING CA 96049-2295 Ship To:

Phone #:

530~222~1200 \*

TAYLOR MOTORS INC.

2525 CHURN CREEK ROAD

REDDING CA 96002

| Invoice #    | Invoice Date | Order#      | Order Date | Cust # "     | . Guston | er PO#     | Terms  |        | Salesperso | zπ  |
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| VIN #: 1G2Z  | H558164      |             | RO #:      | 13280        | ,        | SERIAL     | #:     |        |            |     |
| eleased By   | · · ·        |             | Date       | Recei        | ved By   |            |        |        |            | •   |
| /            |              |             |            | · V          |          |            | ·      |        | ,          |     |

Payable in US dollars only. \$5.00 net minimum invoice charge. Claims for shortages must be filed within 5 days of receipt. No materials are returnable without written permission of Instrument Sales and Service, inc. Authorized returns must be shipped with transportation charges prepaid. 15% handling charge will apply. A service charge of 1-1/2% per month, (18% per annum), will be charged on all past due accounts, or maximum allowed by law. Claims for shortages must be made upon receipt of shipment accompanied by packing list. Our responsibility ceases upon delivery of goods to the carrier. Claims for loss or damage in transit must be filled by you with the carrier.

www.taylormotorsredding.com 206003 TAYLOR MOTORS INC. 18306 BUICK \* PONTIAC \* GMC TRUCK WARRANTY 2525 Churncrook Road · Redding, California 96002-1128 (530) 222-1200 REDDI<u>NG.</u> CA BAR # A.C. 009835 EPA # CAD028948016 PAGE 1 HOME: я GMÇ BUS 23-356 57-372 40-494 CELL SERVICE ADVISOR: 187 STEVEN (Sidina) M DOTY MAKEMIGISES MOENSE MILEAGE IN CUIT TAG SILVER 06 PONTIAC G6 G2ZH558164 17470/17470 DEL. DATE ©JA(0≎ FAYMENT | INV DATE **06JUN**06 IS :00 12JUN07 <u>0. ool</u> WARR R O OPENED 14JUN07 READY OPTIONS: STK: 206003 1) GMPP M.G. \$0 DED. 6.6.11 @ 75046 MILES. <u> 15:15 12JUN07</u> 109:19 14JUN07 LINE OPCODE TECH TYPE HOURS LIST NET TOTAL PLEASE REPUND CUSTOMER FOR LOST CDIS THAT WERE STUCK INSIDE CD PLAYER ON RO#13280. EST.FOR COST OF REPLACEMENT ATTACHED. Tause: Retmeurse cust 90.39 when paid Z1241 CD REIMBURSEMENT 390 WP 0.20 FC: 98 PART#: COUNT: CLAIM TYPE: AUTH CODE: MJ 0 0 TPARTS 0 1614 TLABOR & COMP TOTALS 0 1614 0 A buyer of this product in California has the right to have this product terviced or repaired during the warranty period. The warranty period will be extended for the number of whole days that the product has been out of the ouyer's hands for warranty repairs. If a defect exists within the warranty period, the warranty will not expire until the defect has been fixed. The warranty period will also be extended if the warranty repairs have not been performed due to delays caused by circumstances beyond the control of the ouyer, or if the warranty repairs did not remedy the defect and the buyer totifies the manufacturer or seller of the fallure of the repairs within 60 days after they were completed. If, after a reasonable number of attempts, the lefect has not been fixed, the buyer may raturn this product for a eplacement or a refund subject, in either case, to deduction of a reasonable charge for usage. This time extension does not affect the protections or emedies the buyer has under other laws. TOTALS DESCRIPTION Thank you for this LABOR AMOUNT opportunity to serve 16.14 you. It is our aim to PARTS AMOUNT 0.00 perform all the repairs GAS, OIL, LUBE 0.00 requested on this repair SUBLET AMOUNT QQorder to your complete MISC. CHARGES satisfaction. If our .00 0 service was satisfactory TOTAL CHARGES 6.14 tell your friends, if not, LESS INSURANCE 0.00

please tell us

immediately.

Thank you

SALES TAX

PLEASE PAY

THIS AMOUNT

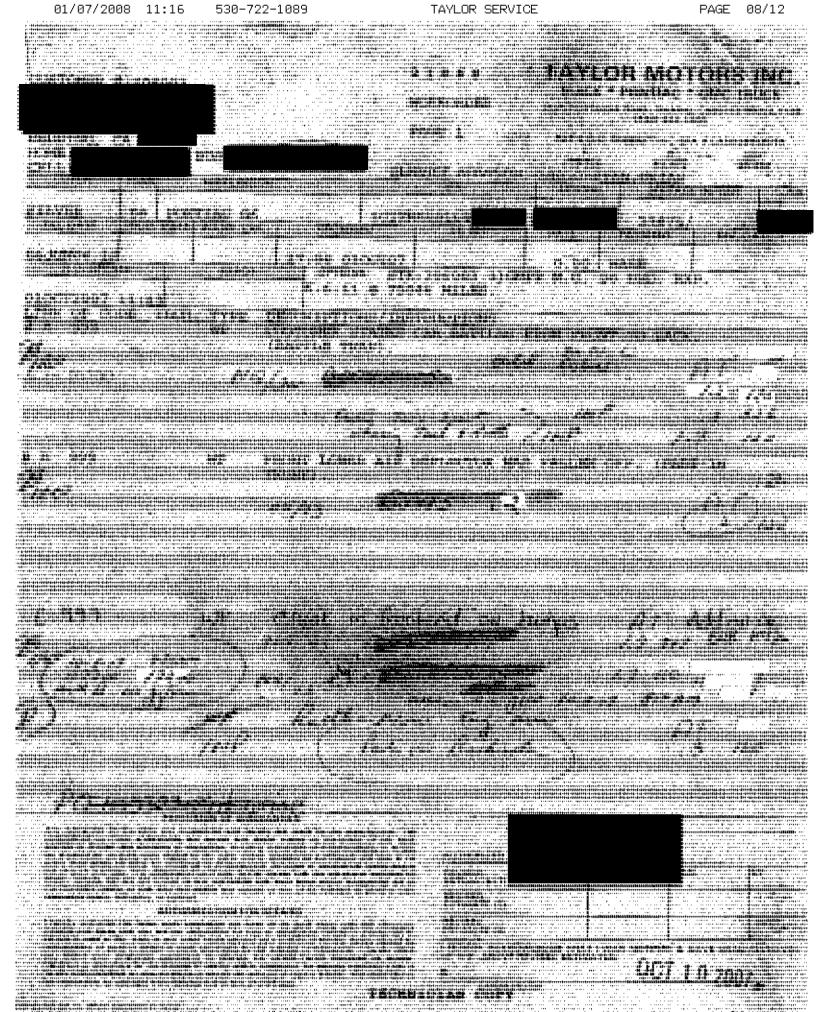
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DEALER, GENERAL MANAGER OR AUTHORIZED PERSON

| ** ***********************************                                         |            |                                |         |                                                                                                                                                                                                                                                                                                                                                    |                    | ABOR RECORD 2/8/77        |                     |                                                    |  |
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| 1 P. W. C. C. C. C. C. C. C. C. C. C. C. C. C.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | YLOR SERVICE PAGE 09/12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
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www.taylormotorsredding.com 206003 TAYLOR MOTORS INC. 21868 BUICK \* PONTIAC \* GMC TRUCK WARRANTY 2525 Churncreck Road - Redding, California 96002-1128 (530) 222-1200 DVLING. BAR # A.C. 009835 EPA # CAD028948016 **IOME** PAGE 1 BUS ۴ А GMC CELL 23-356 57-372 40-494 SERVICE ADVISOR: (**06** 2017000000 380 YEAR MAKE/MODEL BRIAN OBRYAN WIN LICENSE MILEAGE IN / OUT TAG LLVER PONTIAC DEL\_DATE G2ZH558164 PROD DATE WARR EXP PROMISED PO Niam PAYMENTS #14V D.A. (\*\* <u>6JUN06</u> :00 050CT07 R.O. OPENED 00 WARR READY LOOCTO7 OPTIONS: STK:206003 1) GMPP M.G. SO DED. 6.6.11 75046 MILES. <u>1:43.010CT07</u> 07:38 100CT07 INE OPCODE TECH TYPE HOURS CUSTOMER STATES CAR RATTLES FROM FRONT TO BACK, (RATTLE TRAP). NET TOTAL B2729 PANBL, SUNROOF ALIGN 120 WP 0.50 FC: 2W PART#: COUNT: 0 40.3640.36 CLAIM TYPE: AUTH CODE: NO 999 MECHANICAL REPAIRS 0 TPARTS O. 2880 4036 TLABOR FOUND PLASTIC GRILLE IN SUNROOF OUT OF ADJUSTME NT, ADJUSTED AS needed. Installed ensulation around washer bottle per bulletin, TIGHTENED SWAYBAR LINKS FRONT LOWER ALR DEFLECTOR HAS FALLEN OFF. (PART IN TRUNK). AUSE: BULLETIN 05-08-111-005A BO485 FRONT AIR DEFLECTOR REPLACEMENT 120 WP 0.20 16.14 16.14 FC: 93 PART#: COUNT: 0 CLAIM TYPE: AUTH CODE: ON O TPARES 480 1614 TLABOR RESECURED LOWER DEFLECTOR. CLUNK IN FRONTEND ON BUMPS AUSE: INTER SHAFT AND STEERING COLUMN RAPPLES E7680 COLUMN ASSEMBLY, STEERING REPLACE 447 WP 1.70 137.21 137.21 15926870 COLUMN 359.00 286.48 286.48 FC: 9/3 PART#: 15926870 COUNT: 1 CLAIM TYPE: buyer of this product in California has the right to have this product reviced or repaired during the warranty period. The warranty period will be stended for the number of whole days that the product has been out of the typer's hands for warranty repairs, if a defect exists within the warranty midd, the warranty will not expire until the defect has been fixed. The arranty period will also be extended if the warranty repairs have not been informed due to delays caused by circumstances beyond the control of the typer, or if the warranty repairs did not remedy the defect and the buyer utilities the manufacturer or seller of the fallure of the repairs within 60 days ter they were completed. If, after a reasonable number of attempts, the fect has not been fixed, the buyer may return this product for a placement or a refund subject, in either case, to deduction of a reasonable arge for usage. This time extension does not affect the protections or medies the buyer has under other laws. DESCRIPTION TOTALS Thank you for this opportunity to serve LABOR AMOUNT you. It is our aim to PARTS AMOUNT perform all the repairs GAS, OIL, LUBE requested on this repair SUBLET AMOUNT order to your complete satisfaction. If our MISC. CHARGES service was satisfactory **TOTAL CHARGES** tell your friends, if not, LESS INSURANCE please tell us nedies the buyer has under other laws. SALES TAX immediately. (SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON PLEASE PAY Thank you THIS AMOUNT

www.taylormotorsredding.com 206003 TAYLOR MOTORS INC. 21868 BUICK \* PONTIAC \* GMC TRUCK WARRANTY 2525 Chumcreek Road · Redding, California 96002-1128 (530) 222-1200 THULL LINES, BAR # A.C. 009835 EPA # CAD028948016 PAGE 2 HOME BUS GMC CELL 23-356 57-372 40-494 SERVICE ADVISOR: e d 380 BRIAN OBRYAN MAKE/MODEL EICENSE MILEACEUN JOST TAG 06 PONTIAC G6 LLVER G2ZH558164 DELIDATE 23474/23474 FAYMENT INV PO N INV. DATE 26JUNO6 IS B.O. OPENED <u>17:00 050CT07</u> 00 WARR READY 100CT07 OPTIONS: STK:206003 1)GMPP M.G. SO DED. 6.6.11 75046 MILES. 11:43 010CT07 07:38 100CT07 LINE OPCODE TECH TYPE HOURS LIST NET AUTH CODE: NO E7700 SHAFT, STEERING INTERMEDIATE REPLACE 110 WP 0.50 1 22687711 SHAFT KIT 40.36 40.36 131.64 FC: 93 131.64 PART#: 22687711 COUNT: 1 CLATM TYPE: AUTH CODE: B 29866 41812 TPARTS 8500 17757 TLABOR LUBED AND REPOSITIONED I-SHAFT PER BULLETIN, AL SO REPLACED STEERING COLUMN ASSEMBLY COMPLETE. LUBE SHAFT PER BULLETIN RATTLE THERE REPL ACE SHAFT SALE, & COMP TOTALS buyer of this product in California has the right to have this product erviced or repaired during the warranty period. The warranty period will be xtended for the number of whole days that the product has been out of the uyer's hands for warranty repairs. If a defect exists within the warranty eriod, the warranty will not expire until the defect has been fixed. The varranty period will also be extended if the warranty repairs have not been erformed due to delays caused by circumstances beyond the control of the uyer, or if the warranty repairs did not remedy the defect and the buyer otifies the manufacturer or seller of the failure of the repairs within 60 days feer they were completed. If, after a reasonable number of attempts, the effect has not been fixed, the buyer may return this product for a splicement or a refund subject, in either case, to deduction of a reasonable harge, for usage. This time extension does not affect the protections or medies the buyer has under other lews. 65219 DESCRIPTION TOTALS Thank you for this opportunity to serve LABOR AMOUNT <u>234.07</u> you. It is our aim to PARTS AMOUNT 418.12 perform all the repairs GAS, OIL, LUBE 0.00 requested on this repair SUBLET AMOUNT order to your complete 0..00satisfaction. If our MISC. CHARGES 0.00 service was satisfactory TOTAL CHARGES 652.19 tell your friends, if not, LESS INSURANCE 0.00 please tell us immediately. SALES TAX 0.00 (SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON PLEASE PAY Thank you THIS AMOUNT 652.19

### **BBB AUTO LINE**



January 25, 2008

Re:caset PGM0762111 vs Pontiac/GMC Division 1G2ZH558164



Dear

I am writing to confirm the terms of the settlement between you and the manufacturer that resolves the BBB AUTO LINE claim you filed.

The terms of the settlement are as follows:

The Manufacturer has offered to Repurchase the Consumer's 2006 Pontiac/GMC G6. The consumer shall be entitled to the following collateral fees: Purchase price of vehicle; Sales tax; License fees; Document preparation fee; Registration fees; California Tire fee; and all incurred finance charges from date of purchase. The Consumer shall be charged a usage deduction taken from 16,040 miles, which was the first repair attempt. The consumer's total usage fee shall be \$2872.36. There shall also be a deduction of \$1,000.00 which was for an Manufacturer's rebate. The consumer has accepted this offer. GM's RVDC Dept. shall send the consumer a separate settlement letter with the total repurchase amounts. The repurchase shall be completed within 45 days from the date of this letter.

If your understanding of this settlement differs from what is written above, please call me immediately at 800.955.5100. If I do not hear from you within eight days from the date of this letter, it will be assumed the above terms of the settlement are correct.

I will follow up with you after the date for performance of the settlement to confirm that all required actions have been satisfactorily completed. Please let me know immediately if you believe the manufacturer has not satisfactorily performed the settlement. If that happens and you contact me within 120 days from the date of this letter, I will reopen your case based on the age and mileage of your vehicle at the time you filed your current claim. If you wish to reopen your case more than 120 days from the date of this letter, I will determine whether your claim is within BBB AUTO LINE's jurisdiction based on the age and mileage of your vehicle at that time.

I am happy we have been able to help you in reaching an agreeable resolution of you claim. Please contact me at 800.955.5100 if you have any questions.

Sincerely,

Rosa Tinoco at Extension 211

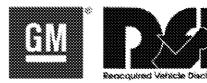
Council of Better Business Bureaus, Inc.

4200 Wilson Boulevard, Suite 800 · Arlington, VA · 22203-1838 · Phone 800.955.5100 · Fax: 703.247.9700

2006 G6 - GT SEDAN PONTIAC/GMC DIVISION 67U LIQUID SILVER METALLIC /V6G GENERAL MOTORS CORPORATION 19C EBONY 100 RENAISSANCE CENTER STOCK NO. DETROIT ADJUSTMENT INVOICE 2XD04475008 ORDER NO. JBZD2X/TRE VIN 1G2 ZH55 81 64 MODEL & FACTORY OPTIONS MSRP INV AMT RETAIL - STOCK 2ZH69 G6 - GT SEDAN 22555.00 20863.38 INVOICE 06/13/05 AP3 REMOTE VEHICLE STARTER SYSTEM 150.00 124.50 SHIPPED 04/27/05 FR9 AXLE RATIO 3.29 N/C N/C EXP I/T 05/12/05 LX9 ENGINE, 3.5L V6 SFI N/C N/C INT COM 06/23/05 MX0 AUTOMATIC TRANSMISSION 0.00 0.00 PRC EFF 04/27/05 PED PREMIUM VALUE PACKAGE INCLUDES 1550.00 1286.50 KEYS G0715 G0715 \* (4) 17" CHROMETECH WHEELS WFP-S MTH OPT-2 \* AM/FM STEREO 6 DISC CD PLAYER CHG-TO 23-356 (REPLACES STD/OPT/PKG RADIO) \* SUNROOF, POWER TILT & SLIDE SHIP WT: 3422 0.00 16.50 HP: R6J CUSTOMER DIALOG NETWORK 32.9 VK3 LICENSE PLATE BRACKET, FRONT N/C N/C GMS: 21863.23
YF5 50-STATE EMISSIONS N/C N/C SUPPLR: 22843.70
1SZ PREMIUM PACKAGE DISCOUNT 500.00- 415.00- MRM: 24880.00 MEMO 1112.75 ADD R9C TO ADJ G6 SEDAN PRICING MSRP ADJUSTMENT 900.00-678.95-DEALER INVOICE SPECIAL ACCT ADJ. 49.50 NET ADJUSTMENT 629.45-TOTAL ADJUSTMENT 629.45-ADJUSTMENT TO OPEN ACCOUNT 23755.00 21875.88 ACT 231 629.45-TOTAL MODEL & OPTIONS 625.00 625.00 DESTINATION CHARGE LAM GROUP CONTRIBUTION 237.55 TOTAL 24380.00 22738.43 629.45 -MEMO: TOTAL LESS HOLDBACK AND APPROX WHOLESALE FINANCE CREDIT 21687.45 \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

INVOICE DOES NOT REFLECT DEALER'S ULTIMATE COST BECAUSE OF MANUFACTURER REBATES, ALLOWANCES, INCENTIVES, HOLDBACK, FINANCE CREDIT AND RETURN TO DEALER OF ADVERTISING MONIES, ALL OF WHICH MAY APPLY TO VEHICLE.

TAYLOR MOTORS, INC.



Case Number: 145655

Originator Name: Patricia Alarcon 866-790-5600 11148 patricia\_alarcon@gmexpert.com

Created Date: 01/30/2008

Vehicle Info

\*VIN: 1G2ZH558164 24380.0 MSRP: \*TAC #: N/A Year: 2006 Make: Pontiac Model: G6

Vehicle Comments & TAC Explanation:

\*Date Reviewed with Customer: 01/25/2008 \*Repurchase Mileage: 16040 Original Purchase Date: 06/06/2006 \* Original Purchase Condition: New

Vehicle Owner(s)

**Entity Type** Person

\* Names(s) on Title: \* Primary Owner:

\* Address

\* City

\* Day Phone:

\* E-mail:

\* Title State: CA

\* State CA

\* Home Phone:

\* ZIP Code:

\* Cell Phone:

**ZIP Code:** 96007

\* Fax Phone:

Repurchase

\* Reason brakes make noise when and pulsate, rattle from steering column

**UCC Codes** 

UCC1 UCC2 UCC3 UCC4 UCC5

H0113 H0110 M0110

Redding

Vehicle Lien Holder

Type of Secured Interest: Standard Lien \* Company: US Bank Account #:

Contact or Attention:

Address 2750 Childress Dr

City Anderson State CA

111-111-1111 Day Phone: Fax: E-mail:

Original Selling Dealer

\* Dealer #: 118973 Dealer Name: TAYLOR MOTORS, INC.

Region: 10 District: 1251

(530) 222-1200 (530) 222-1263 \* Phone: Fax:

\* Contact Name: Brent Taylor \* Contact Title Sales Mgr E-Mail:

Repurchasing Dealer:

Repair

\* Contact Title: \* Contact Name:

Vehicle Location:

January 30, 2008 Page 1 of 2





Case Number: 145655

Originator Name: Patricia Alarcon 866-790-5600 11148 patricia\_alarcon@gmexpert.com

Created Date: 01/30/2008

**Transaction** Details:

Siebel Request #: 71-589780985

State:

Source: ADR BBB Mediated

Replacement VIN:

Compliance Date: 2008-03-17

MSRP: 0.0 \* Disposition Auction

\* Type: Straight Repurchase

Compliance Type: BBB Mediated

Order #:

Repurchase:

Process per settlement letter. DIr has also advised they do not have an ACV form and do not use deal recaps. Advised what was given for trade on contract was the ACV. \* Processing Instructions:

Disposition:

Auction

\* Processing Instructions:

**Transaction Details** 

| <u>Group</u>          | Responsible    | <u>Formula</u> | Additional Explanation | <u>Value</u> |
|-----------------------|----------------|----------------|------------------------|--------------|
| Usage                 | Use Lemon Law  | NA             | Usage per Lemon Law    | 2872.3       |
| Sales Tax             | GM             | NA             | Saleš Tax              | 6            |
| State/Gov Fees        | GM             | NA             | Fees                   | 0            |
| After Market Item(s)  | Does Not Apply | NA             | No Aftermarket Items   | 0            |
| Negative Equity       | Customer       | NA             | Negative Equity        | 0            |
| Ověr Allowancé Amount | Customer       | NA             | Ověr Allowancé         | 0            |
|                       |                |                |                        | 0            |

January 30, 2008 Page 2 of 2

## Overallowance/Negative Equity/Incentives Form (Non-Florida)

| Customer: | SR #: 71-589780985 | BBB#: PGM0762111  |
|-----------|--------------------|-------------------|
| Customer. | 31\π. 11-303100303 | DDD#.I CINOTOZITI |

This form may be used to identify possible Overallowance or Negative Equity and to determine any customer incentives which were paid but may not be easily identifiable on a Bill of Sale.

You must determine the TRUE purchase price of a vehicle and identify any Overallowance, Negative Equity, and/or Incentives prior to arbitration or voluntary repurchase.

### Section 1

| - Cochen 1                                        |            |
|---------------------------------------------------|------------|
| Purchase Price                                    | 22489.00   |
| (from Bill of Sale, before tax, tag, title, etc.) |            |
| MSRP                                              | - 24380.00 |
| (from BARS Invoice screen)                        |            |
| Subtract the MSRP from the Purchase Price         | =1891.00   |
| (If positive, look for Overallowance)             |            |

If the Purchase Price is greater than the MSRP but there was no trade-in, have the Dealer explain why the customer paid more than MSRP.

