

North American Operations

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



CHECK

No. [REDACTED]

50-937
213

DATE
01/22/08

*****668 DOLLARS

****08 CENTS

AMOUNT
*****668.08

PAY
TO THE
ORDER
OF

HOLLAND MI [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account

[Signature]
SIGNATURE

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



North American Operations

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

DETACH BEFORE DEPOSITING CHECK

VENDOR
DUNS NO. BB 000000258

1

CHECK NO. [REDACTED]

VENDOR NAME [REDACTED]

PAYMENT
DATE 01/22/08

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1612S52F25F [REDACTED]	01/21/08 71-593998	VM 1-9TTJV9 774.1-9TTJV9	00.0000	668.08	.00	668.08
ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782				M3		
TOTAL				668.08	.00	668.08

February 4, 2011

[REDACTED]
[REDACTED]
Holland, MI [REDACTED]

Service Request: 71-593998774
Customer Relationship Specialist: Jay Williams

Dear [REDACTED]

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 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 \$668.08.

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.mygmilink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

Holland, MI



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

DEC 21 2007

4823235170 8050



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 12/14/07

17-Digit Vehicle Identification Number (VIN): 1G1Z352F25F [REDACTED]

Mileage at Time of Repair: 55,112 Date of Repair: ~~2/9/08~~ 10/25/07

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: Holland State: MI ZIP Code: [REDACTED]

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

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

Amount of Reimbursement Requested: \$ 668.08

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: [REDACTED]

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.

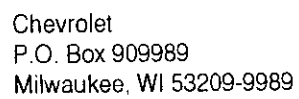
Your claim will be acted upon within 60 days of receipt.

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).





07126 1G1ZS52E25E [REDACTED] 13 0005931

HOLLAND, MI

ROBERT DeNOOYER CHEVROLET, Inc.

600 East 8th Street
HOLLAND, MI 49423
Phone: 616-396-2333

F-100150



CUSTOMER NO. 31709	ADVISOR CARMEN THOMPSON	TAG NO. 395	INVOICE DATE 10/25/07	INVOICE NO. CVCS122684
[REDACTED] HOLLAND, MI	LABOR RATE	LICENSE NO.	MILEAGE 55,112	COLOR NAVY BLUE/
	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4 DOOR SEDAN			DELIVERY DATE 02/09/05
	VEHICLE I.D. NO. 1 G 1 Z S 5 2 F 2 5 F			DELIVERY MILES
	F. T. E. NO.			SELLING DEALER NO.
BUSINESS PHONE		P. O. NO.		R. O. DATE 10/25/07
COMMENTS				

TOTALS

*
* [] CASH [] CHECK CK NO. [] *
* [] VISA [] MASTERCARD [] DISCOVER *
* [] AMER XPRESS [] OTHER [] CHARGE *

TOTAL LABOR.... 244.36
TOTAL PARTS.... 359.00
TOTAL SUBLET... 0.00
TOTAL G.O.G.... 10.00
TOTAL MISC CHG. 34.00
TOTAL MISC DISC -2.86
TOTAL TAX..... 23.58

TOTAL INVOICE \$ 668.08

CERTIFICATION
ALL REPAIRS AND PARTS LISTED WERE
FURNISHED IN COMPLIANCE WITH
MICHIGAN AUTO REPAIR ACT. (P.A. 300)
REPAIRS PROPERLY COMPLETED AND
CHECKED BY

x

PLEASE CALL AHEAD TO SCHEDULE YOUR NEXT SERVICE VISIT, SO WE
CAN ALLOW THE NECESSARY TIME TO SPEND WITH YOU AND PROPERLY
IDENTIFY ALL OF YOUR SERVICE NEEDS.
TELEPHONE (616)396-2333
WE WANT AND APPRECIATE YOUR BUSINESS!!!!!!

CUSTOMER SIGNATURE

ORIGINAL

**Thank you for
your Business!**

FACILITY NO. F-100150

ROBERT DeNOOYER CHEVROLET, Inc.

600 East 8th Street
HOLLAND, MI 49423
Phone: 616-396-2333

F-100150

CUSTOMER NO. 31709	ADVISOR CARMEN THOMPSON	TAG NO. 395	INVOICE DATE 10/25/07	INVOICE NO. CVCS122684
[REDACTED] HOLLAND, MI [REDACTED]	LABOR RATE	LICENSE NO.	MILEAGE 55,112	COLOR NAVY BLUE/
	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4 DOOR SEDAN			DELIVERY DATE 02/09/05
	VEHICLE I.D. NO. 1 G 1 Z S 5 2 F 2 5 F			SELLING DEALER NO.
	F. T. E. NO.			R. O. DATE 10/25/07
BUSINESS PHONE		COMMENTS		

JOB# 1 CHARGES

LABOR-----
J# 1 45CVZ STEERING/SUSPENSION TECH(S):274 241.50
CUST STATES THE P/S LIGHT IS COMING ON, AND
P/S WAS RESTRICTED ATLEAST ONE TIME
FOUND INTERNAL SHORT IN SENSOR IN STEERING COLUMN
CODES STORED(C0460)
REPLACED STEERING COLUMN ASSY WITH NEW
TEST DROVE VEH TO ASSURE REPAIR

PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----UNIT PRICE-----
1 15926870 COLUMN 6.518 359.00
TOTAL - PARTS 359.00

G.O.G. & SUPPLIES-----
FREIGHT (PARTS) 10.00
TOTAL - GOG 10.00

JOB# 1 TOTALS-----
LABOR 241.50
PARTS 359.00
G.O.G. 10.00

JOB# 2 CHARGES-----
J# 2 00CVZ1 VEHICLE INSPECTION TECH(S):274 2.86
CUSTOMER REQUESTS VEHICLE INSPECTION (NO CHARGE)
COMPLETED VEHICLE INSPECTION

MISC-----CODE-----DESCRIPTION-----CONTROL NO-----
SCC SAFETY CHECK CREDIT -2.86
TOTAL - MISC -2.86

JOB# 2 TOTALS-----
LABOR 2.86
MISC -2.86

JOB# 2 JOURNAL PREFIX CVCS JOB# 2 TOTAL 0.00

MISC-----CODE-----DESCRIPTION-----CONTROL NO-----
JOB # A SS SHOP SUPPLIES 34.00
TOTAL - MISC 34.00

ESTIMATE-----
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$105.00 (+TAX)

COMMENTS-----
#12

CERTIFICATION
ALL REPAIRS AND PARTS LISTED WERE
FURNISHED IN COMPLIANCE WITH
MICHIGAN AUTO REPAIR ACT. (P.A. 300)
REPAIRS PROPERLY COMPLETED AND
CHECKED BY
X

ORIGINAL

**Thank you for
your Business!**

DEBITOR CHECK
500 5TH STREET
ROLLING, ME 04023

TERMINAL I.D. 7437745

MERCHANT # 11000010000

VISA

SALE

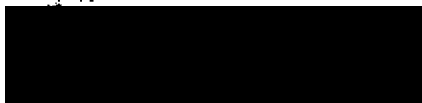
BATCH 000009	DATE: 12/28/04
DATE: OCT 25, 07	TIME: 12:41
REF: 725200000000	REF: 725200

TOTAL \$668.08

F NO BALANCE

GETTER 07

COPY

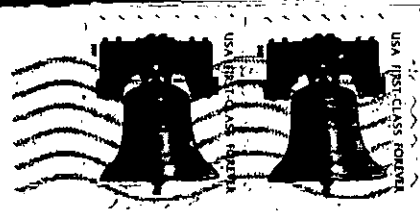


Harrisburg, Pa



HARRISBURG PA 171

08 JAN 2008 PM 1 T



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

JAN 10 2008

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

482325170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: JANUARY 7, 2008

17-Digit Vehicle Identification Number (VIN): 1G1ZT62895F

Mileage at Time of Repair: 47,679 Date of Repair: NOVEMBER 8, 2007

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: HARRISBURG State: PA ZIP Code: [REDACTED]

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

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

Amount of Reimbursement Requested: \$ 250.16

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: [REDACTED]

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).





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



SERVICE INVOICE

FED. I.D. #23-1610030

SO# 558110 DATE/TIME IN: 11/07/2007 5:58 DATE/TIME OUT: 11/08/2007 6:03
TAG# 4172 SA: TINA BERTOLET DOC COUNT: 1 PAGE: 1

05 1G1ZT62895F
2005 CHEVROLET MALIBU LS BEIGE
HARRISBURG PA ENGINE: 3.5L V6 LIC.NO:

MILES IN/OUT 47679 / 47680

RATE:

LINE 1 State inspection/Emission insp
TECH COMM: AI80330999
IM80307610

REPAIR 1 State Inspection/Emission Insp
OPCODE: SI/EI
PRIMARY TECH: 180

SALE TYPE: CUSTOMER PA \$55.55

REPAIR 2 Emission with State Inspection
OPCODE: EI/SI

SALE TYPE: CUSTOMER PA \$0.00

NET ITEM: M MCI EMISSION CALL

SALE TYPE
CUSTOMER PAY \$2.40

NET ITEM: S STATE INSPECTION STICKER

SALE TYPE
CUSTOMER PAY \$2.00

LINE TOTAL \$59.95

LINE 2 SI REPAIRS

REPAIR 1 Brake measurement 14/32"

OPCODE: BK14
PRIMARY TECH: 180
TECH COMM:

SALE TYPE: CUSTOMER PA \$0.00

REPAIR 2 Tread-depth 8/32 of an inch

OPCODE: TR8

SALE TYPE: CUSTOMER PA \$0.00

LINE 3 TIRE ROTATION

REPAIR 1 TIRE ROTATION

OPCODE: 61
PRIMARY TECH: 180

SALE TYPE: CUSTOMER PA \$16.95

LINE TOTAL \$16.95

LINE 4 C/S: CHECK STEERING THUMPING NOISE

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# 558110 DATE/TIME IN: 11/07/2007 5:58 DATE/TIME OUT: 11/08/2007 6:03
TAG# 4172 SA: TINA BERTOLET DOC COUNT: 1 PAGE: 2

05 1G1ZT62895F

REPAIR 1 REPLACE INTERMEDIATE SHAFT
OPCODE: CPA
PRIMARY TECH: 180

SALE TYPE: CUSTOMER PA \$87.00

PARTS	DESC	FP	QTY	PRICE	SALE TYPE	
GM	22687711 SHAFT KIT N	1		149.000	CUSTOMER PAY	\$149.00

LINE TOTAL \$236.00

LINE 5 C/S: RUNS ROUGH WHEN IN PARK

REPAIR 1 UPDATE PCM
OPCODE: CPA
PRIMARY TECH: 180

SALE TYPE: CUSTOMER PA \$69.60

LINE TOTAL \$69.60

LINE 6* COURTESY CHECKLIST

REPAIR 1 COURTESY CHECKLIST
OPCODE: CL
HRS: 20
PRIMARY TECH: 180

SALE TYPE: MECHANICAL INT

LINE 7* EXHAUST LEAK

REPAIR 1 EXHAUST SYSTEM (COMPLETE) - REPLACE SINGLE
OPCODE: L2904
HRS: 70
PRIMARY TECH: 180
WARR PARTS: 2

SALE TYPE: WARRANTY WTY

PARTS	DESC	FP	QTY	PRICE	SALE TYPE	
GM	15828657 MUFFLER	Y	1		WARRANTY	WTY
GM	22626929 GASKET	N	1		WARRANTY	WTY

LINE 8* C/S: FRONT AND REAR BRAKE PADS NEED REPLACED

REPAIR 1 REPLACE FRONT & REAR BRAKE PADS RESURFACE ROTORS
OPCODE: 97
PRIMARY TECH: 180

SALE TYPE: CUSTOMER PA \$88.80

PARTS	DESC	FP	QTY	PRICE	SALE TYPE	
GM	19137357 PAD KIT	N	1	74.000	CUSTOMER PAY	\$74.00

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

558110 DATE/TIME IN: 11/07/2007 5:58 DATE/TIME OUT: 11/08/2007 6:03
TAG# SA: TINA BERTOLET DOC COUNT: 1 PAGE: 3

05 1G1ZT62895F

PARTS	DESC	FP	QTY	PRICE	SALE TYPE	
GM	19137360 PAD KIT	N	1	74.000	CUSTOMER PAY	\$74.00

REPAIR 2 RESURFACE FRONT & REAR ROTORS
OPCODE: CPA

SALE TYPE: CUSTOMER PA \$189.90

LINE TOTAL \$426.70

COMMENTS: ERIE 2/28/08
P# Q022805502H

Following the line number denotes added operation.

THANK YOU FOR CHOOSING SUTLIFE CHEVROLET

CUSTOMER SIGNATURE _____

LABOR	\$507.80
LABOR DISCOUNT	\$50.79
PARTS	\$297.00
NET ITEMS	\$4.40
TAX (Pennsylvania St)	\$45.50
CUSTOMER TOTAL	\$803.91
PAYMENT (Customer)	\$803.91

COPY

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



SEARS SOLUTIONS MASTERCARD STATEMENT

Page 1 of 2

ACCOUNT SUMMARY		PAYMENT SUMMARY		BALANCE SUMMARY	
ACCOUNT NUMBER	7568	MINIMUM PAYMENT*	\$15.00	PREVIOUS BALANCE	\$0.00
TOTAL CREDIT LIMIT	\$2,500	PAYMENT DUE DATE	12/28/07	PAYMENTS/CREDITS	\$0.00
TOTAL CREDIT LIMIT AVAILABLE	\$1,013	CURRENT PAYMENT DUE*	\$15.00	PURCHASES/DEBITS	+ \$1,486.59
CASH CREDIT LIMIT †	\$1,000	* See About Your Payment on reverse for an explanation of these amounts.		LATE PAYMENT CHARGE	+ \$0.00
CASH LIMIT AVAILABLE	\$1,000			MISC. FINANCE CHARGE	+ \$0.00
STATEMENT DATE	12/03/07			FINANCE CHARGE	+ \$0.00
				NEW BALANCE	= \$1,486.59

† Cash Credit Limit is a portion of the Total Credit Limit

TRANSACTION SUMMARY						
(For additional transaction detail go to www.SearsSolutionsCards.com)						
TRANS DATE	POST DATE	TRANSACTION DESCRIPTION	PURCHASE TYPE	REFERENCE NUMBER	AMOUNT	
Sears / Kmart						
10/24	10/25	SEARS ROEBUCK 1224 HARRISBURG PA	Standard	MO072980090001020000001	\$77.48	
MasterCard						
11/04	11/05	GIANT FOOD #304 HARRISBURG PA		MT073090101000010212750	\$31.44	
11/04	11/06	LOWE'S #522 HARRISBURG PA		MT073100092000010318880	\$127.88	
11/06	11/07	GIANT FOOD #304 HARRISBURG PA		MT073110099000010250731	\$30.64	
11/06	11/08	HESS 38218 Q38 SWATARA PA		MT073120097000010219423	\$39.00	
11/08	11/09	SUTLIFF CHEVROLET HARRISBURG PA		MT073130098000010104349	\$803.91	
11/10	11/12	BON-TON-COLONIALPARK # HARRISBURG PA		MT073160094000011099842	\$140.76	
11/10	11/12	KARNS QUALITY FOODS MIDDLETOWN PA		MT073160094000011101009	\$30.67	
11/10	11/12	BLEACHER BUMS HARRISBURG PA		MT073160096000010291928	\$12.00	
11/11	11/12	KATHIE'S CHRISTMAS & C CAMP HILL PA		MT073160095000010190914	\$42.40	
11/11	11/12	BLEACHER BUMS CAMP HILL PA		MT073160096000010291929	\$106.00	
11/11	11/13	WEGMANS #45 SE1 MECHANICSBURG PA		MT073170082000010309668	\$19.25	
12/01	12/03	CHRISTMAS TREE HILL HERSHEY PA		MT073370101000010263640	\$10.59	
12/03	12/03	ACCOUNTSAVER PLUS 800-435-4693			\$14.57	

✓ **MAIL PAYMENTS TO:**
HSBC CARD SERVICES
PO BOX 17051
BALTIMORE MD 21297-1051

☎ **QUESTIONS?**
24-HOUR CUSTOMER SERVICE
ENGLISH/ESPAÑOL 1-800-567-1196
OUTSIDE USA COLLECT: 1-702-243-1597

✉ **MAIL INQUIRIES TO:**
HSBC CARD SERVICES
PO BOX 379
WOOD DALE IL 60191-0379

March 7, 2011

[REDACTED]
Harrisburg, PA [REDACTED]

Service Request: 71-597848927

Customer Relationship Specialist: Michael Brent

Dear [REDACTED]:

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. 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)

Revised 8/02/2007

Privileged and Confidential Information

CASE ASSESSMENT

By: Marion Lindsey State: Florida

Customer Name: [REDACTED]

Service Request: 71-
608249058

BBB Case No.:
PGM0835011

Vehicle ID No.:
1G2ZH15816 [REDACTED]

In Service
Date:
6/28/2006

Vehicle is: New

BAC Code:
130566

Year, Make & Model: Pontiac G6
Mileage at Time of BBB Filing 21,562

Vehicle Purchased Used on: N/A

Lien holder: GMAC ☒ Other ☐: {Name}

Sale Type: Purchase ☒ Lease ☐ Other ☐ :

DVM Name: Bill Johnson

CAM Name: Aubrey Washington

Phone/Cell Number: 954-732-8314, node and mailbox
404082 8019.

Phone Number: Office Phone: 678-240-9832
Fax: 678-240-9952

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.

☒ Power Steering

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
10/25/07	129778	1 day	21,561	Pines Pontiac GMC Buick, Pembroke Pines, FL. Customer states that car has no power steering assist. Dealer worked with EAA to inspect for no power assist. ESIS reviewed claim and denied to cover repairs to body damage from steering complaint. ESIS determined that no GM part failure did not cause the accident. Customer referred to his insurance company for coverage of accident related repairs.
2/19/08	133637	*****	21,562	Pines Pontiac GMC Buick, Pembroke Pines, FL. Customer stated that steering is hard to turn. Dealer advised that no communication to power steering assist motor module. Dealer found internal failure after checking grounds and data circuits. Dealer installed power steering assist motor and programmed.

☒ ABS system

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
3/26/07	121873	2 days	12,559	Pines Pontiac GMC Buick, Pembroke Pines, FL. Customer stated ABS light comes on while driving. Dealer installed redundant ground to G109 and fault codes still present. Dealer replaced EBCM and test drove to verify the repairs were completed.

☐ Engine

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
3/26/07	121873	*****	12,559	Pines Pontiac GMC Buick, Pembroke Pines, FL. Customer stated engine will stall while driving. Dealer found loose ground G104 connection at header panel. Dealer cleaned and secured ground. Dealer road tested and verified repair was completed.

☐ battery

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
2/19/08	133637	*****	21,562	Pines Pontiac GMC Buick, Pembroke Pines, FL. Customer states that vehicle will not start, battery dead. Dealer replaced battery.

☐ Recall/Campaign (Not Related to Other Symptoms/Complaints)

Date:	RO #:	Days Out:	Mileage:	Description of Complaint and Repair Performed:
-------	-------	-----------	----------	--

Verified with customer if the vehicle has ever been involved in an accident N
If yes are the RO's attached Y N

THE STATE LEMON LAW READS:

Days out of service: 30
Repairs 3 plus a final repair notice sent by certified mail
Time period: 26 months
Does Lemon Law state nonconformity must continue to exist? Y

If applicable, safety-related repairs N/A
Safety-related time period N/A

Number of repair attempts in the presumption period:	2 repairs
Total days out of service during the presumption period:	3 days
Total days out of service during customer's ownership:	3 days

Vehicle Meets Presumption of Lemon Law	NO
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PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

Concern: . Legal Corr., FL - FRA file 71-577179503, steering, ABS

Date & Offer/Result: opened on 11/21/2007 and closed on 2-27-08, no goodwill provided. Repairs needed were from accident damage and not a GM defect. No repairs made by GM.

Concern: PAR case #71-561906018, steering,

Date & Offer/Result: opened 10/4/2007 and closed on 11/7/2007, no goodwill provided by PAR. ESIS reviewed claim and denied to cover repairs to body damage from steering complaint. ESIS determined that no GM part failure did not cause the accident. Customer referred to his insurance company for coverage of accident related repairs.

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: vehicle to be repurchased.

DVM sts: On 3-5-08, CRS left a voice mail for DVM, Bill Johnson at node and mailbox # 404082 8019.

selling and servicing dealer: PINES PONTIAC-GMC-BUICK, PEMBROKE PINES, FL BAC # 130566.

CRS advised that customer has filed with BBB in FL with a live case seeking vehicle to be repurchased due to power steering and ABS failure causing an accident and damage to front end of vehicle. Legal Corr., FL - FRA file 71-577179503, steering, ABS opened on 11/21/2007 and closed on 2-27-08, no goodwill provided. Repairs needed were from accident damage and not a GM defect. No repairs made by GM.

PAR case #71-561906018, steering, opened 10/4/2007 and closed on 11/7/2007, no goodwill provided by PAR. ESIS reviewed claim and denied to cover repairs to body damage from steering complaint. ESIS determined that no GM part failure did not cause the accident. Customer referred to his insurance company for coverage of accident related repairs. CRS advised that DVM feedback needed on case. CRS recommends that customer claim be denied as accident damage is not responsibility of GM to repair. Claim is a product allegation complaint that was denied by PAR. CRS advised that request for repurchase should be denied and no goodwill offered.

On 3-24-08, CRS left a voice mail for DVM, Bill Johnson at node and mailbox # Johnson 404082 8019.

selling and servicing dealer, PINES PONTIAC-GMC-BUICK, PEMBROKE PINES, FL, BAC # 130566.

CRS advised: BBB closed claim as ineligible due to product liability claim not covered under BBB program. PAR has previously declined the claim and FRA was completed.

No goodwill provided. File will be closed dissatisfied.

SVM sts: On 3-05-08, CRS called selling and servicing dealer, PINES PONTIAC-GMC-BUICK, PEMBROKE PINES, FL, BAC # 130566 at (954) 443-2500.

CRS spoke w/: SVC MGR, John Diaz

CRS adv: that customer has contacted the BBB and repair info is needed. CRS requested repair and sales docs. to be faxed to CRS at 1-866-278-1779 for BBB case assessment.

Dir sts: the last dealer inspection was for an accident damage claim. Customer stated his power steering failed and caused his accident damage to front end. ESIS inspected the vehicle and advised that body damage was not caused by power steering loss. The body damage was responsibility of customer and his insurance company. The power steering system repair was performed by dealer and then insurance company declined to pay dealer in timely manner so the customer paid out of pocket to get the vehicle back. Customer then sought reimbursement from his insurance company. Dealer has advised Legal Corr. that accident damage was not fault of failed GM parts.

Vehicle is not at dealer at this time.

Cust caused or prevented? accident damage

TAC contacted? no Case#?

Dealer fax #- 1-954-443-2533 for service info

Sales docs. will need to be requested from GNL MGR, Gary Siegal. SVC MGR advised he will forward the sales info request from GNL MGR.

CRS Rationale: request for repurchase be denied and no goodwill should be provided. Vehicle was involved in an accident and PAR denied to pay for any of repair cost as the ESIS inspection found that GM was not at fault.

**** On 3-19-08, BBB closed file ineligible: Customer Alleging Product Liability/Personal Injury. These items are not covered under BBB program.

On 3-19-08 Dealer finally provided sales docs. requested.

On 3-24-08, CRS left a voice mail for DVM, Bill Johnson at node and mailbox # Johnson 404082 8019.

selling and servicing dealer, PINES PONTIAC-GMC-BUICK, PEMBROKE PINES, FL, BAC # 130566.

CRS advised: BBB closed claim as ineligible due to product liability claim not covered under BBB program. PAR has previously declined the claim and FRA was completed.

No goodwill provided. File will be closed dissatisfied.

CRS FINAL OFFER:	Denial	DATE: 3-05-08	CUST declined.
Goodwill: denial		Attorney Fees (if applicable): N/A	

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

*** SES light is to be captured under affected component above.**

16100 Pines Boulevard
Pembroke Pines, FL 33027
954-443-2500 Fax 954-443-2529

Pines Pontiac GMC Buick

Fax

To: Marion Lindsey	From: Gary Sigal
Fax: 866-278-1779	Pages: 4 including cover
Phone: 866-790-5700 x-21259	Date: 3/19/2008
Re: 71-608249058	CC:

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

• **Comments:**

Attached are documents you requested.

Gary Sigal

RETAIL INSTALMENT SALE CONTRACT

GMAC FLEXIBLE FINANCE PLAN

Dealer Number

Contract Number

Buyer (and Co-Buyer) - Name and address (include county and zip code)

Creditor (Seller name and address)

Month of Birth of registered owner

ZINN COMPANIES INC
14100 PINES BLVD
PEMDROKE PINES FL 33017

You, the Buyer (and Co-Buyer, if any), may buy the vehicle described below for cash or on credit. By signing this contract, you choose to buy the vehicle on credit under the agreements on the front and back of this contract. You agree to pay us, the Creditor, the Amount Financed and Finance Charge according to the payment schedule shown below. We will figure the Finance Charge on a daily basis.

New or Used	Year	Weight (lbs.)	Make and Model	Vehicle Identification No.	Primary Use for Which Purchased
NEW	2006		PONTIAC G6	1G0741551A4	<input type="checkbox"/> personal, family, or household <input type="checkbox"/> agricultural <input type="checkbox"/> business <input type="checkbox"/>

Your trade-in is a: Year Make Model

FEDERAL TRUTH-IN-LENDING DISCLOSURES

ANNUAL PERCENTAGE RATE	FINANCE CHARGE	Amount Financed	Total of Payments	Total Sale Price
The cost of your credit as a yearly rate.	The dollar amount the credit will cost you.	The amount of credit provided to you or on your behalf.	The amount you will have paid after you have made all payments as scheduled.	The total cost of your purchase on credit, including your downpayment
0.00%	\$ 0.00	\$ 29017.44	\$ 29017.44	\$ 29017.54

Your Payment Schedule Will Be:

Number of Payments	Amount of Payments	When Payments Are Due	Or as Follows
72	\$ 403.00	Monthly beginning 08/14/2006	

Late Charge. If a payment is not received in full within 10 days after it is due, you will pay a late charge of 5% of the part of the payment that is late.

Prepayment. If you pay off all your debt early, you will not have to pay a penalty.

Security Interest. You are giving a security interest in the vehicle being purchased.

Additional Information: See this contract for more information including information about nonpayment, default, any required repayment in full before the scheduled date, and security interest.

ITEMIZATION OF AMOUNT FINANCED

1 Cash price (including any accessories, services, and taxes)	\$ 25514.74 (1)
2 Total downpayment = (If negative enter "0" and see line 4l below)	
Gross trade-in \$	N/A
- payoff by seller \$	N/A
= net trade-in \$	N/A
+ cash \$	0.12
+ other (describe)	\$ N/A
3 Unpaid balance of cash price (1 minus 2)	\$ 25514.84 (3)
4 Other charges including amounts paid to others on your behalf (Seller may keep part of these amounts.):	
A Cost of optional credit insurance paid to the insurance company or companies	
Life \$	N/A
Disability \$	N/A
B Other insurance paid to the insurance company \$	N/A
C Official fees paid to government agencies (describe)	
D Government license and/or registration fees (describe)	
E Government documentary stamp taxes \$	101.55
F Government taxes not included in cash price (describe)	
G Government certificate of title fees (including \$ N/A security interest recording fee) \$	N/A
H Other charges (Seller must identify who is paid and describe purpose.)	
to SELLER & ADV for SERVICE CONTRACT	\$ 2400.00
to STATE OF FL for TAX ON SVC	\$ 154.00
to ZINN COMPANY for GAP PROTECT	\$ 595.00
to N/A for N/A	\$ N/A
to N/A for N/A	\$ N/A
to N/A for N/A	\$ N/A
I Net trade-in payoff to	\$ N/A
Total other charges and amounts paid to others on your behalf	\$ 3449.55 (4)
5 Amount financed (3 + 4)	\$ 29017.44 (5)

Insurance. You may buy the physical damage insurance this contract requires (see back) from anyone you choose who is acceptable to us. Your choice of insurance providers will not affect our decision to sell or extend credit to you. 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.

If any insurance is checked below, policies or certificates from the named insurance companies will describe the terms and conditions.

Check the insurance you want and sign below:

Optional Credit Insurance.

☐ Credit Life: ☐ Buyer ☐ Co-Buyer ☐ Both

Term N/A

☐ Credit Disability (Buyer Only)

Term N/A

Premium:

Credit Life \$ N/A

Credit Disability \$ N/A

(Insurance Company)

(Home Office Address)

Credit life insurance and credit disability insurance are not required to obtain credit. Your decision to buy or not buy credit life insurance and credit disability insurance will not be a factor in the credit approval process. They will not be provided unless you sign and agree to pay the extra cost. Credit life insurance pays only the amount you would owe if you paid all your payments on time. Credit disability insurance does not cover any increase in your payment or in the number of payments.

If the box above is checked to indicate that you want credit life insurance, please read and sign the following acknowledgements:

1. You understand that you have the option of assigning any other policy or policies you own or may procure for the purpose of covering this credit and that you do not have to purchase this credit life insurance policy in order to obtain the credit.

X Buyer Signature Date

X Co-Buyer Signature Date

2. You understand that the credit life coverage you are purchasing may be deferred if, at the time of this application, you are unable to engage in employment or unable to perform normal activities of a person of your like age and sex. (You do not have to sign this acknowledgement if the proposed credit life insurance policy does not contain this restriction.)

X Buyer Signature Date

X Co-Buyer Signature Date

3. You understand that the benefits under this credit life insurance policy will ☐ will not ☐ terminate when you reach a certain age and you verify that your age is accurately represented on the application or policy.

X Buyer Signature Date

X Co-Buyer Signature Date

Other Insurance.

☐ N/A Type of Insurance N/A Term

Premium \$ N/A

(Insurance Company)

(Home Office Address)

I want the insurance checked above.

X Buyer Signature Date

X Co-Buyer Signature Date

ANY INSURANCE REFERRED TO IN THIS CONTRACT DOES NOT INCLUDE COVERAGE FOR BODILY INJURY AND PROPERTY DAMAGE CAUSED TO OTHERS.

HOW THIS CONTRACT CAN BE CHANGED. This contract contains the entire agreement between you and us relating to this contract. Any change to the contract must be in writing and we must sign it. No oral changes are binding.

Buyer Signs X

Co-Buyer Signs X

If any 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 may extend the time for making some payments without extending the time for making others.

See back for other important agreements.

Notice to the Buyer

(a) Do not sign this contract before you read it or if it contains any blank spaces.

(b) You are entitled to an exact copy of the contract you sign. Keep it to protect your legal rights.

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.

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 06/29/2006 Co-Buyer Signs X Date 06/29/2006

Co-Buyers and Other Owners - A co-buyer is a person who is responsible for paying the entire debt. An other owner is a person whose name is on the title to the vehicle but does not have to pay the debt. The other owner agrees to the security interest in the vehicle given to us in this contract.

Other owner signs here X Date Address

Creditor Signs ZINN COMPANIES INC Date 06/29/2006 By X Title

Seller assigns its interest in this contract to: ☐ General Motors Acceptance Corporation (GMAC) ☐ GMAC Automotive Bank ☐ Nuwell Credit Corporation, under the terms of Seller's agreement(s) with assignee.

Assigned with recourse

Assigned without recourse or with limited recourse

ZINN COMPANIES INC

Seller By Title



16100 Pines Blvd.
Pembroke Pines, FL 33027
(954) 443-2500

A Craig Zimm Automotive Group Company

**RETAIL BUYER'S ORDER**

PURCHASER'S NAME		DL NO.		S.S. NO.		STOCK NO. 2600	
CO-PURCHASER'S NAME				S.S. NO.		DATE 06/27/08	
ADDRESS		SEX M F		HOME TELEPHONE		BUS. TELEPHONE	
CITY		STATE		ZIP		MOBILE	
PEMBROKE PINES FL				SALES PERSON #1 FREDERICK H WOLF		OCCUPATION	
YEAR 2006	MAKE PONTIAC	MODEL NO. 2ZH37	CYL. 6	MILEAGE 19	SERIAL NO. 1 9 2 Z H 1 5 8 1 6 4		

PLEASE ENTER ☐ NEW CAR ☐ USED CAR
MY OFFER FOR ☐ NEW TRUCK ☐ USED TRUCK


COLOR
BLK

E-Mail:

BUYER'S ACKNOWLEDGEMENT THAT SALE OF VEHICLE IS DEPENDENT UPON SELLER SUCCESSFULLY OBTAINING FINANCING FOR BUYER.

Notwithstanding any provisions to the contrary, this agreement allows Buyer to take possession of above described car while Seller attempts to obtain financing from a financial institution. If, after three (3) days, institutional financing is unavailable the Buyer will be notified by Seller and shall immediately return said car to Seller.

Seller reserves the right to repossess said automobile should the Buyer fail to cooperate with the above terms and conditions.

X 
Buyer's
Date

ATTENTION
CUSTOMER:
(Check One)

☐ TRANSFER TAG
(Attach Copy of
Registration)

☐ NEW TAG

SOURCE

☐ T.V. ☐ PHONEUP ☐ REF.
☐ RADIO ☐ INTERNET ☐ HERALD
☐ REPEAT ☐ CORPORATE ☐ SENTINEL

AFTERMARKETS BASE PRICE 615.00

TRADE-IN Stock No. Allowance \$
Year, Make, Less Pay Off \$
& Model
Body Style No. Cyls. Miles
Serial No. Net \$

PAY OFF TO:

Address
City

BUYER ASSUMES RESPONSIBILITY FOR ANY DIFFERENCE IN
PAYOFF IN EXCESS OF AMOUNT SHOWN ABOVE, AND WILL PAY
SUCH DIFFERENCE IN CASH ON DEMAND OR WILL SURRENDER
CARTO DEALER.

(X)
Rental, Lease Car or Demonstrator
I acknowledge I have been advised the vehicle I am purchasing has been used as a rental, lease or
demo car having been previously driven _____ miles and that the
warranty has been fully explained.
Buyer acknowledged that it has not been represented to him by any agent of the Seller, that the
vehicle which is subject of this purchase has or has not ever sustained damage prior to this purchase.

(X)
ANY WARRANTIES ON THE PRODUCTS SOLD ARE THOSE MADE BY THE MANUFACTURER.
THE SELLER EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESSED OR IMPLIED,
INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A
PARTICULAR PURPOSE, AND SELLER NEITHER ASSUMES NOR AUTHORIZES ANY OTHER
PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF SAID
PRODUCTS.

(X)
BUYER REPRESENTS TO SELLER THAT THE VEHICLE BEING TRADED IN BY HIM HAS NEVER
BEEN IN AN ACCIDENT OR SUSTAINED FRAME DAMAGE PRIOR TO THIS DATE.

**DEPOSIT NON-REFUNDABLE UNLESS
FINANCING UNAVAILABLE**

ALLOW 45 DAYS FOR ORDERED CARS.

\$

TOTAL INCLUDING ACCESSORIES	23278.00
LESS USED CAR ALLOWANCE	23278.00
CASH DIFFERENCE	
FL LAW TIRE DISPOSAL & LEAD BATTERY FEE	6.50
*DELIVERY INSPECTION AND SERVICE COST & DR PROFIT TO DEALER	2599.00
AMOUNT TAXABLE	1590.21
SALESTAX	
LUXURY TAX	
LEMON LAW FEE	XXXX2.00
<input type="checkbox"/> ESTIMATED TRANSFER	80.00
<input type="checkbox"/> ESTIMATED NEW TAG	225.00
USED CAR BALANCE	25720.71
CASH BALANCE DUE	
DEPOSIT	0.12
CASH ON DELIVERY	25720.59
SUBTOTAL	2600.00
T.L.C. WARRANTY	28320.59
UNPAID BALANCE OF CASH PRICE	

"This order is an offer by the buyer to the seller to purchase the above described vehicle on credit on terms described and an authorization for the seller to secure any and all information from any source to determine the credit worthiness of the buyer."

MEDIATION/ARBITRATION REQUIRED BY THIS AGREEMENT:

BOTH PARTIES AGREE THAT INSTEAD OF LITIGATION IN A COURT, SHOULD ANY DISPUTE, CONTROVERSY, OR CLAIM OCCUR ARISING OUT OF OR RELATED TO THE SALE OF THIS VEHICLE OR TO THIS RETAIL PURCHASE AGREEMENT OR TO ANY OTHER DOCUMENT OR AGREEMENT BETWEEN THE PARTIES RELATING TO THE MOTOR VEHICLE (INCLUDING THE RETAIL INSTALLMENT CONTRACT, IF ANY), THE PARTIES HERETO WILL FIRST ATTEMPT TO SETTLE THE DISPUTE BY DIRECT DISCUSSIONS. IF THE DISPUTE CANNOT BE SETTLED BY DIRECT DISCUSSIONS, THE PARTIES HERETO AGREE THAT THEY SHALL NEXT TRY TO SETTLE THE DISPUTE AMICABLY BY MEDIATION ADMINISTERED BY AMERICAN ARBITRATION ASSOCIATION UNDER ITS COMMERCIAL MEDIATION RULES BEFORE RESORTING TO ARBITRATION. FOLLOWING MEDIATION, ANY UNRESOLVED DISPUTES SHALL BE SETTLED BY BINDING ARBITRATION ADMINISTERED BY THE AMERICAN ARBITRATION ASSOCIATION UNDER ITS COMMERCIAL ARBITRATION RULES. SUCH ARBITRATION SHALL BE CONDUCTED IN THE CITY WHERE THE DEALERSHIP IS LOCATED. EACH PARTY SHALL PAY HIS OR HER OWN COSTS. FOLLOWING THE ARBITRATION, ANY PARTY MAY APPLY TO ANY COURT HAVING JURISDICTION FOR AN ORDER CONFIRMING THE ARBITRATION AWARD AND FOR A JUDGEMENT OR DECREE TO BE ENTERED IN CONFORMITY THEREWITH.

It is agreed that this mutual obligation to mediate/arbitrate between the parties does not apply to the seller/dealer's rights to seek recovery of the motor vehicle under the Retail Purchase Agreement should the finance source deny the purchaser's loan application.

"Price quoted for immediate delivery, but if the price should be increased before I have taken delivery I will have the privilege of accepting delivery at the new price or can cancel this order and have my deposit refunded. If my used car has been delivered to you and my order is thereafter cancelled my used car will be returned to me and I agree to pay a reasonable charge for storage and repairs to said car during period of your possession. If you have sold my used car I agree to allow you a selling commission of 20 percent of the sale price, and not of price allowed in addition to any expense incurred in conditioning the car for sale. My used car will be subject to reappraisal if not in the same condition as originally appraised."

I HAVE CAREFULLY READ AND AGREE TO ALL TERMS AS ABOVE.

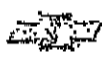
BUYER'S SIGNATURE

THIS ORDER IS NOT VALID UNTIL ACCEPTED BY AN OFFICIAL OF SELLER
ACCEPTED

BY

DSI-SAL-321

GM CUSTOMER INCENTIVE AND ONSTAR ACKNOWLEDGMENT


GMC HUMMER

OnStar

by 21

(excludes Saturn)

CUSTOMER NAME:

VIN: 1191212141151811614121

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:

Incentive Program Reference	Amount	GM Incentive Code
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
Total Incentive Amount Received		\$ 0.00

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 _____
in lieu of _____ and/or _____
- b. I elect to receive _____

- CUSTOMER AND DEALER ACKNOWLEDGMENT FOR INCENTIVES AND ONSTAR SERVICE -

- 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 on ___/___/___ I acknowledge receipt of incentive(s) as described in Item ___ and release GM Division from any future claim or obligation for incentive(s) on this unit.

Is vehicle equipped with OnStar? Yes No

- 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 www.onstar.com, or by contacting OnStar as described below).

I understand that in order to cancel the OnStar service in my vehicle, I must press the blue OnStar button in my vehicle or call 1.888.4OnStar (1.888.466.7827) or TTY 1.877.248.2080 and request that my Services be cancelled.

Purchaser/Lessee Signature:

Date: 6/24/06

The undersigned person, as Dealer representative, certifies that the information on 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:

Date: 6/24/06

Dealer Code:

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.

RCMPR010 VEHICLE DELIVERY/INCENTIVE HISTORY 08/11/07
PROCESSING SOURCE: PONTIAC 14:21:17
PAGE: 1
VIN: 1G2ZH1581 64 SELLG SCE: 16 MDL YR: 06 ORD NO: JVRR9Z
ODATE: 01/21/06 ORDER FAN: OTYPE: 070 DLVY SS/SITE CD: 16 17053
DDATE: 06/28/06 DLVY FAN: DTYPE: 010 SRVC TYPE: MILEAGE:
DLVY DOE: 06/30/06 ORDER BY:
CANC: 06/26/06
CANC DOE: 06/29/06
TRADE: DLVY TO:
TRD DOE:
SRVC IN: PEMBROKE PINES FL
SRVC OUT: CANC SRVC IN:
BFSO ORD DT: BFSO CUST:
PRICE ASSUR DT: PRICE ASSUR RT:

--INCENTIVES--

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
BAT	01	16 17053	00030598591	07/14/06	500.00 DR	OA		0.00	0

PROCESS TYPE: 001 CHECK NO: SSN:
DATA SCE: BARS INC MEMO NO: 00030598591 AUTH PUR CD:
MISC DATE: MISC: 0000041724HAA0
POLICY PYMT CMNT: #190- INCOMPATIBLE WITH XMF - ACTV TYPE: 1

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
BAT	01	16 17053	00030487845	06/27/06	500.00	OA		0.00	9

PROCESS TYPE: 001 CHECK NO: SSN:
DATA SCE: DLR INC MEMO NO: 00030487845 AUTH PUR CD:
MISC DATE: 06/20/06 MISC:
POLICY PYMT CMNT: ACTV TYPE: 6

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
CSE	01	16 17053	00030598591	07/14/06	750.00 DR	OA		0.00	0

PROCESS TYPE: 001 CHECK NO: SSN:
DATA SCE: BARS INC MEMO NO: 00030598591 AUTH PUR CD:
MISC DATE: MISC: 0000041724HAA0
POLICY PYMT CMNT: #190- INCOMPATIBLE WITH XMF - ACTV TYPE: 1

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
CSE	01	16 17053	00030487845	06/27/06	750.00	OA		0.00	9

PROCESS TYPE: 001 CHECK NO: SSN:
DATA SCE: DLR INC MEMO NO: 00030487845 AUTH PUR CD:
MISC DATE: 06/20/06 MISC:
POLICY PYMT CMNT: ACTV TYPE: 6

VIN: 1G2ZH1581 64 [REDACTED] SELLG SCE: 16 MDL YR: 06 ORD NO: JVRR9Z

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
FFC	01	16 17053	00030487845	06/27/06	36.29	OA		0.00	9

PROCESS TYPE: 001 CHECK NO: SSN:
DATA SCE: DLVY INC MEMO NO: 00030487845 AUTH PUR CD:
MISC DATE: MISC:
POLICY PYMT CMNT: ACTV TYPE: 6

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
PDN	01	16 17053	00030598591	07/14/06	500.00 DR	OA		0.00	0

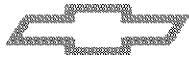
PROCESS TYPE: 001 CHECK NO: SSN:
DATA SCE: BARS INC MEMO NO: 00030598591 AUTH PUR CD:
MISC DATE: MISC: 0000041724HAA0
POLICY PYMT CMNT: #190- INCOMPATIBLE WITH XMF - ACTV TYPE: 1

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
PDN	01	16 17053	00030487845	06/27/06	500.00	OA		0.00	9

PROCESS TYPE: 001 CHECK NO: SSN:
DATA SCE: DLR INC MEMO NO: 00030487845 AUTH PUR CD:
MISC DATE: 06/20/06 MISC:
POLICY PYMT CMNT: ACTV TYPE: 6

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
XMF	01	16 17053	165583	07/14/06	5,696.12	OP		0.00	9

PROCESS TYPE: 004 CHECK NO: SSN:
DATA SCE: GMAC INC MEMO NO: 165583 AUTH PUR CD:
MISC DATE: 06/29/06 MISC: 0000041724HAA0
POLICY PYMT CMNT: ACTV TYPE: 6



GMC

HUMMER

GENERAL MOTORS BUSINESS RESOURCE CENTER

VIA FAX ONLY

March 13, 2008

SVC MGR, John Diaz and General Sales MGR, Gary Siegal
PINES PONTIAC-GMC-BUICK
16100 Pines Blvd.
Pembroke Pines, FL 33027-1110

Re:

Siebel Request: 71-608249058
2006 Pontiac G6
VIN # 1G2ZH158164

Dear Sirs:

This is a 2nd letter of notification regarding a Better Business Bureau case involving the above referenced customer. The first request was sent by fax on March 5, 2007 but at this time has not been responded to by your dealer. It is imperative that this info be sent as soon as possible to avoid further arbitration costs to General Motors.

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,

Marion Lindsey
Customer Relationship Specialist
Aditya Birla Minacs

For: General Motors Business Resource Center
Alternative Dispute Resolution
Phone # 1-866-790-5700, Ext. #21259
Fax # 1-866-278-1779
e-mail- lindseym@gmexpert.com



BBB AUTO LINE

March 19, 2008

[REDACTED]
SUNNY ISLES FL [REDACTED]

Re: FLDD2 PGM0835011: [REDACTED] vs Pontiac/GMC Division
1G2ZH158164 [REDACTED]

Dear [REDACTED]

We would like to thank you for your interest in the BBB AUTO LINE program. Unfortunately, after a thorough review of the claim you submitted, it has been determined that your claim is ineligible for arbitration because you have alleged that the defect has caused an accident or fire that resulted in property damage or bodily injury.

While we notified the manufacturer of your complaint, we cannot require the manufacturer to submit to arbitration unless the claim falls within the program limits explained in the *Program Summary*.

While I am sorry we were not able to help you with your automotive complaint, I want to thank you for your interest in the BBB AUTO LINE program. Please contact us at 1.800.955.5100 if you have any questions or if you believe we have made an error. For further information about the Florida lemon law, please contact the Florida Division of Consumer Services at 1.800.321.5366.

Sincerely,

Rhonda Eakins at Extension 240

CC: Marion Lindsey



PNCS133637

PNCS133637

16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027
 MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770



0801PNCS133637

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	7123	TAG NO. 4961	INVOICE DATE 02/22/08	INVOICE NO. PNCS133637
	LABOR RATE	LICENSE NO.	MILEAGE 21,562	COLOR BLK/EBONY I	STOCK NO. 6052600
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT			DELIVERY DATE 06/30/06	DELIVERY MILES 19
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6 4			SELLING DEALER NO.	PRODUCTION DATE
	F. T. E. NO.			P. O. NO.	R. O. DATE 02/19/08
	BUSINESS PHONE		COMMENTS		

LABOR & PARTS
 J# 1+04PNZ03 WON'T CRANK TECH(S):6925 WARRANTY
 CUSTOMER STATES CAR WILL NOT START BATTERY DEAD
 12.73VOLTS 225CCA DISPLAY 2T1R7-RL, FAILED MIDTRONICS
 TEST.
 REPLACE BATTERY. 001Q3-RL
 N0110 .50

PARTS	QTY	FP-NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	WARRANTY
JOB # 1	1	19001627	BATT			
				JOB # 1 TOTAL PARTS	0.00	
				JOB # 1 TOTAL LABOR & PARTS	0.00	

J# 2+06PNZ07 STEERS HARD/TIGHT TECH(S):6925 332.33
 CUSTOMER STATES STEERING HARD TO TURN ADVISE
 NO COMMUNICATION TO POWER STEERING ASSIST MOTOR MODULE.
 CHECK POWER AND GROUND DATA CIRCUITS, INTERNAL FAILURE.
 INSTALLED MOTOR AND PROGRAMMED.

PARTS	QTY	FP-NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	WARRANTY
JOB # 2	1	25805894	MOTOR 6.605	364.39	353.78	353.78
JOB # 2	1	22689708	FUSE 8.965	8.95	8.20	8.20
				JOB # 2 TOTAL PARTS	361.98	
				JOB # 2 TOTAL LABOR & PARTS	694.31	

MISC	CODE	DESCRIPTION	CONTROL NO
JOB # A	SS	HAZARDOUS WASTE DISP/SHOP SUPPLY	
			TOTAL - MISC
			19.94
			19.94

COMMENTS
 INFINITY INS-954-430-9062 CLAIM NO. [REDACTED]

DELETED OPERATION(S)
 06PNZ STEERING/SUSPENSION

TECHNICIAN CERTIFICATION
 6925 WYMAN ROMANS 9258

*Thank
You*

*Thank
You*



PNCS126673

PNCS126673

16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027
 MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770



0801PNCS126673

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	7123	TAG NO. 9884	INVOICE DATE 08/01/07	INVOICE NO. PNCS126673
	LABOR RATE	LICENSE NO.	MILEAGE 19,006	COLOR BLK/EBONY I	STOCK NO. 6052600
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT			DELIVERY DATE 06/30/06	DELIVERY MILES 19
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6 4			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.			P.O. NO.	R.O. DATE 08/01/07
REFERENCE PHONE	BUSINESS PHONE	COMMENTS			

LABOR & PARTS
 J# 1 01PNZ08-18K 18,000 MILE SERVICE TECH(S):4978 91.00
 CUSTOMER REQUEST 18,000 MILE SERVICE
 CHANGE OIL AND OIL FILTER. LUBE CHASSIS, HINGES AND DOORS
 FILL ALL FLUID LEVELS. ROTATE TIRES. CLEAN AND ADJUST BRAKE
 LININGS. INSPECT DRIVE BELTS, HOSES, CABLES. SET ENGINE TO
 FACTORY SPECS. CHECK BATTERY. INSPECT TIRE WEAR AND PRESSURE
 PERFORMED 18,000 MILE SERVICE DESCRIBED
 YOUR NEXT SERVICE IS DUE AT 21,000 MILES

PARTS	QTY	FP	NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	
JOB # 1	1		25010792	FILTER 1.836 GP	7.04	7.04	7.04
						JOB # 1 TOTAL PARTS	7.04
						JOB # 1 TOTAL LABOR & PARTS	98.04

G.O.G. & SUPPLIES						
JOB # 1	5.0	CASTROL GTX OIL	@	2.100	/UNIT	10.50
					TOTAL - GOG	10.50

MISC	CODE	DESCRIPTION	CONTROL NO	
JOB # A	SS	HAZARDOUS WASTE DISP/SHOP SUPPLY		5.46
				TOTAL - MISC

TOTALS		
PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED	TOTAL LABOR....	91.00
LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS	TOTAL PARTS....	7.04
GSP	TOTAL SUBLET...	0.00
	TOTAL G.O.G....	10.50
	TOTAL MISC CHG.	5.46
	TOTAL MISC DISC	0.00
	TOTAL TAX.....	6.84
	TOTAL INVOICE \$	120.84

CUSTOMER SIGNATURE
 ***** DUPLICATE INVOICE *****

*Thank
You*



PNCS124048

PNCS124048

16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027
 MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770



0801IPNCS124048

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	TAB NO. 7123	INVOICE DATE 05/22/07	INVOICE NO. PNCS124048
	LABOR RATE 7602	MILEAGE 15,792	COLOR BLK/EBONY I	STOCK NO. 6052600
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT	DELIVERY DATE 06/30/06	DELIVERY MILES 19	
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6 4	SELLING DEALER NO.	PRODUCTION DATE	
	P.T.F. NO.	P.O. NO.	P.O. DATE 05/22/07	
RESIDENCE PHONE	BUSINESS PHONE	COMMENTS		

LABOR & PARTS
 J# 1 01PNZ07-15K 15,000 MILE SERVICE TECH(S):6925 172.50

CUSTOMER REQUEST 15,000 MILE SERVICE
 CHANGE OIL AND OIL FILTER. LUBE CHASSIS, HINGES, DOORS.
 FILL ALL FLUID LEVELS. SERVICE AUTOMATIC TRANSMISSION.
 SERVICE COOLING SYSTEM. INSPECT DRIVE BELTS, HOSES, CABLES.
 REMOVE WHEELS. CLEAN AND ADJUST BRAKE LININGS. CHECK TIRES
 FOR WEAR AND PRESSURES. CHECK BATTERY. INSPECT A/C SYSTEM
 FOR PERFORMANCE. ROAD TEST
 PERFORMED 15,000 MILE SERVICE DESCRIBED
 YOUR NEXT SERVICE IS DUE AT 18,000 MILES

PARTS	QTY	FP	NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	PRICE
JOB # 1	1		24221762	FLTR KIT 4.197 GP	46.38	45.12	45.12
JOB # 1	7		12378470	FLUID 8.800	6.90	6.90	48.30
JOB # 1	1		103	ATC	8.95	8.95	8.95
JOB # 1	2		12346290	COOLANT 8.800	32.08	21.33	42.66
JOB # 1	1		1052626	CLEANER 8.800 KE	12.77	6.50	6.50
JOB # 1	1		25010792	FILTER 1.836 GP	7.04	6.80	6.80
JOB # 1 TOTAL PARTS							158.33
JOB # 1 TOTAL LABOR & PARTS							330.83

G.O.G. & SUPPLIES
 JOB # 1 5.0 CASTROL GTX OIL @ 2.100 /UNIT TOTAL - GOG 10.50

MISC
 JOB # A SS HAZARDOUS WASTE DISP/SHOP SUPPLY CONTROL NO. 10.35
 TOTAL - MISC 10.35

TECHNICIAN CERTIFICATION
 6925 WYMAN ROMANS 9258

TOTALS
 PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED
 LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS
 GSP
 TOTAL LABOR... 172.50
 TOTAL PARTS... 158.33
 TOTAL SUBLET... 0.00
 TOTAL G.O.G.... 10.50
 TOTAL MISC CHG. 10.35
 TOTAL MISC DISC 0.00
 TOTAL TAX..... 21.11
TOTAL INVOICE \$ 372.79

CUSTOMER SIGNATURE

DUPLICATE INVOICE

Thank
 You



PNCS121873

PNCS121873

16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027
 MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770



08011PNCS121873

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	TAG NO. 7123	INVOICE DATE 03/27/07	INVOICE NO. PNCS121873
	LABOR RATE	LICENSE NO.	MILEAGE 12,559	COLOR BLK/EBONY I
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT		DELIVERY DATE 06/30/06	STOCK NO. 6052600
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6 4		SELLING DEALER NO.	DELIVERY MILES 19
	F. T. E. NO.	P. O. NO.	R. O. DATE 03/26/07	PRODUCTION DATE
	BUSINESS PHONE	COMMENTS		

LABOR & PARTS-----
 J# 1 07PNZ BRAKES/TRACTION CTRL TECH(S):4978 WARRANTY
 CUSTOMER STATES ABS LIGHT COMES ON WHILE DRIVING
 C0550 INSTALL REDUNDENT GROUND TO G109 AND CODE STILL
 PRESENT.
 REPLACE EBCM AND ROAD TESTED.
 H2505 1.3

PARTS-----	QTY---	FP-NUMBER-----	DESCRIPTION-----	LIST PRICE-UNIT PRICE-	WARRANTY
JOB # 1	1	22691089	MODULE KI 4.720		0.00
				JOB # 1 TOTAL PARTS	0.00
				JOB # 1 TOTAL LABOR & PARTS	0.00

J# 2 02PNZ DRIVE & EMISSIONS TECH(S):4978 WARRANTY
 CUSTOMER STATES ENGINE WILL STALL WHILE DRIVING
 G104 LOOSE AT HEADER PANEL
 CLEAN AND SECURE GROUND, ROAD TESTED OKAY.

PARTS-----	QTY---	FP-NUMBER-----	DESCRIPTION-----	LIST PRICE-UNIT PRICE-	WARRANTY
				JOB # 2 TOTAL PARTS	0.00
				JOB # 2 TOTAL LABOR & PARTS	0.00

G.O.G. & SUPPLIES-----	WARRANTY
JOB # 1 FREIGHT (PARTS)	0.00
TOTAL - GOG	0.00

COMMENTS-----
 DELETED OPERATION(S)-----
 01PNZ-RENTAL RENTAL

TOTALS-----	
PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED	TOTAL LABOR.... 0.00
LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS	TOTAL PARTS.... 0.00
GSP	TOTAL SUBLET... 0.00
	TOTAL G.O.G.... 0.00
	TOTAL MISC CHG. 0.00
	TOTAL MISC DISC 0.00
	TOTAL TAX..... 0.00
	TOTAL INVOICE \$ 0.00

CUSTOMER SIGNATURE *****
 ***** DUPLICATE INVOICE *****

*Thank
You*



PNCS121675

PNCS121675

16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027

MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770



0801PNCS121675

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	7123	TAG NO. 5730	INVOICE DATE 03/20/07	INVOICE NO. PNCS121675
	LABOR RATE		12,251	COLOR BLK/EBONY I	STOCK NO. 6052600
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT			DELIVERY DATE 06/30/06	DELIVERY MILES 19
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.			P.O. NO.	R.O. DATE 03/20/07
BUSINESS PHONE	COMMENTS				

LABOR & PARTS

J# 1 01PNZ06-12K 12,000 MILE SERVICE TECH(S):6925 91.00
 CUSTOMER REQUEST 12,000 MILE SERVICE
 CHANGE OIL AND OIL FILTER, LUBE CHASSIS, HINGES AND DOORS
 FILL ALL FLUID LEVELS, BALANCE AND ROTATE FOUR TIRES.
 INSPECT DRIVE BELTS, HOSES, CABLES, SET ENGINE TO FACTORY
 SPECS, CHECK BATTERY, CHECK TIRES FOR WEAR AND PRESSURES.
 PERFORMED 12,000 MILE SERVICE DESCRIBED
 YOUR NEXT SERVICE IS AT 15,000 MILES. THANK YOU !!

PARTS	QTY	FP	NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	
JOB # 1	1		25010792	FILTER 1.836 GP	7.04	6.80	6.80
						JOB # 1 TOTAL PARTS	6.80
						JOB # 1 TOTAL LABOR & PARTS	97.80

G.O.G. & SUPPLIES						
JOB # 1	5.0	CASTROL GTX OIL	@	2.100	/UNIT	10.50
					TOTAL - GOG	10.50

MISC	CODE	DESCRIPTION	CONTROL NO	
JOB # A	SS	HAZARDOUS WASTE DISP/SHOP SUPPLY		5.46
				TOTAL - MISC

TECHNICIAN CERTIFICATION			
6925	WYMAN ROMANS	9258	

TOTALS		
PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED	TOTAL LABOR....	91.00
LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS	TOTAL PARTS....	6.80
GSP	TOTAL SUBLET...	0.00
	TOTAL G.O.G....	10.50
	TOTAL MISC CHG.	5.46
	TOTAL MISC DISC	0.00
	TOTAL TAX.....	6.83
	TOTAL INVOICE \$	120.59

CUSTOMER SIGNATURE

DUPLICATE INVOICE

Thank
You



PNCS118545

PNCS118545

16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027
MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770



0801PNCS118545

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	7123	TAG NO 3485	INVOICE DATE 12/28/06	INVOICE NO. PNCS118545
	LABOR RATE	LICENSE NO.	MILEAGE 9,183	COLOR BLK/EBONY I	STOCK NO. 6052600
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT			DELIVERY DATE 06/30/06	DELIVERY MILES 19
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6 4			SELLING DEALER NO.	PRODUCTION DATE
	F. T. E. NO.			P. O. NO.	R. O. DATE 12/28/06
RESIDENCE PHONE	BUSINESS PHONE		COMMENTS		

LABOR & PARTS-----
J# 1 01PNZ05-9K 9,000 MILE SERVICE TECH(S):801909 16.50
CUSTOMER REQUEST 9000 MILE SERVICE
CHANGE OIL AND OIL FILTER, LUBE CHASSIS, HINGES AND DOORS
FILL ALL FLUID LEVELS. INSPECT DRIVE BELTS, HOSES AND CABLES
INSPECT TIRES FOR WEAR AND PRESSURES. CHECK BATTERY
PERFORMED 9,000 MILE SERVICE AS DESCRIBED
YOUR NEXT SERVICE IS AT 12,000 MILES. THANK YOU !!

PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----LIST PRICE-UNIT PRICE-	
JOB # 1 1 25010792 FILTER 1.836 GP	7.04 6.80
JOB # 1 TOTAL PARTS	6.80
JOB # 1 TOTAL LABOR & PARTS	23.30

G.O.G. & SUPPLIES-----	
JOB # 1 5.0 CASTROL GTX OIL @ 1.950 /UNIT	9.75
TOTAL - GOG	9.75

MISC-----CODE-----DESCRIPTION-----CONTROL NO-----	
JOB # A SS HAZARDOUS WASTE DISP/SHOP SUPPLY	2.50
JOB # 1 SD SERVICE DEPT DISCOUNTS/COUPONS	-3.10
TOTAL - MISC	-0.60

TOTALS-----	
PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED	TOTAL LABOR.... 16.50
LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS	TOTAL PARTS.... 6.80
GSP	TOTAL SUBLET... 0.00
	TOTAL G.O.G.... 9.75
	TOTAL MISC CHG. 2.50
	TOTAL MISC DISC -3.10
	TOTAL TAX..... 1.95
	TOTAL INVOICE \$ 34.40

CUSTOMER SIGNATURE *****
***** DUPLICATE INVOICE *****

*Thank
You*



PNCS115396

PNCS115396

16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027
MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770



08011PNCS115396

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	7123	TAG NO. 9626	INVOICE DATE 10/09/06	INVOICE NO. PNCS115396
	LABOR RATE	LICENSE NO.	MILEAGE 6,294	COLOR BLK/EBONY I	STOCK NO. 6052600
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT			DELIVERY DATE 06/30/06	DELIVERY MILES 19
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6 4			SELLING DEALER NO.	PRODUCTION DATE
	F. T. E. NO.			P. O. NO.	R. O. DATE 10/09/06
RECEIVED BY	BUSINESS PHONE		COMMENTS		

LABOR & PARTS-----
J# 1 01PNZ05-6K 6,000 MILE SERVICE TECH(S):4978 91.00
CUSTOMER REQUEST 6000 MILE SERVICE
CHANGE OIL AND OIL FILTER, LUBE CHASSIS, HINGES, DOORS
FILL ALL FLUIDS, ROTATE TIRES, CLEAN AND ADJUST BRAKE LINING
INSPECT DRIVE BELTS, HOSES AND CABLES, SET ENGINE TO FACTORY
SPECS, CHECK BATTERY, CHECK TIRE WEAR AND PRESSURE.
PERFORMED 6,000 MILE SERVICE DESCRIBED
YOUR NEXT SERVICE IS DUE AT 9000 MILES

PARTS-----	QTY----	FP-NUMBER-----	DESCRIPTION-----	LIST PRICE-----	UNIT PRICE-----	
JOB # 1	1	25010792	FILTER 1.836 GP	7.04	6.80	6.80
					JOB # 1 TOTAL PARTS	6.80
					JOB # 1 TOTAL LABOR & PARTS	97.80

G.O.G. & SUPPLIES-----					
JOB # 1	5.0	CASTROL GTX OIL	@	1.950	/UNIT
					TOTAL - GOG
					9.75

MISC-----	CODE-----	DESCRIPTION-----	CONTROL NO-----	
JOB # A		SS HAZARDOUS WASTE DISP/SHOP SUPPLY		5.46
				TOTAL - MISC
				5.46

TOTALS-----

PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED	TOTAL LABOR....	91.00
LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS	TOTAL PARTS....	6.80
GSP	TOTAL SUBLET...	0.00
	TOTAL G.O.G....	9.75
	TOTAL MISC CHG.	5.46
	TOTAL MISC DISC	0.00
	TOTAL TAX.....	6.79
	TOTAL INVOICE \$	119.80

CUSTOMER SIGNATURE

DUPLICATE INVOICE

*Thank
You*



16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027
MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770

PNCS112603

PNCS112603



08011PNCS112603

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	TAG NO. 7123	INVOICE DATE 08/02/06	INVOICE NO. PNCS112603
	LABOR RATE	LICENS. NO.	MILEAGE 3,107	COLOR BLK/EBONY I
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT			STOCK NO. 6052600
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6 4			DELIVERY DATE 06/30/06
	F. T. E. NO.			SELLING DEALER NO.
	P. O. NO.			PRODUCTION DATE 19
RESIDENCE PHONE	BUSINESS PHONE		COMMENTS	

LABOR & PARTS-----
J# 1 01PNZ05-3K 3,000 MILE SERVICE TECH(S):801909 9.40
CUSTOMER REQUEST 3000 MILE SERVICE
CHANGE OIL & OIL FILTER, LUBE CHASSIS, HINGES AND DOORS.
FILL ALL FLUIDS LEVELS, CHECK TIRE WEAR AND PRESSURE.
CHECK BATTERY.
PERFORMED 3,000 MILE SERVICE DESCRIBED
YOUR NEXT SERVICE IS AT 6,000 MILES . THANK YOU !!

PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----LIST PRICE-UNIT PRICE-	
JOB # 1 1 25010792 FILTER 1.836 GP	7.04 6.80
JOB # 1 TOTAL PARTS	6.80
JOB # 1 TOTAL LABOR & PARTS	16.20

G.O.G. & SUPPLIES-----	
JOB # 1 5.0 CASTROL GTX OIL @ 1.950 /UNIT	9.75
TOTAL - GOG	9.75

MISC-----CODE-----DESCRIPTION-----CONTROL NO-----	
JOB # A SS HAZARDOUS WASTE DISP/SHOP SUPPLY	2.50
TOTAL - MISC	2.50

TOTALS-----	
PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED	TOTAL LABOR.... 9.40
LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS	TOTAL PARTS.... 6.80
GSP	TOTAL SUBLET... 0.00
	TOTAL G.O.G.... 9.75
	TOTAL MISC CHG. 2.50
	TOTAL MISC DISC 0.00
	TOTAL TAX..... 1.71

TOTAL INVOICE \$ 30.16

CUSTOMER SIGNATURE

DUPLICATE INVOICE

*Thank
You*



16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027
MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770

PNCS133637

PNCS133637



0801PNCS133637

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	7123	TAG NO. 4961	INVOICE DATE 02/22/08	INVOICE NO. PNCS133637
	LABOR RATE	LICENSE NO.	MILEAGE 21,562	COLOR BLK/EBONY I	STOCK NO. 6052600
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT			DELIVERY DATE 06/30/06	DELIVERY MILES 19
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6 4			SELLING DEALER NO.	PRODUCTION DATE
	P. F. F. NO.			P. O. NO.	R. O. DATE 02/19/08
	BUSINESS PHONE	COMMENTS			

TOTALS-----

PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED
LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS
GSP

TOTAL LABOR....	332.33
TOTAL PARTS....	361.98
TOTAL SUBLET....	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	19.94
TOTAL MISC DISC	0.00
TOTAL TAX.....	42.86

TOTAL INVOICE \$ 757.11

CUSTOMER SIGNATURE

DUPLICATE INVOICE

*Thank
You*



PNCS129778

NCS129778

16100 PINES BLVD. * PEMBROKE PINES, FLORIDA 33027
 MAIN: (954) 443-2500 * BODY SHOP DIRECT: (954) 443-2770



0801PNCS129778

A Craig Zinn Automotive Group Company



CUSTOMER NO. 151039	ADVISOR EFREN ALMEIDA	7123	TAG NO. 0000	INVOICE DATE 10/25/07	INVOICE NO. PNCS129778
	LABOR RATE		MILEAGE 21,561	COLOR BLK/EBONY I	STOCK NO. 6052600
	YEAR / MAKE / MODEL 06/PONTIAC/G6/2DR CPE GT			DELIVERY DATE 06/30/06	DELIVERY MILES 19
	VEHICLE I.D. NO. 1 G 2 Z H 1 5 8 1 6 4			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.			R.O. DATE 10/25/07	
BUSINESS PHONE	COMMENTS				

LABOR & PARTS-----
 J# 1 06PNZ STEERING/SUSPENSION TECH(S):6925 189.90
 CUSTOMER STATES CAR HAS NO POWER STEERING ASSIST
 WORK WITH REP FROM EAA TO INSPECT FOR NO POWER ASSIST

JOB # 1 TOTAL LABOR & PARTS 189.90

TECHNICIAN CERTIFICATION-----
 6925 WYMAN ROMANS 9258

TOTALS-----
 PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED
 LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY REPAIRS
 GSP
 TOTAL LABOR.... 189.90
 TOTAL PARTS.... 0.00
 TOTAL SUBLET... 0.00
 TOTAL G.O.G.... 0.00
 TOTAL MISC CHG. 0.00
 TOTAL MISC DISC 0.00
 TOTAL TAX..... 11.40

TOTAL INVOICE \$ 201.30

CUSTOMER SIGNATURE
 ***** DUPLICATE INVOICE *****

*Thank
You*



HUMMER

GENERAL MOTORS BUSINESS RESOURCE CENTER

VIA FAX ONLY

March 5, 2008

SVC MGR, John Diaz and General Sales MGR, Gary Siegal
PINES PONTIAC-GMC-BUICK
16100 Pines Blvd.
Pembroke Pines, FL 33027-1110

Re:

[REDACTED]
Siebel Request: 71-608249058
2006 Pontiac G6
VIN # 1G2ZH158164 [REDACTED]

Dear Sirs:

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,

Marion Lindsey
Customer Relationship Specialist
Aditya Birla Minacs

For: General Motors Business Resource Center
Alternative Dispute Resolution
Phone # 1-866-790-5700, Ext. #21259
Fax # 1-866-278-1779
e-mail- lindseym@gmexpert.com

**BBB AUTO LINE
Customer Claim Form**

Case number: PGM0835011
Contact Date: 03/04/08
Start Date: 03/04/08

Please make any necessary corrections to the information below, print 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: [REDACTED]		
Mailing address: [REDACTED]		
City: Sunny Isles	State: FL	Zip code: [REDACTED]
Day phone: [REDACTED]	Evening phone:	Cell phone:
Fax:	E-mail address:	

SECTION 2: VEHICLE INFORMATION

Make: Pontiac/GMC	Model: G6	Year: 2006	Current mileage: 21500
Name(s) that appears on the vehicle title: [REDACTED]			
Selling dealer/city/state: PINES PONTIAC-GMC TRUCK, PEMBROKE PINES, FL			
Primary Servicing dealer/city/state: PINES PONTIAC-GMC TRUCK,			
Acquired as <input checked="" type="checkbox"/> new <input type="checkbox"/> used <input type="checkbox"/> demo <input type="checkbox"/> leased		Is the vehicle in your possession? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	
Purchase/lease date: 06/30/06		Mileage at purchase/lease:	
First repair attempt date: 09/24/07		First repair attempt mileage: 21500	
How often is the vehicle used for business purposes (percentage): 0 %		Number of vehicles owned or leased by the business:	Transmission type: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual
Has the vehicle been in an accident/had body damage? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no			Date of accident: 09/24/07
Description of damage: Front end of vehicle smashed.			

SECTION 3: DESIRED OUTCOME (Describe what you want done to resolve your concern)

Customer would like to have the vehicle Repurchased.
--

Please complete the missing information in the box below and on page 2.

VEHICLE IDENTIFICATION NUMBER 1G2ZH158164 [REDACTED]	
Lienholder/Leasing Company _____	Phone Number _____
Account Number _____	

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:				
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
Vehicle lost steering, power steering failure.		1		yes
ABS system turned off, lost control of vehicle.		1		yes

Total days out of service for all problems: _____

Signature of Titled Owner(s) _____ Date _____

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 copies 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
Customer Claim Form**

Case number: PGM0835011
Contact Date: 03/04/08
Start Date: 03/04/08

Please make any necessary corrections to the information below, print 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: [REDACTED]		
Mailing address: [REDACTED]		
City: Sunny Isles	State: FL	Zip code: [REDACTED]
Day phone: [REDACTED]	Evening phone:	Cell phone:
Fax:		E-mail address:

SECTION 2: VEHICLE INFORMATION

Make: Pontiac/GMC	Model: G6	Year: 2006	Current mileage: 21500
Name(s) that appears on the vehicle title: [REDACTED]			
Selling dealer/city/state: PINES PONTIAC-GMC TRUCK, PEMBROKE PINES, FL			
Primary Servicing dealer/city/state: PINES PONTIAC-GMC TRUCK,			
Acquired as <input checked="" type="checkbox"/> new <input type="checkbox"/> used <input type="checkbox"/> demo <input type="checkbox"/> leased		Is the vehicle in your possession? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	
Purchase/lease date: 06/30/06		Mileage at purchase/lease:	
First repair attempt date: 09/24/07		First repair attempt mileage: 21500	
How often is the vehicle used for business purposes (percentage): 0 %		Number of vehicles owned or leased by the business:	Transmission type: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual
Has the vehicle been in an accident/had body damage? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no			Date of accident: 09/24/07
Description of damage: Front end of vehicle smashed.			

SECTION 3: DESIRED OUTCOME (Describe what you want done to resolve your concern)

Customer would like to have the vehicle Repurchased.
--

Please complete the missing information in the box below and on page 2.