#### Section 2

| ******                                                                                          |           |
|-------------------------------------------------------------------------------------------------|-----------|
| Trade Allowance                                                                                 | 12000.00  |
| (from Bill of Sale)                                                                             |           |
| Actual Cash Value (ACV)                                                                         | -12000.00 |
| (from ACV Statement)                                                                            |           |
| Subtract the ACV from the Trade Allowance                                                       | =0.00     |
| If positive, the Trade Allowance is higher than the ACV of the trade-in. This is Overallowance. |           |

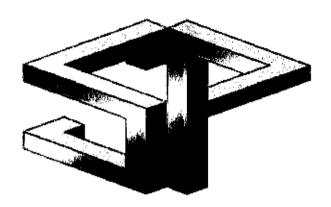
## Section 3

| Trade Allowance                                                                                   | 12000.00  |
|---------------------------------------------------------------------------------------------------|-----------|
| (from Bill of Sale)                                                                               |           |
| Payoff on Trade                                                                                   | -10734.24 |
| (from Bill of Sale)                                                                               |           |
| Subtract the Payoff on Trade from the Trade Allowance                                             | =1265.76  |
| If negative, the Payoff on the Trade is higher that the Trade Allowance. This is Negative Equity. |           |

### Section 4

| Purchase Price                                                                                    | 22489.00  |
|---------------------------------------------------------------------------------------------------|-----------|
| (from Bill of Sale, before tax, tag, title, etc.)                                                 |           |
| Incentives not included in the Purchase Price                                                     | -1000.00  |
| (from BARS and Incentive Acknowledgement sheet)                                                   |           |
| Do not include fuel-fill credit or Dealer incentives. GM Card points must be included.            |           |
| Overallowance/Negative Equity                                                                     | -1265.76  |
| (use the Overallowance from Section 2 or the Negative Equity from Section 3, whichever is larger) |           |
| Subtract the Incentives and the Overallowance/Negative Equity from the Purchase                   | =20223.24 |
| Price. This is the Actual price of the vehicle that should be presented to the BBB on             |           |
| the Agreement to Arbitrate (ATA).                                                                 |           |

If Overallowance/Negative Equity and/or Incentives (not included in Purchase Price) are found, verify with Team Lead before submitting information to BBB.



## **Sierra Pacific Industries**

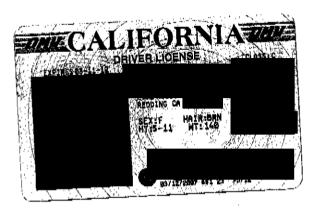
P.O. Box 496028, Redding, CA 96049-6028 19794 Riverside Avenue, Anderson, CA 96007

E-mail: <a href="mailto:bbollen@spl-ind.com">bbollen@spl-ind.com</a>
Phone: (530) 378-8233
Fax : (530) 378-8242

# Fax

| To:   | Ros    | a                      | From:              |                 |                   |
|-------|--------|------------------------|--------------------|-----------------|-------------------|
| Fax:  | 703    | -247-9700              | Pages              | : 4             |                   |
| Phone | e: 800 | <u>-955-5100 x 211</u> | Date:              | Jan. 24, 2008   |                   |
| Re:   |        | 10-10-10               | CC:                |                 |                   |
| □ Urg | ent    | ☐ For Review           | ☐ Please Comment   | ☐ Please Reply  | □ Please Recycle  |
| Rosa  | a,     | _                      |                    | • 111           |                   |
| Attad |        | is a copy of m         | ny Drivers License | & Vehicle regis | stration per your |
| Any   | ques   | stions please c        | all me @           | or              |                   |

Have wonderful day..



Committee with the committee of

TO OBTAIN A TITLE OR REGISTRATION CARD, MAIL THE ATTACHED DOCUMENTS AND REQUESTED ITEMS TO: DMV, PO BOX 942869, SACRAMENTO, CA 94269-0001. PENALTIES ARE DUE IF RENEWAL FEES ARE PAID AFTER THE EXPIRATION DATE. PLANNED NON-OPERATION (PNO) REQUESTS MUST BE SUBMITTED WITHIN 90 DAYS OF THE EXPIRATION DATE (ON OR BEFORE THE EXPIRATION DATE FOR OFF-HIGHWAY VEHICLES) OR ALL FEES AND PENALTIES ARE DUE. FOR A DMV OFFICE APPOINTMENT, GO ONLINE AT WWW.DMV.CA.GOV OR CALL 1-800 777-0133.

CALIFORNIA OWNERSHIP CERTIFICATE OR APPLICATION FOR DUPLICATE WITH THE APPROPRIATE FEE.

A LIEN SATISFIED IS REQUIRED FROM GMAC

551 110707 38 0036 F00 11 5UNX249 679

> REPORT OF DEPOSIT OF FEES PAGE 1 OF 1



```
INCOMPLETE APPLICATION ** SEE ABOVE ** THIS IS NOT AN OPERATING PERMIT *
 MAKE
            YR MODEL
                       YR 1ST SOLD
                                     VLF CLASS
                                                             TYPE VEH
                                                                          TYPE LIC
              2006
                                       FD
                                                             120
                                                                           11
 PONT
                         2006
                                                                           VEHICLE/VESSEL ID NUMBER
BODY TYPE MODEL
                   MP
                        MO
                   G
                        NY
                                                                             1G2ZH558164
 4D
                          DATE ISSUED
                                        CC/ALCO
                                                   DT FEE RECVD
                                                                  PIC
TYPE VEHICLE/VESSEL USE
                                        45
                                                                   0
                          11/07/07
                                                   11/07/07
 AUTOMOBILE
                                    RDF REASONS: 3 I
                                                                                          AMOUNT PAID
                                                                                     S
                                                                                          15.00
R
                                              AMOUNT DUE
                                                                AMOUNT RECVD
0
                                                  15.00
                                                           CASH :
                                                           CHCK :
                                                                        15.00
  REDDING
                                                           CRDT :
  CA
  US BNK
                                                            PR EXP DATE: 06/08/2008
  2750 CHILDRESS DR
0
  ANDERSON
                       96007
  CA
```

## CALIFORNIA DEPARTMENT OF MOTOR VEHICLES \*\*\*CUSTOMER RECEIPT COPY\*\*\* REGISTRATION INFORMATION REQUEST 01/24/08

R62999335514A5UNX249

DATE: 01/24/08 TIME: 11:33

PENDING RECORD INSURANCE STATUS NOT CHECKED

REG VALID FROM: 06/08/07 TO 06/08/08

LIC#: THE YRMD: 06 MAKE: PONT BTM : 4D VIN : 1G2ZH558164

R/O :CAREY MICHAEL ASHLEY, 2958 NILOLET LN CITY:REDDING C.C.: 45

ZIP#:96001

SOLD:00/00/06 RCID:06/12/07 OCID:07/02/06 LOCD:8

L/O :GMAC, PO BX 8128, COCKEYSVILLE CITY:MD ZIP :21030

TYPE:11 POWR:G VEH :12 BODY:0 CLAS:FD

REC STATUS:

RENEWAL NOTICE EXTRACTED 03/16/2007

06/24/06 SMOG DUE 06/08/12

RIP OFC:180 D:12/22/07 ID/S:270008 T:F00 V:0003000 R:ZZ

RT:

| CLEARANCE                              | INFORMATION          | RECORDS: |
|----------------------------------------|----------------------|----------|
| ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | T-11 - OTITION TO 11 | ******** |

| 06/06/2 | 006-ODOMETER: | 4.      | 6 MILES | ACTUAL MIL | EAGE        |     |
|---------|---------------|---------|---------|------------|-------------|-----|
| 551     | 11/07/07      | 38      | 0036    | 00015.00   | PRIOR SUSPE | NSE |
| 180     | 12/22/07      | 27      | 0008    | 00015.00   | 00/00/00    | RIP |
| 558     | 06/12/07      | 05      | 0009    | 00191.00   | 00/00/00    | H00 |
| 551     | . 06/22/06    | 06      | 0011    | 00205.00   | 00/00/00    | A00 |
| OFFICE  | WORK DATE     | TECH/ID | SEQ #   | VALUE      | FICHE DATE  | TTC |

DATE: 01/24/08 TIME: 11:33 PENDING MASTER FILE RECORD

YRMD:06 MAKE:PONT BTM :4D VIN :1G2ZH558164 LIC#:

R/O : CITY:REDDING C.C.:45

ZIP#:

SOLD:00/00/06 RCID:12/22/07 LOCD:0

L/O :US BANK, PO BX 3427, OSHKOSH CITY:WI ZIP :54903

TYPE:11 POWR:G VEH :12 BODY:0 CLAS:FD

11/01/2007-ODOMETER:

25,620 MILES ACTUAL MILEAGE

\* \* \* END \* \* \*

551 012408 13 0020 VIR \$ 5.00

## **Voluntary Repurchase**

|      | BBB Case                     | Straight                                            |
|------|------------------------------|-----------------------------------------------------|
| CC   | OMPLIANCE DATE – N           | Iarch 17, 2008                                      |
| ΑI   | OR REQUEST NUMBEI            | R - 71-589780985                                    |
| CU   | USTOMER NAME -               |                                                     |
| LA   | ST SIX OF VIN -              |                                                     |
| ΑI   | OR CRS - Pat Alarcon         | EXT 11148                                           |
| DV   | /M – Mark Erwin              | PHONE - 650-207-3529                                |
| DA   | ATE ACCEPTANCE RE            | CEIVED – January 25, 2008                           |
| NU   | MBER OF DAYS FOR             | COMPLIANCE – 45 days                                |
| TE   | AM LEAD'S SIGNATU            | TRE                                                 |
| ΑI   | OR Exceptions that need      | to be paid i.e. over allowance and negative equity. |
| CC   | OMMENTS/REASON F             | OR EXCEPTION:                                       |
| File | will be returned without all | information above completed.                        |

Total Official Fees (A through E)

REDDING, CA

yer (and Co-Buyer, if any), may buy the vehicle below for cash or on credit. By signing this contract, you choose to buy the vehicle on credit under the

| New                                       | \ <u></u>                                                            | Make<br>and Model                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Odometer                                                                         | Vehicle identification Number                                                                                                                                                                                          | Primary Use For Which Purchased                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|-------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Used                                      | Year                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Odometer                                                                         |                                                                                                                                                                                                                        | (Apprecial, family or household                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| NEW                                       | 8 .776 OF Mar. 1                                                     | ONTIAC<br>35                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 45                                                                               | 162ZH558164                                                                                                                                                                                                            | business or commercial                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <del></del>                               |                                                                      | 7.77                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | TH-IN-LENDING DISC                                                               | LOSURES                                                                                                                                                                                                                | STATEMENT OF INSURANCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| PERC<br>The<br>your<br>a yea              | NUAL<br>ENTAGE<br>ATE<br>cost of<br>credit as<br>arly rate.          | FINANCE<br>CHARGE<br>The dollar<br>amount the<br>credit will<br>cost you.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Amount Financed The amount of The credit provided will to you or on your behalf. | Total of Payments e amount you have paid after have made all syments as scheduled.  26024.40(a)  Total Sale Price The total cost of your purchase on credit, including your down payment of \$2265.76 is \$28290.16(e) | NOTICE. No person is required as a condition of financing the purchase of a motor vehicle to purchase or negotiate any insurance through a particular insurance company, agent or broker. You are not required to buy any other insurance to obtain credit. Your decision to buy or not buy other insurance will not be a factor in the credit approval process.  Vehicle Insurance  Term  Premium  \$ N/A Ded. Comp., Fire & Theft  Premium                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 116                                       | <u> </u>                                                             | 3 2005.00(8)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ) \$ \$                                                                          | (e) means an estimate                                                                                                                                                                                                  | \$ N/A Ded. Collision N/A Mos. \$ N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| YOUR I                                    | PAYMENT SC                                                           | HEDULË WILL BE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                  |                                                                                                                                                                                                                        | Bodily Injury \$ N/A Limits N/AMos. \$ N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| ī                                         | Number of Pay                                                        | ments:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Amount of Payments:                                                              | When Payments Are Due:                                                                                                                                                                                                 | Property Daniage & ALL Clinics MI / A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                           | yment of                                                             | Market State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of the State of th | N/A                                                                              | N/A                                                                                                                                                                                                                    | Medical                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                           | yment of                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | N/A<br>433.74                                                                    | Monthly, Beginning 07/21/2006                                                                                                                                                                                          | 19 / / / / J                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 59                                        | ,                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | N/A                                                                              | Monthly, Beginning N/A                                                                                                                                                                                                 | 1 TOTAL ABILICA I ISOLOGICO I ISOLOGICO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| One Fil                                   | ∫ Payment<br>gal Payment                                             | TS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 433.74                                                                           | 06/21/2011                                                                                                                                                                                                             | UNLESS A CHARGE IS INCLUDED IN THIS AGREEMENT FOR PUBLIC LIABILITY OR PROPERTY DAMAGE INSURANCE, PAYMEN FOR SUCH COVERAGE IS NOT PROVIDED BY THIS AGREEMENT.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Late Ch<br>payment<br>Prepayi<br>Security | erge. If payme<br>that is late.<br>nent. If you pay<br>Interest. You | off all your debt early, you name giving a security interest                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | nay be charged a minimum finance of                                              | on about nonpayment, default, any required                                                                                                                                                                             | You may buy the physical damage insurance this contract require (see back) from anyone you choose who is acceptable to us. Yo are not required to buy any other insurance to obtain credit.  Buyer X  Co.Buyer X                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                           |                                                                      | THE AMOUNT FINANC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ED                                                                               | " NN                                                                                                                                                                                                                   | Seller XTAYLOR MOTORS, IMC.  If any insurance is checked below, policies or certificates from the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                           | otel Cash Pri                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>c</b>                                                                         | 22469.00 (A) (1) (1)                                                                                                                                                                                                   | named insurance is checked below, policies of certificates from the named insurance companies will describe the terms and conditions.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| A                                         | . Cash Price<br>1. Cash Pr                                           | of Motor Vehicle and Ac                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 22489-00 s                                                                       |                                                                                                                                                                                                                        | Application for Optional Credit Insurance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                           |                                                                      | ice Accessories                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | sN/A                                                                             | (4)                                                                                                                                                                                                                    | │ ☐ Credit Life: ☐ Buyer ☐ Co-Buyer ☐ Both                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                           | 3. Other (N                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                  | Jr. 10 23.                                                                                                                                                                                                             | ☐ Credit Disability (Buyer Only)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                           | • •                                                                  | 9                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | s N/A<br>• N/A                                                                   | ~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~                                                                                                                                                                                 | Term Exp. Premium  N/A  Credit Life N/A  Mos.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                           | Describ                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Ψ                                                                                | 45.00 m 37                                                                                                                                                                                                             | Credit Life N/Amos. N/A N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                                           |                                                                      | Preparation Fee (not a g                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | overnmental fee) \$                                                              | N/A (C)                                                                                                                                                                                                                | Total Credit Insurance Premiums \$ N / A(b)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                                           |                                                                      | Paid to Seller                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Ф</b>                                                                         | 1633.72 (D)                                                                                                                                                                                                            | Insurance Company Name M/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                           |                                                                      | on taxable items in A+B                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                  | W/A (E)                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                           | •                                                                    | MV Electronic Filing Fee<br>Service Contract*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ·                                                                                | 1095-00 (F)                                                                                                                                                                                                            | Home Office Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                                           |                                                                      | Service Contract"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$                                                                               | N/A (G)                                                                                                                                                                                                                | the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s |
|                                           | H. Prior Cred                                                        | t or Lease Balance paid                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$                                                                               | 利/A (H)                                                                                                                                                                                                                | Credit life insurance and credit disability insurance are no required to obtain credit. Your decision to buy or not buy crediffe and credit disability insurance will not be a factor in the credit approval process. They will not be provided unless you                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                           |                                                                      | payment and trade-in ca                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                  | N/A (0)                                                                                                                                                                                                                | I ston and agree to pay the extra cost. Credit life insurance to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                           |                                                                      | Gap Contract (to whom:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                  | N/A (J) @                                                                                                                                                                                                              | based on your original payment schedule. This insurance ma<br>not pay all you owe on this contract if you make late payments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                           |                                                                      | vftom paid)*                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                  | (0)                                                                                                                                                                                                                    | <ul> <li>L. Cradit disphility insurance does not cover any increase in you</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                           | For                                                                  | ice (A through J)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 2017.17                                                                          | s 25262.72 <sub>(1</sub>                                                                                                                                                                                               | payment or in the number of payments. Coverage for credit if insurance and credit disability insurance ends on the original due date for the last payment unless a different term for the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                           |                                                                      | d to Public Officials                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | - 1 AMUS                                                                         | 205 20                                                                                                                                                                                                                 | Insurance is snown above.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                           |                                                                      | 968 Freigh 1915                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | be the the                                                                       | 205.00 (A)                                                                                                                                                                                                             | You are applying for the credit insurance marke                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 1                                         | B. Begistratio                                                       | on/Transfer/Titling Fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | /\$                                                                              | -INCL-(B)                                                                                                                                                                                                              | above. Your signature below means that you agre<br>that: (1) You are not eligible for insurance if you hav                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
|                                           | C. California                                                        | Tire Fees*<br>NGG ABATEMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | , / \$                                                                           | 8.75 (c)<br>12.00 (D)                                                                                                                                                                                                  | I reached yeur 65th birthday. (2) You are eligible to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                           | D. Other 🚵                                                           | KAN HEHITERI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <u> </u>                                                                         | N/A (E)                                                                                                                                                                                                                | disability insurance only if you are working for wage<br>or profit 30 hours a week or more on the Effective                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                                           | E. Other                                                             | Fees (A through E)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                  | s 225-75 (c                                                                                                                                                                                                            | Date: (3) Only the Primary Buyer is eligible to                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 1                                         | T-4-1 (************************************                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                  |                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

e or es Date: (3) Only the Primary Buyer is eligible for disability insurance. DISABILITY INSURANCE MAY

|                                                                                                                                                                                                                                                               | 30-222-1263                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TAYLOR MOTO                                                                                                                                                          |                                                                                                                                          | PAGE 03/04                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
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| NOT HAVE TOLK COVERAGE, SUPPLEME<br>DEALER, HOWEVER, UNLESS OTHERWIS<br>THE UNPAID BALANCE REMAINING AFTER                                                                                                                                                    | SE SPECIFIED. THE COVERAGE Y<br>RITHE VEHICLE HAS BEEN BEPOSS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | OU OBTAIN THMOUGH THE DEALE<br>SESSED AND SOLD.                                                                                                                      | R PROTECTS ONLY THE DEN                                                                                                                  | IER, OSUACLY DE 10 IPE MOUNTS SE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| FOR ADVICE ON FULL COVERAGE THAT THE BUYER SHALL SIGN TO ACKNOWN                                                                                                                                                                                              | A WILL PROTECT YOU IN THE EVEN<br>LEDGE THAT ME/SHE UNDERSTAND                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | VT OF LOSS OR DAMAGE TO YOUR V<br>DS THESE PUBLIC LIABILITY TERMS                                                                                                    | AND CONDITIONS.                                                                                                                          | ryouh insorange agent.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| S/S X. 🚅                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Х                                                                                                                                                                    |                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Representations of Buyer: Selle<br>You represent that you have giver<br>6.B as "Prior Credit or Lease Bal<br>item 6.B as "Prior Credit of Lease Bal                                                                                                           | r has relied on the truth and a true payoff amount on the arice," you must pay Seller will refund the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | d accuracy of the information<br>be vehicle traded in. If the par-<br>the excess on demand. If the<br>e difference to you.                                           | provided by you in cont<br>yoff amount is more than<br>e payoff amount is less t                                                         | nection with the Trade-In Vehicle,<br>the amount shown above in item<br>than the amount shown above in                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Buyer X                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Co-Buyer X                                                                                                                                                           | -                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Notice to buyer: (1) Do not sign this agreement in copy of this agreement. (3) Yof your obligations under this indebtedness evidenced by this a                                                                                                               | ou can prepay the full am<br>agreement, the vehicle m                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | rount due under this agreer                                                                                                                                          | ment at any time. (4) If                                                                                                                 | you default in the performance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| If you have a complaint concerning this s<br>Complaints concerning untail or decept                                                                                                                                                                           | ale, you should try to resolve it w                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ith the seller.                                                                                                                                                      | ottomor the district attorney                                                                                                            | or on Investigator for the Department                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| of Motor Vehicles, or any combination the After this contract is signed, the selection and it is an unfair or described.                                                                                                                                      | anala di Salamana di Salamana di Salamana di Salamana di Salamana di Salamana di Salamana di Salamana di Salama                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                      |                                                                                                                                          | -                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| and it is an unfair or decentive the seller                                                                                                                                                                                                                   | may not change de mancing b                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | payment terms triness you agree                                                                                                                                      | ent winding to the change. For                                                                                                           | r do not have to agree to any change,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Buyer Signature X                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Co-Buyer Signatu                                                                                                                                                     | ire X                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| The Annual Percentage<br>and retain its right to re                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Finance Charge.                                                                                                                                                      |                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| California law does not provide for a "co<br>Therefore, you cannot later cancel this co<br>vehicle costs too much, or wish you had:<br>only cancel this contract will                                                                                         | ontract simply because you change<br>acquired a different vehicle. After yo<br>legal cause<br>357                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | period for vehicle sales. Expour mind, decide the pu sign below, you may a such as fraud.  THAT YOU                                                                  | YOU SIGNED THIS CONTRACT<br>TAKE IT AND REVIEW IT. Y<br>OTH SIDES OF THIS CONTR<br>ON THE REVERSE SIDE, BEF<br>U RECEIVED A COMPLETELY I | IIS CONTRACT. YOU CONFIRM THAT<br>I, WE GAVE IT TO YOU, AND YOU WERE<br>OU ACKNOWLEDGE THAT YOU HAVE<br>RACT, INCLUDING THE ARBITRATION<br>ORE SIGNING BELOW. YOU CONFIRM<br>FILLED-IN COPY WHEN YOU SIGNED IT.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Buyer Signature X                                                                                                                                                                                                                                             | _ Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Co-Buyer Signat                                                                                                                                                      |                                                                                                                                          | Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Co-Buyers and Other Owners — A co-budoes not have to pay the debt. The other of                                                                                                                                                                               | iyer is a person who is reaponable<br>wher agrees to the security interes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | le for paying the entire debt. An oth<br>It in the vehicle given to us in this co                                                                                    | ier owner is a person whose n<br>ntract                                                                                                  | ame is on the title to the vehicle but                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Other Owner Signature X                                                                                                                                                                                                                                       | A CONTRACT SHEET OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE OF THE STATE O | Address                                                                                                                                                              |                                                                                                                                          | A production of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract o |
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| To induce us to sell the vehicle to Buyer, each Guarantor must pay it when asked. Guarantor's demand for reimbursement. I a full or partial release to any other Guara or extend the contract. Each Guarantor a Guarantor walves notice of acceptance of this | Each Guarantor will be liable for the<br>Each Guarantor agrees to be liable a<br>intor: (3) release any security: (4) acc                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | total amount owing even if other pers<br>even if we do one or more of the follow<br>cept less from the Buyer than the total<br>copy of this contract and guaranty at | ons also sign as Guarantor, and<br>wing: (1) give the Buyer more tim<br>amount owing; or (5) otherwise in<br>the time of signing.        | even if Buyer has a complete defense to<br>a to pay one or more payments; (2) give<br>each a settlement relating to this contract                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                                                                                                                                                                                                                               | s Guaranty, notice of the Buyer's non-pa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | syment, non-performance, and default; an                                                                                                                             | d notices of the amount owing at an                                                                                                      | y time, and of any demands upon the Buyer.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| -                                                                                                                                                                                                                                                             | 06                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | /06/2006                                                                                                                                                             | d notices of the amount owing at an                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Guarantor X                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                      | a notices of the amount owing at an                                                                                                      | y time, and of any demands upon the Buyer.  Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| -                                                                                                                                                                                                                                                             | 05<br>Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | /06/2006 Guarantor X                                                                                                                                                 | a notices of the amount owing at an                                                                                                      | Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Guarantor X                                                                                                                                                                                                                                                   | 05<br>Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | /06/2006<br>Guarantor X                                                                                                                                              | a notices of the amount owing at an                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

PAGE 04/04

(excludes Saturn)

| CUSTOMER NAME:                                                                                                                                                                                                                                                                                                                                                                                                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Customer Incentive                                                                                                                                                                                                                                                                                                                                                                                                                         |
| I assign the total amount of customer incentive(s) listed to the dealer named below and request that the available customer incentive(s) be applied: (a) to the down payment of this vehicle, (b) where permissible by law, as a price reduction (Bill of Sale indicates pre-incentive price, amount of incentive, and final price with incentive applied), or (c) a check be issued in my name by Dealer named below:                     |
| Incentive Program Reference Amount GM Incentive Code 3/C 5 500                                                                                                                                                                                                                                                                                                                                                                             |
| 2. Other Program Selection (Which may or may not be in lieu of customer incentive programs; for example, Division supported financing/leasing, etc)  a. I elect to receive 4.5% FOR 60 MONTHS in lieu of REBATE                                                                                                                                                                                                                            |
| and/or b. I elect to receive                                                                                                                                                                                                                                                                                                                                                                                                               |
| a. Vehicle Incentive Acknowledgment. I am the ultimate retail purchaser or lessee of the vehicle bearing this vehicle identification number, which was sold/leased to me by the Dealer, named below. This vehicle was purchased/leased for personal/business use and not resale and I took delivery on05.06.06 acknowledge receipt of incentive(s) as described in Item                                                                    |
| b. Terms and Conditions Acknowledgment. I acknowledge that I have received the Terms and Conditions under which the OnStar service in my vehicle is provided (copies are available in the vehicle glovebox, from the dealer, at the conditions of by contacting OnStar as described below).                                                                                                                                                |
| I understand that in order to cancel the OnStar service in my bicle, I must press the blue OnStar button in my vehicle or call 1.888.40nStar (1.888.466.782) of TTY 1.877.248.2080 and request that my Services be cancelled.                                                                                                                                                                                                              |
| Purchaser/Lessee Signature: Date:Date:                                                                                                                                                                                                                                                                                                                                                                                                     |
| The undersigned person, as Dealer representative, certifies that the information of this application is true and correct, and the incentive(s) described in Item to defid the OnStar Terms and Conditions have been provided to the said purchaser/lessee who has taken delivery of the referenced unit through this dealership, and that properly completed accurate delivery data has been forwarded to General Motors or Saab Cars USA. |
| Authorized Dealer Signature: TAYLOR MOTORS INC Date: Dealer Code: 23354                                                                                                                                                                                                                                                                                                                                                                    |

Dealer Note: This is a required document and it must be completed, signed, and retained in EVERY DEAL FILE for new retail customers even if there are no incentives or rate support available. A copy of the completed form should be provided to the customer.

## ADR REPURCHASE CHECKLIST

## Once completed, this document should be attached to the SR.

| ☐ Both VINS on Trade Repurchase Or vehicle order number. Need order # or VIN on all cases except Mandates |
|-----------------------------------------------------------------------------------------------------------|
| ☐ Invoice on original vehicle (from BARS)-old VIN & new VIN if a trade                                    |
| ☐ Incentive Acknowledgement Form                                                                          |
| Signed Bill of Sale on original vehicle                                                                   |
| ⊠ Copy of the title or registration, if unobtainable, then copy of Title Need current registration in CA  |
| Agreement to Arbitrate (For CA cases, attach the CCF)                                                     |
| Repair Orders (KY and FL only)                                                                            |
| ☐ Invoice for any conversion package (if applicable)                                                      |
| Receipts for any after-market items (if applicable)                                                       |
| BBB ruling/lemon law ruling and/or BBB settlement letter (if applicable)                                  |
| Signed customer acceptance of decision for Mandatory Repurchases                                          |
| ☐ Financial Institution information including: account #, phone # & Institution name                      |
| Overallowance/Incentives/Negative Equity Form                                                             |
| ACV on trade-in documented                                                                                |
| Copy of the Customer Claim Form (CCF) only on Mandates                                                    |
| Applicable Attorney Information: Firm Name, Contact Person, Federal Tax I.D., Phone #                     |



Wednesday, February 20, 2008



#### **BBB Arbitration Decision - Straight**

\$4,454.28

Subject: Repurchase of 2006 Pontiac G6

VIN: 1G2ZH558164 Ref SR:71-589780985 V-145655

Dear

We regret that you are dissatisfied with your 2006 Pontiac G6, VIN 1G2ZH558164 and that our attempts to resolve your concerns have not met your expectations. Pontiac will repurchase this vehicle in exchange for the release of liability stemming from warranties, express or implied, covering this vehicle.

Per the Better Business Bureau's decision, Pontiac will repurchase your vehicle for \$22,092.70. Your responsibilities are outlined below. This offer was calculated by using the following figures.

| Total Repurchase Amount                           | \$22,092.70 |
|---------------------------------------------------|-------------|
| Base Price                                        | \$22,489.00 |
| Reg/Lic/Title Fees                                | \$217.00    |
| Document Fees                                     | \$45.00     |
| Sales Tax                                         | \$1,633.72  |
| Finance Charges                                   | \$1,571.59  |
| Tire Fee                                          | \$8.75      |
| Less Usage                                        | \$2,872.36  |
| Less Incentives                                   | \$1,000.00  |
| Less Payoff of Original Vehicle-Good until 3/5/08 | \$17,638.42 |
|                                                   |             |

## \*\*TOTAL CUSTOMER RESPONSIBILITY IS SUBJECT TO CHANGE IF SIGNED PAPERWORK IS NOT RECEIVED BY DATE OUTLINED BELOW\*\*

If you owe money to General Motors, please send certified check or money order made payable to General Motors.

If this offer is acceptable, please sign this letter and return it to my attention via the fax number or address listed below. I will contact you to set up a signing date, at which time you will be required to contact you have any questions or concerns.

Customer's and Co-Customer's Printed Name(s)

Cι

**Total Amount to Customer** 

The requirements of the straight repurchase are as follows:

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- ⇒ Vehicle Damage vehicle is free from any abnormal damage, which impair its resale value. Vehicle must be inspected by a General Motors dealership at time of closing.
- ⇒ Vehicle Alterations if this vehicle has been altered or modified from its original factory condition, it must be restored to its original condition before the scheduled repurchase appointment
- ⇒ A "Power of Attorney" form supplied by General Motors must be signed and notarized at the time of repurchase (used only for titling purposes).
- ⇒ An "Odometer Disclosure Statement" form supplied by General Motors must be signed at the time of the repurchase
- ⇒ Factory installed equipment needs to be intact and functional.
- ⇒ Title if no lien on this vehicle, a free and clear title must be provided at time of repurchase.
- ⇒ Cash backs rebates or incentives— no cash backs rebates or incentives of any kind are applicable towards this transaction.

If all above requirements are met, the dealership will proceed with the repurchase and transfer of funds.

Please return this signed document to fax number 866-802-6668 by Friday February 22, 2008

Sincerely,

General Motors RVDC 2717 Schust Saginaw, MI 48603

\*145655\*

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| TAYLOR MOTORS INC.  WARRANTY  WARRANTY  DAGE 1  PAGE 2  SERVICE ADVISOR: 197 STEVEN M DOTY  TOTAL  STIVER 6 PONTAC GE  GEODATE MARRIEDE 1 PAGENCOES  STIVER 6 PONTAC GE  GEODATE MARRIEDE 1 PAGENCOES  STIVER 6 PONTAC GE  GEODATE MARRIEDE 1 PAGENCOES  STIVER 6 PONTAC GE  GEODATE MARRIEDE 1 PAGENCOES  STIVER 6 PONTAC GE  GEODATE MARRIEDE 1 PAGENCOES  STIVER 6 PONTAC GE  GEODATE MARRIEDE 1 PAGENCOES  STIVER 7 STEVEN M DOTY  GEODATE 1 PAGENCOES  STIVER 7 STEVEN M DOTY  GEODATE 1 PAGENCOES  STIVER 7 STEVEN M DOTY  GEODATE 1 PAGENCOES  STIVER 7 STEVEN M DOTY  GEODATE 1 PAGENCOES  STIVER 7 STEVEN M DOTY  GEODATE 1 PAGENCOES  STIVER 7 STEVEN M DOTY  GEODATE 1 PAGENCOES  STR. 20 GOO3 1 CRIPP M. G. S DED. EXP.  GEODATE 1 PAGENCOES  STR. 20 GOO3 1 CRIPP M. G. S DED. EXP.  GEODATE 1 PAGENCOES  STR. 20 GOO3 1 CRIPP M. G. S DED. EXP.  GEODATE 1 PAGENCOES  STR. 20 GOO3 1 CRIPP M. G. S DED. EXP.  GEODATE 1 PAGENCOES  STR. 20 GOO3 1 CRIPP M. G. S DED. EXP.  GEODATE 1 PAGENCOES  STR. 20 GOO3 1 CRIPP M. 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| SILVER 06 PONTIAC G6 102/EUS 916 9124/9124 T83.  JOSUNDA IS 17:00 C5DBC06 0.00 MARR 2DDBC06  11:11 2DDBC06  5.5.11 @ 75046 MILES.  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This time extension does not affect the protections or remediates the buyer has under other laws.  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CHARGES 0.00  TOTAL CHARGES 233.19  LESS INSURANCE 5.10  SALES TAX 0.00  PLEASE PAY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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PLEASE PAY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | buyer, or if the war     | ranty ropa            | pire did not remedy the                 | seasts within 60 days   | t order to your complete                | MISC. 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JAN 1 1 2007

01/07/2008 10:41 530-722-1089 TAYLOR SERVICE PAGE 06/08 LABOR RECORD COMPLAINT: CAUSE: ELAPSED TIME Radio need to be sent our OPER TIME CLOCK COST NO OF#AM05 PM 1. 524 A ON TOMOS ENTO OFF JONOS PM12 ENG BOMOY. NO OFF JANLO PM 1 ON JAMLO PH 1 KONTHER 66 ON LOT - ALL SAME OFFJAMLO PM 1 ON JAMLO PM 1 COMPLAINT: OFF-IONIO PM I CAUSE: t MY OEMAL NO OFF. CORRECTION: ON COMPLAINT: OFF CAUSE: ON OFF CORRECTION: ON OFF COMPLAINT: 1 ON CAUSE: OFF NO CORRECTION: OFF COMPLAINT ON CAUSE: OFF NO OFF CORRECTION: ON COMPLAINT: OFF CAUSE: ОN OFF CORRECTION: ON OFF ΦN OFF NO

PAGE 07/08

GM radios, clusters & accessories: Ford radios & accessories:

Heavy duty parts:

For invoice copies:

(800) 666-5469 FAX (800) 272-362 (800) 227-7234 FAX (800) 548-119

(800) 333-7976 FAX (800) 333-467

invoices@instrumentsales.com

6 FAX (800) 333-467 FAX (503) 286-307

Instruments Sales and Service, Inc.

Send payments to: ISS, 16427 NE Airport Way, Portland, OR 97230

FED ID# 93-107177

Bill To:

TAYLOR MOTORS INC PO BOX 492295 REDDING CA 96049-2295 Ship To:

Phone #:

530**-**222-**120**0

TAYLOR MOTORS INC. 2525 CHURN CREEK ROAD

REDDING CA 96002

| Invoice#                    | Invoice Date | Order#                                                      | Order Date | Cust#     | . Custon | ier PO#    | Terms  |        | Salesperson |     |
|-----------------------------|--------------|-------------------------------------------------------------|------------|-----------|----------|------------|--------|--------|-------------|-----|
|                             | 01/09/07     | 1245479                                                     | 01/09/07   |           | ľ        | 151315     |        |        |             | 43  |
| Comments                    |              |                                                             |            | Ship Via  |          |            | 1      |        | Operator    |     |
| MIKE-ANA                    |              | ,                                                           | _          |           | DAY      | B/W CHR    |        |        |             | AR  |
| Invoice #                   | U/M          |                                                             |            | 1         |          | Unit Price |        | Amount |             |     |
|                             |              |                                                             |            |           | ·—··     | -          |        |        |             |     |
| · 1                         | I S          | 15777349.<br>05-06 AFS C<br>CN<br>Gerial Numb<br>39WBC4M150 |            | ROME RING |          |            | 0.00   |        |             | .00 |
|                             |              | ORE CHARGE                                                  | •          |           | ٠.       |            | 450.00 |        |             |     |
| ,                           | ם            | Fotal Due                                                   | •          |           | •        |            |        |        |             | .00 |
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|                             |              |                                                             |            |           |          |            |        |        |             |     |
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|                             |              |                                                             | ·          |           |          |            |        | ,      | , many      |     |
| Special Notes<br>VIN #: 1G2 | ZH558164     |                                                             | RO #       | : 13280   |          | SERIAL     | #:     |        |             |     |
| Roleased By                 |              | , , , , , , , , , , , , , , , , , , ,                       | Date       | Rece      | ived By  |            |        |        |             |     |

Payable in US dollars only. \$5.00 net minimum invoice charge. Claims for shortages must be filed within 5 days of receipt. No materials are returnable without written permission of instrument Sales and Service, Inc. Authorized returns must be shipped with transportation charges prepaid. 15% handling charge will apply. A service charge of 1-1/2% per month, (18% per annum), will be charged on all past due accounts, or maximum allowed by taw. Claims for shortages must be made upon receipt of shipment accompanied by packing list. Our responsibility ceases upon delivery of goods to the carrier. Claims for loss or damage in transit must be filled by you with the carrier.

530-722-1089

www.taylormotorsredding.com TAYLOR MOTORS INC. 206003 13280 BUICK \* PONTIAC \* GMC TRUCK WARRANTY 2525 Churncreek Road · Redding, California 96002-1128 (530) 222-1200 BAR # A.C. 009835 EPA # CAD028948016 REDDING, CA PAGE 1 8 GMC HOME: BUS 23-356 57-372 40-494 CELL SERVICE ADVISOR: <u>18</u>7 STEVEN M DOTY COLOR MAKE/MODEL LICENSE MILEAGE IN / OUT TAG 06 PONTIAC G6 SILVER G2ZH558164 10534/10534 DEL. DATE PROMISED PO NO INV DATE EAYMENT <u>06.JUN06</u> 7:00 10JAN07 ο. Q Q WARR 11JAN07 A.O. OPENED OPTIONS: READY STK:206003 1) GMPP M.G. \$0 DED. 6.6.11 @ 75046 MILES. 11:51 O5JANO7 12:33 11JAN07 LINE OPCODE TECH TYPE HOURS LIST NET TOTAL A CD PLAYER DISPLAYS ERROR. CAUSE: R0760 RADIO, REMOVE AND REPL 120 WP 0.81 65.19 65.19 526 0.69 WP 55.88 55.88 6C PART#: COUNT: CLAIM TYPE: AUTH CODE: AV Ū TPARTS TLABOR MISC ADMIN ALLOWANCE WP INTERNAL FAILURE IN RADIO. REMOVE ORDER REPLACEMENT RADIO REINSTALL AND PROGRAM. COMP TOTALS 3120 14107 0 COST SALE δε\_ A buyer of this product in California has the right to have this product serviced or repaired during the warranty period. The warranty period will be extended for the number of whole days that the product has been out of the buyer's hands for warranty repairs. If a defect exists within the warranty period, the warranty will not expire until the defect has been fixed. The warranty period will also be extended if the warranty repairs have not been performed due to delays caused by circumstances beyond the control of the buyer, or if the warranty repairs did not ramedy the defect and the buyer notifies the manufacturer or seller of the failure of the repairs within 60 days after they were completed. If, after a reasonable number of attempts, the defect has not been fixed, the buyer may return this product for a replacement or a refund subject, in either case, to deduction of a reasonable charge for usage. This time extension does not affect the protections or remedies the buyer has under other laws. TOTALS DESCRIPTION Thank you for this LABOR AMOUNT 121.07 opportunity to serve PARTS AMOUNT 0.00 you. It is our aim to perform all the repairs GAS, OIL, LUBE 0 00 requested on this repair SUBLET AMOUNT O 00 order to your complete <u>20</u> MISC. CHARGES 0.0 satisfaction. If our TOTAL CHARGES service was satisfactory <u>41.07</u> tell your friends, if not, LESS INSURANCE 0.00 please tell us SALES TAX O. . 00 immediately. DEALER, GENERAL MANAGER OR AUTHORIZED PERSON PLEASE PAY (SIGNED) THIS AMOUNT 141.07 Thank you

01/07/2008 10:53 530-722-1089 TAYLOR SERVICE PAGE 02/11 LABOR RECORD COMPLAINT FIRST Problem now was OPER EMP. ELAPSED TIME TIME CLOCK COST NO. NO OFFEB19 PM 110 A, D+E CORRECTION: ON FEB19 PM 9483133 OFF COMPLAINT: 51400R QΝ SAUSE: ROOF 3 HADE RAIKES OFF ON CORRECTION (IGHTENED REAR OFF RETURES ON HEADLINER COMPLAINT: ÖN OFF FEB20 AM CAUSE SOLUTION ON FEB20 AM OFF ON COMPLAINT: OFF CAUSE: OΝ OFFFEB20 and CORRECTION: ON FEB20 Att OFF COMPLAINT CAUSE: ON. OFF ON CORRECTION: OFF COMPLAINT: ON CAUSE: OFF ON CORRECTION: OFF ON COMPLAINT: OFF CAUSE: ON OFF CORRECTION: ON OFF ON. OFF ОN FORMS + SUPPLIES CALL TOLL FREE 1-(800)-ADP-ADP TO REORDER # 6001971-17342

IN 04:21PM 2/20/07 OUT 05:16PM 2/19/07

ENTERPRISE RENT-A-CAR COMPANY OF SACRAMENTO 530-223-6400 2985 VICTOR AVE CA 96002-1426 3055 REDDING

D5767

RENTAL AGREEME

CA

PAGE 1 OF

24-HOUR DAY

RENTAL TYPE D

SOURCE GM3055 - 999

UNIT 1

UNIT # DESIGA

LIC#

MODEL HHR COLOR BLACK

12537 IN

OUT 🗀 12488

V# 3GNDA23D47S

RENTER REDDING LOCAL:

DR. LICENSE

EXPIRE 3/11/07 STATE CA HTWT

DÓB EYES

HAIR

S.S.# EMPLOYER

BILL TO Y CUST # 190106

TAYLOR MOTORS, INC. - SERVICE

ATTN: STEVE DOTY\*\* 2525 CHURN CREEK ROAD

REDDING

96002 530-222-1200

SALES TAX%

ADDITIONAL DRIVER

NO OTHER DRIVER PERMITTED

CLAIM INFO

POL/CLAIM/PO#

LNSURED

LOSS DATE

THEFT ACCIDENT

TYPE CAR :

SHOP TAYLOR MOTOR PHONE 530-222-1200 NAME STEVE

PERMISSION TO LEAVE STATE

YES ио ж

CUSTOMER SIGNATURE ON FILE

PAYMENT INFORMATION

HTUA AMOUNT PD.BY TYPE DATE

TOTAL CHARGES

DEPOSITS

REFUND

BILL TO CUST 190106

OPENED BY #335CZ KENNETH S LIPSK

CLOSED BY #335C% KENNETH S LIPSK

(H)

1 DAYS

34.50

34.5

SUMMARY OF CHARGES

MILES

150 MI FREE/DA

DAY = 24 HOUR PERIOD

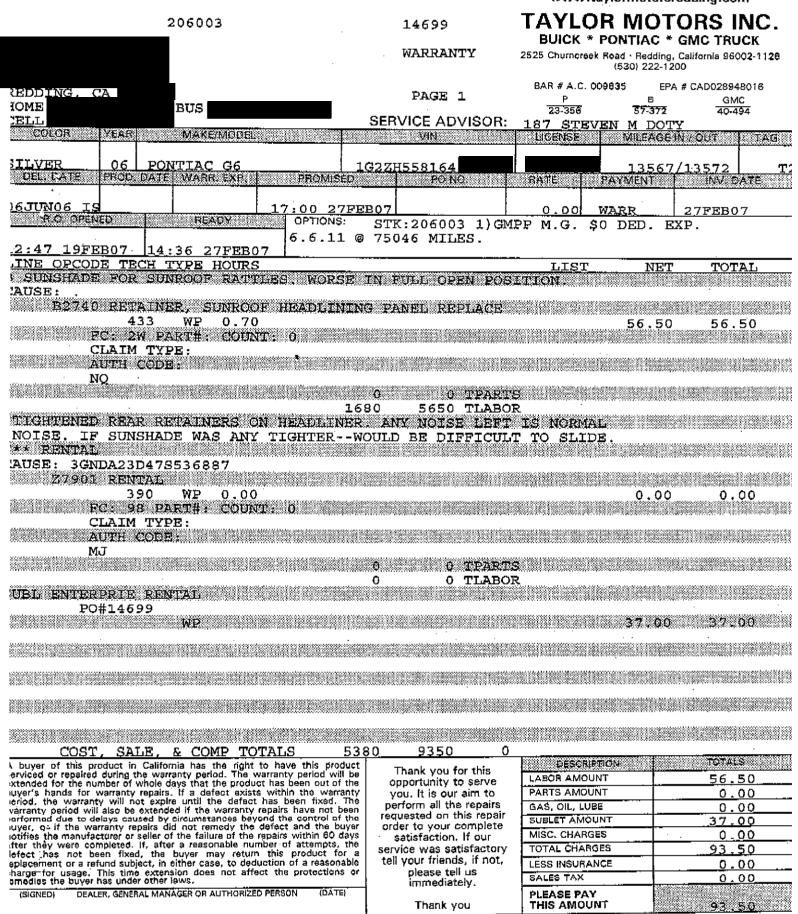
NO CHARGE

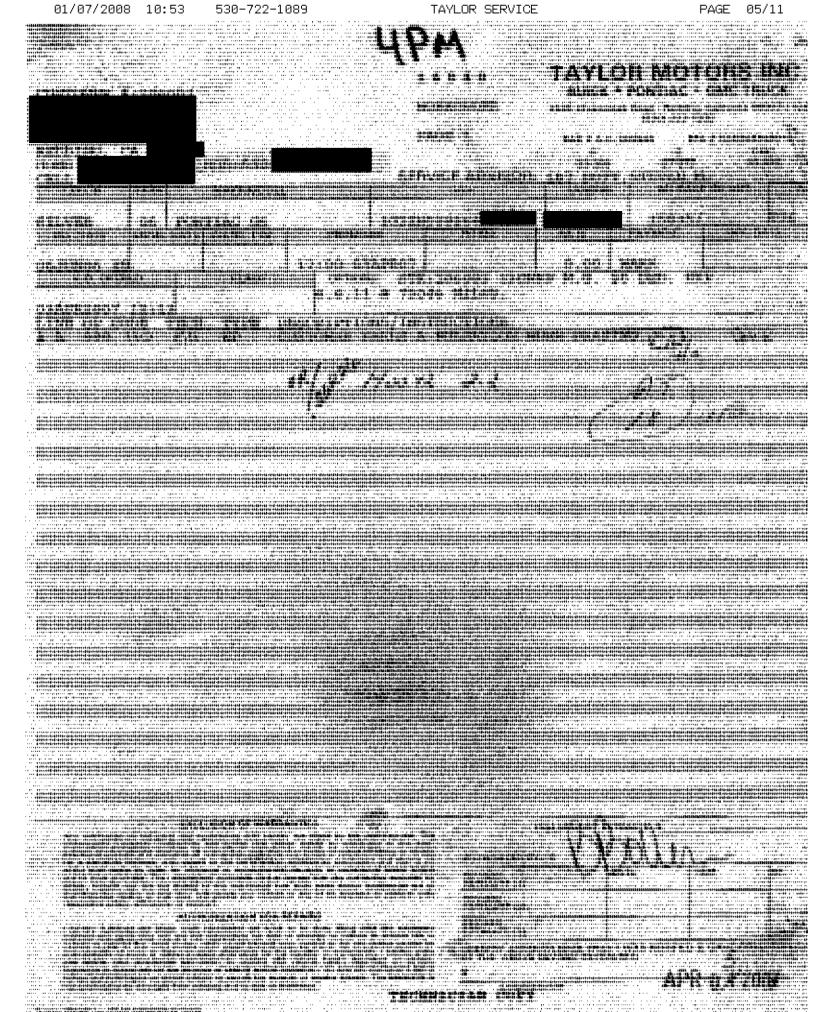
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CLOSED TICKET PAYMENT INFO