VEHICLE IDENTIFICATION NUMBER 1G2ZH158164 [REDACTED]	
Lienholder/Leasing Company _____	Phone Number _____
Account Number _____	

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:				
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
Vehicle lost steering, power steering failure.		1		yes
ABS system turned off, lost control of vehicle.		1		yes

Total days out of service for all problems: _____

Signature of Titled Owner(s) _____ Date _____

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 copies 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

March 4, 2008

LU'ANDREA DUDLEY
PONTIAC/GMC
P O BOX 33172
DETROIT MI 48232

Re:m09 PGM0835011: Bosque vs Pontiac/GMC Division 1G2ZH158164 [REDACTED]

Dear Madam/Sir:

The customer listed above has completed the *Customer Claim Form (CCF)*, and the case is officially open in the BBB AUTO LINE program. Enclosed you will find an updated *CCF* and any support documentation provided by the customer. Please note that for Florida and California cases and cases opened via mail, support documentation may not have been supplied by the customer. When received, this information will be forwarded to you under separate cover.

Please review the customer's claim and submit any documentation you may have pertaining to this claim as soon as possible. We will contact you within the next couple of days to discuss the claim, explain our telephone settlement efforts, which we may utilize prior to arbitration and offer our assistance in the settlement process. If you resolve the dispute, or if you believe that any portion of claim is not eligible for arbitration, please contact me at 800.334.2406.

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

Sincerely,

Rhonda Eakins at Extension 240

Council of Better Business Bureaus, Inc.

4200 Wilson Boulevard, Suite 800 • Arlington, VA • 22203-1838 • Phone 800.955.5100 • Fax: 703.247.9700



BBB AUTO LINE

MANUFACTURER RESPONSE FORM

Case Number: PGM0835011

Start Date: 03/04/08

Customer Name: [REDACTED]

State: FL

VIN: 1G2ZH158164 [REDACTED]

Probable Hearing Location: Miami Lakes

This claim is

☐ IN Warranty

☐ OUT of Warranty

Has the customer contacted you regarding the claim?

☒ YES

☐ NO

Is the VIN listed above correct?

☐ YES

☐ NO

If you checked NO, please indicate the correct VIN:

Customer Contact Info:

SETTLEMENT INFORMATION

What, if anything, are you willing to offer the customer to settle this dispute? Please include as much detail as possible (e.g., dealership name for repairs, specific dollar figures, etc.).

Has this offer been communicated to the customer? ☐ YES ☐ NO

If you checked YES, please indicate the customer's response below:

☐ The customer accepted the offer on ____/____/____

☐ The customer rejected the offer on ____/____/____

☐ The customer has not indicated a response to the offer.

If the customer accepts this offer, **when will the settlement be performed?** Please indicate a specific performance date or time frame: _____

ARBITRATION INFORMATION

Please list customer requests that you feel are ineligible for arbitration and explain why.

Please write your position as to the cause of each problem listed on the *Customer Claim Form*.

Please indicate the decision you request the arbitrator to render:

List the amount of any over allowance/negative equity: \$_____

I will participate

☐ By phone

☐ In person

☐ In writing

Return this form as soon as possible

To: _____ Completed by: _____ Date: ____/____/____

BBB AUTO LINE

Future contact: _____

Fax: 703.247.9700

Phone: _____ Fax: _____

Council of Better Business Bureaus, Inc.

4200 Wilson Boulevard, Suite 800 · Arlington, VA · 22203-1838 · Phone 800.955.5100 · 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:

$$\begin{array}{lcl} \text{Use} & & \text{Vehicle purchase} \\ \text{Deduction/} & = & \text{price or gross} \\ \text{Payment} & = & \frac{\text{\# miles attributable to the customer}}{100,000} \times \text{capitalized cost} \\ & & \text{at the time of the arbitration hearing} \end{array}$$

- ♦ 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 FLORIDA LEMON LAW

Motor Vehicle Warranty Enforcement Act

The following is a brief explanation of most relevant provisions of the Florida lemon law. The complete text of the lemon law can be found at Florida Stat. Ann. Section 681.10 *et seq.*

To obtain a "Consumer Guide to the Florida Lemon Law," or speak with someone about the Lemon Law, consumers in Florida may call the Florida Department of Agriculture & Consumer Services's Lemon Law Hotline at 1-800-321-5366, or 1-850-488-2221 for consumers outside Florida.

VEHICLES COVERED

The Florida lemon law covers cars and trucks that are sold in Florida to transport persons or property. This includes demonstrators, recreational vehicles (other than the living facilities), and also leased vehicles if the lessee is responsible for repairs. The Florida lemon law does not cover vehicles run only on tracks, off-road vehicles, trucks over 10,000 pounds G.V.W., motorcycles, mopeds, or the living facilities of recreational vehicles.

CONSUMERS COVERED

The lemon law covers any of the following:

1. The purchaser, other than for purposes of resale, or the lessee, of a vehicle primarily used for personal, family or household purposes;
2. Any person to whom such vehicle is transferred for the same purposes during the duration of the Lemon Law Rights Period; or
3. Any other person entitled by the terms of the warranty to enforce the obligations of the warranty.

Subsequent owners are covered if the vehicle is transferred from one consumer to another during the Lemon Law Rights Period (24 months from original delivery).

VEHICLE CONVERTERS

The lemon law applies to vehicle converters.

PROBLEMS COVERED THE FLORIDA LEMON LAW

The lemon law covers vehicle nonconformities. A nonconformity is defined as a defect or condition that substantially impairs the use, value or safety of a vehicle.

This does not include a defect or condition that results from an accident, abuse, neglect, modification, or alteration of the vehicle by persons other than the manufacturer or its authorized service agent.

This information is not intended as legal advice. Please direct specific questions to your legal counsel.
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Florida

LEMON LAW RIGHTS PERIOD

The Lemon Law Rights Period established by the lemon law is the period ending 24 months after the date of original delivery of the vehicle to a consumer.

MANUFACTURER'S DUTY TO REPAIR

If a motor vehicle does not conform to the warranty and the consumer first reports the problem to the manufacturer or its authorized service agent during the Lemon Law Rights Period, the manufacturer or its authorized service agent shall repair the motor vehicle, even if the repairs are made after the Lemon Law Rights Period.

FINAL REPAIR ATTEMPT

The lemon law gives the manufacturer the right to a final repair attempt after there are 3 repair attempts for the same nonconformity or after the vehicle has been out of service for 15 days or more for the repair of one or more nonconformities.

After three repair attempts:

After three attempts have been made to repair the same nonconformity, the consumer must give written notice to the manufacturer, by registered or express mail, of the need to repair the nonconformity.

After the manufacturer receives the consumer's notice by registered or express mail, the manufacturer must respond within 10 days and give the consumer the opportunity to have the vehicle repaired at a reasonably accessible repair facility within a reasonable time after the consumer's receipt of the response.

After the vehicle is delivered to that facility, the manufacturer must correct the nonconformity within 10 days.*

*For recreational vehicles purchased or leased on or after October 1, 1997, the manufacturer has 45 days (not 10) to correct the nonconformity.

The requirement for the manufacturer to be given a final repair attempt does not apply if the manufacturer does not properly respond to the consumer within 10 days of receipt of the consumer's notice, or if it does not perform the repairs within the prescribed time periods.

After 15 days out of service:

If the motor vehicle is out of service by reason of repair of one or more nonconformities by the manufacturer or its authorized service agent for a cumulative total of 15 or more days, exclusive of down time for routine maintenance prescribed by the owner's manual, the consumer must give written notice to the manufacturer by registered or express mail.

After receiving the registered or express mail notice from the consumer, the manufacturer or its agent has an opportunity to inspect or repair the vehicle.

This information is not intended as legal advice. Please direct specific questions to your legal counsel.

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Florida

MANUFACTURER'S DUTY TO REPURCHASE OR REPLACE A VEHICLE

If the manufacturer or its authorized service agent cannot conform a vehicle to its warranty by repairing or correcting any nonconformity after a reasonable number of attempts, the manufacturer must either repurchase or replace the vehicle. The consumer has a right to choose repurchase rather than replacement.

REASONABLE NUMBER OF REPAIR ATTEMPTS

It is presumed that a reasonable number of repair attempts have been made if, during the Lemon Law Rights Period, either:

1. The same nonconformity has been subject to repair at least three times by the manufacturer or its authorized service agent, plus a final attempt by the manufacturer after receiving the registered or express mail notice from the consumer, and the nonconformity continues to exist; or
2. The vehicle has been out of service by reason of repair of one or more nonconformities by the manufacturer or its authorized service agent for a cumulative total of 30* or more days, exclusive of down time for routine maintenance prescribed by the owner's manual. The manufacturer must have had the opportunity for a final repair attempt as described above. The 30 and 60 day periods may be extended if repair services are not available because of war, invasion, strike, fire, flood, or natural disaster.

*For recreational vehicles purchased or leased on or after October 1, 1997, the days out of service is 60 (not 30).

Regulations define "repair attempt" as the replacement of a component, or some adjustment made, to correct a substantial defect or condition covered by the manufacturer's warranty. An examination of a reported defect or condition, without a subsequent adjustment or component replacement, may be considered a repair attempt if it is later shown that repair work was justified. Examination or repair performed by anyone other than the manufacturer or its authorized service agent is not considered a repair attempt.

Regulations define "out-of-service day" as any day, including weekends and holidays, when the vehicle is left at an authorized service agent or manufacturer's designated repair facility for an examination or repair of one or more substantial defects or conditions covered by the manufacturer's warranty. The days for each visit start on the day the vehicle is brought in to the repair facility and end on the day the work is completed. If the vehicle is left at the repair facility for routine maintenance, repair of minor defects, or repairs to defects first reported after the lemon law rights period expired, the days will not be considered as out-of-service days.

DISPUTE RESOLUTION

The lemon law provisions requiring repurchase or replacement of a nonconforming motor vehicle do not apply to a consumer who has not first used a dispute settlement procedure if:

1. The procedure has been certified by the Division of Consumer Services as complying with 16 C.F.R. Part 703 and the lemon law and regulations; and
2. At the time of the vehicle's acquisition, the manufacturer informed the consumer in writing how and where to file a claim with the procedure.

TIME PERIOD FOR FILING CLAIMS

If a manufacturer participates in a certified dispute settlement procedure, the consumer must file a claim with the certified procedure no later than 60 days after the expiration of the Lemon Law Rights Period.

A consumer may file a claim with the Florida New Motor Vehicle Arbitration Board if:

1. The certified procedure does not render a decision within 40 days of filing;
2. The consumer is not satisfied with the certified procedure's decision or the manufacturer's compliance with the decision; or
3. The manufacturer does not participate in a certified procedure.

The claim must be filed with the Florida New Motor Vehicle Arbitration Board no later than 60 days after the expiration of the Lemon Law Rights Period or 30 days after the final action of a certified procedure, whichever date occurs later.

REMEDIES UNDER THE FLORIDA LEMON LAW

REPURCHASE OF OWNED VEHICLE

Basic Repurchase Amount

The Florida lemon law provides that the manufacturer must refund the following amounts when repurchasing a vehicle under the lemon law:

1. *Purchase price of the vehicle.* This is the cash price for the vehicle, inclusive of any allowance for a trade-in vehicle;
2. *Collateral charges.* These are reasonably-incurred additional charges to a consumer wholly incurred as a result of the acquisition of the vehicle. They include, but are not limited to:
 - a. sales taxes and title charges;
 - b. manufacturer-installed or agent-installed items or service charges;
 - c. earned finance charges; and
3. *Reasonably incurred incidental charges.* These are reasonable costs to the consumer that are directly caused by the nonconformity of the vehicle.

“Purchase price” excludes debt from a previous transaction. “Allowance for trade-in vehicle” means the net trade-in allowance as reflected in the purchase contract if acceptable to the consumer and the manufacturer. If that amount is not acceptable to both parties, then the trade-in allowance is an amount equal to the retail price of the trade-in vehicle as reflected in the NADA Official Used Car Guide (Southeastern Edition) or NADA Recreation Vehicle Appraisal Guide, whichever is applicable, in effect at the time of the trade-in. The manufacturer is responsible for providing the applicable NADA book.

The refund will be paid to the consumer and lienholder of record, if any, as their interests may appear.

Deductions From Amount Paid to Purchaser

The Florida lemon law provides that the following deduction must be made as a reasonable offset for the vehicle’s use:

$$\begin{array}{rcl} \text{use} & \text{number of miles attributable to a consumer} & \text{vehicle} \\ \text{deduction} = & \text{up to the date of the arbitration hearing} & \text{X purchase} \\ & \text{-----} & \text{price} \\ & 120,000* & \end{array}$$

*For recreational vehicles purchased on or after October 1, 1997, the denominator is 60,000 (not 120,000).

REPURCHASE OF LEASED VEHICLE

Basic Repurchase Amount

The Florida lemon law provides that the manufacturer must refund the following amounts when repurchasing a leased vehicle under the lemon law:

To the lessee:

1. *Lessee Cost.* This is the total deposit and rental payments previously paid to the lessor for the leased vehicle, excluding debt from a previous transaction;
2. *Collateral charges.* These are reasonably-incurred additional charges to a consumer wholly incurred as a result of the acquisition of the vehicle. They include, but are not limited to, sales taxes and title charges, manufacturer-installed or agent-installed items or service charges, and earned finance charges; and
3. *Reasonably incurred incidental charges.* These are reasonable costs to the consumer that are directly caused by the nonconformity of the vehicle.

To the lessor:

The *Lease Price* MINUS the *Lessee Cost*.

Lease Price means the capitalized cost and each of the following items to the extent not included in the capitalized cost:

1. The lessor's earned rent charges through the date of repurchase;
2. Collateral charges, if applicable;
3. Any fee paid to another to obtain the lease;
4. Any insurance or other costs expended by the lessor for the benefit of the lessee; and
5. An amount equal to state and local sales taxes, not otherwise included as collateral charges, paid by the lessor when the vehicle was initially purchased.

Deductions From Amount Paid to Lessee

The Florida lemon law provides that the following deduction must be made as a reasonable offset for the vehicle's use:

$$\text{use deduction} = \frac{\text{number of miles attributable to a consumer up to the date of the arbitration hearing}}{120,000*} \times \text{vehicle purchase price}$$

*For recreational vehicles leased on or after October 1, 1997, the denominator is 60,000 (not 120,000).

This information is not intended as legal advice. Please direct specific questions to your legal counsel.
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REPLACEMENT

When replacing a vehicle under the Florida lemon law, the manufacturer must provide a new vehicle that is identical or *reasonably equivalent* to the vehicle to be replaced, as that vehicle existed at the time of purchase.

“Reasonably equivalent” means that the manufacturer’s suggested retail price (“M.S.R.P.”) of the replacement vehicle does not exceed 105% of the M.S.R.P. of the vehicle to be replaced. In the case of a recreational vehicle, the retail price of the replacement vehicle will not exceed 105% of the purchase price of the recreational vehicle to be replaced.

The Florida lemon law also provides that the manufacturer must refund to the consumer the following amounts when replacing a vehicle under the lemon law:

1. *Collateral charges.* These are reasonably incurred additional charges to a consumer wholly incurred as a result of the acquisition of the vehicle. They include, but are not limited to:
 - a. sales taxes and title charges;
 - b. manufacturer-installed or agent-installed items or service charges;
 - c. earned finance charges; and
2. *Reasonably incurred incidental charges.* These are reasonable costs to the consumer that are directly caused by the nonconformity of the vehicle.

The consumer must pay a reasonable offset for the vehicle’s use in accordance with the formula set out above.

FLORIDA : 8/1/2005
Overallowance / Incentives / Negative Equity Form

Customer



Request # **71-608249058**

BBB # **PGM0835011**

PURCHASE PRICE: <i>(From dealer Bill of Sale) -- (Selling Price)</i>	(+) 22680.00
MSRP: <i>(From BARS Invoice)</i>	(-) 22680.00
DIFFERENCE:	(=) 0

TRADE ALLOWANCE: <i>(from dealer Bill of Sale)</i>	(+) N/A
<i>Include vehicle retail, accessories and mileage adjustment figures, and attach NADA pages to file.</i>	
NADA Retail Value for:	
VEHICLE:	
ACCESSORIES:	(-) N/A
MILEAGE ADJUSTMENT:	
OVER ALLOWANCE: <i>(Trade more than NADA)</i>	(=) N/A

PAYOFF: <i>(If dealer added negative equity into contract, do not subtract)</i>	(=) N/A
--	----------------

PURCHASE PRICE <i>(From dealer Bill of Sale) – (before tax, tag, etc.)</i>	(+) 22680.00
GM CARD POINTS:	DO NOT INCLUDE
INCENTIVES (from BARS): <i>(Do not include fuel fill credit, dealer incentives or GM card credited back to customer)</i> 1: 2: 3: TOTAL INCENTIVES <i>(Not included in Purchase Price)</i>	(-) 0
OVERALLOWANCE: <i>(From above)</i>	(-) 0
NEGATIVE EQUITY: <i>(If NOT shown in contract))</i>	(-) 0

Actual price of Vehicle that should be presented to BBB for ATA	(=) 22680.00
--	---------------------

2006 G6 - GT COUPE		PONTIAC/GMC DIVISION
41U BLACK	/V6G	GENERAL MOTORS CORPORATION
19C EBONY		100 RENAISSANCE CENTER
ORDER NO. JVRR9Z/TRE	STOCK NO.	DETROIT MI 48243-1114
VIN 1G2 ZH15 81 64		VEHICLE INVOICE 20D20013320
*****		*****16*17053S
MODEL & FACTORY OPTIONS	MSRP	INV AMT RETAIL - STOCK
2ZH37 G6 - GT COUPE	21165.00	20000.93 INVOICE 03/20/06
AP3 REMOTE VEHICLE STARTER SYSTEM	190.00	157.70 SHIPPED 03/20/06
FE9 50-STATE EMISSIONS	N/C	N/C EXP I/T 04/03/06
FR9 AXLE RATIO 3.29	N/C	N/C INT COM 04/03/06
LX9 ENGINE, 3.5L V6 SFI	N/C	N/C PRC EFF 03/20/06
MX0 AUTOMATIC TRANSMISSION	0.00	0.00 KEYS G2968 G2968
PGF (4) WHLS, 17" BLACK CHROMETECH	700.00	581.00 WFP-S QTR OPT-1
R6J CUSTOMER DIALOG NETWORK	0.00	16.50 BANK: COMERICA BA
R8K *****	N/C	N/C CHG-TO 17-053

SHIP WT: 3347
HP: 32.9
GMS: 20794.48
SUPPLR: 21726.86
MRM: 22680.00
DAN: 0121
MEMO 1027.75

TOTAL MODEL & OPTIONS	22055.00	20756.13	ACT 231	20719.48
DESTINATION CHARGE	625.00	625.00	H/B 261	661.65
LAM DEALER CONTRIBUTION		220.55	ADV 261	220.55
LAM GROUP CONTRIBUTION		220.55	EXP 65A	220.55
TOTAL	22680.00	21822.23	PAY 310	21822.23
MEMO: TOTAL LESS HOLDBACK AND				
APPROX WHOLESALE FINANCE CREDIT		20843.10		

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.

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



Julia Rebollo/Austin/GM1

12/15/2008 10:31 AM

To Iris Cruz/Austin/GM1@GM1

cc

bcc

Subject Fw: [REDACTED] - DACO case #656885

----- Forwarded by Julia Rebollo/Austin/GM1 on 12/15/2008 09:31 AM -----



jcdeliz@jgl.com

12/11/2008 12:59 PM

To julia_rebollo@gmexpert.com

cc

Subject [REDACTED] - DACO case #656885

Dear Ms. Rebollo:

Please be advised that we do not have a file in connection to the case of reference.
Kindly send us copy of any documents you have on your end (particularly, any DACO Resolution).

Thanks!

Regards,
Juan Carlos Deliz, Esq.
Jimenez, Graffam & Lausell
PO Box 366104
San Juan, Puerto Rico 00936-6104
Tel. 787-767-1030
Fax 787-751-4068
E-Mail: jcdeliz@jgl.com

Iris Cruz/Austin/GM1

10/07/2008 11:20 AM

To jcdeliz@jgl.com

cc

bcc

Subject [REDACTED] DACO claim # [REDACTED]

Dear Mr. Deliz,

I have recently received the inspection report for one of our DACO cases. Just as a precaution i'm sending you a copy. It is the following case.

Contact name: [REDACTED]

DACO claim # [REDACTED]

Vehicle: 2006 Pontiac G6

Notes: Customer did not show up to inspection



inspection report.TIF

Sincerely,

Iris Cruz

DACO

Legal Research Specialist

Iris Cruz

Legal Research Specialist

Minacs, An Aditya Birla Group Company

GM Cars Austin

7401 E. Ben White Blvd, Bldg 3

Austin, TX 78741

Phone: 866-790-5700 ext 41188

Facsimile: 866-485-8256

Email: iris_cruz@gmexpert.com

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Estado Libre Asociado de Puerto Rico

Departamento de Asuntos del Consumidor

Puerto Rico

- Fax: [REDACTED]

FECHA: 5 DE JUNIO DE 2008

RE: [REDACTED]

QUERELLA NUM: [REDACTED]

Ante este Departamento se ha presentado una querella contra usted y/o la compañía que usted representa. Acompañamos copia de la querella.

Los anejos que fueron acompañados al radicar la querella y que obran en el expediente, pueden ser examinados por usted en nuestras oficinas durante horas laborables.

Oportunamente se le notificará la fecha para inspección (de ser necesaria) o para vista de mediación o administrativa. El término que usted tiene para contestar la querella es de **cinco (5) días con antelación a la fecha de la vista de mediación o administrativa.**

La contestación a la querella deberá contener su nombre completo, dirección física y postal, número de teléfono y número de querella. Podrá anejar a su contestación copia de todo documento que sirva de apoyo a su alegación, sin perjuicio de producir documentos adicionales durante el procedimiento. Deberá estar firmada y fechada por usted y/o su representante legal. Si se trata de una corporación, sólo podrá comparecer representada por un abogado autorizado a ejercer la profesión legal en Puerto Rico.

Será obligación de las partes notificar al Departamento cualquier cambio de dirección o teléfono. El incumplimiento de esta obligación conllevará la imposición de los costos en los que el Departamento incurra para notificar a dicha parte.

Si se determina que usted y/o la compañía que usted representa ha incurrido en alguna violación o ha incumplido la Ley, Reglamento u Orden que este Departamento administra, será multado según las disposiciones reglamentarias establecidas para la naturaleza de la infracción cometida.

QUERELLA NUM: [REDACTED]

**CERTIFICO HABER ENVIADO COPIA FIEL Y EXACTA DEL
PRESENTE DOCUMENTO A LAS SIGUIENTES PERSONAS:**

**BARRANQUITAS AUTO CORP.
D/B/A BENITEZ, BUICK, PONTIAC, GMC
P.O. BOX 8789
BARRIO BAIRAO
CAGUAS, P.R. 00625**

**GENERAL MOTORS CORP. Y/O
GM CARS AUSTIN
7401 EAST BEN WHITE BLVD,
BLDG F AUSTIN
TX 78741**

**LOSADA AUTO TRUCK, INC.
P.O. BOX 3158
BAYAMON, P.R. 00960-3158**

**GENERAL MOTORS ACCEPTANCE CORP.
P.O. BOX 9066285
SAN JUAN, P.R.
00906-6285**

**GENERAL MOTORS ACCEPTANCE CORP.
P.O. BOX 4009
SAN JUAN, P.R. 00936**

FIRMA: y.N.C.



PAGINA ____ DE ____

Estado Libre Asociado de Puerto Rico

Departamento de Asuntos del Consumidor

DIR(c)/REV. 02/97

REGION BAYAMÓN, APARTADO 1498 BAYAMÓN, PUERTO RICO 00960

(787) 780-7001 - FAX: (787) 787-3219

WWW.DACO.GOBIERNO.P.R.FECHA DE RADICACIÓN: 5 DE JUNIO DE 2008

NÚMERO DE QUERRELLA: _____

Partes Envoleltas en la Querrela

QUERELLANTE: _____

NÚM. SEGURO SOCIAL: _____

DIRECCIÓN FÍSICA: _____

AVE. HOSTOS BAYAMÓN, P.R. _____

DIRECCIÓN POSTAL: _____

TELÉFONOS: HOGAR: _____

TRABAJO: _____

FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: BARRANQUITAS AUTO CORP. D/B/A BENITEZ, BUICK, PONTIAC, GMC

DIRECCIÓN FÍSICA: _____

DIRECCIÓN POSTAL: P.O. BOX 8789 BARRIO BAIROA, CAGUAS, P.R. 00625TELÉFONOS: TRABAJO: 746-6262 FAX: 743-7101 E-Mail _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: GENERAL MOTORS, CORP. Y/O GM CARS AUSTIN

DIRECCIÓN FÍSICA: _____

DIRECCIÓN POSTAL: 7401 EAST BEN WHITE BLVD, BLDG F, AUSTIN TX 78741TELÉFONOS: TRABAJO: (787) 767-1030 / 1000 FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: LOSADA AUTO TRUCK, INC.DIRECCIÓN FÍSICA: CARR. #2 BAYAMÓN, P.R.DIRECCIÓN POSTAL: P.O. BOX 3158 BAYAMÓN, P.R. 00960-3158

TELÉFONOS: TRABAJO: _____ FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____



Estado Libre Asociado de Puerto Rico

Departamento de Asuntos del Consumidor

PAGINA ____ DE ____

FECHA DE RADICACIÓN: 5 DE JUNIO DE 2008

NÚMERO DE QUERRELLA: _____

Partes Envoleltas en la Querrela

QUERELLANTE: _____ NÚM. SEGURO SOCIAL: _____

DIRECCIÓN FÍSICA: _____

DIRECCIÓN POSTAL: _____

TELÉFONOS: HOGAR: _____ TRABAJO: _____ FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: GENERAL MOTORS ACCEPTANCE CORP.

DIRECCIÓN FÍSICA: _____

DIRECCIÓN POSTAL: P.O. BOX 9066285 SAN JUAN, P.R. 00906-6285P.O. BOX 4009 SAN JUAN, P.R. 00936TELÉFONOS: TRABAJO: 782-7933 FAX: _____ E-Mail _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: _____

DIRECCIÓN FÍSICA: _____

DIRECCIÓN POSTAL: _____

TELÉFONOS: TRABAJO: _____ FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: _____

DIRECCIÓN FÍSICA: _____

DIRECCIÓN POSTAL: _____

TELÉFONOS: TRABAJO: _____ FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____



Estado Libre Asociado de Puerto Rico

Departamento de Asuntos del Consumidor

VM/REV 02/97

PAGINA ____ DE ____

Fecha: 5 DE JUNIO DE 2008

Querella Núm.: _____

COMPRAVENTA DE BIEN MUEBLE – VEHÍCULO DE MOTOR

QUERELLANTE	QUERELLADO
[REDACTED]	<u>BARRANQUITAS AUTO CORP.</u> <u>LOSADA AUTO TRUCK, INC.</u> <u>GENERAL MOTOR ACCEPTANCE CORP.</u>

VEHÍCULO EN CONTROVERSI: Número de Serie: 1G2ZG558964

Marca: PONTIAC Modelo: G-6 Tablilla: GUW-088

(X) Nuevo () Usado Fecha Compraventa: 5 DE JULIO DE 2006 Garantía: SI

Precio: \$ 31,851.00 Millaje Compraventa: _____ Millaje al Radicar la Querella: 19,900 APR.

Fecha en que surgieron los defectos: VARIAS Fecha en que Reclamó: CONSTANTES

¿Cuántas veces han intentado repararlo? CUATRO (4) ¿Está al día en los pagos al banco? SI

NATURALEZA DE LA QUERELLA:

- () Vicios Ocultos (X) Vicio en el Consentimiento () Incumplimiento de garantía (X) Reparación Defectuosa
() Lluvia Ácida () Licencia (X) Otro: VEHICULO DEFECTUOSO, DIAGNOSTICO INADECUADO, SERVICIOS

NO SATISFACTORIOS

BREVE DESCRIPCIÓN DE LOS HECHOS Y REMEDIO SOLICITADO POR EL QUERELLANTE:

- 1) LA PARTE QUERELLANTE EXPONE QUE COMPRO EL VEHICULO DE MOTOR DESCRITO EN LA FIRMA QUERELLADA
- 2) QUE LA UNIDAD PRESENTO PROBLEMA Y/O DESPERFECTOS:
 - AL GIRAR EL GUIA HACIA LA DERECHA SE LE TRANCABA; GUIA DURO
 - Y AL COGER LAS CURVAS, DIFICULTAD AL GIRAR
 - INDICADOR Y EL "POWER-STEERING" SE TRANCABA
 - LE CORRIGIERON ALINEAMIENTO
 - RUIDO EN EL AREA DEL DELANTERO
- 3) LA FIRMA QUERELLADA LE HIZO LAS PRUEBAS REQUERIDAS DE CABLERIA Y LE REALIZARON TABLA DE CODIGO.
- 4) Y LE REEMPLAZARON EL "STEERING WHEEL".
- 5) LA FIRMA QUERELLADA LE REALIZO CUATRO (4) SERVICIOS DE REPARACION.
- 6) ACTUALMENTE EL VEHICULO DE MOTOR PRESISTE CON LOS DESPERFECTOS MENCIONADOS.
- 7) LA UNIDAD DESCRITA ES SU UNICO MEDIO DE TRANSPORTACION.
- 8) QUE LOS SERVICIOS DE REPARACION Y LA UNIDAD NO CUMPLEN CON LAS EXPECTATIVAS.

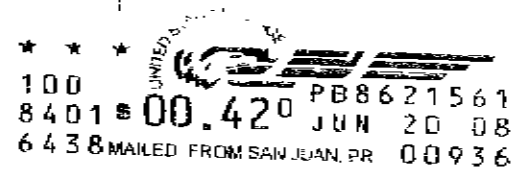
REMEDIO SOLICITADO: QUE SE INVESTIGUE, CAMBIO DE UNIDAD SIN COSTO ADICIONAL O RESOLUCION DEL CONTRATO MAS EL REEMBOLSO DEL DINERO INTEGRO O LO QUE EN DERECHO PROCEDA.

Por la presente hago constar bajo juramento que toda la información que he suministrado es correcta, verdadera, que me consta de propio conocimiento y que los mismos hechos no están ante la consideración de un Tribunal u otra agencia administrativa.

Consultor

Querellante

Departamento de Asuntos del Consumidor
Apartado 1498
Bayamon, P.R. 00960



GENERAL MOTORS CORP. Y/O
GM CARS AUSTIN
7401 EAST BEN WHITE BLVD,
BLDG F AUSTIN
TX 78741

78741+6800





Iris Cruz/Austin/GM1
05/26/2009 04:06 PM

To jcdeliz@jgl.com
cc
bcc
Subject DACO Claim: 300018718 update

Hello Mr. Deliz,

I hope this note finds you well. Thank you very much for keeping us well informed as to the latest developments on our DACO cases.

I'm seeking a status update on the following case:

Customer: [REDACTED]
DACO Claim: [REDACTED]

Thank you for your assistance in this matter.

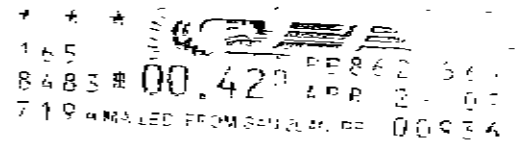
Iris Cruz
Business Resource Center

Minacs, An Aditya Birla Group Company

7401 E. Ben White Blvd, Bldg 3
Austin, TX 78741
Phone: 866-790-5700 ext 41188
Facsimile: 866-485-8256
Email: iris_cruz@gmexpert.com

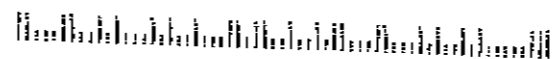
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Departamento de Asuntos del Consumidor
 Oficina Regional de Bayamón
 Apartado 1498 Bayamón, PR 00960



General Motors, Corp.
 GM Cars Austin
 7401 East Ben White Blvd.
 Bldg. F
 Austin, Tx 78741

78741+6800



**Estado Libre Asociado de Puerto Rico****Departamento de Asuntos del Consumidor**

Bayamón, Puerto Rico

Tel. Fax

Querellante(s)**QUERELLA NÚM.**

V.

Querellado(s)

Barranquitas Auto, Corp. D/B/A Benítez,
GMC, General Motors, Corp., GM Cars Austin,
General Motors Acceptance, Corp., Losada
Auto Truck, Inc.

RESOLUCIÓN SUMARIA

El día 30 de julio de 2008 el personal investigativo de este Departamento llevó a cabo una inspección sobre la controversia: Vehículo Defectuoso, Diagnóstico Inadecuado, Servicio No Satisfactorio. Como resultado de dicha inspección se encontró lo siguiente:

- ☒ La parte querellante no se presentó, falta de interés.
- ☐ El equipo funciona adecuadamente.
- ☐ El problema o defecto que presenta el equipo no constituye uno que sea atribuible al querellado.
- ☐ La controversia fue resuelta satisfactoriamente.
- ☐ No existe práctica engañosa o ilegal en la actuación del querellado.

CONCLUSIÓN DE DERECHO

Conforme a los hechos antes expresados y al amparo de la *Regla 10 del Reglamento de Procedimientos Adjudicativos* de este Departamento se desestima la querella de epígrafe.

Por todo lo cual, este Departamento emite la siguiente:

ORDEN

Se ordena el **CIERRE Y ARCHIVO**, sin perjuicio, de la querella de epígrafe.

Aquella parte afectada por la presente Resolución podrá solicitarle a este Departamento una Reconsideración dentro del término de veinte (20) días naturales contados a partir de la fecha de archivo en autos de la notificación de esta Resolución. En su lugar, podrá acudir directamente al Tribunal de Apelaciones, en revisión judicial, dentro del término de treinta (30) contados desde la fecha del archivo en autos de la copia de la notificación de la resolución. *Aponte Correa v. Policía de Puerto Rico, 142 D.P.R. 9 (1996).*

Si la parte afectada opta por solicitar la reconsideración de la Resolución emitida, la misma deberá ser por escrito, consignándose claramente la palabra Reconsideración como título y en el sobre de envío. La solicitud de Reconsideración tiene que ser dirigida a la siguiente dirección: Departamento de Asuntos del Consumidor, Oficina Regional de Bayamón, Atención División Legal, Apartado 1498, Bayamón, PR 00960. Copia de dicha solicitud deberá ser enviada a la otra(s) parte(s). De no hacerlo así, la presente Resolución advendrá final y firme.

Si el Departamento no considera la solicitud de Reconsideración dentro de los quince (15) de recibida, la parte afectada podrá solicitar revisión judicial al Tribunal de Apelaciones dentro de los treinta (30) días siguientes.

Si el Departamento tomare alguna determinación sobre la solicitud de Reconsideración, deberá resolver la misma dentro de los noventa (90) días de recibida. La parte afectada por la decisión del Departamento podrá solicitar revisión judicial al Tribunal de Apelaciones dentro de los treinta (30) días contados desde la fecha del archivo en autos de la copia de la notificación de la resolución resolviendo la solicitud de Reconsideración.

Si el Departamento dejare de tomar alguna acción dentro de los noventa (90) días mencionados perderá jurisdicción sobre dicha solicitud de Reconsideración y el término para solicitar revisión judicial empezará a contarse a partir de la expiración del plazo de noventa (90) días, salvo que el Departamento por justa causa y previo al vencimiento del término de noventa

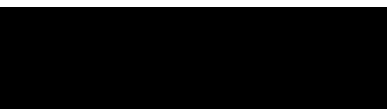
(90) días prorrogue dicho término por un periodo que no excederá de treinta (30) días adicionales.

En Bayamón, Puerto Rico, a 15 de abril de 2009.

Luis G. Rivera Marín
Secretario

Madeline Rucure Blas
Juez Administrativo

CERTIFICO: Que se archivó en autos la presente Resolución y se envió copia fiel y exacta de la misma a las siguientes personas:



Bayamón, PR

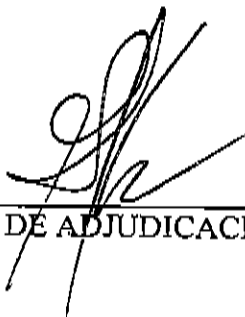
Barranquitas Auto, Corp. D/B/A
Benítez, Buick, Pontiac, GMC
PO Box 8789
Barrio Bairoa
Caguas, PR 00625

General Motors, Corp.
GM Cars Austin
7401 East Ben White Blvd.
Bldg. F
Austin, Tx 78741

Losada Auto Truck, Inc.
PO Box 3158
Bayamón, PR 00960-3158

General Motors Acceptance, Corp.
PO Box 3066285
San Juan, PR 00906-6285

General Motors Acceptance, Corp.
PO Box 4009
San Juan, PR 00936

A handwritten signature in black ink, consisting of stylized, overlapping loops and lines, positioned above a horizontal line.

DIVISIÓN DE ADJUDICACIONES

Privileged and Confidential Information**CASE ASSESSMENT – LEGAL – DACO Claim 300018718**

By: Miguel Alvear

State: PR

Customer Name: [REDACTED]

Service Request: 71-640211577 GM Legal File No.: 656885

Vehicle ID No.: 1G2ZG558964 [REDACTED]
 Year, Make & Model: 2006 Pontiac G6
 Lien holder: GMAC ☒ Other ☐: N/A

In Service Date: 07/05/2006

Vehicle is: New BAC Code: 165485

Vehicle Purchased Used on: N/A

DVM requests Purchase Price of

involvement?: No Vehicle: \$31,851.00

Was TAC contacted for this vehicle (Y/N)? : No

VEHICLE REPAIR HISTORY☒ Steering

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/30/06	39487	5	3,326	C/S steering wheel locked when turning right, at that time steering wheel was hard and there was a power steering message in radio and an alarm sound. Description: Motor and controller assembly, electronic power steering replace (motor). Dlr verified programming, ok, dlr found assistance motor inop, dlr replaced steering wheel assistance motor.
03/12/07	42900	10	8,101	C/S steering wheel locks and poser steering message is displayed. Description: Wiring and/or connector, steering/suspension/ride control repair or replace. Dlr removed power steering eng wiring and closed it since it was causing false connection. *** Dlr performed alignment due to part replacement. Toe out of specs. Toe, front adjust. Dlr aligned toe according to specs.
03/27/07	43299	16 (5 day court transp: 04/05/07 to 04/10/07)	8,184	C/S there is noise in front left area. Cause: rack and pinion bad. Description: Gear assembly, power steering replace. Dlr found rack and pinion bad, dlr replaced rack and pinion since it had play in tie rod ends (terminals).
10/17/07	48593	*	12,774	C/S when making turns steering wheel locks and does not turn, veh was towed into dlrshp. Cause: dlr checked veh with Tech 2 and found code C0545. Description: Column assembly, steering replace. Dlr checked veh with Tech 2 and found code C0545, dlr proceeded to run tests in wiring and then performed said code's table and document #1241508 having to replace steering wheel torque input sensor because the reference was erratic and unstable, thus causing the concern. C/S when attempting to leave parking lot power steering locks. Cause: dlr checked and ran veh at both normal and cold temperature but dlr was unable to duplicate concern during test. Description: No trouble found.

☒ Electrical

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/17/07	48593	7	12,774	C/S veh does not turn on. Cause: battery has checked box (celda cruzada) code 3C3NU-S1-BB Description: Battery one replace. Dlr found battery with checked box code 3C3NU-S1-BB, dlr replaced battery since dlr charged battery but it did not retain charge reaching only 10.54 Volts.

☒ Body/Trim

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
12/27/05	128012	N/A	2	Before cust ownership: HOBELMAN PORT SERVICES 9240 BLOUNT ISLAND BLVD JACKSONVILLE, FL 32226-4028 A1230 - FRONT SIDE DOOR REFINISH/CLEAR COAT - RIGHT SIDE Tech notes: rt frt door scratched. WE REFINISHED RT FRT DOOR DAMAGE

☒ Other

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
03/27/07	L33733	N/A	200	GMVIS ONLY: Z2080 - ROADSIDE SERVICE (TOWING)
03/27/07	R66797	N/A	200	GMVIS ONLY: Z2080 - ROADSIDE SERVICE (TOWING)

Number of repair attempts: 6
Total days out of service during customer's ownership: 38

PERTINENT VEHICLE INFORMATION PROVIDED BY DEALER SERVICE MGR(S)

PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

CAC SR 71-498557538:

Concern with power steering when wheel turns it locks, cust advsd had concern for second time, dlr had performed repairs but concern reoccurred, cust was seeking trade, veh used for both personal and business reasons. Dlr performed repairs, cust was satisfied with veh, SR closed satisfied.

TRANSLATION OF CUSTOMER'S COMPLAINTS LISTED IN DACO CLAIM

Cust states steering wheel gets stuck when turning right, is stiff; difficulty to make turns, power steering locks; dlr performed alignment; there is noise in front. Dlr has performed tests in cables, replaced steering wheel, dlr has performed four repairs, veh continues to have concerns, this is cust's only means of transp, cust states repair svc and veh do not meet expectations. Cust seeks that issue be investigated, trade without further charge, contract cancellation with reim, or what may proceed by right.

TRANSLATION OF DACO TECHNICAL INSPECTION REPORT

Cust did not show.

RECOMMENDATION

RATIONALE

REASON FOR REMOVAL

CRS FINAL OFFER:

DATE:

OFFER TO CUST: \$ ATTORNEY FEES: \$ OR INCLUSIVE OFFER: \$

**PLAINTIFF'S FINAL
DEMAND:**

DATE:

AMOUNT TO CUST: \$ ATTORNEY FEES: \$ OR INCLUSIVE OFFER: \$
--

TEAM MANAGER APPROVING:

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 Quadrateer.
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.

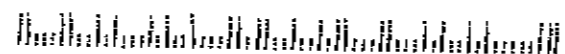
*** SES light is to be captured under affected component above.**

*Departamento de Asuntos del Consumidor
Oficina Regional de Bayamón
Apartado 1498
Bayamón, Puerto Rico 00960*

★ ★ ★
110
8432 \$ 00.42⁰ PB8621561
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**GENERAL MOTORS, CORP. Y/O
GM CARS AUSTIN
7401 EAST BEN WHITE BLVD.
BLDG F
AUSTIN, TX 78741**

78741+6800 C056



**Estado Libre Asociado de Puerto Rico****Departamento de Asuntos del Consumidor**

Región Bayamon, Apartado 1498 Bayamón, Puerto Rico 00960

QUERELLANTE:

[REDACTED]

QUERELLA NUM:

[REDACTED]

QUERELLADOS:**BARRANQUITAS AUTO, CORP. D/B/A
BENITEZ, BUICK, PONTIAC, GMC;
GENERAL MOTORS, CORP. Y/O
GM CARS AUSTIN;
GENERAL MOTORS ACCEPTANCE, CORP.;
LOSADA AUTO TRUCK, INC.****SOBRE:****Vehículo Defectuoso,
Diagnóstico Inadecuado,
Servicio no Satisfactorio.****+++++ NOTIFICACION DE INFORME TECNICO +++++**

Conforme a la Regla 15 del Procedimiento Adjudicativo, se incluye el Informe de Inspección de la querella de referencia.

Las partes tendrán quince (15) días para presentar por escrito, las objeciones que tengan al mismo e indicar si desean que esté presente durante la vista administrativa o de mediación el investigador que realizó la inspección.

Las objeciones deberán ser por escrito, en forma precisa y específica y deberá estar dispuesto a presentar prueba técnica que refute dicho informe. Para ello podrá contratar por cuenta propia, los peritos que estime pertinente. No basta alegar su inconformidad.

En Bayamón, Puerto Rico, 25 de septiembre de 2008.

Certifico haber enviado copia a las partes correspondientes:

[REDACTED]

BAYAMÓN, PUERTO RICO [REDACTED]

**BARRANQUITAS AUTO, CORP. D/B/A
BENITEZ, BUICK, PONTIAC, GMC
PO BOX 8789
BARRIO BAIROA
CAGUAS, PUERTO RICO 00625****GENERAL MOTORS, CORP. Y/O
GM CARS AUSTIN
7401 EAST BEN WHITE BLVD.
BLDG F
AUSTIN, TX 78741****LOSADA AUTO TRUCK, INC.
PO BOX 3158
BAYAMÓN, PUERTO RICO 00960-3158**

GENERAL MOTORS ACCEPTANCE, CORP.
PO BOX 3066285
SAN JUAN, PUERTO RICO 00906-6285

GENERAL MOTORS ACCEPTANCE, CORP.
PO BOX 4009
SAN JUAN, PUERTO RICO 00936

Remitido por correo hoy: 2 octubre 2008

Vilma Vázquez
DESPACHADO POR:

**Estado Libre Asociado de Puerto Rico****Departamento de Asuntos del Consumidor**

Bayamón, Puerto Rico

Tel. [REDACTED]

Fax. [REDACTED]

www.daco.gobierno.pr**INFORME DE INVESTIGACIÓN DE QUERELLAS DE VEHÍCULO DE MOTOR**

QUERELLANTE: [REDACTED]

QUERELLADO(S): Barranquitas Auto

NÚMERO DE QUERELLA: [REDACTED]

TÉCNICO: Sr. Martín Núñez

FECHA DE INSPECCIÓN: 30 de julio de 2008.

COMPARECIENTES A LA INSPECCIÓN Y LA POSICIÓN QUE OCUPAN:

1. Antonio Barbosa, Gerente Servicio Losada Auto.
2. Lic. Héctor Sostre, Representante Legal de Losada Auto.


DESCRIPCIÓN DEL VEHÍCULOMARCA: **Pontiac**MODELO: **G - 6**AÑO: **2006**TABLILLA: **GUW - 088**

MILLAJE: ---

Tipo de Inspección: () – Visual () – Prueba de Carretera**HALLAZGOS DE LA INSPECCION**

Querellante no compareció a la inspección.

Se recomienda el cierre y archivo de la querella por falta de interés del querellante.


Firma del Investigador



jcdeliz@jgl.com
10/07/2008 02:49 PM

To iris_cruz@gmexpert.com
cc
bcc
Subject Re: [REDACTED] DACO claim # [REDACTED]

Dear Ms. Cruz:

Thanks, this inspection report is very helpful.

Regards,
Juan Carlos Deliz, Esq.
Jimenez, Graffam & Lausell
PO Box 366104
San Juan, Puerto Rico 00936-6104
Tel. 787-767-1030
Fax 787-751-4068
E-Mail: jcdeliz@jgl.com

iris_cruz@gmexpert.com

10/07/2008 11:20 AM

To jcdeliz@jgl.com
cc
Subject [REDACTED] DACO claim # [REDACTED]

Dear Mr. Deliz,

I have recently received the inspection report for one of our DACO cases. Just as a precaution i'm sending you a copy. It is the following case.

Contact name: [REDACTED]
DACO claim #: [REDACTED]
Vehicle: 2006 Pontiac G6
Notes: Customer did not show up to inspection

Sincerely,

Iris Cruz

DACO
Legal Research Specialist

Iris Cruz
Legal Research Specialist
Minacs, An Aditya Birla Group Company

GM Cars Austin
7401 E. Ben White Blvd, Bldg 3
Austin, TX 78741
Phone: 866-790-5700 ext 41188
Facsimile: 866-485-8256
Email: iris_cruz@gmexpert.com

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the communication from your system. Thank you. inspection report.TIF

Iris Cruz/Austin/GM1

10/07/2008 11:20 AM

To jcdeliz@jgl.com

cc

bcc

Subject [REDACTED] DACO claim # [REDACTED]

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I have recently received the inspection report for one of our DACO cases. Just as a precaution i'm sending you a copy. It is the following case.

Contact name: [REDACTED]

DACO claim # [REDACTED]

Vehicle: 2006 Pontiac G6

Notes: Customer did not show up to inspection



inspection report.TIF

Sincerely,

Iris Cruz

DACO

Legal Research Specialist

Iris Cruz

Legal Research Specialist

Minacs, An Aditya Birla Group Company

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7401 E. Ben White Blvd, Bldg 3

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Estado Libre Asociado de Puerto Rico

Departamento de Asuntos del Consumidor

Bayamón, Puerto Rico

Fax:

www.daco.gobierno.pr

QUERELLANTES:

QUERELLA NÚM.

QUERELLADOS:

**BARRANQUITAS AUTO CORP. D/B/A
BENITEZ, BUICK, PONTIAC, GMC;
GENERAL MOTORS, CORP. Y/O
GM CARS AUSTIN;
GENERAL MOTORS ACCEPTANCE, CORP.;
LOSADA AUTO TRUCK, INC.**

SOBRE:

**Vehículo Defectuoso, Diagnóstico
Inadeacuado, Servicio no
Satisfactorio.**

CITACIÓN A INSPECCION

Se cita el **30 de julio de 2008, a las 10:30 a.m.** Firma Querellada, **Losada Auto Truck, Carr. #2, Hato Tejas, Bayamón, Puerto Rico**, fecha y lugar donde se efectuará una inspección con relación a la querella de epígrafe.

La Ley número 170 del 12 de agosto de 1988, según enmendada, dispone que el Departamento deberá resolver las querellas en un termino de seis (6) meses, desde su radicación, salvo en circunstancias excepcionales. Las reglas de procedimiento de querellas tienen el propósito de asegurar la solución justa, rápida y económica de las querellas presentadas. Por lo tanto no se considerará ninguna suspensión de la **inspección citada** a través de la presente, a menos que la misma se base en justa causa. La solicitud de suspensión deberá hacerse por escrito y radicarse por lo menos **cinco (5) días laborables con antelación** a la fecha que le ha sido notificada. Una copia de dicha solicitud deberá notificarse a la parte contraria dentro del mismo término señalada. Toda solicitud de transferencia y suspensión de inspección deberá ser fundamentada y expresará por lo menos tres (3) fechas alternas dentro de los siguientes treinta (30) días a partir de la fecha señalada para la vista. Además, deberá acompañar con la solicitud de suspensión toda aquella evidencia pertinente (citación previa del tribunal, certificado médico, pasajes, etc).

Se apercibe que en el supuesto de que la parte querellante no comparezca a la inspección citada, **procederemos al cierre y archivo de la querella por falta de interés.** De ser el querellado quien no comparezca, **impondremos sanciones al amparo del Artículo 13 y 14 de la Ley Número 5 de 23 de abril de 1973,** según enmendada. En la inspección a realizar las partes deberán brindar toda su cooperación,

INSPECTOR: Martín Núñez

Certifico haber enviado copia a las partes correspondientes a sus direcciones de récord:

BAYAMON, PR

Citación a Inspección

Querella Núm. [REDACTED]

Página 2

BARRANQUITAS AUTO CORP. D/B/A
BENITEZ, BUICK, PONTIAC, GMC
P O BOX 8789 BARRIO BAÍROA
CAGUAS, PR 00625

GENERAL MOTORS, CORP. Y/O
GM CARS AUSTIN
7401 EAST BEN WHITE BLVD
BLDG F
AUSTIN, TX 78741

LOSADA AUTO TRUCK, INC.
P O BOX 3158
BAYAMON, PR 00960-3158

GENERAL MOTORS ACCEPTANCE, CORP.
PO BOX 9066285
SANB JUAN, PUERTO RICO 00906-6285

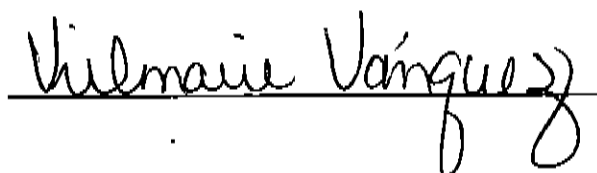
GENERAL MOTORS ACCEPTANCE, CORP.
PO BOX 4009
SAN JUAN, PUERTO RICO 00936

Nota:

Los representantes enviados por los querellados, deberán comparecer con autoridad para tomar decisiones. En el caso de corporaciones, éstos deberán traer una resolución emitida bajo el sello corporativa por la Junta de Directores, que le acredite con delegación y autoridad.

Remitido por correo hoy, 1 de julio de 2008.

Despachado por:



Nota: El vehículo deberá estar en el lugar de la inspección.

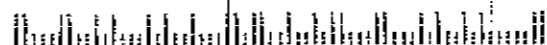
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DEPARTAMENTO DE ASUNTOS DEL CONSUMIDOR
OFICINA REGIONAL DE BAYAMON,
APARTADO 1498
BAYAMON PR 00960

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GM CARS AUSTIN
7401 EAST BEN WHITE BLVD
BLDG F
AUSTIN, TX 78741

78741+6800





Iris Cruz/Austin/GM1
12/18/2008 12:00 PM

To: jcdeliz@jgl.com
cc
bcc
Subject: Fw: [REDACTED] DACO case #656885

Hello Mr. Deliz,

Hope this note finds you well. I just need a quick update on 2 cases.

Consumer: Hamel J. Borges Guerra
DACO case #: 100037527

Initial hearing was set for October 16th 2008 due to bad weather it was rescheduled. DACO has notified us that the case is pending resolution however we never received the new hearing date notification. Please be kind enough to send any updates available.

Consumer: [REDACTED]
DACO case #: [REDACTED]

For this one we received the inspection report in October which stated consumer did not show up to inspection and made the recommendation to close claim for lack of interest. The inspection report was promptly emailed to you then. Enclosed is the initial email that was sent with the inspection report, the inspection report itself and your initial reply. DACO has verbally verified that this claim has been dismissed. However we have not received the resolution. If there are any updates please forward those to us. thank you.



inspection report.TIF email LC sending insp. report.TIF - Re- Michael Ruiz Rosario DACO.tif

I am also including the latest correspondence from DACO.



12.15.08 DACo ltr.TIF

Should you need anything else, please do not hesitate to contact me.

Iris Cruz
Business Resource Center

Minacs, An Aditya Birla Group Company

7401 E. Ben White Blvd, Bldg 3
Austin, TX 78741
Phone: 866-790-5700 ext 41188
Facsimile: 866-485-8256
Email: iris_cruz@gmexpert.com

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and may be illegal. If you received this in error, please contact the sender and delete the message from your system.

----- Forwarded by Iris Cruz/Austin/GM1 on 12/18/2008 11:47 AM -----



Julia Rebollo/Austin/GM1

12/15/2008 10:31 AM

To Iris Cruz/Austin/GM1@GM1

cc

Subject Fw: [REDACTED] DACO case #656885

----- Forwarded by Julia Rebollo/Austin/GM1 on 12/15/2008 09:31 AM -----



jcdeliz@jgl.com

12/11/2008 12:59 PM

To julia_rebollo@gmexpert.com

cc

Subject [REDACTED] - DACO case #656885

Dear Ms. Rebollo:

Please be advised that we do not have a file in connection to the case of reference.
Kindly send us copy of any documents you have on your end (particularly, any DACO Resolution).

Thanks!

Regards,
Juan Carlos Deliz, Esq.
Jimenez, Graffam & Lausell
PO Box 366104
San Juan, Puerto Rico 00936-6104
Tel. 787-767-1030
Fax 787-751-4068
E-Mail: jcdeliz@jgl.com



jcdeliz@jgl.com
10/07/2008 02:49 PM

To iris_cruz@gmexpert.com
cc
bcc
Subject Re: [REDACTED] DACO claim # [REDACTED]

Dear Ms. Cruz:

Thanks, this inspection report is very helpful.

Regards,
Juan Carlos Deliz, Esq.
Jimenez, Graffam & Lausell
PO Box 366104
San Juan, Puerto Rico 00936-6104
Tel. 787-767-1030
Fax 787-751-4068
E-Mail: jcdeliz@jgl.com

iris_cruz@gmexpert.com

10/07/2008 11:20 AM

To jcdeliz@jgl.com
cc
Subject [REDACTED] DACO claim # [REDACTED]

Dear Mr. Deliz,

I have recently received the inspection report for one of our DACO cases. Just as a precaution i'm sending you a copy. It is the following case.

Contact name: [REDACTED]
DACO claim #: [REDACTED]
Vehicle: 2006 Pontiac G6
Notes: Customer did not show up to inspection

Sincerely,

Iris Cruz

DACO
Legal Research Specialist

Iris Cruz
Legal Research Specialist
Minacs, An Aditya Birla Group Company

GM Cars Austin
7401 E. Ben White Blvd, Bldg 3
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Phone: 866-790-5700 ext 41188
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the communication from your system. Thank you. inspection report.TIF



Iris Cruz/Austin/GM1
03/05/2009 03:55 PM

To jcdeliz@jgl.com
cc
bcc
Subject DACO Claim [REDACTED]

Hello Mr. Deliz,

I hope this note finds you well. It seems like DACO is passing a long correspondence very consistently now. Thank you for forwarding all pertinent DACO information to us.

I need a status update on one of our pending cases with DACO Bayamon. It is the following:

Cust name: [REDACTED]
VIN: 1G2ZG558964 [REDACTED]
DACO Claim [REDACTED]

As always I appreciate all your efforts in keeping us informed.

Sincerely,

Iris Cruz
Business Resource Center

Minacs, An Aditya Birla Group Company

7401 E. Ben White Blvd, Bldg 3
Austin, TX 78741
Phone: 866-790-5700 ext 41188
Facsimile: 866-485-8256
Email: iris_cruz@gmexpert.com

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Departamento de Asuntos del Consumidor
 Oficina Regional de Bayamón
 Apartado 1498
 Bayamón, Puerto Rico 00960

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GENERAL MOTORS, CORP. Y/O
GM CARS AUSTIN
7401 EAST BEN WHITE BLVD.
BLDG F
AUSTIN, TX 78741

78741+6800 COS6



**Estado Libre Asociado de Puerto Rico****Departamento de Asuntos del Consumidor**

Región Bayamón, Apartado 1498 Bayamón, Puerto Rico 00960

QUERELLANTE:**QUERELLA NUM:****QUERELLADOS:****BARRANQUITAS AUTO, CORP. D/B/A
BENITEZ, BUICK, PONTIAC, GMC;
GENERAL MOTORS, CORP. Y/O
GM CARS AUSTIN;
GENERAL MOTORS ACCEPTANCE, CORP.;
LOSADA AUTO TRUCK, INC.****SOBRE:****Vehículo Defectuoso,
Diagnóstico Inadecuado,
Servicio no Satisfactorio.****+++++ NOTIFICACION DE INFORME TECNICO +++++**

Conforme a la Regla 15 del Procedimiento Adjudicativo, se incluye el Informe de Inspección de la querella de referencia.

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Las objeciones deberán ser por escrito, en forma precisa y específica y deberá estar dispuesto a presentar prueba técnica que refute dicho informe. Para ello podrá contratar por cuenta propia, los peritos que estime pertinente. No basta alegar su inconformidad.

En Bayamón, Puerto Rico, 25 de septiembre de 2008.

Certifico haber enviado copia a las partes correspondientes:

BAYAMÓN, PUERTO RICO

**BARRANQUITAS AUTO, CORP. D/B/A
BENITEZ, BUICK, PONTIAC, GMC
PO BOX 8789
BARRIO BAIROA
CAGUAS, PUERTO RICO 00625**

**GENERAL MOTORS, CORP. Y/O
GM CARS AUSTIN
7401 EAST BEN WHITE BLVD.
BLDG F
AUSTIN, TX 78741**

**LOSADA AUTO TRUCK, INC.
PO BOX 3158
BAYAMÓN, PUERTO RICO 00960-3158**

GENERAL MOTORS ACCEPTANCE, CORP.
PO BOX 3066285
SAN JUAN, PUERTO RICO 00906-6285

GENERAL MOTORS ACCEPTANCE, CORP.
PO BOX 4009
SAN JUAN, PUERTO RICO 00936

Remitido por correo hoy: 2 octubre 2008

Valmire Viquez
DESPACHADO POR



Estado Libre Asociado de Puerto Rico
Departamento de Asuntos del Consumidor

Bayamón, Puerto Rico
Tel. () Fax. ()
www.daco.gobierno.pr

INFORME DE INVESTIGACIÓN DE QUERELLAS DE VEHÍCULO DE MOTOR

QUERELLANTE:

QUERELLADO(S): Barranquitas Auto

NÚMERO DE QUERELLA:

TÉCNICO: Sr. Martín Núñez

FECHA DE INSPECCIÓN: 30 de julio de 2008.

COMPARECIENTES A LA INSPECCIÓN Y LA POSICIÓN QUE OCUPAN:

1. Antonio Barbosa, Gerente Servicio Losada Auto.
2. Lic. Héctor Sostre, Representante Legal de Losada Auto.

DESCRIPCIÓN DEL VEHÍCULO

MARCA: Pontiac

MODELO: G - 6

AÑO: 2006

TABLILLA: GUW - 088

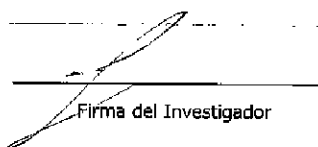
MILLAJE: ---

Tipo de Inspección: () - Visual () - Prueba de Carretera

HALLAZGOS DE LA INSPECCION

Querellante no compareció a la inspección.

Se recomienda el cierre y archivo de la querrela por falta de interés del querellante.


Firma del Investigador

**EMPRESAS LOSADA**

FACSIMILE TRANSMISSION

NUMBER OF PAGES (INCLUDING THIS PAGE)

10

DATE

6/30/08

TO:

NAME:

General Motors

FIRM:

FAX NUMBER:

1 866 - 398 - 3249

FROM:

NAME:

Razul Santiago

FIRM:

☒ LOSADA AUTO TRUCK, INC.
☐ HEAVY PARTS CENTER, INC.

ADDRESS:

BOX 3158 BAYAMON, P.R. 00960

IF YOU DO NOT RECEIVE ALL THESE PAGES CALL (787) 783-9190 AS SOON AS POSSIBLE.
OUR RECEIVING NUMBERS ARE (787) 780-0525 AND (787) 269-6880.

MESSAGE:

Buen día. Adjunto copia de expediente del VIN #
64 [REDACTED]. Caso de caso.

Francis

Cordialmente

Razul Santiago

787 785-9190 ext 2279

408034

48593

Losada Auto

LOSADA AUTO TRUCK INC.
P.O. BOX 3158, BAYAMON, P.R. 00960-3158
VENTAS - PIEZAS - SERVICIO: (787) 785-9190
TOLL FREE: 1-800-981-9780
www.losadaauto.com

INVOICE

PAGE 1

BAYAMON, PR

HOME: [REDACTED] BUS: [REDACTED]

SERVICE ADVISOR: 3409 JANICE REYES

COLOR	YEAR	MAKE/MODEL		VIN	LICENSE	MILEAGE IN / OUT	TAG
GRIS	06	PONTIAC G6		1G2ZG558964		12774/12774	T015
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
05JUL06 DD		05JUL2007	09:12	23OCT07	80.71	CASH	23OCT07
R.O. OPENED		READY	OPTIONS: DLR:BENITEZ ENG:3.5 Liter				

10:21 17OCT07 09:34 23OCT07

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A INSPECCION GM GOODWRENCH

CAUSE: SE LE REALISO INSPECCION

MA22 INSPECCION GM GOODWRENCH

2139 GOLDILLA, JORGE L. LIC#: [REDACTED]

CPL2 0.00

0.00

0.00

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00

12774 SE LE REALISO INSPECCION

B W CLIENTE INDICA UNIDAD NO PRENDE

CAUSE: BATERIA CON SELDA CRUSADA CODE 3C3NU-S1-BB

N0110 BATTERY ONE REPLACE

2139 GOLDILLA, JORGE L. LIC#: [REDACTED]

WA294 0.50

(N/C)

1 19001627 BATTERY

(N/C)

FC: 3C3NU

PART#: 19001627

COUNT: 1

CLAIM TYPE:

AUTH CODE:

PJ

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE B: 0.00

12774 BATERIA CON SELDA CRUSADA CODE 3C3NU-S1-BB SE LE REMPLASO BETERIA

YA QUE SE LE DIO CARGA Y NO LA RETUBO LLEGANDO SOLAMENTE A 10.54 V.

C W CLIENTE INDICA UNIDAD AL TRATAR DE SALIR DE ESTACIONAMIENTO EL

POWER STERING SE TRANCA

CAUSE: SE CHEQUEO Y SE CORRIO UNIDAD A TEMPERATURA NORMAL Y FRIO Y LA

UNIDAD NO DUPLICO LA CONDICION EN MOMENTOS DE PRUEVAS.

998 NO TROUBLE FOUND

2139 GOLDILLA, JORGE L. LIC#: 19503

ACEPTO QUE LOSADA AUTO TRUCK INC., GARANTIZARA LAS REPARACIONES QUE SE EFECTUARON, ASI COMO LOS MATERIALES Y PIEZAS QUE SE UTILIZARON EN LAS MISMAS, POR UN PERIODO DE 30 DIAS O MIL (1,000) MILLAS, LO QUE OCURRA PRIMERO. EXCEPTO EN EL CASO DE LAS SIGUIENTES REPARACIONES, QUE NO CONLLEVAN GARANTIA: (1) TODA REPARACION ELECTRICA INSTALADA (2) TODO TRABAJO DE BALANCE Y/O ALINEAMIENTO DE GOMAS (3) REMPLAZO DE CORREAS, GOMAS DE RADIADORES Y HOJAS DE LIMPIA PARABRISAS. HE RECIBIDO EL VEHICULO EN BUENAS CONDICIONES CON LAS REPARACIONES SEÑALADAS.

X

RECIBI Y CONFORME

FECHA

EL NUMERO DE FACTURA CORRESPONDE AL NO. DE LA HOJA DE TRABAJO (WORK ORDER)



GMC

TOTAL NETO	
LABOR	
PIEZAS	
GAS, ACEITE	
SUBLET	
MISC.	
TOTAL	
TOTAL A PAGAR	

408034

48593

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INVOICE

PAGE 2

BAYAMON, PR

HOME:

BUS:

SERVICE ADVISOR: 3409 JANICE REYES

COLOR			YEAR		MAKE/MODEL		VIN		LICENSE		MILEAGE IN / OUT		TAG		
GRIS			06		PONTIAC G6		1G2ZG558964				12774/12774		T015		
DEL. DATE		PROD. DATE		WARR. EXP.		PROMISED		PO NO.		RATE		PAYMENT		INV. DATE	
05JUL06 DD				05JUL2007		09:12 23OCT07				80.71		CASH		23OCT07	

R.O. OPENED READY OPTIONS: DLR: BENITEZ ENG: 3.5 Liter

10:21 17OCT07 09:34 23OCT07

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
			CPL2	0.00		0.00	0.00
PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE C:	0.00

12774 SE CHEQUEO Y SE CORRIO UNIDAD A TEMPERATURA NORMAL Y FRIO Y LA UNIDAD NO DUPLICO LA CONDICION EN MOMENTOS DE PRUEVAS.

D QUALITY CONTROL

CAUSE: QUALITY OK

Q QUALITY

	2189	CPL2	0.00			0.00	0.00
PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE D:	0.00

12774 QUALITY OK

ACEPTO QUE LOSADA AUTO TRUCK INC. GARANTIZARA LAS REPARACIONES QUE SE EFECTUARON, ASI COMO LOS MATERIALES Y PIEZAS QUE SE UTILIZARON EN LAS MISMAS, POR UN PERIODO DE 30 DIAS O MIL (1.000) MILLAS, LO QUE OCURRA PRIMERO, EXCEPTO EN EL CASO DE LAS SIGUIENTES REPARACIONES, QUE NO CONLIEVAN GARANTIA: (1) TUBIA REPARACION ELECTRICA INSTALADA (2) TODO TRABAJO DE BALANCE Y/O ALINEAMIENTO DE GOMAS (3) RIEMPLAZO DE CORREAS, GOMAS DE RADIADORES Y HOJAS DE LIMPIA PARABRISAS. HE RECIBIDO EL VEHICULO EN BUENAS CONDICIONES CON LAS REPARACIONES SEÑALADAS.

X

DEFICIA CONFIRMAR

FECHA

EL NUMERO DE FACTURA CORRESPONDE AL NO. DE LA HOJA DE TRABAJO (WORK ORDER)



GMC

	TOTAL NETO
LABOR	0.00
PIEZAS	0.00
GAS, ACEITE	0.00
SUBLET	0.00
MISC.	0.00
TOTAL	0.00
	0.00
	0.00
TOTAL A PAGAR	0.00

408034

43299

Losada Auto

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INVOICE

DUPLICATE 1
PAGE 1

BAYAMON, PR

HOME: [REDACTED] BUS: [REDACTED]

SERVICE ADVISOR: 3409 JANICE REYES

COLOR	YEAR	MAKE/MODEL		VIN	LICENSE	MILEAGE IN / OUT		TAG
GRIS	06	PONTIAC G6		1G2ZG558964		8184/8184		T9885
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED		PO NO.	RATE	PAYMENT	INV. DATE
05JUL06 DD		05JUL2007	10:48	10APR07		80.71	CASH	11APR07
R.O. OPENED		READY		OPTIONS: DLR:BENITEZ ENG:3.5 Liter				

16:08 27MAR07 10:33 11APR07

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A INSPECCION GM GOODWRENCH

CAUSE: INSPECCION GOOD WRENCH

MA22 INSPECCION GM GOODWRENCH

2680 MARTINEZ, DICKSON LIC#: [REDACTED]

CPL2 0.00

PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE A:	0.00
--------	------	--------	------	--------	------	---------------	------

8184 INSPECCION GOOD WRENCH

B QUALITY CONTROL

CAUSE: QUALITY OK

Q QUALITY

2189 CPL2 0.00

PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE B:	0.00
--------	------	--------	------	--------	------	---------------	------

8184 QUALITY OK

C W CLIENTE INDIAC UNIDAD COGIENDO CURVA EL GUIA SE TRANCA Y NO GIRA .

UNIDAD VINO EN GRUA

CAUSE: SE CHEQUEO UNIDAD CON EL TECH 2 Y SE ENCONTRO CODE C0545

E7680 COLUMN ASSEMBLY, STEERING REPLACE

2139 GOLDILLA, JORGE L. LIC#: [REDACTED]

WA294 1.80

1 15926870 COLUMN

FC: 6C

PART#: 15926870

COUNT: 1

CLAIM TYPE:

AUTH CODE:

PJ

(N/C)
(N/C)

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

ACEPTO QUE LOSADA AUTO TRUCK INC., GARANTIZARA LAS REPARACIONES QUE SE EFECTUARON, ASI COMO LOS MATERIALES Y PIEZAS QUE SE UTILIZARON EN LAS MISMAS, POR UN PERIODO DE 30 DIAS O MIL (1,000) MILLAS, LO QUE OCURRA PRIMERO, EXCEPTO EN EL CASO DE LAS SIGUIENTES REPARACIONES, QUE NO CONLLEVAN GARANTIA: (1) TODA REPARACION ELECTRICA INSTALADA (2) TODO TRABAJO DE BALANCE Y/O ALINEAMIENTO DE GOMAS (3) REEMPLAZO DE CORREAS, GOMAS DE RADIADORES Y HOJAS DE LIMPIA PARABRISAS. HE RECIBIDO EL VEHICULO EN BUENAS CONDICIONES CON LAS REPARACIONES SEÑALADAS.

X

FECHA

EL NUMERO DE FACTURA CORRESPONDE AL NO. DE LA HOJA DE TRABAJO (WORK ORDER)



GMC

TOTAL NETO	
LABOR	
PIEZAS	
GAS, ACEITE	
SUBLET	
MISC.	
TOTAL	
TOTAL A PAGAR	

408034

43299

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INVOICE

DUPLICATE 1
PAGE 2

BAYAMON, PR

HOME: BUS:

SERVICE ADVISOR: 3409 JANICE REYES

COLOR	YEAR	MAKE/MODEL		VIN	LICENSE	MILEAGE IN / OUT		TAG
GRIS	06	PONTIAC G6		1G2ZG558964		8184/8184		T9885
DEL. DATE		PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
05JUL06 DD			05JUL2007	10:48	10APR07	80.71	CASH	11APR07
R.O. OPENED		READY		OPTIONS: DLR:BENITEZ ENG:3.5 Liter				

16:08 27MAR07 10:33 11APR07

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

8184 SE CHEQUEO UNIDAD CON EL TECH 2 Y SE ENCONTRO CODE C0545 SE
PROCEDIO HACER PRUEVAS DE CABLERIA Y LUEGO SE LE REALISO TABLA DE DICHO
CODIGO Y EL DOCUMENTO #1241508 TENIENDO QUE REMPLASAR EL STEERING WHEEL
TORQUE INPUT SENSOR YA SE LE REFERENCIA ERA ERRATICA Y INESTABLE
PROVOCANDO LA CONDICION ALEGADA.

D** W TRANSPORTE DE CORTESIA

CAUSE: .
Z7901 COURTESY TRANSPORTATION FOR 1 DAY
3209WACR2 0.00 (N/C)
FC: 98 PART#: COUNT: 0
CLAIM TYPE:
AUTH CODE:
MJ

SUBL TRANSPORTE PO#

WACR2

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE D: 0.00 (N/C)

8184

E** W AUTO RENTADO CORTESIA DE G, VIN KL1TD66686B5

CAUSE: AUTO RENTADO DESDE 5 ABRIL HASTA 10 ABRIL 07

Z7905 COURTESY TRANSPORTATION
3209WACR2 0.00 (N/C)
FC: 98 PART#: COUNT: 0
CLAIM TYPE:
AUTH CODE:
MJ

SUBL AUTO RENTADO PO#

WACR2

(N/C)

ACEPTO QUE LOSADA AUTO TRUCK INC., GARANTIZARA LAS REPARACIONES QUE SE EFECTUARON, ASI COMO LOS
MATERIALS Y PIEZAS QUE SE UTILIZARON EN LAS MISMAS, POR UN PERIODO DE 30 DIAS O MIL (1,000) MILLAS, LO
QUE OCURRA PRIMERO, EXCEPTO EN EL CASO DE LAS SIGUIENTES REPARACIONES, QUE NO CONLLEVAN GARANTIA: (1)
TODA REPARACION ELECTRICA INSTALADA (2) TODO TRABAJO DE BALANCE Y/O ALINEAMIENTO DE GOMAS (3)
REEMPLAZO DE CORREAS, GOMAS DE RADIADORES Y HOJAS DE LIMPIA PARABRISAS, HE RECIBIDO EL VEHICULO EN
BUENAS CONDICIONES CON LAS REPARACIONES SEÑALADAS.