www.taylormotorsredding.com





| C                              | OMPLAINT SOFTECED FIT ROTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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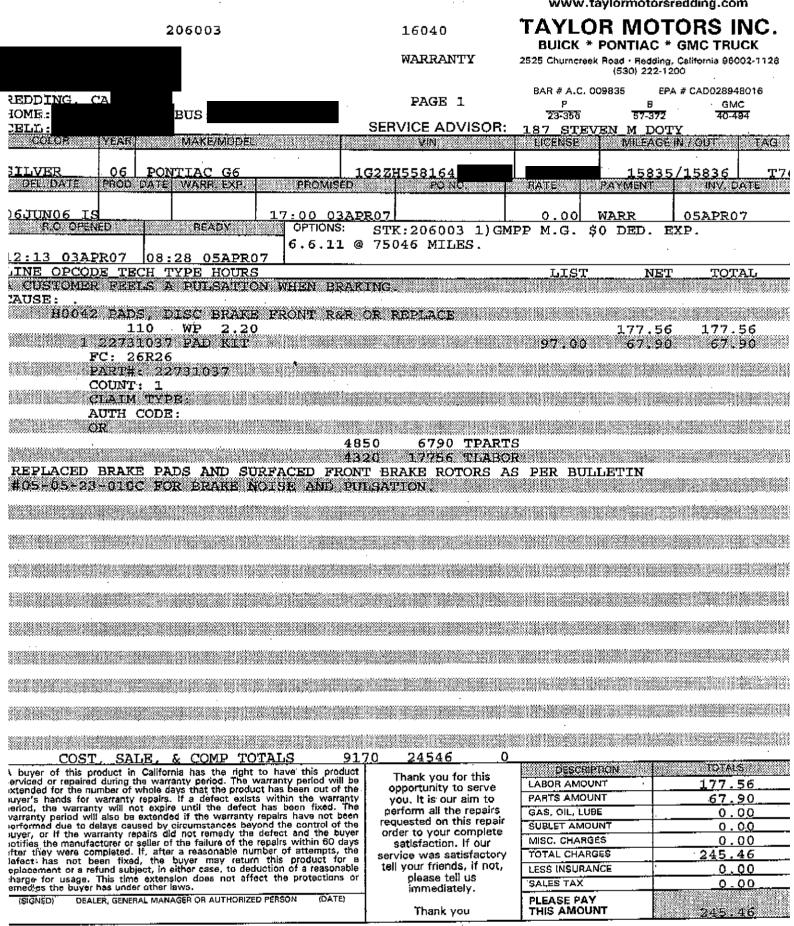
May, 2004

Bulletin No.: 00-05-22-002D

# ATTACHMENT FORM — GM BRAKE SERVICE REPAIR ORDER DOCUMENTATION FOR REQUIRED MEASUREMENTS

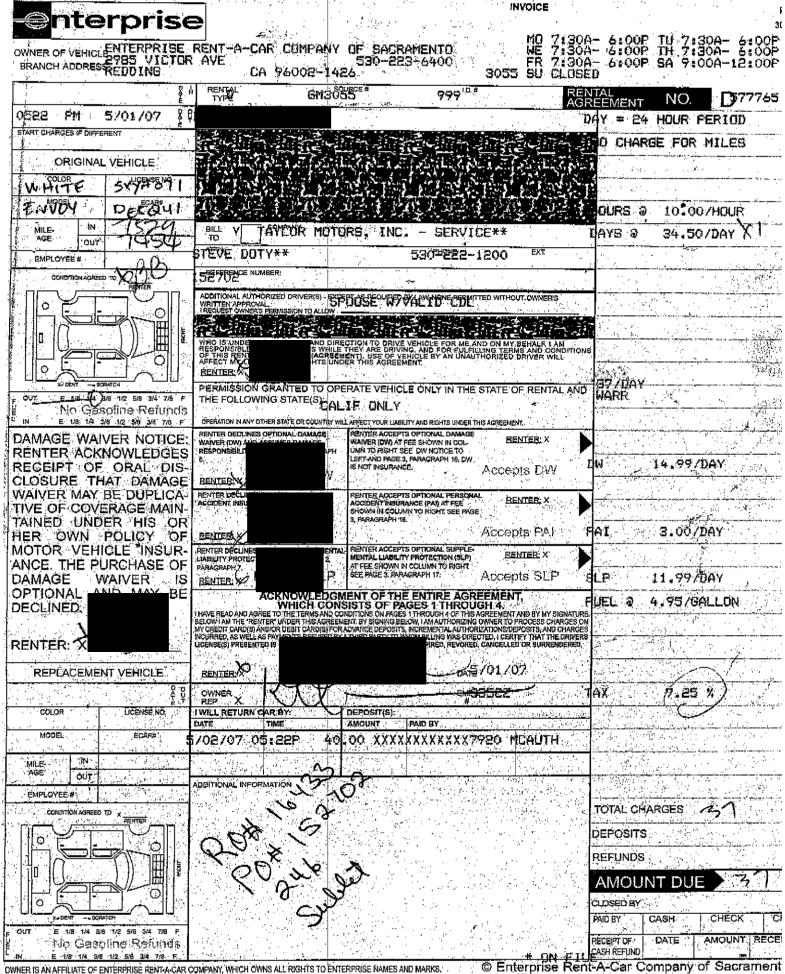
| PART MEASUREMENT/REPLACEMENT DOCUMENTATION                                                                                                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Dealer Code: 40,484                                                                                                                                                              |
| Repair Order Number: 16000                                                                                                                                                       |
| Front Rotor - ORIGINAL/REFINISHED thickness measurements (required when front labor operation is used):  - Thickness Specification (Min. Thickness/Discard Stamped on Rotor/SI): |
| Rear Rotor - ORIGINAL/REFINISHED thickness measurements (required when rear labor operation is used):                                                                            |
| Thickness Specification (Min. Thickness/Discard Stamped on Rotor/SI):     inch/mm (Circle One)                                                                                   |
| ORIGINAL measured thickness before refinish:     Left Rear (OLR) inch/mm                                                                                                         |
| REFINISHED measured thickness after refinish:     Left Rear (RLR) Inch/mm                                                                                                        |
| ्रहर्म १५००<br>Rotor Replacement:                                                                                                                                                |
| If rotors are replaced, you must indicate reason for replacement:                                                                                                                |
|                                                                                                                                                                                  |
|                                                                                                                                                                                  |
| Pad Replacement:                                                                                                                                                                 |
| If Pads are replaced, you must indicate reason for replacement:  Replaced Peos / 12) th Update PADS Per bulleting  05-05-23-010C                                                 |
|                                                                                                                                                                                  |
| LATERAL RUN OUT (LRO) DOCUMENTATION                                                                                                                                              |
| Front Rotor (required when front rotor labor operation is used):                                                                                                                 |
| LRO measurement after rotor refinish/replace:     Left Front (LLF) inch                                                                                                          |
| If above LRO greater than 0.050 mm (0.002 in), document correction plate part number used:  Left                                                                                 |
| Rear Rotor (required when rear rotor labor operation is used):                                                                                                                   |
| LRO measurement after rotor refinish/replace:     Left Rear (LLR) inch                                                                                                           |
| "'If above LRO greater than 0.050 mm (0.002 in), document correction plate part number used:  Left (Example: 801–03)                                                             |

www.taylormotorsredding.com



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                                                         |          | r in Grittonecou Dist<br>Sessi nos ropanios (1916)<br>Targorio Algorio (1916) |                                        |                     | 1946<br>1970<br>1970<br>1980 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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| DOX FORMS + SUPPLIES CALL TOLL FREE 1 (800) ADP ADP TO RECROES 45001971 17342                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          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## **Privileged and Confidential Information**

#### CASE ASSESSMENT

By: Brittany DeLamar State: CA

| Customer Name:                                                            | Service<br>71-589          | Request:<br>780985                   | BBB Case No.:<br>PGM0762111         |  |  |  |
|---------------------------------------------------------------------------|----------------------------|--------------------------------------|-------------------------------------|--|--|--|
| Vehicle ID No.:<br>1G2ZH558164                                            | In Service<br>Date: 6/6/06 | Vehicle is: New                      | BAC Code:<br>118973                 |  |  |  |
| Year, Make & Model: 2006 Pontiac G<br>Mileage at Time of BBB Filing 26400 |                            | Vehicle Purchased Uat odometer {odom | lsed on: {n/a or mm/dd/yy}<br>eter} |  |  |  |
| Lien holder: GMAC☐ Other⊠: U                                              | S Bank                     | Sale Type: Purchas {Type}            | se ⊠ Lease□ Other□ :                |  |  |  |
| DVM Name: Mark Erwin                                                      |                            | CAM Name: {Name}                     |                                     |  |  |  |
| Phone/Cell Number: 6502073529                                             |                            | Phone Number: {Phone Number}         |                                     |  |  |  |

## VEHICLE REPAIR HISTORY

Throughout the entire form, use an asterisk (\*) if day(s) out of service are already counted in another category.

PLACE A CHECKMARK IN THE BOX FOR THE MAJOR CONCERN BASED ON REPAIR ORDERS. USE "N/A" IF THERE WERE NO REPAIRS FOR THE COMPONENT GROUP.

<u>Days Out</u>: <u>Mileage</u>: <u>Description of Complaint and Repair Performed</u>:

## ☐ Sun visor mirror came off

RO #:

7665

Date:

7/18/06

| ☐ Start f | <u>ailure</u> |           |          |                                                                                               |
|-----------|---------------|-----------|----------|-----------------------------------------------------------------------------------------------|
| Date:     | <u>RO #:</u>  | Days Out: | Mileage: | Description of Complaint and Repair Performed:                                                |
| 12/27/07  | 24501         | 1         | 26405    | AT TIMES WHEN STARTING AND KEY IS RELEASED HAS EXTENDED CRANK. REFER TO BULLETIN 06-06-07-079 |
| 11/27/07  | 23666         | 2         | 25204    | ENGINE WILL NOT START AT TIMES AND HAS TO BE JUMPED.                                          |

RIGHT FRONT SUNVISOR MIRROR COVER CAME OFF. REPLACED

CORROSION AT POSITIVE TERMINAL OF BATTERY. BATTERY ONE

## ☐ Right Rear Passenger door molding

1

1528

| Date:    | RO #: | Days Out: | Mileage: | <u>Description of Complaint and Repair Performed:</u>                          |
|----------|-------|-----------|----------|--------------------------------------------------------------------------------|
| 10/12/07 | 22278 | *         | 23759    | BODY MOLDING ON RIGHT REAR DOOR LOOSE AND STICKING OUT. REPLACED BOTH MOLDINGS |

REPLACE.

## ☐ Fuel cap replacement-SES

|         |       |           | _        |                                                       |
|---------|-------|-----------|----------|-------------------------------------------------------|
| Date:   | RO #: | Days Out: | Mileage: | <b>Description of Complaint and Repair Performed:</b> |
| 9/18/06 | 9818  | 10        | 5527     | SES LIGHT ON. FUEL CAP REPLACE                        |

| 10/10/07   1868   23759   RATTLE FROM EBGINE AREA SITTING AT IDLE. RATTLE COMING FROM FLEX TUBE. OF HEAD PIPE, RE-PLACED FLEX TUBE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ☐ Rattle     | in steeri    | ng/engine   | <u>compartm</u> | <u>ent</u>                                                                                                                                                                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------|-------------|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FLEX TUBE OF HEAD PIPE, RE-PLACED FLEX TUBE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Date:        | RO #:        | Days Out:   | Mileage:        | Description of Complaint and Repair Performed:                                                                                                                               |
| LUBED AND RE-POSITIONED STEERING SHAFT.  12/5/06 12/331 15 9124 RATTLE IN FRONT END. ENGINE SNUBBERON ENGINE SHOCK RATTLING. SECURED LOSSE AIR DAM AND HEAT SHIELD. NOISE STILL PRESENT. INSPECTED FUTHER AND FOUND SHOCK ABSORBER CAUSING NOISE ORDERED AND REPLACED SHOCK ABSORBER.    CD Player failure                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 10/12/07     | 22278        | 12          | 23759           |                                                                                                                                                                              |
| SECURED LOOSE AIR DAM AND HEAT SHIELD. NOISE STILL PRESENT. INSPECTED FUTHER AND FOUND SHOCK ABSORBER.    CED Player failure                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 10/10/07     | 21868        | *           | 21868           |                                                                                                                                                                              |
| Date:         RO#:         Days Out:         Mileage:         Description of Complaint and Repair Performed:           1/5/07         13280         6         10534         CD PLAYER DISPLAYS ERROR. REMOVE AND REPLACE RADIO.           □ Sunror Rattling         Date:         RO#:         Days Out:         Mileage:         Description of Complaint and Repair Performed:           10/10/07         21868         1         23474         CUST STS CAR RATTLES FRONT TO BACK. SUNROOF RATTLING. FOUND PLASTIC GRILLE IN SUNROOF OUT of ADJUSTMENT. ALIGN SUNROOF. INSTALLED INSULATION AROUND WASHER PER BULLETIN 05-08-111-005A TIGHTENED SWAY BAR LINKS. LOWER AIR DEFLECTOR HAS FALLEN OFF. REPLACED           2/19/07         14699         9         13567         SUNSHAD FOR SUNROOF RATTLES WORSE WHEN IN FULL OPEN POSITION. TIGHTENED REAR RETAINERS ON HEADLINER. ANY NOISE LEFT NORMAL. IF SUNSHADE WAS ANY TIGHTER WOULD BE DIFFICULT TO SLIDE. RENTAL GIVEN.           □ Brakes         Date:         RO#:         Days Out:         Mileage:         Description of Complaint and Repair Performed:           4/17/07         16433         1         16478         BRAKES ARE LOCKING UP AND MAKING A GRINDING NOISE REFER TO RECENT REPAIR ON RO#16040. NO REPAIR MADE           4/3/07         15835         2         16040         PULSATION WHEN BRAKING. REPLACED BRAKE PADS AND RESURFACED FROMT ROTORS AS PER BULLETIN 05-05-23-010C FOR NOISE AND PULSATION.           □ OTHER/HVAC         Days O                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 12/5/06      | 12331        | 15          | 9124            | SECURED LOOSE AIR DAM AND HEAT SHIELD. NOISE STILL PRESENT. INSPECTED FUTHER AND FOUND SHOCK ABSORBER CAUSING NOISE                                                          |
| Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Fattling   Sunto  Fattling   Sunto  Fattling   Fattling   Sunto  Fattling   Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattling   Sunto  Fattl  | ☐ CD Pla     | ayer failu   | <u>ire</u>  |                 |                                                                                                                                                                              |
| Date: RO #: Days Out: Mileage: CUST STS CAR RATTLES FRONT TO BACK. SUNROOF RATTLING. FOUND PLASTIC GRILLE IN SUNROOF OUT OF ADJUSTMENT. ALIGN SUNROOF. INSTALLED INSULATION AROUND WASHER PER BULLETIN 05-08-111-005A TIGHTENED SWAY BAR LINKS. LOWER AIR DEFLECTOR HAS FALLEN OFF. REPLACED  2/19/07 14699 9 13567 SUNSHAD FOR SUNROOF RATTLES WORSE WHEN IN FULL OPEN POSITION. TIGHTENED REAR RETAINERS ON HEADLINER. ANY NOISE LEFT NORMAL. IF SUNSHADE WAS ANY TIGHTER WOULD BE DIFFICULT TO SLIDE. RENTAL GIVEN.  □ Brakes  Date: RO #: Days Out: Mileage: Description of Complaint and Repair Performed:  4/17/07 15835 2 16040 PULSATION WHEN BRAKING. REPLACED BRAKE PADS AND RESURFACED FRONT ROTORS AS PER BULLETIN 05-05-23-010C FOR NOISE AND PULSATION.  □ OTHER/HVAC  Date: RO #: Days Out: Mileage: Description of Complaint and Repair Performed:  12/27/07 24501 * 26405 HVAC FAN MAKES NOISE AND ON THE WAY TO WORK THIS AM CAR FILLED WITH SMOKE. ORDERED BLOWER MOTOR.  10/02/07 21902 8 23477 HVAC CONTROL FOR PASSENGER SIDE HAS DIM ILLUMINATION. REPLACE HEATER AND A/C CONTROL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date:        | <u>RO #:</u> | Days Out:   | Mileage:        | Description of Complaint and Repair Performed:                                                                                                                               |
| Days Out   Mileage:   Description of Complaint and Repair Performed:   Description O | 1/5/07       | 13280        | 6           | 10534           | CD PLAYER DISPLAYS ERROR. REMOVE AND REPLACE RADIO.                                                                                                                          |
| 10/10/07 21868 1 23474 CUST STS CAR RATTLES FRONT TO BACK. SUNROOF RATTLING. FOUND PLASTIC GRILLE IN SUNROOF OUT OF ADJUSTMENT. ALIGN SUNROOF. INSTALLED INSULATION AROUND WASHER PER BULLETIN 05-08-111-005A TIGHTENED SWAY BAR LINKS. LOWER AIR DEFLECTOR HAS FALLEN OFF. REPLACED  2/19/07 14699 9 13567 SUNSHAD FOR SUNROOF RATTLES WORSE WHEN IN FULL OPEN POSITION. TIGHTENED REAR RETAINERS ON HEADLINER. ANY NOISE LEFT NORMAL. IF SUNSHADE WAS ANY TIGHTER WOULD BE DIFFICULT TO SLIDE. RENTAL GIVEN.    Brakes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | ☐ Sunro      | of Rattlir   | <u>ng</u>   |                 |                                                                                                                                                                              |
| PLASTIC GRILLE IN SUNROOF OUT OF ADJUSTMENT. ALIGN SUNROOF. INSTALLED INSULATION AROUND WASHER PER BULLETIN 05-08-111-005A TIGHTENED SWAY BAR LINKS. LOWER AIR DEFLECTOR HAS FALLEN OFF. REPLACED  2/19/07 14699 9 13567 SUNSHAD FOR SUNROOF RATTLES WORSE WHEN IN FULL OPEN POSITION. TIGHTENED REAR RETAINERS ON HEADLINER. ANY NOISE LEFT NORMAL. IF SUNSHADE WAS ANY TIGHTER WOULD BE DIFFICULT TO SLIDE. RENTAL GIVEN.    Brakes    Date:   RO #:   Days Out:   Mileage:   Description of Complaint and Repair Performed:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Date:        | <u>RO #:</u> | Days Out:   | Mileage:        | Description of Complaint and Repair Performed:                                                                                                                               |
| POSITION. TIGHTENED REAR RETAINERS ON HEADLINER. ANY NOISE LEFT NORMAL. IF SUNSHADE WAS ANY TIGHTER WOULD BE DIFFICULT TO SLIDE. RENTAL GIVEN.    Brakes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 10/10/07     | 21868        | 1           | 23474           | PLASTIC GRILLE IN SUNROOF OUT OF ADJUSTMENT. ALIGN SUNROOF. INSTALLED INSULATION AROUND WASHER PER BULLETIN 05-08-111-005A TIGHTENED SWAY BAR LINKS. LOWER AIR DEFLECTOR HAS |
| Date:       RO #:       Days Out:       Mileage:       Description of Complaint and Repair Performed:         4/17/07       16433       1       16478       BRAKES ARE LOCKING UP AND MAKING A GRINDING NOISE REFER TO RECENT REPAIR ON RO#16040. NO REPAIR MADE         4/3/07       15835       2       16040       PULSATION WHEN BRAKING. REPLACED BRAKE PADS AND RESURFACED FRONT ROTORS AS PER BULLETIN 05-05-23-010C FOR NOISE AND PULSATION.         □ OTHER/HVAC       Days Out:       Mileage:       Description of Complaint and Repair Performed:         12/27/07       24501       *       26405       HVAC FAN MAKES NOISE AND ON THE WAY TO WORK THIS AM CAR FILLED WITH SMOKE. ORDERED BLOWER MOTOR.         10/02/07       21902       8       23477       HVAC CONTROL FOR PASSENGER SIDE HAS DIM ILLUMINATION. REPLACE HEATER AND A/C CONTROL.         □ Recall/Campaign (Not Related to Other Symptoms/Complaints)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2/19/07      | 14699        | 9           | 13567           | POSITION. TIGHTENED REAR RETAINERS ON HEADLINER. ANY NOISE LEFT NORMAL. IF SUNSHADE WAS ANY TIGHTER WOULD BE DIFFICULT                                                       |
| HA17/07 16433 1 16478 BRAKES ARE LOCKING UP AND MAKING A GRINDING NOISE REFER TO RECENT REPAIR ON RO#16040. NO REPAIR MADE  HA3/07 15835 2 16040 PULSATION WHEN BRAKING. REPLACED BRAKE PADS AND RESURFACED FRONT ROTORS AS PER BULLETIN 05-05-23-010C FOR NOISE AND PULSATION.  Date: RO#: Days Out: Mileage: Description of Complaint and Repair Performed:  12/27/07 24501 * 26405 HVAC FAN MAKES NOISE AND ON THE WAY TO WORK THIS AM CAR FILLED WITH SMOKE. ORDERED BLOWER MOTOR.  10/02/07 21902 8 23477 HVAC CONTROL FOR PASSENGER SIDE HAS DIM ILLUMINATION. REPLACE HEATER AND A/C CONTROL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ☐ Brakes     | <u>S</u>     |             |                 |                                                                                                                                                                              |
| RECENT REPAIR ON RO#16040. NO REPAIR MADE  4/3/07 15835 2 16040 PULSATION WHEN BRAKING. REPLACED BRAKE PADS AND RESURFACED FRONT ROTORS AS PER BULLETIN 05-05-23-010C FOR NOISE AND PULSATION.  Date: RO #: Days Out: Mileage: Description of Complaint and Repair Performed:  12/27/07 24501 * 26405 HVAC FAN MAKES NOISE AND ON THE WAY TO WORK THIS AM CAR FILLED WITH SMOKE. ORDERED BLOWER MOTOR.  10/02/07 21902 8 23477 HVAC CONTROL FOR PASSENGER SIDE HAS DIM ILLUMINATION. REPLACE HEATER AND A/C CONTROL.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <u>Date:</u> | <u>RO #:</u> | Days Out:   | Mileage:        | Description of Complaint and Repair Performed:                                                                                                                               |
| FRONT ROTORS AS PER BULLETIN 05-05-23-010C FOR NOISE AND PULSATION.    OTHER/HVAC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 4/17/07      | 16433        | 1           | 16478           |                                                                                                                                                                              |
| Date: RO #: Days Out: Mileage: Description of Complaint and Repair Performed:  12/27/07 24501 * 26405 HVAC FAN MAKES NOISE AND ON THE WAY TO WORK THIS AM CAR FILLED WITH SMOKE. ORDERED BLOWER MOTOR.  10/02/07 21902 8 23477 HVAC CONTROL FOR PASSENGER SIDE HAS DIM ILLUMINATION. REPLACE HEATER AND A/C CONTROL.    Recall/Campaign (Not Related to Other Symptoms/Complaints)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 4/3/07       | 15835        | 2           | 16040           | FRONT ROTORS AS PER BULLETIN 05-05-23-010C FOR NOISE AND                                                                                                                     |
| 12/27/07 24501 * 26405 HVAC FAN MAKES NOISE AND ON THE WAY TO WORK THIS AM CAR FILLED WITH SMOKE. ORDERED BLOWER MOTOR.  10/02/07 21902 8 23477 HVAC CONTROL FOR PASSENGER SIDE HAS DIM ILLUMINATION. REPLACE HEATER AND A/C CONTROL.    Recall/Campaign (Not Related to Other Symptoms/Complaints)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ☐ OTHE       | R/HVAC       |             |                 |                                                                                                                                                                              |
| FILLED WITH SMOKE. ORDERED BLOWER MOTOR.  10/02/07 21902 8 23477 HVAC CONTROL FOR PASSENGER SIDE HAS DIM ILLUMINATION. REPLACE HEATER AND A/C CONTROL.  Recall/Campaign (Not Related to Other Symptoms/Complaints)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Date:        | <u>RO #:</u> | Days Out:   | Mileage:        | Description of Complaint and Repair Performed:                                                                                                                               |
| REPLACE HEATER AND A/C CONTROL.  Recall/Campaign (Not Related to Other Symptoms/Complaints)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 12/27/07     | 24501        | *           | 26405           |                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 10/02/07     | 21902        | 8           | 23477           |                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ☐ Recall     | /Campai      | gn (Not Rel | ated to O       | ther Symptoms/Complaints)                                                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Date:        | •            | •           |                 | • • •                                                                                                                                                                        |

# THE STATE LEMON LAW READS:

Days out of service: 67

Repairs {# of repair attempts}

Time period {# of months} / {# of miles}

Does Lemon Law state nonconformity must continue to exist? {Y or N}

If applicable, safety-related repairs 0

Safety-related time period {# of months} / {# of miles}

Number of repair attempts in the presumption period: {# of repair

attempts}

Total days out of service during the presumption period: {# of Days}
Total days out of service during customer's ownership: {# of Days}

# Vehicle Meets Presumption of Lemon Law YES or NO

## PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

### RECOMMENDATION AND RATIONALE

Reminder: Take into consideration 1) DVM/Svc Manager input 2) if there are any unrepaired defects, and 3) are the problems alone or cumulatively a "substantial impairment" of the vehicle's use, value or safety.

Cust sks:

DVM sts:

SVM sts:

**CRS Rationale:** 

| CRS FINAL OFFER: | {REPAIR/REP/TRADE}: | DATE: {Date}            | CUST {Accepted / Declined} |
|------------------|---------------------|-------------------------|----------------------------|
| Goodwill: {Type} |                     | Attorney Fees (if appli | cable): \${Amount}         |

| TEAM LEAD APPROVING: | {Name} | Date: {Date} |
|----------------------|--------|--------------|
|                      |        |              |

| COMPONENT             | DESCRIPTION                                                                                                                                                                                                                                                                                                                                      |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Axle                  | Includes all components related to the axle, differential, driveline, & rear end.                                                                                                                                                                                                                                                                |
| Body/ Trim            | All body panels & associated mechanical hardware, including sunroof and T-tops (no Paint issues). All interior or exterior mirrors, moldings, cup holders, weather strips, cloth & leather fabric, seats & associated hardware components.                                                                                                       |
| Brakes                | All mechanical, electrical, or fluid related components of the Brake system.                                                                                                                                                                                                                                                                     |
| Chassis               | All frame, bumper and hitch components.                                                                                                                                                                                                                                                                                                          |
| *Electrical           | Specific electrical components of a vehicle. All indicators that provide the driver with operating characteristics of a vehicle. All Electrical lights that illuminate. All radio, CD/DVD, navigation, video, speakers, reception/antenna related components. All battery, spark plug/wire, glow plug, starting or charging system components.   |
| Engine/Fuel & Exhaust | Internal and external mechanical components. Cooling system components including radiator, gaskets, thermostat, and water pump. All computers and sensors that affect or monitor engine operation. All air and fuel related components including tank, injectors, and lines. All exhaust related components, pipes, mufflers and cat converters. |
| Glass                 | All glass and window components.                                                                                                                                                                                                                                                                                                                 |
| HVAC                  | All components related to heating, air conditioning and temperature.                                                                                                                                                                                                                                                                             |
| Paint                 | All paint specific issues (Not metal related).                                                                                                                                                                                                                                                                                                   |
| Restraints            | All SIR, airbags and seatbelt issues.                                                                                                                                                                                                                                                                                                            |
| Steering              | All steering related components including steering wheel & key, column, rack and pinion, pump assembly and Quadrasteer.                                                                                                                                                                                                                          |
| Suspension            | All suspension related components including ball joints, shocks, struts, tie rods, wheel bearings and alignment issues.                                                                                                                                                                                                                          |
| Transmission          | All automatic & manual transmission, transfer case and 4 wheel drive component issues.                                                                                                                                                                                                                                                           |
| Wheels/Tires          | All wheel covers, rims, hub caps, lug nuts, tire jack, regular and spare tire.                                                                                                                                                                                                                                                                   |

<sup>\*</sup> SES light is to be captured under affected component above.

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Taylor Motors Inc. 2525 Churn Creek Rd Redding, CA 96002 530-222-1200 4-Jun-07



# Steve,

Here is a list of the current CD's that were left in my CD player when it was replaced. Any questions please feel free to call me @

# 2006 Pontiac G6 V6

| Carrie Underwood<br>Clay Walker<br>Chris Cagle<br>Akon<br>Gretchen Wilson | Some hearts Greatest hits Chris Cagle Konvicted On of the boys | 14.88<br>12.88<br>15.88<br>13.88<br>12.88 |
|---------------------------------------------------------------------------|----------------------------------------------------------------|-------------------------------------------|
| Ne-Yo                                                                     | Tax 7.25%                                                      | 13.88<br>84.28<br>රෝ<br>\$1 දැ            |



1470

### Tech2 Pass Thru: Final Instructions



Programming Complete.

# Warranty Claim Code

Record this code on the warranty repair order (if applicable).

# Post Programming Instructions:

If there are no Controller Specific Instructions, turn ignition off for 30 seconds to reset the controller.

# Controller Specific Instructions:

After programming, you must run "Setup SDM Primary Key in BCM" from the Tech

VIN: 16KFK13017J

Print

Cancel.



GM radios, clusters & accessories:

Ford radios & accessories: Heavy duty parts:

(800) 227-7234 FAX (800) 544-1; (800) 333-7976 FAX (800) 333-4t

invoices@instrumentsales.com

FA<del>3(\* (303</del>) 286-3(

Send payments to: ISS, 16427 NE Airport Way, Portland, OR 97230

For invoice copies:

FED ID# 93-10717

(800) 666-5469 FAX (800) 272-3(

Bill To:

TAYLOR MOTORS INC PO BOX 492295

REDDING CA 96049-2295

Ship To:

Phone #:

530~222~1200 \*

TAYLOR MOTORS INC. 2525 CHURN CREEK ROAD

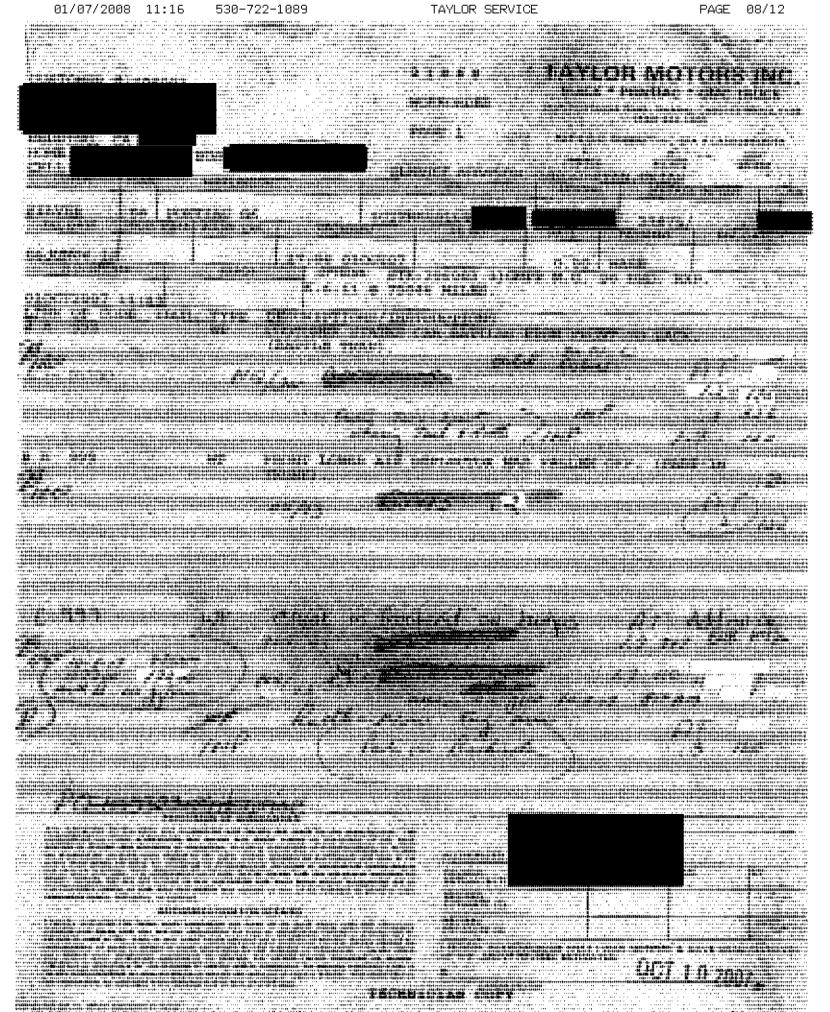
REDDING CA 96002

| •                           |              | •••               |               | 1 O V N    |        |            |        |          |             |     |
|-----------------------------|--------------|-------------------|---------------|------------|--------|------------|--------|----------|-------------|-----|
| Invoice #                   | Invoice Date |                   | Order Date    | Cust#      | Custom | er PO#     | Terms  |          | Salespersor |     |
|                             | 01/09/07     | 1245479           | 01/09/07      |            |        |            | i      |          |             | 4 3 |
| Comments                    |              |                   |               | Ship Via   |        |            |        |          | Operator    |     |
| MIKE-ANA                    |              |                   |               |            | DAY E  | B/W CHR    |        | <u> </u> |             | AF  |
| Invoice #                   | D/M          |                   |               | <u>· ·</u> |        | Unit Price |        | Amount   |             |     |
| · · . 1                     |              | 05-06 AFS C       | LK 6 CD CH    | ROME RING  |        |            | 0.00   |          | •           | .00 |
|                             |              | KN<br>Serial Numb | ers:          |            |        |            |        |          |             |     |
| •                           | ,            | CORE CHARGE       |               | ·          |        |            | 450.00 | *        |             |     |
| •                           |              | Total Due         |               |            |        |            |        |          |             | .00 |
|                             |              |                   | •             |            |        |            |        |          |             |     |
| . :                         |              |                   | €0            |            |        |            |        |          |             |     |
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|                             | -            |                   |               | 4.         |        |            |        |          |             |     |
| pecial Notes<br>VIN #: 1G2Z | H558164      |                   | RO #:         | 13280      | ,      | SERIAL     | #:     |          |             |     |
| eleased By                  |              |                   | Date          | Receiv     | ed Bv  |            |        |          |             |     |
|                             |              |                   |               | X          |        | 1          |        |          | ,           |     |

Payable in US dollars only. \$5.00 net minimum invoice charge. Claims for shortages must be filed within 5 days of receipt. No materials are returnable without written permission of Instrument Sales and Service, inc. Authorized returns must be shipped with transportation charges prepaid. 15% handling charge will apply. A service charge of 1-1/2% per month, (18% per annum), will be charged on all past due accounts, or maximum allowed by law. Claims for shortages must be made upon receipt of shipment accompanied by packing list. Our responsibility ceases upon delivery of goods to the carrier. Claims for loss or damage in transit must be filled by you with the carrier.

www.taylormotorsredding.com 206003 TAYLOR MOTORS INC. 18306 BUICK \* PONTIAC \* GMC TRUCK WARRANTY 2525 Churncrook Road · Redding, California 96002-1128 (530) 222-1200 REDDING. CA BAR # A.C. 009835 EPA # CAD028948016 PAGE 1 HOME: я GMÇ BUS 23-356 57-372 40-494 CELL SERVICE ADVISOR: 187 STEVEN Oca i M DOTY LICENSE MILEAGE IN CUIT TAG SILVER 06 PONTIAC G6 G2ZH558164 17470/17470 DEL DATE PO NO. FAYMENT INV. DATE **06JUN**06 IS :00 12JUN07 <u>0.00</u> WARR R O OPENED 14JUN07 READY OPTIONS: STK: 206003 1) GMPP M.G. \$0 DED. 6.6.11 @ 75046 MILES. <u> 15:15 12JUN07</u> 109:19 14JUN07 LINE OPCODE TECH TYPE HOURS LIST NET TOTAL PLEASE REPUND CUSTOMER FOR LOST CDIS THAT WERE STUCK INSIDE CD PLAYER ON RO#13280. EST.FOR COST OF REPLACEMENT ATTACHED. Tause: Retmeurse cust 90.39 when paid Z1241 CD REIMBURSEMENT 390 WP 0.20 FC: 98 PART#: COUNT: CLAIM TYPE: AUTH CODE: MJ 0 0 TPARTS 0 1614 TLABOR & COMP TOTALS 0 1614 0 A buyer of this product in California has the right to have this product terviced or repaired during the warranty period. The warranty period will be extended for the number of whole days that the product has been out of the ouyer's hands for warranty repairs. If a defect exists within the warranty period, the warranty will not expire until the defect has been fixed. The warranty period will also be extended if the warranty repairs have not been performed due to delays caused by circumstances beyond the control of the ouyer, or if the warranty repairs did not remedy the defect and the buyer totifies the manufacturer or seller of the fallure of the repairs within 60 days after they were completed. If, after a reasonable number of attempts, the lefect has not been fixed, the buyer may raturn this product for a eplacement or a refund subject, in either case, to deduction of a reasonable charge for usage. This time extension does not affect the protections or emedies the buyer has under other laws. TOTALS DESCRIPTION Thank you for this LABOR AMOUNT 16.**1**4 opportunity to serve you. It is our aim to PARTS AMOUNT 0.00 perform all the repairs GAS, OIL, LUBE 0.00 requested on this repair SUBLET AMOUNT QQorder to your complete MISC. CHARGES satisfaction. If our .00 0 service was satisfactory TOTAL CHARGES 6.14tell your friends, if not, LESS INSURANCE 0.00 please tell us emedies the buyor has under other laws. SALES TAX 0.00 immediately. DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (SIGNED) PLEASE PAY Thank you THIS AMOUNT

| *COMPLAINT                                                                    |                                       |                                                                                                                                                                                                                                  | Sasilvial To    | 192            | BO             | REC                                   | ОРГ   | 718-07                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
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| 1 P. W. C. C. C. C. C. C. C. C. C. C. C. C. C.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | YLOR SERVICE PAGE 09/12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
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| CORRECTION - Policie Editoriae                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | ØFE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| COMPLAINT CORPLE AND                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| CAUSE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | OFF 6C104 PM12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                          | www.taylormotorsredding.com                                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| 206003                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 21868                                                                    | TAYLOR MOTORS INC.                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | WARRANTY                                                                 | BUICK * PONTIAC * GMC TRUCK<br>2525 Chumcreek Road - Redding, California 96002-1128<br>(530) 222-1200 |
| IOME: BUS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | PAGE 1                                                                   | BAR # A.C. 009835                                                                                     |
| CGLOR YEAR MAKE/MODEL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | SERVICE ADVISOR:                                                         | 23-356 57-372 40-494<br>380 BRIAN OBRYAN                                                              |
| SILVER 06 PONTIAC G6 DEL DATE PRODUCATE WARR EXP PROMISED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1G2ZH558164<br>FO.No.                                                    | 23474/23474                                                                                           |
| )6JUN06 IS 17:00 050                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <u>CT07</u>                                                              | 0.00 WARR 100CT07                                                                                     |
| 1:43.010CT07 07:38 100CT07                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | STK:206003 1)GM<br>@ 75046 MILES.                                        | PP M.G. \$0 DED. EXP.                                                                                 |
| LINE OPCODE TECH TYPE HOURS CUSTOMER STATES CAR RATTLES FROM FROM FROM FROM FROM FROM FROM FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | ONT TO LOCAL STREET                                                      | LIST NET TOTAL                                                                                        |
| B2720 PANEL, SUNROOF ALIGN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                          | ion (RAP).                                                                                            |
| 120 WP 0.50 FC: 2W PART#: COUNT: 0 CLAIM TYPE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                          | 40.36 40.36                                                                                           |
| AUTH CODE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                          |                                                                                                       |
| 999 MECHANICAL REPAIRS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 0 0 TPARTS                                                               | S .                                                                                                   |
| SOUND PLACETIC GRILLIE IN SIMPORE ARE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 380 4036 TLABO                                                           | ž.                                                                                                    |
| NEEDED INSTALLED INSULATION AROUND P<br>TIGHTENED SWAYBAR LINKS.<br>FRONT FOWER AIR DEPLECTOR HAS FALLEN<br>PAUSE: BUILDING OF THE PAUSE.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                          |                                                                                                       |
| BO485 FRONT AIR DEFLECTOR REPLACE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                          | (U)ME)                                                                                                |
| 120 WP 0.20<br>FC: 93 PART#: COUNT: 0<br>CLAIM TYPE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                          | 16.14 16.14                                                                                           |
| AUTH CODE:<br>ON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          |                                                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 0 TPARTS<br>80 1614 TLABOR                                               |                                                                                                       |
| RESECURED LOWER DEFIECTOR ** CLUNK IN FRONTEND ON BUMPS.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                          |                                                                                                       |
| AUSE: INTER SHAPT AND STEERING COLUMN<br>E7680 COLUMN ASSEMBLY, STEERING R<br>447 WP 1.70                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | EPLACE                                                                   |                                                                                                       |
| 1 15926870 COLUMN<br>FC: 93                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          | 137.21 137.21<br>359.00 286.48 286.48                                                                 |
| PART#: 15926870<br>COUNT: 1<br>CLAIM_TYPE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                          |                                                                                                       |
| buyer of this product in California has the right to have this product inviced or repaired during the warranty period. The warranty period will be tended for the number of whole days that the product has been out of the injer's hands for warranty repairs. If a defect exists within the warranty rigid, the warranty will not expire until the defect has been fixed. The arranty period will also be extended if the warranty repairs have not been informed due to delays caused by circumstances beyond the control of the year, or if the warranty repairs did not remedy the defect and the buyer itifies the manufacturer or seller of the fallure of the repairs within 60 days ter they were completed. If, after a reasonable number of attempts, the fect has not been fixed, the buyer may return this product for a placement or a refund subject, in either case, to deduction of a reasonable arge, for usage. This time extension does not affect the protections or. | Thank you for this                                                       | DESCRIPTION TOTALS  LABOR AMOUNT                                                                      |
| yer's hands for warranty repairs, if a defect exists within the warranty yield, the warranty will not expire until the defect has been fixed. The arranty period will also be extended if the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | opportunity to serve<br>you. It is our aim to<br>perform all the repairs | PARTS AMOUNT                                                                                          |
| informed due to delays caused by circumstances beyond the control of the iver, or if the warranty repairs did not remedy the defect and the buyer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | requested on this repair<br>order to your complete                       | GAS, OIL, LUBE<br>SUBLET AMOUNT                                                                       |
| ter they were completed. If, after a reasonable number of attempts, the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | satisfaction. If our service was satisfactory                            | MISC. CHARGES                                                                                         |
| placement or a refund subject, in either case, to deduction of a reasonable arge, for usage. This time extension does not affect the protections or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | tell your friends, if not,                                               | TOTAL CHARGES LESS INSURANCE                                                                          |
| medies the buyer has under other laws. (SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | please tell us<br>immediately.                                           | SALES TAX                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Thank you                                                                | PLEASE PAY<br>THIS AMOUNT                                                                             |

www.taylormotorsredding.com 206003 TAYLOR MOTORS INC. 21868 BUICK \* PONTIAC \* GMC TRUCK WARRANTY 2525 Chumcreek Road · Redding, California 96002-1128 (530) 222-1200 THULLING. BAR # A.C. 009835 EPA # CAD028948016 PAGE 2 HOME BUS GMC <u>Cell</u> 23-356 57-372 40-494 SERVICE ADVISOR: e d 380 BRIAN OBRYAN MAKE/MODEL EICENSE MILEACEUN JOST TAG 06 PONTIAC G6 ILVER G2ZH558164 DELIDATE 23474/23474 FAYMENT INV ₽0 N INV. DATE 26JUNO6 IS <u>17:00 050CT07</u> 00 WARR READY 100CT07 OPTIONS: STK:206003 1)GMPP M.G. \$0 DED. 6.6.11 75046 MILES. 11:43 010CT07 07:38 100CT07 LINE OPCODE TECH TYPE HOURS LIST NET AUTH CODE: NO E7700 SHAFT, STEERING INTERMEDIATE REPLACE 110 WP 0.50 1 22687711 SHAFT KIT 40.36 40.36 131.64 FC: 93 131.64 PART#: 22687711 COUNT: 1 CLATM TYPE: AUTH CODE: B 29866 41812 TPARTS 8500 17757 TLABOR LUBED AND REPOSITIONED I-SHAFT PER BULLETIN, AL SO REPLACED STEERING COLUMN ASSEMBLY COMPLETE. LUBE SHAFT PER BULLETIN RATTLE THERE REPL ACE SHAFT SALE, & COMP TOTALS buyer of this product in California has the right to have this product erviced or repaired during the warranty period. The warranty period will be xtended for the number of whole days that the product has been out of the uyer's hands for warranty repairs. If a defect exists within the warranty eriod, the warranty will not expire until the defect has been fixed. The varranty period will also be extended if the warranty repairs have not been erformed due to delays caused by circumstances beyond the control of the uyer, or if the warranty repairs did not remedy the defect and the buyer otifies the manufacturer or seller of the failure of the repairs within 60 days feer they were completed. If, after a reasonable number of attempts, the effect has not been fixed, the buyer may return this product for a splicement or a refund subject, in either case, to deduction of a reasonable harge, for usage. This time extension does not affect the protections or medies the buyer has under other lews. 65219 DESCRIPTION TOTALS Thank you for this opportunity to serve LABOR AMOUNT <u>234.07</u> you. It is our aim to PARTS AMOUNT 418.12 perform all the repairs GAS, OIL, LUBE 0.00 requested on this repair SUBLET AMOUNT order to your complete 0..00satisfaction. If our MISC. CHARGES 0.00 service was satisfactory TOTAL CHARGES 652.19 tell your friends, if not, LESS INSURANCE 0.00 please tell us immediately. SALES TAX 0.00 (SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON PLEASE PAY Thank you THIS AMOUNT 652.19