X

FECHA

EL NUMERO DE FACTURA CORRESPONDE AL NO. DE LA HOJA DE TRABAJO (WORK ORDER)



GMC

TOTAL NETO	
LABOR	
PIEZAS	
GAS, ACEITE	
SUBLET	
MISC.	
TOTAL	
TOTAL A PAGAR	

408034

43299

Losada Auto

LOSADA AUTO TRUCK INC.
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www.losadaauto.com

INVOICE

DUPLICATE 1
PAGE 3

BAYAMON, PR
HOME: [REDACTED]

BUS: [REDACTED]

SERVICE ADVISOR: 3409 JANICE REYES

COLOR	YEAR	MAKE/MODEL		VIN	LICENSE	MILEAGE IN / OUT		TAG
GRIS	06	PONTIAC G6		1G2ZG558964		8184/8184		T9885
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED		PO NO.	RATE	PAYMENT	INV. DATE
05JUL06 DD		05JUL2007	10:48	10APR07		80.71	CASH	11APR07
R.O. OPENED		READY		OPTIONS: DLR:BENITEZ ENG:3.5_Liter				
16:08	27MAR07	10:33		11APR07				
LINE	OPCODE	TECH	TYPE	HOURS	LIST		NET	TOTAL
PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE E:		0.00

8184 AUTO RENTADO DESDE 5 ABRIL HASTA 10 ABRIL 07

ACEITO QUE LOSADA AUTO TRUCK INC. GARANTIZARA LAS REPARACIONES QUE SE EFECTUARON, ASI COMO LOS MATERIALES Y PIEZAS QUE SE UTILIZARON EN LAS MISMAS, POR UN PERIODO DE 30 DIAS O MIL (1,000) MILLAS, LO QUE OCURRA PRIMERO, EXCEPTO EN EL CASO DE LAS SIGUIENTES REPARACIONES, QUE NO CONLLEVAN GARANTIA: (1) TODA REPARACION ELECTRICA INSTALADA (2) TODO TRABAJO DE BALANCE Y/O ALINEAMIENTO DE GOMAS (3) REEMPLAZO DE CORREAS, GOMAS DE RADIADORES Y HOJAS DE LIMPIA PARABRISAS. HE RECIBIDO EL VEHICULO EN BUENAS CONDICIONES CON LAS REPARACIONES SEÑALADAS.

X

FECHA

EL NUMERO DE FACTURA CORRESPONDE AL NO. DE LA HOJA DE TRABAJO (WORK ORDER)



GMC

	TOTAL NETO
LABOR	0.00
PIEZAS	0.00
GAS, ACEITE	0.00
SUBLET	0.00
MISC.	0.00
TOTAL	0.00
	0.00
	0.00
TOTAL A PAGAR	0.00

408034

42900

Losada Auto

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INVOICE

BAYAMON, PR

PAGE 1

HOME:

BUS:

SERVICE ADVISOR: 3409 JANICE REYES

COLOR			YEAR		MAKE/MODEL		VIN		LICENSE		MILEAGE IN / OUT		TAG			
GRIS			06		PONTIAC G6		1G2ZG558964				8101/8101		T312			
DEL. DATE			PROD. DATE		WARR. EXP.		PROMISED		PO NO.		RATE		PAYMENT		INV. DATE	
05JUL06 DD					05JUL2007		13:12 21MAR07				80.71		CASH		21MAR07	

R.O. OPENED

READY

OPTIONS: DLR:BENITEZ ENG:3.5 Liter

09:34 12MAR07 07:52 21MAR07

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A INSPECCION GM GOODWRENCH

MA22 INSPECCION GM GOODWRENCH

2680 MARTINEZ,DICKSON LIC#: 23495

CPL2 0.00

0.00

0.00

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00

8101 INSPECCION GOOD WRENCH

B W CLIENTE INDICA UNIDAD SE TRANCA EL GUIA Y SALE MENSAJE DE POWER

STERING

CAUSE: .

N6628 WIRING AND/OR CONNECTOR

STEERING/SUSPENSION/RIDE CONTROL REPAIR OR
REPLACE

2680 MARTINEZ,DICKSON LIC#:

WA294 0.50

(N/C)

FC: 6C

PART#: 15858368

COUNT: 1

CLAIM TYPE:

AUTH CODE:

PJ

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE B: 0.00

8101 SE SACO LA CABLERIA DEL MOTOR DE POWER STEERING Y SE CERRARON YA
QUE EL MISMO CAUSABA FALSA COCECION

C INSPECCION GM GOODWRENCH

MA22 INSPECCION GM GOODWRENCH

2680 MARTINEZ,DICKSON LIC#: 23495

CPL2 0.00

0.00

0.00

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

ACEPTO QUE LOSADA AUTO TRUCK INC., GARANTIZARA LAS REPARACIONES QUE SE EFECTUARON, ASI COMO LOS
MATERIALES Y PIEZAS QUE SE UTILIZARON EN LAS MISMAS, POR UN PERIODO DE 30 DIAS O MIL (1.000) MILLAS, LO
QUE OCURRA PRIMERO, EXCEPTO EN EL CASO DE LAS SIGUIENTES REPARACIONES, QUE NO CONLLEVAN GARANTIA: (1)
TODA REPARACION ELECTRICA INSTALADA (2) TODO TRABAJO DE BALANCE Y/O ALINEAMIENTO DE GOMAS (3)
REEMPLAZO DE CORREAS, GOMAS DE RADIADORES Y HOJAS DE LIMPIA PARABRISAS. HE RECIBIDO EL VEHICULO EN
BUENAS CONDICIONES CON LAS REPARACIONES SEÑALADAS.

X

FECHA

EL NUMERO DE FACTURA CORRESPONDE AL NO. DE LA HOJA DE TRABAJO (WORK ORDER)



GMC

TOTAL NETO	
LABOR	
PIEZAS	
GAS, ACEITE	
SUBLET	
MISC.	
TOTAL	
TOTAL A PAGAR	

408034

42900

Losada Auto

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INVOICE

PAGE 2

BAYAMON, PR

HOME: BUS:

SERVICE ADVISOR: 3409 JANICE REYES

COLOR	YEAR	MAKE/MODEL		VIN	LICENSE	MILEAGE IN / OUT	TAG	
GRIS	06	PONTIAC G6		1G2ZG558964		8101/8101	T312	
DEL. DATE		PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
05JUL06 DD			05JUL2007	13:12	21MAR07	80.71	CASH	21MAR07
R.O. OPENED		READY		OPTIONS: DLR:BENITEZ ENG:3.5 Liter				

09:34 12MAR07 07:52 21MAR07

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
8101	INSPECCION	GOOD	WRENCH				

D QUALITY CONTROL
CAUSE: QUALITY OK
Q QUALITY

1370 CPL2 0.00 0.00 0.00
PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE D: 0.00

8101 QUALITY OK

E** ALINEAMIENTO POR REEMPLAZO DE PIEZA

CAUSE: TOE FUERA DE ESP.

E2000 TOE, FRONT ADJUST

2009 MARTINEZ,REYNALDO LIC#: 22043

WA294 0.70

FC: PART#: COUNT:

CLAIM TYPE:

AUTH CODE:

(N/C)

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE E: 0.00

8101 TOE FUERA DE ESP. SE ALINEO TOE SEGUN ESP.

F W CLIENTE ALEGA RUIDO EN EL AREA DEL DELANTERO LADO IZQ EN EL TREN

CAUSE: RACK AND PINION MALO

E9740 GEAR ASSEMBLY, POWER STEERING REPLACE

2680 MARTINEZ,DICKSON LIC#:

WA294 2.50

1 15858368 GEAR

FC: 2E

PART#: 15858368

COUNT: 1

(N/C)

(N/C)

ACEPTO QUE LOSADA AUTO TRUCK INC., GARANTIZARA LAS REPARACIONES QUE SE EFECTUARON, ASI COMO LOS MATERIALES Y PIEZAS QUE SE UTILIZARON EN LAS MISMAS, POR UN PERIODO DE 30 DIAS O MIL (1,000) MILLAS, LO QUE OCURRA PRIMERO, EXCEPTO EN EL CASO DE LAS SIGUIENTES REPARACIONES, QUE NO CONLLEVAN GARANTIA: (1) TODA REPARACION ELECTRICA INSTALADA (2) TODO TRABAJO DE BALANCE Y/O ALINEAMIENTO DE GOMAS (3) REEMPLAZO DE CORRIAS, GOMAS DE RADIADORES Y HOJAS DE LIMPA PARABRISAS. HE RECIBIDO EL VEHICULO EN BUENAS CONDICIONES CON LAS REPARACIONES SEÑALADAS.

X EL NUMERO DE FACTURA CORRESPONDE AL NO. DE LA HOJA DE TRABAJO (WORK ORDER)



GMC

TOTAL NETO	
LABOR	
PIEZAS	
GAS, ACEITE	
SUBLET	
MISC.	
TOTAL	
TOTAL A PAGAR	

408034

42900

Losada Auto

LOSADA AUTO TRUCK INC.
P.O. BOX 3158, BAYAMON, P.R. 00960-3158
VENTAS - PIEZAS - SERVICIO: (787) 785-9190
TOLL FREE: 1-800-981-9780
www.losadaauto.com

INVOICE

PAGE 3

BAYAMON, PR

HOME: BUS

SERVICE ADVISOR: 3409 JANICE REYES

COLOR	YEAR	MAKE/MODEL	VIN		LICENSE	MILEAGE IN / OUT	TAG
GRIS	06	PONTIAC G6	1G2ZG558964			8101/8101	T312
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
05JUL06 DD		05JUL2007	13:12	21MAR07	80.71	CASH	21MAR07
R.O. OPENED		READY	OPTIONS: DLR:BENITEZ ENG:3.5_Liter				
09:34	12MAR07	07:52		21MAR07			
LINE OPCODE TECH TYPE HOURS				LIST NET TOTAL			

CLAIM TYPE:

AUTH CODE:

NS

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE F: 0.00

8101 RACK AND PINION MALO SE REREMPLAZO EL RACK AND PINION YA QUE EL MISMO TENIA JUEGO EN LOS TERMINALES

G** CPL2 CLIENTE AUTORIZA 10.00 GASOLINA 16 MAR07

99 MISCELLANEOUS

3209 CPL2 0.00

0.00 0.00

SUBL GASOLINA PO#

CPL2

10.00 10.00

PARTS: 0.00 LABOR: 0.00 OTHER: 10.00 TOTAL LINE G: 10.00

ACEPTO QUE LOSADA AUTO TRUCK INC. GARANTIZARA LAS REPARACIONES QUE SE EFECTUARON, ASI COMO LOS MATERIALES Y PIEZAS QUE SE UTILIZARON EN LAS MISMAS, POR UN PERIODO DE 30 DIAS O MIL (1,000) MILLAS. LO QUE OCURRA PRIMERO, EXCEPTO EN EL CASO DE LAS SIGUIENTES REPARACIONES, QUE NO CONLLEVAN GARANTIA: (1) TODA REPARACION ELECTRICA INSTALADA (2) TODO TRABAJO DE BALANCE Y/O ALINEAMIENTO DE GOMAS (3) REMPLAZO DE CORREAS, GOMAS DE RADIADORES Y HOJAS DE LIMPIA PARABRISAS. HE RECIBIDO EL VEHICULO EN BUENAS CONDICIONES CON LAS REPARACIONES SEÑALADAS.

X

FECHA

EL NUMERO DE FACTURA CORRESPONDE AL NO. DE LA HOJA DE TRABAJO (WORK ORDER)



GMC

	TOTAL NETO
LABOR	0.00
PIEZAS	0.00
GAS, ACEITE	0.00
SUBLET	10.00
MISC.	0.00
TOTAL	10.00
	0.00
	0.55
TOTAL A PAGAR	10.55

408034

39487

Losada Auto

LOSADA AUTO TRUCK INC.
P.O. BOX 3158, BAYAMON, P.R. 00980-3158
VENTAS - PIEZAS - SERVICIO: (787) 785-9190
TOLL FREE: 1 800 981 9780
www.losadaauto.com

INVOICE

PAGE 1

BAYAMON, PR

HOME: [REDACTED] BUS: [REDACTED]

SERVICE ADVISOR: 3409 JANICE REYES

COLOR	YEAR	MAKE/MODEL		VIN	LICENSE	MILEAGE IN / OUT	TAG
GRIS	06	PONTIAC G6		1G2ZG558964		3326/3326	T964
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
05JUL06 IS		05JUL2007	13:36	03NOV06	77.81	CASH	03NOV06

R.O. OPENED: 09:43 30OCT06 15:53 03NOV06
READY: 03NOV06
OPTIONS: DLR: BENITEZ ENG: 3.5 Liter

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL

A W CLIENTE INDICA UNIDAD SE TRANSITO EL GUIA AL VIRAR AL DERECHA . EN
ESE MOMENTO EL GUIA DURO Y UN MENSAJE EN EL RADIO DE POWER
STERING Y SONO UNA ALARMA .

CAUSE:

E7631 MOTOR AND CONTROLLER ASSEMBLY, ELECTRONIC

POWER STEERING REPLACE

2646 GARCIA, HECTOR LIC#: [REDACTED]

WA294 1.10

1 15775370 MOTOR

FC: 6C

PART#: 88967179

COUNT: 1

CLAIM TYPE:

AUTH CODE:

PJ

(N/C)

(N/C)

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00

3326 SE VERIFICO PROGRAMACION ESTABA OK SE ENCONTRO MOTOR DE ASISTENCIA
INOOPERANTE SE PROCEDIO A REEMPLAZAR MOTOR DE ASISTENCIA DEL GUIA

B INSPECCION GM GOODWRENCH

MA22 INSPECCION GM GOODWRENCH

2646 GARCIA, HECTOR LIC#: [REDACTED]

CPL2 0.00

0.00

0.00

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE B: 0.00

3326 SE REALIZO INSPECCION

C QUALITY CONTROL

Q QUALITY

2651 CPL2 0.00

0.00

0.00

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

ACEPTO QUE LOSADA AUTO TRUCK INC. GARANTIZARA LAS REPARACIONES QUE SE EFECTUARON, ASI COMO LOS
MATERIALES Y PIEZAS QUE SE UTILIZARON EN LAS MISMAS, POR UN PERIODO DE 30 DIAS O MIL (1,000) MILLAS, LO
QUE OCUERRA PRIMERO, EXCEPTO EN EL CASO DE LAS SIGUIENTES REPARACIONES, QUE NO CONLLEVAN GARANTIA (1)
TODA REPARACION ELECTRICA INSTALADA (2) TODO TRABAJO DE BALANCE Y/O ALINEAMIENTO DE GOMAS (3)
REEMPLAZO DE CORRIAS, GOMAS DE RADIADORES Y HOJAS DE LIMPIA PARABRISAS. HE RECIBIDO EL VEHICULO EN
BUENAS CONDICIONES CON LAS REPARACIONES SEÑALADAS.

X EL CLIENTE CONFORMA
EL NUMERO DE FACTURA CORRESPONDE AL NO. DE LA HOJA DE TRABAJO (WORK ORDER)



GMC

	TOTAL NETO
LABOR	0.00
PIEZAS	0.00
GAS, ACEITE	0.00
SUBLET	0.00
MISC.	0.00
TOTAL	0.00
	0.00
	0.00
TOTAL A PAGAR	0.00

Miguel?



DEALER INDEMNIFICATION REQUEST

CASE NO.: 656885 RECEIVED: 7/8/08
LEGAL STAFF: R. A. BROWN JR.
DIVISION: PONTIAC ZONE: 8C
DEALER: BARRANQUITAS AUTO CORPORATION
CASE NAME: [REDACTED]

DATE DEALER SERVED: _____

IS GM A PARTY? YES: _____ NO: ☒ NOT SERVED: _____VEHICLE: De Pontiac G6 VIN: 1G2ZG558964 [REDACTED]COMPLAINTS: steering noise - steering wheel locks - hard to turnALLEGATIONS: ☒ FAILURE TO REPAIR; _____ NEGLIGENT REPAIRS;
_____ FRAUD/MISREPRESENTATION; _____ UNFAIR/DECEPTIVE TRADE PRACTICES;

OTHER: _____

DIVISION CONTACTED: CAC: 71-498557538 DATE: 03/07

DISPOSITION:

_____ ACCEPTED UNDER AGREEMENT

_____ ACCEPTED OUTSIDE AGREEMENT

_____ SUBMISSION INCOMPLETE

☒ PREMATURE (NO SUIT)

_____ REQUEST MOOT (SETTLED)

_____ REJECTED DUE TO INDEPENDENT ALLEGATIONS

COMMENTS: BRC DACO SR: 71-640211577

LOCAL COUNSEL: _____

APPROVED: [Signature] 07-16-08

C: Rosemarie Williams

EXT. 5-7571 LEGAL STAFF (DISPOSITION ONLY)



**General Motors Corporation
Legal Staff**

FILE COPY

Facsimile
(248) 267-3677

Telephone
(512) 386-0748

July 22, 2008

Pedro Benitez, Jr.
Barranquitas Auto Corporation
Km 32.6 #1 Road
Caguas, PR 00726

Dear Mr. Benitez:

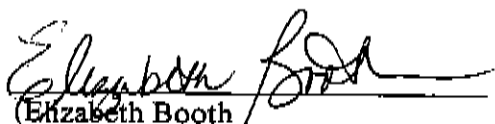
Re: INDEMNIFICATION REQUEST
[REDACTED] v. Barranquitas Auto Corp.
GM Case No. 656885
VIN: 1G2ZG558964 [REDACTED]

Your letter dated June 30, 2008, requesting indemnification of Barranquitas Auto Corp. ("the dealership") in connection with the above-captioned matter has been referred to me for response.

Your request is premature since it appears no lawsuit has yet been filed against the dealership. For such reason, your request must be denied at this time. If and when a lawsuit is filed and a complaint served on the dealership, you may then request indemnification in accordance with Article 17.4 of the Dealer Sales and Service Agreement and the indemnification provisions set out in Section 7.1 of the Manual referred to therein.

Copies of this letter are being forwarded to the General Motors Customer Relationship Services Group to request that reasonable efforts be made to resolve this car owner's concerns prior to the filing of suit.

Sincerely,


(Elizabeth Booth)
Legal Coordinator

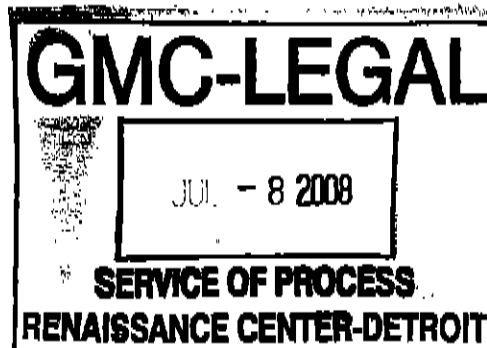
RAB/cs



BUICK • PONTIAC • CHEVROLET • GMC TRUCK

June 30, 2008

OFFICE OF THE GENERAL COUSEL
GENERAL MOTORS CORPORATION
400 RENAISSANCE CENTER
MAIL CODE: 482-038-210
DETROIT MI 48265



RE: [REDACTED]
VIN: 1G2ZG558964 [REDACTED] PONTIAC G6 2006

Dear Gentlemen:

In compliance with Section 1.11.1 (Procedure for Requesting Defense and Indemnification) of the General Motors Overseas Distribution Corporation Service Policies and Procedures Manual, Barranquitas Auto Corporation, hereby requests indemnification for the reference case.

Your prompt reply will be anxiously awaited.

Thanking you in advance for your attention.

Cordially,


Pedro Benítez, Jr.
President

mp



Estado Libre Asociado de Puerto Rico

Departamento de Asuntos del Consumidor

Apartado [REDACTED], Puerto Rico [REDACTED]
- Fax.: [REDACTED]

FECHA: 5 DE JUNIO DE 2008

RE: [REDACTED]

QUERELLA NUM: [REDACTED]

Ante este Departamento se ha presentado una querella contra usted y/o la compañía que usted representa. Acompañamos copia de la querella.

Los anejos que fueron acompañados al radicar la querella y que obran en el expediente, pueden ser examinados por usted en nuestras oficinas durante horas laborables.

Oportunamente se le notificará la fecha para inspección (de ser necesaria) o para vista de mediación o administrativa. El término que usted tiene para contestar la querella es de cinco (5) días con antelación a la fecha de la vista de mediación o administrativa.

La contestación a la querella deberá contener su nombre completo, dirección física y postal, número de teléfono y número de querella. Podrá anejar a su contestación copia de todo documento que sirva de apoyo a su alegación, sin perjuicio de producir documentos adicionales durante el procedimiento. Deberá estar firmada y fechada por usted y/o su representante legal. Si se trata de una corporación, sólo podrá comparecer representada por un abogado autorizado a ejercer la profesión legal en Puerto Rico.

Será obligación de las partes notificar al Departamento cualquier cambio de dirección o teléfono. El incumplimiento de esta obligación conllevará la imposición de los costos en los que el Departamento incurra para notificar a dicha parte.

Si se determina que usted y/o la compañía que usted representa ha incurrido en alguna violación o ha incumplido la Ley, Reglamento u Orden que este Departamento administra, será multado según las disposiciones reglamentarias establecidas para la naturaleza de la infracción cometida.

QUERELLA NUM: [REDACTED]

**CERTIFICO HABER ENVIADO COPIA FIEL Y EXACTA DEL
PRESENTE DOCUMENTO A LAS SIGUIENTES PERSONAS:**

**BARRANQUITAS AUTO CORP.
D/B/A BENITEZ, BUICK, PONTIAC, GMC
P.O. BOX 8789
BARRIO BAIROA
CAGUAS, P.R. 00625**

**GENERAL MOTORS CORP. Y/O
GM CARS AUSTIN
7401 EAST BEN WHITE BLVD,
BLDG F AUSTIN
TX 78741**

**LOSADA AUTO TRUCK, INC.
P.O. BOX 3158
BAYAMON, P.R. 00960-3158**

**GENERAL MOTORS ACCEPTANCE CORP.
P.O. BOX 9066285
SAN JUAN, P.R.
00906-6285**

**GENERAL MOTORS ACCEPTANCE CORP.
P.O. BOX 4009
SAN JUAN, P.R. 00936**

FIRMA:

y. N. C.



PAGINA ____ DE ____

Estado Libre Asociado de Puerto Rico

Departamento de Asuntos del Consumidor

DIR(c)/Rev. 02/97

REGION

BAYAMÓN,

APARTADO

PUERTO RICO

FAX: _____

WWW.DACO.GOBIERNO.P.R.FECHA DE RADICACIÓN: 5 DE JUNIO DE 2008

NÚMERO DE QUERELLA _____

Partes Envueltas en la Querella

QUERELLANTE: _____

NÚM. SEGURO SOCIAL: _____

DIRECCIÓN FÍSICA: _____

HOSTOS BAYAMÓN, P.R. _____

DIRECCIÓN POSTAL: LA MISMATELÉFONOS: HOGAR: (787) 210-4422 / 568-7008

TRABAJO: _____

FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: BARRANQUITAS AUTO CORP. D/B/A BENITEZ, BUICK, PONTIAC, GMC

DIRECCIÓN FÍSICA: _____

DIRECCIÓN POSTAL: P.O. BOX 8789 BARRIO BAIROA, CAGUAS, P.R. 00625TELÉFONOS: TRABAJO: 746-6262 FAX: 743-7101 E-Mail _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: GENERAL MOTORS, CORP. Y/O GM CARS AUSTIN

DIRECCIÓN FÍSICA: _____

DIRECCIÓN POSTAL: 7401 EAST BEN WHITE BLVD. BLDG F, AUSTIN TX 78741TELÉFONOS: TRABAJO: (787) 767-1030 / 1000 FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: LOSADA AUTO TRUCK, INC.DIRECCIÓN FÍSICA: CARR. #2 BAYAMÓN, P.R.DIRECCIÓN POSTAL: P.O. BOX 3158 BAYAMÓN, P.R. 00960-3158



Estado Libre Asociado de Puerto Rico

Departamento de Asuntos del Consumidor

PAGINA ____ DE ____

FECHA DE RADICACIÓN: 5 DE JUNIO DE 2008

NÚMERO DE QUERELLA: _____

Partes Envueltas en la Querella

QUERELLANTE: _____

NÚM. SEGURO SOCIAL: _____

DIRECCIÓN FÍSICA: _____
_____DIRECCIÓN POSTAL: _____

TELÉFONOS: HOGAR: _____ TRABAJO: _____ FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: GENERAL MOTORS ACCEPTANCE CORP.DIRECCIÓN FÍSICA: _____
_____DIRECCIÓN POSTAL: P.O. BOX 9066285 SAN JUAN, P.R. 00906-6285P.O. BOX 4009 SAN JUAN, P.R. 00936TELÉFONOS: TRABAJO: 782-7933 FAX: _____ E-Mail _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: _____

DIRECCIÓN FÍSICA: _____
_____DIRECCIÓN POSTAL: _____

TELÉFONOS: TRABAJO: _____ FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____

QUERELLADO: _____

DIRECCIÓN FÍSICA: _____
_____DIRECCIÓN POSTAL: _____

TELÉFONOS: TRABAJO: _____ FAX: _____ E-Mail: _____

REPRESENTANTE LEGAL Y DIRECCIÓN: _____



Estado Libre Asociado de Puerto Rico

Departamento de Asuntos del Consumidor

VM/REV 02/97

PAGINA ____ DE ____

Fecha: 5 DE JUNIO DE 2008

Querella Núm.: _____

COMPRAVENTA DE BIEN MUEBLE – VEHÍCULO DE MOTOR

QUERELLANTE

QUERELLADO

BARRANQUITAS AUTO CORP.
LOSADA AUTO TRUCK, INC.
GENERAL MOTOR ACCEPTANCE CORP.

VEHÍCULO EN CONTROVERSI:

Número de Serie: 1G2ZG558964

Marca: PONTIAC

Modelo: G-6

Tablilla: GUW-088

(X) Nuevo () Usado Fecha Compraventa: 5 DE JULIO DE 2006

Garantía: SI

Precio: \$ 31,851.00

Millaje Compraventa:

Millaje al Radicar la Querella: 19,900 APR.

Fecha en que surgieron los defectos: VARIAS

Fecha en que Reclamó: CONSTANTES

¿Cuántas veces han intentado repararlo? CUATRO (4)

¿Está al día en los pagos al banco? SI

NATURALEZA DE LA QUERELLA:

() Vicios Ocultos (X) Vicio en el Consentimiento () Incumplimiento de garantía (X) Reparación Defectuosa

() Lluvia Ácida () Licencia (X) Otro: VEHICULO DEFECTUOSO, DIAGNOSTICO INADECUADO, SERVICIOS

NO SATISFATORIOS

BREVE DESCRIPCIÓN DE LOS HECHOS y REMEDIO SOLICITADO POR EL QUERELLANTE:

- 1) LA PARTE QUERELLANTE EXPONE QUE COMPRO EL VEHICULO DE MOTOR DESCRITO EN LA FIRMA QUERELLADA.
- 2) QUE LA UNIDAD PRESENTO PROBLEMA Y/O DESPERFECTOS:
 - AL GIRAR EL GUIA HACIA LA DERECHA SE LE TRANCABA: GUIA DURO
 - Y AL COGER LAS CURVAS DIFICULTAD AL GIRAR
 - INDICADOR Y EL "POWER-STEERING" SE TRANCABA
 - LE CORRIGIERON ALINEAMIENTO
 - RUIDO EN EL AREA DEL DELANTERO
- 3) LA FIRMA QUERELLADA LE HIZO LAS PRUEBAS REQUERIDAS DE CABLERIA Y LE REALIZARON TABLA DE CODIGO.
- 4) Y LE REEMPLAZARON EL "STEERING WHEEL".
- 5) LA FIRMA QUERELLADA LE REALIZO CUATRO (4) SERVICIOS DE REPARACION.
- 6) ACTUALMENTE, EL VEHICULO DE MOTOR PRESISTE CON LOS DESPERFECTOS MENCIONADOS.
- 7) LA UNIDAD DESCRITA ES SU UNICO MEDIO DE TRANSPORTACION.
- 8) QUE LOS SERVICIOS DE REPARACION Y LA UNIDAD NO CUMPLEN CON LAS EXPECTATIVAS.

REMEDIO SOLICITADO: QUE SE INVESTIGUE, CAMBIO DE UNIDAD SIN COSTO ADICIONAL O RESOLUCION DEL CONTRATO MAS EL REEMBOLSO DEL DINERO INTEGRO O LO QUE EN DERECHO PROCEDA.

Por la presente hago constar bajo juramento que toda la información que he suministrado es correcta, verdadera, que me consta de propio

CERTIFIED MAIL

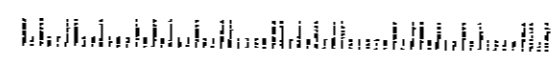
BENITEZ

POS, P.R. 00726



7006 2760 0000 5220 3840 9361 MAILED FROM CAGUAS PR 00725 JUL 01 08

48243+1302



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

March 24, 2011

[REDACTED]
[REDACTED]
Piscataway, NJ [REDACTED]

Service Request: 71-644886663
Customer Relationship Specialist: Daniel Czarniewicz

Dear [REDACTED]

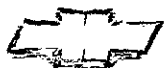
We would like to discuss your request for assistance regarding your 2005 Pontiac G6, but we have been unsuccessful in our attempts to contact you.

If you have outstanding issues, please feel free to contact us at 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. You will have the option to speak with me directly if I am available. If you have already contacted the Customer Assistance Center, please disregard this letter.

Pontiac and your dealer's mutual goal is your total satisfaction with Pontiac products and services. We look forward to talking with you soon.

Sincerely,

Pontiac Customer Assistance Center



CHEVROLET

Customer Assistance Center

Chevrolet Division
General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

AUG 04 2008



U.S. POSTAGE

1271

PB3563497

0035 \$00.42 JUL 25 2008

6042 MAILED FROM ZIP CODE

48146

NIXIE 099 DE 1 00 07/30/08

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 40232517070 *2253-02750-25-94



00034-000005170



Customer Assistance Center
Pontiac
PO Box 33172
Detroit, MI 48232-5172

July 24, 2008

**CUSTOMER DID NOT RECEIVE
THIS LETTER FROM GMC**

[REDACTED]
Piscataway, NJ [REDACTED]

Service Request: 71-644886663
Customer Relationship Specialist: Daniel Czarniewicz

Dear [REDACTED]:

We would like to discuss your request for assistance regarding your 2005 Pontiac G6, but we have been unsuccessful in our attempts to contact you.

If you have outstanding issues, please feel free to contact us at 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. You will have the option to speak with me directly if I am available. If you have already contacted the Customer Assistance Center, please disregard this letter.

Pontiac and your dealer's mutual goal is your total satisfaction with Pontiac products and services. We look forward to talking with you soon.

Sincerely,

Pontiac Customer Assistance Center

[Redacted]

Dunkin' Donuts Ferry, PA

[Redacted]

LEHIGH VALLEY PA 180

16 JUL 2008 PM 3 L

"LET US DARE TO
THINK, SPEAK AND
John Adams, 1765
poweroftheletter



JUL 18 2008

Reimbursement Dept.

P.O. BOX 33170

Detroit, MI 48232-5170

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

48232+5170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 6/12/2008

17-Digit Vehicle Identification Number (VIN): 1G1ZU54835F

Mileage at Time of Repair: 45315 Date of Repair: 3/31/08

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: Dingmans Ferry State: PA ZIP Code: _____

Daytime Telephone Number (include Area Code): _____

Evening Telephone Number (include Area Code): _____

Amount of Reimbursement Requested: \$ 762.16

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).



Problem that occurred - power
assist was lost, chime was heard
and DIC displayed Power Steering
message. Could not steer car.
Had vehicle towed.

Repair done was replacement
of steering column/belts,

Vehicle was repaired March
31, 2008. Repairs were made
at Wrenches Automotive.



December 2007

[REDACTED]
Dingmans Fry, PA [REDACTED]

Dear [REDACTED]

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.

Do not take your vehicle to your Chevrolet 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 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 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 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).



100 Renaissance Center, P.O. Box 100, Detroit, MI 48265-1000

PAID

WRENCHES AUTOMOTIVE

RR2 BOX 214A

DINGMANS FERRY PA 18328

570-828-9390

EMERGENCY TOWING AVAILABLE 24 HOURS

OPEN 8AM TO 6PM MONDAY THRU FRIDAY

8AM TO 2PM ON THE 1ST & LAST SATURDAY OF THE MONTH

6/27/2008 5:20 PM

page 1

Repair Order #19960

Day Phone : [REDACTED]

Eve Phone : [REDACTED]

DINGMANS FERRY PA

Vehicle : 2005 CHEVY MALIBU 3.5L

VIN : 1G1ZU54835F [REDACTED]

Tag/State : [REDACTED] / PA

Color : Black

Last Mileage : 45017

Odometer In : 45315

Odometer Out : 45315

Created : 3/31/2008 2:12:56 PM

Contact : [REDACTED]

Labor/Notes

Qty	Code/Tech*	Reference	Description	Unit Price	Price
3		GEN	DIO AND REPLACE STEERING COLUMN	\$68.00	\$204.00

Parts

Qty	Code/Tech*	Reference	Description	Condition	Unit Price	Price
1	-	15926870	STEERING COLUMN		\$359.00	\$359.00
2	-	7845238	BOLTS		\$13.15	\$26.30

Sublet/Misc.

Qty	Code/Tech*	Reference	Description	Unit Price	Price
1	-	TOWDAY	TOWING DAY	\$85.00	\$85.00
10	-	TOWMILAGE	TOWING MILES	\$4.00	\$40.00

Labor	\$204.00
Parts	\$385.30
Sublet/Misc.	\$125.00
SHOP SUPPLIES	\$11.79
Charges	\$0.00
Sales Tax	\$36.07
Tax @ \$601.09 * 6.0000%	
Repair Total	\$762.16

Tech Certification #
PAUL

ORIGINAL

March 24, 2011

[REDACTED]
Dingmans Ferry, PA [REDACTED]

Service Request: 71-646709132

Customer Relationship Specialist: Gavin Sanders

Dear [REDACTED]:

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 intermediate 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 \$762.16.

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

GM

CHECK

No. [REDACTED]50-937
213**DATE**
07/25/08

*****762 DOLLARS

****16 CENTS

AMOUNT
*****762.16**PAY
TO THE
ORDER
OF**

DINGMANS FERRY PA [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account

SIGNATURE

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

AUDIT

VENDOR
DUNS NO. 8B 000000059

1

VENDOR NAME [REDACTED]**North American Operations**

General Motors Corporation

Disbursements (2613)

PO Box 62530

Phoenix, AZ 85082-2530

DETACH BEFORE DEPOSITING CHECK

CHECK NO. [REDACTED]

**PAYMENT
DATE**

07/25/08

**REGISTER NO.
DESCRIPTION****INVOICE DATE****DOC. REFERENCE NUMBER****% DISC.****INVOICE AMOUNT****DISC. AMOUNT****NET AMOUNT**

161ZU54835F [REDACTED]

07/24/08

VM 1-APHETK

00.0000

762.16

.00

762.16

71-646709132

1-APHETK

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

M3

TOTAL

762.16

.00

762.16

[REDACTED]
FORT WORTH TX 761

"LET US DARE

THINK, SPEAK

John Adams, 1789

poweroftheletter.com

WHITEBORO TX 15 JUL 2008 PM 7 T

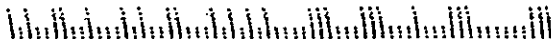
Chevrolet Motor Division
Chev. Customer Assistance Center
P.O. Box 33170
DETROIT, MI

JUL 21 2008

48232-5170

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

48232-5170



To whom it may concern:

WE OWN A 2005 Chevy

Malibu maxx. WE NOTICED A "NOISE"
IN THE STEERING. THE SERVICE
DEALER SAYS THIS IS A COMMON
PROBLEM IN THIS MODEL CAR! OUR
COURSE OUR WARRANTY JUST RECENTLY RAN
OUT - WE DID BUY EXTENDED WARRANTY,
WE HAVE A \$200.00 DEDUCTIBLE THOUGH.
DOES THIS "NOISE" IN THE STEERING
NEED TO BE FIXED OR WILL THERE
BE A RECALL SOON SINCE THIS PROBLEM
IS COMMON?

WE have owned Chevy vehicles forever - we know you stand behind your products.

your products.
Please Advise! THANK you for
your time!

WHITESBORO TX



FORT WORTH TX 761

28 JUL 2008 PM 7 T

LET US DARE TO READ
THINK. SPEAK. AND
John Adams, 1765
poweroftheletter



JUL 31 2008

MR. EDWARD J Peper JR.
P.O. Box 33170
DETROIT MICHIGAN
48232-5170

48232-5170



July 27, 2008

Dear Mr. Peper,

We have a 2005 Malibu Maxx - the power steering makes "noise". The local Chevy house has checked it out - they said the 2005 Malibu has this problem since it was the first year the new power steering systems were put in. I decided to write to Tony Parker at Chevy. phone # 866-790-5600 ext 12835 Case # 71-647462439 to see if there were any recalls since this is a "common" problem with this year + make. There are no recalls, so I asked her for an address I could write to.

We did buy an extended warranty on the 2005 maxx - \$200.00 deductible to fix the power steering with this "common" problem on this make?

I just wanted your company to know how unhappy I am about this.

problem. The car has 34,000 miles on it and has just ran out of warranty from the factory. If this is a "Common" problem in this make of car and year - "Why isn't there a recall?"

We have driven your products forever, we were wondering if and when a hybrid will be on the market? When and if a recall will take place on a faulty product your company already has on the market that was made in 2005 in the Malibu?

I do hope we can solve this problem and I can be sure that your company stands behind its products now and in the future.

Thank you for your time and attention!

In the spirit,

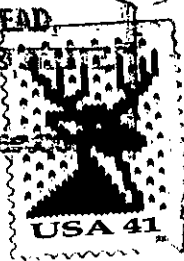
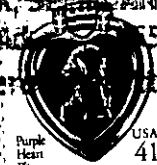
After 11:30 Am
PLEASE
WHITESBORO TX

Mobile AL

MOBILE AL 366

19 JUL 2008 PM 2 L

LET US DARE TO READ
THINK SEE AND HEAR
John Adams
POWER



JUL 22 2008

General Motors Corp.
P.O. Box 33170
Detroit, MI 48232-5170

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

48232+5170





General Motors Corporation
Customer and Relationship Services
PO Box 33170
Detroit, MI 48232-5170

**GENERAL MOTORS
PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT CLAIM FORM**

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: 11/16/07 ? called in Dec 2007 to GM.
Vehicle Identification Number (VIN): 1G1ZS52F35F [REDACTED]
Mileage at Time of Repair: 53,142 Date of Repair: 11/16/07
Claimant Name (please print) [REDACTED]
Street Address or PO Box Number: [REDACTED]
City: Mobile State: AL ZIP Code [REDACTED]
Daytime Telephone Number (include Area Code): [REDACTED]
Evening Telephone Number (include Area Code): [REDACTED]
Amount of Reimbursement Requested: \$ \$272.48

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 incurred for the repair covered by this recall.

Claimant's Signature: [REDACTED]

Please mail this claim form and the required documents to:

**General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170**

All recall 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 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 document 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).





Mary Whelan
806-790-5600

December 200

Paula S McGlasker
3701 Cedar Cliff Dr
Mobile, AL 36608-1083

ex: 12094
file # 71-587925808

Dear Paula S McGlasker:

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 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 be steered in a safe manner but will require greater driver effort at low vehicle speeds or when stop

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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 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 Chevrolet Customer Assistance Center between the hours of 8:00 AM and 11:00 PM, EST, Monday through Friday. The center can be reached at 1.800.630.2438 (TTY 1.800.833.2438).





BAY

CHEVROLET

2900 Government Blvd.
Hwy. 90 East of I-65
Mobile, Alabama 36606
(251) 473-8080

COPY

CUSTOMER NO. 66171	ADVISOR ROBERT HOUSE	6260	TAG NO 9917	INVOICE DATE 12/16/07	INVOICE NO. CVCS22848
MOBILE, AL	LABOR RATE	LICENSE NO.	MILEAGE 53,142	COLOR	STOCK NO.
	YES / MAKE / MODEL 05/CHEVROLET/			DELIVERY DATE	DELIVERY MILES
	VEHICLE I.D. NO. 1G1ZS52F35F			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.	P.O. NO.		RTD 12/16/07	
	BUSINESS PHONE	COMMENTS			

MO: 53140

LABOR & PARTS
J# 1 17CVZ STEERING DEPARTMENT UNITS: 1.00 TECH(S): 6206 81.00
CUSTOMER STATES NOISE IN STEERING WHEEL TURNING
STEERING SHAFT HAD NO LUBE.
REPLACED INTERMEDIATE STEERING SHAFT.

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 1	1	22687711	SHAFT KIT 6.526 A	152.73
JOB # 1 TOTAL PARTS				152.73
JOB # 1 TOTAL LABOR & PARTS				233.73

J# 2 05CVZ ENGINE DEPARTMENT UNITS: TECH(S): 6206 25.00
CUSTOMER STATES SQUEALING NOISE WHEN ACCELERATING
CLEANED AND ADJUSTED REAR BRAKES. VEHICLE NEEDS FRONT BRAKES

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 2 TOTAL PARTS				0.00
JOB # 2 TOTAL LABOR & PARTS				25.00

TOTALS	CASH	CHECK	CHARGE	M/C	VISA	AMER EXPRESS	DINERS	CARTE BL.	EMPL. REC	OTHER
TOTAL LABOR										106.00
TOTAL PARTS										152.73
TOTAL SUBLET										0.00
TOTAL G.O.G.										0.00
TOTAL MISC CHG.										0.00
TOTAL MISC DISC										0.00
TOTAL TAX										13.75

TOTAL INVOICE \$ 272.48

CUSTOMER SIGNATURE

WARRANTY DISCLAIMER
Any warranties on the products sold hereby are those made by the manufacturer. The Seller, BAY CHEVROLET, hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose or delay, and BAY CHEVROLET neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products.

X CUSTOMER ACKNOWLEDGES REPAIR WORK PERFORMED

PAID NOV 16 2007



BAY CHEVROLET

2900 Government Blvd.
Hwy. 90 East of I-65
Mobile, Alabama 36606
(251) 476-8080

COPY

CUSTOMER NO. 66171	ADDRESS ROBERT HOUSE	6260	TAG NO. 9917	INVOICE DATE 11/16/07	INVOICE NO. CVCS228481
MOBILE, AL	LABOR RATE	LICENSE NO.	MILEAGE 53,142	COLOR 7	STOCK NO.
	YEAR/MAKE/MODEL 05/CHEVROLET/			DELIVERY DATE	DELIVERY MILES
	VEHICLE I.D. NO. 1G1ZS52F35F			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.			P.O. NO.	REPAIR DATE 11/16/07
BUSINESS PHONE		COMMENTS			MO: 53144

LABOR & PARTS
J# 1 17CVZ STEERING DEPARTMENT UNITS: 1.00 TECH(S): 6206 81.00
CUSTOMER STATES NOISE IN STEERING WHEEL TURNING
STEERING SHAFT HAD NO LUBE.
REPLACED INTERMEDIATE STEERING SHAFT.

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 1	1	22687711	SHAFT KIT 6.526 A	152.73
JOB # 1 TOTAL PARTS				152.73
JOB # 1 TOTAL LABOR & PARTS				233.73

J# 2 06CVZ ENGINE DEPARTMENT UNITS: TECH(S): 6206 25.00
CUSTOMER STATES SQUEALING NOISE WHEN ACCELERATING
CLEANED AND ADJUSTED REAR BRAKES. VEHICLE NEEDS FRONT BRAKES

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 2 TOTAL PARTS				0.00
JOB # 2 TOTAL LABOR & PARTS				25.00

TOTALS			
CASH	CHECK	CHARGE	TOTAL LABOR.... 106.00
M/C	VISA	AMER EXPRESS	TOTAL PARTS.... 152.73
DINERS	CARTE BL.	EMPL. REC	TOTAL SUBLET... 0.00
OTHER			TOTAL G.O.G.... 0.00
			TOTAL MISC CHG. 0.00
			TOTAL MISC DISC 0.00
			TOTAL TAX..... 13.75

TOTAL INVOICE \$ 272.48

CUSTOMER SIGNATURE

WARRANTY DISCLAIMER
Any warranties on the products sold hereby are those made by the manufacturer. The Seller, BAY CHEVROLET, hereby expressly disclaims all warranties, either express or implied including any implied warranty of merchantability or fitness for a particular purpose or delay, and BAY CHEVROLET neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said product

X CUSTOMER ACKNOWLEDGES REPAIR WORK PERFORMED

PAID NOV 15 2007

North American Operations

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



CHECK No. [REDACTED]

50-937
213

DATE
07/28/08

*****247 DOLLARS

****48 CENTS

AMOUNT
*****247.48

PAY
TO THE
ORDER
OF

MOBILE AL [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account

Rihel C. [Signature]
SIGNATURE

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

AUDIT



VENDOR
DUNS NO. BB 000000002

1

VENDOR NAME [REDACTED]

North American Operations

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

DETACH BEFORE DEPOSITING CHECK

CHECK NO. [REDACTED]

PAYMENT
DATE

07/28/08

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1G1ZS52F35F [REDACTED]	07/25/08 71-647464-21	VH 1-API336 1-API336	00.0000	247.48	00	247.48
TOTAL				247.48	.00	247.48

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

M3

March 25, 2011

[REDACTED]
Mobile, AL [REDACTED]

Service Request: 71-647464421

Customer Relationship Specialist: Gavin Sanders

Dear [REDACTED]

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 intermediate steering shaft 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 \$247.48.

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.mygmilink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

Privileged and Confidential Information

CASE ASSESSMENT

By: Janet Wallace State: LA

Customer Name: [REDACTED] Service Request: 71-646447416 BBB Case No.: PGM0837077-1R

Vehicle ID No.: 1G2ZH18N674 [REDACTED] In Service Date: 11/18/06 Vehicle is: New BAC Code: 114321

Year, Make & Model: 2007, Pontiac G6 Vehicle Purchased Used on: {n/a or mm/dd/yy}
Mileage at Time of BBB Filing (18,400) at odometer {odometer}
Lien holder: GMAC ☒ Other ☐: {Name} Sale Type: Purchase ☐ Lease ☐ Other ☐: {Type}
DVM Name: Kevin Phillips CAM Name: Larry Sheilds
Phone/Cell Number: 985-312-4752 Phone Number:
Svc Mgr Name: Oneil Granger

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.

☒ water leaking through sunroof

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/23/07	570613	1	11,713	C/S seat belt soaking wet on passenger side. Dlr sts: refit sunroof drain hose

☒ Water leaking through back passenger glass

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/22/07	570524	1	11,701	C/S passenger side seatbelt wet water leaking down rear passenger window. Open seam Dlr sts: Resealed glass to body R&R body trim cleaned and dried.

☒ water leaking through back passenger glass

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/23/07	570613	*	11,713	C/S passenger side floor board wet.
03/31/08	577966	1	16,595	Dlr sts: R&R body trim cleaned and dried C/S water leaking passenger side B pillar Dlr sts: Roof drain hose off R&R roof drain. Installed hose ext

☒ Brakes Squeaking

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
00/15/07	571274	1	12,104	C/S brakes squeak/squeal worse when backing also when stopping when driving. Dlr sts: test drove vehicle. Brakes not squeaking @ this time. Brakes front 10MM rear 9MM

☒ A/C leaking (case overflowing)

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/22/07	570524	*	11,701	C/S mildew smell from vehicle. Smell intensifies whe a/c is turned on. Dlr sts: Water held up @ case. Disassembled case and removed excess seal from drain. Resealed
03/31/08	577966	*	16,595	C/S a/c has a musty odor. Dlr sts: Water held up in a/c case disassembled case removed excess sealer from drain tray. Resealed

☒ Mildew/mold smell

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/23/07	570613	*	11,713	C/S odor mildew after rain. See line 2— Dlr sts: R&R body trim cleaned and dried
03/31/08	577966	*	16,595	C/S musty smell to interior due to leak Dlr sts: R&R body trim and cleaned and dried

☐ Recall/Campaign (Not Related to Other Symptoms/Complaints)

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/22/07	570524	*	11,701	C/S recall 07015 interior water leak check roof rear drain hos. Re-routed refit hoses per bulletin

Has the vehicle ever been involved in a accident N

Did you confirm your answer with the customer Y

What type of damage was sustained (example front end collision)

Are there any Aftermarket Modifications to the Vehicle N

Have you confirm this with the customer Y

List:

☐ Other

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
02/11/08	575730	1	15,292	Customer request to replace wiper blades. Replaced wiper blade
02/11/08	575730	*	15,292	C/S left front tire keeps going low. Nail in left front tire. Checked
02/27/08	576552	1	15,612	C/S replace driver's lock button. SOP part. Customer has paid for part. Dlr sts: installed special ordered part

What is the customer eligible for based upon the BBB Program Eligibility Guidelines and the States lemon law requirements for meeting presumption? Explain with some Detail

GM Program Summary Repurchase/Replacement: must be received by the BBB auto line within one year or 12,000 miles whichever comes first from the date the vehicle was first put into use

Lemon Law Repurchase/Replacement: must have 4 or more repair attempts in the first year or be out of service for 90 calendar days

GM Program Summary Repairs/Reimbursement for past repairs: must be received by the BBB auto line before the expiration of the GM B/B new vehicle warranty.

THE STATE LEMON LAW READS:

Days out of service: 90

Repairs 4+

Time period 12 Months / N/A

Does Lemon Law state nonconformity must continue to exist? Y

If applicable, safety-related repairs N/A

Safety-related time period N/A / N/A

Number of repair attempts in the presumption period: 3

Total days out of service during the presumption period: 7

Total days out of service during customer's ownership: 7

Vehicle Meets Presumption of Lemon Law	NO
--	----

PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

Concern: 71-615812721 sunroof water leak
water leaking through back passenger window
-brakes squeaking
-a/c leaking/case overflowing
-mildew/mold smell

all water leaks were repaired
-brakes squeaking nothing wrong normal to this vehicle
-mildew odor gone

Date & Offer/Result: 06/19/08 offered customer on month vehicle payment
-offered customer ccl for sunroof leaking in case it happens again
-offer customer 24/24 smart care for frustration
-customer accepted all and case was close

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 sts: that she wants the vehicle repurchased because the a/c would not shut off and had to take the vehicle 2 hours to her dealer to get the vehicle fixed

DVM sts: all the issues she listed on her BBB file were repaired this is a different issue all together and the vehicle is being repaired

SVM sts: that the body control module had to be replaced and this is not the same issue as previously and all concerns are repaired

CRS Rationale: that this issue that the customer filed for is not the concern with the vehicle all leaks have been repaired

CRS's opinion regarding the 3 main Strengths of the case
1. Customer has filed in time

CRS's opinion regarding the 3 mains weaknesses of the Case
1. All leaks are repaired
2. This concern is different then what the customer filed for

Decision reached by CRS: Arbitrate case: ☐
☐ vehicle. Vehicle is repaired as per the B/B warranty

Settle case: ☐ GM Will not be repurchasing the

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.

*** SES light is to be captured under affected component above.**

Privileged and Confidential Information

CASE ASSESSMENT

By: Janet Wallace State: LA

Customer Name: [REDACTED]

Service Request: 71-
647960941

BBB Case No.: CHV0845320

Vehicle ID No. [REDACTED]
1G1ZT51F16F

In Service
Date:
06/24/06

Vehicle is: New

BAC Code:
114281

Year, Make & Model: 2006, Chevrolet Malibu
Mileage at Time of BBB Filing 73,000

Lien holder: GMAC ☐ Other ☐: {Name}

DVM Name: Kevin Philips
Phone/Cell Number: 985-312-4752
Svc Mgr Name: Craig

Vehicle Purchased Used on: {n/a or mm/dd/yy}
at odometer {odometer}

Sale Type: Purchase ☐ Lease ☐ Other ☐:
{Type}

CAM Name: Larry Shields
Phone Number: 972-443-2901

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.

☒ Steering

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
07/23/08	451536	1	73,656	Cust sts: power steering is inoperative Dlr sts: verified customer concerns DTC C0545 faulty steering column. Customer declined the repair at this time

☒ Steering

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
02/29/08	438990	2	64,189	Cust sts: hears knocking in the steering wheel Dlr sts: Steering shaft was knocking. R&R steering shaft and knocking went away

☒ Steering rack and pinion

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
04/12/08	434971	1	58,083	Cust sts: hear knocking in the steering wheel Dlr sts: Rack and pinion knocking R&R rack and pinion. Aligned front end to set toe. Retested good.

☒ Steering

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/02/07	426358	3	45,322	Cust sts: hears knocking noise at turns Dlr sts: steering shaft lack lube. R&R steering shaft and lubed. Road tested good.

☒ Steering rack and pinion

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
06/07/07	415965	2	29,790	Cust sts: hears a knocking under front end when turning Dlr sts: steering rack and pinion knocking. R&R rack and pinion. Aligned wheels to specs

☐ Ignition cylinder

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/06/07	426745	3	45,322	Cust sts: replaced the ignition cylinder and programmed key

Has the vehicle ever been involved in a accident N

Did you confirm your answer with the customer Y

Are there any Aftermarket Modifications to the Vehicle N

Have you confirm this with the customer Y

List:

What is the customer eligible for based upon the BBB Program Eligibility Guidelines and the States lemon law requirements for meeting presumption? Explain with some Detail

GM Program Summary Repurchase/Replacement: must be received by the BBB auto line within on year or 12,000 miles whichever comes first from the date the vehicle was firs put into use

Lemon Law Repurchase/Replacement: must have 4 or more repair attempts in the first year of the new vehicle delivery to the customer or 90 calendar days out of service

GM Program Summary Repairs/Reimbursement for past repairs: must be received by the BBB auto line before the expiration of the GM B/B new vehicle warranty

THE STATE LEMON LAW READS:

Days out of service: 90

Repairs 4

Time period 12 months / N/A

Does Lemon Law state nonconformity must continue to exist? Y

If applicable, safety-related repairs N/A

Safety-related time period N/A / N/A

Number of repair attempts in the presumption period:	1
Total days out of service during the presumption period:	2
Total days out of service during customer's ownership:	12

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 sts: that the steering on the vehicle has always made a noise and the dealer has repaired it and it last for a few more miles and now I am out side of my warranties and wants gm to repair the vehicle

DVM sts: that due to mileage there is nothing more that gm can do for the customer as far as assisting with the repair of the vehicle

SVM sts: that the customer is outside all of their warranties and now that they have to pay for the repair they are now complaining. When they brought the vehicle in the last time they declined to repair the vehicle

CRS Rationale: Due to the mileage on the vehicle gm will not be able to assist with the repair of the vehicle

CRS's opinion regarding the 3 main Strengths of the case

1. Customer filed in time

CRS's opinion regarding the 3 mains weaknesses of the Case

1. Customer is outside the bumper to bumper warranty by miles

2. Customer had only one repair attempt in the first year

Decision reached by CRS: Arbitrate case: ☐
☐ gm will not be assisting with the repair of the vehicle

Settle case: ☐ Due to mileage on the vehicle

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 Quadrateer.
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.

*** SES light is to be captured under affected component above.**

ADR File Checklist

SR Number: 71-647960941

BBB Case: CHV0845320

Customer: [REDACTED]

VIN: 1G1ZT51F16F [REDACTED]

Make/Model/Year: Chevrolet/Malibu/2006

In Service: 06/24/06 Mileage: 73,000

Received Date: 07/24/08

Day 15 Date: 08/07/08

Goes Active:

Primary Concern: The power steering keeps going out

☒ **Case Scan / Acknowledgement (24 hrs) Completion Date/Time:**

☒ **Initial Calls (72 hrs):**

☒ **Customer**

Completion Date/Time: 07/25/08 / 1:06 PM

☒ **Dealer Svc Mgr**

Completion Date/Time: 07/24/08 / 2:26 PM

☐ **Dealer Finance Mgr**

Completion Date/Time: /

☒ **AVM**

Completion Date/Time: 07/24/08 / 2:40 PM

☒ **Repair Orders Requested:**

Received: 07/28/08

☒ **Sales Documents:**

Received: 07/28/08

☒ **BARS / Finance Sheet**

☒ **Case Assessment (by Day 14):**

Lemon Law Eligible:

Yes ☐

No ☒

Presumption:

Yes ☐

No ☒

☐ **GM Position – Customer / BBB Due Date (7-10 days):**

☐ **Settlement / Goodwill Offered Date:**

☐ **All Documents Attached (by Day 15)**

☐ **Arbitration Date:**

☒ **Closing Activities:**

Settlement

Completion Date/Time: 08/22/08 / 10:25 AM

Executive Summary

Completion Date/Time: 08/22/08 / 10:20 AM

Close Siebel

Completion Date/Time: 08/22/08 / 10:45 AM

AVM: Kevin Philips

Node/Box: 972075/8387

Service Dealer: Gerry Lane Chevrolet

Svc Mgr: Craig

Selling Dealer: Gerry Lane Chevrolet

Contact: (225) 926-4600

NOTES: Due to the mileage on the vehicle GM could not assist with the repair

ADR File Checklist

SR Number: 71-647960941

BBB Case: CHV0845320

Customer: [REDACTED]

VIN:

Make/Model/Year: Chevrolet/Malibu/2006

In Service:

Mileage: 73,000

Received Date: 07/24/08

Day 15 Date: 08/07/08

Goes Active:

Primary Concern: The power steering keeps going out

☒ **Case Scan / Acknowledgement (24 hrs) Completion Date/Time:**

☒ **Initial Calls (72 hrs):**

☒ **Customer**

Completion Date/Time: /

☒ **Dealer Svc Mgr**

Completion Date/Time: 07/24/08 / 2:26 PM

☐ **Dealer Finance Mgr**

Completion Date/Time: /

☒ **AVM**

Completion Date/Time: 07/24/08 / 2:40 PM

☒ **Repair Orders Requested:**

Received:

☒ **Sales Documents:**

Received:

☒ **BARS / Finance Sheet**

☐ **Case Assessment (by Day 14):**

Lemon Law Eligible:

Yes ☐

No ☐

Presumption:

Yes ☐

No ☐

☐ **GM Position – Customer / BBB Due Date (7-10 days):**

☐ **Settlement / Goodwill Offered Date:**

☐ **All Documents Attached (by Day 15)**

☐ **Arbitration Date:**

☐ **Closing Activities:**

Settlement

Completion Date/Time: /

Executive Summary

Completion Date/Time: /

Close Siebel

Completion Date/Time: /

AVM: Kevin Philips

Node/Box: 972075/8387

Service Dealer: Gerry Lane Chevrolet

Svc Mgr:

Selling Dealer: Gerry Lane Chevrolet

Contact:

NOTES:

2006 MALIBU SEDAN 0LT			CHEVROLET MOTOR DIVISION
63U SPORT RED METALLIC	/L4G		GENERAL MOTORS CORPORATION
83C TITANIUM			100 RENAISSANCE CENTER
ORDER NO. JZDVWN/TRE	STOCK NO.		DETROIT MI 48243-1114
VIN 1G1 ZT51 F1 6F			VEHICLE INVOICE 1AD86513149
*****			*****13*24447S
MODEL & FACTORY OPTIONS	MSRP	INV AMT	RETAIL - STOCK
1ZT69 MALIBU SEDAN 0LT	17865.00	16882.43	INVOICE 04/21/06
FE9 50-STATE EMISSIONS	N/C	N/C	SHIPPED 04/21/06
L61 2.2L 4 CYL ENGINE	N/C	N/C	EXP I/T 05/03/06
MX0 4-SPEED AUTO TRANSMISSION	N/C	N/C	INT COM 05/03/06
R8K *****	N/C	N/C	PRC EFF 04/21/06
VK3 FRONT LICENSE PLATE BRACKET	0.00	0.00	KEYS G1253 G1253
			WFP-F QTR OPT-1
			BANK: GMAC - 084
			CHG-TO 24-447
			SHIP WT: 3067
			HP: 18.4
			GMS: 17046.48
			SUPPLR: 17810.20
			MRM: 18490.00
			DAN: OLT
			MEMO 818.25

TOTAL MODEL & OPTIONS	17865.00	16882.43	ACT 231	16971.48
DESTINATION CHARGE	625.00	625.00	H/B 261	535.95
LAM DEALER CONTRIBUTION		178.65	ADV 261	178.65
LAM GROUP CONTRIBUTION		178.65	EXP 65A	178.65
TOTAL	18490.00	17864.73	PAY 310	17864.73
MEMO: TOTAL LESS HOLDBACK AND				
APPROX WHOLESALE FINANCE CREDIT		17060.80		

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.

GERRY LANE CHEVROLET	REMIT TO GMAC NO. 084
	VIN 1G1ZT51F16F
	\$ 17864.73 INV 1AD86513149
	DUE 05/03/06 DEALER 24-447

Privileged and Confidential Information

CASE ASSESSMENT

By: Janet Wallace State: LA

Customer Name: [REDACTED]

Service Request: 71-
647960941

BBB Case No.: CHV0845320

Vehicle ID No.: { 17 digit VIN}

In Service
Date:
{mm/dd/yy}

Vehicle is: New

BAC Code:
{ Selling Dealer}

Year, Make & Model: 2006, Chevrolet Malibu
Mileage at Time of BBB Filing 73,000

Vehicle Purchased Used on: {n/a or mm/dd/yy}
at odometer {odometer}

Lien holder: GMAC ☐ Other ☐: {Name}

Sale Type: Purchase ☐ Lease ☐ Other ☐ :
{Type}

DVM Name: Kevin Phillips
Phone/Cell Number: 985-312-4752
Svc Mgr Name:

CAM Name: Larry Shields
Phone Number: 972-443-2901

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.

☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ Recall/Campaign (Not Related to Other Symptoms/Complaints)

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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Has the vehicle ever been involved in a accident Y or N

Did you confirm your answer with the customer Y or N

What type of damage was sustained (example front end collision)

Are the RO's attached if the vehicle was in an accident Y or N

Are there any Aftermarket Modifications to the Vehicle Y or N

Have you confirm this with the customer Y or N

List:

☐ Other

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

What is the customer eligible for based upon the BBB Program Eligibility Guidelines and the States lemon law requirements for meeting presumption? Explain with some Detail

GM Program Summary Repurchase/Replacement: must be received by the BBB auto line within on year or 12,000 miles whichever comes first from the date the vehicle was firs put into use

Lemon Law Repurchase/Replacement: must have 4 or more repair attempts in the first year of the new vehicle delivery to the customer or 90 calendar days out of service

GM Program Summary Repairs/Reimbursement for past repairs: must be received by the BBB auto line before the expiration of the GM B/B new vehicle warranty

THE STATE LEMON LAW READS:

Days out of service: { # of Days}
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 { # of repair attempts}
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
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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 sts:

DVM sts:

SVM sts:

CRS Rationale:

CRS’s opinion regarding the 3 main Strengths of the case

CRS’s opinion regarding the 3 mains weaknesses of the Case

Decision reached by CRS:

Arbitrate case:

☐

Settle case:

☐

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.

*** SES light is to be captured under affected component above.**

ADR File Checklist

SR Number: 71-647960941

BBB Case: CHV0845320

Customer: [REDACTED]

VIN: 1G1ZT51F16F [REDACTED]

Make/Model/Year: Chevrolet/Malibu/2006

In Service: 06/24/06 Mileage: 73,000

Received Date: 07/24/08

Day 15 Date: 08/07/08

Goes Active:

Primary Concern: The power steering keeps going out

☒ **Case Scan / Acknowledgement (24 hrs) Completion Date/Time:**

☒ **Initial Calls (72 hrs):**

☒ **Customer**

Completion Date/Time: 07/25/08 / 1:06 PM

☒ **Dealer Svc Mgr**

Completion Date/Time: 07/24/08 / 2:26 PM

☐ **Dealer Finance Mgr**

Completion Date/Time: /

☒ **AVM**

Completion Date/Time: 07/24/08 / 2:40 PM

☒ **Repair Orders Requested:**

Received: 07/28/08

☒ **Sales Documents:**

Received: 07/28/08

☒ **BARS / Finance Sheet**

☒ **Case Assessment (by Day 14):**

Lemon Law Eligible:

Yes ☐

No ☒

Presumption:

Yes ☐

No ☒

☐ **GM Position – Customer / BBB Due Date (7-10 days):**

☐ **Settlement / Goodwill Offered Date:**

☐ **All Documents Attached (by Day 15)**

☐ **Arbitration Date:**

☐ **Closing Activities:**

Settlement

Completion Date/Time: /

Executive Summary

Completion Date/Time: /

Close Siebel

Completion Date/Time: /

AVM: Kevin Philips

Node/Box: 972075/8387

Service Dealer: Gerry Lane Chevrolet

Svc Mgr: Craig

Selling Dealer: Gerry Lane Chevrolet

Contact: (225) 926-4600

NOTES:

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

Customer: [REDACTED]	SR #: 71-647960941	BBB#: CHV0845320
-----------------------------	---------------------------	-------------------------

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 (from Bill of Sale, before tax, tag, title, etc.)	18400.00
MSRP (from BARS Invoice screen)	- 18490.00
Subtract the MSRP from the Purchase Price (If positive, look for Overallowance)	= -90.00

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

Section 3

Trade Allowance (from Bill of Sale)	0.00
Payoff on Trade (from Bill of Sale)	- 0
Subtract the Payoff on Trade from the Trade Allowance If negative, the Payoff on the Trade is higher than the Trade Allowance. This is Negative Equity.	= 0.00

Section 4

Purchase Price (from Bill of Sale, before tax, tag, title, etc.)	18400.00
Incentives not included in the Purchase Price (from BARS and Incentive Acknowledgement sheet) Do not include fuel-fill credit or Dealer incentives. GM Card points must be included.	- 1000.00
Overallowance/Negative Equity (use the Overallowance from Section 2 or the Negative Equity from Section 3, whichever is larger)	- 0.00
Subtract the Incentives and the Overallowance/Negative Equity from the Purchase Price. This is the Actual price of the vehicle that should be presented to the BBB on the Agreement to Arbitrate (ATA).	= 17400.00

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



GENERAL MOTORS BUSINESS RESOURCE CENTER

July 24, 2003

Craig
Gerry Lane Chevrolet
6505 Florida Blvd
Baton Rouge LA 70806

Re: [REDACTED]
Siebel Request: 71-647960941
2006, Chevrolet Malibu
VIN # 1G1ZT51F16F [REDACTED]

Dear Craig:

This is a letter of notification regarding a {Better Business Bureau case/State 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 within 24 hours. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- Copy of the Title and Registration
- 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.

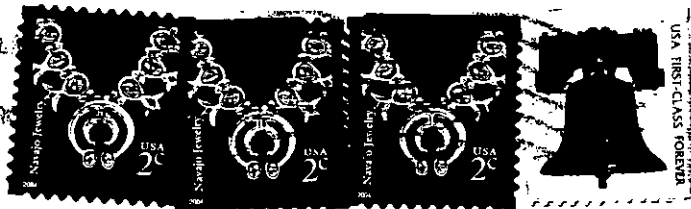
Sincerely,

Janet Wallace
BRC Customer Relationship Specialist
Ph# 800-231-1841, prompt 9, prompt 5, extension 11559
FAX# 866-874-5902

Evansville IN

EVANSVILLE

26 JUL 2000



4099246330298



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

JUL 28 2000

482325170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 7/23/08

17-Digit Vehicle Identification Number (VIN): 1G1ZTS4895F

Mileage at Time of Repair: 21,635 Date of Repair: 7/23/08

Claimant Name (please print):

Street Address or PO Box Number:

City: EVANSVILLE

State: IN

ZIP Code:

Daytime Telephone Number (include Area Code):

Evening Telephone Number (include Area Code):

Amount of Reimbursement Requested: \$ \$100.00

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

I just moved from:
to:



KELLEY

CHEVROLET

2400 N. Heidelberg Ave.
Evansville, IN 47711
Phone: (812) 421-0077
Fax (812) 429-0315 • 1-800-467-6722

COPY

CUSTOMER NO.	9828371	ADVISOR	VICKY	1870	TAG NO.	621	INVOICE DATE		INVOICE NO.	CVCS137486
[REDACTED]		LABOR RATE		LICENSE NO.		MILEAGE	21,635	COLOR	RED/	STOCK NO.
EVANSVILLE, IN		YEAR/MAKE/MODEL	05/CHEVROLET/MALIBU/4DR SDN LS				DELIVERY DATE	12/17/04	DELIVERY MILES	2,968
		VEHICLE ID. NO.	1G1ZT54895F				SELLING DEALER NO.		PRODUCTION DATE	
		F.T.E. NO.					P.O. NO.		R.O. DATE	07/23/08
		COMMENTS CEP 55 LITER SFI								

MISC	CODE	DESCRIPTION	CONTROL NO.	
JOB # 1	170	GMPP DEDUCTIBLE	137486	100.00
JOB # 1	171	GMPP DEDUCTIBLE-OFFSET	137486	WARRANTY
TOTAL - MISC				100.00

COMMENTS

TOTALS

* NEXT RECOMMENDED SERVICE:

* 10/22/2008 / 22926 MI 00CVZ24 MAINT: INSPECTION

THANK YOU FOR CHOOSING KELLEY'S NORTHSIDE CHEVROLET
FOR YOUR AUTOMOTIVE NEEDS. GENERAL MOTORS MAY BE
SENDING YOU A SURVEY ABOUT YOUR SERVICE EXPERIENCE
IN THE NEAR FUTURE. IF YOU CANNOT ANSWER COMPLETELY
SATISFIED TO ANY QUESTION, PLEASE CONTACT YOUR SERVICE
ADVISOR SO THAT WE MAY RECTIFY ANY PROBLEMS BEFORE
RETURNING YOUR SURVEY.
KATHY RUSSELL 1-812-492-1020 OR 1-800-467-6722
MARY SPRADLIN 1-812-492-1021 OR 1-800-467-6722
BRIAN PHELPS 1-812-492-1022 OR 1-800-467-6722
ALL GM PARTS HAVE A 12MOS./12,000 MILE WARRANTY, WHICHEVER
OCCURS FIRST. PARTS INDICATED WITH A (*) HAVE A LIMITED
LIFETIME WARRANTY AT OUR DEALERSHIP OR ANY GM DEALERSHIP
IF YOU ARE TRAVELING OVER 50 MILES FROM YOUR HOME
CHECK OUT OUR WEBSITE AT www.newkelleychevy.com FOR COUPONS.