#### STRAIGHT-PAYMENT-LEASE REPURCHASE WORKSHEET - BRC COMMON **File Number Customer Name** Worksheet Filled Out By: 71-589780985 **Tammie Nuber** Draft-Add question marks beside category (not in dollar fields) to indicate incomplete information **Vehicle VIN:** Date: 1G2ZH558164 February 19, 2008 **USAGE FORMULAS** STRAIGHT REPURCHASE - BASE PAYMENT (CA, FL & WV) OR LEASE REPURCHASE To calculate usage: 1 Base Price \$22,489.00 1 Down Pmt / Cap Cost Reduction \$0.00 \$0.00 2 Pmts (includes 1st month if lease) Use ONLY one of the 4 methods in this column or 2 Conversion / Upfit cost \$0.00 3 Reg./Lic./Title Fees \$217.00 3 Reg/Lic/Title Fees (leases only) \$0.00 follow applicable lemon law formula for your state 4 Document Fee \$45.00 4 Tax (leases only) \$0.00 \$0.00 5 Aftermarket Items A. USAGE USING L.L. FORMULA 5 Aftermarket Items \$0.00 6 Sales Tax 6 Base Price/Total Repurch Price \$0.00 \$1.633.72 6 Other-Explain \$0.00 7 Finance Charges \$1,571.59 7 Other-Explain Mileage \$0.00 8 Denominator 100,000 8 GMPP (\* only for WI) \$0.00 8 Other-Explain \$0.00 9 Usage **\$0.00** 9 Tire Fee \$8.75 9 Other-Explain \$0.00 \$25,965.06 10 Total Additions 10 10 Total Purchase Price \$0.00 **B. USAGE - NEGOTIATED** \$2.872.36 11 12 \* Usage/Depreciation \$2,872.36 12 \* Usage/Depreciation \$2,872.36 13 \$0.00 13 Damage 13 Damage \$0.00 \$0.00 14 Late charges 14 C. USAGE USING CENTS/MILE 14 Late charges \$0.00 15 Mileage \$0.00 15 Over-Allowance 15 Over-Allowance \$0.00 16 Cents per mile \$0.000 16 Negative Equity \$0.00 16 Negative Equity \$0.00 17 Usage **\$0.00** 17 Incentives \$1,000.00 17 Incentives \$0.00 18 18 Other-Explain \$0.00 18 Sec. Dep. (leases) if reimbursing above \$0.00 19 19 Other-Explain \$0.00 19 Extended Service Contract \$0.00 20 Other-Explain 20 D. USAGE-CALIFORNIA ONLY \$0.00 20 Gap Insurance \$0.00 21 Other-Explain \$0.00 21 Over Mileage Penalty 21 Base price section-Used when **NOT** financed. \$0.00 22 "Actual Price Paid" (Base) \$24.965.06 22 Total Deductions \$3.872.36 22 Total Deductions \$2,872,36 23 Mileage 24 Usage \$0.00 24 Repurchase Subtotal \$22,092.70 24 Total Refund to Customer -\$2,872.36 OR 25 25 Loan Payoff good thru 03/05/08 \$17,638.42 25 Dir Buyout (lease) or Loan Payoff \$0.00 26 Payment/Lease-Used when financed. \$4,454.28 26 (GMAC=DL quote) good thru xx/xx/xx 26 Total Refund to Customer 27 "Actual Price Paid" (Pmt/Lease) \$0.00 27 Attorney's Fees \$0.00 27 Attorney's Fees \$0.00 0 28 Total Repurchase \$22,092.70 28 Total Repurchase 28 Mileage -\$2,872.36 29 Any ext service contract (CA only) 29 NADA (Legal Only) \$0.00 29 NADA (Legal Only) \$0.00 30 Usage \$0.00 30 Estimated Auction Value \$0.00 30 Estimated Auction Value \$0.00 \$22,092.70 31 Projected Loss 31 Projected Loss -\$2,872.36 PURCHASE PRICE (before t/t/t) 22,489,00 TRADE ALLOWANCE \$ 12,000.00 PURCHASE PRICE 22,489.00 1,000.00 MSRP (FROM BARS INVOICE) 24,380.00 PAYOFF OF TRADE \$ 10,734.24 INCENTIVE\* (from BARS) DIFFERENCE (1,891.00)**DIFFERENCE** 1,265.76 OVERALLOWANCE if positive look for over allowance if negative=negative equity **ACTUAL PRICE** 21,489.00 TRADE ALLOWANCE \$ 12,000.00 \$ 12,000.00 ACV OF TRADE Do not include fuel fill credit **Authorized Signature DIFFERENCE** Date Include GM card points

ACV=actual cash value

Form Rev. 04/28/2006

### **Privileged and Confidential Information**

#### CASE ASSESSMENT

By: Brittany DeLamar State: CA

| Customer Name:                                                            | Service<br>71-589          | Request:<br>780985                | BBB Case No.:<br>PGM0762111               |
|---------------------------------------------------------------------------|----------------------------|-----------------------------------|-------------------------------------------|
| Vehicle ID No.:<br>1G2ZH558164                                            | In Service<br>Date: 6/6/06 | Vehicle is: New                   | BAC Code:<br>118973                       |
| Year, Make & Model: 2006 Pontiac C<br>Mileage at Time of BBB Filing 26400 |                            | Vehicle Purchase at odometer { od | ed Used on: {n/a or mm/dd/yy}<br>lometer} |
| Lien holder: GMAC☐ Other⊠: L                                              | JS Bank                    | Sale Type: Pure {Type}            | chase ⊠ Lease ☐ Other ☐:                  |
| DVM Name: Mark Erwin                                                      |                            | CAM Name: {Na                     |                                           |
| Phone/Cell Number: 650-207-3529                                           |                            | Phone Number:                     | {Phone Number}                            |

# VEHICLE REPAIR HISTORY

Throughout the entire form, use an asterisk (\*) if day(s) out of service are already counted in another category.

PLACE A CHECKMARK IN THE BOX FOR THE MAJOR CONCERN BASED ON REPAIR ORDERS. USE "N/A" IF THERE WERE NO REPAIRS FOR THE COMPONENT GROUP.

## ☐ Sun visor mirror came off

Days Out:

1528

1

RO #:

7665

Date:

7/18/06

| ☐ Start f | <u>ailure</u> |           |          |                                                                                               |
|-----------|---------------|-----------|----------|-----------------------------------------------------------------------------------------------|
| Date:     | RO #:         | Days Out: | Mileage: | Description of Complaint and Repair Performed:                                                |
| 12/27/07  | 24501         | 1         | 26405    | AT TIMES WHEN STARTING AND KEY IS RELEASED HAS EXTENDED CRANK. REFER TO BULLETIN 06-06-07-079 |
| 11/27/07  | 23666         | 1         | 25204    | ENGINE WILL NOT START AT TIMES AND HAS TO BE JUMPED.                                          |

Mileage: Description of Complaint and Repair Performed:

RIGHT FRONT SUNVISOR MIRROR COVER CAME OFF. REPLACED

CORROSION AT POSITIVE TERMINAL OF BATTERY. BATTERY ONE

# ☐ Right Rear Passenger door molding

| Date:    | RO #: | Days Out: | Mileage: | <u>Description of Complaint and Repair Performed:</u>                          |
|----------|-------|-----------|----------|--------------------------------------------------------------------------------|
| 10/12/07 | 22278 | *         | 23759    | BODY MOLDING ON RIGHT REAR DOOR LOOSE AND STICKING OUT. REPLACED BOTH MOLDINGS |

REPLACE.

#### ☐ Fuel cap replacement-SES

| Date:   | RO #: | Days Out: | Mileage: | <b>Description of Complaint and Repair Performed:</b> |
|---------|-------|-----------|----------|-------------------------------------------------------|
| 9/18/06 | 9818  | 9         | 5527     | SES LIGHT ON. FUEL CAP REPLACE                        |

| ☐ Rattle       | Rattle in steering/engine compartment |             |           |                                                                                                                                                                                                                                                               |  |  |
|----------------|---------------------------------------|-------------|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| Date:          | RO #:                                 | Days Out:   | Mileage:  | Description of Complaint and Repair Performed:                                                                                                                                                                                                                |  |  |
| 10/12/07       | 22278                                 | 11          | 23759     | RATTLE FROM EBGINE AREA SITTING AT IDLE. RATTLE COMING FROM FLEX TUBE OF HEAD PIPE, RE-PLACED FLEX TUBE.                                                                                                                                                      |  |  |
| 10/10/07       | 21868                                 | *           | 21868     | INNER SHAFT AND STEERING RATTLES. REPLACE STEERING COLUMN.<br>LUBED AND RE-POSITIONED STEERING SHAFT.                                                                                                                                                         |  |  |
| 12/5/06        | 12331                                 | 14          | 9124      | RATTLE IN FRONT END. ENGINE SNUBBERON ENGINE SHOCK RATTLING. SECURED LOOSE AIR DAM AND HEAT SHIELD. NOISE STILL PRESENT. INSPECTED FUTHER AND FOUND SHOCK ABSORBER CAUSING NOISE ORDERED AND REPLACED SHOCK ABSORBER.                                         |  |  |
| ☐ CD Pla       | ayer failu                            | <u>ire</u>  |           |                                                                                                                                                                                                                                                               |  |  |
| Date:          | RO #:                                 | Days Out:   | Mileage:  | Description of Complaint and Repair Performed:                                                                                                                                                                                                                |  |  |
| 1/5/07         | 13280                                 | 6           | 10534     | CD PLAYER DISPLAYS ERROR. REMOVE AND REPLACE RADIO.                                                                                                                                                                                                           |  |  |
| ☐ <u>Sunro</u> | of Rattlir                            | <u>ng</u>   |           |                                                                                                                                                                                                                                                               |  |  |
| Date:          | <u>RO #:</u>                          | Days Out:   | Mileage:  | Description of Complaint and Repair Performed:                                                                                                                                                                                                                |  |  |
| 1/10/07        | 21868                                 | 4           | 23474     | CUST STS CAR RATTLES FRONT TO BACK. SUNROOF RATTLING. FOUND PLASTIC GRILLE IN SUNROOF OUT OF ADJUSTMENT. ALIGN SUNROOF. INSTALLED INSULATION AROUND WASHER PER BULLETIN 05-08-111-005A TIGHTENED SWAY BAR LINKS. LOWER AIR DEFLECTOR HAS FALLEN OFF. REPLACED |  |  |
| 2/19/07        | 14699                                 | 2           | 13567     | SUN SHADE FOR SUNROOF RATTLES WORSE WHEN IN FULL OPEN POSITION. TIGHTENED REAR RETAINERS ON HEADLINER. ANY NOISE LEFT NORMAL. IF SUN SHADE WAS ANY TIGHTER WOULD BE DIFFICULT TO SLIDE. RENTAL GIVEN.                                                         |  |  |
| ☐ Brakes       | <u>S</u>                              |             |           |                                                                                                                                                                                                                                                               |  |  |
| Date:          | <u>RO #:</u>                          | Days Out:   | Mileage:  | Description of Complaint and Repair Performed:                                                                                                                                                                                                                |  |  |
| 4/17/07        | 16433                                 | 1           | 16478     | BRAKES ARE LOCKING UP AND MAKING A GRINDING NOISE REFER TO RECENT REPAIR ON RO#16040. NO REPAIR MADE                                                                                                                                                          |  |  |
| 4/3/07         | 16040                                 | 2           | 16040     | PULSATION WHEN BRAKING. REPLACED BRAKE PADS AND RESURFACED FRONT ROTORS AS PER BULLETIN 05-05-23-010C FOR NOISE AND PULSATION.                                                                                                                                |  |  |
| OTHE           | R/HVAC                                |             |           |                                                                                                                                                                                                                                                               |  |  |
| Date:          | <u>RO #:</u>                          | Days Out:   | Mileage:  | Description of Complaint and Repair Performed:                                                                                                                                                                                                                |  |  |
| 12/27/07       | 24501                                 | *           | 26405     | HVAC FAN MAKES NOISE AND ON THE WAY TO WORK THIS AM CAR FILLED WITH SMOKE. ORDERED BLOWER MOTOR.                                                                                                                                                              |  |  |
| 10/02/07       | 21902                                 | 8           | 23477     | HVAC CONTROL FOR PASSENGER SIDE HAS DIM ILLUMINATION. REPLACE HEATER AND A/C CONTROL.                                                                                                                                                                         |  |  |
| ☐ Recall       | /Campai                               | an (Not Rel | ated to O | ther Symptoms/Complaints)                                                                                                                                                                                                                                     |  |  |
| Date:          | RO #:                                 | Days Out:   | Mileage:  | Description of Complaint and Repair Performed:                                                                                                                                                                                                                |  |  |
|                |                                       |             |           |                                                                                                                                                                                                                                                               |  |  |

# THE STATE LEMON LAW READS:

Days out of service: 60

Repairs 4

Time period 18 / 18

Does Lemon Law state nonconformity must continue to exist? Y

If applicable, safety-related repairs N/A

Safety-related time period {# of months} / {# of miles}

Number of repair attempts in the presumption period: 1

Total days out of service during the presumption period: 35

Total days out of service during customer's ownership: 64

# Vehicle Meets Presumption of Lemon Law YES

# PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

Concern: {TEXT}

Date & Offer/Result: {TEXT}

## RECOMMENDATION AND RATIONALE

Reminder: Take into consideration 1) DVM/Svc Manager input 2) if there are any unrepaired defects, and 3) are the problems alone or cumulatively a "substantial impairment" of the vehicle's use, value or safety.

Cust sks: repurchase

DVM sts: can have cust get reim for current GMPP and reissue GMPP along with reim of veh payments.

SVM sts:

CRS Rationale: CRS will offer cust GMPP and reim of veh payments.

| CRS FINAL OFFER: | {REPAIR/REP/TRADE}: | DATE: {Date}            | CUST {Accepted / Declined} |  |
|------------------|---------------------|-------------------------|----------------------------|--|
| Goodwill: {Type} |                     | Attorney Fees (if appli | cable): \${Amount}         |  |

| TEAM LEAD APPROVING: | {Name}   | Date: {Date} |
|----------------------|----------|--------------|
| TEX WITE EXTENSION   | (Harrie) | Bate: (Bate) |

| COMPONENT             | DESCRIPTION                                                                                                                                                                                                                                                                                                                                      |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Axle                  | Includes all components related to the axle, differential, driveline, & rear end.                                                                                                                                                                                                                                                                |
| Body/ Trim            | All body panels & associated mechanical hardware, including sunroof and T-tops (no Paint issues). All interior or exterior mirrors, moldings, cup holders, weather strips, cloth & leather fabric, seats & associated hardware components.                                                                                                       |
| Brakes                | All mechanical, electrical, or fluid related components of the Brake system.                                                                                                                                                                                                                                                                     |
| Chassis               | All frame, bumper and hitch components.                                                                                                                                                                                                                                                                                                          |
| *Electrical           | Specific electrical components of a vehicle. All indicators that provide the driver with operating characteristics of a vehicle. All Electrical lights that illuminate. All radio, CD/DVD, navigation, video, speakers, reception/antenna related components. All battery, spark plug/wire, glow plug, starting or charging system components.   |
| Engine/Fuel & Exhaust | Internal and external mechanical components. Cooling system components including radiator, gaskets, thermostat, and water pump. All computers and sensors that affect or monitor engine operation. All air and fuel related components including tank, injectors, and lines. All exhaust related components, pipes, mufflers and cat converters. |
| Glass                 | All glass and window components.                                                                                                                                                                                                                                                                                                                 |
| HVAC                  | All components related to heating, air conditioning and temperature.                                                                                                                                                                                                                                                                             |
| Paint                 | All paint specific issues (Not metal related).                                                                                                                                                                                                                                                                                                   |
| Restraints            | All SIR, airbags and seatbelt issues.                                                                                                                                                                                                                                                                                                            |
| Steering              | All steering related components including steering wheel & key, column, rack and pinion, pump assembly and Quadrasteer.                                                                                                                                                                                                                          |
| Suspension            | All suspension related components including ball joints, shocks, struts, tie rods, wheel bearings and alignment issues.                                                                                                                                                                                                                          |
| Transmission          | All automatic & manual transmission, transfer case and 4 wheel drive component issues.                                                                                                                                                                                                                                                           |
| Wheels/Tires          | All wheel covers, rims, hub caps, lug nuts, tire jack, regular and spare tire.                                                                                                                                                                                                                                                                   |

<sup>\*</sup> SES light is to be captured under affected component above.

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# **General Motors Business Resource Center**



To: Pat Alarcon

Company:

Fax: 866-278-1780

Phone:

From:

Pat Alarcon

Fax: 866-278-1780

Phone: 866-790-5600 ext. 11148

E-mail:

CC:

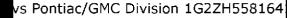
**NOTES:** 

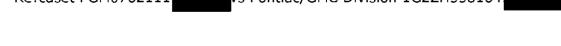
Fax Server 1/30/2008 6:45:34 PM PAGE 2/016 Fax Server



#### **BBB AUTO LINE**

January 25, 2008 Re:caset PGM0762111







Dear

I am writing to confirm the terms of the settlement between you and the manufacturer that resolves the BBB AUTO LINE claim you filed.

The terms of the settlement are as follows:

The Manufacturer has offered to Repurchase the Consumer's 2006 Pontiac/GMC G6. The consumer shall be entitled to the following collateral fees: Purchase price of vehicle; Sales tax; License fees; Document preparation fee; Registration fees; California Tire fee; and all incurred finance charges from date of purchase. The Consumer shall be charged a usage deduction taken from 16,040 miles, which was the first repair attempt. The consumer's total usage fee shall be \$2872.36. There shall also be a deduction of \$1,000.00 which was for an Manufacturer's rebate. The consumer has accepted this offer. GM's RVDC Dept. shall send the consumer a separate settlement letter with the total repurchase amounts. The repurchase shall be completed within 45 days from the date of this letter.

If your understanding of this settlement differs from what is written above, please call me immediately at 800.955.5100. If I do not hear from you within eight days from the date of this letter, it will be assumed the above terms of the settlement are correct.

I will follow up with you after the date for performance of the settlement to confirm that all required actions have been satisfactorily completed. Please let me know immediately if you believe the manufacturer has not satisfactorily performed the settlement. If that happens and you contact me within 120 days from the date of this letter, I will reopen your case based on the age and mileage of your vehicle at the time you filed your current claim. If you wish to reopen your case more than 120 days from the date of this letter, I will determine whether your claim is within BBB AUTO LINE's jurisdiction based on the age and mileage of your vehicle at that time.

I am happy we have been able to help you in reaching an agreeable resolution of you claim. Please contact me at 800.955.5100 if you have any questions.

Sincerely,

Rosa Tinoco at Extension 211

Council of Better Business Bureaus, Inc.

4200 Wilson Boulevard, Suite 800 · Arlington, VA · 22203-1838 · Phone 800.955.5100 · Fax: 703.247.9700

Fax Server

Fax Server

2006 G6 - GT SEDAN PONTIAC/GMC DIVISION 67U LIQUID SILVER METALLIC /V6G GENERAL MOTORS CORPORATION 19C EBONY 100 RENAISSANCE CENTER ORDER NO. JBZD2X/TRE STOCK NO. DETROIT MI 48243-1114 ADJUSTMENT INVOICE 2XD04475008 VIN 1G2 ZH55 81 641 \*\*\*\*\*\*\*\*\*16\*23356S \*\*\*\*\* MSRP INV AMT RETAIL - STOCK MODEL & FACTORY OPTIONS 2ZH69 G6 - GT SEDAN 22555.00 20863.38 INVOICE 06/13/05 AP3 REMOTE VEHICLE STARTER SYSTEM 150.00 124.50 SHIPPED 04/27/05 FR9 AXLE RATIO 3.29 N/C N/C EXP I/T 05/12/05 LX9 ENGINE, 3.5L V6 SFI

MX0 AUTOMATIC TRANSMISSION

PED PREMIUM VALUE PACKAGE INCLUDES 1550.00

N/C INT COM 06/23/05

0.00 PRC EFF 04/27/05

1286.50 KEYS G0715 G0715 \* (4) 17" CHROMETECH WHEELS WFP-S MTH OPT-2 \* AM/FM STEREO 6 DISC CD PLAYER CHG-TO 23-356 (REPLACES STD/OPT/PKG RADIO) \* SUNROOF, POWER TILT & SLIDE SHIP WT: 3422 R6J CUSTOMER DIALOG NETWORK 0.00 16.50 HP: 32.9 VK3 LICENSE PLATE BRACKET, FRONT N/C
YF5 50-STATE EMISSIONS N/C N/C GMS: 21863.23 N/C SUPPLR: 22843.70 1SZ PREMIUM PACKAGE DISCOUNT 500.00- 415.00- MRM: 24880.00 MEMO 1112.75 ADD

R9C

#### TO ADJ G6 SEDAN PRICING

| MSRP ADJUSTMENT   | 900.00- |
|-------------------|---------|
| DEALER INVOICE    | 678.95- |
| SPECIAL ACCT ADJ. | 49.50   |
| NET ADJUSTMENT    | 629.45- |
| TOTAL ADJUSTMENT  | 629.45- |

#### ADJUSTMENT TO OPEN ACCOUNT

| TOTAL MODEL & OPTIONS  | 23755.00 | 21875.88 | ACT 231 | 629.45- |
|------------------------|----------|----------|---------|---------|
| DESTINATION CHARGE     | 625.00   | 625.00   |         |         |
| LAM GROUP CONTRIBUTION |          | 237.55   |         |         |

TOTAL 24380.00 22738.43 629.45-

MEMO: TOTAL LESS HOLDBACK AND

APPROX WHOLESALE FINANCE CREDIT 21687.45

DEALER OF ADVERTISING MONIES, ALL OF WHICH MAY APPLY TO VEHICLE.

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Case Number: 145655

Originator Name: Patricia Alarcon 866-790-5600 11148 patricia\_alarcon@gmexpert.com

Created Date: 01/30/2008

Vehicle Info

\*VIN: 1G2ZH558164 MSRP: 24380.0 \*TAC #: N/A Year: 2006 Pontiac Model: G6 Make:

Vehicle Comments & TAC Explanation:

\*Date Reviewed with Customer: 01/25/2008 \*Repurchase Mileage: 16040 Original Purchase Date: 06/06/2006 \* Original Purchase Condition: New

Vehicle Owner(s)

**Entity Type** \* Names(s) on Title: \* Primary Owner:

Redding

\* Address

\* City \* Day Phone:

\* E-mail:

\* Title State: CA

\* State CA \* ZIP Code

\* Cell Phone

Account #:

\* Home Phone:

\* Fax Phone:

Repurchase

\* Reason brakes make noise when and pulsate, rattle from steering column

**UCC Codes** 

UCC1 UCC2 UCC3 UCC4 UCC5

H0113 H0110 M0110

Vehicle Lien Holder

Type of Secured Interest: Standard Lien \* Company:US Bank

Contact or Attention:

2750 Childress Dr Address

City Anderson CA **ZIP Code: 96007** State

Day Phone: 111-111-1111 Fax: E-mail:

Original Selling Dealer

118973 Dealer Name: TAYLOR MOTORS, INC. \* Dealer #:

Region: 10 District: 1251 (530) 222-1200

\* Phone: (530) 222-1263 Fax:

\* Contact Name: Brent Taylor \* Contact Title Sales Mgr E-Mail:

Repurchasing Dealer:

Repair

\* Contact Name: \* Contact Title:

Vehicle Location:

January 30, 2008 Page 1 of 2

5/016





Case Number: 145655

Originator Name: Patricia Alarcon 866-790-5600 11148 patricia\_alarcon@gmexpert.com

Created Date: 01/30/2008

**Transaction** Details:

Siebel Request #: 71-589780985

State: CA

ADR BBB Mediated Source:

Replacement VIN:

2008-03-17 Compliance Date:

MSRP:

0.0

Compliance Type: BBB Mediated

\* Disposition Auction

Order #:

Repurchase:

Process per settlement letter. DIr has also advised they do not have an ACV form and do not use deal recaps. Advised what was given for trade on contract was the ACV. \* Processing Instructions:

\* Type:

Straight Repurchase

Disposition:

Auction

\* Processing Instructions:

**Transaction Details** 

| <u>Group</u>          | Responsible    | <u>Formula</u> | Additional Explanation | <u>Value</u> |
|-----------------------|----------------|----------------|------------------------|--------------|
| Usage                 | Use Lemon Law  | NA             | Usage per Lemon Law    | 2872.3       |
| Sales Tax             | GM             | NA             | Sales Tax              | 6            |
| State/Gov Fees        | GM             | NA             | Fees                   | 0            |
| After Market Item(s)  | Does Not Apply | NA             | No Aftermarket Items   | 0            |
| Negative Equity `     | Customer       | NA             | Negative Equity        | 0            |
| Over Allowance Amount | Customer       | NA             | Ověr Allowancé         | 0            |
|                       |                |                |                        | 0            |

Page 2 of 2 January 30, 2008

Fax Server 1/30/2008 6:45:34 PM PAGE 6/016 Fax Server

# Overallowance/Negative Equity/Incentives Form (Non-Florida)

| Customer: | SR #: 71-589780985 | BBB#: PGM0762111 |
|-----------|--------------------|------------------|

This form may be used to identify possible Overallowance or Negative Equity and to determine any customer incentives which were paid but may not be easily identifiable on a Bill of Sale.

You must determine the TRUE purchase price of a vehicle and identify any Overallowance, Negative Equity, and/or Incentives prior to arbitration or voluntary repurchase.

#### Section 1

| Purchase Price                                    | 22489.00   |
|---------------------------------------------------|------------|
| (from Bill of Sale, before tax, tag, title, etc.) |            |
| MSRP                                              | - 24380.00 |
| (from BARS Invoice screen)                        |            |
| Subtract the MSRP from the Purchase Price         | =1891.00   |
| (If positive, look for Overallowance)             |            |

If the Purchase Price is greater than the MSRP but there was no trade-in, have the Dealer explain why the customer paid more than MSRP.

#### Section 2

| OECIIOTI Z                                                                                      |           |
|-------------------------------------------------------------------------------------------------|-----------|
| Trade Allowance                                                                                 | 12000.00  |
| (from Bill of Sale)                                                                             |           |
| Actual Cash Value (ACV)                                                                         | -12000.00 |
| (from ACV Statement)                                                                            |           |
| Subtract the ACV from the Trade Allowance                                                       | =0.00     |
| If positive, the Trade Allowance is higher than the ACV of the trade-in. This is Overallowance. | ļ         |

### Section 3

| Occilon 6                                                                                         |           |
|---------------------------------------------------------------------------------------------------|-----------|
| Trade Allowance                                                                                   | 12000.00  |
| (from Bill of Sale)                                                                               |           |
| Payoff on Trade                                                                                   | -10734.24 |
| (from Bill of Sale)                                                                               |           |
| Subtract the Payoff on Trade from the Trade Allowance                                             | =1265.76  |
| If negative, the Payoff on the Trade is higher that the Trade Allowance. This is Negative Equity. |           |

# Section 4

| Purchase Price                                                                                    | 22489.00  |
|---------------------------------------------------------------------------------------------------|-----------|
| (from Bill of Sale, before tax, tag, title, etc.)                                                 |           |
| Incentives not included in the Purchase Price                                                     | -1000.00  |
| (from BARS and Incentive Acknowledgement sheet)                                                   |           |
| Do not include fuel-fill credit or Dealer incentives. GM Card points must be included.            |           |
| Overallowance/Negative Equity                                                                     | -1265.76  |
| (use the Overallowance from Section 2 or the Negative Equity from Section 3, whichever is larger) |           |
| Subtract the Incentives and the Overallowance/Negative Equity from the Purchase                   | =20223.24 |
| Price. This is the Actual price of the vehicle that should be presented to the BBB on             |           |
| the Agreement to Arbitrate (ATA).                                                                 |           |

If Overallowance/Negative Equity and/or Incentives (not included in Purchase Price) are found, verify with Team Lead before submitting information to BBB.

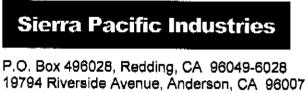
Fax Server

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Jan. 24. 2008 2:46PM SP SALES

No. 1884 P. 1

Fax Server



E-mail: <a href="mailto:bbollen@spi-ind.com">bbollen@spi-ind.com</a>
Phone: (530) 378-8233
Fax : (530) 378-8242



| To:                       | Rosa                | From:             |                 |                  |   |  |  |
|---------------------------|---------------------|-------------------|-----------------|------------------|---|--|--|
| Fax:                      | 703-247-9700        | Pages:            | Pages: 4        |                  |   |  |  |
| Phone: 800-955-5100 x 211 |                     | Date:             | Jan. 24, 2008   |                  | _ |  |  |
| Re:                       | PGM0762111          | CC:               | -               |                  |   |  |  |
| □ Urg                     | ent 🗆 For Review    | ☐ Please Comment  | ☐ Please Reply  | □ Please Recycle |   |  |  |
| Rosa                      | э,                  |                   | •               |                  |   |  |  |
| Attad<br>requ             | ched is a copy of m | y Drivers License | & Vehicle regis | tration per your |   |  |  |
| Any                       | questions please ca | all me @          |                 |                  |   |  |  |

Have wonderful day..

Fax Server 1/30/2008

Jan. 24. 2008 2:46PM SP SALES

1/30/2008 6:45:34 PM PAGE 8/016 Fax Server

No. 1884 P. 2



Fax Server 1/30/2008 6:45:34 PM PAGE 9/016 Fax Server

SP SALES Jan. 24. 2008 2:46PM

Burney State State State

No. 1884 P. 3

TO OBTAIN A TITLE OR REGISTRATION CARD, MAIL THE ATTACHED DOCUMENTS AND REQUESTED ITEMS TO: DMV, PO BOX 942869, SACRAMENTO, CA 94269-0001. PENALTIES ARE DUE IF RENEWAL FEES ARE PAID AFTER THE EXPIRATION DATE. PLANNED NON-OPERATION (PNO) REQUESTS MUST BE SUBMITTED WITHIN 90 DAYS OF THE EXPIRATION DATE (ON OR BEFORE THE EXPIRATION DATE FOR OFF-HIGHWAY VEHICLES) OR ALL FEES AND PENALTIES ARE DUE. FOR A DMV OFFICE APPOINTMENT, GO ONLINE AT WWW.DMV.CA.GOV OR CALL 1-800 777-0133.

CALIFORNIA OWNERSHIP CERTIFICATE OR APPLICATION FOR DUPLICATE WITH THE APPROPRIATE FEE.

A LIEN SATISFIED IS REQUIRED FROM GMAC

\*

551 110707 38 0036 F00 11 5UNX249 679

> REPORT OF DEPOSIT OF FEES PAGE 1 OF 1



INCOMPLETE APPLICATION \*\* SEE ABOVE \*\* THIS IS NOT AN OPERATING PERMIT \* TYPE VEH LICENSE NUMBER MAKE YR MODEL YR 1ST SOLD VLF CLASS TYPE LIC PONT 120 2006 2006 FD11 VEHICLE/VESSEL ID NUMBER BODY TYPE MODEL MO NY 1G2ZH558164 4D G PIC CC/ALCO TYPE VEHICLE/VESSEL USE DATE ISSUED DT FEE RECVD AUTOMOBILE 11/07/07 45 11/07/07 0 RDF REASONS: 3 I AMOUNT PAID 15.00 AMOUNT DUE AMOUNT RECVD 0 15.00 CASH : REDDING CHCK : 15.00 CA

CRDT :

PR EXP DATE: 06/08/2008

US BNK

0

2750 CHILDRESS DR

ANDERSON

96007 CA

551 38 0001500 0036 CS 110707

Fax Server 1/30/2008 6:45:34 PM PAGE 10/016 Fax Server

Jan. 24. 2008 2:46PM SP SALES

No. 1884 P. 4

### CALIFORNIA DEPARTMENT OF MOTOR VEHICLES \*\*\*CUSTOMER RECEIPT COPY\*\*\* REGISTRATION INFORMATION REQUEST 01/24/08

R62999335514A5UNX249

DATE: 01/24/08 TIME: 11:33

PENDING RECORD INSURANCE STATUS NOT CHECKED

REG VALID FROM: 06/08/07 TO 06/08/08

YRMD:06 MAKE:PONT BTM :4D VIN :1G2ZH558164 LIC#:

R/O :CAREY MICHAEL ASHLEY, 2958 NILOLET LN CITY:REDDING C.C.:45

ZIP#:96001

SOLD:00/00/06 RCID:06/12/07 OCID:07/02/06 LOCD:8

L/O :GMAC, PO BX 8128, COCKEYSVILLE CITY:MD ZIP :21030 TYPE:11 POWR:G VEH :12 BODY:0 CLAS:FD

REC STATUS:

RENEWAL NOTICE EXTRACTED 03/16/2007

06/24/06 SMOG DUE 06/08/12

RIP OFC:180 D:12/22/07 ID/S:270008 T:F00 V:0003000 R:ZZ

RT:

#### CLEARANCE INFORMATION RECORDS:

| OFFICE               | WORK DATE  | TECH/ID | SEQ #        | VALUE      | FICHE DATE  | TTC |
|----------------------|------------|---------|--------------|------------|-------------|-----|
| 551                  | . 06/22/06 | 06      | $0\bar{0}11$ | 00205.00   | 00/00/00    | A00 |
| 558                  | 06/12/07   | 05      | 0009         | 00191.00   | 00/00/00    | H00 |
| 180                  | 12/22/07   | 27      | 0008         | 00015.00   | 00/00/00    | RIP |
| 551                  | 11/07/07   | 38      | 0036         | 00015.00   | PRIOR SUSPE | NSE |
| 06/06/2006-ODOMETER: |            |         | 6 MILES      | ACTUAL MIL | EAGE        |     |

DATE: 01/24/08 TIME: 11:33

PENDING MASTER FILE RECORD

YRMD:06 MAKE:PONT BTM :4D VIN :1G2ZH558164109679 . LIC#:

CITY:REDDING C.C.:45 R/O : C,

ZIP#:96001

SOLD:00/00/06 RCID:12/22/07 LOCD:0

L/O :US BANK, PO BX 3427, OSHKOSH CITY:WI ZIP :54903

TYPE:11 POWR:G VEH :12 BODY:0 CLAS:FD

11/01/2007-ODOMETER:

25,620 MILES ACTUAL MILEAGE

\* \* \* END \* \* \*

5.00 551 012408 13 0020 VIR \$

Fax Server

#### Fax Server

# **Voluntary Repurchase**

BBB Case

Straight

**COMPLIANCE DATE - March 17, 2008** 

**ADR REQUEST NUMBER - 71-589780985** 

**CUSTOMER NAME -**



LAST SIX OF VIN -

ADR CRS - Pat Alarcon

EXT. - 11148

DVM - Mark Erwin

PHONE - 650-207-3529

DATE ACCEPTANCE RECEIVED - January 25, 2008

**NUMBER OF DAYS FOR COMPLIANCE - 45 days** 

TEAM LEAD'S SIGNATURE

ADR Exceptions that need to be paid i.e. over allowance and negative equity.

**COMMENTS/REASON FOR EXCEPTION:** 

File will be returned without all information above completed.

1/30/2008 6:45:34 PM 13/016 Fax Server Fax Server 01/11/2008 14:17 530-222-1263 TAYLOR MOTORS 02/04 E RATE TO THE TAXABLE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY Total Official Fees (A through E) 3. Amount Pald to Insurance Companies (Tota) premiums from Stetement contacting the collections 4. Smog Certification of Exemption Fee Paid to State 5. Subtotal (1 through 4) A. Agreed Trade in Value Yr 2005 Make TOYOTA \$ 12000 700 (A 6. Total Downpayment JTLK1334X50 Co-Buyer Signature Date. B. Less Prior Credit of Lease Balance OPTIONAL GAP CONTRACT A gap contract (debt cancella-tion contract) is not required to obtain credit and will not be C. Nat Trade-In (A less B) (Indicate it a negative number) provided unless you sign below and agree to pay the extra charge. If you choose to buy a gap contract, the charge is shown in item 11. See your gap contract for details on the protection it provides. It is a part of this contract. D., Deferred Downpayment 1000 00 (E) E Manufacturer's Rebate F. Other ... G. Cash Name of Gap Contract Total Downpayment (C through G): You want to buy a gap contract. (If negative, emer zero, an line bund enter the air ountiless than zero as a positive number on line if H above) Buyer X OPTIONAL SERVICE CONTRACT(S) You want to ourchase the service contract(s) written with the following SEILERASSISTED LOAN
BUYER MAY BE REQUIRED TO PLEDGE SECURITY FOR THE LOAN ANDS
WILL BE OBLIGATED FOR THE INSTALLMENT PAYMENTS ON BOTH THIS
RETAIL INSTALLMENT SALE CONTRACT AND THE LOAN. officially lies; for the term(s) shown below for the charge(s)

new motor vehicle the sale is not subject to a tee received by an autobroker if office unless the following box is checked: Finance Charge \$ Name of autobroker receiving fee. It. Payable In applicable: installments of \$ from this Loan is shown in Item 6D. NOTICE OF RESCISSION RIGHTS If Buyer and Co-Buyer sign here the provisions of the Rescission Rights section on the back giving the Seller the right to rescind if Seller is unable to assign this contract to a fina Co-Buyer X Buyer X OPTION: You pay no finance charge If the Amount Financed, item 7, is paid in full on or before

HOW THIS CONTRACT CAN BE CHANGED. This contract contains the softie agreement between you and us relating to this contract. Any change to the contract must be in writing and both you and we must sign it. No oral

Buyer Signs Co-Buyer Signs

. SELLER'S INITIALS Year

THE MINIMUM PUBLIC LIABILITY INSURANCE LIMITS PROVIDED IN LAW MUST BE MET BY EVERY PERSON WHO PURCHASES A VEHICLE. IF YOU ARE UNSURE WHETHER OR NOT YOUR CURRENT INSURANCE POLICY WILL COVER YOUR NEWLY ACQUIRED VEHICLE IN THE EVENT OF AN ACCIDENT, YOU SHOULD CONTACT YOUR INSURANCE AGENT.

WARNING:
YOUR PRESENT POLICY MAY NOT COVER COLLISION DAMAGE OR MAY NOT PROVIDE FOR FULL REPLACEMENT COSTS FOR THE VEHICLE BEING PURCHASED. IF YOU DO
NOT HAVE FULL COVERAGE, SUPPLEMENTAL COVERAGE FOR COLLISION DAMAGE MAY BE AVAILABLE TO YOU THROUGH YOUR INSURANCE AGENT OR THROUGH THE SELLING
DEALER. HOWEVER, UNLESS OTHERWISE SPECIFIED, THE COVERAGE YOU OBTAIN THROUGH THE DEALER PROTECTS ONLY THE DEALER, USUALLY UP TO THE AMOUNT OF
THE UNPAID BALANCE REMAINING AFTER THE VEHICLE HAS BEEN REPOSSESED AND SOLD.
FOR ADVICE ON FULL COVERAGE THAT WILL PROTECT YOU IN THE EVENT OF LOSS OR DAMAGE TO YOUR VEHICLE, YOU SHOULD CONTACT YOUR INSURANCE AGENT.

E UNDERSTANDS THESE PUBLIC LIABILITY TERMS AND CONDITIONS.

Hepresentations of Buyer: Seller has relied on the truth and accuracy of the information provided by you in connection with the Trade-In Vehicle. You represent that you have given a true payoff amount on the vehicle traded in. If the payoff amount is more than the amount shown above in item 6.B as "Prior Credit or Lease Balance," you must pay Seller the excess on demand. If the payoff amount is less than the amount shown above in item 6.B as "Prior Credit or Lease Balance," Seller will refund the difference to you.

Co-Buyer X

Buyer X

(1) Do not sign this agreement before you read if or if it contains any blank spaces to be filled in. (2) You are entitled to a completely filled In copy of this agreement. (3) You can prepay the full amount due under this agreement at any time. (4) If you default in the performance of your obligations under this agreement, the vehicle may be repossessed and you may be subject to suit and liability for the unpaid

indebtedness evidenced by this agreement. If you have a complaint concerning this sale, you should try to resolve it with the seller.

Complaints concerning unfair or deceptive practices or methods by the seller may be referred to the city attorney, the district attorney, or an investigator for the Department of Motor Vehicles, or any combination thereof. After this contract is aigned, the seller may not change the financing or payment terms unless you agree in writing to the change. You do not have to agree to any change,

and it is an unfair or decept

Buyer Signature X

Co-Buyer Signature X ....

The Annual Percentage Rate may be negotiable with the Seller. The Seller may assign this contract and retain its right to receive a part of the Finance Charge.

Guarantor's demand for reimbursement. Each Guarantor agrees to be liable even if we do one or more of the following: (1) give the Buyer more time to pay one or more payments; (2) give a full or partial release to any other Guarantor; (3) release any security; (4) eccept less from the Buyer than the total amount owing; or (5) otherwise reach a settlement relating to this contract or extend the contract. Each Guarantor acknowledges receipt of a completed copy of this contract and guaranty at the time of signing.

Guarantor walves notice of acceptance of this Guaranty, notice of the Buyer's non-payment, non-performance, and default; and notices of the amount owing at any time, and of any demands upon the Buyer.

OS/OS/OS/2006

Guarantor X

Date

Date

dress

0670672006

e By Y

. By X \_\_

Address

|

DEALER COPY -

FORM NO. 553-CA-ARB (REV. 10%) U.S. PATENT NO. DARG 782

2005 Reymolde and Reymolds to order www.myourno.com; 1-800-344-099; Int 1-800-301-0059

THE PRINTER MAKES NO WARRANTY, EXPRESS OF MPPLIED, AS TO CONTENT OF PTIMESS FOR PURPOSE OF THIS PORM, COMMITTED OWN LEGAL COUNTRY.

Fax Server 1/30/2008 6:45:34 PM PAGE 15/016 Fax Server 01/11/2008 14:17 530-222-1263 TAYLOR MOTORS PAGE 04/04 A STATE OF THE HUMMER (excludes Saturn) CUSTOMER NAME: /G /2 /Z /H /5 /5 /8 1/\_\_ Customer Incentive I assign the total amount of customer incentive(s) listed to the dealer named below and request that the available customer incentive(s) be applied: (a) \_\_\_\_ to the down payment of this vehicle, (b) \_\_\_ where permissible by law, as a price reduction (Bill of Sale indicates pre-incentive price, amount of incentive, and final price with incentive applied), or (c) \_\_\_\_ a check be issued in my name by Dealer named below: **Amount** Incentive Program Reference ፍርር \_CONQUEST\_REBATE---500 BONUS CASH Total Incentive Amount Received \$5 1000 2. Other Program Selection (Which may or may not be in lieu of customer incentive programs; for example, Division supported financing/leasing, etc..) 4.5% FOR 60 MONTHS a. I elect to receive in lieu of and/or b. I elect to receive - CUSTOMER AND DEALER ACKNOWLEDGMENT FOR INCENTIVES AND ONSTAR SERVICE -Vehicle Incentive Acknowledgment. I am the ultimate retail purchaser or lessee of the vehicle bearing this vehicle Terms and Conditions Acknowledgment. I acknowledge that I have received the Terms and Conditions under which the OnStar service in my vehicle is provided (copies are available in the vehicle glovebox, from the dealer, at the contacting OnStar as described below). I understand that in order to cancel the OnStar service in my ebicle, I must press the blue OnStar button in my vehicle or call 1.888.4OnStar (1.888.466.782/) A TTY 1.3/7.248.2080 and request that my Services be cancelled. 06 06 2006 Purchaser/Lessee Signature:, The undersigned person, as Dealer representative, certifies that the information of this application is true and correct, and the incentive(s) described in Item And the OnStar Terms and Conditions have been provided to the said purchaser/lessee who has taken delivery of the referenced unit through this dealership, and that properly completed accurate delivery data has been forwarded to General Motors or Saab Cars USA. Authorized Dealer Signature: Dealership Name:

Dealer Note: This is a required document and it must be completed, signed, and retained in EVERY DEAL FILE for new retail customers even if there are no incentives or rate support available. A copy of the completed form should be provided to the customer.