TOTAL LABOR.....	0.00
TOTAL PARTS.....	0.00
TOTAL SUBLET.....	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	100.00
TOTAL MISC DISC	0.00
TOTAL TAX.....	0.00

TOTAL INVOICE \$ 100.00

PRE - INVOICE

PAID

check
y

KELLEY
MOTIVE**KELLEY** 
CHEVROLET2400 N. Heidelberg Ave.
Evansville, IN 47711
Phone: (812) 421-0077
Fax (812) 429-0315 • 1-800-467-6722 **COPY**

FORMER NO. 9828371	ADVISOR VICKY	1870	TAG NO. 621	INVOICE DATE	INVOICE NO. CVCS137486
LABOR RATE		LICENSE NO.	MILEAGE 21,635	COLOR RED/	STOCK NO.
YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4DR SDN LS		DELIVERY DATE 12/17/04		DELIVERY MILES 2,968	
VEHICLE I.D. NO. 1G1ZT54895F		SELLING DEALER NO.		PRODUCTION DATE	
F.T.E. NO.		P.O. NO.		PO DATE 07/23/08	
COMMENTS EP 3.5 LITER SFI					

LABOR & PARTS

J# 1 45CVZ STEERING/SUSPENSION TECH(S): 9341 WARRANTY
CUST STATES NO POWER STEERING, GMPP EX WARRANTY
PERFORMED POWER STEERING DIAGNOSTIC SYSTEM CHECK AND FOUND
C0545 IN ESCM, CHECKED POWERS AND GROUND AND ARE OK, FOUND
NEEDS STEERING COLUMN PER DOC. 04-02-35-009A
REMOVED AND REPLACED STEERING COLUMN, TRANSFERRED ALL
COMPONENTS, AND PERFORMED STEERING ANGLE AND TORQUE SIGNAL
RELEARNS (HAS ADJUSTABLE PEDALS)
03/95
CLAIM TYPE 0

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	WARRANTY
JOB # 1	1	15926870	COLUMN 6.518		
JOB # 1 TOTAL PARTS				0.00	
JOB # 1 TOTAL LABOR & PARTS				0.00	

J# 2 00CVZ24SA SA MAINT. INSPECT TECH(S): 9341 WARRANTY
FREE SA MAINTENANCE INSPECTION
FREE SERVICE TO CUSTOMER
COMPLETED FREE MAINTENANCE INSPECTION
SEE SERVICE CONSULTANT FOR DETAILS

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	WARRANTY
JOB # 2 TOTAL PARTS				0.00	
JOB # 2 TOTAL LABOR & PARTS				0.00	

J# 3 45CVZ01 STEERING CONCERN TECH(S): 274 9341 WARRANTY
Added Operation (PETERV @ 07/23/2008 16:24)
CUST STATES NOISE IN STEERING
DROVE TO VERIFY AND FOUND HAS NOISE IN STEERING RACK
ON BUMPS AND TURNS, NEEDS NEW RACK
REMOVED AND REPLACED STEERING RACK AND DROVE TO VERIFY
CONCERN IS FIXED AT TIME OF REPAIR
NU/4X
CLAIM TYPE 0

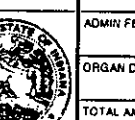
PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	WARRANTY
JOB # 3	1	25902150	GEAR 6.508		
JOB # 3 TOTAL PARTS				0.00	
JOB # 3 TOTAL LABOR & PARTS				0.00	

J# 4 70CVZ03 RENTAL TECH(S): 9999 WARRANTY
Added Operation (SHABERTSC @ 07/24/2008 10:49)
RENTAL

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	WARRANTY
JOB # 4 TOTAL PARTS				0.00	
JOB # 4 TOTAL LABOR & PARTS				0.00	

Form INREG01AW 14291-876

STATE FORM 48099 (11/99) APPROVED BY STATE BOARD OF ACCOUNTS 1996

PL TP		PLATE/STICK NUMBER		PL TP	WEIGHT	EXPIRATION DATE	PR YR	PRIOR YR PL NUMBER	PR TYPE	CM	CURRENT YEAR TAX	COUNTY EX TAX	CITY EX TAX CRED	DAY TAX CREDIT	COUNTY TAX DUE
R	08	[REDACTED]		SP		06/14/09	07	[REDACTED]	SP	N		163.00	0.00	0.00	163.00
VEH YF	MAKE	TYPE	MODEL	VEHICLE IDENTIFICATION NUMBER			COLOR	PUR DATE	LG	PRIOR YEAR TAX	COUNTY EX TAX	CITY EX TAX CRED	DAY TAX CREDIT	COUNTY TAX DUE	
05	CHE	4S	M/L	1G1ZT54895F [REDACTED]			MAR/	12/16/04	N		0.00	0.00	0.00	0.00	
CLASS	AGE	TRANSACTION DATE		COUNTRY			TO WHIT/AST/RESERVED		DISTRICT	BRANCH USE	TRANSACTION ID		EXCISE TAX DUE		
12	4	05/13/08		VANDERBURGH			Pige		202		82020974303		**		
<p>IMPORTANT: REGISTRATION MUST BE SIGNED TO BE VALID</p> <p>I swear or affirm under penalty of perjury that the statements made herein are correct. I am now providing proof of financial responsibility for this vehicle and affirm that insurance will be continuously maintained during the registration period. Additional tax and/or fees may be due if an error is made.</p> <p>Your Signature (Must be in ink to be valid)</p> <p>[REDACTED]</p>											<p>INSURANCE COMPANY NAME</p> <p>GEICO</p> <p>POLICY NUMBER</p> <p>[REDACTED]</p>		<p>WHEEL/SUR TAX</p> <p>7.50</p> <p>STATE REG FEE</p> <p>20.75</p> <p>ADMIN FEE</p> <p>0.00</p> <p>ORGAN DONATION</p> <p>0.00</p> <p>TOTAL AMOUNT PAID</p> <p>191.25</p>		
<p>C</p> <p>TPW</p>															

**PLEASE NOTE
YOUR
RENEWAL
DATE FOR 2009
IS 06/14/09**

EVANSVILLE, IN



**** Excise Tax reduced by 163.00 on this registration.**

7348

✓ Track Your Expenses...

<input type="checkbox"/> Auto/Travel	<input type="checkbox"/> Education	<input type="checkbox"/> Medical/Dental
<input type="checkbox"/> Business	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Savings
<input type="checkbox"/> Charities	<input type="checkbox"/> Food	<input type="checkbox"/> Taxes
<input type="checkbox"/> Clothing	<input type="checkbox"/> Home	<input type="checkbox"/> Utilities
<input type="checkbox"/> Dependent Care	<input type="checkbox"/> Insurance	<input type="checkbox"/> Other

7-24-08

Kelly
One Hundred dollars 00/100

BAL. FOR'D	
ITEM AMOUNT	100.00
BALANCE	
DEPOSIT	
FOR'D	

Memo _____

NOT NEGOTIABLE

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

CHECK No. [REDACTED]

50-837
213DATE
08/04/08

*****100 DOLLARS

****00 CENTS

AMOUNT
*****100.00PAY
TO THE
ORDER
OF

EVANSVILLE IN [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account
SIGNATUREThe Chase Manhattan Bank, N.A.
Syracuse, New York

AUDIT

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

DETACH BEFORE DEPOSITING CHECK

CHECK NO. [REDACTED]

PAYMENT
DATE 08/04/08VENDOR
DUNS NO BB 000000005 1

VENDOR NAME [REDACTED]

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1G1ZT54895F [REDACTED]	08/01/08 71-649193	VM 1-AQSAZ5 565.1-AQSAZ5	00.0000	100.00	.00	100.00
TOTAL				100.00	.00	100.00

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

M3

March 28, 2011

[REDACTED]
Evansville, IN [REDACTED]

Service Request: 71-649193565
Customer Relationship Specialist: MJ Mason

Dear [REDACTED]

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 \$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.mygmilink.com. This free online service offers vehicle and ownership-related information and tools tailored to your specific vehicle.

General Motors Dealership Empowerment Process

(Dealership Service Management Template – Revised 11/05/2007)

- 1) Please complete this template by either typing or legibly writing in all required information
- 2) Either fax the completed template to 1-866-430-2718, or attach to an e-mail and send to AVM.TEAM@GMEXPERT.COM
 - o It is **NOT** necessary to FAX all 13 pages; only those that apply to your request
- 3) Place a copy of the completed template in your VIN history file for future reference

IMPORTANT NOTE: If you have questions pertaining to potential goodwill options, goodwill value &/or the status of a pending request, please call the GM Call Center (1-800-231-1841, prompt 3, prompt 2). ALWAYS call **BEFORE** you commit to provide a GM Protection Plan to a customer.

Region	<input checked="" type="checkbox"/> NEast	<input type="checkbox"/> SEast	<input type="checkbox"/> NCentral	<input type="checkbox"/> SCentral	<input type="checkbox"/> Western
Service Manager Name & Phone Number	RANDY COX 978-458-2526				
Dealership Name, Location & BAC Number	LANNAN CHEV. OF LOWELL 152027				
CAC Case (SR) Number (if known)					
Customer Name (Mr., Ms., Mrs., First, MI, Last)	[REDACTED]				
Customer Complete Mailing Address	[REDACTED] DRACUT, MA.				
Daytime Phone Number	[REDACTED]				
Evening Phone Number	SAME				
FULL VIN	1G1ZT64815F [REDACTED]				
Current Mileage	34,000				
District Service Manager's Name & Cell Phone Number	MARCIA FLAGG				
Customer's Concern(s) And Business Reason(s) For Offering Goodwill to this Loyal, Appreciative, Deserving Customer	NOISE IN STEERING. HAD 3 REPAIRS IN 32,190 MILES				
Additional Information Such As RO #s Or Used Vehicle Purchase Information (date & mileage at used vehicle purchase, and seller)					

Component Coverage Letter

<input checked="" type="checkbox"/>	Component Coverage Letter	
Definition:	A letter that covers a specific component for a defined period of time and mileage.	
Purpose:	To restore a customer's confidence in a component as a result of an unsatisfactory service experience.	
When to use:	<ul style="list-style-type: none"> ➤ The customer has concerns regarding repeat failure(s) of a specific component ➤ The customer has concerns about potential out of warranty expenses on a specific component 	
When NOT to use:	<ul style="list-style-type: none"> ➤ For the "complete vehicle" ➤ For a system ("electrical system") ➤ The vehicle has a salvage or branded title ➤ Wear and maintenance items (tires, brake pads, wiper blades, etc.) ➤ If customer has pursued third party intervention (BBB or legal) ➤ In conjunction with other goodwill tools ➤ For powertrain components when the vehicle has GM's 5 year/100,000 mile powertrain warranty 	
Parameters of use:	<ul style="list-style-type: none"> ➤ <u>Can be written up to, but <u>can not exceed 60 months/100,000 miles from the original in-service date</u></u> <ul style="list-style-type: none"> ○ For <u>Cold Start Knock</u>, it should be written for 72/100,000. If it falls w/in the parameters noted in TSB #01-06-01-022 or 01-06-01-028A a transferable component letter will be issued (only exception). ➤ <u>NOT</u> transferable to subsequent owners (except cold start knock) ➤ Electrical components MUST be specific (alternator, radio), NEVER the entire system ➤ Match terms to the customer's ownership cycle ➤ Preferred over GMPP due to cost & focused application 	
Examples:	<ul style="list-style-type: none"> ➤ A catastrophic engine failure within the warranty period - customer is offered a 60/100,000 component letter for the engine ➤ The second alternator failure within the warranty period - customer is offered a 48/75,000 component letter for the alternator 	
Time limit (months):		Mileage limit:
<i>60</i>		<i>75,000</i>
Specific component(s) (i.e. transmission):		
<i>POWER STEERING GEAR, STEERING SHAFT</i>		

GM Vehicle Inquiry System - Summary

Page 1 of 2

GM Vehicle Inquiry System

Summary

Home - [Summary](#) - [Claim History](#) - [Vehicle Build](#) - [Vehicle Component](#) - [Delivery Information](#) - [Dealer Information](#) - [Service Contract](#) - [Warranty Block](#) - [Branded Title](#)

[Help](#)

VIN :	1G1ZT64815F [REDACTED]
-------	------------------------

VEHICLE INFORMATION

Merchandising Model :		1ZT68 -2005 MALIBU LS MAXX		Warranty Start Date :		08/17/2005		
BARS Order Type :		70 - RETAIL - STOCK						
Delivering Dealer :		LANNAN CHEVROLET OF LOWELL, INC. 831 ROGERS ST LOWELL , MA 01852-4337 (978) 458-2526		Selling Source :		13 - CHEVROLET		
				Site Code :		32099		
				Business Associate Code :		152027		
Service Contract :		No	Branded Title :	No	Warranty Block :	No	PDI Status :	Paid

REQUIRED FIELD ACTIONS

Type	Number	Description	Posted Date	Status
RC	05094	SUN VISOR MIRROR COVER NONFUNCTIONAL/BREAKAGE *IN EFFECT UNTIL DEC. 31, 2006*	N/A	Closed

SERVICE INFORMATIONAL ITEMS

Vehicle Has No Current Record Of Outstanding Service Information
--

ON STAR AND XM SATELLITE RADIO INFORMATION

Vehicle Has No Associated On Star or XM Radio Information.
--

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
36/36000 BUMPER TO BUMPER LIMITED WARRANTY	08/17/2005	10 miles	08/17/2008	36010 miles
72/100000 SHEET METAL COVERAGE RUST THROUGH LIMITED WARRANTY	08/17/2005	10 miles	08/17/2011	100010 miles
96/80000 FEDERAL EMISSION CATALYTIC CONV. AND PCM	08/17/2005	10 miles	08/17/2013	80010 miles
36/50000 CALIFORNIA EMISSIONS	08/17/2005	10 miles	08/17/2008	50010 miles
84/70000 CALIFORNIA SELECT COMPONENT	08/17/2005	10 miles	08/17/2012	70010 miles

CLAIM HISTORY

R.O Date	R.O Number	Type	Labor Operation	Odometer Reading
06/23/2008	183396	#	E7700 - SHAFT, STEERING INTERMEDIATE - REPLACE	32190 miles
07/16/2007	174097	#	J1506 - MOUNT, ENGINE - FRONT OF ENGINE - REPLACE	21915 miles
07/16/2007	174097	#	E7700 - SHAFT, STEERING INTERMEDIATE - REPLACE	21915 miles

GM Vehicle Inquiry System - Summary

Page 2 of 2

11/21/2006	167590	#	E9740 - GEAR ASSEMBLY, POWER STEERING - REPLACE	14641 miles
11/21/2006	167590	#	V1427 - 05094 - REPLACE BOTH MIRROR ASSEMBLIES	14641 miles
12/19/2005	157014	#	B2850 - CHANNEL, DRAIN - REPLACE	4134 miles
12/19/2005	157014	#	Z7902 - 2-DAY COURTESY TRANSPORTATION	4134 miles
08/02/2005	152003	I	Z6999 - PDI RELATED FLUID ADDS	10 miles
07/21/2005	A37131	I	Z7000 - PRE-DELIVERY INSPECTION - BASE TIME	0 miles

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March 28, 2011

[REDACTED]
[REDACTED]
Dracut, MA [REDACTED]

Service Request: 71-650058590
Customer Relationship Specialist: Colette Main

Dear [REDACTED]

Chevrolet is pleased to provide service coverage for the steering on your 2005 Chevrolet Malibu MAXX, Vehicle Identification Number 1G1ZT64815H [REDACTED]. This service coverage will commence upon the expiration of the applicable New Vehicle Limited Warranty and will continue until August 17, 2010, or 75,010 miles, whichever occurs first. Chevrolet will make repairs to correct defects related to materials or workmanship occurring during the coverage period specified above. The following item(s) are covered:

Steering – Gear housing and all internal parts; rack and pinion; power steering pump; steering shaft couplings; seals and gaskets.

Chevrolet will not be responsible for conditions arising from tampering, abuse, physical damage, or improper maintenance. This coverage is not transferable to any other vehicle or subsequent owner of your vehicle. Please keep this letter with your Malibu MAXX. Should your vehicle require repairs within the coverage period, present this letter to the Service Manager of an authorized Chevrolet Dealership.

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

ATTENTION: DEALERSHIP SERVICE MANAGER
Component Service Coverage

Submit the claim with all the appropriate authorization codes and H route it to your Area Service Manager. Be sure to retain a copy of this letter in the customer's file and return the original to the customer.

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

February 4, 2011

[REDACTED]
Seneca, IL [REDACTED]

Service Request: 71-594115015
Customer Relationship Specialist: Paula Miller

Dear [REDACTED]:

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 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 \$690.23.

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

GM

CHECK No. [REDACTED]

50-937
213DATE
01/22/08

*****690 DOLLARS

****23 CENTS

AMOUNT
*****690.23PAY
TO THE
ORDER
OF[REDACTED]
SENECA IL [REDACTED]North American Operations
General Motors Corporation
Disbursement Account
SIGNATUREThe Chase Manhattan Bank, N.A.
Syracuse, New York

AUDIT

VENDOR
DUNS NO. BB 000000247

1

VENDOR NAME [REDACTED]

North American Operations

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

DETACH BEFORE DEPOSITING CHECK

CHECK NO. [REDACTED]

PAYMENT
DATE

01/22/08

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
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162ZH528154 [REDACTED]	01/21/08 71-594115015.1-9TTRZC	VM 1-9TTRZC	00.0000	690.23	.00	690.23
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ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR
REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

M3

TOTAL

690.23

.00

690.23

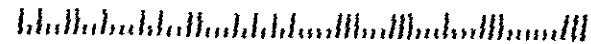
BLOOMINGTON
IL 617
19 DEC 2007 PM 1 T



DEC 21 2007

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

48232+5170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 12/18/2007

17-Digit Vehicle Identification Number (VIN): 1G2ZH528154

Mileage at Time of Repair: 61,323 Date of Repair: 9/21/2007

Claimant Name (please print):

Street Address or PO Box Number:

City: Seneca

State: IL

ZIP Code:

Daytime Telephone Number (include Area Code):

Evening Telephone Number (include Area Code):

Amount of Reimbursement Requested: \$ 690.23

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).

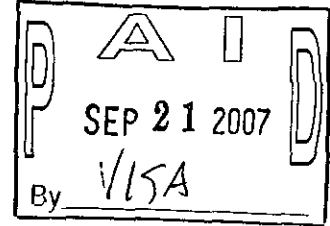


BILL WALSH CHEVROLET-OLDSMOBILE-CADILLAC

1752 EAST NORRIS DRIVE

OTTAWA, IL 61350

815-434-2323



CELL: [REDACTED]

CUSTOMER NO. 38706	ADVISOR DAVID B BARTON	TAG NO. 293	INVOICE DATE 09/21/07	INVOICE NO. PNCS198628
[REDACTED]	LABOR RATE	LICENSE NO.	MILEAGE 61,323	COLOR WHITE/
SENECA, IL [REDACTED]	YEAR / MAKE / MODEL 05/PONTIAC/G6/4CYL SEDAN		DELIVERY DATE 02/11/06	DELIVERY MILES
	VEHICLE I.D. NO. 1 G 2 Z H 5 2 8 1 5 4		SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.	P.O. NO.	R.O. DATE 09/21/07	
COMMENTS				

LABOR & PARTS		
J# 1 08CVZ0	DIAGNOSTIC LIGHT ON POWER STEERING DIG LIGHT COMES ON IN DASH AND AT TIMES HARD TO STEER Steering Column Assy, r&r 2005 CHECK SODES C0460.C0545 POSITION AND TORQUE SENSORS FOLLOWED FLOW CHART BOTH SENSORS OPEN INTERMITTENTLY NEEDS NEW COLUMN REMOVE AND REPLACE STEERING COLUMN CLEAR CODES RECHECK OPERATION O.K.	TECH(S):635 270.00
PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----UNIT PRICE-		
JOB # 1 1 15926870 COLUMN 6.518		359.00
JOB # 1 TOTAL PARTS		359.00
JOB # 1 TOTAL LABOR & PARTS		629.00
J# 2 01CVZ0	*COURTESY TECH INSP. COURTESY TECHNICIAN INSPECTION TO BETTER SERVE OUR CLIENTS WE HAVE PERFORMED A COURTESY TECHNICIAN INSPECTION Courtesy Technician Inspection All	TECH(S):635 0.00
PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----UNIT PRICE-		
JOB # 2 TOTAL PARTS		0.00
JOB # 2 TOTAL LABOR & PARTS		0.00
J# 3 01CVZ7	*ALTESCO INSPECTION COMPLIMENTARY ALTESCO INSPECTION ONE OF THE FEW IN THE NATION ALTESCO MACHINES. IT CHECKS YOUR FRONT END ALIGNMENT (TOE ONLY), FRONT AND REAR SUSPENSION AS WELL AS FRONT AND REAR BRAKE OPERATION AND BALANCE. NOTE:ALTESCO CANNOT MEASURE PAD THICKNESS OR ROTOR OR DRUM CONDITION PLEASE SEE YOUR ADVISOR OR ACTUAL ALTESCO REPORT FOR DETAILS.	TECH(S):635 0.00
PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----UNIT PRICE-		
JOB # 3 TOTAL PARTS		0.00
JOB # 3 TOTAL LABOR & PARTS		0.00
MISC-----CODE-----DESCRIPTION-----CONTROL NO-----		
JOB # A EPA HAZARDOUS WASTE MANAGEMENT		4.00
JOB # A 1 SHOP SUPPLIES		30.00
TOTAL - MISC		34.00
ESTIMATE		
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING ORIGINAL ESTIMATE OF \$690.51 (+TAX)		
COMMENTS		
TO BE PAID BY CASH/CHECK		

DISCLAIMER OF WARRANTIES

The seller, BILL WALSH AUTOMOTIVE GROUP herein expressly disclaims all warranties, either express or implied, including any implied warranty 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.

TERMS CASH: UNLESS OTHER ARRANGEMENTS MADE

I hereby authorize the repair work hereinafter set forth to be done along with the necessary material and agree that you are not responsible for any loss or damage to the vehicle or to the articles left in the vehicle in the case of fire, theft, vandalism or any other cause beyond your control or for any delay 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 the purpose of testing and/or inspection. I agree to pay all charges for the repair work performed and Bill Walsh Chevrolet-Oldsmobile-Cadillac, Inc., 1752 East Norris Drive, Ottawa, IL 61350, employs a collection agency to recover said charges and/or files a lawsuit to collect such charges. I agree to pay collection fees of 150% of the unpaid charges for the said repair work, plus any attorney's fees, court costs or other reasonable costs as Bill Walsh Chevrolet-Oldsmobile-Cadillac, Inc., may incur in the collection of my debt. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto including, but not limited to any amounts represented and assessed for charges incurred through vehicle rentals or damage to rental or loaner vehicles. We guarantee our service work for 90 days or 4,000 miles, whichever comes first. If our repair or replacement parts fails in normal service within that period, we will fix it free of charge for parts and labor. GM replacement parts are warranted for 12 months or 12,000 miles, whichever comes first. NOT RESPONSIBLE FOR LOSS OR DAMAGE TO VEHICLE OR ARTICLES LEFT IN VEHICLE IN CASE OF FIRE, THEFT, VANDALISM, OR ANY OTHER CAUSE BEYOND OUR REASONABLE CONTROL.

COPY

BILL WALSH CHEVROLET-OLDSMOBILE-CADILLAC
1752 EAST NORRIS DRIVE
OTTAWA, IL 61350
815-434-2323

CELL: [REDACTED]

CUSTOMER NO. 38706	ADVISOR DAVID B BARTON	293	INVOICE DATE 09/21/07	INVOICE NO. PNCS198628
[REDACTED]	LABOR RATE	LICENSE NO.	61,323	COLOR WHITE/
SENECA, IL	YEAR / MAKE / MODEL 05/PONTIAC/G6/4CYL SEDAN	DELIVERY DATE 02/11/06	DELIVERY MILES	
	VEHICLE I.D. NO. 1 G 2 Z H 5 2 8 1 5 4	SELLING DEALER NO.	PRODUCTION DATE	
	F.T.E. NO.	P.O. NO.	R.O. DATE 09/21/07	
COMMENTS				

TOTALS-----DISCLAIMER OF WARRANTIES

"IMPORTANT"
 IN THE NEXT FEW WEEKS YOU MAY RECEIVE A QUESTIONNAIRE FROM GENERAL MOTORS REGARDING YOUR SATISFACTION WITH THE SERVICE YOU RECEIVED TODAY. IF FOR ANY REASON YOU CANNOT MARK THIS SURVEY "COMPLETELY SATISFIED", PLEASE CONTACT ME, DANIEL BORKOWSKI, SERVICE MANAGER AT 815-434-2323

BODY AND COLLISION REPAIRS ARE GUARANTEED AGAINST DEFECTS IN MATERIAL AND WORKMANSHIP FOR A PERIOD OF 12 MONTHS FROM THE DATE OF REPAIR. REPAIRS THAT FAIL IN NORMAL SERVICE DURING THAT TIME WILL BE REPAIRED FREE OF CHARGE.

TOTAL LABOR....	270.00
TOTAL PARTS....	359.00
TOTAL SUBLET....	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	34.00
TOTAL MISC DISC	0.00
TOTAL TAX.....	27.23
TOTAL INVOICE \$	690.23

The seller, BILL WALSH AUTOMOTIVE GROUP herein expressly disclaims all warranties, either express or implied, including any implied warranty 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.

TERMS CASH: UNLESS OTHER ARRANGEMENTS MADE

I hereby authorize the repair work hereinafter set forth to be done along with the necessary material and agree that you are not responsible for any loss or damage to the vehicle or to the articles left in the vehicle in the case of fire, theft, vandalism or any other cause beyond your control or for any delay 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 the purpose of testing and/or inspection. I agree to pay all charges for the repair work performed and Bill Walsh Chevrolet-Oldsmobile-Cadillac, Inc., 1752 East Norris Drive, Ottawa, IL 61350, employs a collection agency to recover said charges and/or files a lawsuit to collect such charges. I agree to pay collection fees of 150% of the unpaid charges for the said repair work, plus any attorney's fees, court costs or other reasonable costs as Bill Walsh Chevrolet-Oldsmobile-Cadillac, Inc., may incur in the collection of my debt. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto including, but not limited to any amounts represented and assessed for charges incurred through vehicle rentals or damage to rental or loaner vehicles. We guarantee our service work for 90 days or 4,000 miles, whichever comes first. If our repair or replacement parts fails in normal service within that period, we will fix it free of charge for parts and labor. GM replacement parts are warranted for 12 months or 12,000 miles, whichever comes first. NOT RESPONSIBLE FOR LOSS OR DAMAGE TO VEHICLE OR ARTICLES LEFT IN VEHICLE IN CASE OF FIRE, THEFT, VANDALISM, OR ANY OTHER CAUSE BEYOND OUR REASONABLE CONTROL.

CUSTOMER SIGNATURE

COPY



General Motors Corporation
Customer and Relationship Services
Customer Assistance Center
PO Box 33170
Detroit, MI 48232-5170

August 7, 2008

Attention: Richard Levine
Weisberg & Meyers, LLC

Service request: 71-650859606
VIN: 1G1ZU54815F [REDACTED]
Customer Relationship Specialist: Lynn Foster

Dear Richard Levine:

Thank you for your recent correspondence dated July 16, 2008 received on August 4, 2008 regarding your client [REDACTED] and his 2005 Chevrolet Malibu. We are sorry your client is dissatisfied with his Chevrolet. Our continued success depends upon the satisfaction our customers receive from their vehicles.

We are concerned when we learn that a Chevrolet owner is dissatisfied with any phase of their experience with our product.

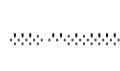
This letter is to confirm your client's scheduled repair opportunity at American Chevrolet-Geo, Inc. located in Modesto, CA. As per our conversation with John Haley at American Chevrolet this repair opportunity will take place on Monday August 11 at 8:00 a.m., Pacific Time. [REDACTED] is to speak directly with John Haley and explain as well as demonstrate any and all concern(s) that your client is having with the 2005 Chevrolet Malibu.

If your client is unable to keep this appointment, please contact me as soon as possible so that other arrangements can be made.

Should you have any questions, please contact me at 866-7990-5600, extension 11076 between 8:00 a.m. and 4:00 p.m. Eastern Time weekdays, and I will be happy to assist you.

Thank you again for your correspondence. We appreciate the opportunity to assist you in this matter.

Sincerely,
Chevrolet Business Resource Center



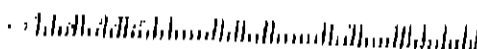
Weisberg & Meyers, LLC
5025 North Central Ave #602
Phoenix, AZ 85012



JUL 25 2008

General Motors Corporation
c/o MSX International, ATTN: BRC Legal
1919 Concept Drive
Warren MI 48091

4809185013 0037



WEISBERG & MEYERS, LLC**ATTORNEYS FOR CONSUMERS****866-775-3666 (TOLL FREE)****866-565-1327 FACSIMILE****WWW.ATTORNEYSFORCONSUMERS.COM****COLORADO OFFICE****(PLEASE SEND MAIL TO THIS ADDRESS)****30752 SOUTHVIEW DRIVE, STE. 150****EVERGREEN, CO 80439****303-974-7266****EXTENSION: 219****E-MAIL: RLEVINE@ATTORNEYSFORCONSUMERS.COM****CALIFORNIA OFFICE****6455 PYRUS PLACE****CARLSBAD, CA 92011****760-676-4001****WRITER LICENSED IN:****CALIFORNIA;****COLORADO; WASHINGTON D.C.**

July 16, 2008

General Motors Corporation
 c/o MSX International, ATTN: BRC Legal
 1919 Concept Drive
 Warren MI 48091

Re: [REDACTED] v. General Motors Corporation
 Our Client: [REDACTED]
 Your Client: General Motors Corporation
 Vehicle: 2005 Chevrolet Malibu
 VIN: 1G1ZU54815F [REDACTED]
 Our File Number: C080032A

Dear Sir/Madam:

Please be advised that this office represents the above-named individual regarding claims against your company pursuant to the Federal Magnuson-Moss Warranty Act, the State Lemon Law and/or the Uniform Commercial Code with regard to the above-listed vehicle.

Having been formally notified of our representation, we respectfully demand you not contact our client for any reason. Instead, please direct all future contact and correspondence to this office. We reserve the right to seek injunctive relief against you should you fail to honor these directives.

Enclosed please find the sales and repair records in our client's possession. As these records show, our client paid an extraordinary sum of money for a vehicle riddled with numerous non-conformities that cause a substantial impairment of the use, value and/or safety of the vehicle. The primary non-conformities include but are not limited to:

1. Defective steering system;
2. Defective body;
3. Defective electrical system; and

ARIZONA * CALIFORNIA * COLORADO * GEORGIA * FLORIDA * ILLINOIS
 NEW MEXICO * OKLAHOMA * OREGON * TEXAS * WASHINGTON * WASHINGTON D.C.

4. Any additional complaints actually made, whether contained on your company's invoices or otherwise.

These non-conformities constitute violations of both Federal and State law, as do the inordinate amount of unsuccessful repair attempts to cure the same. Specifically, when you chose to bind our client to a written warranty limiting all remedies to repair or replacement of defective parts, you undertook the legal obligation to perform effective repairs within a reasonable opportunity. The inordinate amount of incompetent repairs within the applicable warranty period shows you failed to satisfy this obligation. Under basic principles of good faith, this means your limited remedy failed of its essential purpose. This failure caused harm for which our client intends to seek redress.

To avoid any litigation, we respectfully demand you take this vehicle back, return all funds paid towards the vehicle, cancel all applicable contracts, and provide compensation for the damages sustained to date, including our client's attorneys' fees pursuant to the fee-shifting provisions of the Magnuson-Moss Warranty Act and/or Lemon Law. In exchange for meeting this demand, our client will waive all loss of use and aggravation and inconvenience damages sustained to date.

This letter also constitutes notice under U.C.C. § 2-711(3) of our client's security interest in the vehicle for return of the total amount above, plus expenses in handling and inspecting the vehicle. Until you pay this amount, our client has the right to hold the vehicle and use it to the extent necessary to preserve it, to protect its security interest, and to minimize your damages. In addition, although our client needs return of the monies listed above before substitute goods can be acquired, our client reserves the right to mitigate all parties damages by cover and reserves the right to claim such damages here. In addition, any attempt by you or your agents to repossess the car will be wrongful and will subject you to liability for conversion and for wrongful repossession under U.C.C. §§ 9-503 and 9-507 as well as other applicable Consumer Fraud remedies. If the seller (or, if applicable the assignee, or any creditor subject to the FTC Holder Rule) has filed a financing statement covering the goods, I demand, pursuant to U.C.C. § 9-404, that you file a termination statement within ten days to terminate your security interest and forward a copy to this office. Since our client has revoked acceptance, there is no outstanding secured obligation. If you do not file a termination statement within ten days and cooperate in removing the lien, you will be liable under U.C.C. § 9-404(1) for any loss caused our client by your failure. Please also consider this letter prior direct written notification of the defects within our client's vehicle and of our client's intent to pursue a claim pursuant to the State Lemon Law. If and only if you have "final opportunity rights" under said statute, and wish to exercise said rights, you are hereby directed to contact this office within fourteen (14) days.

In conclusion, I urge you to realize a quick resolution of this matter will save all parties a great deal of time, money and effort. To this end, although I believe the above demands are reasonable, our client remains open-minded to a diminution in value settlement, or any other suggestions for an equitable resolution you may have. I thus encourage you to contact this office at your earliest convenience with an offer for resolution. Should you fail to do so in a timely manner, I will

assume you do not seek amicable resolution and will file a claim in a court of law seeking all actual and exemplary damages available.

Best regards,



Richard Levine
Attorney at Law

RL/js
Enc.

cc: [REDACTED]

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

March 28, 2011

[REDACTED]
[REDACTED]
Bradshaw, NE [REDACTED]

Service Request: 71-651423000

Dear [REDACTED]

Enclosed is the GM Product Special Coverage Customer Reimbursement Claim Form. Please complete the form in its entirety and return it to the address listed on the bottom of the form. We will be happy to review your request for reimbursement for the listed repair once we have received this completed form.

At Pontiac, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Pontiac.com or call us at 1-800-762-2737.

Sincerely,

Pontiac Customer Assistance Center

GENERAL MOTORS PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this special coverage condition corrected before December 2007, 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 General Motors dealer.

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

If your claim is:

- Approved, you will receive a check from General Motors,
- Denied, you will receive a letter from General Motors with the reason(s) for the denial, or
- Incomplete, you will receive a letter from General Motors 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 questions about this reimbursement procedure, please call the toll-free telephone number provided at the bottom of the form. If you need assistance with any other concern, please contact the appropriate Customer Assistance Center at the telephone number listed below:

Division	Number	Deaf, Hearing Impaired or Speech Impaired *
Buick	1-800-521-7300	1-800-832-8425
Cadillac	1-800-458-8006	1-800-833-2622
Chevrolet	1-800-222-1020	1-800-833-2438
GMC	1-800-462-8782	1-800-462-8583
Pontiac	1-800-762-2737	1-800-833-7668
Oldsmobile	1-800-442-6537	1-800-833-6537
Hummer	1-866-486-6376	
Virgin Islands	1-800-496-9994	
GMICT	1-800-862-4389	
Puerto Rico – English	1-800-496-9992	
Puerto Rico – Español	1-800-496-9993	

* Utilizes Telecommunication Devices for the Deaf/Text Telephones (TDD/TTY)

**GENERAL MOTORS
PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT CLAIM FORM**

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: _____

Vehicle Identification Number (VIN): _____

Mileage at Time of Repair: _____ Date of Repair: _____

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: _____ State: _____ 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 recall.

Claimant's Signature: _____

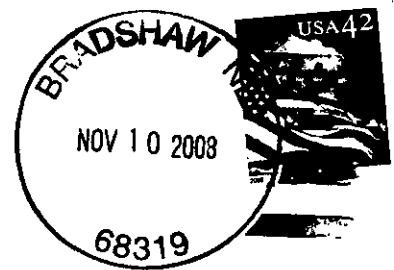
Please mail this claim form and the required documents to:

**General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170**

All recall reimbursement questions should be directed to the following number:
1-800-204-0261

Bradshaw NE

NOV 17 2008



General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

482325170 BOBO





General Motors Corporation
Customer and Relationship Services
PO Box 33170
Detroit, MI 48232-5170

**GENERAL MOTORS
PRODUCT CUSTOMER REIMBURSEMENT CLAIM FORM**

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: 11-10-08

Vehicle Identification Number (VIN): 1G2ZG528554 [REDACTED]

Mileage at Time of Repair: 53645 Date of Repair: 5-21-08

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: Bradshaw State: Ne ZIP Code [REDACTED]

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

Evening Telephone Number (include Area Code): 702-750-1001

Amount of Reimbursement Requested: \$ 852.50

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 recall.

Claimant's Signature: [REDACTED]



Please mail this claim form and the required documents to:

**General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170**

All recall reimbursement questions should be directed to the following number:  General Motors Corporation
1-800-204-0261



11102 WEST DODGE RD. • OMAHA, NEBRASKA 68154 • PHONE (402) 496-0220
www.gmgoodwrenchservice.com • Fax (402) 496-5493

CUSTOMER NO. 85311		ADVISOR NICK A SUHR		393	TAG NO. 2526	INVOICE DATE 05/21/08	INVOICE NO. CVCS571969	
 OMAHA, NE		LABOR RATE	LICENSE NO.	MILEAGE 53,645	COLOR SIL/	STOCK NO.		
		YEAR / MAKE / MODEL 05/PONTIAC/G6/4 DOOR SEDAN					DELIVERY DATE	DELIVERY MILES
		VEHICLE I.D. NO. 1 G 2 Z G 5 2 8 5 5 4					SELLING DEALER NO.	PRODUCTION DATE
		F.T.E. NO.			P.O. NO.		R.O. DATE 05/21/08	
RESIDENCE PHONE 	BUSINESS PHONE		COMMENTS E# 18006439059					

LABOR & PARTS		TECH(S)		367.15
J# 1.02CVZ	BRAKES/STEERING/SUSP	TECH(S):357		367.15
CUSTOMER REPORTS VEHICLE HAS NO PWR STEERING...ADV.				
VEHICLE WAS TOWED IN LAST NIGHT/ THIS MORN. VEHICLE STARTED				
FINE AND DROVE FINE, NOTICED THE SERVICE LIGHT IS ON NOT				
SURE IF RELATED TO ANYTHING...				
DIAGNOSE - REPLACED STEERING COLUMN				
PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 1	1	15926870	COLUMN 6.518	359.00
JOB # 1 TOTAL PARTS				359.00
JOB # 1 TOTAL LABOR & PARTS				726.15

"Any warranties on the products sold hereby are those made by the manufacturer. The seller (above named dealership) hereby expressly disclaims all warranties, either express or implied, including any implied warranty 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 said products."

SUBLET	PO#	VEND	INV#	INV DATE	DESCRIPTION		
JOB # 1	137022			05/21/08	TOWED FROM 183RD CENTER		62.06
						TOTAL - SUBLET	62.06
MISC	CODE				DESCRIPTION	CONTROL NO	
JOB # A	104				CHEV SUPPLIES AND HAZARDOUS WASTE		36.60
						TOTAL - MISC	36.60

ESTIMATE-----
 CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
 ORIGINAL ESTIMATE OF \$100.00 (+TAX)
 APPROVED REVISED ESTIMATE (# 1) OF \$810.00 (+TAX) ON 05/21/08 AT 01:25pm
 BY CHARLIE COMMENTS OK TO PROCEED
 COMMENTS-----
 TOWED/IN
 CONTACT AT [REDACTED]
 TOTALS-----

THANK YOU FOR ALLOWING US THE OPPORTUNITY TO SERVICE YOUR VEHICLE. WE REALIZE THAT CONSUMERS HAVE MANY CHOICES WHEN IT COMES TO SERVICE OR REPAIR OF THEIR VEHICLES. OUR GOAL AT HUBER CHEVROLET-CADILLAC-HUMMER IS TO HAVE 100% COMPLETELY SATISFIED CUSTOMERS. IF FOR ANY REASON WE HAVE FAILED TO MAKE YOU COMPLETELY SATISFIED ON THIS SERVICE VISIT, PLEASE LET YOUR SERVICE ADVISOR KNOW IMMEDIATELY OR ASK TO SPEAK TO A MANAGER.

TOTAL LABOR....	367.15
TOTAL PARTS....	359.00
TOTAL SUBLET...	62.06
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	36.60
TOTAL MISC DISC	0.00
TOTAL TAX.....	27.69

TOTAL INVOICE \$	852.50
-------------------------	---------------

11-12033
SINCERELY,
HUBER CHEVROLET-CADILLAC-HUMMER

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CUSTOMER SIGNATURE

Reynolds and Reynolds EPRINTS14E CC6271B1 Q (12/03)

TRUCKS AUTOMOTIVE,
11132 WEST 6044 RD
MAYSA, UT 84154
(402) 496-0220

Merchant ID: 000006270876

Ref ID: 0004

Sale

VISA Entry Method: Manual

Total: \$ 852.50

05/21/08 15:43:31

Inv. #: 000004 Appr Code: 021000

Apprvd: Online Batch#: 000050

AVS Code: ZIP MATCH Z

Customer Cop/

THANK YOU!

is my daughter.
I paid for the repair work.

15421

NEBRASKA PURCHASE CONTRACT

580048

COMPANY OR

FIRM NAME

MSAS INC. dba MSAS FLEET LEASE

ADDRESS

703 West 2nd Street

CITY

Grand Island, NE 68801

BUYER

ADDRESS

BRADSHAW

CITY

COUNTY

YORK

HOME PHONE

WORK PHONE

STATE AND

NE

ZIP CODE

S.S. #

SALESPERSON

BRANDON ATWOOD

MAKE PONTIAC	MODEL G6	NEW/USED Used	(SERIAL OR MOTOR NO.) 1G2ZG528554	DATE 05/16/08
YEAR 2005	COLOR SILVER	TYPE 4/DOOR	MILEAGE 53368	STOCK NO. 154730
APPROX. DELIVERY DATE 05/16/08				
ADDITIONAL EQUIPMENT-OPTIONS OR WORK TO BE DONE			CASH PRICE OF VEHICLE	
CASH PRICE OF VEHICLE			\$ 9900.00	
FREIGHT			TOTAL CASH DELIVERED PRICE	
COLOR & TRIM			11066.00	
ACCESSORIES			TRADE ALLOWANCE (A)	
			N/A	
			TRADE ALLOWANCE (B)	
			N/A	
			DIFFERENCE	
			11066.00	
			BALANCE OWED ON TRADE	
			N/A	
			PARTIAL PAYMENT	
			N/A	
			CASH ON DELIVERY	
			11066.00	
			UNPAID BALANCE	
			CREDIT DESIRED- YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
			INSURANCE DESIRED- YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
(See contract conditions on reverse side)				
RECORD OF TRADE-IN (A)				
MAKE & YEAR		TYPE	MODEL	COLOR
MILEAGE		SERIAL NO.		
RECORD OF TRADE-IN (B)				
MAKE & YEAR		TYPE	MODEL	COLOR
MILEAGE		SERIAL NO.		

I hereby certify that:

(1) The face and reverse sides of this contract set forth all of the terms and conditions of the contract; there are no other contracts or provisions, oral or written, supplementary or in addition to the provisions expressly set forth in this contract; AND

(2) I have read the terms and conditions of this contract and have received a true copy thereof; AND

(3) I guarantee that the title of my trade-in vehicle(s) is not a salvage title and the vehicle never has had a salvage title nor has my trade-in vehicle ever had a title which contained a notation of any problem or damage. I also guarantee that neither the emissions or safety restraint system has been altered or removed. If any of this is not accurate, the selling dealer may elect to void this sale and/or elect to collect damages (including but not limited to dealer's expenses and lost profits) from me for the difference in value had my title not been salvage or indicating a previous problem or damage.

(4) I guarantee that all safety equipment and all emission control equipment are in good working condition and if not, I will pay to repair or replace this equipment including airbags and seat belts if any are not working or missing.

Notice to Buyer: Do not sign this instrument before you read it, or, if it contains blank spaces. You are entitled to a copy of the instrument you sign. Buyer states that the amounts shown on this instrument were quoted to buyer before buyer's agreement to the sale.

CUSTOMER NOTE THAT THE VEHICLE IS BEING SOLD "AS IS" BY THE SELLING DEALER. SHOULD THE MANUFACTURER'S WARRANTY APPLY TO THIS VEHICLE, IT IS DIRECTLY OFFERED BY THE MANUFACTURER TO THE CUSTOMER. THE SELLING DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESSED 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 VEHICLE. 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. THIS DISCLAIMER AS TO IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE DOES NOT APPLY IF A SERVICE CONTRACT IS SOLD WITHIN 90 DAYS OF THE VEHICLE'S DATE OF SALE IN WHICH THE DEALER IS LEGALLY LIABLE UNDER THE SERVICE CONTRACT.

Notice to Buyer: 1.) That the annual percentage rate (APR) for the installment sale of an automobile may be negotiated with the dealership; and

2.) That the dealership may receive some portion of the finance charge or receive other compensation for providing the financing; and

3.) That the dealership may receive compensation for other products and/or services if included in this transaction. Such products and services may include insurance products, service contracts, warranties, Gap coverage, service or transfer fees, finance charges, and other products or services in accordance with the contract.

CONTRACTUAL DISCLOSURE STATEMENT: (USED VEHICLE ONLY)

The information you see on the window form for this vehicle is part of this contract. Information on the window form overrides any contrary provisions in the contract of sale. The term "window form" refers only to the F.T.C. used car "Buyers Guide", if one is present, and not to any other form or sign that might be in any window.

X

X

(Co-Buyer's Signature)

ACCEPTED BY: X

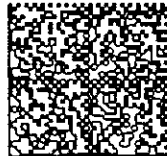
(Dealer or his authorized representative)



CHEVROLET

Customer Assistance Center

Chevrolet Division
General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170



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0004403614 AUG 11 2008
MAILED FROM ZIP CODE 48146

AUG 15 2008

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

X 441 NFE 1 6071 00 00/10/08
FORWARD TIME EXP RTN TO SEND
GREENLAW JR
2 DAISY LN
CHAGRIN FALLS OH 44022-4111

RETURN TO SENDER

44022-2715
48232@5170





Customer Assistance Center
Pontiac
PO Box 33172
Detroit, MI 48232-5172

August 8, 2008

[REDACTED]
Chagrin Falls, OH [REDACTED]

**CUSTOMER DID NOT RECEIVE
THIS LETTER FROM GMC**

Service Request: 71-651722796
Customer Relationship Specialist: Jeff Hardy

Dear [REDACTED]:

Thank you for your recent comments regarding your 2008 Pontiac G6. Feedback from customers, such as you, as to your experiences, allows us to improve our products and increase customer satisfaction.

Given that your comments indicated that you have concerns with your vehicle, we tried to call you to discuss how we can help. Unfortunately, we have been unable to reach you at the telephone number listed in our records.

We realize that you may already be working with someone at your dealership or our Pontiac Customer Assistance Center to resolve your concern. If this is not the case and you have outstanding issues, please feel free to contact us at 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. If you have already contacted the Customer Assistance Center, please disregard this letter.

Pontiac and your dealer's mutual goal is your total satisfaction with Pontiac products and services. We look forward to talking with you soon. ____

Sincerely,

Pontiac Customer Assistance Center



Service Satisfaction Survey

Dissatisfied Customer

Original Name:

[Redacted Name]

Chagrin Falls, OH

[Redacted Address]

Revised Name:

About Your Pontiac Dealership's Service Department

	Completely Satisfied	Very Satisfied	Satisfied	Somewhat Satisfied	Not At All Satisfied
1. How satisfied were you with the convenience of the Service Department's hours?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	Does Not Apply/Not Required	Don't Know	
2. Were services available to you on both an appointment and non-appointment basis?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. When arriving for service, were you greeted promptly?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	Completely Satisfied	Very Satisfied	Satisfied	Somewhat Satisfied	Not At All Satisfied
4. How satisfied were you that all dealership personnel treated you in a courteous, fair, and professional manner?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

About Your Service Consultant/Advisor

	Completely Satisfied	Very Satisfied	Satisfied	Somewhat Satisfied	Not At All Satisfied	Does Not Apply/Not Required
5. How satisfied were you that your Service Consultant took enough time to thoroughly understand your service request?....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Yes	No	Does Not Apply/Not Required	Don't Know		
6. Were you <u>offered</u> transportation options?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	Completely Satisfied	Very Satisfied	Satisfied	Somewhat Satisfied	Not At All Satisfied	Does Not Apply/Not Required
7. How satisfied were you that you were kept informed about the status of your service request?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No	No Time Promised			
8. Was your vehicle ready by the original time promised?.....	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	Completely Satisfied	Very Satisfied	Satisfied	Somewhat Satisfied	Not At All Satisfied	
9. How satisfied were you with the explanation you were given of all services performed?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. Overall, how satisfied were you with your Service Consultant	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

About Service Delivery

	Completely Satisfied	Very Satisfied	Satisfied	Somewhat Satisfied	Not At All Satisfied
11. When you picked your vehicle up, how satisfied were you with:					
- The time it took to complete the transaction?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- The ease of getting your vehicle?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- The condition in which it was returned?.....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Yes	No			
12. Were ALL of your service concerns corrected on this service visit?	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

IF NO, why not?(check all that apply)

- ☐ Condition explained - repair not necessary
- ☐ Work performed did not correct the problem
- ☒ Service Department could not duplicate problem
- ☐ Service Department was too busy
- ☐ Parts not available
- ☐ I declined repair
- ☐ Other
- ☐ Don't Know

	Completely Satisfied	Very Satisfied	Satisfied	Somewhat Satisfied	Not At All Satisfied
13. How satisfied are you that your vehicle was fixed right on this service visit?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Yes	No			
14. Were you given a copy of the completed repair order/invoice?..	<input checked="" type="checkbox"/>	<input type="checkbox"/>			
	Yes	No	Don't Know/ Not Sure		
15. Were you contacted shortly after this service visit to determine your satisfaction with the dealership 's service?....	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

Summing Up Your Experience

	Completely Satisfied	Very Satisfied	Satisfied	Somewhat Satisfied	Not At All Satisfied
16. Based on this service visit, overall, how satisfied are you with Cole-Valley Motor Company?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Definitely Would	Probably Would	Might/Might Not	Probably Not	Definitely Not
17. Would you recommend this dealership for service?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Completely Satisfied	Very Satisfied	Satisfied	Somewhat Satisfied	Not At All Satisfied
18. Overall, how satisfied are you with your 2008 G6?.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19.Are you... <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female					
20.Your age... <input type="checkbox"/> Under 25 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input checked="" type="checkbox"/> 45-54 <input type="checkbox"/> 55-64 <input type="checkbox"/> 65 or older					
			Yes	No	
21.May we include your name when providing this information to your dealership ?			<input type="checkbox"/>	<input checked="" type="checkbox"/>	

22. Do you have any other comments/recommendations about Cole-Valley Motor Company?

Overall, they are nice folks. However, I am concerned that they are not getting support on solving this problem from GM. I had a very similar problem with a 2004 Malibu, and the dealer replaced parts and solved the problem. They said is was a known problem. On the G6, they are saying that this is not a known problem. If the car ever loses control over this steering issue, the multiple visits to the dealership will be on file to show that I have attempted to have the problem fixed.



STATE OF OHIO
Office of the Attorney General

August 7, 2008

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

GENERAL MOTORS PONTIAC/GMC DIVISION
PO BOX 33172
DETROIT, MI 48232-5172

Re: [REDACTED]
Complaint #: 432010

Dear Sir/Madam:

Enclosed please find a copy of a complaint against your company that the Attorney General has received from the above-named consumer. A preliminary review of the complaint indicates the consumer may have a "lemon" vehicle as defined by R.C. 1345.71 et seq.

I would like to work with you on this case in an effort to mediate a resolution, which would save both the consumer and your company the expense of litigation.

Please provide us with your written response to this complaint within ten (10) days of the receipt of this request.

In the event this complaint has been satisfactorily resolved, please advise me of the terms of the resolution so I can confirm with the consumer that the resolution offered is acceptable and close the file.

Thank you for your prompt attention to this matter.

Respectfully submitted,

NANCY H. ROGERS
Attorney General of Ohio

A handwritten signature in black ink, which appears to read "David Strawser", is written over the typed name and title.

David Strawser
Lemon Law Administrator
Consumer Protection Section
(614) 995-1578
DStrawser@ag.state.oh.us
(866) 243-4590 (Fax)

Enclosure
2238

NOTE: Please send all communication electronically when possible.



State of Ohio
Office of the Attorney General
30 E. Broad St., Columbus, OH 43215

CONSUMER COMPLAINT FORM

Also available online at
www.ag4ohio.gov
Please type or print
(use dark ink)

Consumer Protection Section
30 E. Broad St., 14th Fl.
Columbus, OH 43215-3400

877-AG4OHIO

CONSUMER PROTECTION

JUL 29 2008

OHIO ATTORNEY GENERAL'S OFFICE

Office Use Only
Complaint #:

432010

Consumer Information

Name
Last

Address

Street

City

Daytime telephone#

Do you prefer to receive e-mail correspondence regarding this complaint? Yes ☐ No ☐

E-mail address

In order to help our office better serve Ohio consumers, please circle any/all categories that apply to you (optional):

Over the age of 60

Yes ☐ No ☒

Family income below \$20,000

Yes ☐ No ☒

Person with disability

Yes ☐ No ☒

Disaster victim

Yes ☐ No ☒

Non-English speaking

Yes ☐ No ☒

Active Service Member or Immediate Family

Yes ☐ No ☒

Company name

Address

Street

City

Telephone #

E-mail address

Business owner/salesperson

Product/service involved

Transaction date

Cost of product/service \$

Amount paid so far \$

Did you sign a contract? Yes ☐ No ☐

Is product/service under warranty? Yes ☐ No ☐

Are you making payments? Yes ☐ No ☐

About the Company

About the Transaction

First

Zip Code

Alternate telephone#

Ashtabula

MASSACHUSETTS CHEVY PONTIAC CADILLAC HONDA
5456 MAIN AVE. AS

Main Ave

Ashtabula

State

OHIO

Zip Code

44004

County

Ashtabula

Fax # ()

Motor Vehicle Complaints About the Transaction

HOW DID THIS TRANSACTION OCCUR?

☐ E-MAIL☐ FAX☐ HOME VISIT☐ INFOMERCIAL☐ INTERNET AUCTION☐ INTERNET BANNER/WEB SITE☐ MAGAZINE/NEWSPAPER☐ MAIL☐ RADIO☐ STORE VISIT☒ TELEPHONE CALL☐ TELEVISION☐ OTHERYear 2006Make/Model PONTIAC G6 SEDANPurchased/leased: 4/30/06 New ☒ Used ☐ (Circle one)Date of Purchase/lease 4/30/06 Mileage at Purchase/lease 10Current Mileage 69,230 Purchase/lease amount \$ 20,380.00Vehicle Identification # (Not your license plate #) 1G2ZG558664

Briefly describe your complaint: (Use additional paper if necessary - Please do not write on back of forms.)

See Attached Letter

Have you contacted any other agencies? Yes ☒ No ☐If yes, please list: OH LAMON LAW - INSURANCE Co. - ANOTHER GM DEALER Midway Pontiac - 1-800-762-2737 GMC info CtrHave you retained an attorney? Yes ☐ No ☒ Have you filed a lawsuit? Yes ☐ No ☒What would you consider a reasonable resolution to your complaint? fix it TRADE it IN FOR ANYTHING BUT A G.M.

The information given above is true to the best of my knowledge and belief. I understand a copy of this form and all documents relating to my complaint will be sent to the company about which I have filed this complaint.

Signature [Redacted]Date 7/20/08

[REDACTED]
Pierpont, OH [REDACTED]
[REDACTED]

July 23, 2008

State of Ohio
Office of the Attorney General
Consumer Protection Section
30 E Broad Street
Columbus, OH 43215

RE : Pontiac 2006 G-6 Steering problem

Dear Sir/Madam:

It all started about 6,000 miles the power steering light did appear along with a dinging noise. The power steering went out I shut off the car. When the car was restarted everything seemed to be ok. Called the dealer (Nassief Chevrolet-Pontiac Cadillac-Honda, 5456 Main Ave., Ashtabula, OH 44004 Phone 440-997-5151). They said when ever this happens to shut down motor and restart to reset the computer. This happened several times - 6 maybe more. Each time - no power steering until restarted. Before warranty expired (36,000) I took the car to dealer at 35,791 miles and told them steering keeps locking up.

At 35,791 miles dealer (Nassief) replaced the steering module and told me everything was ok. At 35,855 miles power steering went out again. Took car back to dealer and they said they recalibrated steering and said everything's ok.

Power steering light came back on several times, losing steering. I shut car off and restarted and everything seemed ok (i.e. the steering would come back on)

Friday 7/11/08 friend (Doreen Costello) was driving car and went to back out of parking space at work and steering got very tight, she thought the car had stalled. Upon checking found car still running but no power steering and power steering light was on and binging noise warning of problem. Friend attempted restart and the steering did reset but within seconds steering went out again light came on and binging noise. Third attempt to start friend started car and sat there for few seconds without touching steering wheel. Steering wheel jerked slightly, steering warning light and binging resumed. Friend was able to turn steering wheel 360 degrees around with feeling there was no contact at all as opposed to hard steer usually felt. Shut off car again and restarted with steering light still on and

binging noise sounding steering was hard. Friend pulled car forward few feet to get it out of way of traffic in the parking lot. Friend left car and called me for a ride home from work refusing to drive car stating it was unsafe. Friend called dealer who said they would send a tow truck, but could do nothing because car was out of warranty. Tow came and car started and steering was fine, tow driver was able to back the car into position to haul to dealer.

Called dealer and they also told me they would tow it in and look at it and call me back. Monday 7/14/08 dealer called me back and said they could not find anything wrong with the car, meanwhile I refuse to drive this car until something is done to correct this problem. Dealer said they cannot fix what they can't see wrong. Car is still at dealer and in my opinion is unsafe to drive.

I have done a little research and found this seems to be a common problem with this vehicle. I hope someone will insist that Pontiac fix this problem before someone gets hurt or killed driving a car that loses its steering. My friend had just returned from a trip to Columbus in work vehicle. I wonder what would have happened if she would have driven this vehicle to Columbus in all that traffic.

Sincerely,



XC: National Highway Transportation Safety Administration (NHTSA)



General Motors Corporation
Customer and Relationship Services
Customer Assistance Center
PO Box 33170
Detroit, MI 48232-5170

August 18, 2008

State of Ohio
Office of the Attorney General
Consumer Protection Division
Attention: Lemon Law Administrator David Strawser

Customer: [REDACTED]
Reference number: 432010
Service request: 71-652243462
Customer Relationship Specialist: Lynn Foster

Dear Lemon Law Administrator Strawser:

Thank you for your recent correspondence regarding [REDACTED]. We are sorry he is dissatisfied with his 2006 Pontiac G6. General Motors' continued success depends upon the satisfaction our customers receive from their vehicles.

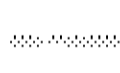
We apologize for any inconvenience [REDACTED] may have experienced.

The inspection of [REDACTED]'s vehicle at Nassief Pontiac-Cadillac, Inc. revealed it is operating within General Motors specifications. Although we would like to increase [REDACTED]'s satisfaction with his vehicle, we do not feel additional repairs or adjustments are appropriate at this time. If the condition the customer is experiencing should change, we will be happy to review the matter further.

If you have further questions, please contact our Pontiac Customer Assistance Center at 1-800-762-2737 Monday through Friday between 8:00 a.m. and 5:00 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 Business Resource Center





General Motors Corporation
Customer and Relationship Services
Customer Assistance Center
PO Box 33170
Detroit, MI 48232-5170

August 8, 2008

State of Ohio
Office of the Attorney General
Consumer Protection Division
Attention: Lemon Law Administrator David Strawser

Customer: [REDACTED]
Reference number: 432010
Service request: 71-652243462
Customer Relationship Specialist: Lynn Foster

Dear Lemon Law Administrator Strawser

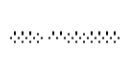
Thank you for your recent correspondence regarding [REDACTED]. We are sorry he is dissatisfied with his 2006 Pontiac G6. Our continued success depends upon the satisfaction our customers receive from their vehicles.

We are concerned when we learn that a Pontiac owner is dissatisfied with any phase of their experience with our product. For this reason, both our office and the dealer involved will be advised of your correspondence.

After we review [REDACTED] concerns, we will be in contact with you to discuss this matter further.

Sincerely,

Pontiac Business Resource Center



Area Office
Airport Road
743 Airport Blvd
Panama City, FL 32401
850-914-6346

Calhoun County
244 North Main Street
Blountstown, FL 32424
850-674-9490

Gulf/Franklin County
201 Monument Avenue
Port St. Joe, FL 32456
850-229-1630

Jackson County
2869 Saint Clair Street
Marianna, FL 32446
850-482-9140

Washington/Holmes County
757 Hoyt Road
Chipley, FL 32428
850-638-6343

Directly Operated Centers
Arnold High School
Early Head Start
550 Alf Coleman Road
Panama City Beach, FL 32407
350-236-3070

Bayou George
1332 Hudson Road
Panama City, FL 32404
50-722-0200

Chapman Early Education
928 East 11th Street
Panama City, FL 32401
50-914-6340

East Avenue Early Education
114 East Avenue
Panama City, FL 32401
90-747-5404

Franklin County/First Steps
2 Avenue E
Tallahassee, FL 32323
90-653-3366

Galena
5 Nelson Drive
Panama City, FL 32401
90-872-7561

La Villa
2 1/2 Flowers Avenue
Panama City, FL 32405
90-873-7181

Land Terrace
5 West 12th Street
Panama City, FL 32401
872-4565

Pat Patterson
Redwood Avenue
Panama City, FL 32401
872-4675

Pat Patterson
East 7th Court
Panama City, FL 32401
72-7360

Highway 388
Panama City, FL

FAX TRANSMITTAL

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

Early Education and Care, Inc.

Date

8/25/08

Number of pages including cover page:

3

To

Megan - Ex 42035

Organization/Department

Reimbursement Dept.

Re:

Customer Reimbursement Claim Form

cc:

Fax Number

1-866-962-2868

Telephone Number

1-866-790-5700

Ext 42035

From

Perry + Rebecca Doyle - File # 71-1653693938

Department

EEC Email Address

Telephone Number

850-628-2724

Fax Number

☒ Urgent☐ For Review☐ Please Comment☐ Please Reply

Message: Per conversation with Megan I

am faxing the registration # for the
2005 Mphs and another copy of the
receipt that was paid in CASH.
Thank you for your prompt attention
to this matter.

Disclaimer:

The information transmitted is intended only for the person or entity to which is addressed and may contain confidential and/or privileged materials. Any review, retransmission, dissemination or other use of, or taking of any action in reliance upon this information by persons or entities other than the intended recipient is prohibited. If you received this in error, please contact the sender and destroy the material.

450 Jenks Avenue • Panama City, FL 32401
850-872-7550, Office • 850-769-1066, Fax • www.ecskids.org

REG. RX	INIT REG.	COUNTY FEE	MAIL FEE	SALES TAX	TITLE FEE
\$45.10	\$	\$2.50	\$	\$	\$

PLATE ISSUED	DATE ISSUED	INTERNET KIOSK FEE	VOLUNTARY CONT. TOTAL	GRAND TOTAL
	02/04/08	\$0.00	\$	\$47.60

FLORIDA VEHICLE REGISTRATION

DATE ISSUED: 02/04/08
 DL# [REDACTED] DL [REDACTED]
 TAG# [REDACTED] DECAL# 01889831 EXP: 02/15/08
 VIN: 1G1ZS52F65F [REDACTED] TC: 95737748 YR/MK: 2005 CHEV

[REDACTED]
 APACHE, FL [REDACTED]

L#: 155725 T#: 527908503 B#: 101014 R#: 527908503

AFROCC-644-3
PRINTED IN U.S.A.

Calhoun County
244 North Main Street
Blountstown, FL 32424
850-674-9490

Gulf/Franklin County
201 Monument Avenue
Port St Joe, FL 32456
850-229-1630

Jackson County
2859 Saint Clair Street
Mariana, FL 32446
850-482-9140

Washington/Holmes County
757 Hoyt Road
Chipley, FL 32428
850-638-6343

Directly Operated Centers
Arnold High School
Early Head Start
550 Alf Coleman Road
Panama City Beach, FL 32407
850-236-3070

Bayou George
8332 Hudson Road
Panama City, FL 32404
850-722-0200

Chapman Early Education
2928 East 11th Street
Panama City, FL 32401
850-914-6340

East Avenue Early Education
1214 East Avenue
Panama City, FL 32401
850-747-3404

Franklin County/First Steps
62 Avenue E
Apalachicola, FL 32323
850-652-3366

Gassalina
26 Nelson Drive
Panama City, FL 32401
850-872-7561

La Villa
02 1/2 Flowers Avenue
Panama City, FL 32405
850-722-7181

Island Terrace
16 West 12th Street
Panama City, FL 32401
850-872-4565

Marathon
5 Redwood Avenue
Panama City, FL 32401
850-872-4675

Marathon
500 7th Court
Panama City, FL 32401
850-872-7560

Marathon
21 Highway 388
Panama City, FL
850-222-4341

Early Education and Care, Inc.

Date 8/11/08

Number of pages including cover page: 3(5)

To Megan

Organization/Department Reimbursement Dept

Re: Customer Reimbursement Claim Form

cc:

Fax Number 1-866-962-2868 Telephone Number 1-866-790-5700 Ext 42035
From [Redacted] File # 71-653093928

Department

BEC Email Address

Telephone Number 850-628-2724 Fax Number

☐ Urgent

☒ For Review

☐ Please Comment

☐ Please Reply

Message: Please Review the Claim Form
that is submitted, for questions or
more info contact me at 850-628-2724

Thank You

Disclaimer

The information transmitted is intended only for the person or entity to which is addressed and may contain confidential and/or privileged materials. Any review, retransmission, distribution or other use of, or taking of any action in reliance upon this information by persons or entities other than the intended recipient is prohibited. If you received this in error, please contact the sender and destroy the material.

450 Jenks Avenue • Panama City, FL 32401
850-872-7550, Office • 850-769-1066, Fax www.eccskids.org

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant:

Date Claim Submitted: 8-11-0817-Digit Vehicle Identification Number (VIN): 1G12552F651 [REDACTED]Mileage at Time of Repair: 65019 Date of Repair: 8-11-08

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: Apalachicola State: FL ZIP Code: [REDACTED]

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

Evening Telephone Number (include Area Code): 11Amount of Reimbursement Requested: \$ 507.38

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: [REDACTED]

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

ARQCC-544-3
PRINTED IN U.S.A.


GMApalachicola, FL 

December 2007

Dear 

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.

Do not take your vehicle to your Chevrolet 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 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 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 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).



[REDACTED]
Chevrolet
P.O. Box 909989
Milwaukee, WI 53209-9989



07126 1G1ZS52F65F [REDACTED] 13 0012209

[REDACTED]
APALACHICOLA, FL [REDACTED]

Calhoun County
244 North Main Street
Blountstown, FL 32424
850-674-9490

Gulf/Franklin County
201 Monument Avenue
Port St Joe, FL 32456
850-229-1630

Jackson County
2859 Saint Clair Street
Marianna, FL 32446
850-482-9140

Washington/Holmes County
757 Hays Road
Chipley, FL 32428
850-638-6343

Directly Operated Center
Arnold High School
Early Head Start
550 Alf Coleman Road
Panama City Beach, FL 32407
850-236-3070

Bayou George
8332 Hudson Road
Panama City, FL 32406
850-722-0200

Chapman Early Education
3928 East 11th Street
Panama City, FL 32401
850-914-6340

East Avenue Early Education
1214 East Avenue
Panama City, FL 32401
850-747-5404

Franklin County/First Steps
62 Avenue E
Palachicola, FL 32323
904-653-3366

Gasoline
16 Nelson Drive
Panama City, FL 32401
904-72-7567

La Villa
32 1/2 Flower Avenue
Panama City, FL 32405
904-72-7181

Land Terrace
16 West 12th Street
Panama City, FL 32401
904-72-4565

Le Rousseau
5 Redwood Avenue
Panama City, FL 32401
904-72-4675

Le
East 7th Court
Panama City, FL 32401
904-72-7560

Le
Highway 388
Panama City, FL
904-22-4341

Early Education and Care, Inc.

Date 8/11/08

Number of pages including cover page: 3(5)

To Megan

Organization/Department Reimbursement Dept

Re: Customer Reimbursement Claim Form

cc:

Fax Number 1-866-962-2868

From [Redacted] Telephone Number 1-866-790-5700 Ext 42035

Department File # 71-65309 3928

BEC Email Address

Telephone Number

Fax Number

☐ Urgent

☒ For Review

☐ Please Comment

☐ Please Reply

Message: Please review the claim form that is submitted, for questions or more info contact me at [Redacted]

Thank You

Disclaimer

The information transmitted is intended only for the person or entity to which is addressed and may contain confidential and/or privileged materials. Any review, retransmission, distribution or other use of, or taking of any action in reliance upon this information by persons or entities other than the intended recipient is prohibited. If you received this in error, please contact the sender and destroy the material.

450 Jenks Avenue • Panama City, FL 32401
850-872-7550, Office • 850-769-1066, Fax • 850-769-1067
www.ecskids.org

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 8-11-0817-Digit Vehicle Identification Number (VIN): 1G12552F65F [REDACTED]Mileage at Time of Repair: 65019 Date of Repair: 8-11-08

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: Apalachicola State: FL ZIP Code: [REDACTED]

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

Evening Telephone Number (include Area Code): 11Amount of Reimbursement Requested: \$ 507.38

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: [REDACTED]

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

Unless otherwise provided by law, the seller (above named dealership) hereby expressly disclaims all warranties, either express or implied, including any implied warranty 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 said products.

Actual
Amount

24

TOTAL PARTS

Estimated Cost of Repair Work	
-------------------------------	--

days | Total Labor

or _____ miles, whichever comes first

DAILY STORAGE CHARGES: \$ _____ **/DAY**
 *NO DAILY STORAGE CHARGES SHALL ACCRUE OR BE DUE AND PAYABLE
 FOR A PERIOD OF 3 WORKING DAYS FROM THE DAY CUSTOMER IS NOTIFIED
 OF WORK COMPLETION.

(E.g., the State of Florida requires a \$1.00 fee to be collected for each new tire sold in the state [s.403.718], and a \$4.50 fee to be collected for each new or remanufactured battery sold in the state [s.403.7185]. This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies or waste disposal.

I WAIVE REASSEMBLY OF MY VEHICLE INITIAL _____

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 vehicle or articles held 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.

and

2

REFERENCES

\$ | Total Labor

Total Parts

Repair Estimate Charges

Sub Total

Tax

Gas

TOTAL AMOUNT

[illegible]

3/9/9

Trial	Control	MCI	AD
1	85	75	65
2	88	78	68
3	90	80	70
4	92	82	72
5	95	85	75

44.9

33.9

Abstract

57

AROC-644-3
PRINTED IN U.S.A.

PAGE 03

GM

December 2007


Apalachicola, FL Dear 

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.

Do not take your vehicle to your Chevrolet 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 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 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 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).

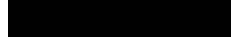




Chevrolet
P.O. Box 909989
Milwaukee, WI 53209-9989



07126 1G1ZS52F65E [redacted] 13 0012209



APALACHICOLA, FL [redacted]

March 28, 2011

[REDACTED]

Apalachicola, FL [REDACTED]

Service Request: 71-653093928

Customer Relationship Specialist: Beau Casset

Dear [REDACTED]

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 \$507.38.

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.

March 28, 2011

[REDACTED]
[REDACTED]
Apalachicola, FL [REDACTED]

Service Request: 71-653093928
Customer Relationship Specialist: Megan Dyck

Dear [REDACTED]

Enclosed is the GM Product Special Coverage Customer Reimbursement Claim Form. Please complete the form in its entirety and return it to the address listed on the bottom of the form. We will be happy to review your request for reimbursement on the loss of power steering assist that you had repaired once we have received this completed form.

If you have any future questions, please feel free to contact our Chevrolet Customer Assistance Center at 1-800-204-0261 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 Managers will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

GENERAL MOTORS SPECIAL COVERAGE CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this special coverage condition corrected before December 2007 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 General Motors dealer.

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

If your claim is:

- Approved, you will receive a check from General Motors,
- Denied, you will receive a letter from General Motors with the reason(s) for the denial, or
- Incomplete, you will receive a letter from General Motors 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 questions about this reimbursement procedure, please call the toll-free telephone number provided at the bottom of the form. If you need assistance with any other concern, please contact the appropriate Customer Assistance Center at the telephone number listed below:

Division	Number	Deaf, Hearing Impaired or Speech Impaired *
Buick	1-800-521-7300	1-800-832-8425
Cadillac	1-800-458-8006	1-800-833-2622
Chevrolet	1-800-222-1020	1-800-833-2438
GMC	1-800-462-8782	1-800-462-8583
Pontiac	1-800-762-2737	1-800-833-7668
Oldsmobile	1-800-442-6537	1-800-833-6537
Hummer	1-866-486-6376	
Virgin Islands	1-800-496-9994	
GMICT	1-800-862-4389	
Puerto Rico – English	1-800-496-9992	
Puerto Rico – Español	1-800-496-9993	

* Utilizes Telecommunication Devices for the Deaf/Text Telephones (TDD/TTY)

GENERAL MOTORS
PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT CLAIM FORM

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: _____

Vehicle Identification Number (VIN): _____

Mileage at Time of Repair: _____ Date of Repair: _____

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: _____ State: _____ 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 recall.

Claimant's Signature: _____

Please mail this claim form and the required documents to:

General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

All recall reimbursement questions should be directed to the following number:
1-800-204-0261

North American Operations

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



CHECK

No. [REDACTED]

50-837
213DATE
09/02/08

*****507 DOLLARS

****38 CENTS

AMOUNT
*****507.38PAY
TO THE
ORDER
OF[REDACTED]
APALACHICOLA FL [REDACTED]North American Operations
General Motors Corporation
Disbursement Account
SIGNATUREThe Chase Manhattan Bank, N.A.
Syracuse, New York

AUDIT

VENDOR
DUNS NO BB 000000132

1

VENDOR NAME [REDACTED]

North American Operations

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

DETACH BEFORE DEPOSITING CHECK

CHECK NO. [REDACTED]

PAYMENT
DATE

09/02/08

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
161ZS52F65F [REDACTED]	08/29/08 71-653093928.1	VH 1-AVYMVC 1-AVYMVC	00.0000	507.38	.00	507.38
ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782				M3		
TOTAL				507.38	.00	507.38

North American Operations

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



CHECK No. [REDACTED]

50-937
213DATE
08/20/08

*****200 DOLLARS

*****00 CENTS

AMOUNT
*****200.00PAY
TO THE
ORDER
OF

PITTSBURGH CA [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account
SIGNATUREThe Chase Manhattan Bank, N.A.
Syracuse, New York

AUDIT

[REDACTED]

VENDOR
DUNS NO. 88 000000036
VENDOR NAME [REDACTED]

1

North American Operations

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

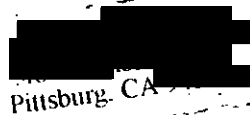
DETACH BEFORE DEPOSITING CHECK

CHECK NO. [REDACTED]

PAYMENT
DATE

08/20/08

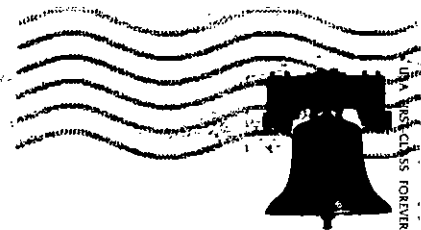
REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1G1ZS52F75F [REDACTED]	08/19/08 .71-654297	VM 1-ATJVT 321.1-ATJVT	00.0000	200.00	.00	200.00
ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782				W3		
TOTAL				200.00	.00	200.00



Pittsburg, CA

OAKLAND CA 946

11 AUG 2008 PM 6 L



AUG 14 2008

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

48232+5170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: _____

17-Digit Vehicle Identification Number (VIN): 1G1ZS52F75F [REDACTED]

Mileage at Time of Repair: 55055 Date of Repair: 8/01/08

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: Pittsburg

State: CA

ZIP Code: _____

Daytime Telephone Number (include Area Code): _____

Evening Telephone Number (include Area Code): _____

Amount of Reimbursement Requested: \$ 200.00

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.

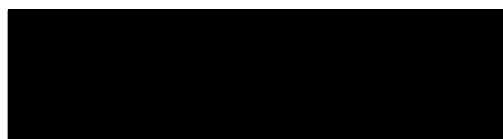
Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

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).



SALES DRAFT

WINTER CHEVROLET HONDA
3750/3800 CENTURY CT.
PITTSBURG, CA 94565
TERMINAL 1477848

351203479883

07/30/2008 10:30:50

M [REDACTED]
AUTH. TRANS. ID. M000DF2PS
INVOICE # 6156117 H67
AUTH. CODE [REDACTED]

SALE TOTAL

\$200.00

CUSTOMER COPY

207204

INVOICE

PAGE 2

SERVICE ADVISOR: 9856 MARTIN BOISVERT

Winter
3750 CENTURY COURT
P.O. Box 31
PITTSBURG, CA 94565-0231
(925) 439-8222
www.winterauto.com



VIN		LICENSE	MILEAGE IN/OUT	TAG
1G1ZS52F75F [REDACTED]			55055/55055	T41
PROMISED	PO NO	PAYMENT	INV. DATE	
7:00 01AUG08		0.00 CASH	30JUL08	
OPTIONS: STK:60824 ENG:2.2 Liter_MFI_DOHC				
LIST		NET	TOTAL	
15:01 SA: 9856				

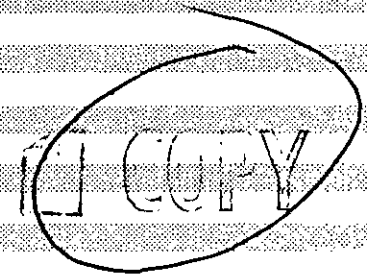
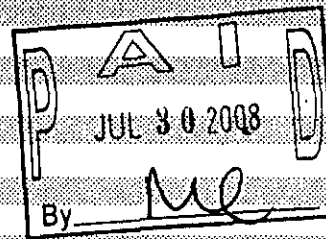
289.95 29JUL08 15:04 SA: 9856
CONTACT: SANDRA 432-6659

PERFORM ALIGNMENT, CHECK SQUEAK

CUST HAS \$200.00 DEDUCTABLE ON THANK YOU & HAVE A NICE DAY

LINE A TOTAL CUST PAY IS

\$289.95



NOTICE: YOU MAY
CHOOSE ANOTHER SMOG
CHECK STATION TO
PERFORM THE NEEDED
REPAIRS, INSTALLATIONS,
ADJUSTMENTS, OR
SUBSEQUENT TESTS.

ORIGINAL ESTIMATE #		FINAL REVISED ESTIMATE #		DESCRIPTION	TOTALS
DATE	TIME	PHONE # OR IN PERSON	AUTHORIZED BY	LABOR AMOUNT	244.94
REASON				PARTS AMOUNT	359.00
REASON				GAS, OIL, LUBE	0.00
REASON				SUBLET AMOUNT	0.00
REASON				MISC. CHARGES	0.00
REASON				TOTAL CHARGES	603.94
REASON				LESS INSURANCE	0.00
REASON				SALES TAX	29.62
ACKNOWLEDGE NOTICE AND ORAL APPROVAL OF AN INCREASE IN THE ORIGINAL ESTIMATE PRICE.				PLEASE PAY THIS AMOUNT	633.56
ACKNOWLEDGE RECEIPT OF VEHICLE AND TRAVE RECEIVED A COPY OF THIS INVOICE.					

NOTICE TO CONSUMER: PLEASE READ IMPORTANT INFORMATION ON BACK

BAR # AB006633 EPA # CAL000276197

CUSTOMER COPY

Winter

3750 CENTURY COURT

P.O. Box 31

PITTSBURG, CA 94565-0231

(925) 439-8222

www.winteraauto.com



OWNER #: 164786

207204

INVOICE

PAGE 2

PITTSBURG, CA

HOME:

CONT:N/A

BUS:

CELL:

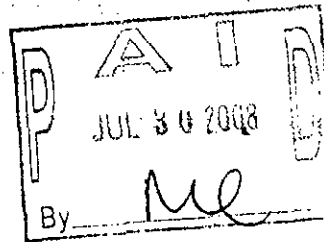
SERVICE ADVISOR: 9856 MARTIN BOISVERT

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG
SILVER	05	CHEVROLET MALIBU	1G1ZS52F75F		55055/55055	T41
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	PAYMENT	INV. DATE
27AUG06 DD			17:00 01AUG08		0.00 CASH	30JUL08
R.O. OPENED	READY	OPTIONS: STK:60824 ENG:2.2_Liter_MFI_DOHC				

15:01 25JUL08	15:49 30JUL08					
LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET TOTAL
EST:	200.00	25JUL08	15:01	SA: 9856		

EST: 289.95 29JUL08 15:04 SA: 9856
CONTACT: SANDRA 432-6659
PERFORM ALIGNMENT, CHECK SQUEAK

CUST HAS \$200.00 DEDUCTABLE ON THANK YOU & HAVE A NICE DAY
LINE A TOTAL CUST PAY IS
\$289.95



NOTICE: YOU MAY
CHOOSE ANOTHER SMOG
CHECK STATION TO
PERFORM THE NEEDED
REPAIRS, INSTALLATIONS,
ADJUSTMENTS, OR
SUBSEQUENT TESTS.

ORIGINAL ESTIMATE \$		FINAL REVISED ESTIMATE \$		DESCRIPTION	TOTALS
DATE	TIME	PHONE # OR IN PERSON	AUTHORIZED BY	LABOR AMOUNT	244.94
REASON				PARTS AMOUNT	359.00
				GAS, OIL, LUBE	0.00
				SUBLET AMOUNT	0.00
				MISC. CHARGES	0.00
				TOTAL CHARGES	603.94
				LESS INSURANCE	0.00
				SALES TAX	29.62
ACKNOWLEDGE NOTICE AND ORAL APPROVAL OF AN INCREASE IN THE ORIGINAL ESTIMATE PRICE				PLEASE PAY THIS AMOUNT	633.56
ACKNOWLEDGE RECEIPT OF VEHICLE AND HAVE RECEIVED A COPY OF THIS INVOICE					

NOTICE TO CONSUMER: PLEASE READ IMPORTANT INFORMATION ON BACK

BAR # AB006633 EPA # CAL000276197

CUSTOMER COPY

R #: 164786

207204

Winter3750 CENTURY COURT
P.O. Box 31
PITTSBURG, CA 94565-0231
(925) 439-8222
www.winterauto.com

INVOICE

PAGE 1



PITTSBURG, CA

HOME: [REDACTED] CONT:N/A

BUS: [REDACTED] CELL:

SERVICE ADVISOR: 9856 MARTIN BOISVERT

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG
SILVER	05	CHEVROLET MALIBU	1G1ZS52F75E [REDACTED]		55055/55055	T41
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	PAYMENT	INV. DATE
27AUG06 DD			17:00 01AUG08		0.00 CASH	30JUL08
R.O. OPENED		READY	OPTIONS: STK:60824 ENG:2.2_Liter_MFI_DOHC			

15:01 25JUL08 15:49 30JUL08

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A CUST STATES ELECTRONIC STEERING GOING OUT

E7680 STEERING COLUMN REPLACEMENT

1 CCPP

10 CCPP

1	15926870	6518PC COLUMN	359.00	359.00	359.00
PARTS:	359.00	LABOR:	154.99	OTHER:	0.00
				TOTAL LINE A:	513.99

55055 HISTORY CODE C0545. SCAN CK. SYS NORMAL AT THIS TIME.
 EXTENSIVE ROAD TEST REVEALS NOTHING. RE'CK IN AM. STILL NO PROBLEMS.
 TECH 1 REMOVED AND REPLACED STEERING COLUME FOR HARD STEERING

B POSS B-CLAIM, RO#197903, 8-9-07, 45019 MILES

MEMO MEMO

10 CC

1 CC

PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE B:	0.00
--------	------	--------	------	--------	------	---------------	------

C** PERFORM 4-WHEEL ALIGNMENT

ALIGN PERFORM 4-WHEEL ALIGNMENT

1 CC

PARTS:	0.00	LABOR:	89.95	OTHER:	0.00	TOTAL LINE C:	89.95
--------	------	--------	-------	--------	------	---------------	-------

55055 CHECK FRONT STRUTS OK AT THIS TIME DID ALINGMENT SET TOE TO
 GM SPEC

D** CUST STATES STRUTS SQUEAK OVER BUMPS

MEMO MEMO

1 CC

PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE D:	0.00
--------	------	--------	------	--------	------	---------------	------

55055 NO LEAKS, OR DAMAGE TO STRUTS. NO SOUEAKS AT THIS TIME



NOTICE: YOU MAY
 CHOOSE ANOTHER SMOG
 CHECK STATION TO
 PERFORM THE NEEDED
 REPAIRS, INSTALLATIONS,
 ADJUSTMENTS, OR
 SUBSEQUENT TESTS.

ORIGINAL ESTIMATE \$				FINAL REVISED ESTIMATE \$		DESCRIPTION	TOTALS
DATE	TIME	PHONE # OR IN PERSON	AUTHORIZED BY	ADDITIONAL AMOUNT		LABOR AMOUNT	
REASON							PARTS AMOUNT
REASON							GAS, OIL, LUBE
REASON							SUBLET AMOUNT
REASON							MISC. CHARGES
REASON							TOTAL CHARGES
REASON							LESS INSURANCE
REASON							SALES TAX
ACKNOWLEDGE NOTICE AND ORAL APPROVAL OF AN INCREASE IN THE ORIGINAL ESTIMATE PRICE.						PLEASE PAY THIS AMOUNT	
ACKNOWLEDGE RECEIPT OF VEHICLE AND HAVE RECEIVED A COPY OF THIS INVOICE.							

NOTICE TO CONSUMER: PLEASE READ IMPORTANT INFORMATION ON BACK

BAR # AB006633 EPA # CAL000276197

CUSTOMER COPY

March 28, 2011

[REDACTED]
Pittsburgh, CA [REDACTED]

Service Request: 71-654297321
Customer Relationship Specialist: Tim Boonen

Dear [REDACTED]:

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 \$200.00.

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)**

March 29, 2011

[REDACTED]
[REDACTED]
Washington, DC [REDACTED]

Service Request Number: 71-655744838

Dear [REDACTED]

We have received your request for assistance, but have been unable to contact you using the telephone number provided or any listed in our records.

If your situation has been resolved to your satisfaction, no further action is necessary. If it has not, we invite you call us at 1-800-222-1020. Please refer to the service request number listed above when you reach our representative.

Total customer satisfaction is important to us at Chevrolet. If we can be of any assistance, please don't hesitate to email us using the Contact Us link at www.Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

March 29, 2011

[REDACTED]
[REDACTED]
Washington, DC [REDACTED]

Service Request Number: 71-655744838

Dear [REDACTED]

We have received your request for assistance, but have been unable to contact you using the telephone number provided or any listed in our records.

If your situation has been resolved to your satisfaction, no further action is necessary. If it has not, we invite you call us at 1-800-222-1020. Please refer to the service request number listed above when you reach our representative.

Total customer satisfaction is important to us at Chevrolet. If we can be of any assistance, please don't hesitate to email us using the Contact Us link at www.Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

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

Anthony Casada
2301 Ferguson Road
Cincinnati, OH 45238

RE: [REDACTED]
Service Request: 71-656248724
2006 Saturn - GM ION 2
Vehicle Identification Number: 1G8AN15FX6Z [REDACTED]
Customer Relationship Specialist: Fabiola Garcia

Dear Mr. Casada:

Enclosed please find a check in the amount of \$799.47 made payable to Saturn of Western Hills to settle the above-referenced case.

If you have further questions, 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 the service request number above and a Customer Relationship Specialist will be happy to assist you.

Sincerely,

General Motors Corporation

North American Operations

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

GM

CHECK No. [REDACTED]

50-937
213DATE
09/30/08

*****799 DOLLARS

****47 CENTS

AMOUNT
*****799.47PAY
TO THE
ORDER
OF

SATURN OF WESTERN HILLS
2301 FERGUSON ROAD
CINCINNATI OH 45238

North American Operations
General Motors Corporation
Disbursement Account

Richard C. [Signature]
SIGNATURE

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

AUDIT

VENDOR
DUNS NO. BB 000000015

1

North American Operations

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

DETACH BEFORE DEPOSITING CHECK

CHECK NO. [REDACTED]

VENDOR NAME SATURN OF WESTERN HILLS

PAYMENT
DATE

09/30/08

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1G8AN15FX6Z [REDACTED]	09/29/08 71-656248	VH 1-BONERN 724.1-BONERN	00.0000	799.47	.00	799.47
ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782				TOTAL	799.47	.00
						799.47

W3

FAX TRANSMITTAL FORM

SATURN OF WESTERN HILLS
2301 FERGUSON RD.
CINCINNATI, OH 45238

To: _____
Name: _____
Organization Name/Dept: _____
C.C: _____
Ph. # _____
Fax# _____

From: Anthony Casada
Saturn of Western Hills
Phone # 513-699-4900
Fax # 513-699-~~4901~~ 4902
Email www.saturnofwesternhills.com

Date sent: / /

Time sent

Number of pages including cover 6

Message:

[The page contains faint horizontal lines and illegible markings.]

Urgent For review Please comment Please reply



SATURN OF WESTERN HILLS

2301 Ferguson Road
Cincinnati, OH 45238
(513) 699-4900Body
ShopESTIMATE
(UNDER OHIO LAW) YOU HAVE THE
RIGHT TO AN ESTIMATE. IF THE
EXPECTED COST OF REPAIRS OR
SERVICES WILL BE MORE THAN
TWENTY-FIVE DOLLARS, INITIAL
YOUR CHOICE.WRITTEN
ESTIMATEORAL
ESTIMATEI DO NOT REQUEST
AN ESTIMATEORIGINAL
ESTIMATECUSTOMER'S
ACCEPTANCEAUTHORIZED
ADDITIONS

DATE

TIME

BY

WORK
ORDER

2008-09-17 10:02

Date 09/02/08 VIN 1G8AN15FX6Z Mileage 38480 Del. Date 06/12/06 Miles 12 In-Serv-Date 06/12/06 License No. 06 Make SATURN Model ION 2 CPE

DISCLAIMER OF WARRANTIES
THE SELLER HEREBY EXPRESSLY DISCLAIMS ALL
WARRANTIES, EITHER EXPRESSED OR IMPLIED,
INCLUDING ANY IMPLIED WARRANTY 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 SAID PRODUCTS.In the event that you, the customer,
authorize commencement of a repair
or service, a charge will be imposed
for disassembly, reassembly or partially
completed work. Such charge
will be directly related to the actual
amount of labor or parts involved in
the inspection, repair or service.

Name

Address

City / State / Zip
CINCINNATI OHEng L61 2.2LL4 Transmission 4 SPD AUTO Color STORM GREY SA# 692 SO# 87403
Home Business Phone Tag# Ref SO#
372 04

Customer Number

Stock #

Labor Rate

W60207

.00

Payment Type

Promise Date / Time

09/02/08

Doc Cnt: 1

01

Prk Lot:

Diag Codes

***** ESTIMATE *****

PRINTED: 9:59:29 Attention: W60207
Comments:

L# Codes

1

CUST STATES THER POWER STEERING WENT OUT QUSING
THEM TO LOOSE CONTROL OF CAR CAUSING DAMAGE TO THE
FRONT OF THE CAR CASE #71-6562-48724

ST

Hrs

Labor

Parts

Total

W

WPR

4/006

Est 4/006

1-800-231-1841

EMAIL ADDRESS:

AUTHORIZATION FOR REPAIRS

I hereby authorize the repair work herein set forth to be done along with necessary material
and 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 unavail-
ability 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 the purpose of testing and/or inspection. An express mechanic'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 lack of antifreeze.

SA: ANTHONY CASADA

LABOR

DISC

PARTS

DEDCT

NT ITEM

TAXES

ESTIMATE TOTAL:

MISC

TOTAL

The Reynolds and Reynolds Company 00214009 010300

FAX

5136994902 >>

Fax Server P 2



SATURN OF WESTERN HILLS

2301 Ferguson Road
Cincinnati, OH 45238
(513) 599-4900SERVICE
INVOICE

Co.# 0

Sold To: CINCINNATI OH W60207 Business Phone: Home Phone:	Service Order Number		Service Advisor		VIN	
	87403		ANTHONY CASADA		1G8AN15FX6Z	
	Color	Year	Make/Model		License	Engine
	STORM GREY	2006	SATURN ION2 CPE			L61 2.2L14
	Mileage In/Out		Tag	Delivery Date	Rate	Doc Count
	38480 / 38481		372	6/12/2006		2
Tax Exempt		Date/Time In		Date/Time Out		
		9/02/2008 9:59		9/10/2008 16:07		

SALESPERSON: PARRIS

-----email:-----

LINE 1 490 CUST STATES THERE POWER STEERING WENT OUT CAUSING
THEM TO LOOSE CONTROL OF CAR CAUSING DAMAGE TO THE
FRONT OF THE CAR CASE #71-6562-48724

CAUSE: EXTERIOR - DAMAGED/CRACK

TECH COMM: COFIRMED CUST COMPLAINT, REPLACED FRONT GRILL AND
FRONT FASCIA HAD PAINTED AND INSTALLED ROAD TESTED
OPERATING AS DESIGNED CASE #71-6562-48724

REPAIR 1 FASCIA, FRONT BUMPER COLOR/CLEAR COAT, COMPLETE

OPCODE: A0007

SALE TYPE: PROPERTY DA

WTY

PRIMARY TECH: ANTHONY CASADA

NET ITEM: C SATURN RENTAL CAR

SALE TYPE

PROPERTY DAMAGE

WTY

RENTAL DAYS: 3

NET ITEM: S CUSTOM GLENWAY AUTO BODY

SALE TYPE

PROPERTY DAMAGE

WTY

INVOICE PRINTED FROM CLOSED SO# 9/17/08

COULD YOU "DEFINITELY RECOMMEND" OUR SERVICE TODAY?

CUSTOMER SIGNATURE _____

CUSTOMER TOTAL

\$.00

Disclaimer of Warranties

The seller, hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty 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 said products.



SATURN OF WESTERN HILLS

2301 Ferguson Road
Cincinnati, OH 45238
(513) 699-4900SERVICE
INVOICE

** ACCOUNTING COPY **

SO# 87403 DATE/TIME IN: 9/02/2008 9:59 DATE/TIME OUT: 9/10/2008 16:07
TAG# 372 SA: ANTHONY CASADA DOC COUNT: 2 PAGE: 1CINCINNATI OH
04 1G8AN15FX6Z
2006 SATURN ION 2 CPE STORM GREY
ENGINE: L61 2.2LL4
STK#: W60207
MILES IN/OUT 38480 / 38481
SVC DATE: 6/12/2006
SALESPERSON: PARRIS, JEFFREY

-----email:-----

LINE 1 490 CUST STATES THERE POWER STEERING WENT OUT CAUSING
THEM TO LOOSE CONTROL OF CAR CAUSING DAMAGE TO THE
FRONT OF THE CAR CASE #71-6562-48724CAUSE: EXTERIOR - DAMAGED/CRACK
TECH COMM: COFIRMED CUST COMPLAINT, REPLACED FRONT GRILL AND
FRONT FASCIA HAD PAINTED AND INSTALLED ROAD TESTED
OPERATING AS DESIGNED CASE #71-6562-48724REPAIR 1 FASCIA, FRONT BUMPER COLOR/CLEAR COAT, COMPLETE
OPCODE: A0007 SALE RATE: A COST RATE: A COST:
HRS: SALE TYPE: WPR \$.00
PRIMARY TECH: ANTHONY CASADANET ITEM: C SATURN RENTAL CAR SALE TYPE
PO#: L#: COST: WPR \$42.00
UNIT QTY: 1 UNIT AMT: 42.00 RENTAL DAYS: 3NET ITEM: S CUSTOM GLENWAY AUTO BODY SALE TYPE
PO#: L#: COST: WPR \$757.47
UNIT QTY: 1 UNIT AMT: 757.47

LINE TOTAL \$.00 \$799.47

INVOICE PRINTED FROM CLOSED SO: 9/17/08

ACCOUNT NO SALE AMT COST AMT CNIL NO
263 799.47
466 757.47-
502 42.00-
CUSTOMER TOTAL \$.00

Disclaimer of Warranties

The seller, hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty 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 said products.

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
8:00AM - 1:00PM



The Only Sure Way, Glenway.

GM 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

CUSTOMER NO 28739	ADVISEE SAM A MOORE	TAG NO 20	INVOICE DATE 09/10/08	INVOICE NO. CVCB468351
SATURN OF WESTERN HILLS 2301 FERGUSON RD. CINCINNATI, OH 45238	LABOR RATE 44.00	LICENSE NO.	VEHICLE 38,695	COLOR GREY/
	YEAR / MAKE / MODEL 06 / SATURN / ION / 2 DOOR COUPE			DEL. VEH. DATE
	VEHICLE I.D. NO. 1 G 8 A N 1 5 F X 6 Z			DELIVERY MILES
	F.T.E. NO. 31-1676686			SELLING QUALITY NO.
R.O. NO.			R.O. DATE 09/02/08	PRODUCT ON DATE

RESIDENCE PHONE

COMMENTS

JOB# 1 CHARGES

LABOR		BODY REPAIR		HOURS	1.90	TECH (\$)	34		72.20
REPAIR DAMAGE TO FRONT BUMPER COVER, RIGHT SPLASH & LINERS									
PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE					
	1	15141655	SHIED	24.35					24.35
	1	15283019	SHIED	43.71					43.71
	1	22713872	GRILL	59.87					59.87
	1	15839814	FASCIA	284.74					284.74
TOTAL - PARTS									412.67

JOB# 1 TOTALS

LABOR 72.20
PARTS 412.67

JOB# 2 CHARGES

JOB# 1 JOURNAL PREFIX CVCB JOB# 1 TOTAL 484.87

LABOR									
# 2 95CVZ	BODY REFINISH		HOURS	3.42	TECH (\$)	34			159.60
REFINISH AS NECESSARY									
COMPLETED AS REQUIRED									
G.O.G. & SUPPLIES									
1.0	PAINT MATERIAL	@	100.000	/UNIT					100.00
1.0	FLEX	@	10.000	/UNIT					10.00
				TOTAL - G.O.G.				110.00	

JOB# 2 TOTALS

LABOR 159.60
G.O.G. 110.00

JOB# 2 JOURNAL PREFIX CVCB JOB# 2 TOTAL 269.60

MISC	CODE	DESCRIPTION	CONTROL NO	
JOB # A	C1	SHOP SUPPLIES		3.00
TOTAL MISC				3.00

The Seller, GLENWAY CHEVROLET, hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty of merchantability or fitness for a particular purpose, and GLENWAY CHEVROLET neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of the item(s).

THANK YOU FOR THIS OPPORTUNITY TO SERVE YOU. IT IS OUR A.M. TO PERFORM ALL THE REPAIRS REQUESTED ON THIS REPAIR ORDER TO YOUR COMPLETE SATISFACTION. IF OUR SERVICE WAS SATISFACTORY TELL YOUR FRIENDS. IF NOT, PLEASE TELL US IMMEDIATELY.

NOTICE

- YOU MAY RECEIVE A SERVICE QUESTIONNAIRE/FOLLOW UP REGARDING THIS SERVICE VISIT.
- OUR GOAL IS FOR YOU TO BE **COMPLETELY SATISFIED**.
- OUR SERVICE TEAM IS EVALUATED BASED ON COMPLETELY SATISFIED RESPONSES.

COMPLETELY SATISFIED



- IF YOU ARE UNABLE TO MARK COMPLETELY SATISFIED, PLEASE CONTACT YOUR SERVICE ADVISOR IMMEDIATELY.

THANK YOU FOR BRINGING YOUR VEHICLE TO GLENWAY CHEVROLET FOR SERVICE.

OUR SERVICE DEPARTMENT HOURS:

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

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

Saturday
8:00AM - 1:00PM

GLENWAY CHEVROLET3015 Glenhills Way
CINCINNATI, OH 45238

513-251-5555

www.glenwaychevrolet.com

SERVICE DEPARTMENT HOURS:Monday and Wednesday
7:00AM - 7:00PMTuesday, Thursday, Friday
7:00AM - 8:00PMSaturday
8:00AM - 1:00PM

The Only Sure Way. Glenway.

GM 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

CUSTOMER NO.	28739	ADVISOR	SAM A MOORE	TAX NO.	20	INVOICE DATE	09/10/08	INVOICE NO.	CVCB468351
SATURN OF WESTERN HILLS 2301 FERGUSON RD. CINCINNATI, OH 45238		LABOR RATE	44.00	LICENSE NO.		MILEAGE	38,695	COLOR	GREY/
		YEAR / MAKE / MODEL	06 SATURN/ION/2 DOOR COUPE				DELIVERY DATE	DELIVERY MILES	
		VEHICLE I.D. NO.	1 G 8 A N 1 5 F X 6 Z				SELLING DEALER NO.	PRODUCTION DATE	
		F.T.E. NO.	31-1676686	P.O. NO.		R.O. DATE	09/02/08		
REFERENCE PHOTO			COMMENTS						

TOTALS

 * [] CASH [] CHECK CK NO. [] *
 * [] VISA [] MASTERCARD [] DISCOVER *
 * [] AMER XPRESS [] OTHER [] CHARGE *

TOTAL LABOR 231.80
 TOTAL PARTS 412.67
 TOTAL SUBJECT 8.00
 TOTAL G.O.G. 110.00
 TOTAL MISC CHG. 3.00
 TOTAL MISC DISC 0.00
 TOTAL TAX 0.00

TOTAL INVOICE \$ 757.47

YES !!!! Please E-mail me service coupons, incentives
 and dealership specials.
 My E-mail address is:

CUSTOMER SIGNATURE

THE SELLER, GLENWAY CHEVROLET, HEREBY
 EXPRESSLY DISCLAIMS ALL WARRANTIES, EXPRESS
 OR IMPLIED, INCLUDING ANY IMPLIED WAR-
 RANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR
 PURPOSE, AND GLENWAY CHEVROLET, NEITHER
 ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO
 ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE
 SALE OF THE VEHICLES.

THANK YOU FOR THIS OPPORTUNITY TO
 SERVE YOU. IT IS OUR AIM TO PERFORM ALL
 THE REPAIRS REQUESTED ON THIS REPAIR
 ORDER TO YOUR COMPLETE SATISFACTION.
 IF OUR SERVICE WAS SATISFACTORY TELL
 YOUR FRIENDS. IF NOT, PLEASE TELL US
 IMMEDIATELY.

NOTICE

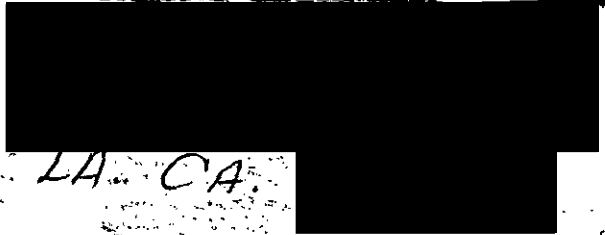
- YOU MAY RECEIVE A SERVICE QUESTIONNAIRE/FOLLOW UP REGARDING THIS SERVICE VISIT.
- OUR GOAL IS FOR YOU TO BE COMPLETELY SATISFIED.
- OUR SERVICE TEAM IS EVALUATED BASED ON COMPLETELY SATISFIED RESPONSES.

COMPLETELY SATISFIED

- IF YOU ARE UNABLE TO MARK COMPLETELY SATISFIED, PLEASE CONTACT YOUR SERVICE ADVISOR IMMEDIATELY.

THANK YOU FOR BRINGING YOUR
 VEHICLE TO GLENWAY CHEVROLET
 FOR SERVICE.

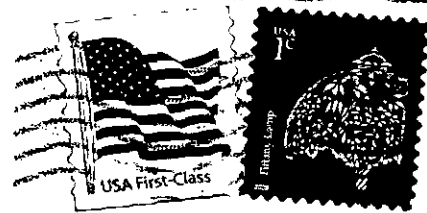
OUR SERVICE DEPARTMENT HOURS:Monday and Wednesday
7:00AM - 7:00PMTuesday, Thursday, Friday
7:00AM - 8:00PMSaturday
8:00AM - 1:00PM



LA CA

LOS ANGELES CA 900

12 SEP 2008 PM 11 T



SEP 16 2008
Attn. Reimbursement Department
PO. Box 33170
Detroit, MI 48232-5170

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

48232+5170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 9-12-08
17-Digit Vehicle Identification Number (VIN): 1G1ZS52F45F [REDACTED]
Mileage at Time of Repair: 43000 Date of Repair: 6/23/08 ~~Delivery Date~~
Claimant Name (please print): [REDACTED]
Street Address or PO Box Number: [REDACTED]
City: LA. State: CA. ZIP Code: [REDACTED]
Daytime Telephone Number (include Area Code): [REDACTED] cell
Evening Telephone Number (include Area Code): [REDACTED]
Amount of Reimbursement Requested: \$ 50.00

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 [REDACTED]

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).





CORMIER

2201 EAST 223RD STREET
CARSON, CA 90810
(310) 830-5100



CELL: [REDACTED]

CUSTOMER NO. 61876	ADVISOR ANDY	TAG NO. 883	INVOICE DATE 06/23/08	INVOICE NO. CVCS291150
LOS ANGELES, CA [REDACTED]	LABOR RATE [REDACTED]	MILEAGE 43,000	COLOR GOLD/	STOCK NO.
	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU		DELIVERY DATE 06/25/05	DELIVERY MILES
	VEHICLE I.D. NO. 1 G 1 Z S 5 2 F 4 5 F		SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.		P.O. NO.	R.O. DATE 06/21/08
COMMENTS				MO: 43000

LABOR & PARTS
J# 1 06CVZ STEERING/SUSPENSION TECH(S):537 WARRANTY
ADVISE FLUID LEAK RIGHT FRONT
TURNS ALL THE WAY TO THE RIGHT AND THE "CHECK POWER STEERING
SHOWS ON DISPLAY
STEERING COLUMN ASSEMBLY
REPLACED STEERING COLUMN ASSEMBLY

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	WARRANTY
JOB # 1	1	15926870	COLUMN 6.518		
JOB # 1 TOTAL PARTS				0.00	
JOB # 1 TOTAL LABOR & PARTS				0.00	

J# 2 06CVZ020 STEERING DIAGNOSIS TECH(S):537 WARRANTY
VISS NOT AVAILABLE 0.00

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	WARRANTY
JOB # 2 TOTAL PARTS				0.00	
JOB # 2 TOTAL LABOR & PARTS				0.00	

MISC	CODE	DESCRIPTION	CONTROL NO	WARRANTY
JOB # 1	GMPP	GMPP DEDUCT (C)	291150	50.00
JOB # 1	GMPPW	GMPP DEDUCT (W)	291150	50.00
TOTAL - MISC				50.00

ESTIMATE
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$93.00 (+TAX)

COMMENTS
HAS GMPP

TOTALS

PARTS DESIGNATED WITH AN	TOTAL LABOR....	0.00
ASTERISK (*) INDICATES	TOTAL PARTS....	0.00
LIFETIME GUARANTEE-APPLIES	TOTAL SUBLET...	0.00
FOR CUSTOMER PAY REPAIRS	TOTAL G.O.G....	0.00
*****	TOTAL MISC CHG.	50.00
	TOTAL MISC DISC	0.00
	TOTAL TAX.....	0.00

TOTAL INVOICE \$ 50.00

CUSTOMER SIGNATURE

ORIGINAL



CORMIER

2201 EAST 223RD STREET
CARSON, CA 90810
(310) 830-5100



RECOMMENDED SERVICES

OPERATION	OPERATION DESCRIPTION	MO/MI	TOTAL	OPERATION	OPERATION DESCRIPTION	MO/MI	TOTAL
08CVZ005	COOLING SYS SER D&R	MO	89.95	02CVZ005	COMPLETE FUEL SYSTEM	MI	229.95
05CVZ006	BRAKE FLUID EXCHANGE	MI	145.95	06CVZ001	P/S FLUID EXCHANGE	MI	145.95
00CVZ020	ROTATE TIRES	MI	25.95	02CVZ005C	COMPLETE FUEL SYSTEM	MI	219.95
00CVZ001S	* SILVER OIL SERVICE	MI	29.95				

SERVICE HISTORY RECOMMENDATIONS FROM RO# 288984 FUEL SYSTEM CLEAN

DATE	REPAIR ORDER	MILEAGE	ADVISOR	TECHNICIAN	TYPE	OPERATION	OPERATION DESCRIPTION
05/15/08	288984	42506	883	731	C	00CVZ001	OIL & FILTER CHANGE
03/27/08	286059	40378	883	537	I	05CVZ	BRAKE DEPARTMENT
12/12/07	280145	36101	883	537	I	09CVZ014	BRAKE DEPARTMENT
				537	I	06CVZ	ELECTRICAL
				537	C	05CVZ009	STEERING/SUSPENSION
							FRONT BRAKES

SALES PERSON NO.

S E R V I C E

STATE REG# ME001125

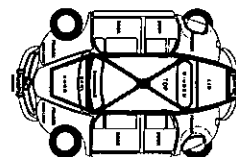
TERMS CASH <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> CHECK <input type="checkbox"/> (PRIOR APPROVAL) OTHER <input type="checkbox"/>	VEHICLE I.D. NO. 1G1ZS52F45F	YEAR/MAKE/MODEL 05/CHEVROLET/MALIBU	PRODUCTION DATE	STOCK NO.	LICENSE NO.	R.O. NO. 291150
SAVE REMOVED PARTS FOR CUSTOMER <input type="checkbox"/> YES <input type="checkbox"/> NO	LOS ANGELES, CA	CUSTOMER NO. 61876	SERVICE CONTRACT GMPP	DELIVERY DATE 06/25/05	DELIVERY MILES	SELLING DEALER NO. 06/21/08
RESIDENCE PHONE	BUSINESS PHONE	COLOR GOLD/	CONTRACT NO. 50.00 DEDUCT	EXPIRATION DATE 02/17/11	EXPIRATION MILES 75,027	TAG NO. 196
TIME RECEIVED 09:47am	DATE/TIME PROMISED 06/21/08 03:00pm	PRIORITY 4	TURBO CVZZ	M/MC Y	AIR COND. Y	P.S. Y
APPOINTMENT <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	LABOR RATE	TRANS A	MILEAGE 43,000	ADVISOR NO. 883	ADVISOR ANDY	

I HEREBY AUTHORIZE THE REPAIR WORK TO BE DONE ALONG WITH THE NECESSARY MATERIALS, AND HEREBY GRANT YOUR EMPLOYEES PERMISSION TO OPERATE THE VEHICLE HEREIN DESCRIBED ON STREETS, HIGHWAYS OR ELSEWHERE FOR THE PURPOSE OF TESTING AND OR INSPECTION. ALL LABOR CHARGES ARE FIXED PRICES, AND BEAR NO RELATIONSHIP TO ACTUAL HOURS OF LABOR PERFORMED. ALL REFERENCES HEREIN OR OTHERWISE, INCLUDING ANY POSTING OF LABOR RATES OR FLAT RATE LABOR HOURS ARE FOR INFORMATION ONLY TO INDICATE TO THE CUSTOMER THE BASIS UPON WHICH THE FIXED PRICES WERE ESTABLISHED BUT NEITHER SUCH REFERENCES OR POSTING NOR THE FACT THAT THE ACTUAL HOURS OF LABOR PERFORMED MAY BE MORE OR LESS THAN THE INDICATED FLAT RATE HOURS SHALL HAVE ANY EFFECT WHATSOEVER ON THE FIXED PRICES SO CHARGED.

TERMS ARE CASH ON DELIVERY. ESTIMATES ARE FOR LABOR AND PARTS. STORAGE WILL BE CHARGED 48 HOURS AFTER REPAIRS ARE COMPLETED. NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT, ACCIDENT OR ANY OTHER CAUSE BEYOND OUR CONTROL.

☒ CUSTOMER ACKNOWLEDGES RECEIPT OF A COPY HEREOF

ORIGINAL CUSTOMER ESTIMATE: TOTAL 93.00	TEARDOWN ESTIMATE: I understand that my vehicle will be reassembled within _____ days of the date shown above if I choose not to authorize the service recommended.
COMMENTS : HAS GMPP	"By law, you may choose another licensed Smog Check facility to perform any needed repairs or adjustments that the Smog Check test indicates and necessary."
1 C 06CVZ STEERING/SUSPENSION ADVISE FLUID LEAK RIGHT FRONT TURNS ALL THE WAY TO THE RIGHT AND THE "CHECK POWER STEERING SHOWS ON DISPLAY	IMPORTANT: REMOVE ALL PERSONAL PROPERTY AND VALUABLES FROM YOUR VEHICLE. WE DO NOT ASSUME RESPONSIBILITY FOR LOSS OR DAMAGE FOR ARTICLES LEFT IN YOUR VEHICLE.
2 C 06CVZ020 STEERING DIAGNOSIS VISS NOT AVAILABLE	NOTICE: It is my full understanding that while my vehicle is in CORMIER CHEVROLET/HYUNDAI COMPANY'S care for service, that I will not hold this dealership responsible in case of loss or theft of any articles removed from vehicle. I have been fully advised of my obligation to remove all items before leaving vehicle for service.
	<input checked="" type="checkbox"/> OWNER SIGNATURE _____ DATE _____
	* HAZARDOUS WASTE: "RATHER THAN INCREASING OUR LABOR RATE FOR ALL CUSTOMERS, WE MAKE A SEPARATE CHARGE FOR MANAGING HAZARDOUS WASTE. A DIFFERENT CHARGE IS MADE FOR EACH WASTE AND IS IMPOSED ONLY WHEN THAT WASTE IS GENERATED DURING A PARTICULAR REPAIR. HAZARDOUS WASTE CONSISTS OF: WASTE OILS, SOLVENTS, CARBURETOR CLEANERS, ANTI-FREEZE, BRAKE FLUID TANKS, CONTAMINATED FUEL, OIL FILTERS, ETC.
	ALL PARTS INSTALLED ARE NEW UNLESS SPECIFIED OTHERWISE
	<i>Always Bring Your Car Here For Factory Authorized Service</i>
	COURTESY BUS AVAILABLE FOR LOCAL PICKUP AND DELIVERY AT NO CHARGE
	We pledge ourselves to your satisfaction. It is our sincere desire at CORMIER CHEVROLET/HYUNDAI COMPANY to provide you with the best service humanly possible. In the event you have any questions your service advisor will be happy to answer them.
	PRIOR BODY DAMAGE
	Advisor _____
	Customer Int. X _____



North American Operations

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

GMCHECK **No.** [REDACTED]50-937
213DATE
10/07/08

*****50 DOLLARS

****00 CENTS

AMOUNT
*****50.00

LOS ANGELES CA [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account

PAY
TO THE
ORDER
OF

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. [REDACTED]

PAYMENT
DATE 10/07/08VENDOR
DUNS NO. BB 000000030

1

VENDOR NAME [REDACTED]

REGISTER NO.
DESCRIPTION

INVOICE DATE

DOC. REFERENCE NUMBER

% DISC.

INVOICE AMOUNT

DISC. AMOUNT

NET AMOUNT

1G1ZS52F45F [REDACTED]

10/06/08

VM 1-B2758K

00.0000

50.00

.00

50.00

71-66438606.1-B2758K

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

M3

TOTAL

50.00

.00

50.00

March 31, 2011

[REDACTED]
Los Angeles, CA [REDACTED]

Service Request: 71-664386606

Dear [REDACTED]

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

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 performance. There are times when we identify a motor vehicle defect and release a recall or special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement 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.

If your vehicle has not been inspected by your local GM dealership, we request you set up an appointment to insure all necessary steps have been taken to repair your vehicle.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at www.Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.gmownercenter.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)**

March 31, 2011

[REDACTED]
Altoona, PA [REDACTED]

Service Request: 71-665053989
Customer Relationship Specialist: Penny Mercer

Dear [REDACTED]

Thank you for your recent inquiry. We are sorry you have experienced concerns with your 2005 Pontiac G6. Customer satisfaction is a top priority for us at Pontiac.

Confirming our conversation regarding your Pontiac, vehicle identification number, 1G2ZG528854 [REDACTED] enclosed is the Owner Loyalty Certificate for the amount of \$1,000.00. This certificate is valid through September 30, 2009, towards the purchase, SmartLease or SmartBuy of a new, unused General Motors vehicle. This certificate may be used in addition to any other retail purchase incentive programs available at the time of purchasing a new vehicle.

We are proud you made Pontiac your choice when you purchased your 2005 Pontiac G6 and trust you will give us the opportunity to retain you as a valued Pontiac customer. Should you have any questions regarding General Motors' products and current incentives, please call Pontiac Marketing Support at 800-276-6842. You may also begin your shopping by logging on to the GM Vehicle Showroom at www.gm.com to view our products.

We hope you will take advantage of this special incentive offer, and assuming you do, simply present the certificate to your dealer after you have negotiated your best deal, sign the certificate and your dealer will complete the necessary information and process it for you.

Sincerely,

Pontiac Customer Assistance Center

Issued by:

Pontiac

Certificate No. 1G2ZG528854

Issue Date: March 31, 2011

Issued exclusively for:

Altoona, PA

Valid through: September 30, 2009

Amount: One Thousand Dollars and Zero Cents

****\$1,000.00****

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

February 4, 2011

[REDACTED]
[REDACTED]
Columbus, GA [REDACTED]

Service Request: 71-594148286
Customer Relationship Specialist: Pinkie Smith

Dear [REDACTED]

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 \$648.11.

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.

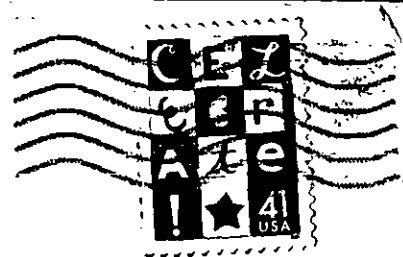
Sincerely,

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.

COLUMBUS GA 319

18 DEC 2007 PM 1 T



Apt [redacted]
Columbus GA [redacted]

Reimbursement Department

Po Box 33170

Detroit, MI 48232-5170

DEC 21 2007

482325170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 12-18-0717-Digit Vehicle Identification Number (VIN): 161ZT54835F [REDACTED]Mileage at Time of Repair: 45344 Date of Repair: 45349

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: Columbus State: GA ZIP Code: [REDACTED]

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

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

Amount of Reimbursement Requested: \$ 648.11

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: [REDACTED]

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).



7062210617

597172



3615 N. MANCHESTER EXPRESSWAY

MAILING BILL HEARD CHEVROLET CO. DIRECT LINE (706) 322-0621
 ADDRESS: P.O. BOX 8888 SWITCHBOARD (706) 322-8888
 COLUMBUS, GEORGIA 31908

INVOICE

PAGE 1

COLUMBUS, GA

HOME: [REDACTED] BUS: [REDACTED]

CELL: [REDACTED] SERVICE ADVISOR: 230 MIKE ZIMMERMAN

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG
GRN	05	CHEVROLET MALIBU	1G1ZT54835F [REDACTED]		45344/45349	[REDACTED]
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO.	RATE	PAYMENT
24DEC04 IS			08:12 10FEB07		0.00	CASH
R.O. OPENED	READY	OPTIONS: STK:6801030 DLR:08276 ENG:3.5 Liter_SFI				
08FEB07	09FEB07					

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL
 A CUST STATES; "POWER STEERING LIGHT COMES ON" AND STEERING GETS STIFF
 C900 REPLACED STEERING COLUMN
 379 CM 2.50 237.50 237.50
 1 15926870 COLUMN 360.00 360.00 360.00
 45349 POWER STEERING CODE C0460==STEERING TORQUE SENSOR FAILURE 1.
 REPLACE STEERING COLUMN== NOTE==ALSO HAD AN ABS CODE C0550-39 SET IN
 HISTORY==EBCM INTERNAL FAILURE==REPAIRS DECLINED TO ABS==

B SAFETY INSPECTION

C02 SAFETY INSPECTION

379 IM 0.00

45349 COMPLETE PWTT

C SET CUST NEXT APPOINTMENT IN 90 DAYS

APP SET CUST NEXT APPOINTMENT IN 90 DAYS

379 IM 0.00

45349

CUSTOMER PAY CUSTOMER PAY HAZ MAT PICKUP FOR REPAIR ORDER FOR REPAIR OR 23.75

CASH

THANK YOU FOR CHOOSING BILL HEARD CHEVROLET
 OUR GOAL IS YOUR COMPLETE SATISFACTION IF YOU
 CANNOT MARK "COMPLETELY SATISFIED" ON THE
 GENERAL MOTORS SURVEY PLEASE CONTACT J.D.
 WATTS @ 706-494-7109... THANK YOU

PAID
 BILL HEARD
 CASH
 CHECK # [REDACTED]
 FEB 09 2007
 CHG [REDACTED]
 INI [REDACTED]

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 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.

DESCRIPTION	TOTALS
LABOR AMOUNT	237.50
PARTS AMOUNT	360.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	23.75
TOTAL CHARGES	621.25
LESS INSURANCE	0.00
SALES TAX	26.86
PLEASE PAY THIS AMOUNT	648.11

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

CUSTOMER SIGNATURE

CUSTOMER COPY

7062210617

597172

INVOICE



3615 N. MANCHESTER EXPRESSWAY

 MAILING: BILL HEARD CHEVROLET CO.
 ADDRESS: P.O. BOX 8888
 COLUMBUS, GEORGIA 31908

 DIRECT LINE (706) 322-0621
 SWITCHBOARD (706) 322-8888

PAGE 1

COLUMBUS GA

HOME:

BUS:

CELL:

SERVICE ADVISOR: 230 MIKE ZIMMERMAN

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG
GRN	05	CHEVROLET MALIBU	1G1ZT54835F		45344/45349	
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO.	RATE	PAYMENT
24DEC04 IS			08:12 10FEB07		0.00	CASH
R.O. OPENED	READY	OPTIONS: STK:6801030 DLR:08276 ENG:3.5_Liter_SFI				
08FEB07	09FEB07					

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A	CUST	STATES	"POWER STEERING LIGHT COMES ON" AND STEERING GETS STIFF				
		C900	REPLACED STEERING COLUMN				
		379	CM 2.50		237.50	237.50	
		1	15926870 COLUMN		360.00	360.00	360.00
45349	POWER STEERING CODE C0460==STEERING TORQUE SENSOR FAILURE 1.						
	REPLACE STEERING COLUMN== NOTE==ALSO HAD AN ABS CODE C0550-39 SET IN						
	HISTORY==EBCM INTERNAL FAILURE==REPAIRS DECLINED TO ABS==						

B SAFETY INSPECTION

C02 SAFETY INSPECTION

379 IM 0.00

(N/C)

45349 COMPLETE PWTI

C SET CUST NEXT APPOINTMENT IN 90 DAYS

APP SET CUST NEXT APPOINTMENT IN 90 DAYS

379 IM 0.00

(N/C)

45349

CUSTOMER PAY CUSTOMER PAY HAZ MAT PICKUP FOR REPAIR ORDER FOR REPAIR OR 23.75
 THANK YOU FOR CHOOSING BILL HEARD CHEVROLET
 OUR GOAL IS YOUR COMPLETE SATISFACTION. IF YOU
 CANNOT MARK "COMPLETELY SATISFIED" ON THE
 GENERAL MOTORS SURVEY PLEASE CONTACT J.D.
 WATTS @ 706-494-7109....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 sale of this item/items. The
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 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.

DESCRIPTION	TOTALS
LABOR AMOUNT	237.50
PARTS AMOUNT	360.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	23.75
TOTAL CHARGES	621.25
LESS INSURANCE	0.00
SALES TAX	26.86
PLEASE PAY THIS AMOUNT	648.11

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

CUSTOMER SIGNATURE

PREINVOICE COPY

North American Operations

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

GMCHECK **No.** [REDACTED]50-937
213DATE
01/22/08

*****648 DOLLARS

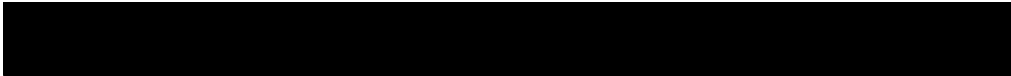
****11 CENTS

AMOUNT
*****648.11PAY
TO THE
ORDER
OF

COLUMBUS GA [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account
SIGNATUREThe Chase Manhattan Bank, N.A.
Syracuse, New York

AUDIT

VENDOR
DUNS NO. BB 000000191

1

North American Operations

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

DETACH BEFORE DEPOSITING CHECK

CHECK NO. [REDACTED]

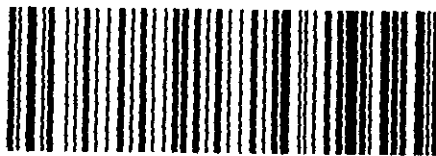
PAYMENT
DATE

01/22/08

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1612T54835F [REDACTED]	01/21/08 71-594148286.1-9TSIHD	VM 1-9TSIHD	00.0000	648.11	.00	648.11
ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782				M3		
TOTAL				648.11	.00	648.11

CERTIFIED MAIL™

CHARLESTON, WV

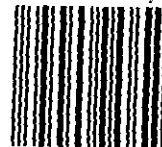


7006 0810 0006 0852 0490

SEP 19 2008



0000



48232

U.S. POSTAGE
PAID
ELKVIEW, WV
25071
SEP 17 08
AMOUNT

\$5.32

00042800-03

REIMBURSEMENT DEPARTMENT

P. O. Box 33170

DETROIT, MI 48232-5170

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

482325170 0050



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: SEPTEMBER 17, 200817-Digit Vehicle Identification Number (VIN): 162ZG528454 [REDACTED]Mileage at Time of Repair: 28465 Date of Repair: SEPTEMBER 10, 2008

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: CHARLESTON State: WV ZIP Code: [REDACTED]

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

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

Amount of Reimbursement Requested: \$ 696.19

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: [REDACTED]

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).



9650944

526029

JOE HOLLAND**SERVICE CENTER AND BODY SHOP**

P.O BOX 8536 · 1000 D STREET
 SOUTH CHARLESTON, WEST VIRGINIA 25303
 SERVICE CENTER TELEPHONE (304) 720-9222
 BODY SHOP TELEPHONE (304) 720-9346

INVOICE

PAGE 1

CHARLESTON, WV
 HOME: BUS:

SERVICE ADVISOR: 200 MIKE HARMON

COLOR	YEAR	MAKE/MODEL		VIN		LICENSE	MILEAGE IN / OUT		TAG
	05	PONTIAC G6		1G2ZG528454			28465/28475		T2670
DEL DATE	PROD DATE	WARR EXP	PROMISED		PO NO.	RATE	PAYMENT	INV DATE	
26MAR05	IS		17:00 08SEP08			0.00	CASH	10SEP08	
R.O. OPENED		READY		OPTIONS: DLR:09196					

08:53 08SEP08	10:54 10SEP08			
LINE	OPCODE	TECH	TYPE	HOURS

A CUSTOMER STATES WHEN TURNING THE STEERING WHEEL IT INTERMITTANTLY FEELS
 LIKE THE POWER STEERING IS INOP

DIAGNOSIS OF CUSTOMER CONCERN

268 CPG 1.00 69.95 69.95

1 15926870 COLUMN 369.77 369.77 369.77

9996 REPLACE STEERING COLUMN

268 CPG 2.40 212.06 212.06

28475 FOUND BULLETIN OS SI FOR INTERMIT LACK OF STEERING CONCERNS

BULLETIN WAS TO REPLACE THE STEERING COLUMN FOR UPDATED SOFTWARE R/R

NEW COLUMN TEST DROVE OK AFTER FIX

B GOODWRENCH MULTI-POINT VEHICLE INSPECTION

GMVI GOODWRENCH MULTI-POINT VEHICLE INSPECTION

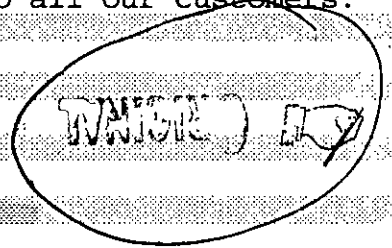
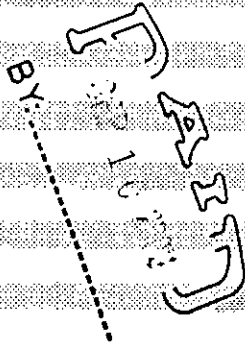
268 ISAD 0.50 (N/C)

28475 COMPLETE

MISCELLANEOUS CHARGE 5.00

WE APPRECIATE YOUR OPINION

Within the next few days you may be
 contacted by our dealership to get your level
 of satisfaction with this service visit. We
 would appreciate your patience in completing
 this survey. Your input helps us to improve
 the quality of service to all our customers.



OLD COLUMN # 88967179

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 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.		DESCRIPTION	TOTALS
(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)		CUSTOMER SIGNATURE		LABOR AMOUNT	282.01
				PARTS AMOUNT	369.77
				GAS, OIL, LUBE	0.00
				SUBLET AMOUNT	0.00
				MISC. CHARGES	5.00
				TOTAL CHARGES	656.78
				LESS INSURANCE	0.00
				SALES TAX	39.41
				PLEASE PAY THIS AMOUNT	696.19

CUSTOMER COPY

March 31, 2011

[REDACTED]
[REDACTED]
Charleston, WV [REDACTED]

Service Request Number: 71-665251456

Dear [REDACTED]

We have received your request for assistance, but have been unable to contact you using the telephone number provided or any listed in our records.

If your situation has been resolved to your satisfaction, no further action is necessary. If it has not, we invite you call us at 1-800-762-2737. Please refer to the service request number listed above when you reach our representative.

Total customer satisfaction is important to us at Pontiac. If we can be of any assistance, please don't hesitate to email us using the Contact Us link at www.Pontiac.com or call us at 1-800-762-2737.

Sincerely,

Pontiac Customer Assistance Center

North American Operations

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

GM

CHECK

No. [REDACTED]

50-837
213DATE
10/24/08

*****696 DOLLARS

****19 CENTS

AMOUNT
*****696.19PAY
TO THE
ORDER
OF[REDACTED]
CHARLESTON WV [REDACTED]North American Operations
General Motors Corporation
Disbursement Account
SIGNATUREThe Chase Manhattan Bank, N.A.
Syracuse, New York

AUDIT

VENDOR
DUNS NO. BB 000000110

1

North American Operations

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

DETACH BEFORE DEPOSITING CHECK

CHECK NO. [REDACTED]

PAYMENT
DATE 10/24/08

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1G2ZG528454 [REDACTED]	10/23/08 71-665251	VM 1-B4Y627 456.1-B4Y627	00.0000	696.19	.00	696.19
ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782				M3		
TOTAL				696.19	.00	696.19

March 31, 2011

[REDACTED]
[REDACTED]
Charleston, WV [REDACTED]

Service Request: 71-665251456

Dear [REDACTED]

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. After consideration, we believe you are entitled to a reimbursement. We have enclosed a check in the amount of \$696.19. We hope this goodwill adjustment will offset, to some degree, the inconvenience that this repair may have caused you.

At Pontiac, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Pontiac.com or call us at 1-800-762-2737.

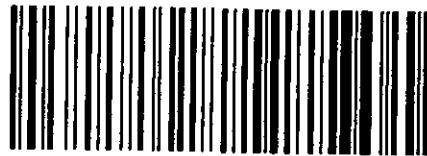
Sincerely,

Pontiac Customer Assistance Center

[Redacted Address]

Charleston WV
Case No 71-665 251456

CERTIFIED MAIL™



7008 1140 0004 1415 0860

OCT 20 2008

Pontiac
P.O. 33172
DETROIT, MI 48232-5170



USA FIRST-CLASS FOREVER



0000



48232

U.S. POSTAGE
PAID
ELKVIEW, WV
25071
OCT 16, 08
AMOUNT

\$4.90
00090110-09

4823235172 B050



EXPIRATION DATE			CLASS
MONTH	DAY	YEAR	
11	01	08	A

000010777 01
MOTORBOAT/VEHICLE REGISTRATION
STATE OF
WEST VIRGINIA

RENEWAL

The accompanying boat or plate number assigned to the addressee is to be used for the boat/vehicle described on this card

VEHICLE/BOAT
IDENTIFICATION NUMBER 1G2ZG528454
MAKE YEAR LENGTH/ TITLE NUMBER
BODY MODEL WEIGHT
PONT 05 3420
4D KANA 1/18/08

CHARLESTON WV

SIGN ON THE BACK

CASE No
71-665251-456

OWNER'S
SIGNATURE
NOTIFY THE
DIVISION IF LICENSE PLATE IS LOST OR
STOLEN.

NOTIFY THE DIVISION OF MOTOR VEHICLES OF ANY ADDRESS CHANGE, NAME CHANGE, OR IF THIS CARD OR LICENSE PLATE IS LOST OR STOLEN AND APPLY FOR A DUPLICATE CARD AND / OR PLATE.

IF VEHICLE IS SOLD, THIS CARD AND LICENSE PLATE MUST BE RETAINED BY SELLER

IF LICENSE PLATE IS TO BE TRANSFERRED TO ANOTHER VEHICLE, THIS CARD AND STATEMENT OF INSURANCE MUST BE PRESENTED TO THIS DEPARTMENT.

CLASS B & X VEHICLES ARE SUBJECT TO AN AXLE LOAD LIMIT OF 20,000 LBS. PER SINGLE AXLE AND 34,000 LBS. PER TANDEM AXLE.

- LITTERING IS A MISDEMEANOR
- DRIVING WITHOUT AUTO INSURANCE IS AGAINST THE LAW
- DRUNK DRIVING MAY RESULT IN THE LOSS OF YOUR LICENSE
- VEHICLE ACCIDENTS INVOLVING \$800 OR MORE MUST BE REPORTED TO THE DMV

VIN: 1G1ZS51F0 6F [REDACTED] SELLG SCE: 13 MDL YR: 06 ORD NO: JJHNS2

ODATE: 07/29/05 ORDER FAN: OTYPE: 070 DLVY SS/SITE CD: 13 26700
DDATE: 09/19/05 DLVY FAN: DTYPE: 010 SRVC TYPE: MILEAGE:

DLVY DOE: 09/20/05 ORDER BY:

CANC:

CANC DOE:

TRADE:

DLVY TO: [REDACTED]

TRD DOE:

SRVC IN:

TALLAHASSEE

FL [REDACTED]

SRVC OUT:

CANC SRVC IN:

BFSO ORD DT:

BFSO CUST:

PRICE ASSUR DT:

PRICE ASSUR RT:

--INCENTIVES--

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
CSE	01	13 26700	00028876632	09/21/05	500.00	OA		0.00	9

PROCESS TYPE: 001 CHECK NO: SSN:
DATA SCE: DLR INC MEMO NO: 00028876632 AUTH PUR CD:
MISC DATE: 09/19/05 MISC:
POLICY PYMT CMNT: ACTV TYPE: 6

CODE	PAY	SS/SITE	INV/INC NO	DATE	AMOUNT	MTHD	DLR	SHR	STAT
FFC	01	13 26700	00028876632	09/21/05	30.25	OA		0.00	9

PROCESS TYPE: 001 CHECK NO: SSN:
DATA SCE: DLVY INC MEMO NO: 00028876632 AUTH PUR CD:
MISC DATE: MISC:
POLICY PYMT CMNT: ACTV TYPE: 6

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

FLORIDA : 8/1/2005
Overallowance / Incentives / Negative Equity Form

Customer **Not required on
ineligible cases**

Request #

BBB #

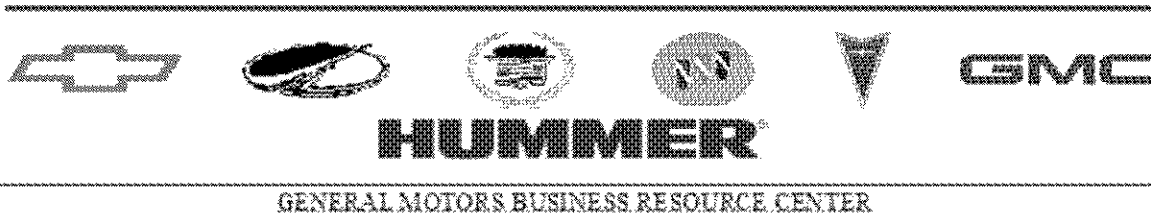
PURCHASE PRICE: <i>(From dealer Bill of Sale) -- (Selling Price)</i>	(+)
MSRP: <i>(From BARS Invoice)</i>	(-)
DIFFERENCE:	(=)

TRADE ALLOWANCE: <i>(from dealer Bill of Sale)</i>	(+)
<i>Include vehicle retail, accessories and mileage adjustment figures, and attach NADA pages to file.</i>	
NADA Retail Value for:	
VEHICLE:	
ACCESSORIES:	(-)
MILEAGE ADJUSTMENT:	
OVER ALLOWANCE: <i>(Trade more than NADA)</i>	(=)

PAYOFF: <i>(If dealer added negative equity into contract, do not subtract)</i>	(=)
--	-----

PURCHASE PRICE <i>(From dealer Bill of Sale) – (before tax, tag, etc.)</i>	(+)
GM CARD POINTS:	DO NOT INCLUDE
INCENTIVES (from BARS): <i>(Do not include fuel fill credit, dealer incentives or GM card credited back to customer)</i> 1: 2: 3: TOTAL INCENTIVES <i>(Not included in Purchase Price)</i>	(-)
OVERALLOWANCE: <i>(From above)</i>	(-)
NEGATIVE EQUITY: <i>(If NOT shown in contract))</i>	(-)

Actual price of Vehicle that should be presented to BBB for ATA	(=)
--	-----



September 24, 2008

Service Manager & Sales Manager
University Chevrolet
1850 Capital Circle NE
Tallahassee, FL 32308

Re: [REDACTED]
Siebel Request: 71-665716193
2006 Chevrolet Malibu
VIN # 1G1ZS51F06F [REDACTED]

Dear Mr. Tidwell:

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 within 24 hours. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- Copy of the Title and Registration
- 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,

LaRon Prosser
BRC Customer Relationship Specialist
Ph# 800-231-1841, prompt 9, prompt 5, extension 11196
FAX# 866-480-3633

Privileged and Confidential Information

CASE ASSESSMENT

By: LaRon Prosser State: FL

Customer Name: [REDACTED]

Service Request: 71-
665716193

BBB Case No.: CHV0849541

Vehicle ID No.:
1G1ZS51F06F [REDACTED]

In Service
Date:
9/19/05

Vehicle is: New

BAC Code: 173148

Year, Make & Model: 2006 Chevrolet Malibu
Mileage at Time of BBB Filing (39,750)

Vehicle Purchased Used on: N/A at odometer N/A

Lien holder: GMAC ☐ Other ☐: N/A

Sale Type: Purchase ☒ Lease ☐ Other ☐ :
{Type}

DVM Name: Randall Jordan
Phone/Cell Number: 404082/8136
Svc Mgr Name: Jody Tidwell

CAM Name: Aubrey Washington
Phone Number: 678-240-9832

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.

HAS TAC BEEN CONTACTED FOR SERVICE HISTORY N. IF **YES** PLEASE INCLUDE TAC # AND EXPLANATION TAC WAS INVOLVED. IF TAC HAS N/A _____

IF TAC **HAS NOT BEEN** CONTACTED WHY NOTN/A _____

☐ Steering gear went out

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
1/18/08	13939	1	29,340	C/S bumping/clicking noise in left front of vehicle. CK steering shaft, ck position of shaft, tried to lube shaft as per document id #1973984, Necessary to remove steering shaft & install lube kit & reinstall, road test. Noise gone. (University)
1/29/08	14406	1	30,434	C/S feeling a vibration from steering since last repair. Some tire & wheel vibration notice/no abnormal noise heard or felt. (University)

☐ Knocking sound under vehicle

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

N/A

☐ Power steering malfunctioning

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

2/15/07	89256	1	18,925	C/S clicking noise in steering when turning. Steering gear worn. Replaced steering gear, Align front end. (Univeristy)
2/15/07	89256	*	18,925	C/S power steering seems stiff. See line 51.
7/5/07	95344	1	22,920	C/S there is a noise in the front end when driving & turning. Incorrect pressure. Replaced steering gear. (University)
11/10/07	11200	3	28,406	C/S there is a knocking in steering when turning & feels unstable at hwy speed...History—steering gear loose. Replace power steering gear assembly. (University)

Has the vehicle ever been involved in a accident N

Did you confirm your answer with the customer Y

What type of damage was sustained (example front end collision)

N/A

Are the RO's attached if the vehicle was in an accident N/A

Are there any Aftermarket Modifications to the Vehicle N

Have you confirm this with the customer Y

List: N/A

Was a Trade Repurchase offered to the customer N

(A Trade Repurchase is to be offered as a settlement before a Straight can be considered)

Date authorized by the DVM/CAM N/A_____

What is the customer eligible for based upon the BBB Program Eligibility Guidelines and the States lemon law requirements for meeting presumption? Explain with some Detail

GM Program Summary Repurchase/Replacement: Not eligible for any remedies

Lemon Law Repurchase/Replacement: Not eligible for any remedies

GM Program Summary Repairs/Reimbursement for past repairs: Not eligible for any remedies

THE STATE LEMON LAW READS:

Days out of service: 30 days plus FRA

Repairs 3 plus FRA after receiving consumer's notice
Time period 24 months from original delivery plus 60 days
Does Lemon Law state nonconformity must continue to exist? N/A

If applicable, safety-related repairs N/A
Safety-related time period N/A

Number of repair attempts in the presumption period:	3
Total days out of service during the presumption period:	5
Total days out of service during customer's ownership:	5

Vehicle Meets Presumption of Lemon Law	NO
--	----

PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

Concern: 71-593221263 Legal Corr. FRA for steering gear replacement.
Date & Offer/Result: Opened on 1/15/08 & closed satisfied on 2/18/08

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 sts: Seeking repurchase/replacement

DVM sts: As of 9/30/08 I/m stating concerns came to my attention in Decmeber/January time frame that University's technician was misdiagnosing the knock feel in the steering wheel as a bad steering gear & had replaced 2-3 gears on several 06 malibu's. That was the incorrect repair. It was a misdiagnosis. If this lady has her steering knocked returned there is a new steering intermediate shaft out to correct this field knock problem. The knock itself is not a durability or safety issue. It's just a customer satisfaction issue. What I would like to do is redirect this customer to Champion & have them put one of the new steering I-shafts in her vehicle & that will alleviate her knocking

As of 9/30/08 Direct call to DVM: DVM states he spoke with svc manger Lamar after message was left on CRS voicemail this morning. Dlr is aware of new I-shaft. They may have to order the part. He will have dlr explain to her there was a misdiagnosis by previous technician.

As of 10/1/08 I/m stating I'm not sure if I left you this information yesterday afternoon or not. I spoke with Lamar yesterday afternoon & he tells me he road tested her vehicle with the shop foreman. The only issue this vehicle has at present time is the front brake rotors have a little run out. There is a little brake pulsation in the front end. They test drove her vehicle for her stated complaints the vehicle was over there for. They could not duplicate them. Lamar & the shop formean was going to speak back with yesterday afternoon personally & review her situation. The front shock powers had a little movement to them & they lubricated those which was a maintenance issue. I don't think they are going to charge her for that. I have given Lamar the authority that I will pay for 2/3 of refinishing the front rotors on her vehicle if she wants to. There are no priors on that.

SVM sts: Svc manager faxed Ro's but did not provide any additional info

CRS Rationale: Based on the repairs history the CRS does not feel the vehicle should be replaced/repurchased. In reviewing the time frame in which the cust filed the BBB claim it appears the

customer is not eligible for the BBB or GM program summary.

As of 9/25/08 CRS received email from BBB Eric Oglesby advising case is ineligible for both Lemon law and GM's National Program

As of 9/25/08 BBB closed claim Ineligible: Vehicle Inel Due To Age

Cust has svc appointment with Champion Chevrolet on 9/30/08

CRS will continue work with cust to verify new I-shaft was installed & assistance was provided towards refinishing the front rotors. Once repairs are completed the CRS & DVM agreed that no additional assistance should be provided unless requested by the customer. If the customer does request additional assistance CRS will escalate to DVM to seek approval.

As of 10/3/08 CRS contacted customer to discuss service visit & verify satisfaction. The customer advised she was dissatisfied & had already taken the appropriate actions. The customer no longer wanted assistance from the CRS & disconnected call.

CRS will close file dissatisfied

What are the 3 main strengths of the customer's case to win repurchase through Lemon Law
N/A

What are the 3 mains weaknesses of the customer's case to win repurchase through Lemon Law

1. Claim file outside of filing period

2. Vehicle ineligible due to age

3. Only 3 repair attempts including FRA

4. Vehicle has not been to a GM dealership for steering concerns since January 2008

Decision reached by CRS: Arbitrate case: ☐ Settle case: ☒

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.

*** SES light is to be captured under affected component above.**

2006 MALIBU SEDAN LS		CHEVROLET MOTOR DIVISION
15U SANDSTONE METALLIC	/L4G	GENERAL MOTORS CORPORATION
33B CASHMERE		100 RENAISSANCE CENTER
ORDER NO. JJHNS2/TRE	STOCK NO.	DETROIT MI 48243-1114
VIN 1G1 ZS51 F0 6F		VEHICLE INVOICE 1AD71875552
*****		*****13*26700S
MODEL & FACTORY OPTIONS	MSRP	INV AMT RETAIL - STOCK
1ZS69 MALIBU SEDAN LS	17365.00	16409.93 INVOICE 08/30/05
FE9 50-STATE EMISSIONS	N/C	N/C SHIPPED 08/30/05
L61 2.2L 4 CYL ENGINE	N/C	N/C EXP I/T 09/11/05
MX0 4-SPEED AUTO TRANSMISSION	N/C	N/C INT COM 09/12/05
VK3 FRONT LICENSE PLATE BRACKET	0.00	0.00 PRC EFF 08/30/05
		KEYS G2816 G2816
		WFP-S QTR OPT-1
		BANK: GMAC - 029
		CHG-TO 26-700
		SHIP WT: 3039
		HP: 18.4
		GMS: 16588.98
		SUPPLR: 17332.11
		MRM: 17990.00
		DAN: 15S4
		MEMO 793.25

TOTAL MODEL & OPTIONS	17365.00	16409.93	ACT 231	16513.98
DESTINATION CHARGE	625.00	625.00	H/B 261	520.95
LAM DEALER CONTRIBUTION		173.65	ADV 261	173.65
LAM GROUP CONTRIBUTION		86.83	EXP 65A	86.83
TOTAL	17990.00	17295.41	PAY 310	17295.41
MEMO: TOTAL LESS HOLDBACK AND				
APPROX WHOLESALE FINANCE CREDIT		16513.98		

 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.