Fax Server 1/30/2008 6:45:34 PM PAGE 16/016 Fax Server

# ADR REPURCHASE CHECKLIST

# Once completed, this document should be attached to the SR.

| Cover sheet denoting a <b>Request</b> # and whether the case is a Voluntary or Mandatory Repurchase with information completed (on front of file) |
|---------------------------------------------------------------------------------------------------------------------------------------------------|
| PRA FORM (Voluntary Repurchase only)                                                                                                              |
| ☐ Both VINS on Trade Repurchase Or vehicle order number. Need order # or VIN on all cases except Mandates                                         |
| ☐ Invoice on original vehicle (from BARS)-old VIN & new VIN if a trade                                                                            |
| ☐ Incentive Acknowledgement Form                                                                                                                  |
| Signed Bill of Sale on original vehicle                                                                                                           |
| Copy of the title or registration, if unobtainable, then copy of Title Need current registration in CA                                            |
| Agreement to Arbitrate (For CA cases, attach the CCF)                                                                                             |
| Repair Orders (KY and FL only)                                                                                                                    |
| ☐ Invoice for any conversion package (if applicable)                                                                                              |
| Receipts for any after-market items (if applicable)                                                                                               |
| BBB ruling/lemon law ruling and/or BBB settlement letter (if applicable)                                                                          |
| Signed customer acceptance of decision for Mandatory Repurchases                                                                                  |
| ☐ Financial Institution information including: account #, phone # & Institution name                                                              |
| Overallowance/Incentives/Negative Equity Form                                                                                                     |
| ACV on trade-in documented                                                                                                                        |
| Copy of the Customer Claim Form (CCF) only on Mandates                                                                                            |
| Applicable Attorney Information: Firm Name, Contact Person, Federal Tax I.D., Phone #                                                             |













#### GENERAL MOTORS BUSINESS RESOURCE CENTER

#### **VIA FAX ONLY**

January 11, 2008

Brent Taylor Taylor Motors PO Box 492295 Redding, CA 96049

Re:

Siebel Request: 71-589780985 2006 Pontiac G6

VIN # 1G2ZH558164

Dear Mr. Taylor:

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
- Deal Recap

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Pat Alarcon BRC Customer Relationship Specialist Ph# 800-231-1841, prompt 9, prompt 5, extension 11148 FAX# 866-278-178



CHEVROLET PONTAC PALIFICIAL

February 20, 2008 TAYLOR MOTORS, INC. 2525 CHURN CREEK RD REDDING, CA 96002

Dealer Confirmation Letter-Straight

Subject: 2006 Pontiac G6

Customer

VIN: 1G2ZJI558164

Ref SR:71-589780985 V-145655

Dear Brent Taylor:

General Motors will issue a check in the amount of \$4,454.28 made payable to Elizabeth C Bollen. Once RVDC receives the completed repurchase paperwork, GM will issue a check in the amount of \$17,638.42 to US Bank. Please he sure to return the reputchase documents to General Motors RVDC immediately for completion of the repurchase. Do not wait for the final repair order. The repair order may be faxed once the repair has been completed.

Thank you for your cooperation.

Sincerety,

General Motors RVDC 2717 Schust Rd Saginaw, MJ 48603

"If you are aware of any modifications made to this vehicle, please contact your Repurchase Coordinator immediately. This vehicle must be restored to its original factory condition or the repurchase will be stopped and canceled.

If you are in agreement with this offer, please sign and date below and return this agreement to my attention at the following fax # 866-802.6668 by Friday February 22, 2008. If you have any questions you may reach me at 866-802-6625<u>866-8</u>02-6625.

TAYLOR MOTORS, ING. 418973 Management Agent's Signature and Title.

TAYLOR MOTORS, INC. 118973 Management Agent's Printed Name and Title.

\*145655\*

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

January 31, 2011



Service Request: 71-589818040 Customer Relationship Specialist: CJ

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$546.24.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530



CHECK NO.

DATE 01/09/08

XXXXXXXXXXXXXX546 DOLLARS

**AMOUNT** ....XXXXXXXXXXXXXX

North American Operations General Motors Corporation Disbursement Account

ITHACA MI

The Chase Manhattan Bank, N.A. Syracuse, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. BB 000000127 PAYMENT DATE VENDOR NAME 01/09/08 REGISTER NO DESCRIPTION DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT INVOICE DATE 01/08/08 | VM 1-9R6Z02 71-589818040.1-9R6Z02 .00 00.0000 546.24 546.24 1G1ZT54825F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT\OR QUESTIONS CALL 800-462-8782 H3

TOTAL

546.24

.00

546.24

## Edward Jones

Daniel R. De Jong Randy Lewis 320 E. Superior Street P.O. Box 365 Alma, Michigan 48801 LANSING MI HIS

15 DEC 2007 PM 2 T



Reimbursement Department DEC 19 2007 PO BOX 33170 Detroit, MI 48232-5170

48232+5170

Manadhahahhadhahadhadhahahhadh

## **CUSTOMER REIMBURSEMENT CLAIM FORM**

| This section to be completed by Claimant                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date Claim Submitted: 12-14-2067                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| 17-Digit Vehicle Identification Number (VIN): 1612T54825 F                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Mileage at Time of Repair: 50,000 Date of Repair: 517 200 7                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Claimant Name (please print):                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Street Address or PO Box Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| City: THACA State: MI ZIP Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Daytime Telephone Number (include Area Code):                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Evening Telephone Number (include Area Code):                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Amount of Reimbursement Requested: \$ 546.24                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| The following documentation must accompany this claim form.                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Original or clear copy of all receipts, invoices, and/or repair orders that show:                                                                                                                                                                                                                                                                                                                                                                                                |
| <ul> <li>The name and address of the person who paid for the repair.</li> <li>The Vehicle Identification Number (VIN) of the vehicle that was repaired.</li> <li>What problem occurred, what repair was done, when it was done, and who did it.</li> <li>The total cost of the repair expense that is being claimed.</li> <li>Payment for the repair in question and the date of payment. (copy of front and back of cancelled check, or copy of credit card receipt)</li> </ul> |
| My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.  Claimant's Signature:                                                                                                                                                                                                                                                                               |

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

#### **CUSTOMER REIMBURSEMENT PROCEDURE**

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

#### If your claim is:

- · Approved, you will receive a check,
- Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete the claim and offered the opportunity to resubmit the claim when the missing documentation is available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).









05/17/07

12/16/04 SELLING DEALER NO.

°05714/07

GALAXY SILV



CVCS74317

STOCK NO.

DELIVERY MÎLES

PRODUCTION DATE

**CHEVROLET - CADILLAC** 7400 ALGER ROAD ~ (989) 463-6026 ALMA, MICHIGAN 48801 a piace that you can count on

| USTOMER NO. 21385                                                                          | pus                                                                      | TIN MIDE                  | DLETON                              |                                   | °035                    |
|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|---------------------------|-------------------------------------|-----------------------------------|-------------------------|
|                                                                                            | . 70                                                                     | . 00                      | LICENSE NO.                         | MILEAGE                           | 50,000                  |
|                                                                                            | VEAR / 05/                                                               | MAKE / MODEL CHEVROLE     | T/MALIBU/                           | <br>4 DR                          |                         |
| ITHACA, MI                                                                                 | VEHICI                                                                   | I Z T                     | 5 4 8 2 5                           | F                                 |                         |
|                                                                                            | F.T.E.                                                                   |                           |                                     | P. O. NO.                         |                         |
|                                                                                            | COMM                                                                     |                           |                                     | L                                 |                         |
| IS INOPERATIVE.                                                                            | .ITY DIAG HOURS: 3<br>HICLE IS HARD TO STEER,                            | .20 TECH(S)<br>LIKE POWER | :6<br>STEERING                      |                                   | 224.00                  |
| SENSOR.                                                                                    | FAILURE CODE CO545-ST. W<br>NG COLUMN, NECC. TD TRAN<br>NS TO BE OK NOW. | •                         |                                     |                                   |                         |
| ARTSQTYFP-NUMBER<br>OB # 1 1 15926870                                                      | DESCRIPTION<br>COLUMN 6.51                                               | 8<br>8                    | UNIT                                | PRICE-<br>359.00<br>PARTS         | 359.00<br>359.00        |
|                                                                                            |                                                                          | JOB # 1                   | TOTAL LABOR &                       | PARTS                             | 583.00                  |
| ISCDESCRIF<br>OB # 1 GDISC 10*DISC                                                         | PTION                                                                    |                           | -CONTROL NO                         |                                   | -58.30                  |
| STIMATE  JSTOMER HEREBY ACKNOWLEDGES  ORIGINAL ESTIMATE OF ECHNICIAN CERTIFICATION         | RECEIVING                                                                |                           |                                     |                                   |                         |
| OTALS                                                                                      | DOUGLAS CAMP                                                             | BELL                      | M16212                              | 22                                |                         |
| HANK YOU FOR ALLOWING US THE<br>EHICLE. SHOULD YOU HAVE AN<br>EPAIRS PERFORMED. PLEASE CON | E OPPORTUNITY TO SERVICE<br>Y QUESTIONS REGARDING TH                     |                           | TOTAL LAB                           | 30R                               | 224.00                  |
| EFF VANDE GUCHTE - SERVICE A<br>USTIN MIDDLETON - SERVICE AL                               |                                                                          |                           | TOTAL MIS<br>TOTAL MIS<br>TOTAL TAX | SLET<br>D.G<br>SC CHG.<br>SC DISC | 0.00<br>-58.30<br>21.54 |
|                                                                                            |                                                                          |                           | TOTAL INV                           | OICE \$                           | 546.24                  |
| 3 040U F 3 0UFOV 5 200FF                                                                   | DYT CARR I 3 CHAROT                                                      | (                         |                                     |                                   |                         |
| ] CASH [ ] CHECK [ ] CREE<br>] GMPP/GMRP [ ] ADVANTAGE                                     | DIT CARD [ ] CHARGE                                                      | ,                         | / END                               | Calley.                           |                         |
| CUSTOMER SIGNATURE                                                                         | . 11111                                                                  |                           |                                     | ` ' ' • •                         | .()                     |
|                                                                                            |                                                                          |                           |                                     |                                   | /                       |
|                                                                                            |                                                                          |                           |                                     |                                   |                         |
|                                                                                            |                                                                          |                           |                                     |                                   | 1                       |

#### **STATE REG. NO. F 128513** FEDERAL I.D. NO. 38-2547319

CERTIFICATION ALL REPAIRS AND PARTS LISTED WERE FURNISHED IN COMPLIANCE WITH MICHIGAN AUTO REPAIR ACT. (P.A. 300)

REPAIRS PROPERLY COMPLETED AND CHECKED BY

583.00

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

\* MISC. SHOP SUPPLIES AND/OR EPA: A token charge equivalent of 10% or less of our labor charge, maximum of \$10.00, for supplies used in or on your vehicle. Applicable items are nuts, bolts, washers, tape, pins, solvents, tubricants, solder, window sealers, mats, towels, aero-sprays, shellac, rags, carburetor cleaner, battery cleaner, wire and etc. in accordance with EPA regulations, a hazardous waste disposal fee will be charged, where applicable. This fee is based upon the service operation performed in our shop and can vary depending upon the actual disposal waste created.

#### **IMPORTANT**

You may receive a questionaire from the manufacturer in the next few weeks. If for any reason you cannot grade us "Completely Satisfied", please contact ош Service Manager. Thank You,



**CHEVROLET - CADILLAC** (989) 463-6026

PAGE 1 OF 1

**CUSTOMER COPY** 

[ END OF INVOICE ] 03:55pm

JIM MARTIN CHEV-DLDS-CAD INC 7400 H ALGER ROAD ALMA MI 48801 (517) 463-6026

4:19 PM 05/17/07

VS SALE TERM# 0001

AMOUNT \$ 546.24

REF #005 AP 01595A BATCH #144 RD #74317

CUSTOMER COPY



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

January 31, 2011



Service Request: 71-589876895

Customer Relationship Specialist: Paula Miller

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the steering column that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$520.00.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Pontiac Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530

Č.

PINNACLE



CHECK NO.

Karly of the state of DATE DATE 01/09/08

××××520"DOLLARS

AMOUNT **\*\*\*\*\*\*\*\*\*\*\*\*520.00** 

North American Operations General Motors Corporation Disbursement Account

·84

The Chese Manhattan Bank, N.A. Syracuse, New York

AUDIT

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO CHECK NO. BB 000000233 PAYMENT DATE VENDOR NAME 01/09/08 REGISTER NO. INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET AMOUNT 01/08/08 71-589876895.1-9RBH7A 00.0000 520.00 520.00 1G2ZG528354 · (: ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3

**TOTAL** 

520.00

.00

520.00

Pinnacle, M.c

PIEDMONT TRIAD AREA NO TWO SEVEN FOUR 5 T 15 DEC 2007 PM



Reimbursement Department DEC 19 2007 P.O. Box 33170 Detroit, MI 48232-5170

4823245170

Mallalada Hadabbia Mallada Mamill

## **CUSTOMER REIMBURSEMENT CLAIM FORM**

| This section to be completed by Claimant                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Date Claim Submitted: June 10 Dec. 15, 2007                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 17-Digit Vehicle Identification Number (VIN): 16276528354                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Mileage at Time of Repair: 50943 Date of Repair: Tune 6,2007                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Claimant Name (please print):                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Street Address or PO Box Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| City: Pinnacle State: M.C. ZIP Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Daytime Telephone Number (include Area Code):                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Evening Telephone Number (include Area Code):                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Amount of Reimbursement Requested: \$ 520.00                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| The following documentation must accompany this claim form.                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Original or clear copy of all receipts, invoices, and/or repair orders that show:                                                                                                                                                                                                                                                                                                                                                                                                         |
| <ul> <li>The name and address of the person who paid for the repair.</li> <li>The Vehicle Identification Number (VIN) of the vehicle that was repaired.</li> <li>What problem occurred, what repair was done, when it was done, and who did it.</li> <li>The total cost of the repair expense that is being claimed.</li> <li>Payment for the repair in question and the date of payment.</li> <li>(copy of front and back of cancelled check, or copy of credit card receipt)</li> </ul> |
| My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense I incurred for the repair covered by this letter.                                                                                                                                                                                                                                                                                                               |
| Claimant's Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

#### **CUSTOMER REIMBURSEMENT PROCEDURE**

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

#### If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
  the claim and offered the opportunity to resubmit the claim when the missing documentation is
  available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Pontiac Customer Assistance Center at 1.800.620.7668 (TTY 1.800.833.7668).



PINNACLE, NO HOME B US

EMAIL:888432

Invoice #: 270035

Tag #: **T65** 

Customer #: 3253147

PONTIAC

Page 1 of 1

PATTERSON INCORPORATED

538 N. Andy Griffith Parkway P.O. Box 430 MOUNT AIRY, NC 27030

(336) 786-2181 (800) 680-6537

| COLOR            | YEAR      | M          | AKE/MODEL     | Auvi  | ISOF: 57 G// | INY DOLLYHIG |                    |                 |             |
|------------------|-----------|------------|---------------|-------|--------------|--------------|--------------------|-----------------|-------------|
| SILVER           | 05        |            | VTIAC G6      | 16    | 2ZG528354    | 4            | VSD-6416           | MILEAGE IN      | MILEAGE OUT |
| DEL DATE         | PROD DATE | WARR. EXP. | PROMISED      | PO NO | RATE S       | PAYMENT      | NV DATE            | <u> 1 50943</u> | 50943       |
| 05NOV04 D        |           |            | 17:00 12JUN07 |       | 0.00         | cous         |                    | R.O. OPENED     | READY       |
| OPTIONS: ENG:3.5 | Liter SFI |            |               |       |              |              | <u>  12JUN07  </u> | 06JUN07         | 12JUN07     |

Service

#### **PATTERSON** Mount Airy, NC 27030

PONTIAC \* BUICK CADILLAC \* GMC TRUCK 538 N. ANDY GRIFFITH PKWY (336) 786-2181

CHRYSLER \* DODGE \* JEEP 1994 ROCKFORD STREET P.O. BOX 1126 (336) 789-8105

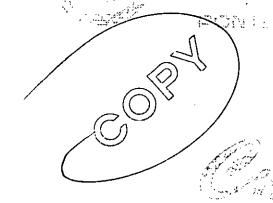
TOYOTA 508 N. ANDY GRIFFITH PKWY P.O. BOX 569 (336) 786-2118

PATTERSON COLLISION CENTER 1935 ROCKFORD STREET P.O. BOX 430 (336) 786-2119

LINE OPCODE TECH TYPE HOURS
A CUST STATES THAT TWHILE DRIVING THAT THE POWER STEERING WILL GO
COMPLETELY OUT NET TOTAL DIAG PERFORM ELECTRICAL AND/OR MECHANICAL DIAGNOSIS (INCLUDES HOOK UP OF TEST EQUIPMENT) 9996 REPLACE STEERING COLUMN ASSEMBLY 68.00 68.00 67 216.00 216.00 1 15926870 COLUMN 359.00 LOAN LOANER VEHICLE PROVIDED 359.00 67IRENT MISC RENTAL CAR STK #610020 (4 DAYS) (N/C)(N/C)

> OUR SERVICE DEPARTMENT SIS NOW OPEN ON SATURDAY'S FROM 8:00 AM TILL 1:00 PM

FREE TIRE-ROTATION WITH PURCHASE OF 4 TIRES!!



Customer Copy

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION I hereby authorize the repair work herein set forth to be done along with the necessary CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED material and agree that you are not responsible for loss or damage to vehicle or articles left in APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) STORES FOR THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE

HEREBY ACKNOWLEDGE RECEIPT OF A COPY HEREOF.

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON DATE

www.pattersonautos.com

|        | LABOR AMOUNT   |     | 284.00   |
|--------|----------------|-----|----------|
| D      | PARTS AMOUNT   |     | 359.00   |
| DESC   | GAS, OIL, LUBE |     | 0.00     |
|        | SUBLET AMOUNT  | 7   | 0.00     |
| R      | MISC. CHARGES  | ĬĬ  | 0.00     |
| P      | TOTAL CHARGES  | î   | 643.00   |
| į      | ADJUSTMENTS    | S   | 140.00   |
| O<br>N | SALES TAX      |     | 24.23    |
|        | PLEASE PAY     |     |          |
|        | THIS AMOUNT    | 383 | -7-1-1-1 |

THANK YOU!

#### Reprint

### PATTERSON PONTIAC BUCK G 538 N ANDY GRIFFITH PKWY MOUNT AIRY, NC 27030

BIN: 449280 Merchant: 352353862374 VNumber: 78166738 Store: 4301 Term: 0001

## SALES DRAFT

REF:

2144

DATE:

Jun 12, 2007 14:29:47

ACCT:

EXP: XX/XX

AP:

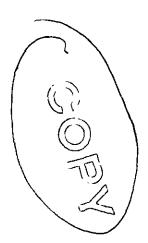
012668

NAME:

Clerk:

TOTAL \$520.00

CUSTOMER ACKNOWLEDGES RECEIPT
OF GOODS AND/OR SERVICES IN
THE AMOUNT OF THE TOTAL SHOWN
HEREON AND AGREES TO PERFORM
THE OBLIGATIONS SET FORTH BY
THE CUSTOMER'S AGREEMENT WITH
THE ISSUER



Thank you for using Visa



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

January 31, 2011

Sungate Design Group, PA
Attention:

Raleigh, NC

Service Request: 71-589880262

Customer Relationship Specialist: Beau Casset

Dear

Thank you for contacting us recently regarding the special coverage notice you received for your 2005 Chevrolet Malibu. We apologize for any inconvenience you have experienced as a result of this special coverage.

At Chevrolet, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and appearance. Unfortunately, there are times when we identify a motor vehicle defect and release a special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement on the instrument panel cluster that you had repaired and are happy to inform you that you are being reimbursed for the full amount of the repair. We have enclosed a check in the amount of \$596.63.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Specialists will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.mygmlink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

North American Operations
General Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530



CHECK NO.

DATE 01/09/08

(XXXXX596 DOLLARS

AMOUNT

North American Operations General Motors Corporation Disbursement Account

RALEIGH ∴NC ∜

, ii

The Chase Manhattan Bank, N.A. Syracuse, New York

AUDIT

North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530 DETACH BEFORE DEPOSITING CHECK VENDOR DUNS NO. CHECK NO. BB 000000489 PAYMENT DATE VENDOR NAME 01/09/08 REGISTER NO. DESCRIPTION INVOICE DATE DOC. REFERENCE NUMBER % DISC. INVOICE AMOUNT DISC. AMOUNT NET-AMOUNT 01/08/08 71-589880262.1-9RIY4Q .08 00.0000 596.63 25. 2 2. 8 596.63 1G1ZT64865F ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782 H3 TOTAL 596.63 .00 596.63





1 9 2301,

### **CUSTOMER REIMBURSEMENT CLAIM FORM**

| This section to be completed by Claimant                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|
| Date Claim Submitted: 12/14/07                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |  |  |  |  |
| 17-Digit Vehicle Identification Number (VIN): 1612Tは4865 F                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |
| Mileage at Time of Repair: 36,752 Date of Repair: 9 28 06                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |
| Claimant Name (please print):                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |
| Street Address or PO Box Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |  |  |  |  |  |
| City: Raleigh State: NC ZIP Code                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |  |  |  |  |  |
| Daytime Telephone Number (include Area Code):                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |
| Evening Telephone Number (include Area Code):                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |
| Amount of Reimbursement Requested: \$ 596.63                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |  |  |  |  |
| The following documentation must accompany this claim form.                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |  |  |  |  |
| Original or clear copy of all receipts, invoices, and/or repair orders that show:                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |
| <ul> <li>The name and address of the person who paid for the repair.</li> <li>The Vehicle Identification Number (VIN) of the vehicle that was repaired.</li> <li>What problem occurred, what repair was done, when it was done, and who did it.</li> <li>The total cost of the repair expense that is being claimed.</li> <li>Payment for the repair in question and the date of payment.</li> <li>(copy of front and back of cancelled check, or copy of credit card receipt)</li> </ul> |  |  |  |  |  |  |  |  |
| My signature to this document attests that all attached documents are genuine and I request reimbursement for the expense Lincurred for the tensir covered by this letter.                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |
| Claimant's Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |

Please mail this claim form and the required documents to:

Reimbursement Department P.O. Box 33170 Detroit, MI 48232-5170

Reimbursement questions should be directed to the following number: 1-800-204-0261

#### **CUSTOMER REIMBURSEMENT PROCEDURE**

If you have paid to have this condition corrected prior to this notification, you may be eligible to receive reimbursement.

Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

Your claim will be acted upon within 60 days of receipt.

#### If your claim is:

- · Approved, you will receive a check,
- · Denied, you will receive a letter with the reason(s) for the denial, or
- Incomplete, you will receive a letter identifying the documentation that is needed to complete
  the claim and offered the opportunity to resubmit the claim when the missing documentation is
  available.

Please follow the instructions on the Claim Form provided on the reverse side to file a claim for reimbursement. If you have any questions or need assistance, please contact the Chevrolet Customer Assistance Center at 1.800.630.2438 (TTY 1.800.833.2438).



THEFT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

I hereby authorize the above repair work to be done along with the necessary material, and hereby grant

you and/or your employees permission to operate the car or truck herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above car or truck to secure the amount of repairs thereto.

RALEIGH, NC

399650

\*INVOICE\*



CHEVROLET

1820 CAPITAL BLVD.

(919) 834-1100

PAGE 1

RALEIGH, NORTH CAROLINA 27604 .

www.bobbymurray.com

| HOME:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  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| R.O. OPEN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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MISC. CHARGES

TOTAL CHARGES

LESS INSURANCE SALES TAX

PLEASE PAY
THIS AMOUNT

0.00

25.13

596.63

15.00

571.50

PAY TO THE ORDER OF Bobby Murray Chevrolet

Five Hundred Ninety-Six and 63/100\*

Malibu Repairs

PAY TO THE ORDER OF Bobby Murray Chevrolet

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PAG 50

FOR DEPOSIT ONLY BORBY MURRAY CHEVROLET, INC. 624 037 249

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