UNIVERSITY CHEVROLET, INC.	REMIT TO GMAC NO. 029
	VIN 1G1ZS51F06F
	\$ 17295.41 INV 1AD71875552
	DUE 09/12/05 DEALER 26-700

General Motors Protection Plan (GMPP)

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

<input checked="" type="checkbox"/> GMPP	
Definition:	A service contract (not an “extended warranty”) covering various vehicle components & systems and issued for various time and mileage intervals, & deductibles
Purpose:	To restore a customer’s confidence in their vehicle as a result of an unsatisfactory service experience &/or to provide added value for deserving customers to offset an inconvenience
When to use:	<ul style="list-style-type: none"> ➤ The customer has concerns regarding repeated failures ➤ The customer has concerns about potential out of warranty expenses ➤ As an alternative to a vehicle repurchase
When NOT to use:	<ul style="list-style-type: none"> ➤ As a way to get coverage for a current repair ➤ In conjunction with other goodwill tools ➤ In cases of property damage or personal injury ➤ When the vehicle has a branded or salvaged title ➤ If customer has pursued third party intervention (BBB or legal)
Parameters of use:	<ul style="list-style-type: none"> ➤ Should be issued during the original New Vehicle Warranty ➤ Match terms to the owners purchase cycle ➤ Transferable to subsequent owners ➤ If cancelled, GM receives refund ➤ <u>Coverage begins at plan purchase date & mileage, NOT in-service date</u>
Example:	<ul style="list-style-type: none"> ➤ Customer’s overall ownership experience has been less-than-satisfactory and is deserving of a more substantive goodwill gesture, &/or is concerned about potential out of warranty expenses

NOTES: 1) Please be sure that GMPP is the appropriate goodwill offer, as there are more cost effective alternatives (component coverage letter) 2) Select the plan, time/mileage & deductible that best fits the customer’s needs, and is most appropriate for the situation (consider Basic Guard before Value Guard, before Major Guard) 3) Since GMPP selection can be complex, prior to committing to the customer, we suggest you contact the GM Call Center @ 1-800-231-1841 (prompt 3, prompt 2) to determine current plan availability and cost 4) Time and mileage will be calculated from the “current” date and vehicle mileage, not from the original in-service date 5) A GMPP has substantial value so always communicate to your customer your investment in their loyalty 6) If the customer wants to upgrade from situation appropriate plan and is willing to pay the cost of the upgrade, contact your DVM

2007 Model Year

Available GMPP parameters for all vehicles appearing on the Vehicle Model Group Classification Guide		
In service up to 12 months and 12,000 odometer miles (classified as a NEW vehicle)		
Note: 36/45,000, 36/54,000, & 48/48,000 plans are unavailable for ALL Buick, Cadillac and Hummer vehicles		
<input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard		
36 Months	48 Months	60 Months
<input type="checkbox"/> 45,000	<input type="checkbox"/> 48,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 54,000	<input type="checkbox"/> 60,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 60,000	<input type="checkbox"/> 72,000	<input type="checkbox"/> 60,000
<input type="checkbox"/> 75,000	<input type="checkbox"/> 80,000	<input type="checkbox"/> 75,000
<input type="checkbox"/> 100,000	<input type="checkbox"/> 100,000	<input type="checkbox"/> 90,000
		<input type="checkbox"/> 100,000
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200		

2007 Model Year / In service 12 or more months and with 0 - 24,000 odometer miles			
<input type="checkbox"/> Value Guard <input checked="" type="checkbox"/> Major Guard			
24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 56,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 70,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 84,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	<input type="checkbox"/> 60,000
	<input type="checkbox"/> 45,000	<input type="checkbox"/> 60,000	<input type="checkbox"/> 75,000
	<input type="checkbox"/> 54,000	<input checked="" type="checkbox"/> 72,000	
	<input type="checkbox"/> 60,000		
	<input type="checkbox"/> 75,000		
Available Deductible: <input checked="" type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200			

2007 Model Year / In service 12 or more months and with 24,000 – 36,000 odometer miles				
<input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard				
12 Months	24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 20,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 60,000
	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	<input type="checkbox"/> 75,000
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 45,000	<input type="checkbox"/> 60,000	
		<input type="checkbox"/> 54,000	<input type="checkbox"/> 72,000	
		<input type="checkbox"/> 60,000		
		<input type="checkbox"/> 75,000		
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200				

2007 Model Year / In service 12 or more months and with 36,000 – 50,000 odometer miles				
<input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard				
12 Months	24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 20,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	
	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000		
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000		
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200				

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Address Go Links »

Default Transaction Mode: Online

Vehicle Identifier		Customer Information	
Vehicle Category:	GM, Used	Plan Customer:	Individual
Division:	Pontiac	Customer Type:	Owner
VIN:	162ZF58BX74	West Jordan, Utah, United States	
		Evening Phone:	
		Primary Language:	English
		Secondary Language:	French

Sales Information

Dealer Code: 32888
Action: Add Protection Plan
Odometer: 22855
Delivery Date: 09/30/2008

Plan Lienholder

Lienholder Type: Other
Pontiac
P O Box 33172
Detroit, Michigan - 48232

Protection Plans

Plan Purchase Date: 09/30/2008
In Service Date: 09/30/2008

Plan Type: Major Guard Retail
Term: 48
Mileage Limit: 72000
Deductible: 0
Rental Type: Standard
Plan Price: \$ 0.00

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GM GlobalConnect - Microsoft Internet Explorer provided by GMCARS

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Address Go Links »

GM OrderWORKBENCH

Close Window

Logout

Transaction Details

Click the "Print" button in order to keep a record of this transaction detail. After you review the transaction details, click "Close Window".

VIN: 162ZF58BX74	Status: Pending
Dealer Code: 32888	User ID: 1fw4dcz
Transaction Date: 09/30/2008	User Role: Central Office Administrator
Transaction Type: GM Protection Plan	Timestamp Date: 2008-10-07-09:40:05:42:1000
Transaction Messages: 1097 - GMPP sent to MIC	

Transaction M
Online

Vehicle Identifier

Vehicle Category: GM, Used
Division: Pontiac
VIN: Full VIN

Dealer Identifier

Division: Pontiac

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Done Internet

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General Motors Dealership Empowerment Process

(Dealership Service Management Template – Revised 01/10/2007)

- 1) Please complete this template by either typing or legibly writing in all required information
- 2) Either fax the completed template to 1-866-430-2718, or attach it to any e-mail and send to AVM.TEAM@GMEXPERT.COM
 - o It is NOT necessary to FAX all 13 pages; only those that apply to your request
- 3) Place a copy of the completed template in your VIN history file for future reference

NOTE: Questions pertaining to potential goodwill options (prior to committing to the customer), value &/or the status of a pending request can be directed to the GM Call Center at 1-800-231-1841 (prompt 3, prompt 2)

Region	<input type="checkbox"/> NEast	<input type="checkbox"/> SEast	<input type="checkbox"/> NCentral	<input type="checkbox"/> SCentral	<input checked="" type="checkbox"/> Western
--------	--------------------------------	--------------------------------	-----------------------------------	-----------------------------------	---

Service Manager Name & Phone Number	Ty Johnson 801-693-7077
Dealership Name, Location & BAC Number	Jerry Seiner Pontiac, Buick, GMC BAC: 118754 957 North 400 East North Salt Lake, UT 84054
CAC Case (SR) Number (if known)	n/a
Customer Name (Mr., Ms., Mrs., Last, First, MI)	██████████
Customer <u>Complete</u> Mailing Address	████████████████████ West Jordan, UT ██████████
Daytime Phone Number	██████████
Evening Phone Number	██████████
FULL VIN	1G2ZF58BX74██████████
Current Mileage	20,397
District Service Manager's Name & Phone Number	Steve Robinson 801-699-1087
Customer's Concern(s) And Business Reason(s) For Offering Goodwill	Major electrical problems, electric steering would fail, gauges would stop working, odometer would read ERROR and chimer would keep on off. The customer had taken his G6 into another Pontiac dealership four times before he brought it into us. We found the failure and repaired the problem in August on repair order number 300967.
Additional Information, Such As RO #s And Used Vehicle Purchase Information (date & mileage at purchase, and seller)	Customer wanted to wait to see if the problem was fixed before he asked General Motors to do something to help with all of the unsuccessful repairs.

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**GMPP Mechanical Coverage (Basic Guard, Value Guard, Major Guard)
2000 – 2007 Model Years**

Important Notes:

- Questions pertaining to any of these goodwill options should be directed to the GM Call Center at 1-800-231-1841(prompt 3, prompt 2) or your District Service Manager (DVM)
- Since GMPP selection is complex and plan availability can change, we ask that you ALWAYS contact the GM Call Center @ 1-800-231-1841(prompt 3, prompt 2) prior to offering a plan to the customer
- These tools are NOT available on SAAB, Saturn, Hummer H1 or medium duty trucks
- The customer MUST have verbally agreed to accept the goodwill gesture as a resolution to their concern before you submit this template
- All information in this template must be fully and accurately completed before processing can begin
- Always communicate the value of the goodwill to your customer so they recognize your investment in their loyalty
- The dealership should also ALWAYS take credit for providing the goodwill (NOT GM)
- An Owner Loyalty Certificate (OLC) provides GM funds towards a new GM vehicle purchase, and is the preferred goodwill offering for deserving, loyal, appreciative customers with high mileage situations (everyone wins when the customer purchases a new GM vehicle)
 - You can recommend an OLC to your DVM, but your DVM MUST agree with your recommendation and MUST process the OLC with the call center (do not commit to the customer until your DVM approves your request)
 - The call center mails the OLC to the customer, and the OLC can be used at any GM dealership to purchase a NEW GM vehicle
 - An OLC CAN NOT be offered when the vehicle is still within base new vehicle warranty parameters
 - Do NOT finalize the new vehicle sales transaction, execute the documents or deliver the new vehicle prior to the customer receiving the OLC and providing the original to the dealership, or the dealership may not receive the OLC credit amount from GM

OnStar

<input type="checkbox"/> OnStar	
Definition:	A complimentary one year plan extension to an <u>active</u> OnStar account
Purpose:	To provide added value for deserving customers to offset an inconvenience
When to use:	<ul style="list-style-type: none"> ➤ Vehicle must be OnStar equipped & account must be active ➤ Vehicle must be 2004 or newer ➤ As an alternative to other goodwill tools
When NOT to use:	<ul style="list-style-type: none"> ➤ In conjunction with other goodwill tools ➤ In cases of property damage or personal injury ➤ When the vehicle has a branded or salvaged title ➤ If customer has pursued third party intervention (BBB or legal)
Parameters of use:	<ul style="list-style-type: none"> ➤ GMVIS must be checked to see if the vehicle has an active account that is in good standing ➤ The extension begins at the expiration of the existing plan
Examples:	<ul style="list-style-type: none"> ➤ The relationship between the customer and dealer is strained ➤ Other goodwill tools are inappropriate ➤ The customer has been inconvenienced
Matrix of Available OnStar Plans	
<input type="checkbox"/> Safe & Sound (1 Year Extension)	<input type="checkbox"/> Directions & Connections (1 Year Extension)
(An extension of Luxury & Leisure is not available.)	

Maintenance Certificate

X	Maintenance Certificate		
Definition:		A letter authorizing a complimentary, specified <u>future</u> maintenance service	
Purpose:		To provide added value for deserving customers to offset an inconvenience	
When to use:		➤ To cover a specified maintenance service	
When NOT to use:		➤ In conjunction with other goodwill tools ➤ For multiple oil changes ➤ When customer already has Smart Care ➤ When the vehicle has a branded or salvaged title ➤ If customer has pursued third party intervention (BBB or legal)	
Parameters of use:		➤ Can be offered in or out of warranty ➤ Never indicate a dollar value by itself, must indicate a service ➤ The value of the services must not exceed \$200 (see examples)	
Examples:		➤ “One tire rotation and wheel balance, not to exceed \$100” ➤ “One front end alignment, not to exceed \$50”	
X	Lube, oil, and filter	<input type="checkbox"/>	Tire balancing service
<input type="checkbox"/>	Coolant system flush	X	Tire rotation
<input type="checkbox"/>	Differential fluid change	<input type="checkbox"/>	Wheel alignment
<input type="checkbox"/>	Transmission service	<input type="checkbox"/>	Other (Please specify)

GMPP Smart Care

<div><input checked="" type="checkbox"/></div> GMPP Smart Care			
Definition:		A complimentary plan providing basic maintenance services for a variety of time and mileage intervals	
Purpose:		To provide added value for deserving customers to offset an inconvenience	
When to use:		<div><div>➤</div>To recognize & thank a customer for their cooperation &/or patience</div> <div><div>➤</div>To promote normal maintenance</div> <div><div>➤</div>As an alternative to a maintenance letter or component letter</div>	
When NOT to use:		<div><div>➤</div>In conjunction with other goodwill tools</div> <div><div>➤</div>In cases of property damage or personal injury</div> <div><div>➤</div>When the vehicle has a branded or salvaged title</div> <div><div>➤</div>If customer has pursued third party intervention (BBB or legal)</div>	
Parameters of use:		<div><div>➤</div>Can be offered in or out of warranty</div> <div><div>➤</div>Match terms to the owners purchase cycle</div> <div><div>➤</div>Smart Care will not pay any claims past 100,000 miles</div> <div><div>➤</div><u>Coverage begins at the plan purchase date & mileage, NOT in-service date</u></div>	
Examples:		<div><div>➤</div>The diagnostic/repair process took longer then normal, and the customer was cooperative</div> <div><div>➤</div>A “one-time” maintenance offer is insufficient</div>	
Matrix of Available GMPP Smart Care Plans			
<input type="checkbox"/>	12/12,000	<input type="checkbox"/>	36/45,000
<input type="checkbox"/>	12/15,000	<input type="checkbox"/>	36/54,000
<input type="checkbox"/>	24/24,000	<input type="checkbox"/>	36/60,000
<input type="checkbox"/>	24/30,000	<input type="checkbox"/>	48/48,000
<input checked="" type="checkbox"/>	36/36,000	<input type="checkbox"/>	48/60,000

Component Coverage Letter

<input type="checkbox"/> Component Coverage Letter	
Definition:	A letter that covers a specific component for a defined period of time and mileage.
Purpose:	To restore a customer's confidence in a component as a result of an unsatisfactory service experience.
When to use:	<ul style="list-style-type: none"> ➤ The customer has concerns regarding repeat failure(s) of a specific component ➤ The customer has concerns about potential out of warranty expenses on a specific component
When NOT to use:	<ul style="list-style-type: none"> ➤ For the "complete vehicle" ➤ For a system ("electrical system") ➤ The vehicle has a salvage or branded title ➤ Wear and maintenance items (tires, brake pads, wiper blades, etc.) ➤ If customer has pursued third party intervention (BBB or legal) ➤ In conjunction with other goodwill tools
Parameters of use:	<ul style="list-style-type: none"> ➤ Can be written up to and <u>not to exceed 84 months/100,000 miles from the original in-service date</u> <ul style="list-style-type: none"> ○ For <u>Diesel Engines</u>, it can be written up to and not to exceed 84 months/150,000 miles from the original in-service date ○ For <u>Cold Start Knock</u>, it should be written for 72/100,000. If it falls w/in the parameters noted in TSB #01-06-01-022 or 01-06-01-028A a transferable component letter will be issued (only exception). ➤ <u>NOT</u> transferable to subsequent owners (except cold start knock) ➤ Electrical components MUST be specific (alternator, radio), NEVER the entire system ➤ Should be offered while the vehicle is still within warranty ➤ Match terms to the customer's ownership cycle ➤ Preferred over GMPP due to cost & focus application
Examples:	<ul style="list-style-type: none"> ➤ A catastrophic engine failure within the warranty period - customer is offered a 84/100,000 component letter ➤ The second alternator failure within the warranty period - customer is offered a 72/75,000 component letter
Time limit (months):	Mileage limit:
Specific component(s) (i.e. transmission):	

General Motors Protection Plan (GMPP)

<input checked="" type="checkbox"/> GMPP	
Definition:	A service contract (not an “extended warranty”) covering various vehicle components & systems and issued for various time and mileage intervals, & deductibles
Purpose:	To restore a customer’s confidence in their vehicle as a result of an unsatisfactory service experience &/or to provide added value for deserving customers to offset an inconvenience
When to use:	<ul style="list-style-type: none"> ➤ The customer has concerns regarding repeated failures ➤ The customer has concerns about potential out of warranty expenses ➤ As an alternative to a vehicle repurchase
When NOT to use:	<ul style="list-style-type: none"> ➤ As a way to get coverage for a current repair ➤ In conjunction with other goodwill tools ➤ In cases of property damage or personal injury ➤ When the vehicle has a branded or salvaged title ➤ If customer has pursued third party intervention (BBB or legal)
Parameters of use:	<ul style="list-style-type: none"> ➤ Should be issued during the original New Vehicle Warranty ➤ Match terms to the owners purchase cycle ➤ Transferable to subsequent owners ➤ If cancelled, GM receives refund ➤ <u>Coverage begins at plan purchase date & mileage, NOT in-service date</u>
Example:	<ul style="list-style-type: none"> ➤ Customer’s overall ownership experience has been less-than-satisfactory and is deserving of a more substantive goodwill gesture, &/or is concerned about potential out of warranty expenses

NOTES: 1) Please be sure that GMPP is the appropriate goodwill offer, as there are more cost effective alternatives (component coverage letter) 2) Select the plan, time/mileage & deductible that best fits the customer’s needs, and is most appropriate for the situation (consider Basic Guard before Value Guard, before Major Guard) 3) Since GMPP selection can be complex, prior to committing to the customer, we suggest you contact the GM Call Center @ 1-800-231-1841 (prompt 3, prompt 2) to determine current plan availability and cost 4) Time and mileage will be calculated from the “current” date and vehicle mileage, not from the original in-service date 5) A GMPP has substantial value so always communicate to your customer your investment in their loyalty 6) If the customer wants to upgrade from situation appropriate plan and is willing to pay the cost of the upgrade, contact your DVM

2007 Model Year

Available GMPP parameters for all vehicles appearing on the Vehicle Model Group Classification Guide		
In service up to 12 months and 12,000 odometer miles (classified as a NEW vehicle)		
Note: 36/45,000, 36/54,000, & 48/48,000 plans are unavailable for ALL Buick, Cadillac and Hummer vehicles		
<input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard		
36 Months	48 Months	60 Months
<input type="checkbox"/> 45,000	<input type="checkbox"/> 48,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 54,000	<input type="checkbox"/> 60,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 60,000	<input type="checkbox"/> 72,000	<input type="checkbox"/> 60,000
<input type="checkbox"/> 75,000	<input type="checkbox"/> 80,000	<input type="checkbox"/> 75,000
<input type="checkbox"/> 100,000	<input type="checkbox"/> 100,000	<input type="checkbox"/> 90,000
		<input type="checkbox"/> 100,000
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200		

2007 Model Year / In service 12 or more months and with 0 - 24,000 odometer miles			
<input type="checkbox"/> Value Guard <input checked="" type="checkbox"/> Major Guard			
24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 56,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 70,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 84,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	<input type="checkbox"/> 60,000
	<input type="checkbox"/> 45,000	<input type="checkbox"/> 60,000	<input type="checkbox"/> 75,000
	<input type="checkbox"/> 54,000	<input checked="" type="checkbox"/> 72,000	
	<input type="checkbox"/> 60,000		
	<input type="checkbox"/> 75,000		
Available Deductible: <input checked="" type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200			

2007 Model Year / In service 12 or more months and with 24,000 – 36,000 odometer miles				
<input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard				
12 Months	24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 20,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 60,000
	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	<input type="checkbox"/> 75,000
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 45,000	<input type="checkbox"/> 60,000	
		<input type="checkbox"/> 54,000	<input type="checkbox"/> 72,000	
		<input type="checkbox"/> 60,000		
		<input type="checkbox"/> 75,000		
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200				

2007 Model Year / In service 12 or more months and with 36,000 – 50,000 odometer miles				
<input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard				
12 Months	24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 20,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	
	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000		
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000		
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200				

2004 – 2006 Model Years

Available GMPP parameters for all vehicles appearing on the Vehicle Model Group Classification Guide

In service up to 12 months and 12,000 odometer miles (classified as a NEW vehicle)

Notes: 1) 36/45,000, 36/54,000, & 48/48,000 plans are unavailable for ALL 2006 Buick, ALL 2006 Hummer & ALL 2004-2006 Cadillac vehicles 2) Only plans available for Aveo & Cobalt are \$0 & \$100 deductible Major Guard (\$200 deductible Major Guard, ALL Basic Guard & ALL Value Guard plans are unavailable)

☐ Basic Guard ☐ Value Guard ☐ Major Guard

36 Months	48 Months	60 Months
<input type="checkbox"/> 45,000	<input type="checkbox"/> 48,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 54,000	<input type="checkbox"/> 60,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 60,000	<input type="checkbox"/> 72,000	<input type="checkbox"/> 60,000
<input type="checkbox"/> 75,000	<input type="checkbox"/> 80,000	<input type="checkbox"/> 75,000
<input type="checkbox"/> 100,000	<input type="checkbox"/> 100,000	<input type="checkbox"/> 90,000
		<input type="checkbox"/> 100,000
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200		

2004-2006 Model Years / In service 12 months or more and with 0 - 24,000 odometer miles

Note: Only plans available for Aveo & Cobalt are \$0 & \$100 deductible Major Guard (\$200 deductible Major Guard, ALL Basic Guard & ALL Value Guard plans are unavailable)

☐ Basic Guard ☐ Value Guard ☐ Major Guard

12 Months	24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	<input type="checkbox"/> 60,000
<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000	<input type="checkbox"/> 60,000	<input type="checkbox"/> 75,000
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000	<input type="checkbox"/> 72,000	
		<input type="checkbox"/> 60,000		
		<input type="checkbox"/> 75,000		
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200				

2004-2006 Model Years / In service 12 months or more and with 24,001 – 36,000 odometer miles

Note: Only plans available for Aveo & Cobalt are \$0 & \$100 deductible Major Guard (\$200 deductible Major Guard, ALL Basic Guard & ALL Value Guard plans are unavailable)

☐ Basic Guard ☐ Value Guard ☐ Major Guard

12 Months	24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	<input type="checkbox"/> 60,000
<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000	<input type="checkbox"/> 60,000	<input type="checkbox"/> 75,000
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000	<input type="checkbox"/> 72,000	
		<input type="checkbox"/> 60,000		
		<input type="checkbox"/> 75,000		
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200				

2004 – 2006 Model Years (continued)

2004-2006 Model Years / In service 12 months or more and with 36,001 – 50,000 odometer miles				
Note: Only plans available for Aveo & Cobalt are \$0 & \$100 deductible Major Guard (\$200 deductible Major Guard, ALL Basic Guard & ALL Value Guard plans are unavailable)				
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard				
12 Months	24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 50,000
<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	
<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000		
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000		
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200				

2004-2006 Model Years / In service 12 months or more and with 50,001 – 60,000 odometer miles				
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard				
12 Month	24 Months	36 Months	48 Months	60 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000	<input type="checkbox"/> 40,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000	
<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000	
<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000		
Available Deductible: <input type="checkbox"/> \$0 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200				

2004-2006 Model Years / In service 12 months or more and with 60,001 – 75,000 odometer miles			
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard			
12 Months	24 Months	36 Months	48 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	
<input type="checkbox"/> 18,000			
<input type="checkbox"/> 20,000			
Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200			

2002 & 2003 Model Years

Available GMPP parameters for all vehicles appearing on the Vehicle Model Group Classification Guide						
2002 & 2003 Model Year vehicle with 0 – 24,000 odometer miles						
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard						
Major Guard Value Guard & Basic Guard	12 Months	24 Months	36 Months	48 Months	Value Guard & Basic Guard Only	60 Months
	<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000		<input type="checkbox"/> 40,000
	<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000		<input type="checkbox"/> 50,000
	<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000		<input type="checkbox"/> 60,000
	<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000	<input type="checkbox"/> 60,000		<input type="checkbox"/> 75,000
		<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000	<input type="checkbox"/> 72,000		
		<input type="checkbox"/> 60,000				
		<input type="checkbox"/> 75,000				
Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200						

2002 & 2003 Model Year vehicle with 24,001 – 36,000 odometer miles						
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard						
Major Guard Value Guard & Basic Guard	12 Months	24 Months	36 Months	48 Months	Value Guard & Basic Guard Only	60 Months
	<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000		<input type="checkbox"/> 40,000
	<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000		<input type="checkbox"/> 50,000
	<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000		<input type="checkbox"/> 60,000
	<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000	<input type="checkbox"/> 60,000		<input type="checkbox"/> 75,000
		<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000	<input type="checkbox"/> 72,000		
		<input type="checkbox"/> 60,000				
		<input type="checkbox"/> 75,000				
Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200						

2002 & 2003 Model Year vehicle with 36,001 – 50,000 odometer miles						
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard						
Major Guard Value Guard & Basic Guard	12 Months	24 Months	36 Months	48 Months	Value Guard & Basic Guard Only	60 Months
	<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000		<input type="checkbox"/> 40,000
	<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000		<input type="checkbox"/> 50,000
	<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000		
	<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000			
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000				
Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200						

2002 & 2003 Model Years (continued)

2002 & 2003 Model Year vehicle with 50,001 – 60,000 Odometer miles						
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard						
Major Guard Value Guard & Basic Guard	12 Months	24 Months	36 Months	48 Months	Value Guard & Basic Guard Only	60 Months
	<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000		<input type="checkbox"/> 40,000
	<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 40,000		
	<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 48,000		
	<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000			
Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200						

2002 & 2003 Model Year vehicle with 60,001 – 75,000 Odometer miles			
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard			
12 Months	24 Months	36 Months	48 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 32,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	
<input type="checkbox"/> 18,000			
<input type="checkbox"/> 20,000			
Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200			

2000 & 2001 Model Years

Available GMPP parameters for all vehicles appearing on the Vehicle Model Group Classification Guide					
2000 & 2001 Model Year vehicle with 0 – 24,000 odometer miles			2000 & 2001 Model Year vehicle with 24,001 – 36,000 odometer miles		
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard			<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard		
12 Months	24 Months	36 Months	12 Months	24 Months	36 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000
<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000
<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000	<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000		<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000
		<input type="checkbox"/> 60,000			
		<input type="checkbox"/> 75,000			
Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200			Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200		

2000 & 2001 Model Year vehicle with 36,001 – 50,000 odometer miles			2000 & 2001 Model Year vehicle with 50,001 – 60,000 odometer miles		
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard			<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard		
12 Months	24 Months	36 Months	12 Months	24 Months	36 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000
<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 18,000	<input type="checkbox"/> 36,000	<input type="checkbox"/> 36,000
<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000	<input type="checkbox"/> 20,000	<input type="checkbox"/> 40,000	<input type="checkbox"/> 45,000
	<input type="checkbox"/> 50,000	<input type="checkbox"/> 54,000			
Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200			Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200		

2000 & 2001 Model Year vehicle with 60,001 – 75,000 odometer miles		
<input type="checkbox"/> Basic Guard <input type="checkbox"/> Value Guard <input type="checkbox"/> Major Guard		
12 Months	24 Months	36 Months
<input type="checkbox"/> 12,000	<input type="checkbox"/> 24,000	<input type="checkbox"/> 24,000
<input type="checkbox"/> 15,000	<input type="checkbox"/> 30,000	<input type="checkbox"/> 30,000
<input type="checkbox"/> 18,000		
<input type="checkbox"/> 20,000		
Available Deductible: <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input type="checkbox"/> \$200		

NOTE: We do offer a limited selection of GMPP plans for 1997 – 1999 model year vehicles, but a customer's circumstances would need to be very special to consider a GMPP for a vehicle of that age. If you believe your customer's situation merits consideration, please contact your GM District Service Manager.

April 4, 2011

[REDACTED]
[REDACTED]
West Jordan, UT [REDACTED]

Service Request: 71-667707212
Customer Relationship Specialist: Amy Lipinski

Dear [REDACTED]:

Thank you for your support of Pontiac. As we agreed, the necessary paperwork has been completed and forwarded to General Motors Protection Plan (GMPP). The processing time will take approximately eight weeks. The Major Guard plan for your 2007 Pontiac G6, Vehicle Identification Number 1G2ZF58BX74 [REDACTED] is for the following:

- 48 months or 72,000 miles, whichever occurs first, beginning on September 30, 2008 and ending on September 30, 2012 and begins with 22,855 and ends with 94,855 odometer miles
- Standard rental
- A \$0.00 deductible

You will be notified by GMPP once the plan has been processed. This letter will serve as your policy until the plan confirmation is received. Please contact your local GM Dealer if you have coverage questions. Your complete satisfaction is very important to us. We hope this transaction demonstrates our appreciation of you as a valued Pontiac customer.

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.

Thank you for allowing us the opportunity 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.



388809

RECOMMENDED SERVICES

OPERATION	OPERATION DESCRIPTION	MO/MI	TOTAL	OPERATION	OPERATION DESCRIPTION	MO/MI	TOTAL

Only Nucar offers the Card!



SERVICE HISTORY

DATE	REPAIR ORDER	MILEAGE	ADVISOR	TECHNICIAN	TYPE	OPERATION	OPERATION DESCRIPTION

SALESPERSON NO.

B O D Y

STATE REG# 2

VEHICLE ID NO. 1G2ZG558564	YEAR/MAKE/MODEL 06/PONTIAC/G6/4 DOOR SEDAN	PRODUCTION DATE	STOCK NO.	LICENSE NO.	R.O. NO. 388809		
CUSTOMER NO. 105086	SERVICE CONTRACT	DELIVERY DATE	DELIVERY MILES	SELLING DEALER NO.	R.O. DATE 10/03/08		
COLOR GRAY/	CONTRACT NO.	EXPIRATION DATE	EXPIRATION MILES	TAG NO. 883			
TURBO PNZZ	M/MC Y	AIR COND. Y	P.S. Y	TRANS A	MILEAGE 55,976	ADVISOR NO. 445	ADVISOR JEFF DUGAN
RESIDENCE PHONE	BUSINESS PHONE	I hereby authorize the repair work therein set forth to be done by you, together with the furnishing by you of the necessary parts and other material for such repair, and agree; that you are not responsible for any delays caused by unavailability or delayed availability of parts or material for any reason; that you neither assume or authorize any other person to assume for you any liability in connection with such repair; that you shall not be responsible for loss or damage to the above vehicle, or articles left therein; in case of fire, theft or other cause beyond your control; that an express mechanic's lien is hereby acknowledged on the above vehicle to secure the amount of repairs thereto; that your employees may operate the above vehicle on streets, highways or elsewhere for the purpose of testing and/or inspecting such vehicle.					
TIME RECEIVED 04:03pm	DATE/TIME PROMISE 10/03/08 06:00pm	PRIORITY	LABOR RATE				

JOB

ORIGINAL CUSTOMER ESTIMATE: TOTAL
1200.00

X

1 C 50PNZ BODY REPAIR
RIGHT 1/4 PANEL RT RR DOOR

2 C 50PNZ PAINT PAINT LABOR

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

PLEASE READ CAREFULLY, PLEASE CHECK ONE OF THE STATEMENTS BELOW AND SIGN.

I UNDERSTAND THAT UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE.
I REQUEST A WRITTEN ESTIMATE.
I REQUEST AN ORAL ESTIMATE.
I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.
I WAIVE MY RIGHT TO AN ESTIMATE.
PARTS REMOVED WILL BE DISCARDED UNLESS SPECIFIED OTHERWISE. I SAVE

SIGNATURE REQUIRED FOR REPAIRS TO BE DONE.

PLEASE SIGN X DATE

ESTIMATE \$ ADDITIONAL AMOUNT \$

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

PHONE IN PERSON DATE TIME

ADDITIONAL REPAIRS OK'D BY SW

ALL PARTS INSTALLED ARE NEW UNLESS OTHERWISE SPECIFIED.

886 480 3630



174 N. DuPont Hwy.
New Castle, DE 19720
Phone (302) 322-2438
1-800-486-8227



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1-800-969-3325



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0401PNCB388809

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PLATINUM
PLUS

CUSTOMER NO. 105086	ADVISOR JEFF DUGAN	TAG NO. 445	INVOICE DATE 10/23/08	INVOICE NO. PNCB388809
[REDACTED] SMYRNA, DE	LABOR RATE	LICENSE NO.	MILEAGE 55,976	COLOR GRAY/
	YEAR / MAKE / MODEL 06/PONTIAC/G6/4 DOOR SEDAN			DELIVERY DATE
	VEHICLE I.D. NO. 1 G 2 Z G 5 5 8 5 6 4			SELLING DEALER NO.
	F. T. E. NO. Y			R. O. DATE 10/03/08
RESIDENCE PHONE [REDACTED]	COMMENTS			

JOB# 1 CHARGES

LABOR					
J# 1 50PNZ	BODY REPAIR	TECH(S):112		WARRANTY	
	RIGHT 1/4 PANEL RT FR DOOR				
	DAMAGED HIT POLE				
	REPAIRED BODY DAMAGE AS PER ESTIMATE				

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	
	1	15863165	SHIELD 12.944		WARRANTY
	20	10121502	RETAINER- 8.950		WARRANTY
	1	89047657	BUMPER 12.945		WARRANTY
	1	89024128	MOLDING 12.114		WARRANTY
				TOTAL - PARTS	0.00

SUBLET	PO#	VEND	INV#	INV.DATE	DESCRIPTION	
	203118			10/23/08	RENTAL/PODOLIK/GM	WARRANTY
					TOTAL - SUBLET	0.00

G.O.G. & SUPPLIES					
1.0	PAINT & MATERIAL	@	/UNIT		WARRANTY
				TOTAL - GOG	0.00

JOB# 1 TOTALS

JOB# 2 CHARGES

JOB# 1 JOURNAL PREFIX PNCB	JOB# 1 TOTAL	0.00
----------------------------	--------------	------

LABOR				
J# 2 50PNZPAINT	PAINT LABOR	TECH(S):264		WARRANTY
	PAINT LABOR			
	ACCIDENT			
	REFINISH LABOR			

JOB# 2 TOTALS

JOB# 2 JOURNAL PREFIX PNCB	JOB# 2 TOTAL	0.00
----------------------------	--------------	------

ESTIMATE
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$1200.00 (+TAX)

COMMENTS
REPAIR COVERED



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0401PNCB388809

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CUSTOMER NO. 105086	ADVISOR JEFF DUGAN	TAG NO. 445 883	INVOICE DATE 10/23/08	INVOICE NO. PNCB388809
[REDACTED] SMYRNA, DE	LABOR RATE	LICENSE NO.	MILEAGE 55,976	COLOR GRAY/
	YEAR / MAKE / MODEL 06/PONTIAC/G6/4 DOOR SEDAN			DELIVERY DATE
	VEHICLE I.D. NO. 1 G 2 Z G 5 5 8 5 6 4			DELIVERY MILES
	F.T.E. NO. Y			SELLING DEALER NO.
RESIDENCE PHONE	BUSINESS PHONE	P.O. NO.	R.O. DATE 10/03/08	PRODUCTION DATE
COMMENTS				

TOTALS

MR. GOODWRENCH QUICK LUBE PLUS
10 POINT MAINTENANCE CHECK
FOR ONLY \$34.95

TOTAL LABOR... 0.00
TOTAL PARTS... 0.00
TOTAL SUBLET... 0.00
TOTAL G.O.G... 0.00
TOTAL MISC CHG... 0.00
TOTAL MISC DISC... 0.00
TOTAL TAX..... 0.00

TOTAL INVOICE \$ 0.00

ARE YOU COMPLETELY SATISFIED ???
YOUR COMPLETE SATISFACTION IS OUR OBJECTIVE
TO ENSURE YOUR COMPLETE SATISFACTION CONTACT
SERVICE MANAGER : BRETT ORTH AT 738-6161 EXT 655

PLEASE REMEMBER TO FILL OUT AND RETURN YOU GM SURVEY

TO SCHEDULE YOUR NEXT SERVICE APPOINTMENT
LOG ONTO

***** WWW.NUCARMOTORS.COM *****

CUSTOMER SIGNATURE

Thank You. We appreciate your business!

OCT 23, 2008

PARTS R/O 388809

3651

JOB#	(1)	OPERATION	50PNZ	DESC.	BODY REPAIR				
LN#	PART-NO.....	DESCRIPTION..	T	COST....	QTY	PRICE...	EXT.PRC.	CWI	GRP
1	GM15863165	SHIELD 12.944	O	23.82	1	33.35	33.35	W	
2	GM10121502	RETAINER- 8.9	O	0.28	20	0.39	7.80	W	
3	GM89047657	BUMPER 12.945	O	2.21	1	3.09	3.09	W	
4	GM89024128	MOLDING 12.11	O	52.41	1	73.37	73.37	W	

(E=ENTER) (P=PAGE) (T=TRANSFER PART) (C=CHANGE) (S=SP ORD)

OCT 23, 2008 LABOR OPERATION R/O 388809

Store 04 SERVC01 PORT 5160 3651

JOB#(1) OP/CODE 50PNZ BODY REPAIR LT/?
 LABOR(C/W/I) W JRNL PFX (C) (W) (I) VLR
 BILLING TIME 9.00 LABOR RATE 80.03 GRP
 LABOR CHARGES 720.27 NOTE
 COMPLAINT RIGHT 1/4 PANEL RT RR DOOR
 DAMAGED HIT POLE
 CAUSE
 CORRECTION REPAIRED BODY DAMAGE AS PER ESTIMATE

OTHER CHARGES	CUSTOMER	WARRANTY	INTERNAL
1. PARTS	0.00	117.61	0.00
2. SUBLET	0.00	370.00	0.00
3. G.O.G.	0.00	151.24	0.00

L#	J#	TECH	NAME	F/H	T	DATE....	START	FINSH	HOURS	ADJ...	TY	P
1	1	112	ROBERT HEAVLOW	F	W	10/06/08	0.00	14.40	14.40			
TOTAL LABOR TIME			14.40									

(C=CHANGE) (CC=CCC SCREEN) (D=DELETE) (E=ENTER) (J=JRNL PFX) (TAB)

TOTAL P.01

Page 1 of 1

ENTERPRISE LEASING COMPANY OF PHILADELPHIA, 409 E CLEVELAND AVE, NEWARK, DE 197113712 (202) 66-7777

RENTAL AGREEMENT

REF#

RENTER

DATE & TIME OUT
10/06/2008 08:16 AM
DATE & TIME IN
10/15/2008 06:00 PM

BILLING CYCLE
24-HOUR

VEH #1 2008 CHEV COBA 4DLT
VIN# 1G1AL58F9B7
LIC#
MILES DRIVEN 605

BILL TO ACCOUNT# 170392
NU CAR PONTIAC**
ATTN: UNKNOWN
NEWARK, DE

CLAIM INFO

INSURED
TYPE CAR: G6
SHOP: NU CAR PONTIAC - BODY
SHOP**
PHONE:
ATTN: UNKNOWN

SUMMARY OF CHARGES

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	10/06 - 10/15	10	DAY	\$37.00	\$370.00
REFUELING CHARGE	10/06 - 10/15				\$0.00
Adjustments				Subtotal:	\$370.00
0535 - DR REFERRAL COMMISSIONS					
Taxes & Surcharges					(\$6.97)
DELAWARE STATE RENTAL TAX	10/06 - 10/15			1.92%	\$6.97
Bill-To / Deposits				Total Charges:	\$370.00
NU CAR PONTIAC**					
TIME & DISTANCE	10/06 - 10/15	10	DAY		
DELAWARE STATE RENTAL TAX	10/06 - 10/15	1	PERCENT	1.92%	
Subtotal:					70.00
Total Amount Due					\$0.00

PAYMENT INFORMATION
AMOUNT PAID TYPE

CREDIT CARD NUMBER



11

*GM Service and Parts
Operations*

General Motors Corporation
4100 S. Saginaw Street
MC: 485-303-135
Flint, MI 48557-0001

October 14, 2008

TO WHOM IT MAY CONCERN:

.

This request pertains to Stefanie Podalak vehicle VIN # 1G2ZG558564 [REDACTED] PAR Case Number: 71-668089615.

Collision damage to said vehicle has been authorized to be repaired. PAR will make sure that Nucar Motors, Inc is paid in full for all repairs.

Thank you for your cooperation.

Very truly yours,

Mark Valverde

Product allegation

1-866-790-5600 ext 11215

PAR GMWA

Pre-Authorization/Warranty Claim Tracking Form

Customer and Vehicle Information			
Date	10/30/08	Service Request #	71-668089615
Customer Name	[REDACTED]		
VIN	1G2ZG558564 [REDACTED]		
In-Service Date	1/20/2006	Service Contract?	No
Current Mileage	55000	Purchased New/Used?	New
Warranty Blocked?	No		
Branded Title?	No	Mileage at Purchase	0
Dealer and Claim Information			
Dealer Name	Nucar Motors, Inc.		
Dealer Svc Mgr	Brett Orth	Dir Warranty Admin:	Brett Orth
Dealer Phone	(302) 738-6161	Dealer Fax	(302) 738-7833
Dealer BAC	115567		
Dealer Division and Code	16-Pont-03027		
Repair Order Number	388809		
Repair Order Close Date	10/23/08		
Labor Op. Code Z1242	Dollar Amt:	1359.12	
Labor Op. Code Z1243	Dollar Amt:		
Cause Code (CC)	MJ		
Failure Code (FC)	98		
PUT EVERYTHING IN NET AMOUNT			
Labor Hours and OLH:	DO NOT PUT IN HOURS		
Parts and Labor Costs:	DO NOT PUT IN COSTS		
Net Amount:	1359.12		
DO NOT H ROUTE THIS CLAIM			
Authorization Code:	DO NOT PUT IN AN AUTH CODE		
Additional Comments for Dealer:			
IF THIS CLAIM SHOULD REJECT FOR ANY REASON, PLEASE CONTACT ME ASAP AND FAX A COPY OF THE REJECTION W/TRACKING FORM TO ()			
Internal PAR Information			
Complaint:			
	steering failed caused accident		
Cause:			
	internal part failure		
Correction:			
	repair steering system		
Justification:			
	repair is less than 50% of value		
PAR CRS:			
	Mark Valverde		
Additional Comments:			

PAR GMWA

Pre-Authorization/Warranty Claim Tracking Form

Customer and Vehicle Information			
Date	10/30/08	Service Request #	71-668089615
Customer Name	[REDACTED]		
VIN	1G2ZG558564 [REDACTED]		
In-Service Date	1/20/2006	Service Contract?	No
Current Mileage	55000	Purchased New/Used?	New
Warranty Blocked?	No		
Branded Title?	No	Mileage at Purchase	0
Dealer and Claim Information			
Dealer Name	Nucar Motors, Inc.		
Dealer Svc Mgr	Brett Orth	Dlr Warranty Admin:	Brett Orth
Dealer Phone	(302) 738-6161	Dealer Fax	(302) 738-7833
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Labor Op. Code Z1243	Dollar Amt:		
Cause Code (CC)	MJ		
Failure Code (FC)	98		
PUT EVERYTHING IN NET AMOUNT			
Labor Hours and OLH:	DO NOT PUT IN HOURS		
Parts and Labor Costs:	DO NOT PUT IN COSTS		
Net Amount:	1359.12		
DO NOT H ROUTE THIS CLAIM			
Authorization Code:	DO NOT PUT IN AN AUTH CODE		
Additional Comments for Dealer:			
IF THIS CLAIM SHOULD REJECT FOR ANY REASON, PLEASE CONTACT ME ASAP			
AND FAX A COPY OF THE REJECTION W/TRACKING FORM TO ()			
Retain Copy with Dealer Repair Order			
Internal PAR Information			
Complaint:			
	steering failed caused accident		
Cause:			
	internal part failure		
Correction:			
	repair steering system		
Justification:			
	repair is less than 50% of value		
PAR CRS:			
	Mark Valverde		
Additional Comments:			

NUCAR MOTORS INC

**BUICK-PONTIAC-GMC
SERVICE DEPT**

250 E. Cleveland Ave
Newark, DE 19711
302-738-6161 Fax 302-731-1828

TO: Mark

FROM: Brett Orth

NUMBER OF PAGES INCLUDING COVER: 4

MESSAGE: Here is the Part Prices along

With Rental Bill & Labor

Thanks

Brett



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1-800-486-8227



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CUSTOMER NO. 105086	ADVISOR JEFF DUGAN	TAG NO. 445 883	INVOICE DATE 10/23/08	INVOICE NO. PNCB388809
SMYRNA, DE	LABOR RATE	LICENSE NO.	MILEAGE 55,976	COLOR GRAY/
	YEAR / MAKE / MODEL 06/PONTIAC/G6/4 DOOR SEDAN			DELIVERY DATE
	VEHICLE I.D. NO. 1 G 2 Z G 5 5 8 5 6 4			DELIVERY MILES
	F. T. E. NO. Y			SELLING DEALER NO.
RESIDENCE PHONE	COMMENTS		R. O. DATE 10/03/08	PRODUCTION DATE

JOB# 1 CHARGES

LABOR
J# 1 50PNZ BODY REPAIR TECH(S):112 WARRANTY
RIGHT 1/4 PANEL RT RR DOOR
DAMAGED HIT POLE
REPAIRED BODY DAMAGE AS PER ESTIMATE

PARTS	QTY	FP	NUMBER	DESCRIPTION	UNIT PRICE
	1		15863165	SHIELD 12.944	
	20		10121502	RETAINER- 8.950	
	1		89047657	BUMPER 12.945	
	1		89024128	MOLDING 12.114	
TOTAL - PARTS					

WARRANTY 33.35
WARRANTY 7.80
WARRANTY 3.09
WARRANTY 73.37
0.00

SUBLET PO# 203118 VEND INV# 10/23/08 INV. DATE DESCRIPTION RENTAL/PODOLIK/GM
TOTAL - SUBLET

WARRANTY 0.00 370.00

G.O.G. & SUPPLIES
1.0 PAINT & MATERIAL @ /UNIT
TOTAL - GOG

WARRANTY 0.00 151.24

JOB# 1 TOTALS

JOB# 1 JOURNAL PREFIX PNCB JOB# 1 TOTAL 0.00

JOB# 2 CHARGES

LABOR
J# 2 50PNZ PAINT PAINT LABOR TECH(S):264 WARRANTY
PAINT LABOR
ACCIDENT
REFINISH LABOR

9.0 Hrs x 80.00 = 720.00

JOB# 2 TOTALS

JOB# 2 JOURNAL PREFIX PNCB JOB# 2 TOTAL 0.00

ESTIMATE
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$1200.00 (+TAX)

COMMENTS
REPAIR COVERED

Thank You. We appreciate your business!



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CUSTOMER NO. 105086	ADVISOR JEFF DUGAN	TAG NO. 445 883	INVOICE DATE 10/23/08	INVOICE NO. PNCB388809
[REDACTED] SMYRNA, DE	LABOR RATE	LICENSE NO.	MILEAGE 55,976	COLOR GRAY/
	YEAR / MAKE / MODEL 06/PONTIAC/G6/4 DOOR SEDAN			DELIVERY DATE
	VEHICLE I.D. NO. 1 G 2 Z G 5 5 8 5 6 4			DELIVERY MILES
	F.T.E. NO. Y			SELLING DEALER NO.
RESIDENCE PHONE	BUSINESS PHONE	P.O. NO.	R.O. DATE 10/03/08	PRODUCTION DATE
COMMENTS				

TOTALS

MR. GOODWRENCH QUICK LUBE PLUS
10 POINT MAINTENANCE CHECK
FOR ONLY \$34.95

TOTAL LABOR.... 0.00
TOTAL PARTS.... 0.00
TOTAL SUBLET... 0.00
TOTAL G.O.G.... 0.00
TOTAL MISC CHG. 0.00
TOTAL MISC DISC 0.00
TOTAL TAX..... 0.00

TOTAL INVOICE \$ 0.00

ARE YOU COMPLETELY SATISFIED ???
YOUR COMPLETE SATISFACTION IS OUR OBJECTIVE
TO ENSURE YOUR COMPLETE SATISFACTION CONTACT
SERVICE MANAGER : BRETT ORTH AT 738-6161 EXT 655

PLEASE REMEMBER TO FILL OUT AND RETURN YOU GM SURVEY

TO SCHEDULE YOUR NEXT SERVICE APPOINTMENT
LOG ONTO

***** WWW.NUCARMOTORS.COM *****

CUSTOMER SIGNATURE

Thank You. We appreciate your business!

SERVICE FILE COPY

[END OF INVOICE] 11:31am

TOTAL P.01

Page 1 of 1

ENTERPRISE LEASING COMPANY OF PHILADELPHIA, 409 E CLEVELAND AVE, NEWARK, DE 197113712 (302) 66-7777

RENTAL AGREEMENT
908140

REF#

RENTER

DATE & TIME OUT
10/06/2008 08:16 AM
DATE & TIME IN
10/15/2008 05:00 PM

BILLING CYCLE
24-HOUR

VEH #1 2008 CHEV COBA 4DLT
VIN# 1G1AL58F987
LIC#
MILES DRIVEN 605

BILL TO ACCOUNT# 170392
NU CAR PONTIAC**
ATTN: UNKNOWN
NEWARK, DE

CLAIM INFO

INSURED
TYPE CAR: G6
SHOP: NU CAR PONTIAC - BODY
SHOP**
PHONE:
ATTN: UNKNOWN

SUMMARY OF CHARGES

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	10/06 - 10/15	10	DAY	\$37.00	\$370.00
REFUELING CHARGE	10/06 - 10/15				\$0.00
Subtotal:					\$370.00
Adjustments					
0535 - DR REFERRAL COMMISSIONS					(\$6.97)
Taxes & Surcharges					
DELAWARE STATE RENTAL TAX	10/06 - 10/15			1.92%	\$6.97
Total Charges:					\$370.00
Bill-To / Deposits					
NU CAR PONTIAC**					
TIME & DISTANCE	10/06 - 10/15	10	DAY		
DELAWARE STATE RENTAL TAX	10/06 - 10/15	1	PERCENT	1.92%	
Subtotal:					\$0.00
Total Amount Due					\$0.00

PAYMENT INFORMATION
AMOUNT PAID TYPE

CREDIT CARD NUMBER

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

Issued by:

Saturn

Certificate No. 1G8AJ52F75Z [REDACTED]

Issue Date: April 5, 2011

Issued exclusively for:

[REDACTED]
Cape Coral, FL [REDACTED]

Valid through: October 23, 2009

Amount: Five Hundred Dollars and Zero Cents
******\$500.00******

April 5, 2011

[REDACTED]
Cape Coral, FL [REDACTED]

Service Request: 71-668609622

Dear [REDACTED]

Thank you for your recent inquiry. We are sorry you have experienced concerns with your vehicle. Customer satisfaction is a top priority for us.

Enclosed is the Owner Loyalty Certificate valid towards the purchase, SmartLease or SmartBuy of a new, unused General Motors vehicle. With such a wide selection of vehicles to choose from (Buick, Cadillac, Chevrolet, GMC, HUMMER, Pontiac, Saab, Saturn), we are sure you will find a vehicle that's right for you.

To ensure that you have the opportunity to obtain the best value possible, this certificate may be used in addition to any other retail purchase incentive programs available at the time you purchase your new vehicle. We hope you will take advantage of this special incentive offer. Simply present the certificate to your dealer after you have negotiated your best deal, sign the certificate and your dealer will complete the necessary information and process it for you.

We are proud you made Saturn your choice when you purchased your 2005 ION 2 and trust you will give us the opportunity to retain you as a valued Saturn customer. Should you have any questions regarding General Motors' products and current incentives, please call our Marketing Support department at **1-800-553-6000**. You may also begin your vehicle shopping online by visiting gm.com or any of our divisional websites.

Sincerely,

Saturn Business Resource Center

BBB AUTO LINE
Customer Claim Form

Case number: SAT0850437
Contact Date: 10/05/08
Start Date: 10/09/08

Please make any necessary corrections to the information below, print 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: [REDACTED]			
Mailing address: [REDACTED]			
City: Cape Coral	State: FL	Zip code: [REDACTED]	
Day phone: [REDACTED]	Evening phone: [REDACTED]	Cell phone: [REDACTED]	
Fax: [REDACTED]	E-mail address: [REDACTED]		

SECTION 2: VEHICLE INFORMATION

Make: Saturn	Model: Ion2	Year: 2005	Current mileage: 48700
Name(s) that appears on the vehicle title: [REDACTED]			
Selling dealer/city/state: B.Z. Motors, Lewisburg, PA			
Primary Servicing dealer/city/state: B.Z. Motors,			
Acquired as <input type="checkbox"/> new <input checked="" type="checkbox"/> used <input type="checkbox"/> demo <input type="checkbox"/> leased		Is the vehicle in your possession? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	
Purchase/lease date: 01/27/07		Mileage at purchase/lease:	
First repair attempt date: 01/29/07		First repair attempt mileage: 11500	
How often is the vehicle used for business purposes (percentage): 0 %		Number of vehicles owned or leased by the business:	Transmission type: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual
Has the vehicle been in an accident/had body damage? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no			Date of accident:
Description of damage:			

SECTION 3: DESIRED OUTCOME (Describe what you want done to resolve your concern)

I would like the car replaced at equal value or trade in.

Please complete the missing information in the box below and on page 2.

VEHICLE IDENTIFICATION NUMBER 1G8AJ52F75Z [REDACTED]

Lienholder/Leasing Company _____ **Phone Number** _____

Account Number _____

SECTION 4: VEHICLE PROBLEMS (List primary problem first)

Case Number: SAT0850437

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
loss power steering engine light and car stalling		3		yes

Total days out of service for all problems: _____

Signature of Titled Owner(s) _____ Date _____
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 copies 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: Lisa Bernarduci

State: FL

Customer Name: [REDACTED]

Service Request: 71-
668609622

BBB Case No.: SAT0850437

Vehicle ID No.:
1G8AJ52F75Z [REDACTED]

In Service
Date:
6/7/2005

Vehicle is: USED

BAC Code:

Vehicle
purchased in PA

Year, Make & Model: 2005 Saturn Ion 2

Mileage at Time of BBB Filing 48,700

Lien holder: GMAC ☐ Other ☐: unknown

Vehicle Purchased Used on: 1/27/07 at odometer
11,000

Sale Type: Purchase ☒ Lease ☐ Other ☐:
{Type}

DVM Name: No DVM Saturn case DSSM

Phone/Cell Number:

Svc Mgr Name:

CAM Name: Aubrey Washington

Phone Number: 678-240-9832

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.

HAS TAC BEEN CONTACTED FOR SERVICE HISTORY Y OR N. IF **YES** PLEASE INCLUDE TAC
AND EXPLANATION TAC WAS INVOLVED. IF TAC HAS

IF TAC **HAS NOT BEEN** CONTACTED WHY
NOT _____

☐

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

☐

<u>Date:</u>	<u>RO #:</u>	<u>Days</u> <u>Out:</u>	<u>Mileag</u> <u>e:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ Recall/Campaign (Not Related to Other Symptoms/Complaints)

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

Has the vehicle ever been involved in a accident Y

Did you confirm your answer with the customer Y

What type of damage was sustained (example front end collision)

Cust sts that is just knocked off the
headlight.

Are the RO's attached if the vehicle was in an accident N

Cust it was done through Safe Auto

Have you file to collect any insurance claims with this vehicle Y

What were the dates

What was the reason you filed

Are there any Aftermarket Modifications to the Vehicle N

Have you confirm this with the customer Y

List:

Was a Trade Repurchase offered to the customer Y or N

(A Trade Repurchase is to be offered as a settlement before a Straight can be
considered)

Date authorized by the DVM/CAM _____

☐ Other

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

What is the customer eligible for based upon the BBB Program Eligibility Guidelines and the
States lemon law requirements for meeting presumption? Explain with some Detail

GM Program Summary Repurchase/Replacement:

Lemon Law Repurchase/Replacement:

GM Program Summary Repairs/Reimbursement for past repairs:

THE STATE LEMON LAW READS:

Days out of service: 30

Repairs 3 + FRA

Time period 26

Does Lemon Law state nonconformity must continue to exist? yes

If applicable, safety-related repairs N/A

Safety-related time period N/A

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: 71-668609622 CAC file opened and assumed by CRS for BBB file

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 sts: I would like the car replaced at equal value or trade in. Cust this has been an ongoing issue to get my car fixed. The power steering has been going out. The Saturn corporation will not do anything after the vehicle loosing power. He was told that they are not able to pin point the problem on this. He states that they have put over 30,000 dollars in repairs on this vehicle.

Cust sts I have been told by several dealers not to bring the vehicle back

DVM sts:

SVM sts:

CRS Rationale: Customer is over the time period for filing. In service date is 6/7/2005. Customer has 26 months to file. Customer would have had until 8/7/2007 to file.

What are the 3 main strengths of the customer's case to win repurchase through Lemon Law

What are the 3 mains weaknesses of the customer's case to win repurchase through Lemon Law

Decision reached by CRS: Arbitrate case: ☐ Settle case: ☐

Privileged and Confidential Information

CASE ASSESSMENT

By: Patricia Alarcon

State: FL

Customer Name: [REDACTED]

Service Request: 71-
668609622

BBB Case No.:
SAT0850437

Vehicle ID No.:
1G8AJ52F75Z [REDACTED]

In Service
Date:
6/7/2005

Vehicle is: Used

BAC Code:
{Selling
Dealer}

Year, Make & Model: 2005 Saturn ION 2
Mileage at Time of BBB Filing **48,000**

Vehicle Purchased Used on: 1/27/07 at
odometer 11,500

Lien holder: ☐ Other ☐: Unknown

Sale Type: Purchase ☒ Lease ☐ Other ☐
: {Type}

DVM Name: No DVM DSSM

CAM Name: Aubrey Washington

Phone/Cell Number: n/a

Phone Number: 678-260-9832

Svc Mgr Name:

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.

HAS TAC BEEN CONTACTED FOR SERVICE HISTORY Y. IF **YES** PLEASE INCLUDE TAC # AND EXPLANATION TAC WAS INVOLVED. IF TAC HAS TAC told to ck voltage 6 to ground shorted – 14 to ground shorted 2-2.5 volts replaced BCM.

IF TAC **HAS NOT BEEN** CONTACTED WHY?

NOT _____

☐ **Steering**

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
11/19/07	155789	2	35639	CS power steering inop & power steering showing on odometer display. OBD system chk – no communication to the EPSCM w/either of our scanners. Ck'd fuse for Power steering. Ck'd power supply conn @ P/ST assembly. Found EPSCM FAILED. Replaced electronic P/ST assembly & performed align to level steering wheel toe set.
11/21/07	155823	12	35648	CS power steering inop warning light on. Tech found power supply connector popped loose @ EPSCM secured connector.
11/21/07	155823	*	35648	CS SES light on. Called TAC told to ck voltage 6 to ground shorted – 14 to ground shorted 2-2.5 volts replaced BCM.

CS engine seems to miss at times on one, two shift & trans seems slow to shift in drive. **Tech found pin in**

the TCM damaged. Replace TCM & programmed.

12/6/07	156143	1	35675	CS engine seems to miss at times on one, two shift & trans seems slow to shift in drive. Tech found pin #5 in TCM backed 3/16" into the TCM. Road tested veh late shift into 3rd/4th. Slight miss @ idle. OBD system chk P-0300. Ck'd misfire history cylinder 2 high. Ck'd misfire graphic cyl 2 building slowly (mild) Performed crank variation learn insp inj harness & ing coil module & sparkplugs – all have no obvious faults – switched plug #2 w/ #3 miss stayed in cylinder #2. TSB search doc#1817949 & 1986740 related recall the PCM per doc#1817949. Road tested & eval fully warm up (190) – Intermittent miss @ idle gone still has late 3rd gear & no 4th now. Inspect trans data w/tech II no 4th gear trans adaptive all other data appeared correct TCM approx 3/16". Pulled pin back out to its correct position. Road tested veh approx 12 miles (this trip) – shift patterns correct – trans function now per design at this time. Total road testing 32 miles. Q/C by #417 there were no trans codes present ever. All doc's & reference materials used are attached.
12/18/07	156419	4	36520	CS veh starting chugging & stalled. Tech found code P0117. Replaced ECM & program also cleaned connector.

☐ Engine

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/10/07	154903	2	33849	CS SES light is on. Tech found a connector & 2 wires hanging in the cooling fan – knock sensor harness became unpinned & got into the fan – connector was cut off. Replace the knock sensor & secured the harness. CS heard noise in engine when driving. Found connector & 2 wires hanging in cooling fan. See above repair.
11/5/07	155456	1	35164	CS veh idling high surges at stops & has no power on accell. Tech found code P0300 – misfire. Cleared code. Code did not reset. Operating as designed at this time. CS veh cranks & won't start after stalling. See above repair. CS smoke coming from connectors on PCM in front of underhood fuse box & fan staying on after attempting to start for a few min's. See above repair.
4/16/08	159561	*	40525	CS oil leak. Tech found seal at oil filter cartridge cap leaking. Replaced cap to correct. CS veh stalls. Tech ck'd for codes found none present. Veh was low on fuel, added gas & test

drove approx 50 miles. Veh did not stall or run bad. Everything operated as designed.

Has the vehicle ever been involved in a accident: Y

Did you confirm your answer with the customer: Y

What type of damage was sustained (example front end collision)

Front end fender bender. It just knocked off the headlight.

Are the RO's attached if the vehicle was in an accident: Y or N

Questions regarding Insurance Claims

Insurance Company: Safe Auto

Insurance Rep(First and Last Name) _____

Phone # _____

Claim Made? Y Claim Status: No

Claim # _____

Did Insurance Company refer customer to GM? N

Are there any Aftermarket Modifications to the Vehicle: N

Have you confirm this with the customer Y or N

List:

Was a Trade Repurchase offered to the customer N

(A Trade Repurchase is to be offered as a settlement before a Straight can be considered)

Date authorized by the DVM/CAM _____

☐ Other: Electrical

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
6/6/07	152477	1	27700	CS R/F turn signal out. Tech found bulb had shorted. Bulb replaced.
8/3/07	153585	1	31214	CS high mount brake bulb out. Found bulb burnt out. Replaced high mount stop bulb.
10/10/07	154903	*	33849	CS headlamp on drivers' side missing retaining rods since replaced. Tech installed new retaining pins for the left headlamp.
10/22/07	155146	1	34282	CS L/R brake light is out. Tech found bulb burnt out. Replaced L/R brake bulb.
4/16/08	159561	*	40525	CS hazard button inop. Tech found connector loose at flasher ASM. Reconnect to correct. No charge.

☐ **Other: HVAC**

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
6/13/07	152621	2	28353	CS water leaking in on PASS floor from AC. Tech found water entering from drain tube opening from AC evap drain hole. Installed auxiliary drain tube w/90 angle. Removed carpet to dry & cleaned water from PASS side foot well area bulletin #03-01-39-011B.
2/27/08	158400	1	38779	CS A/C blower level won't adjust. Ordered new AC control head & cable.
3/27/08	159140	2	39371	CS parts are in. Please install. AC mode selection is inop. Tech verified concern. Found bent cable in evap. Housing repaired mode selection. Replace cable to correct.

☐ **Other: Transmission**

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
8/3/07	153585	*	31214	CS trans delays on accell before shifting. Ckd for codes none present. Test drove, veh shifting. Operation normal at this time. Could not verify concern.
11/19/07	155789	*	35639	Cust called back in to state veh int jerks when shifting gears. Could not dup cust's concern at this time.
4/16/08	159561	5	40525	CS veh is jerking between shifts. Tech test drove veh shifted normal. No DTC's present. Let sit overnight test drove again. Normal. NPF.
4/23/08	300675	3	40604	CS veh shifts hard when driving & makes rattle noise from under veh when changing from drive to reverse to park. Test drove veh for 175 miles after veh dropped off w/no occurrence of concern, owner wants documented on first test drove w/tech when owner arrived at dlrshp tech noted harsh up shift, concern not dup again, adv owner not to return to Saturn dlrshp in Naples. Ft. Myers or Cape Coral for service or repair.

☐ **Other: Brakes**

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
10/22/07	155146	*	34282	CS brake pedal feels spongy. Tech found air in hydraulic system. Road test - inspect brake system – Bleed hydraulic system.
2/27/08	158400	*	38779	CS pulsation felt when braking. Replaced front brake pads & resurfaced rotors.

☐ **Other: Wheels/Tires**

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
8/23/07	153950	*	32060	CS L/F tire went flat when driving. No leaks found at this time. Dismounted tire & replaced valve stem. Reinstalled on veh & installed spare & jack in trunk.
11/19/07	155789	*	35639	CS R/F tire went flat. Tech aired up tire chk'd for leaks no leaks were found. Tire held 40 lbs over night. Correct PSI.

☐ **Other: Body/Trim**

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
6/21/07	152786	1	28699	CS R/F headlamp filling w/water during heavy rains (obstructing lighting). Tech found housing seam broken. Replaced R/F headlamp assembly.
7/10/07	153102	1	30185	CS PASS lock on dash came on. Tech found PASS lock signal valid but incorrect. Replaced the ignition switch & learn the PASS lock.
7/11/07	153122	4	30239	CS PASS lock came on & veh stalled at red light. Tech road tested the veh on separate occasions & could not dup the owner concern at this time. There are no bulletins or PI's that relate to this condition.
7/19/07	153314	1	30500	CS L/F headlamp holding moisture restricting light from shining through. Tech found moisture getting in through seal of headlamp. Replaced L/F headlamp assembly.
11/5/07	155456	*	35164	CS key won't unlock PASS door. Tech lubricated PASS door cylinder. Test OK.
4/16/08	159561	*	40525	CS key comes out of ign when running. Tech verified concern found lock cyl worn, coded new cyl & reassembled. Test ok at this time.

☐ **Other: Maintenance**

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
6/13/07	152621	*	28353	27,000 REC Maintenance
8/3/07	153585	*	31214	33,000 REC Maintenance
10/22/07	155146	*	34282	33,000 REC Maintenance
2/27/08	158400	*	38779	LOF

What is the customer eligible for based upon the BBB Program Eligibility Guidelines and the States lemon law requirements for meeting presumption? Explain with some Detail

GM Program Summary Repurchase/Replacement: Customer does not meet the BBB program nor the FL LL since vehicle was purchased in PA and not FL. BBB closed out claim as of 10/21/08.

Lemon Law Repurchase/Replacement: Customer does not meet the BBB program nor the FL LL since vehicle was purchased in PA and not FL. BBB closed out claim as of 10/21/08.

GM Program Summary Repairs/Reimbursement for past repairs: Customer does not meet the BBB program nor the FL LL since vehicle was purchased in PA and not FL. BBB closed out claim as of 10/21/08.

THE STATE LEMON LAW READS:

Days out of service: 30 days or more for one or more non-conformities

Repairs 3 Repairs + FRA

Time period 24 months after original delivery of vehicle. Unlimited mlg.

Does Lemon Law state nonconformity must continue to exist? Y

If applicable, safety-related repairs N/A

Safety-related time period N/A / N/A

Number of repair attempts in the presumption period:	5
Total days out of service during the presumption period:	45
Total days out of service during customer's ownership:	45

Vehicle Meets Presumption of Lemon Law	NO
<u>Customer does not meet the BBB program nor the FL LL since vehicle was purchased in PA and not FL. BBB closed out claim as of 10/21/08.</u>	

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 sts: He would like the car replaced at equal value or trade in

DVM sts:

SVM sts:

CRS Rationale: Customer does not meet the BBB program nor the FL LL since vehicle was purchased in PA and not FL. BBB closed out claim as of 10/21/08.

CRS going to offer the customer an OLC from \$500 to \$1,000.

Customer has accepted the offer of OLC in the amount of \$500. After CRS processed OLC and then contacted customer to let him know that it was approved. Customer requested to speak with manager because he didn't want the OLC on a new GM vehicle. He wanted it on a used GM vehicle. CRS explained that was not possible and TL did as well. Customer then declined the offer of the OLC. Letter was already sent at that time.

What are the 3 main strengths of the customer's case to win repurchase through Lemon Law

Customer is not eligible to pursue LL due to not purchasing the vehicle in FL

Days out of service

Number of repair attempts

What are the 3 mains weaknesses of the customer's case to win repurchase through Lemon Law

Not eligible for LL. Did not purchase the vehicle in FL.

Decision reached by CRS:

Arbitrate case:

☐

Settle case:

☒



October 10, 2008

Mr. Rob Hunt, Service Manager
SATURN OF CAPE CORAL
404 NE PINE ISLAND ROAD
CAPE CORAL FL 33909-2549
FAX # 239-242-7001

Re:

Siebel Request: 71-668609622
2005 Saturn ION 2
VIN # 1G8AJ52F75Z

Dear Mr. Hunt:

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 within 24 hours. 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,

Lisa Bernarduci
BRC Customer Relationship Specialist
Ph# 866-790-5700 EXT 41020
FAX# 866-263-6942

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

April 5, 2011

[REDACTED]
Gadsden, AL [REDACTED]

Service Request: 71-669555932

Dear [REDACTED]

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

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 performance. There are times when we identify a motor vehicle defect and release a recall or special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement 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 \$651.31.

If your vehicle has not been inspected by your local GM dealership, we request you set up an appointment to insure all necessary steps have been taken to repair your vehicle.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at www.Chevrolet.com or call us at 1-800-222-1020.

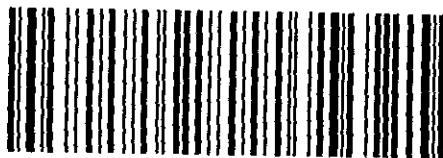
Sincerely,

Chevrolet Customer Assistance Center

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

Gadsden AL

CERTIFIED MAIL™



7008 1140 0004 0676 1470

OCT 06 2008

Reimbursement Department
PO Box 33170
Detroit, MI 48232-5170

RETURN RECEIPT
REQUESTED

8050



USA 42

UNITED STATES
POSTAL SERVICE

0000

48232

U.S. POSTAGE
PAID
GADSDEN, AL
35901
SEP 30, 08

AMOUNT
\$50.00

0009975315

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 9-29-0817-Digit Vehicle Identification Number (VIN): 1G1ZT62815FMileage at Time of Repair: 50952 Date of Repair: 9-3-08

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: Gadsden State: Al ZIP Code: [REDACTED]

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

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

Amount of Reimbursement Requested: \$ 651.31

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.

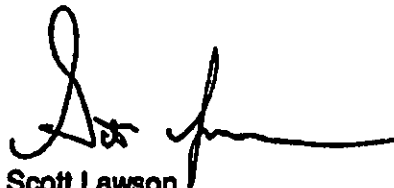
Claimant's Signature: [REDACTED]

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

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
07128

[REDACTED]
Chevrolet
P.O. Box 909989
Milwaukee, WI 53209-9989



07126 1G1ZT62815F [REDACTED] 13 0008068

GADSDEN, AL [REDACTED]



December 2007

Gadsden, AL

Dear

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.

Do not take your vehicle to your Chevrolet 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 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 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 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).



100 Renaissance Center, P.O. Box 100, Detroit, MI 48265-1000

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



SERVING YOU SINCE 1955

PIERSON

413 East Meighan Blvd.

P.O. Box 589

GADSDEN, AL 35902-0589

Phone: (256) 546-3391

Fax: (256) 546-4035



SERVING YOU SINCE 1955

CELL: [REDACTED]

CUSTOMER NO 38461	ADVISOR DONALD	TAG NO 3426	INVOICE DATE 07/09/08	INVOICE NO. CVCS171536
[REDACTED]	LABOR RATE [REDACTED]	SALE PRICE 50,860	COLOR GREY/	STOCK NO
GADSDEN, AL [REDACTED]	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4 DOOR HATCHBACK	DELIVERY DATE 07/24/04	DELIVERY USES	PRODUCTION DATE
	VEHICLE ID NO 1G1ZT62815F	SELLING DEALER NO		
	P.T.E. NO	P.O. NO	R.O. DATE 07/08/08	
RESIDENCE PHONE	BUSINESS PHONE	COMMENTS		

LABOR...
J# 1 19CVZ STEERING REPAIR HOURS: 1.00 TECH(S):24 65.00
CHK KNOCKING IN STEERING WHEN TURN WHEEL. 1 TIME STEERING
WOULD NOT TURN. CUSTOMER SHUT OF VEHICLE AND RESTARTED THEN
WHEELS WOULD TURN. ADVISE
SCAN TEST USING TECH 2 C0545 SET. PERFORM DIAG FOR SET CODE
TORQUE SENSOR IN COLUMN FAULTY NEEDS STEERING COLUMN.
CUSTOMER DECLINED REPAIR AT THIS TIME WILL BRING BACK

TOTAL - LABOR 65.00

TOTALS

PIERSONS
APPRECIATES YOUR BUSINESS
IF YOU HAVE ANY QUESTIONS OR COMMENTS
CALL YOUR SERVICE CONSULTANT AT 546-3391

PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED
LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY
REPAIRS.

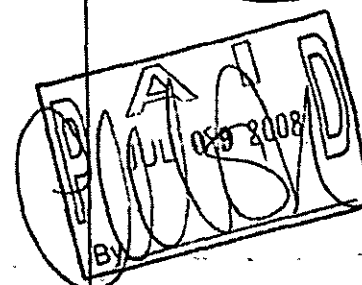
TOTAL LABOR.... 65.00
TOTAL PARTS.... 0.00
TOTAL SUBLET... 0.00
TOTAL G.O.G.... 0.00
TOTAL MISC CHG. 0.00
TOTAL MISC DISC 0.00
TOTAL TAX..... 0.00

TOTAL INVOICE \$ 65.00

CASH () CHECK () CREDIT CARD () CHARGE () CORPORATE

CUSTOMER SIGNATURE

COPY



PIERSON
CHEVROLET BUICK CADILLAC
GADSDEN, AL
35902-0589
PHONE: (256) 546-3391
FAX: (256) 546-4035



CHEVROLET



SERVING YOU SINCE 1955

PIERSON

413 East Meighan Blvd.

P.O. Box 589

GADSDEN, AL 35902-0589

Phone: (256) 546-3391

Fax: (256) 546-4035



SERVING YOU SINCE 1955

CELL: [REDACTED]

CUSTOMER NO 38461	ADVISOR DONALD	TAG NO 3426 394	INVOICE DATE 09/03/08	INVOICE NO. CVCS172938
[REDACTED]	LABOR RATE [REDACTED]	MILEAGE 50,952	COLOR GREY/	STOCK NO
GADSDEN, AL	YEAR/MAKE/MODEL 05/CHEVROLET/MALIBU/4 DOOR HATCHBACK	DELIVERY DATE 07/24/04	DELIVERY MILES	
	VEHICLE ID NO 1 G 1 Z T 6 2 8 1 5 F	SELLING DEALER NO	PRODUCTION DATE	
	F.T.E. NO	P.O. NO	H.U. DATE 09/02/08	
REFERENCE PHONE	BUSINESS PHONE	COMMENTS		

LABOR
J# 1 19CVZ STEERING REPAIR HOURS: 3.00 TECH(S):24 195.00
REPLACE STEERING COLUMN AT CUSTOMER REQUEST. SEE PREVIOUS
RO# 171536 ATTACHED.
PERFORM DIAG ON PREVIOUS RO. HAD CODE C0545 SET. REPLACE
STEERING COLUMN ASSEMBLY TRANSFER PARTS. CLEAR CODES &
CALIBRATE SENSOR USING TECH 2

TOTAL - LABOR 195.00

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	
JOB # 1	1	15926870	COLUMN 6.518	359.00	359.00
TOTAL - PARTS					359.00

TOTALS

PIERSONS
APPRECIATES YOUR BUSINESS
IF YOU HAVE ANY QUESTIONS OR COMMENTS
CALL YOUR SERVICE CONSULTANT AT 546-3391

PARTS DESIGNATED WITH AN ASTERISK (*) INDICATE LIMITED
LIFETIME SERVICE GUARANTEE APPLIES FOR CUSTOMER PAY
REPAIRS.

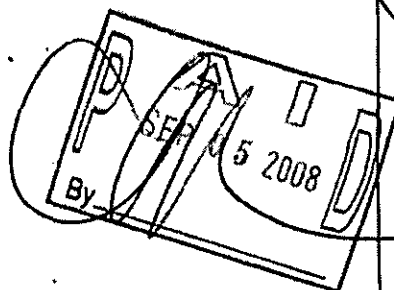
TOTAL LABOR...	195.00
TOTAL PARTS...	359.00
TOTAL SUBLET...	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	0.00
TOTAL MISC DISC	0.00
TOTAL TAX.....	32.31

TOTAL INVOICE \$ 586.31

CASH () CHECK () CREDIT CARD () CHARGE () CORPORATE

CUSTOMER SIGNATURE

COPY



North American OperationsGeneral Motors Corporation
Disbursements (2613)
PO Box 62530
Phoenix, AZ 85082-2530**GM**

CHECK

No. [REDACTED]

50-937
213DATE
10/16/08

*****651 DOLLARS

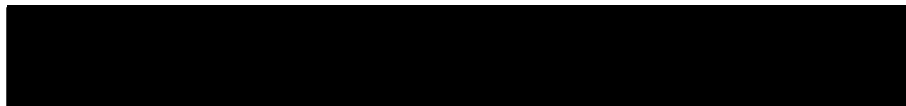
***31 CENTS

AMOUNT
*****651.31PAY
TO THE
ORDER
OF

GADSDEN AL [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account
SIGNATUREThe 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. 88 000000020

1

CHECK NO. [REDACTED]

VENDOR NAME [REDACTED]

PAYMENT
DATE 10/16/08

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
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1G1ZT62815F [REDACTED]	10/15/08 71-669555932.1	VH 1-B3PHXY 1-B3PHXY	00.0000	651.31	.00	651.31
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ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR
REIMBURSEMENT OR QUESTIONS CALL 800-462-8782

H3

TOTAL

651.31

.00

651.31



CHEVROLET

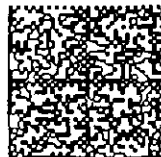
Customer Assistance Center

Chevrolet Division

General Motors Corporation

P.O. Box 33170

Detroit, MI 48232-5170



02 1P

\$ 000.420

0004403614 OCT 17 2008

MAILED FROM ZIP CODE 48146

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

NIXIE 276 DE 1 00 11/04/08

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 48232517070 *2153-09347-20-33



48232@5170
27634+8820



Customer Assistance Center

Chevrolet Division
General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

October 17, 2008

**CUSTOMER DID NOT RECEIVE
THIS LETTER FROM GMC**

[REDACTED]
[REDACTED]
Goldsboro, NC [REDACTED]

Service Request: 71-670965096
Customer-Relationship Specialist: Matt Robinson

Dear [REDACTED]:

Enclosed is the GM Product Special Coverage Customer Reimbursement Claim Form. Please complete the form in its entirety and return it to the address listed on the bottom of the form. We will be happy to review your request for reimbursement on the loss of power steering assist that you had repaired once we have received this completed form.

If you have any future questions, please feel free to contact our Chevrolet Customer Assistance Center at 1-800-204-0261 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 Managers will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center



CHEVROLET

Customer Assistance Center

Chevrolet Division
General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

GENERAL MOTORS
PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this special coverage condition corrected before December 2007, 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 General Motors dealer.

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

If your claim is:

- Approved, you will receive a check from General Motors,
- Denied, you will receive a letter from General Motors with the reason(s) for the denial, or
- Incomplete, you will receive a letter from General Motors 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 questions about this reimbursement procedure, please call the toll-free telephone number provided at the bottom of the form. If you need assistance with any other concern, please contact the appropriate Customer Assistance Center at the telephone number listed below:

Division	Number	Deaf, Hearing Impaired or Speech Impaired *
Buick	1-800-521-7300	1-800-832-8425
Cadillac	1-800-458-8006	1-800-833-2622
Chevrolet	1-800-222-1020	1-800-833-2438
GMC	1-800-462-8782	1-800-462-8583
Pontiac	1-800-762-2737	1-800-833-7668
Oldsmobile	1-800-442-6537	1-800-833-6537
Hummer	1-866-486-6376	
Virgin Islands	1-800-496-9994	
GMCT	1-800-862-4389	
Puerto Rico – English	1-800-496-9992	
Puerto Rico – Español	1-800-496-9993	

* Utilizes Telecommunication Devices for the Deaf/Text Telephones (TDD/TTY)



CHEVROLET

Customer Assistance Center

Chevrolet Division
General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

**GENERAL MOTORS
PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT CLAIM FORM**

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: _____

Vehicle Identification Number (VIN): _____

Mileage at Time of Repair: _____ Date of Repair: _____

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: _____ State: _____ 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 recall.

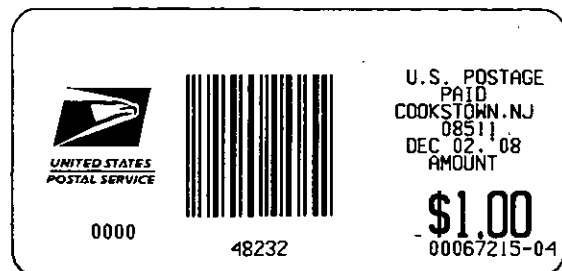
Claimant's Signature: _____

Please mail this claim form and the required documents to:

**General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170**

All recall reimbursement questions should be directed to the following number:
1-800-204-0261

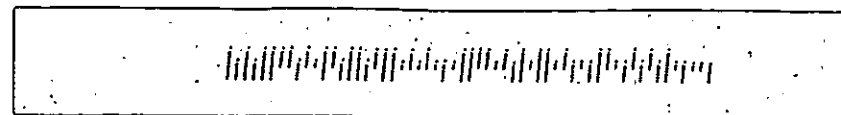
Pemberton, N.J.



FIRST CLASS

General Motors Corporation
P.O. Box 33170
Detroit, MI
48232-5170

12-10-08A11:11 RCVE





CHEVROLET

Customer Assistance Center

Chevrolet Division
General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

**GENERAL MOTORS
PRODUCT SPECIAL POLICY CUSTOMER REIMBURSEMENT CLAIM FORM**

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: Dec 1, 08

Vehicle Identification Number (VIN): 1G1Z454885F [REDACTED]

Mileage at Time of Repair:

Date of Repair:

Claimant Name (please print) [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: Pemberton State: NJ ZIP Code: [REDACTED]

Daytime Telephone Number (include Area Code) [REDACTED]

Evening Telephone Number (include Area Code) [REDACTED]

Amount of Reimbursement Requested: \$ 104.33

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 recall.

Claimant's Signature: [REDACTED]

Please mail this claim form and the required documents to:

**General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170**

All recall reimbursement questions should be directed to the following number:
1-800-204-0261

To: General Motors Customer Service representative

I drove my car into the Lucas Chevy dealership in Lumberton NJ because the steering column was making a clicking noise. The dealership then charged me for bringing the car to them saying that there was no type of warranty or coverage on the problem. I then called GM customer service and spoke with Matt Robinson who told me that it was covered and I should be reimbursed for the charge. Mr. Robinson also explained that the reason they did not see the coverage in their system (the dealership that is) was due to them having a different database than what the customer service reps use. I did have my car repaired but I have not been reimbursed. The original paperwork went to my old address which is why it has taken so long to file the claim. My case number is 71-670965096. Any questions or concerns please feel free to contact me and I also remember the call being recorded if there is any further information you may need. Thank you for your time and assistance.

Very respectfully,

A solid black rectangular box used to redact the signature of the sender.

Invoice



1622 ROUTE 38 • LUMBERTON, N.J. 08048
 PHONE (609) 267-0200 FAX (609) 267-1060
 WEBSITE: www.lucaschevroletinc.com
 E-MAIL: partscenter@lucaschevroletinc.com

COPY

CUSTOMER NO. 27515	ADVISOR DAVID PETITT SR	2166	TAG NO.	INVOICE DATE 10/13/08	INVOICE NO. CVCS181450
PEMBERTON, NJ	LABOR RATE 97.50		MILEAGE 42,898	COLOR BLACK/	STOCK NO.
	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4 DOOR SEDAN			DELIVERY DATE	DELIVERY MILES
	VEHICLE I.D. NO. 1 G 1 Z U 5 4 8 8 5 F			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.			P.O. NO.	R.O. DATE 10/13/08
BUSINESS PHONE		COMMENTS			
					MO: 42898

JOB# 1 CHARGES

LABOR
 J# 1:03CVZ STEERING LIGHT ON
 NEEDS COLUMN
 CHECK OUT TIME
 HOURS: 1:00 TECH(S): 3:16
 97.50

JOB# 1 TOTALS

LABOR 97.50

JOB# 1 JOURNAL PREFIX CVCS JOB# 1 TOTAL 97.50

TOTALS

NON-GM PARTS WARRANTY COVERS "ONLY PARTS" REPLACEMENT

 ***** CASH [] CHECK [] CHECK # [] *****
 ***** VISA [] MSTCD [] AMEX [] CHARGE [] *****
 ***** DATE **10/13/08** CASHIER INITIALS **[Signature]** *****

TOTAL LABOR.... 97.50
 TOTAL PARTS.... 0.00
 TOTAL SUBLET... 0.00
 TOTAL G.O.G.... 0.00
 TOTAL MISC CHG. 0.00
 TOTAL MISC DISC 0.00
 TOTAL TAX..... 6.83

TOTAL INVOICE \$ 104.33

PLEASE REFER TO SUB TOTAL FOR ALL DISCOUNTS AND COUPONS
 YOU MAY RECEIVE A CUSTOMER SATISFACTION SURVEY FROM GENERAL
 MOTORS IN THE NEXT FEW WEEKS. IF FOR ANY REASON YOU CANNOT
 GRADE US "COMPLETELY SATISFIED" PLEASE CONTACT GENE KIEFER
 SERVICE MANAGER YOUR "COMPLETE SATISFACTION" IS OUR GOAL!!!

CUSTOMER SIGNATURE

Thank You

We Appreciate Your Business!

LIMITED LABOR WARRANTY

This Repair Order guarantees the labor used in performing a repair on the front of the vehicle for a period of 90 days or 4,000 miles (whichever comes first) from the date such repair is completed. This Limited Warranty specifically excludes front and alignment, wheel-end bearing and shorts, and fuel system--when due to contamination. This Limited Warranty is extended to the vehicle owner/customer and is not transferable to, nor enforceable by, any other person. Please ask dealer for any further warranty information which may apply.

During the duration period of this Limited Warranty, the repair facility will provide written confirmation at no charge to customer, for any additional repairs that are required due to any defect in labor which is performed while completing and correcting the repair of the repair order.

For two repairs under this Limited Warranty, customer must: (a) notify the Repair Facility of the address shown on the front of the Repair Order of any defect in labor within a reasonable time after the customer discovers or should have discovered any such defect; such notice, however, must be given to the Repair Facility before the end of the duration period of this Limited Warranty, as specified above; (b) deliver the vehicle to the Repair Facility at the address shown on the front of the Repair Order within five (5) days of notice of such defect in labor; (c) authorize the Repair Facility to make the repairs required; and (d) pay the charges for any additional parts required together with applicable sales tax upon completion of such repair.

All implied warranties, including the implied warranties of merchantability and fitness for a particular purpose, are limited to the duration period of this limited warranty. Under no circumstances will the Repair Facility be liable to customer for any incidental or consequential damages including, but not limited to, damages for loss of property, loss of vehicle use, loss of time, loss of income, loss of profits, loss of convenience or commercial loss.

This part of the Repair Order is the only warranties applying to this particular repair which is made available by the repair facility(s). The selling dealer has the obligation to disclose 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 act for it in any way in connection with the sale of this part of the Repair Order. It shall not be the responsibility of the selling dealer, any other person, or the repair facility for loss of use, loss of time, loss of income, loss of profits, or incidental or consequential damages. In addition, express warranties made by the repair facility shall be binding to correct or perfect the repair of the "part" only, and not the vehicle.

North American Operations

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



CHECK No. [REDACTED]

50-937
213

DATE
12/17/08

*****104 DOLLARS

AMOUNT
*****33 CENTS *****104.33

PAY
TO THE
ORDER
OF

PEMBERTON NJ

North American Operations
General Motors Corporation
Disbursement Account

[Signature]
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. [REDACTED]

PAYMENT
DATE 12/17/08

VENDOR
DUNS NO BB 000000065

1

VENDOR NAME [REDACTED]

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1G1ZU54885F [REDACTED]	12/16/08 71-670965096.1-BDHG1Q	VM 1-BDHG1Q	00.0000	104.33	.00	104.33
TOTAL				104.33	.00	104.33

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

N3

April 6, 2011

[REDACTED]
Goldsboro, NC [REDACTED]

Service Request: 71-670965096
Customer Relationship Specialist: Matt Robinson

Dear [REDACTED]

Enclosed is the GM Product Special Coverage Customer Reimbursement Claim Form. Please complete the form in its entirety and return it to the address listed on the bottom of the form. We will be happy to review your request for reimbursement on the loss of power steering assist that you had repaired once we have received this completed form.

If you have any future questions, please feel free to contact our Chevrolet Customer Assistance Center at 1-800-204-0261 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 Managers will be happy to assist you.

Sincerely,

Chevrolet Customer Assistance Center

GENERAL MOTORS PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this special coverage condition corrected before December 2007, 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 General Motors dealer.

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

If your claim is:

- Approved, you will receive a check from General Motors,
- Denied, you will receive a letter from General Motors with the reason(s) for the denial, or
- Incomplete, you will receive a letter from General Motors 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 questions about this reimbursement procedure, please call the toll-free telephone number provided at the bottom of the form. If you need assistance with any other concern, please contact the appropriate Customer Assistance Center at the telephone number listed below:

Division	Number	Deaf, Hearing Impaired or Speech Impaired *
Buick	1-800-521-7300	1-800-832-8425
Cadillac	1-800-458-8006	1-800-833-2622
Chevrolet	1-800-222-1020	1-800-833-2438
GMC	1-800-462-8782	1-800-462-8583
Pontiac	1-800-762-2737	1-800-833-7668
Oldsmobile	1-800-442-6537	1-800-833-6537
Hummer	1-866-486-6376	
Virgin Islands	1-800-496-9994	
GMICT	1-800-862-4389	
Puerto Rico – English	1-800-496-9992	
Puerto Rico – Español	1-800-496-9993	

* Utilizes Telecommunication Devices for the Deaf/Text Telephones (TDD/TTY)

**GENERAL MOTORS
PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT CLAIM FORM**

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: _____

Vehicle Identification Number (VIN): _____

Mileage at Time of Repair: _____ Date of Repair: _____

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: _____ State: _____ 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 recall.

Claimant's Signature: _____

Please mail this claim form and the required documents to:

**General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170**

All recall reimbursement questions should be directed to the following number:
1-800-204-0261

April 6, 2011

[REDACTED]
Pemberton, NJ [REDACTED]

Service Request: 71-670965096

Dear [REDACTED]

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

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 performance. There are times when we identify a motor vehicle defect and release a recall or special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement 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 \$104.33.

If your vehicle has not been inspected by your local GM dealership, we request you set up an appointment to insure all necessary steps have been taken to repair your vehicle.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

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

April 6, 2011

[REDACTED]
Pemberton, NJ [REDACTED]

Service Request: 71-670965096

Dear [REDACTED]

Enclosed is the GM Product Special Coverage Customer Reimbursement Claim Form. Please complete the form in its entirety and return it to the address listed on the bottom of the form. We will be happy to review your request for reimbursement for the listed repair once we have received this completed form.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

GENERAL MOTORS PRODUCT SPECIAL POLICY CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this special policy condition corrected before December 2007, 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 General Motors dealer.

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

If your claim is:

- Approved, you will receive a check from General Motors,
- Denied, you will receive a letter from General Motors with the reason(s) for the denial, or
- Incomplete, you will receive a letter from General Motors 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 questions about this reimbursement procedure, please call the toll-free telephone number provided at the bottom of the form. If you need assistance with any other concern, please contact the appropriate Customer Assistance Center at the telephone number listed below:

Division	Number	Deaf, Hearing Impaired or Speech Impaired *
Buick	1-800-521-7300	1-800-832-8425
Cadillac	1-800-458-8006	1-800-833-2622
Chevrolet	1-800-222-1020	1-800-833-2438
GMC	1-800-462-8782	1-800-462-8583
Pontiac	1-800-762-2737	1-800-833-7668
Oldsmobile	1-800-442-6537	1-800-833-6537
Hummer	1-866-486-6376	
Virgin Islands	1-800-496-9994	
GMICT	1-800-862-4389	
Puerto Rico – English	1-800-496-9992	
Puerto Rico – Español	1-800-496-9993	

* Utilizes Telecommunication Devices for the Deaf/Text Telephones (TDD/TTY)

**GENERAL MOTORS
PRODUCT SPECIAL POLICY CUSTOMER REIMBURSEMENT CLAIM FORM**

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: _____

Vehicle Identification Number (VIN): _____

Mileage at Time of Repair: _____ Date of Repair: _____

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: _____ State: _____ 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 recall.

Claimant's Signature: _____

Please mail this claim form and the required documents to:

**General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170**

All recall reimbursement questions should be directed to the following number:
1-800-204-0261

Elizabeth City NC

NORFOLK VA 233
HAMPTON ROADS
05 NOV 2008 PM 1 T



Pontiac
PO Box 72
Detroit Michigan 48232

NOV 13 2008

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

4823130072 B001





General Motors Corporation
Customer and Relationship Services
PO Box 33170
Detroit, MI 48232-5170

October 22, 2008

[REDACTED]
Elizabeth City, NC [REDACTED]

Service Request: 71-671881805

2005 Pontiac G6

Vehicle Identification Number: 1G2ZH528054 [REDACTED]

Customer Relationship Specialist: Martin Fischman

Dear [REDACTED]:

We are sorry you have experienced concerns with your 2005 Pontiac G6. At Pontiac, we take pride in the vehicles we produce and are thankful you took the time to contact us.

Because customer satisfaction is a top priority for us, we are providing you with one complimentary maintenance letter to be used on your 2005 Pontiac G6. This offer will cover the cost of an oil change for the oil type (conventional or synthetic) provided in your vehicle at the time delivery. We hope this gesture demonstrates our appreciation of you as a valued customer. Simply, present this letter to any Pontiac dealership for redemption.

If you have any 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

ATTENTION: DEALERSHIP SERVICE MANAGER
Complimentary maintenance letter not to exceed \$200.00

Submit the claim for the reasonable/customary price using labor operation number Z7410, failure code 98, authorization code "G" and insert the amount in the net item column. This original letter should be retained in the customer's file.

April 6, 2011

[REDACTED]
Elizabeth City, NC [REDACTED]

Service Request: 71-671881805

2005 Pontiac G6

Vehicle Identification Number: 1G2ZH528054 [REDACTED]

Customer Relationship Specialist: Martin Fischman

Dear [REDACTED]

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Sincerely,

Pontiac Customer Assistance Center

ATTENTION: DEALERSHIP SERVICE MANAGER
Complimentary maintenance letter not to exceed \$200.00

Submit the claim for the reasonable/customary price using labor operation number Z7410, failure code 98, authorization code "G" and insert the amount in the net item column. This original letter should be retained in the customer's file.

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

April 6, 2011

[REDACTED]
Indianapolis, IN [REDACTED]

Service Request: 71-673787685

Dear [REDACTED]

Thank you for contacting us recently regarding the recall or special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced.

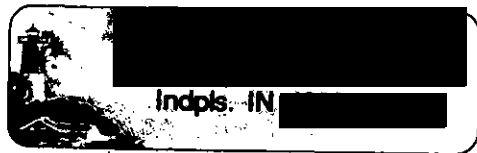
At Pontiac, we believe our customers have the right to expect long-term, reliable performance from our products. There are, however, many variables that affect the life of the vehicle's parts and performance. There are times when we identify a motor vehicle defect and release a recall or special coverage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

We have reviewed your request for reimbursement and regret that we are unable to reimburse you the amount you requested. The reason behind our decision is based on one of the following factors: 1) the part that was replaced for which you are seeking reimbursement is not the part covered by this recall or special coverage, 2) the documentation provided did not substantiate your request, or 3) your vehicle is not included in this recall or special coverage.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, please don't hesitate to email us using the Contact Us link at Pontiac.com or call us at 1-800-762-2737.

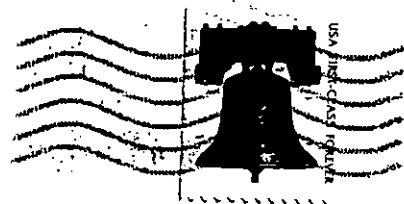
Sincerely,

Pontiac Customer Assistance Center



INDIANAPOLIS IN 462

16 OCT 2008 PM 5 L



OCT 20 2008

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

48232+5170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 10-16-08

17-Digit Vehicle Identification Number (VIN): 1G2ZG528X54 [REDACTED]

Mileage at Time of Repair: 90072 Date of Repair: 3-30-07

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: INDIANAPOLIS State: INDIANA ZIP Code: [REDACTED]

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

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

Amount of Reimbursement Requested: \$ 715.61

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: [REDACTED]

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).





**DELLEN CHEVROLET
BUICK - PONTIAC - GMC**
2527 W. Main St.
GREENFIELD, IN 46140
Phone: (317) 462-5591

SERVICE DEPARTMENT HOURS
7:00 a.m. to 6:00 p.m.
Mon, Tues, Wed, Fri
7:00 a.m. - 7:00 p.m. Thurs
Closed Saturday and Sunday

R/O Open Date	R/O Number
3/29/07	6040971/1
R/O Close Date	Status
3/29/07	Pre-Invoice
Mileage In	Mileage Out
90072	
Service Advisor / Tag #	
Scott McHatton/911	
Vehicle Identification Number	
1G2ZG528X54	
Delivery Date	In-Service Date
Color	License Number
WHITE	

INDIANAPOLIS, IN			Work Phone	
			Home Phone	
			Body	
Year	Make	Model		
2005	PONTIAC	G6	SEDAN	

DESCRIPTION OF SERVICE AND PARTS	AMOUNT
#1 - 24S: DIAGNOSTIC SERVICE CUSTOMER STATES POWER STEERING INOP Work performed by Ben Morris (498) Installed 15775370 :MOTOR (06605-PC) 15775 1@401.66 DIAGNOSTICS , REPLACED POWER STEERING MOTOR / MODULE ASSEMBLY Sub Total: Labor: 270.00 Parts: 401.66 Total: 671.66	-- 270.00 401.66
#2 - A: SERVICE LEVEL A (EVERY 3000 MILES OR WHEN OIL INDICATOR LIGHTS COMES ON) Work performed by Ben Morris (498) Kit: PK47V Installed VO16 :OIL FILTER Installed 12345610X :VALVOLINE Sub Total: Labor: 14.96 Parts: 14.99 Total: 29.95	14.96 14.99 Included Included
<div>DELLEN CHEV BUICK PONT 2527 W MAIN ST GREENFIELD, IN 46140 TERMINAL ID: MERCHANT #: SALE BATCH: 000107 DATE: MAR 30, 07 SQ: 005 TOTAL \$746.61 CUSTOMER COPY</div> <div>COPY</div>	

TERMS: STRICTLY CASH UNLESS ARRANGEMENTS ARE MADE. "I hereby authorize the repair work hereinafter 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 the 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 or your employees permission to operate the vehicle 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 vehicle to secure the amount of repairs thereto."

DISCLAIMER OF WARRANTIES. Any warranties on the products sold hereby are those made by the manufacturer. 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 said products. Any limitation contained herein does not apply where prohibited by law.

LABOR	284.96
PARTS	416.65
DEDUCTIBLE	.00
SUBLET	.00
SHOP SUPPLIES	20.00
HAZARDOUS MATERIALS	.00
SALES TAX OR TAX I.D.	25.00
SPECIAL ORDER DEPOSIT	.00
DISCOUNTS	.00
TOTAL DUE	746.61

NO RETURN ON ELECTRICAL OR SAFETY ITEMS OR SPECIAL ORDERS.

X

PAID MAR 30 2007

**PRODUCT ALLEGATION RESOLUTION
PRELIMINARY INSPECTION
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: { } Inspection Date: {11-05-08}
Vehicle Brand: {Pontiac} Model: {G6}
File #: {71-676150655} VIN: {1G2ZG58N074 }

Mileage at Inspection: {17343}

Inspection Location: {Walker Pontiac, 8457 Springboro Pike,
{Miamisburg, OH 45342, 937-433-4950}

Inspector's phone number: {317-258-4959}

Inspected By: {Donald Wade/EAA}

Section 1 INSPECTION SUMMARY

BRIEFLY Describe the customer's ALLEGATION below:

{The Owner alleged that his steering system tightened up and wouldn't move when he tried to turn the steering wheel causing his vehicle to veer across the roadway to the left and he collided with the concrete curb.

Following the inspection, summarize the facts and observations: (Additional cmts may be placed in section 9)

{The vehicle had damage to the two left side tire and wheel assemblies. The left front tire/wheel assembly had scrapes and broken lip area of wheel, scuffed tire, the left rear tire was gouged and the wheel sustained deep scrape marks on circumference area of the wheel, wheel damaged from contact with roadway curbing. There was no damage to steering components. The vehicle was equipped with rack and pinion steering with hydraulic assist. The powersteering reservoir was full, there was no leaks in the powersteering system. The steering wheel turned lock to lock in both directions with no obstruction, no resistance. There was no damage to the interior. There was no damage to any body panels. The vehicle was drivable, except for damage to left front tire/wheel assembly. There were no diagnostic trouble codes found in any of the vehicle's systems. Completed Vetronix CDR download.

Section 2 INTERVIEW - INCIDENT DETAILS

Obtain all of the information for this section from the Driver/Claimant

Provide a complete description of the incident according to the DRIVER / CLAIMANT

Interview mode: ☒ By Telephone ☐ In Person

Incident Date and Time: {10-25-08, 5:30pm}

Interview date: {11-04-08}

Was a police/fire department report obtained? ☐ Yes ☒ No

Provide driver/claimant's description of incident. If there was a collision, describe all collision events; include description of other vehicles involved; describe all objects contacted and the sequence in which they were contacted. (Additional cmts may be placed in section 9)

{The Driver/Rob McCollaugh stated that he was driving south down Breil Blvd in Middletown, OH, he stated that he was driving approximately 45 mph when his vehicle started veering to the left, he stated that his steering felt stiff and would not respond when he tried to steer in the opposite direction he stated that the front of his vehicle made contact with the curb with the left front wheel and his left rear wheel slid into the curb as he tried to steer away. The Owner stated that he was able to turn the wheel to the right after contact but it was stiff.

Driver/other occupant's physical description (include name, gender, height, weight, & disabilities):

{Male, 45 yrs old, 5ft 8 inches tall, 165 lbs, no disabilities.

If there was a collision:

Describe extent of any injuries to the Driver: {No injuries}

Describe where other occupants were seated & extent of any injuries: {No other occupants}

What was the exact location of the incident. {Owner didn't know exact location on Breil Blvd, Middletown, OH
Driving conditions at the time of the incident:

Weather conditions & Visibility: {Clear and dry} Approximate Temp (°F): {75}

**PRODUCT ALLEGATION RESOLUTION
PRELIMINARY INSPECTION
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: [REDACTED] Inspection Date: {11-05-08}
 Vehicle Brand: {Pontiac} Model: {G6}
 File # {71-676150655} VIN: {1G2ZG58N074 [REDACTED]}

Road Surface: ☐ Concrete ☒ Asphalt ☐ Gravel ☐ Crushed rock ☐ Dirt
 Road Condition: ☒ Dry ☐ Wet ☐ Icy ☐ Other: { }
 Shoulder ☐ Curb ☒ Concrete ☐ Asphalt ☐ Gravel ☐ Crushed rock ☐ Dirt
 Shoulder/Curb Condition: ☒ Dry ☐ Wet ☐ Icy ☐ Other: { }
 Posted Speed Limit {45}
 Any objects in the road? (rocks, scrap metal, pothole, speed bump, etc.) {No}

Length of Drive Prior to incident:

Total Time (hrs. & mins.): {10 minutes} Distance (miles): {1 1/2 miles}
 Estimate of vehicle speed: {45} mph Source of est. {Driver}
 Estimated vehicle speed at impact: {45} mph Source of est. {Driver}
(Do Not report speed information from the Vetronix data here)

If the driver/claimant description of the vehicle operation prior to and during the incident does not include the following information, please obtain it.

Steering	Normal <input checked="" type="checkbox"/>	Other <input type="checkbox"/>	Describe {Owner stated steering was normal prior to incident}
Suspension	Normal <input checked="" type="checkbox"/>	Other <input type="checkbox"/>	Describe { }
Brakes	Normal <input checked="" type="checkbox"/>	Other <input type="checkbox"/>	Describe { }
Engine	Normal <input checked="" type="checkbox"/>	Other <input type="checkbox"/>	Describe { }
Electrical	Normal <input checked="" type="checkbox"/>	Other <input type="checkbox"/>	Describe { }

Were any warning lights illuminated or driver information center messages displayed? ☐ Yes ☒ No If "Yes", get the details and describe the event(s).

Has the vehicle behavior noted during this incident ever been noted prior to this incident? ☐ Yes ☒ No If "Yes", get the details and describe the event(s).

Also, determine whether there were any warning lights illuminated, messages on driver information panel, unusual noises, smoke or steam observed. {No warning lights}

Describe any evasive action: ☒ Turning ☒ Braking ☐ Accelerating ☐ Other: { }

Describe cargo (in the vehicle interior, trunk and/or trailer (if any)): {No cargo or trailer}

Estimated total weight of cargo: { } Estimated weight of the trailer, if any. { }

If a trailer was being towed, photograph the hitch structure, both on the trailer and towing vehicle.

Did the vehicle leave the roadway? ☐ Yes ☒ No Describe: {Driver stated vehicle didn't leave roadway}
 Objects Impacted: { }

How was the vehicle transported from the incident site to the present location? ☐ Tow Truck ☐ Flat Bed ☒ Other

Additional comments concerning the incident: {The Driver drove the vehicle home after the incident. No Police report was made.}

**PRODUCT ALLEGATION RESOLUTION
PRELIMINARY INSPECTION
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: { } Inspection Date: {11-05-08}
 Vehicle Brand: {Pontiac} Model: {G6}
 File # {71-676150655} VIN: {1G2ZG58N074 }

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

{Driver/Rob McCollaugh, 314 Ardmore Drive, Middletown, OH 45042}

Comments: (Additional cmts may be placed in section 9)

Did the owner purchase the vehicle new? x Yes ☐ No Date 7-9-07 ☐ Yes ☐ No Date _____

VEHICLE MODIFICATIONS / ALTERATIONS

Are any vehicle modifications or alterations present, and has any after-market equipment been installed? (e.g., objects attached to the steering wheel or instrument panel, controls for disabled persons, shock absorbers, springs, modified body, electrical components, powertrain, wheels or tires, after-market seats, etc..) Describe:

{No modifications}

VEHICLE REPAIR / SERVICE HISTORY

Prior electrical system service? x No ☐ Yes If yes, describe: { }

Prior collision repair? x No ☐ Yes If yes, describe: { }

Repaired by whom? (name, address, phone) { }

Prior chassis system service, repair, or replacement? x No ☐ Yes If yes, describe what was done: { }

Prior electrical system components serviced, repaired, or replaced by whom? (name, address, phone number) { }

Any other pertinent vehicle history information (from interview, GM warranty or dealership history files)? x No ☐ Yes
 If yes, describe: { }

Section 4

VEHICLE INSPECTION – VISUAL/PHOTO

THE VEHICLE VISUAL INSPECTION DOCUMENTS THE PHYSICAL EVIDENCE USING PHOTOS AND WRITTEN OBSERVATIONS. RECORD YOUR OBSERVATIONS IN THE APPROPRIATE SECTION.

PHOTOGRAPH THE EXTERIOR OF THE VEHICLE AS FOLLOWS: VIN PLATE, QUARTER VIEWS FROM LEFT FRONT, RIGHT REAR ARE REQUIRED, AND DOCUMENT FURTHER EXTERIOR DAMAGE WITH MANY PHOTOS.

DESCRIBE ANY DAMAGE TO THE VEHICLE BODY:

{There was no damage to the vehicles body}

UNDERBODY / FRAME / CHASSIS AREA: Describe **any damage** to the underside of the vehicle. Note the condition of the bumpers, frame, suspension, tires, wheels, brake and fuel lines & engine mount(s)/crossmember. Photograph and comment on any contact between vehicle components and the underbody. Photograph if damage is present.

{There was damage to left front and left rear tire/wheel assemblies.}

CORNER ASSEMBLIES

Struts/shocks
 Springs
 Control arms

Ball joints
 Steering knuckles
 Axle assemblies

Tire/wheel assemblies

**PRODUCT ALLEGATION RESOLUTION
PRELIMINARY INSPECTION
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: { [REDACTED] } Inspection Date: {11-05-08} _____
 Vehicle Brand: {Pontiac} Model: {G6} _____
 File # {71-676150655} VIN: {1G2ZG58N074 [REDACTED]} _____

Comments:

{ _____
 { _____

UNDERHOOD

Engine compartment

Power steering lines, hoses, clamps and connections

Brake fluid level and condition

Power steering fluid level and condition

Comments:

{The brake, power steering and coolant reservoirs were full. There were no leaks in the power steering system.

{ _____

GENERAL OBSERVATIONS

Photograph and comment on any aftermarket equipment found, vehicle modifications or items that are unusual or out of place.

Comments:

{There was no aftermarket equipment. Nothing out of place or unusual. _____

{ _____
 { _____
 { _____

Section 5

VEHICLE INSPECTION - PASSENGER COMPARTMENT

INTERIOR

Instrument panel

Odometer

Controls

Steering wheel and column

Overall view of seat position

Driver and passenger seat back angle (inclinometer measurement)

Photo of options label-glove box/trunk

Sunvisors and headliner

Personal items/cargo

INTERIOR INSPECTION (Describe any damage and photograph)

{There was no damage to the interior, pictures taken _____

{ _____
 { _____
 { _____
 { _____
 { _____
 { _____
 { _____
 { _____
 { _____

Section 6

STEERING, SUSPENSION, TIRE AND WHEEL SYSTEM INSPECTION

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.

**PRODUCT ALLEGATION RESOLUTION
PRELIMINARY INSPECTION
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: { [REDACTED] } Inspection Date: {11-05-08 }
 Vehicle Brand: {Pontiac } Model: {G6 }
 File # {71-676150655 } VIN: {1G2ZG58N074 [REDACTED] }

ITEM	OBSERVATIONS/TEST RESULTS
Steering system-Are all components in place and connected in a normal manner? Can the steering wheel be rotated lock to lock with appropriate movement of the front wheels. Is there any binding, sticking or uneven feel?	{The steering wheel could be turned from lock to lock,left and right with proper movement of wheel. There was no binding or sticking,no uneven feel.
Steering linkage-Is the linkage free from cracks, bends, fractures, etc. Are there any scrapes, abrasions, signs of contact with any of the linkage?	{There was no damage to the steering system,all components in place and properly fastened._____
Gear/rack and pinion-Any sign of leakage, damage to boots on the rack, contact by foreign objects?	{There was no signs of leakage from the rack and pinion,no damage to boots or controls._____
Steering column, ignition switch, intermediate shaft. Does the column unlock with the ignition key "on"? Is the steering column properly fastened to the dash?	{The ignition switch was mounted on the dash,the column didn't lock or unlock with the ignition switch. The steering column was properly fastened.
Steering pump, drive, hoses, connections, flow, pressure. If possible, start the engine and rotate the steering wheel lock to lock. Is power assist normal? If not, it may be necessary to check pressure and flow.	{The steering system has power assist when engine was running,assist was normal_____
PS fluid level and condition-Color, contamination, odor	{Power steering reservoir was full,fluid clean and clear_____
Steering knuckle-All attachments secure and proper?	{_Steering knuckles properly attached and secured._____
Suspension components – LF Strut attachments, springs intact; control arms properly attached, deformed, broken, scraped, etc. Sway bars properly attached.	{All components properly attached and in good condition._Struts etc._____
Strut attachments, springs intact; control arms properly attached, deformed, broken, scraped, etc. RF	{All components properly attached and in good condition Struts etc_____
Strut attachments, springs intact; control arms properly attached, deformed, broken, scraped, etc Rear sway bars,	{_ All components properly attached and in good condition._Shocks,control arms springs etc._____

**PRODUCT ALLEGATION RESOLUTION
PRELIMINARY INSPECTION
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: _____ Inspection Date: **{11-05-08}** _____
 Vehicle Brand: **{Pontiac}** Model: **{G6}** _____
 File # **{71-676150655}** VIN: **{1G2ZG58N074}** _____

trailing arms properly attached and undamaged. LR	
Strut attachments, springs intact; control arms properly attached, deformed, broken, scraped, etc. RR	{All components properly attached and in good conditions, shock, springs etc.} _____
Rear axle assembly-deformed, signs of impact, properly located, etc.	{No damage ,no deformation. Properly located.} _____
Deformation to the frame	{ _____
Describe and photograph evidence of axle/ suspension/ tire contact with frame, body or components	{No tire contact with frame or body.} _____
Describe and photograph contact of the under- carriage with the road surface (road, shoulder, curb, or grass)	{There was no evidence of undercarriage contact with road surfaces.} _____
Stability Enhancement system/components-check for codes with Tech II	{There were no diagnostic trouble codes in any system} _____
Engine (normal, other)-Obtain codes using a Tech II.	{Normal,no diagnostic trouble codes.} _____
Electrical (normal, other)	{Electrical system normal.} _____
Warning lights/messages displayed? Describe and obtain codes using a Tech II	{No warning lights. No diagnostic trouble codes.} _____
Anything components missing?	{No component missing.} _____
Other	{ NO} _____

If the vehicle is driveable, conduct a road test to evaluate the concern expressed by the customer. Describe the results of the road test. If the concern is observed during the road test, it would be desirable to get a Tech II "snapshot". **{Vehicle could not be road tested on the street due to damage to tires and wheels. The vehicle was driven into the garage {area,no steering problem was evident.}** _____

If the vehicle is equipped with an ABS/Traction Control/Stability Enhancement System, use a Tech II to obtain any codes stored as current and/or history. Document via photos and include the code description. Follow the procedures in the service manual to determine the cause of each stored code which relates to the allegation. State which procedures were followed, record results of each test and state the root cause of each code. Consult with the CRM or Team Manager of the PAR group if this process leads to a disassembly of components. Follow the procedure in the General Guidelines for parts that need to be assembled for evaluation. **There were no diagnostic trouble codes found in any vehicle system.**

**PRODUCT ALLEGATION RESOLUTION
PRELIMINARY INSPECTION
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: _____ Inspection Date: {11-05-08}
 Vehicle Brand: {Pontiac} Model: {G6}
 File # {71-676150655} VIN: {1G2ZG58N074}

Inspect the system wiring, connections and components for damage. Note if the damage was the result of the incident.

TIRE AND WHEEL INSPECTION

1. IDENTIFICATION:

	TIRE BRAND (Goodyear)	TIRE TYPE (Eagle GA)	TIRE SIZE (P205/70R15)	PRESSURE (psi)	AVE. TREAD DEPTH 32nds of inch	DOT Numbers
LF	<u>Hankook</u>	<u>Optimo</u>	<u>P225/50R17</u>	<u>10</u>	<u>9/32</u>	<u>5mlppdyh4806</u>
RF	<u>Hankook</u>	<u>Optimo</u>	<u>P225/50R17</u>	<u>36</u>	<u>9/32</u>	<u>5mlppdyh4806</u>
LR	<u>Hankook</u>	<u>Optimo</u>	<u>P225/50R17</u>	<u>34</u>	<u>8/32</u>	<u>5mlppdyh4806</u>
RR	<u>Hankook</u>	<u>Optimo</u>	<u>P225/50R17</u>	<u>36</u>	<u>8/32</u>	<u>5mlppdyh4806</u>

Note: DOT numbers may be found on the inside of each tire adjacent to the rim.

Describe and photograph any damage to tires and wheels, such as scrapes, marks due to impact, cuts, tread separation, flat spots, bead separation, embedded grass/dirt, etc. Photographs should include inner and outer views of the damaged tire/wheel assemblies with chalk marks on each assembly to denote position on vehicle (RF, LF, RR and LR).

LF The left front tire was scuffed and scraped ,the wheel cracked/broken and scraped at outer edges

RF

LR The left rear wheel was heavily scraped and scarred,the tire gouged on sidewall _____

RR

2. TIRE PLACARD DATA:

Record the following data: (located on driver's door edge or inside the decklid)

	SIZE	PRESSURE (psi)	PRESSURE AT MAXIMUM LOAD(psi)
TIRES	<u>P225/50R17</u>	<u>30</u>	<u>30</u>
SPARE TIRE	<u>T125/70R16</u>	<u>60</u>	<u>60</u>

Section 7

SITE INSPECTION

SITE INSPECTION - PERFORM THE FOLLOWING IF ADDITIONAL INFORMATION MAY BE FOUND:

- Check the incident scene for tire marks, gouges in the pavement, debris, or any other marks. Measure location and photograph.
- Identify evidence of whether the vehicle left the road prior to, during, or after the incident. Document all locations, distances, stationary objects (guard rails, telephone poles, fences,buildings,etc), nearest posted speed limit signs in the direction of travel, etc...
- Identify evidence & photograph any object struck by the vehicle on or off the road prior to, during or after incident.
-

**PRODUCT ALLEGATION RESOLUTION
PRELIMINARY INSPECTION
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: { } Inspection Date: {11-05-08}
 Vehicle Brand: {Pontiac} Model: {G6}
 File # {71-676150655} VIN: {1G2ZG58N074 }

Inspect roadway & shoulder surfaces in the area of the incident site for telltale signs of loss of control, excessive speed, severe braking, etc.

Photograph the scene and property if involved.

Comments:

{I could not locate accident scene,unable to find intersection and street information as described by Driver.

{
 {
 {
 {

Section 8 COMMENT OVERFLOW

Please use this page if needed for additional comments from the inspection form. Please note the section and area the comments are continued from prior to each comment.

{
 {
 {
 {
 {

Section 9 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)

x Photographs x Data Downloads ☐ Other Records

**PRODUCT ALLEGATION RESOLUTION
PRELIMINARY INSPECTION
FIELD PHOTOGRAPHIC NOTES**

Customer's Name: [REDACTED] Inspection Date: {11-05-08
Vehicle Brand: { Pontiac Model: {G6
File # {71-676150655 VIN: {1G2ZG58N074 [REDACTED]

Inspector Donald Wade

Number of Rolls 1

Digital pictures.

<u>Neg.#</u>	<u>Description</u>
0	
1.	<u>DSCN0001 VIN PLATE</u>
2.	<u>DSCN0002 FRONT OF VEHICLE</u>
3.	<u>DSCN0003 LEFT SIDE OF VEHICLE FROM THE FRONT</u>
4.	<u>DSCN0004 RIGHT SIDE OF VEHICLE FROM THE FRONT</u>
5.	<u>DSCN0005 LEFT SIDE OF VEHICLE FROM THE REAR</u>
6.	<u>DSCN0006 RIGHT SIDE OF VEHICLE FROM THE REAR</u>
7.	<u>DSCN0007 REAR OF VEHICLE</u>
8.	<u>DSCN0008 DAMAGED LEFT FRONT TIRE/WHEEL ASSEMBLY</u>
9.	<u>DSCN0009 CLOSEUP OF DAMAGE TO LEFT FRONT TIRE/WHEEL ASSEMBLY</u>
10.	<u>DSCN0010 CLOSEUP OF DAMAGE TO LEFT FRONT TIRE/WHEEL ASSEMBLY</u>
11.	<u>DSCN0011 DAMAGED LEFT REAR TIRE/WHEEL ASSEMBLY</u>
12.	<u>DSCN0012 CLOSEUP OF DAMAGE TO LEFT REAR TIRE/WHEEL ASSEMBLY</u>
13.	<u>DSCN0013 RIGHT FRONT TIRE/WHEEL ASSEMBLY</u>
14.	<u>DSCN0014 RIGHT REAR TIRE/WHEEL ASSEMBLY</u>
15.	<u>DSCN0015 ENGINE COMPARTMENT FROM THE FRONT</u>
16.	<u>DSCN0016 SERPENTINE BELT AND POWER STEERING RESERVOIR</u>
17.	<u>DSCN0017 BRAKE AND WIPER FLUID RESERVOIR</u>
18.	<u>DSCN0018 FRONT INTERIOR FROM THE LEFT</u>
19.	<u>DSCN0020 FRONT INTERIOR FROM THE RIGHT</u>
20.	<u>DSCN0021 STEERING WHEEL,IGNITION AND CENTER DASH CONTROLS</u>
21.	<u>DSCN0022 OPTION LABEL</u>
22.	<u>DSCN0023 TIRE PLACARD</u>
23.	<u>DSCN0029 TECH 2 BODY CONTROL MODULE DTC STATUS</u>
24.	<u>DSCN0032 TECH 2 SIR DTC STATUS SCREEN</u>
25.	<u>DSCN0036 TECH 2 TCM DTC STATUS SCREEN</u>
26.	<u>DSCN0038 TECH 2 ECU DTC STATUS SCREEN</u>
27.	<u>DSCN0040 TECH 2 ECU DTC STATUS SCREEN</u>
28.	<u>DSCN0041 INSTRUMENT PANEL</u>
29.	<u>DSCN0043 CENTER DASH CONTROLS</u>
30.	<u>DSCN0047 POWER STEERING RESERVOIR AND DIPSTICK</u>
31.	<u>DSCN0048 FRONT UNDERCARRIAGE</u>
32.	<u>DSCN0049 RIGHT FRONT SUSPENSION</u>
33.	<u>DSCN0050 LEFT FRONT SUSPENSION</u>
34.	<u>DSCN0051 REAR SUSPENSION</u>
35.	<u>DSCN0052 REAR SUSPENSION</u>
36.	<u>DSCN0053 LEFT REAR SUSPENSION</u>
37.	<u>DSCN0054 RIGHT REAR SUSPENSION</u>
	<u>DSCN0062 RACK/PINION CONTROL ARM</u>
	<u>DSCN0063 LEFT FRONT STEERING CONTROL ARM</u>
	<u>DSCN0065 RACK AND PINION</u>
	<u>DSCN0066 LEFT FRONT TIRE/WHEEL ASSEMBLY</u>
	<u>DSCN0067 LEFT REAR TIRE/WHEEL ASSEMBLY</u>

CDR File Information

Vehicle Identification Number	1G2ZG58N074 [REDACTED]
Investigator	DONALD WADE
Case Number	71-676150655
Investigation Date	Wednesday, November 5 2008
Crash Date	Saturday, October 25 2008
Filename	1G2ZG58N074 [REDACTED].CDR
Saved on	Wednesday, November 5 2008 at 11:50:29 AM
Collected with CDR version	Crash Data Retrieval Tool 3.09
Reported with CDR version	Crash Data Retrieval Tool 3.09
EDR Device Type	airbag control module
Event(s) recovered	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 48 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 60 06
$07 00 09 00 00 00 00 00
$08 00 FF 00 00 00 00 00
$09 00 79 5E 00 00 00 00
$0A 00 00 00 00 00 00 00
$0B 00 00 05 0F 00 00 00
$0C 80 00 80 00 00 00 00
$0D 00 00 80 00 00 00 00
$0E 00 00 00 00 00 00 00
$0F A2 00 00 00 00 00 00
$10 47 32 5A 47 35 38 4E
$11 30 37 34 32 36 37 37
$12 39 32 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 03 03 00 00 00
$18 02 02 00 00 00 00 00
$19 03 03 00 00 00 00 00
$1B 3F 30 00 67 00 7A 00
$1C 3F 30 00 66 00 1A 00
$1D 4F 4F 00 00 00 00 00
$1E 4F 4F 00 4F 00 01 00
$1F 3B C0 00 00 00 00 00
$20 40 00 00 00 00 00 00
$21 01 01 00 00 F0 00 00
$22 00 8F 00 00 00 00 00
$24 00 00 00 00 00 00 00
$25 00 00 00 00 00 00 00
$26 00 00 00 00 00 00 00
$27 FF 00 FF 00 00 00 00
$2A 00 00 00 00 00 00 00
$2B 00 00 00 00 00 00 00
$2D 00 00 00 00 00 00 00
$2E 00 FF F0 08 7C 00 00
$2F 00 FE 08 7D 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 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 E0 FF 00 00 00 00 00
$41 F8 F8 90 00 00 00 00
$42 80 FF FF FF FF 00 00
```



```

$43 FF FF FF 00 00 00 00
$44 FF FF FF FF FF FF 00
$45 FF FF FF FF FF FF 00
$46 FF FF FF FF FF FF 00
$47 FF FF FF FF FF FF 00
$48 FF FF FF FF FF FF 00
$49 FF FF FF FF FF FF 00
$4A FF FF FF FF FF FF 00
$4B FF FF FF FF FF FF 00
$4C FF FF FF FF FF FF 00
$4D FF FF FF FF FF FF 00
$4E FF FF FF FF FF FF 00
$4F FF FF FF FF FF FF 00
$50 FF 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 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 FF 00
$6C FF FF FF FF FF FF 00
$6D FF FF FF FF FF FF 00
$6E FF FF FF FF FF FF 00
$6F FF FF FF FF FF FF 00
$70 FF FF FF FF FF FF 00
$71 FF FF FF FF FF FF 00
$72 FF FF FF FF FF FF 00
$73 FF FF FF FF FF FF 00
$74 FF FF FF FF FF FF 00
$75 FF FF FF FF FF FF 00
$76 FF FF FF FF FF FF 00
$77 FF 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 FF 00

```

```

$01 41 55 36 34 37 32 52 37 30 31 35 32 41 37 4A 35
$02 41 05 94 61
$03 41 54 36 34 37 32 52 37 30 31 33 31 41 31 37 44
$04 41 05 94 61
$05 42 55 FF FF FF FF FF FF FF FF FF FF FF FF FF FF
$06 FF FF FF FF
$07 42 54 FF FF FF FF FF FF FF FF FF FF FF FF FF FF
$08 FF FF FF FF
$0D 41 48 36 34 37 33 52 37 30 31 36 33 50 53 56 36
$0E 01 5A 39 A4
$0F 41 4A 36 34 37 33 52 37 30 31 36 33 50 54 4C 4E
$10 01 5A 39 A4
$13 42 52 39 35 32 38 44 33 37 31 35 32 41 37 44 34
$14 16 46 3D 35
$17 42 54 FF FF FF FF FF FF FF FF FF FF FF FF FF FF
$18 FF FF FF FF
$21 32 16 B8 0B 5E 11 91 9A
$22 60 06
$23 32 5A FA FA FA FA FA
$24 32 5A FA FA FA FA FA
$25 32 5A FA FA FA FA FA
$26 32 5A FA FA FA FA FA
$40 00 00
$41 3F 30 00 66 00 1A
$42 D0 E4
$43 00 00 8E 80

```



```
$44 C6 00 00 FC 80 C0
$45 07 01 07 01 05 01
$46 00 0F 0F 64 64
$47 0A 64 02 04 04 05 0A 06 04 0A 00 00 FA 00 00 FF 04 64
$48 18 08 08
$B0 58
$B1 FD FE 00
$B2 FF FF FF FF FF
$B4 41 53 36 30 30 36 32 31 33 46 58 31 20 20 20 20
$B7 50 AA 01 0F 02
$B8 4C 54 69 09 30
$C1 30 46 30 32
$CA 30 46 30 32
$CB 00 E8 C9 C6
$CC 00 E8 C9 C6
$D1 00 00
$DB 00 00
$DC 00 00
```


Comments

THE VEHICLE WAS INSPECTED AT WALKER PONTIAC,8457 SPRINGBORO PIKE,MIAMISBURG,OH 45342. THE VEHICLE HAD SUSTAINED IMPACT DAMAGE TO BOTH LEFT SIDE TIRE/WHEEL ASSEMBLIES. NO VEHICLE BODY PANEL DAMAGE.

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

February 4, 2011

[REDACTED]

Summerfield, FL [REDACTED]

Service Request: 71-594177162

Customer Relationship Specialist: Jason David

Dear [REDACTED]

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. 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 and the vehicle has exceeded mileage parameters.

At Pontiac, 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 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

GAINESVILLE/GNV
DETROIT MI 482

18 DEC 2007 PM 3 L
21 DEC 2007 PM 2 T



DEC 26 2007

Reimbursement Dept
O O Box 33170
Detroit, Mi

48232-5170

48232+5170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 12/17/0717-Digit Vehicle Identification Number (VIN): 1G2ZG528454Mileage at Time of Repair: 14000 Date of Repair: Nov 20, 2006Claimant Name (please print): [REDACTED]Street Address or PO Box Number: [REDACTED]City: Summerfield State: FL ZIP Code: [REDACTED]Daytime Telephone Number (include Area Code): [REDACTED]Evening Telephone Number (include Area Code): [REDACTED]Amount of Reimbursement Requested: \$ 850.69

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: [REDACTED]

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 Number: 120202

Invoice No: [REDACTED]

Phillips

2160 US Hwy. 441-27 FRUITLAND PARK, FL

P.O. Box 491907

LEESBURG, FLORIDA 34749

(352) 728-1212 TOLL FREE (866) 268-1508

STATE OF FLORIDA REGISTRATION # MV-01338

PAGE 1

SUMMERFIELD, FL

Home: [REDACTED] Bus: [REDACTED]

Cell: [REDACTED]

Email: [REDACTED] SERVICE ADVISOR: 860 SABRINA WORKMAN

COLOR		YEAR	MAKE/MODEL		VIN	LICENSE	MILEAGE IN/OUT		TAG
GRAY		05	PONTIAC G6		1G2ZG528454		74285	74285	
DEL DATE	PROD DATE	WARR EXP	PROMISED		PO NO	RATE	PAYMENT	INV DATE	
01JAN05			WAIT 24NOV06			0.00	CASH	30NOV06	
R.O. OPENED		READY		OPTIONS:					
24NOV06		30NOV06							

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A							
CUST STATES THE "POWER STEERING" MESSAGE APPEARED ON THE DIC AGAIN WHEN MAKING A SHARP RIGHT TURN ... CHECK & ADVISE NC STEERING POSITION SENSOR MALFUNCTION. REPLACE STEERING COLUMN W/ POSITION SENSOR IN IT. RECALIBRATED POWER STEERING MODULE.							
				880 CP		0.00	0.00
PARTS:				0.00	LABOR:	0.00	OTHER: 0.00
					TOTAL LINE A:		0.00

B**	PHILLIPS RENTAL						
	VOID VOID THE LINE						
	99 CP					0.00	0.00
PARTS:				0.00	LABOR:	0.00	OTHER: 0.00
					TOTAL LINE B:		0.00

C**	ST OF FLA ROAD FEE						
	VOID VOID THE LINE						
	99 CP					0.00	0.00
PARTS:				0.00	LABOR:	0.00	OTHER: 0.00
					TOTAL LINE C:		0.00

2nd trip for same problem

ALL PARTS ARE NEW OR FACTORY REBUILT UNLESS SPECIFIED OTHERWISE		LIMITED WARRANTY: All warranties are those of the parts manufacturer. GM branded parts and labor to replace them are warranted for 12 months or 12,000 miles, whichever occurs first. The seller hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty 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 products or service sold under the terms of this estimate.		DESCRIPTION	TOTALS
SUPPLIES - A token charge is included for supplies used on your vehicle. Applicable supply items are: Nuts, bolts, washers, tape, pins, solvents, carburetor cleaner, solder, wire, sealers, lubricants, ETC. It also includes costs and profits for waste disposal. The charge for both is equivalent to 5% of the total labor charge up to a maximum of \$15.00.		CUSTOMER HEREBY ACKNOWLEDGES RECEIPT OF ABOVE MENTIONED VEHICLE AND RECEIPT OF INVOICE HEREOF.		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
CUSTOMER SIGNATURE				PLEASE PAY THIS AMOUNT	\$ 0.00

Customer Copy

Page 1 of 1

Customer Number: 120202

Invoice No:

PHILLIPS

BUICK-PONTIAC-GMC TRUCK

2160 US Hwy. 441-27 FRUITLAND PARK, FL

P.O. Box 491907

LEESBURG, FLORIDA 34749

(352) 728-1212 TOLL FREE (866) 268-1508

STATE OF FLORIDA REGISTRATION # MV-01338

860 SABRINA WORKMAN

SUMMERFIELD, FL

Home:

Bus:

Email:

PAGE 1

Call:

SERVICE ADVISOR:

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG
GRAY	05	PONTIAC G6	1G2ZG528454		74249 74249	
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO	RATE	PAYMENT
01JAN05			WAIT 21NOV06		0.00	CASH
R.O. OPENED	READY	OPTIONS:				
20NOV06	22NOV06					
20NOV06	22NOV06					

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL
 A CUST STATES THE DIC READS "POWER STEERING" WHEN MAKING RIGHT TURNS &
 THE P/S WAS INOP ON FRIDAY... CHECK & ADVISE
 18 PERFORMED DIAG CHECK ON CODES FOUND, BAD POWER
 STEERING CONTROL MODULE, R & R P/S CONTROL
 MODULE & REPROGRAM
 880 CP 259.95 259.95
 1 15775370 MOTOR 330.84 330.84 330.84
 PARTS 330.84 LABOR 259.95 OTHER 0.00 TOTAL LINE A 590.79

B** PHILLIPS RENTAL
 Z7902 2 DAY RENTAL
 99 IREN (N/C)
 PARTS 0.00 LABOR 0.00 OTHER 0.00 TOTAL LINE B 0.00

C** ST OF FLA ROAD FEE
 SEE REFER TO LINE BREFER TO LINE
 99 IFEE (N/C)
 PARTS 0.00 LABOR 0.00 OTHER 0.00 TOTAL LINE C 0.00

D** BG FUEL INDUCTION SERVICE
 BGTFS BG FUEL INDUCTION SERVICE
 880 CP 72.59 72.59
 1 KA6210 B.G. IND. CLEANER 47.36 47.36 47.36
 PARTS 47.36 LABOR 72.59 OTHER 0.00 TOTAL LINE D 119.95

E** BG TRANS FLUSH 6600
 BGTFS BG TRANS FLUSH 6600
 880 CP 54.41 54.41
 1 QC310 BG TRANS SER. KIT 33.54 33.54 33.54

ALL PARTS ARE NEW OR FACTORY
 REBUILT UNLESS SPECIFIED OTHERWISE

SUPPLIES - A token charge is included for supplies used
 on your vehicle. Applicable supply items are: Nuts, bolts,
 washers, tape, pins, solvents, carburetor cleaner, solder,
 wire, sealers, lubricants, ETC. It also includes costs and
 profits for waste disposal. The charge for both is
 equivalent to 5% of the total labor charge up to a
 maximum of \$15.00.

LIMITED WARRANTY: All warranties are those of the
 parts manufacturer. GM branded parts and labor to
 replace them are warranted for 12 months or 12,000
 miles, whichever occurs first. The seller hereby expressly
 disclaims all warranties, either expressed or implied,
 including any implied warranty 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 products or service sold
 under the terms of this estimate.

CUSTOMER HEREBY ACKNOWLEDGES RECEIPT OF ABOVE
 MENTIONED VEHICLE AND RECEIPT OF INVOICE HEREOF.

CUSTOMER SIGNATURE

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

Service File Copy

Page 1 of 2

2001/002

PHILLIPSBUECKPONTIACGMC

12/17/2007 17:34 FAX 3527281540

VIN#: 1G2ZG528454163516

Customer Number: 120202

Invoice No:

PHILLIPS**BUICK-PONTIAC-GMC TRUCK**

2160 US Hwy. 441-27 FRUITLAND PARK, FL

P.O. Box 491907

LEESBURG, FLORIDA 34749

(352) 728-1212 TOLL FREE (800) 268-1508

STATE OF FLORIDA REGISTRATION # MV-01338

860 SABRINA WORKMAN

SUMMERFIELD, FL

Home: Bus:

Email:

Cell:

SERVICE ADVISOR:

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG
GRAY	05	PONTIAC G6	1G2ZG528454		74249 74249	
DEL DATE	PROD DATE	WARR EXP	PROMISED	PD NO.	RATE	PAYMENT
01JAN05			WAIT 21NOV06		0.00	CASH
R.O. OPENED	READY	OPTIONS:				
20NOV06	22NOV06					

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
PARTS:	85.54	LABOR:	54.41	OTHER:	0.00	TOTAL LINE E:	139.95

F** BG BRAKE FLUSH							
BGBFS BG BRAKE FLUSH							
880 CP					69.95	69.95	
1 8402 BG BRAKE SER.					30.00	30.00	30.00
PARTS:	30.00	LABOR:	59.95	OTHER:	0.00	TOTAL LINE F:	99.95

CHARGE FOR WASTE DISPOSAL AND SHOP SUPPLIES.

15.00

ALL PARTS ARE NEW OR FACTORY REBUILT UNLESS SPECIFIED OTHERWISE

SUPPLIES - A token charge is included for supplies used on your vehicle. Applicable supply items are: Nuts, bolts, washers, tape, pins, solvents, carburetor cleaner, solder, wire, sealers, lubricants, ETC. It also includes costs and profits for waste disposal. The charge for both is equivalent to 5% of the total labor charge up to a maximum of \$15.00.

LIMITED WARRANTY: All warranties are those of the parts manufacturer. GM branded parts and labor to replace them are warranted for 12 months or 12,000 miles, whichever occurs first. The seller hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty 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 products or service sold under the terms of this estimate.

CUSTOMER HEREBY ACKNOWLEDGES RECEIPT OF ABOVE MENTIONED VEHICLE AND RECEIPT OF INVOICE HEREOF.

CUSTOMER SIGNATURE

DESCRIPTION	TOTALS
LABOR AMOUNT	\$ 456.90
PARTS AMOUNT	\$ 493.74
GAS, OIL, LUBE	\$ 0.00
SUBLET AMOUNT	\$ 0.00
MISC. CHARGES	\$ 15.00
TOTAL CHARGES	\$ 965.64
LESS INSURANCE	\$ 0.00
SALES TAX	\$ 67.59
PLEASE PAY THIS AMOUNT	\$ 1033.23

Service File Copy

Page 2 of 2

P4213-280-1

2002/002

PHILLIPSBUICKPONTIACGMC

12/17/2007 17:34 FAX 3527281540

VIN#: 1G2ZG528454163516

what's in **your best interest?**

consolidating debt with Capital One® Home Loans.

Turn all those high-rate balances into one LOW, Fixed-Rate Home Equity Loan from Capital One and put more money back in your pocket month after month.

- LOW FIXED APR starting at 7.44%*
- Guaranteed FIXED Payment
- Close in 10 days or less
- Personal Loan Consultant



Call toll free 1-800-760-2607



Or visit www.capitalonehomeloans.com

Preferred Customer Number: 8501 026 271 6629

Contact us for your FREE no-obligation debt relief consultation.



* APR (annual percentage rate) is effective as of 10/09/06 and subject to change at any time. APR is based on an excellent credit history, minimum \$80,000 loan amount, 80% combined loan-to-value ratio and a 20-year fixed-rate second-lien mortgage. Additional terms and restrictions apply. Capital One is an Equal Housing Lender. See reverse for additional important information.

Home Equity Loans | Mortgages | Refinancing | Debt Consolidation

Capital One
Home Loans

Capital One

what's in your wallet?

www.capitalone.com

9-1-06

Previous Balance	Payments & Credits	FINANCE CHARGE	Transactions	New Balance	Minimum Payment	Due Date
\$676.92	\$257.00	\$9.77	\$1,033.23	\$1,462.92	\$43.00	Jan. 13, 2007

Nov. 14, 2006 — Dec. 13, 2006

Page 1 of 1

PLEASE PAY AT LEAST THIS AMOUNT

MasterCard Platinum Account

Your Account Information

TOTAL CREDIT LINE	\$8,000.00
TOTAL AVAILABLE CREDIT	\$6,537.08
CREDIT LINE FOR CASH	\$4,000.00
AVAILABLE CREDIT FOR CASH	\$3,632.00

Payments, Credits & Adjustments

1 27 NOV PAYMENT \$257.00

Transactions

2 22 NOV PHILLIPS BUICK PONTIAC FRUITLAND PAR FL \$1,033.23

Finance Charges (Please see reverse for important information)

	Balance rate applied to	Periodic rate	Corresponding APR	FINANCE CHARGE
Purchases	\$926.62	0.01367%	4.99%	\$3.80
Cash	\$366.79	0.05425%	19.80%	\$5.97

ANNUAL PERCENTAGE RATE applied this period: 9.06%



At Your Service 1-800-955-7070

To call Customer Relations or to report a lost or stolen card:



Send payments to:

Capital One Bank • P.O. Box 650007 • Dallas, TX 75265-0007



Send inquiries to:

Capital One • P.O. Box 30285 • Salt Lake City, UT 84130-0285

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

April 6, 2011

[REDACTED]
Hialeah, FL [REDACTED]

Service Request: 71-676908118

2007 Saturn ION 2

Vehicle Identification Number: 1G8AJ55F47Z [REDACTED]

Dear [REDACTED]:

This letter is a follow-up to our telephone conversation on November 7, 2008, concerning your Saturn, specifically the recent concerns with your vehicle shutting down. Thank you for giving Saturn the opportunity to address these issues. We regret any inconvenience this matter may have caused you.

As we previously agreed, in the interest of goodwill and customer enthusiasm, Saturn and Williamson Saturn of Miami Lakes, Inc. will place a 4 yr / 60,000 Saturn Extended Vehicle Service Plan on your vehicle. Please note this plan does not, in any way, alter or limit the Saturn New Car Limited Warranty currently in effect on your vehicle.

If you have any further questions or comments, I may be reached at 1-800-553-6000. Again, thank you for providing Saturn the opportunity to assist in this matter. We hope to earn your trust and respect with each contact you have with us.

Sincerely,

Saturn Customer Assistance Center

Enclosures

File Edit View Favorites Tools Help



Address [Redacted Address]

Default Transaction Mode : Online

Vehicle Identifier

Vehicle Category: GM, Used
Division: SATURN
VIN: 1G8AJ55F47Z [Redacted]

Customer Information

Plan Customer: Individual
Customer Type: Owner

[Redacted]
Hialeah, Florida, United States - [Redacted]

Evening Phone:
Primary Language: English
Secondary Language:

Sales Information

Dealer Code: 00288
Action: Add Protection Plan
Odometer: 11
Delivery Date: 07/29/2006

Plan Lienholder

Lienholder Type: Other

Saturn
P O Box 33173
Detroit, Michigan - 48232

Protection Plans

Plan Purchase Date: 07/29/2006
In Service Date: 07/29/2006

Plan Type: Extended Vehicle Coverage Used
Term: 48
Mileage Limit: 60000
Deductible: 0
Rental Type: Standard
Plan Price: \$ 0.00
Tax: \$ 0.00

Done



This screen is th
submit a request
customer inform
report.

Transaction M

Vehicle Identif

Vehicle Categ

Division*:

VIN*:


Dealer Identifi

Division*:

Transaction Details



Click the "Print" button in order to keep a record of this transaction detail. After you review the transaction details, click "Close Window".

VIN: 1G8AJ55F47Z 

Status: Pending

Dealer Code: 00288

User ID: 1w4dcz

Transaction Date: 07/29/2006

User Role: Central Office Administrator

Transaction Type: GM Protection Plan

Timestamp Date: 2008-11-10-12:37:31.272000

Transaction Messages:

1097 - GMPP sent to MIC

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

April 7, 2011

Attn: [REDACTED]

Napoleon, OH [REDACTED]

Service Request: 71-677880369

Dear [REDACTED]

Thank you for contacting us recently regarding the recall or special coverage notice you received for your 2005 Pontiac G6. We apologize for any inconvenience you have experienced.

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 performance. There are times when we identify a motor vehicle defect and release a recall or special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement and regret that we are unable to reimburse you the amount you requested. The reason behind our decision is based on one of the following factors: 1) the part that was replaced for which you are seeking reimbursement is not the part covered by this recall or special coverage, 2) the documentation provided did not substantiate your request, or 3) your vehicle is not included in this recall or special coverage.

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, please don't hesitate to email us using the Contact Us link at Pontiac.com or call us at 1-800-762-2737.

Sincerely,

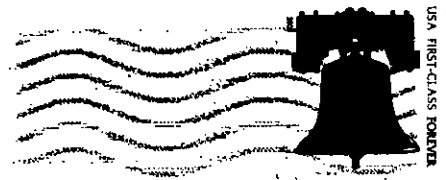
Pontiac Customer Assistance Center



Napoleon, OH

TOLEDO OH 436

12 NOV 2008 PM 3 L



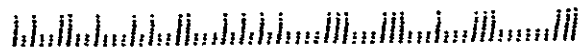
USA FIRST-CLASS FOREVER

NOV 13 2008

Reimbursement Department
P.O. Box 33170

Detroit, MI 48232-5170

48232+5170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 11-7-08

17-Digit Vehicle Identification Number (VIN): 1G2ZH528554

Mileage at Time of Repair: 83647 Date of Repair: 11-7-08

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number [REDACTED]

City: Napoleon State: OH ZIP Code: [REDACTED]

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

Evening Telephone Number (include Area Code): Same

Amount of Reimbursement Requested: \$ 603.75

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: [REDACTED]

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

*I did call on this.
Service Request # 71-677880369*

CUSTOMER REIMBURSEMENT PROCEDURE

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

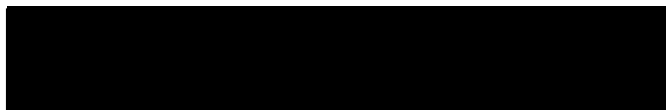
Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

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).



7488837

115493

STYKEMAIN**PONTIAC • BUICK • GMC, LTD**

25124 ELLIOTT RD. • DEFIANCE, OHIO 43512

BUS: (419) 784-5252 • FAX: (419) 782-6644

www.stykemain.com

INVOICE



PAGE 1

NAPOLEON, OH

HOME: [REDACTED] BUS:

SERVICE ADVISOR: 33 BRANDON BELL

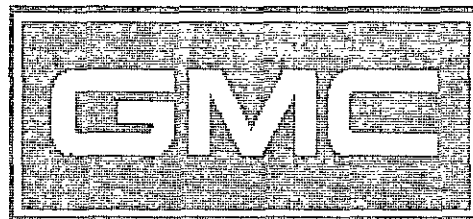
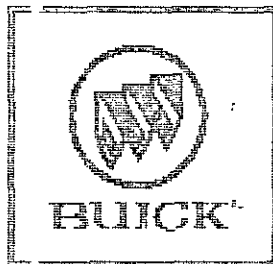
COLOR	YEAR	MAKE/MODEL	VIN		LICENSE	MILEAGE IN / OUT	TAG
IVORY-WHIT	05	PONTIAC G6	1G2ZH528554			83647/83650	54336
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO. NO.	RATE	PAYMENT	INV. DATE
07MAR05	IS		17:00 07NOV08			CASH	07NOV08
R.O. OPENED		READY	OPTIONS: STK:5P6780				
07NOV08		07NOV08					

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
A	CST	STATES	SES	LIGHT COMES ON AND SERVICE STEERING LIGHT IS ON			
	M	MISC					
			13	C		187.50	187.50
		1	15926870	COLUMN	364.39	364.39	364.39
PARTS:		364.39	LABOR:	187.50	OTHER:	0.00	TOTAL LINE A:
							551.89

C0460, STEERING POSITION SENSOR IN COLUMN IS FAULTY, REPLACED

STEERING COLUMN ASSEMBLY, CLEAR CODES AND TEST DRIVE, CHECKS OK

STYKEMAIN PONT BUICK GMC
25124 ELLIOTT RD
DEFIANCE, OH 43512
(419) 784-5252

Sale

ID: 002

Merchant ID: [REDACTED]

Bank ID: [REDACTED]

11/07/08

Batch#: 312001

Retrieval Ref #: 55655359

15:20:60

VISA

Entry Method: Signed

Appr Code: [REDACTED]

Inv #: 115493

Total:

\$ 603.75

Customer Copy

ON B
INFOR
SHOW
OWNE
VEIC
UNDEI
ACCID
CLAIM
NOTIFI
MANUFACTURER'S REPRESENTATIVE.

CERTIFY THAT THE
UNLESS OTHERWISE
IT NO CHARGE TO
PEARANCE OF THE
ED OR REPLACED
WAY WITH ANY
SUPPORTING THIS
ATE OF PAYMENT

DISCLAIMER OF WARRANTIES
Any warranties on the products sold herein
are those made by the manufacturer of
those products. Seller hereby expressly
disclaims all warranties, either express or
implied, including any implied warranties of
merchantability or fitness for a particular
purpose (regarding any products or service
provided, unless otherwise indicated on the
service repair order). This dealership
neither assumes nor authorizes any other
person to assume for it any liability in
connection with the sale of said products
or service. This disclaimer by the
dealership in no way affects the terms or
performance of the manufacturer's
warranty.

DESCRIPTION	TOTALS
LABOR AMOUNT	187.50
PARTS AMOUNT	364.39
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
SHOP/HAZ. CHARGES	15.00
TOTAL CHARGES	566.89
LESS INSURANCE	0.00
SALES TAX	36.86
PLEASE PAY THIS AMOUNT	603.75

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

CUSTOMER SIGNATURE

CUSTOMER COPY

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

BBB AUTO LINE
Customer Claim Form

Case number: CHV0852917
Contact Date: 11/17/08
Start Date:

Please make any necessary corrections to the information below, print 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: [REDACTED]		
Mailing address: [REDACTED]		
City: Estacada	State: OR	Zip code: [REDACTED]
Day phone: [REDACTED]	Evening phone: [REDACTED]	Cell phone: [REDACTED]
Fax:	E-mail address: [REDACTED]	

SECTION 2: VEHICLE INFORMATION

Make: Chevrolet	Model: Malibu LS	Year: 2006	Current mileage: 53726
Name(s) that appears on the vehicle title: [REDACTED]			
Selling dealer/city/state: GARY GRUNER, MADRAS, OR			
Primary Servicing dealer/city/state: Suburban Auto Group,			
Acquired as <input type="checkbox"/> new <input checked="" type="checkbox"/> used <input type="checkbox"/> demo <input type="checkbox"/> leased		Is the vehicle in your possession? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	
Purchase/lease date: 02/26/07		Mileage at purchase/lease:	
First repair attempt date: 06/27/07		First repair attempt mileage: 35840	
How often is the vehicle used for business purposes (percentage): 0 %		Number of vehicles owned or leased by the business: Transmission type: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual	
Has the vehicle been in an accident/had body damage? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		Date of accident:	
Description of damage:			

SECTION 3: DESIRED OUTCOME (Describe what you want done to resolve your concern)

WOULD LIKE A CAR THAT WORKS AND HAS NO PROBLEMS, I BOUGHT THE CAR IN GOOD FAITH AND THOUGHT IF I TOOK IT BACK TO THE DEALER THEY WOULD FIND THE PROBLEM AND FIX IT I HAD 8 ALMOST HEAD ON'S IT IS IN THE SHOP NOW FOR POWERSTEERING AND BRAKES.

Please complete the missing information in the box below and on page 2.

VEHICLE IDENTIFICATION NUMBER _____

Lienholder/Leasing Company _____ **Phone Number** _____

Account Number _____

SECTION 4: VEHICLE PROBLEMS (List primary problem first)

Case Number: CHV0852917

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
POWER STEERING		10		yes
BRAKES		4		yes

Total days out of service for all problems: _____

Signature of Titled Owner(s) _____ Date _____
 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 copies 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: Sandra Slone State: Oregon

Customer Name: [REDACTED]

Service Request: 71-
680511560

BBB Case No.: CHV0852917

Vehicle ID No.:
1G1ZT51816F [REDACTED]

In Service
Date:
11/19/2005

Vehicle is: Used

BAC Code:
225833

Year, Make & Model: 2006 Chevrolet Malibu
Mileage at Time of BBB Filing (53,726)

Vehicle Purchased Used on: 02/26/2007 at
odometer 30,966

Lien holder: GMAC ☐ Other ☐
N/A

Sale Type: Purchase ☒ Lease ☐ Other ☐

DVM Name: N/A

CAM Name: Mick Gonzalez

Phone/Cell Number: N/A

Phone Number: 805-373-8417

Svc Mgr Name: N/A

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.

HAS TAC BEEN CONTACTED FOR SERVICE HISTORY - IF **YES** PLEASE INCLUDE TAC # AND EXPLANATION TAC WAS INVOLVED. NO
TAC HAS NOT BEEN CONTACTED: NO CONTACT REQUIRED. BASED ON AGE AND MLG VEH APPEARS NOT TO MEET ELIGIBILITY

IF TAC **HAS NOT BEEN** CONTACTED WHY NOT
NO CONTACT REQUIRED. BASED ON AGE AND MLG VEH APPEARS NOT TO MEET ELIGIBILITY.

☒ Brakes / Power Steering

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

Has the vehicle ever been involved in an accident: YES.

Did you confirm your answer with the customer: YES.

What type of damage was sustained :

MINOR FRONT END DAMAGE.

Are the RO's attached if the vehicle was in an accident: NO

Has the customer filed any insurances claims on this Vehicle: N/A

If Yes obtain the following information below

Insurance Company N/A

Insurance Rep (First and Last Name) N/A

Phone # N/A

Claim Made? NO

Claim Status: N/A

Claim # N/A

Did Insurance Company refer customer to GM? NA

Are there any Aftermarket Modifications to the Vehicle YES

Have you confirm this with the customer : YES

List:

SNOW TIRES PLACED ON ORGINAL RIMS AND ORGINAL TIRES PLACED ON CHROME RIMS.

Was a Trade Repurchase offered to the customer NO

(A Trade Repurchase is to be offered as a settlement before a Straight can be considered)

Date authorized by the DVM/CAM N/A

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileag e:</u>	<u>Description of Complaint and Repair Performed:</u>
N/A	N/A	N/A	N/A	N/A

What is the customer eligible for based upon the BBB Program Eligibility Guidelines and the States lemon law requirements for meeting presumption? Explain with some Detail

INELIGIBLE

GM Program Summary Repurchase/Replacement: INELIGIBLE

Lemon Law Repurchase/Replacement: INELIGIBLE

GM Program Summary Repairs/Reimbursement for past repairs: INELIGIBLE

THE STATE LEMON LAW READS:

Days out of service: 30 Business Days

Repairs: 4 Repairs

Time period 12 / 12,000 miles

Does Lemon Law state nonconformity must continue to exist? NO

If applicable, safety-related repairs N/A

Safety-related time period N/A

Number of repair attempts in the presumption period:	N/A
Total days out of service during the presumption period:	NONE
Total days out of service during customer's ownership:	N/A

Vehicle Meets Presumption of Lemon Law	NO
--	----

PERTINENT FACTS FROM PREVIOUS SRs WHICH RELATE TO YOUR EVALUATION

NO PREVIOUS SR'S

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 sts: HAVE HAD BRAKE AND POWER STEERING ISSUES SINCE PURCHASE OF VEH, USED AT 30,96 MLG. I JUST WANT A CAR THAT WORKS AND HAS NO PROBLEMS.

DVM sts: NO CONTACT NEEDED. BASED ON AGE AND MLG VEH APPEARS NOT TO MEET ELIGIBILITY.

SVM sts: NO CONTACT NEEDED. BASED ON AGE AND MLG VEH APPEARS NOT TO MEET ELIGIBILITY.

CRS Rationale: . BASED ON AGE AND MLG VEH APPEARS NOT TO MEET ELIGIBILITY.

What are the 3 main strengths of the customer's case to win repurchase through Lemon Law

10 REPAIR ISSUES WITH POWER STEERING/ ELECTRICAL CAUSED PROBLEM.

4 REPAIR ISSUES WITH BRAKES.

BRAKE FAILURE CAUSED MINOR ACCIDENT WITH VEHICLE.

What are the 3 main weaknesses of the customer's case to win repurchase through Lemon Law?

VEH AGE/ MLG IS OUTSIDE LEMON LAW ELIGIBILITY.

FIRST OCCURANCE OF ISSUE BEGAN OUTSIDE LEMON LAW ELIGIBILITY.

VEH PURCHASED USED AT 30,900 MLG – OUTSIDE LEMON LAW ELIGIBILITY.

Decision reached by CRS: Arbitrate case: Settle case:

CRS FINAL OFFER:	N/A	DAT E:	CUST {Accepted / Declined} N/A
Goodwill: {Type} N/A	Attorney Fees (if applicable): \${Amount} N/A		

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

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

April 7, 2011

[REDACTED]
Plymouth, PA [REDACTED]

Service Request: 71-683737437

Dear [REDACTED]

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

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 performance. There are times when we identify a motor vehicle defect and release a recall or special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement 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 \$106.00.

If your vehicle has not been inspected by your local GM dealership, we request you set up an appointment to insure all necessary steps have been taken to repair your vehicle.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

North American Operations

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



CHECK No. [REDACTED]

50-937
213

DATE
12/12/08

*****106 DOLLARS

*****00 CENTS

AMOUNT
*****106.00

PAY
TO THE
ORDER
OF

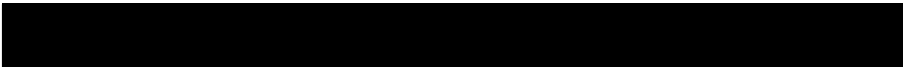
PLYMOUTH PA [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account

[Signature]
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. [REDACTED]

PAYMENT
DATE 12/12/08

VENDOR
DUNS NO BB 000000089

1

VENDOR NAME [REDACTED]

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1612S52F25F [REDACTED]	12/11/08 71-683737	VH 1-BCNMYO 437.1-BCNMYO	00.0000	106.00	.00	106.00
TOTAL				106.00	.00	106.00

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

M3

PLYMOUTH, PA;

WILKES-BARRE PA 186

28 NOV 2008 PM 1 L

DEC 01 2008



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


48232+5170




CUSTOMER REIMBURSEMENT CLAIM FORM

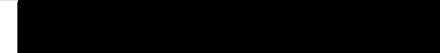
This section to be completed by Claimant

Date Claim Submitted: 11-26-08

17-Digit Vehicle Identification Number (VIN): 1G1ZS52F25F 

Mileage at Time of Repair: 39124 Date of Repair: 11-26-08

Claimant Name (please print): 

Street Address or PO Box Number: 

City: PLymouth State: PA. ZIP Code: 

Daytime Telephone Number (include Area Code): 

Evening Telephone Number (include Area Code): 

Amount of Reimbursement Requested: \$ 100.00

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.

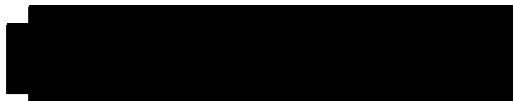
Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

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).



ALEXANDER

FAMILY DEALERSHIPS

CHEVROLET-PONTIAC-BUICK

2225 Sans Souci Parkway Wilkes Barre, Pa. 18706
570-735-2600 800-845-8414



CUSTOMER NO. 111822	ADVISOR SHAWN ZESKE	TAG NO. 214 3481	INVOICE DATE 11/26/08	INVOICE NO. CVCS100594
PLYMOUTH, PA	LABOR RATE	MILEAGE 46,473	COLOR SILVER/	STOCK NO. 4752
	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4 DOOR SEDAN		DELIVERY DATE 10/06/07	DELIVERY MILES 39,124
	VEHICLE I.D. NO. 1 G 1 Z S 5 2 F 2 5 F		SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.	P.O. NO.	R.O. DATE 11/26/08	
RESIDENCE PHONE	BUSINESS PHONE	COMMENTS		
			MO: 46477	

LABOR & PARTS
J# 1 03CVZ STEERING TECH(S):421 WARRANTY
CUSTOMER STATES STEERING BINDING
FAULTY STEERING COLUMN
REPLACED STEERING COLUMN

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	WARRANTY
JOB # 1	1	15926870	COLUMN 6.518		0.00
JOB # 1 TOTAL PARTS					0.00
JOB # 1 TOTAL LABOR & PARTS					0.00

MISC	CODE	DESCRIPTION	CONTROL NO	
JOB # 1	GED	GMPP WARR DEDUCTIBLE		100.00
TOTAL - MISC				100.00

TOTALS

IMPORTANT	TOTAL LABOR....	0.00
IF FOR ANY REASON, YOU ARE NOT	TOTAL PARTS....	0.00
"COMPLETELY SATISFIED", CONTACT DAVID HORNLEIN,	TOTAL SUBLET...	0.00
SERVICE MGR. YOUR SATISFACTION IS OUR NUMBER 1 CONCERN.	TOTAL G.O.G....	0.00
THANK YOU VERY MUCH FOR YOUR PATRONAGE.	TOTAL MISC CHG.	100.00
	TOTAL MISC DISC	0.00
	TOTAL TAX.....	6.00

\$ [X] CASH [] CHARGE [] CHECK #..... \$ TOTAL INVOICE \$ 106.00
\$ [] MASTERCARD [] VISA AUTH #..... \$
\$ DATE: REC'D BY: \$
\$*****

CUSTOMER SIGNATURE

NOV 26 PAID

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



CHECK No. [REDACTED]

50-937
213

DATE 12/18/08 *****742 DOLLARS *****23 CENTS AMOUNT *****742.23

[REDACTED]
LAKELAND FL [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account

PAY
TO THE
ORDER
OF

[Signature]
SIGNATURE

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

AUDIT

[REDACTED]

North American Operations				DETACH BEFORE DEPOSITING CHECK		
VENDOR DUNS NO BB 000000007 1		General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530		CHECK NO.	[REDACTED]	
VENDOR NAME [REDACTED]				PAYMENT DATE	12/18/08	
REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1G1ZU54825F [REDACTED]	12/17/08 71-686667	VM 1-8DJ5E9 298.1-8DJ5E9	00.0000	742.23	.00	742.23
ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782				H3		
TOTAL				742.23	.00	742.23

LAKELAND FL 338

08 DEC 2008 PM 1 L

Lakeland, FL

12-11-08A08:29 RCVD

REIMBURSEMENT DEPARTMENT

P.O. BOX 33170

DETROIT, MI 48232-5170

48232+5170



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 12/08/0817-Digit Vehicle Identification Number (VIN): 1G1ZU54825F [REDACTED]Mileage at Time of Repair: 50,316 Date of Repair: 10/22/08

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: LAKELANDState: FL

ZIP Code: [REDACTED]

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

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

Amount of Reimbursement Requested: .\$ 832.23

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. *see invoice*
- 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. *see paid stamp*
(copy of front and back of cancelled check, or copy of credit card receipt) *on invoice*

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: [REDACTED]

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.

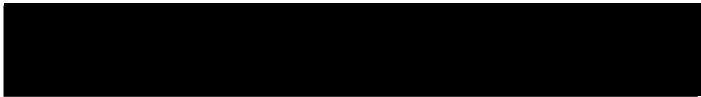
Requests for reimbursement may include parts, labor, fees and taxes. Reimbursement may be limited to the amount the repair would have cost if completed by an authorized dealer.

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).





www.regallakeland.com

STATE OF FLORIDA REGISTRATION NUMBER MV-16217

We Service All Makes & Models

PONTIAC GMC TRUCK HONDA Jeep ACURA

AUTOMOTIVE GROUP

2615 Lakeland Hills Blvd. • P.O. Box 90037

Lakeland, FL • 33804-0037

(863) 687-8000 Fax (863) 680-2401

CUSTOMER NO. 82733	ADVISOR KYLE COOK	TAG NO. 186 954	INVOICE DATE 10/22/08	INVOICE NO. PNCS345820
LAKELAND, FL	LABOR RATE	LICENSE NO.	MILEAGE 50,316	COLOR BEIGE/
	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4 DOOR SEDAN			STOCK NO.
	VEHICLE I.D. NO. 1 G 1 Z U 5 4 8 2 5 F			DELIVERY DATE
	F.T.E. NO.			DELIVERY MILES
BUSINESS PHONE		COMMENTS	SELLING DEALER NO.	PRODUCTION DATE
RESIDENCE PHONE		R.O. DATE 10/20/08		
MO: 50317				

TECHNICIAN CERTIFICATION-----
102 JOHN A MONTESANO MASTER TECH

TOTALS-----

* NEXT RECOMMENDED SERVICE: *
* 04/20/2009 / 56323 MI 97PNZ5 ROTATE AND BALANCE *

The manufacturer warranty is 12 months or 12,000 miles which ever occurs first. Aftermarket or used parts are warrantied for 90 days. (Parts Only)
I have the option of test driving my vehicle before signing this invoice.
This invoice explains the charges for the work that has been performed. If you have any questions or concerns please have our cashier call our Service Manager.

Shop Supplies : " This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies or waste disposal."
Thank You for the opportunity to service your vehicle.

TOTAL LABOR.... 304.99
TOTAL PARTS.... 359.00
TOTAL SUBLET... 90.00
TOTAL G.O.G.... 0.00
TOTAL MISC CHG. 23.79
TOTAL MISC DISC 0.00
TOTAL TAX..... 54.45

TOTAL INVOICE \$ 832.23

Our Business is Your Business.
Please email us at
service@regallakeland.com
with any comments on how we can better serve you.

ALL INSURANCE REPAIRS
NOTE: You are 100% responsible for payments if the insurance company defaults or delays in payment for this repair work.

SERVICE/PARTS GUARANTEE
We guarantee our service work for 12 mos. or 12,000 miles, whichever comes first. If our repair or replacement fails in normal service with that period, we'll fix it free of charge.

ALL PARTS ARE NEW OR REMANUFACTURED UNLESS OTHERWISE INDICATED.

*U/Used R/Rebuilt RC/Reconditioned
NC/No Chg/Warranty RD Reduced/Warranty

MISCELLANEOUS SHOP SUPPLIES
"This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies or waste disposal."

STATE TIRE & BATTERY FEE
State of Florida requires a \$1.00 fee to be collected for each new tire sold in the state [s. 403.718], and a \$1.50 fee to be collected for each new or remanufactured battery sold in the state [s. 403.7185].

SERVICE & PARTS DEPT. HOURS
MON. - FRI.
7:00 AM TO 6:00 PM
SAT.
8:00 AM TO 3:00 PM
BODY SHOP DEPT. HOURS
MON. - FRI.
8:00 AM TO 5:30 PM

ACTIVE DELIVERY SIGN OFF

My Service Advisor has explained all repairs that were Completed on my vehicle including my charges.

Signature _____

Date _____

ADVISOR SIGNATURE _____

PAID
OCT 22 2008
BY: PC# 5016 [Signature]

ORIGINAL

IMPORTANT
You may receive a survey or phone call from your vehicle manufacturer. This is your report card on us and we hope you can score it "Completely Satisfied" or "Excellent". If for any reason you cannot, please contact me personally before answering the survey.
Regal Automotive
Mike Oglesby
Service Director
(863) 687-8000 x170



www.regallakeland.com

STATE OF FLORIDA REGISTRATION NUMBER MV-16217

We Service All Makes & Models



AUTOMOTIVE GROUP

2615 Lakeland Hills Blvd. • P.O. Box 90037

Lakeland, FL • 33804-0037

(863) 687-8000 Fax (863) 680-2401

CUSTOMER NO. 82733	ADVISOR KYLE COOK	TAG NO. 186 954	INVOICE DATE 10/22/08	INVOICE NO. PNC345820
LAKELAND, FL	LABOR RATE	LICENSE NO.	MILEAGE 50,316	COLOR BEIGE/
	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4 DOOR SEDAN			DELIVERY DATE
	VEHICLE I.D. NO. 1 G 1 Z U 5 4 8 2 5 F			DELIVERY MILES
	F.T.E. NO.			SELLING DEALER NO.
BUSINESS PHONE		P.O. NO.	R.O. DATE 10/20/08	PRODUCTION DATE
COMMENTS				MO: 50317

JOB# 1 CHARGES

LABOR-----
J# 1 08PNZ1 STEERING TECH(S):102 304.99
CUSTOMER STATES THEY HAVE LOST POWER STEERING CK AND ADVISE
WAS INTERMITTINLY CUTTING ON AND OFF
STEERING TORQUE SENSOR FAILURE
REPLACED STEERING COLUMN ASSEMBLY

PARTS-----QTY---FP-NUMBER-----DESCRIPTION-----UNIT PRICE-----
1 15926870 COLUMN 6.518 13468 359.00
TOTAL - PARTS 359.00

SUBLET-----PO#-----VEND INV#-INV.DATE-DESCRIPTION-----
13452 5917 10/20/08 1ST TOW 5917 90.00
TOTAL - SUBLET 90.00

JOB# 1 TOTALS-----
LABOR 304.99
PARTS 359.00
SUBLET 90.00

JOB# 2 CHARGES-----
JOB# 1 JOURNAL PREFIX PNC3 JOB# 1 TOTAL 753.99

LABOR-----
J# 2 92PNZZ COURTESY INSPECTION TECH(S):102 0.00
CUSTOMER REQUESTS COURTSEY INSPECTION
THIS IS A VISUAL INSPECTION ONLY AND IS FREE OF CHARGE
COMPLETED

JOB# 2 TOTALS-----
JOB# 2 JOURNAL PREFIX PNC3 JOB# 2 TOTAL 0.00

JOB# 3 CHARGES-----
JOB# 3 JOURNAL PREFIX PNC3 JOB# 3 TOTAL 0.00

LABOR-----
J# 3 00PNZBI BATTERY INSPECTION TECH(S):102 0.00
INSPECT BATTERY AND TEST
FREE INSPECTION
COMPLETED

JOB# 3 TOTALS-----
JOB# 3 JOURNAL PREFIX PNC3 JOB# 3 TOTAL 0.00

MISC-----CODE-----DESCRIPTION-----CONTROL NO-----
JOB # A 61D Shop Supplies 23.79
TOTAL - MISC 23.79

ESTIMATE-----
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$800.00 (+TAX)
TECHNICIAN CERTIFICATION-----

ORIGINAL

Our Business is Your Business.

Please email us at
service@regallakeland.com
with any comments on how we can better
serve you.

ALL INSURANCE REPAIRS

NOTE: You are 100% responsible for
payments if the insurance company
defaults or delays in payment for this
repair work.

SERVICE/PARTS GUARANTEE

We guarantee our service work for 12 mos.
or 12,000 miles, whichever comes first. If
our repair or replacement fails in normal
service with that period, we'll fix it free of
charge.

ALL PARTS ARE NEW OR REMAN-
UFACTURED UNLESS OTHERWISE
INDICATED.

*U/Used R/Rebuilt RC/Reconditioned
NC/No Chg/Warranty RD Reduced/Warranty

MISCELLANEOUS SHOP SUPPLIES

"This charge represents costs and profits to
the motor vehicle repair facility for mis-
cellaneous shop supplies or waste
disposal."

STATE TIRE & BATTERY FEE

State of Florida requires a \$1.00 fee to be
collected for each new tire sold in the state
[s. 403.718], and a \$1.50 fee to be collected
for each new or remanufactured battery
sold in the state [s. 403.7185].

SERVICE & PARTS DEPT. HOURS

MON. - FRI.
7:00 AM TO 6:00 PM
SAT.
8:00 AM TO 3:00 PM

BODY SHOP DEPT. HOURS

MON. - FRI.
8:00 AM TO 5:30 PM

ACTIVE DELIVERY SIGN OFF

My Service Advisor has explained all repairs that
were Completed on my vehicle including my charges.

Signature _____

Date _____

ADVISOR SIGNATURE _____

April 11, 2011

[REDACTED]
Lakeland, FL [REDACTED]

Service Request: 71-686667298

Dear [REDACTED]

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

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 performance. There are times when we identify a motor vehicle defect and release a recall or special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement and are happy to inform you that you are being reimbursed for your repair based on the amount the repair would have cost if completed by an authorized General Motors dealer. Additionally, the reimbursement only includes elements of the repair which pertain to the specific recall or special coverage notice. With this in place, we have enclosed a check in the amount of \$742.23.

If your vehicle has not been inspected by your local GM dealership, we request you set up an appointment to insure all necessary steps have been taken to repair your vehicle.

At Chevrolet, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

For more information regarding the maintenance and care of your vehicle, please visit www.gmownercenter.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)**

Issued by:
Pontiac

Certificate No. 1G2ZG558364 [REDACTED]

Issue Date: April 11, 2011

Issued exclusively for:

[REDACTED]
Dyess, AR [REDACTED]

Valid through: March 27, 2010

Amount: One Thousand Dollars and Zero Cents
******\$1,000.00******

April 11, 2011

[REDACTED]
Dyess, AR [REDACTED]

Dear [REDACTED]

Thank you for your recent inquiry. We are sorry you have experienced concerns with your vehicle. Customer satisfaction is a top priority for us.

Enclosed is the Owner Loyalty Certificate valid towards the purchase, SmartLease or SmartBuy of a new, unused General Motors vehicle. With such a wide selection of vehicles to choose from (Buick, Cadillac, Chevrolet, GMC, HUMMER, Pontiac, Saab, Saturn), we are sure you will find a vehicle that's right for you.

To ensure that you have the opportunity to obtain the best value possible, this certificate may be used in addition to any other retail purchase incentive programs available at the time you purchase your new vehicle. We hope you will take advantage of this special incentive offer. Simply present the certificate to your dealer after you have negotiated your best deal, sign the certificate and your dealer will complete the necessary information and process it for you.

We are proud you made Pontiac your choice when you purchased your 2006 G6 and trust you will give us the opportunity to retain you as a valued Pontiac customer. Should you have any questions regarding General Motors' products and current incentives, please call our Marketing Support department at 1-800-276-6842. You may also begin your vehicle shopping online by visiting gm.com or any of our divisional websites.

Sincerely,

Pontiac Customer Assistance Center
Service Request: 71-687667147

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

April 11, 2011

[REDACTED]
Hibbing, MN [REDACTED]

Service Request: 71-690670568

Dear [REDACTED]

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

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 performance. There are times when we identify a motor vehicle defect and release a recall or special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement 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 \$544.88.

If your vehicle has not been inspected by your local GM dealership, we request you set up an appointment to insure all necessary steps have been taken to repair your vehicle.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

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



Hibbing, MN
Blessed Holidays!

DULUTH MN 558

12-29-08A10:33 RCVD



LOUIS COMFORT TIFFANY

General Motors Corp.
P.O. Box 33170
Detroit, MI
48232-5170

48232+5170



13763

FILE COPY 1466

RANGER

ACCOUNTING

CHEVROLET-CADILLAC-OLDSMOBILE
PONTIAC-GMC TRUCKS-BUICK
1502 E. Howard Phone: 263-7578
HIBBING, MINN. 55746
TOLL FREE: 1-800-894-7579
FAX: 218-263-7576

HIBBING, MN

PAGE 1

HOME: [REDACTED] BUS:

SERVICE ADVISOR: 100 ROSE

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
BEIGE	05	CHEV MALIBU	1G1ZT54875F [REDACTED]		41470/41621		
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO	RATE	PAYMENT	INV DATE
30MAR06 IS			16:30 23APR07			CASH	02MAY07
R.O. OPENED		READY	OPTIONS: STK:42909				

06:54 23APR07 11:15 02MAY07

LINE	OPCODE	TECH	TYPE	A/HRS	S/HRS	COST	SALE	COMP	LIST	NET	TOTAL
A	POWER STEERING WARNING LIGHT COMES ON, LOOSES P.S. INTERMITTENT										
	99	SCAN CHECK CODES C0545 & C0176, REPALCED									
		STEERING COLUMN, REPROGRAM STEERING SENSOR, TORQUE SENSOR									
		11 CC		2.10		15750				157.50	157.50
		1 15926870 COLUMN				35900	0	359.00		359.00	359.00
		CUSTOMER PAY SHOP CHARGE FOR REPA				0	473				4.73

ACCOUNT	SALE	COST	CONTROL	ACCOUNT	SALE	COST	CONTROL
46000	15750			46700	35900		
6104	473	0		32400	2365	0	
22500	54488	*****					

COST, SALE, & COMP TOTALS

52123 0

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 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.

DESCRIPTION	TOTALS
LABOR AMOUNT	157.50
PARTS AMOUNT	359.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	4.73
TOTAL CHARGES	521.23
LESS INSURANCE	0.00
SALES TAX	23.65
PLEASE PAY THIS AMOUNT	544.88

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

CUSTOMER SIGNATURE

ACCOUNTING COPY

ALL PARTS NEW ORIGINAL EQUIPMENT
UNLESS OTHERWISE SPECIFIED

GENERAL MOTORS PRODUCT RECALL CUSTOMER REIMBURSEMENT CLAIM FORM

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: 12-22-08
Vehicle Identification Number (VIN): 1G1ZT54875F
Mileage at Time of Repair: 41470 Date of Repair: 5/2/07
Claimant Name (please print): [REDACTED]
Street Address or PO Box Number: [REDACTED]
City: Hibbing State: MN ZIP Code: [REDACTED]
Daytime Telephone Number (include Area Code): [REDACTED]
Evening Telephone Number (include Area Code): [REDACTED]
Amount of Reimbursement Requested: \$ 544.88

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 incurred for the repair covered by this field action.

Claimant's Signature: [REDACTED]

Please mail this claim form and the required documents to:

General Motors Corporation

P.O. Box 33170

Detroit, MI 48232-5170

All recall reimbursement questions should be directed to the following number:

1-800-204-0261

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



CHECK No. [REDACTED]

50-937
213

DATE 01/05/09 *****544 DOLLARS *****88 CENTS *****544.88 AMOUNT

PAY TO THE ORDER OF

[REDACTED]
HIBBING MN [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account

Richard C. Drum
SIGNATURE

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

AUDIT

[REDACTED]

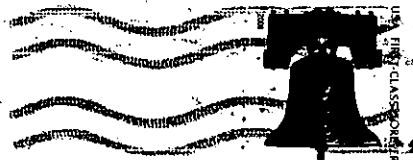
North American Operations General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530				DETACH BEFORE DEPOSITING CHECK			
VENDOR DUNS NO. BB 000000076		1		CHECK NO. [REDACTED]		PAYMENT DATE 01/05/09	
REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT	
1G1ZT54875F [REDACTED]	12/31/08 71-690670568.1	VM 1-BF7H2U 1-BF7H2U	00.0000	544.88	.00	544.88	
ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782				H3			
TOTAL				544.88	.00	544.88	

AP330K

PORTSMOUTH, NH

PORTSMOUTH, NH 038

21 JAN 2009 PM 2 T



General Motors Corporation
P.O. BOX 33170
Detroit, MI

01-26-09A09:53.RCVD

48232-5170

48232+5170



Service Request
71-691848656



Customer Assistance Center

Chevrolet Division
General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

GENERAL MOTORS
PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT CLAIM FORM

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: 1/20/2009

Vehicle Identification Number (VIN): 1G1ZU64855F [REDACTED]

Mileage at Time of Repair: 62852 Date of Repair: 12/30/2008

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: Portsmouth State: NH ZIP Code: [REDACTED]

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

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

Amount of Reimbursement Requested: \$ 590.21

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 recall.

Claimant's Signature: [REDACTED]

Please mail this claim form and the required documents to:

General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

All recall reimbursement questions should be directed to the following number:
1-800-204-0261

HOLLOWAY

AUTOMOTIVE GROUP



BUICK PONTIAC GMC CADILLAC

500 US HIGHWAY 1 BYPASS

PORTSMOUTH, NH 03801

PH: (603) 436-1700



SERVICE DEPARTMENT HOURS

7:30 a.m. to 5:00 p.m.

Monday and Friday

7:30 a.m. to 7:00 p.m.

Tues, Wed and Thurs

R/O Open Date	R/O Number
12/30/08	6007336/1
R/O Close Date	Status
12/30/08	Pre-Invoice
Mileage In	Mileage Out
62852	62852
Service Advisor / Tag #	
JESSE CASWELL	
Vehicle Identification Number	
1G1ZU64855F	
Delivery Date	In-Service Date
Color	License Number

PORTSMOUTH, NH

DESCRIPTION OF SERVICE AND PARTS

AMOUNT

#1 - SS: STEERING AND SUSPENSION

FEELS LOOSENESS IN STEERING, ALSO HEARS NOISES FROM
STEERING WHEN TURNING WORSE WHEN WARMED UP
Caused by INSPECTED FOUND STEERING COLUMN HAS INTERNAL
NOISES, NEEDS COLUMN

Work performed by WA (140)

Installed 15926870 :COLUMN (06518-PC) 1@409.26

REMOVED AND REPLACED STEERING COLUMN, NOISES ARE G
ONE.

Sub Total: Labor: 179.90 Parts:409.26 Total: 589.16

179.90

409.26

#2 - BI: PERFORM BRAKE INSPECTION AND REPORT

VEH HAS CLICKING NOISE FROM RF BRAKE
Caused by INSPECTED FOUND FRONT BRAKE ROTORS MACHINED
POORLY, GROOVED.

Work performed by WA (140)

WILL NEED TO REPLACE ROTORS AND PADS TO ELIMINATE
NOISE.

Sub Total: Labor: 14.95 Parts:.00 Total: 14.95

14.95

\$14.95 OFF COUPON

-14.95

TERMS: STRICTLY CASH UNLESS ARRANGEMENTS ARE MADE. "I hereby authorize the repair work hereinafter 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 the 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 or your employees permission to operate the vehicle 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 vehicle to secure the amount of repairs thereto."

DISCLAIMER OF WARRANTIES. Any warranties on the products sold hereby are those made by the manufacturer. 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 said products. Any limitation contained herein does not apply where prohibited by law.

LABOR	194.85
PARTS	409.26
DEDUCTIBLE	.00
SUBLET	.00
SHOP SUPPLIES	1.05
HAZARDOUS MATERIALS	.00
SALES TAX OR TAX I.D.	.00
SPECIAL ORDER DEPOSIT	.00
DISCOUNTS	-14.95
TOTAL DUE	590.21

ORIGINAL

NO RETURN ON ELECTRICAL OR SAFETY ITEMS OR SPECIAL ORDERS.

X

[Log Out](#) | [Contact Us](#) | [FAQs](#)**Account info**[Account balances](#)**► View transactions**[Mortgage Loan info](#)[Account nickname](#)**Fund transfers**[Transfer funds between accounts](#)[Set up future or recurring transfers](#)[View transfers](#)**Bill payments**[Pay bills OneStep](#)[Pay bills](#)[Pay TD Banknorth Credit Card Bill](#)[Set up recurring bill payments](#)[View bill payments](#)[Add new payee](#)[Edit payee info](#)[View payee list](#)**Messages**[Message box](#)[Send Message](#)[Outbox](#)**Services**[Change contact information](#)[Password Maintenance](#)[Stop payment on a check](#)[Reorder checks](#)[Update Security Questions](#)

Bank Deposits FDIC Insured

Equal Housing Lender 

TD Banknorth is a trade name of TD Bank, N.A.

View transactions[Print this page](#) | [Help for this page](#)[Account balances](#)**Transaction**

Number:

Account: CHECKING [REDACTED]

Type: POS

Desc: VISA DDA PUR

Amount: \$-590.21

Date: 12/31/2008

Location: COAST BUICK POINT 603 436 1700 *NH

Card#: [REDACTED]

Send a secure message about this transaction. ORIGINAL

April 11, 2011

[REDACTED]
[REDACTED]
Portsmouth, NH [REDACTED]

Service Request: 71-691848656

Dear [REDACTED]

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

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 performance. There are times when we identify a motor vehicle defect and release a recall or special coverage notice to our loyal customers for their safety and satisfaction.

We have reviewed your request for reimbursement 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 \$590.21.

If your vehicle has not been inspected by your local GM dealership, we request you set up an appointment to insure all necessary steps have been taken to repair your vehicle.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

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

April 11, 2011

[REDACTED]
[REDACTED]
Portsmouth, NH [REDACTED]

Service Request: 71-691848656

Dear [REDACTED]

Enclosed is the GM Product Recall/Special Coverage Customer Reimbursement Claim Form. Please complete the form in its entirety and return it to the address listed on the bottom of the form. We will be happy to review your request for reimbursement for the listed repair once we have received this completed form.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

GENERAL MOTORS

PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this Special Coverage condition corrected before December 2008, 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 General Motors dealer.

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

If your claim is:

- Approved, you will receive a check from General Motors,
- Denied, you will receive a letter from General Motors with the reason(s) for the denial, or
- Incomplete, you will receive a letter from General Motors 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 questions about this reimbursement procedure, please call the toll-free telephone number provided at the bottom of the form. If you need assistance with any other concern, please contact the appropriate Customer Assistance Center at the telephone number listed below:

Division	Number	Deaf, Hearing Impaired or Speech Impaired *
Buick	1-800-521-7300	1-800-832-8425
Cadillac	1-800-458-8006	1-800-833-2622
Chevrolet	1-800-222-1020	1-800-833-2438
GMC	1-800-462-8782	1-800-462-8583
Pontiac	1-800-762-2737	1-800-833-7668
Oldsmobile	1-800-442-6537	1-800-833-6537
Hummer	1-866-486-6376	
Virgin Islands	1-800-496-9994	
GMICT	1-800-862-4389	
Puerto Rico – English	1-800-496-9992	
Puerto Rico – Español	1-800-496-9993	

* Utilizes Telecommunication Devices for the Deaf/Text Telephones (TDD/TTY)

PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT CLAIM FORM

THIS SECTION TO BE COMPLETED BY CLAIMANT

Date Claim Submitted: _____

Vehicle Identification Number (VIN): _____

Mileage at Time of Repair: _____ Date of Repair: _____

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: _____ State: _____ 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 recall.

Claimant's Signature: _____

Please mail this claim form and the required documents to:

**General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170**

All recall reimbursement questions should be directed to the following number:
1-800-204-0261

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



CHECK No. [REDACTED]

50-937
213

DATE 02/02/09 *****590 DOLLARS *****21 CENTS AMOUNT *****590.21

[REDACTED]
PORTSMOUTH NH [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account

Brian D. Albee
SIGNATURE

PAY
TO THE
ORDER
OF

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

AUDIT

[REDACTED]

North American Operations						DETACH BEFORE DEPOSITING CHECK	
General Motors Corporation Disbursements (2613) PO Box 62530 Phoenix, AZ 85082-2530						CHECK NO.	[REDACTED]
VENDOR DUNS NO. BB 000000051 1						PAYMENT DATE	02/02/09
VENDOR NAME [REDACTED]							
REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT	
161ZU64855F [REDACTED]	01/30/09 71-691848656	VM 1-BJAH4Z 1-BJAH4Z	00.0000	590.21	.00	590.21	
ACCEPTANCE OF THIS CHECK CONSTITUTES FULL RESOLUTION FOR REIMBURSEMENT OR QUESTIONS CALL 800-462-8782				H3			
TOTAL				590.21	.00	590.21	



GPS Centralized Credit Delivery
1075 Main Street
Waltham, MA 02451

Facsimile

To: **Melanie Carvalhal / GM**

From:

Fax: 866-962-2868

Phone/Fax

Phone: 866-790-5700 x21963

Date: January 20, 2009

Re: Hertz Rental Agreement

Pages & Cover: 2

☐ Urgent

☐ For Review

☐ Please Comment

☐ Please Reply

HERTZ LOCAL EDITION

Phone: 800-654-4173
Fax:
Web: www.hertz.com



Rental Agreement No: H73997770
Invoice Date: 08/27/2008
Document: 609087861098

Renter:
Account No.:

Direct All Inquiries To:

HERTZ LOCAL EDITION
PO BOX 26120
OKLAHOMA CITY, OK 73126-0120

REPRINT

TAX Id: 13-1938568

ASHLAND, MA

RENTAL REFERENCE

Rental Agreement No: H73997770
Reservation ID: 000000000000

RENTAL DETAILS

Rate Plan: IN: HDDA OUT: HDD
Rented On: 07/14/2008 18:00 LOC# 772501
MARLBOROUGH, MA
Returned On: 07/22/2008 18:29 LOC# 772501
MARLBOROUGH, MA

Car Description: CLASSIC PT
Vehicle No/VIN: 9174293/1G1ZS58F88F
CAR CLASS Charged: D MILEAGE In: 26,820
Rented: D Out: 26,419
Reserved: 99 Driven: 401

BILLING INFORMATION

Claim No:
Date of Loss: 2008-07-14
Type of Loss: M
Repair Facility: WESTBROUGH BUICK PONTIAC
Authorized Rate: 34.99
Authorized Days: 8
Insured: 0

RENTAL CHARGES

FUEL & SERVICE	25.24
REFUELING FEE	6.99
MOTOR VEHICLE LEASE TAX	0.60
TAX	5.00%
TOTAL CHARGES	48.44 USD

AMOUNT DUE 48.44 USD

MISCELLANEOUS INFORMATION

CC AUTH: 025669 DATE: 2008/07/22 AMT: 250.00
CC AUTH: 025669 DATE: 2008/07/22 AMT: 200.00
CC AUTH: 045467 DATE: 2008/07/22 AMT: 37.00

TOTAL RENTAL DAYS 8
BILLED TO OTHERS 279.92
TOTAL RENTAL CHARGES 328.36

THANK YOU FOR RENTING FROM HERTZ

Direct All Inquiries To:

HERTZ LOCAL EDITION
PO BOX 26120
OKLAHOMA CITY, OK 73126-0120
UNITED STATES

ALL CHARGES HAVE BEEN BILLED TO YOUR ACCOUNT.

Phone: 800-654-4173
Web: www.hertz.com

AMOUNT BILLED TO ACCOUNT: 48.44 USD

April 11, 2011

[REDACTED]
Ashland, MA [REDACTED]

Service Request: 71-693839355

Dear [REDACTED]

Thank you for contacting us recently regarding your 2005 Pontiac G6. We apologize for any inconvenience you have experienced.

We have reviewed your request for reimbursement and regret that we are unable to reimburse you the amount you requested

At Pontiac, our commitment to customer satisfaction is a top priority. We hope you understand our position. If you have future questions, please don't hesitate to email us using the Contact Us link at Pontiac.com or call us at 1-800-762-2737.

Sincerely,

Pontiac Customer Assistance Center

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

April 11, 2011

[REDACTED]
[REDACTED]
Miami, FL [REDACTED]

Service Request Number: 71-695213616

Dear [REDACTED]

We have received your request for assistance, but have been unable to contact you using the telephone number provided or any listed in our records.

If your situation has been resolved to your satisfaction, no further action is necessary. If it has not, we invite you call us at 1-800-533-6000. Please refer to the service request number listed above when you reach our representative.

Total customer satisfaction is important to us at Saturn. If we can be of any assistance, please don't hesitate to email us using the Contact Us link at Saturn.com or call us at 1-800-533-6000.

Sincerely,

Saturn Customer Assistance Center

Miami, Florida

SOUTH FLORIDA, PDC

FL 330

18 FEB 2009 PM 3 T



02-23-09A08:49 RCVD

**Saturn Customer Assistance Center
P. O. Box 33173
Detroit, Michigan 48232-5173**

Attn: Ms. Sherry Austin

48232+3173



February 17, 2009

Mr. Luis Vera
Vera Buick Pontiac GMC Saturn
19250 S. Dixie Highway
Miami, Florida 33157

Dear Mr. Vera:

I am an owner of a 2005 Saturn ION. This vehicle was purchased at the above referenced dealership which was owned at that time by Williamson Cadillac/Saturn. I am writing with a few concerns. They are as follows:

1. The car was brought in for service during the week of December 15, 2008. The problems were the lights in the dash and the front lights would blink erratically and the power steering would go out. (Which I find a very large concern with my daughter being the primary driver). It was diagnosed as having computer issues which turned out to include the replacement and re-programming of the computer which was the source of the power steering issue. The car was at the dealership for over 3 weeks. I picked up the car on Friday January 2, 2009. Upon payment of \$800.00, I got in the car only to find the "Change Oil" light on - you are going to tell me not a single technician saw this and a courtesy call could not have been placed to the customer to tell them an Oil Change was needed? I brought this up to Mr. DeArmas before I left the dealership and was told "You didn't bring it in for an oil change." I understand that statement only as far as the original reason was not an oil change. (Just another problem which I feel was not addressed.) Also, the inside of the driver's door was filthy. Grease was all over the inside. I took it directly back, and Eddie DeArmas had someone come out and clean the door. Again, I should not have had to do this! (There was also a leftover tool inside by the driver's seat). The problem with the power steering should have been rectified, right? **Wrong.**
2. The car continued to have issues with the computer and power steering to the point that I took the car back in on Friday, January 16th, only to be told, "It needs a new battery". That whole day I dealt with the dealership, your assistant Sheila, and the Saturn/GMC Customer Assistant Center (a very helpful woman named Sherry Austin. At that time, Sherry opened a file on the case (file #71-695213616). At the end of the day, the assistant service manager, Carlos DeJesus, told me the problem was the amplifier in the trunk, which was draining the battery. **Let me be perfectly clear – just as I told Mr. DeJesus, the amplifier was installed one week after we bought the car – so how can that be the problem????? It was just their way of shutting me up!!** The battery has since been replaced with a new battery.
3. On Thursday, February 12th, my daughter was driving the Saturn ION and the power steering went out again. Thank God, she was turning into our block. Just think what

could have happened if she had been driving on the turnpike and it were to go out -- would you want your wife or children behind the wheel?? I would think not.

4. I spoke to Sherry Austin with the Saturn/GMC Customer Service office on Tuesday, February 17, 2009 at 10:20 a.m. I advised her that the power steering went out again, she put me on 3-way with the dealership. I spoke to Rose, who took my number and Eddie DeArmas returned the call at 10:33 a.m., we arranged for me to take the Saturn ION in that afternoon. At that time, I wanted to advise Sheila of the situation, the reason being that she was very helpful on the 16th of January. I was not able to find her number, so I called the dealership, I spoke to Alimy (not sure of the spelling) who answered at the dealership. My concern here is her rudeness. If her job is to answer the switchboard and /or customer service, she should be **fired** for her **rudeness**. I wanted the number for either yourself or your assistant. When I asked Alimy, I was told very rudely she didn't have those numbers. I was rudely told that you are in this dealership a few times a week and that I could leave a message on your voice mail, which I did. I asked for your assistant's number and was, again, rudely told that she did not have it. I told her I was in the dealership before, went to the receptionist desk, asked for the number and was gladly given the number for your assistant. But, yet again, was not able to get the number for Sheila. Why was I dealt with so rudely?? I have since left messages for both yourself and Sheila today!! I hope to get a return phone call.
5. I spoke with Sheila, 2/17/09, at 12:09 p.m. I advised her of the situation and the outcome up to that time, and we agreed I will keep her updated as soon as I take the car to the dealership.

I would like to think that the vehicle will be repaired correctly this time. But, that remains to be seen. I would very much appreciate a response from you in reference to this on-going problem. I know you are a very busy person, but I believe there is still a way to make the time for customer satisfaction and to show genuine concern for the customer.

Sincerely,

[REDACTED]
[REDACTED]
[REDACTED]
Miami, Florida [REDACTED]

[REDACTED] Cell.
[REDACTED] Home

CC: Sherry Austin, Saturn Customer Assistance Center

North American Operations

General Motors Corporation

Disbursements (2613)

PO Box 62530

Phoenix, AZ 85082-2530

GM

CHECK

No. [REDACTED]

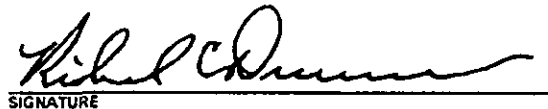
50-937
213DATE
01/24/08

*****615 DOLLARS

***85 CENTS

AMOUNT
*****615.85PAY
TO THE
ORDER
OF

KIRTLAND NM [REDACTED]

North American Operations
General Motors Corporation
Disbursement Account
SIGNATUREThe 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. [REDACTED]

PAYMENT
DATE

01/24/08

VENDOR
DUNS NO. BB 000000308

1

VENDOR NAME [REDACTED]

REGISTER NO.
DESCRIPTION

INVOICE DATE

DOC. REFERENCE NUMBER

% DISC.

INVOICE AMOUNT

DISC. AMOUNT

NET AMOUNT

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1G1ZT64815F [REDACTED]	01/23/08 71-594199	VH 1-9U6YD7 925.1-9U6YD7	00.0000	615.85	.00	615.85
TOTAL				615.85	.00	615.85

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

M3

TOTAL

615.85

.00

615.85

Kirtland, NM



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

DEC 26 2007

48232+5170-70 B050



CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: December 18, 2007 on August 13, 2007
 17-Digit Vehicle Identification Number (VIN): 1G1ZT64815F Repair expense
 Mileage at Time of Repair: 40,315 Date of Repair: August 13, 2007
 Claimant Name (please print): [REDACTED]
 Street Address or PO Box Number: [REDACTED]
 City: Kirtland State: New Mexico ZIP Code: [REDACTED]
 Daytime Telephone Number (include Area Code): [REDACTED]
 Evening Telephone Number (include Area Code): [REDACTED]
 Amount of Reimbursement Requested: \$ 1615.85

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: [REDACTED]

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).



December 18, 2007

Chevrolet
P. O. Box 909989
Milwaukee, WI 53209-9989

Dear Manager:

I am in receipt of a letter from your company about the 2005 Chevrolet Malibu vehicles losing their power steering assist. I do own a 2005 Chevrolet Malibu and have been experiencing such mentioned problems. In fact, I had to have it fixed or repaired twice already. Attached are the copies of the expense. One was in 07-18-06 which was repaired by the Chevrolet dealer when under warranty. A year later, experienced same problem and thought by getting an oil change on Saturday, August 11, 2007 would help but it didn't per note on bottom of oil change receipt. I did take it to the Dealer again same day and some technician named Lorenzo checked it out and tried to fix it but it acted up again the next day so I barely drove it to the Dealer and left it there to get it repaired on Monday, August 13, 2007. This time I had to pay for the expense and it was paid in the amount of \$615.85 per attached receipt. It was paid in cash.

I am requesting reimbursement in the amount of \$615.85. Thank you for your consideration and cooperation in this matter.

Sincerely,



Kirtland, New Mexico



COPY

WEBB AUTOMOTIVE GROUP

CHEVROLET - CADILLAC - TOYOTA
3811 East Main • Farmington, NM 87499 • (505) 325-1911
E mail - webbauto@mstar2.net
Website - www.webbauto.com

CUSTOMER NO. 86449	ADVISOR DOUG RELYEA	385	TAG NO. 054	INVOICE DATE 08/13/07	INVOICE NO. CVCS201578
	LABOR RATE 78.75	LICENSE NO.	MILEAGE 40,315	COLOR RED/	STOCK NO.
KIRTLAND, NM	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4 DOOR COUPE			DELIVERY DATE	DELIVERY MILES
	VEHICLE ID. NO. 1G1ZT64815F			SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.	P.O. NO.		R.G. DATE 08/13/07	
	BUSINESS PHONE	COMMENTS			
MO: 40315					

LABOR & PARTS
J# 1 07CVZ STEERING HOURS: 2.50 TECH(S):430 196.88
CUST ADVISE STEERING GETS HARD WHEN TURNING
DIAG. AND FOUND CODE C0545 POWER STEERING CONTROL MODULE
STEERING WHEEL TORQUE INPUT SENSOR.
REPLACED INPUT SENSOR AND STEERING COLUMN. TEST DROVE AND
DROVE FINE. DID NOT TURN HAR.

PARTS	QTY	FP NUMBER	DESCRIPTION	LIST PRICE	UNIT PRICE	PRICE
JOB # 1	1	15926870	COLUMN 6.518	359.00	359.00	359.00
J# 1 TOTAL PARTS						359.00
J# 1 TOTAL LABOR & PARTS						555.88

MISC	CODE	DESCRIPTION	CONTROL NO	PRICE
JOB # A	WM	WASTE MANAGEMENT FEE		9.84
JOB # A	SS	SHOP SUPPLIES		9.84
TOTAL - MISC				19.68

ESTIMATE
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
ORIGINAL ESTIMATE OF \$630.00 (+TAX)

TOTALS

* NEXT RECOMMENDED SERVICE: *
* 09/24/2007 / 43315 MI 21CVNP LOFNP *

Thank you for choosing Webb Automotive Group. Our goal is to make sure that you are COMPLETELY SATISFIED and and that you will DEFINITELY RECOMMEND us to your friends. We have ASE certified technicians with the best training record of any shop in the area. If for any reason you are not COMPLETELY SATISFIED please let us know.

505-325-1911 CASH CHECK# [] CR CARD

CUSTOMER SIGNATURE

TOTAL LABOR....	196.88
TOTAL PARTS....	359.00
TOTAL SUBLET....	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	19.68
TOTAL MISC DISC	0.00
TOTAL TAX.....	40.29

TOTAL INVOICE \$ 615.85

TERMS: STRICTLY CASH, MAJOR CREDIT CARDS OR APPROVED CHECKS.

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

DISCLAIMER OF WARRANTIES

The only warranties, if any, applying to the part(s) and/or service are those made by the manufacturer. The selling dealer hereby expressly disclaims all warranties, either express or implied, including any implied warranty 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, damages for loss of use, loss of time, loss of profits or income, or any other incidental damages.

SHOP SUPPLIES

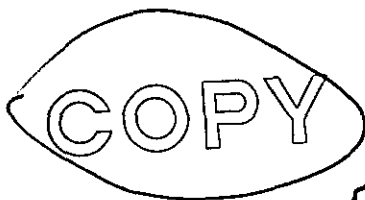
A CHARGE IS INCLUDED FOR SUPPLIES USED ON YOUR VEHICLE. APPLICABLE SUPPLY ITEMS ARE: NUTS, BOLTS WASHERS, TAPE, PINS, AEROSPRAY, SHELLAC, SOLVENTS, RAGS, CARBURETOR CLEANER, TOWELS, SOLDER, BATTERY CLEANER, WIRE, WINDOW SEALER, ETC.

WASTE MANAGEMENT FEES

MAINTAINING AND REPAIRING YOUR CAR INEVITABLY INVOLVES THE USE OF CHEMICALS AND THE GENERATION OF WASTE INCLUDING SOLVENTS, OILS, CAUSTICS, LEAD, PAINTS, ETC. THESE MUST BE MANAGED AND DISPOSED OF IN STRICT COMPLIANCE WITH NATIONAL, STATE, AND LOCAL REGULATIONS. WE SUPPORT THESE REGULATIONS BECAUSE WE CARE ABOUT A CLEAN, SAFE ENVIRONMENT. A CHARGE IS INCLUDED ON THIS INVOICE FOR WASTE MANAGEMENT.

Thank You

FOR BRINGING YOUR CAR TO US FOR SERVICE



WEBB AUTOMOTIVE GROUP

CHEVROLET - CADILLAC - TOYOTA

3911 East Main • Farmington, NM 87499 • (505) 325-1911

E mail - webbauto@star2.net

Website - www.webbauto.com

CUSTOMER NO. 86449	ADVISOR DOUG RELYEA	385	INVOICE DATE 07/18/06	INVOICE NO. CVCS181664
KIRTLAND, NM	LABOR RATE 73.00	LICENSE NO.	MILEAGE 14,674	COLOR RED/
	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU/4 DOOR COUPE			DELIVERY DATE
	VEHICLE I.D. NO. 1 G 1 Z T 6 4 8 1 5 F			DELIVERY MILES
	F.T.E. NO.			SELLING DEALER NO.
BUSINESS PHONE		P.O. NO.		R.O. DATE 07/13/06
COMMENTS MO: 14579				

LABOR & PARTS
JOB # 1 07CVZ STEERING HOURS: TECH(S):403
CUST ADVISE SERVICE POWER STEERING IS DISPLAYING AND
STEERING GETS HARD
CODE C0545 STEERING WHEEL TORQUE INPUT SENSER. DIAG TESTS
FOUND INPUT SENSER FAULTY. DOC# 1241508
REPLACED MOTOR ASSEMBLY. CALIBRATED. CLEARED CODES. TEST
DROVE. OK

WARRANTY

TERMS: STRICTLY CASH. MAJOR CREDIT
CARDS OR APPROVED CHECKS.

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

DISCLAIMER OF WARRANTIES

PARTS-----QTY-----FP-NUMBER-----DESCRIPTION-----LIST PRICE-UNIT PRICE-
JOB # 1 1 15775370 MOTOR 6.605

JOB # 1 TOTAL PARTS

WARRANTY
0.00

JOB # 1 TOTAL LABOR & PARTS

0.00

G.O.G. & SUPPLIES
JOB # 1 FREIGHT (PARTS)

TOTAL - GOG

WARRANTY
0.00

TOTALS

* NEXT RECOMMENDED SERVICE:

* 10/12/2006 / 17679 MI 21CVNP

LOFNP

Thank you for choosing Webb Automotive Group. Our goal
is to make sure that you are COMPLETELY SATISFIED and
and that you will DEFINITELY RECOMMEND us to your
friends. We have ASE certified technicians with the best
training record of any shop in the area. If for any reason
you are not COMPLETELY SATISFIED please let us know.

505-325-1911 CASH CHECK#[] CR CARD

TOTAL LABOR.... 0.00
TOTAL PARTS.... 0.00
TOTAL SUBLET.... 0.00
TOTAL G.O.G.... 0.00
TOTAL MISC CHG. 0.00
TOTAL MISC DISC 0.00
TOTAL TAX..... 0.00
TOTAL INVOICE \$ 0.00

SHOP SUPPLIES

A CHARGE IS INCLUDED FOR SUPPLIES
USED ON YOUR VEHICLE. APPLICABLE
SUPPLY ITEMS ARE: NUTS, BOLTS
WASHERS, TAPE, PINS, AEROSPRAY,
SHELLAC, SOLVENTS, RAGS, CARBU-
RETOR CLEANER, TOWELS, SOLDER,
BATTERY CLEANER, WIRE, WINDOW
SEALER, ETC.

WASTE MANAGEMENT FEES

MAINTAINING AND REPAIRING YOUR CAR
INEVITABLY INVOLVES THE USE OF CHEMI-
CALS AND THE GENERATION OF WASTE
INCLUDING SOLVENTS, OILS, CAUSTICS,
LEAD, PAINTS, ETC. THESE MUST BE MAN-
AGED AND DISPOSED OF IN STRICT COM-
PLIANCE WITH NATIONAL, STATE, AND
LOCAL REGULATIONS. WE SUPPORT THESE
REGULATIONS BECAUSE WE CARE ABOUT
A CLEAN, SAFE ENVIRONMENT. A CHARGE
IS INCLUDED ON THIS INVOICE FOR WASTE
MANAGEMENT.

Thank You

FOR BRINGING YOUR CAR
TO US FOR SERVICE

CUSTOMER SIGNATURE

STORE# 0826
 4600 EAST MAIN
 FARMINGTON, NM 87402-0000 US
 (505)326-1100
 LIC# NEW MEXICO
 Service Order:



485700 23097

TR # 07154

DATE 08-11-2007	NAME [REDACTED]	, NM		PHONE # [REDACTED]
YEAR 2005	MAKE CHEVROLET	MODEL MALIBU	COLOR Maroon	
LICENSE [REDACTED]	ODOMETER 40270	CUSTOMER ARRIVAL TIME 2007-08-11 11:09 AM	SERVICE COMPLETED TIME 2007-08-11 11:23 AM	

Service Description	Service
VALUE PACKAGE - Front Signal Light - CHECKED - Tail Lights - CHECKED - Third Brake Light - CHECKED - Head Light High Beam - CHECKED - Vacuum Carpet - COMPLETE - Wiper - Psngr - CHECKED - Oil - REPLACED, 4.0 Qts - Additive - NOT APPLICABLE - Transmission Fluid - DECLINED Scaled System - Power Steering - CHECKED - Transfer Case Fluid - NOT APPLICABLE - Tire Pressure - CHECKED, Ft.30 R.30 - Pre Service Oil Check - CHECKED, Half Quart Low - Rear Signal Light - CHECKED - Brake Lights - CHECKED - Head Light Low Beam - CHECKED - Wash Windshield - COMPLETE - Wiper - Driver - CHECKED - Wiper - Rear - NOT APPLICABLE - Oil Filter - REPLACED - Air Filter - CHECKED - Washer Fluid - FILLED - Differential Fluid - NOT APPLICABLE - Grease Fittings - COMPLETE, 0 Ftngs - Oil Pressure - CHECKED - West Battery - TESTED GOOD TREAD DEPTH Driver Front - 7/32 Driver Rear - 7/32 Passenger Rear - 7/32 Passenger Front - 7/32	25.96

Merchandise Description	Quantity	Unit Price	Merchandise
PENNZ 5W30 BULK	4.0	1.85	Included
PRO 3387A OILFILTER	1	1.97	Included
Total (Excluding Tax)			25.96

I do agree and fully understand that my motor vehicle had a low oil level when I brought it to Wal-Mart for an oil change. This was pointed out to me, that I willingly requested Wal-Mart to change the oil. I will not hold Wal-Mart responsible for any damage to my motor vehicle by the low oil level.

Customer Comments

Technician Comments

"Power Steering" Notice came on again prior + after oil change. Let technician know. Later took to Wal-Mart Chevrolet; Lorenzo said he censured it + should work. If not to bring in on Monday 8-13-07.

DISCLAIMER

I hereby authorize the stated repair work to be done along with the necessary material, and hereby grant Wal-Mart permission to operate the vehicle 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 vehicle to secure the amount of repairs thereto. WAL-MART IS NOT RESPONSIBLE FOR LOSS OR DAMAGE TO VEHICLES OR ARTICLES LEFT IN VEHICLES IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE BEYOND WAL-MART'S CONTROL.

08-11-2007

CUSTOMER SIGNATURE _____ DATE _____

SIGNED _____

DATE _____

COURTESY TECHNICIAN: ROBERT 5767
 LOWER BAY TECHNICIAN: JOSEPH 5654
 SERV WRTR/GREETER: CORNELIA 5793
 UPPER BAY TECHNICIAN: JOSHUA 5429

HAVE YOUR LUG NUTS RETORQUED AFTER THE FIRST 50 MILES.

February 4, 2011

[REDACTED]

Kirtland, NM [REDACTED]

Service Request: 71-594199925

Customer Relationship Specialist: Diana Smith

Dear [REDACTED]

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 \$615.85.

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.mygmilink.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)**

April 11, 2011

[REDACTED]
Rochester, NY [REDACTED]

Service Request Number: 71-696480497

Dear [REDACTED]

We have received your request for assistance, but have been unable to contact you using the telephone number provided or any listed in our records.

If your situation has been resolved to your satisfaction, no further action is necessary. If it has not, we invite you call us at 1-800-222-1020. Please refer to the service request number listed above when you reach our representative.

Total customer satisfaction is important to us at Chevrolet. If we can be of any assistance, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

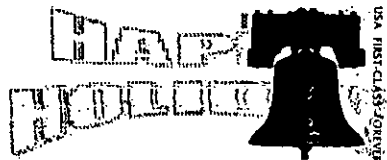
Sincerely,

Chevrolet Customer Assistance Center

Rochester, NY

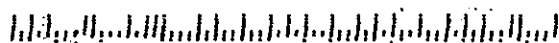
ROCHESTER NY 146

16 DEC 2008 PM 3 T

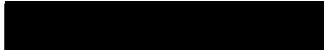


Chevrolet
P.O. Box 909989
Milwaukee, WI
53209-9989

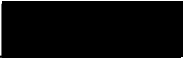
53209-9989 RCVD



To Whom It May Concern, I Have owned a Chevy product since 1977. I am Chevy Malibu. I am pleased with the car but, the manufacturing of the car is 9,068 miles on it when they found broken welds on the resonator assembly and steering shaft. The dealer took care of these things as the car was under warranty. I paid a lot of money for a vehicle, you think it would be quite a while for 9,068 miles they had to replace the front and rear pads and machine the rotors. I had the gear assembly, power steering E9740. Before that it was a loose steering assembly. The dealership is wonderful and Phil Garfola is wonderful. He is more people like him. You should also bring back the jobs to the US. Years ago I was in the work but nowadays I don't think it's there. Everyone is out to see what you can do. I hope you can make a better product which held up like they did once I was an owner,



07126 1G1ZT52845F



13 0008829

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

April 11, 2011

[REDACTED]
Saint Louis, MO [REDACTED]

Service request: 71-700786140

Vehicle Identification Number: 1G1ZS58F67F [REDACTED]

Customer Relationship Specialist: Michelle Oglesby

Dear [REDACTED]:

Thank you for allowing us the opportunity to review the product allegation involving your 2007 Chevrolet Malibu. Unfortunately, our attempts to reach you by phone on 2/11 AM, 2/11 PM, and 2/12 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

ATTN : STACEY

FROM : CASHIER

PLEASE call with
payment
THANK you

314-837-1800
X 318

Charged to End of
month

3278407

319869



INVOICE

1375 DUNN ROAD
1-270 AT WASHINGTON AVE.
FLORISSANT, MISSOURI 63031
(314) 837-1800

PAGE 1

SERVICE ADVISOR: 392 TODD HOEFERLIN

ST. LOUIS, MO

HOME [REDACTED] BUS:

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG	
	07	CHEVROLET MALIBU	1G1ZS58F67F		27831/27831	TT978	
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
18MAY07 DD			15:36 03MAR09		120.00	CASH	03MAR09
R.O. OPENED		READY	OPTIONS: DLR:03509 ENG:2.2 Liter MFI DOHC				

10:07 03MAR09 10:24 03MAR09

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A OWNER STATES LEFT TAIL LAMP ASSY IS CRACKED--WILL BE PAID FOR BY GM

S10 MISCELANEOUS REPAIR

865 STEINKUEHLER, RONALD LIC#: Y

C 0.30

35.16 35.16

1 15868494 LAMP

261.12 219.34 219.34

PARTS: 219.34 LABOR: 35.16 OTHER: 0.00 TOTAL LINE A: 254.50

TELEPHONE NO. (314) 8371800

SERVICE HOURS 7:00-6:00 MON-FRI

ALL NEW PARTS AND LABOR ARE WARRANTIED FOR 12
MONTHS OR 12,000 MILES WHICHEVER EVENT FIRST
OCCURS

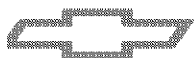
Thank You!
for allowing us to service
your vehicle

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 any liability in connection with the sale of this item/items.

DESCRIPTION	TOTALS
LABOR AMOUNT	35.16
PARTS AMOUNT	219.34
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	254.50
LESS	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	254.50

CUSTOMER COPY



GMC

HUMMER

General Motors Business Resource Center

FAX

To: Bill Lee

Company:

Fax: 1-314-831-8395

Phone:

From: Michelle Oglesby

Fax: 866-857-3114

Phone: 866-790-5600 x31394

E-mail:

CC:

NOTES:

PLEASE FOLLOW THE INFORMATION ON THE FOLLOWING PAGE WHEN SUBMITTING THE CLAIM. PLEASE VERIFY THAT EVERYTHING IS CORRECT. IF NOT, DO NOT SUBMIT AND CONTACT GENERAL MOTORS AS SOON AS POSSIBLE.

IF CORRECT, SUBMIT IN NET AMOUNT, DO NOT USE ANY AUTH CODES, DO NOT SUBMIT LABOR HOURS, PART COSTS OR H ROUTE THIS CLAIM. SUBMIT THIS CLAIM ON OR AFTER 03/10/09. IF THIS CLAIM REJECTS, CONTACT US AND WE WILL PUSH IT THROUGH TO YOUR CREDIT MEMO.

PAR GMWA

Pre-Authorization/Warranty Claim Tracking Form

Customer and Vehicle Information			
Date	2/27/09	Service Request #	71-700786140
Customer Name			
VIN	1G1ZS58F67F		
In-Service Date	5/18/2007	Service Contract?	No
Current Mileage	27830	Purchased New/Used?	New
Warranty Blocked?	No		
Branded Title?	No	Mileage at Purchase	0
Dealer and Claim Information			
Dealer Name	Johnny Londoff Chevrolet		
Dealer Svc Mgr	Bruce Weiner	Dlr Warranty Admin:	Bill Lee
Dealer Phone	(314) 837-1800	Dealer Fax	314-831-8395
Dealer BAC	111331		
Dealer Division and Code	13-Chevy-03509		
Repair Order Number	319869		
Repair Order Close Date	2/27/09		
Labor Op. Code Z1242	Dollar Amt:	254.50	
Labor Op. Code Z1243	Dollar Amt:		
Cause Code (CC)	MJ		
Failure Code (FC)	98		
PUT EVERYTHING IN NET AMOUNT			
Labor Hours and OLH:	DO NOT PUT IN HOURS		
Parts and Labor Costs:	DO NOT PUT IN COSTS		
Net Amount:	254.50		
DO NOT H ROUTE THIS CLAIM			
Authorization Code:	DO NOT PUT IN AN AUTH CODE		
Additional Comments for Dealer:			
IF THIS CLAIM SHOULD REJECT FOR ANY REASON, PLEASE CONTACT ME ASAP			
AND FAX A COPY OF THE REJECTION W/TRACKING FORM TO (866) 857-3114			
Retain Copy with Dealer Repair Order			
Internal PAR Information			
Complaint:	Power steering failure caused cust to collide with another vehicle, breaking her tail light.		
Cause:	n/a		
Correction:	Repair tail light since cause was not customer's fault.		
Justification:	Repair vehicle		
PAR CRS:	Michelle Oglesby		
Additional Comments:	Thank You!		

ATTN : STACEY

FROM : CASHIER

PLEASE CALL WITH

PAYMENT

THANK YOU

314-837-1800

X 318

3278407

319617

Johnny Londoff

INVOICE

1375 DUNN ROAD
1-270 AT WASHINGTON AVE.
FLORISSANT, MISSOURI 63031
(314) 837-1800

ST. LOUIS, MO
HOME

BUS:

PAGE 1

SERVICE ADVISOR: 392 TODD HOEFERLIN

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG
	07	CHEVROLET MALIBU	1G1ZS58F67E		27830/27830	T978
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT
18MAY07 DD			WAIT 26FEB09		120.00	CASH
R.O. OPENED	READY	OPTIONS: DLR:03509 ENG:2.2 Liter MFI DOHC				
16:23 25FEB09	14:48 27FEB09					

LINE OPCODE TECH TYPE HOURS

A OWNER STATES LEFT REAR TAIL LAMP IS CRACKED

S10 LEFT TAIL LAMP REPLACE

865 STEINKUEHLER, RONALD LIC#: Y

C 0.30

1 15868494 LAMP

36.00 36.00

PARTS: 261.12 LABOR: 36.00 OTHER: 0.00 TOTAL LINE A: 297.12

27830 *****SEE BRUCE WEINER FOR PAYMENT DETAILS***** REPLACE LR TAIL LAMP ASSY.

CUSTOMER PAY ENVIRONMTL DISP FOR REPAIR ORDER

1.80

TELEPHONE NO. (314) 8371800

SERVICE HOURS 7:00-6:00 MON-FRI

ALL NEW PARTS AND LABOR ARE WARRANTIED FOR 12
MONTHS OR 12,000 MILES WHICHEVER EVENT FIRST
OCCURS

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 any liability in connection with the sale of this item/items.

DESCRIPTION	TOTALS
LABOR AMOUNT	36.00
PARTS AMOUNT	261.12
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	1.80
TOTAL CHARGES	298.92
LESS	0.00
SALES TAX	18.60
PLEASE PAY THIS AMOUNT	317.52

Thank You!

*for allowing us to service
your vehicle*

CUSTOMER COPY

200

JOHNNY LONDOFF

02/27/2009 15:05 FAX 3148301722

PAR GMWA

Pre-Authorization/Warranty Claim Tracking Form

Customer and Vehicle Information			
Date	2/27/09	Service Request #	71-700786140
Customer Name	[REDACTED]		
VIN	1G1ZS58F67F [REDACTED]		
In-Service Date	5/18/2007	Service Contract?	No
Current Mileage	27830	Purchased New/Used?	New
Warranty Blocked?	No		
Branded Title?	No	Mileage at Purchase	0
Dealer and Claim Information			
Dealer Name	Johnny Londoff Chevrolet		
Dealer Svc Mgr	Bruce Weiner	Dir Warranty Admin:	Bill Lee
Dealer Phone	(314) 837-1800	Dealer Fax	314-831-8395
Dealer BAC	111331		
Dealer Division and Code	13-Chevy-03509		
Repair Order Number	319617		
Repair Order Close Date	2/27/09		
Labor Op. Code Z1242	Dollar Amt:	317.52	
Labor Op. Code Z1243	Dollar Amt:		
Cause Code (CC)	MJ		
Failure Code (FC)	98		
PUT EVERYTHING IN NET AMOUNT			
Labor Hours and OLH:	DO NOT PUT IN HOURS		
Parts and Labor Costs:	DO NOT PUT IN COSTS		
Net Amount:	317.52		
DO NOT H ROUTE THIS CLAIM			
Authorization Code:	DO NOT PUT IN AN AUTH CODE		
Additional Comments for Dealer:			
IF THIS CLAIM SHOULD REJECT FOR ANY REASON, PLEASE CONTACT ME ASAP			
AND FAX A COPY OF THE REJECTION W/TRACKING FORM TO (866) 857-3114			
Retain Copy with Dealer Repair Order			
Internal PAR Information			
Complaint:	Power steering failure caused cust to collide with another vehicle, breaking her tail light.		
Cause:	n/a		
Correction:	Repair tail light since cause was not customer's fault.		
Justification:	Repair vehicle		
PAR CRS:	Michelle Oglesby		
Additional Comments:	Thank You!		

PAR GMWA

Pre-Authorization/Warranty Claim Tracking Form

Customer and Vehicle Information			
Date	2/27/09	Service Request #	71-700786140
Customer Name	[REDACTED]		
VIN	1G1ZS58F67F [REDACTED]		
In-Service Date	5/18/2007	Service Contract?	No
Current Mileage	27830	Purchased New/Used?	New
Warranty Blocked?	No		
Branded Title?	No	Mileage at Purchase	0
Dealer and Claim Information			
Dealer Name	Johnny Londoff Chevrolet		
Dealer Svc Mgr	Bruce Weiner	Dir Warranty Admin:	Bill Lee
Dealer Phone	(314) 837-1800	Dealer Fax	314-831-8395
Dealer BAC	111331		
Dealer Division and Code	13-Chevy-03509		
Repair Order Number	319617		
Repair Order Close Date	2/27/09		
Labor Op. Code Z1242	Dollar Amt:	297.12	
Labor Op. Code Z1243	Dollar Amt:		
Cause Code (CC)	MJ		
Failure Code (FC)	98		
PUT EVERYTHING IN NET AMOUNT			
Labor Hours and OLH:	DO NOT PUT IN HOURS		
Parts and Labor Costs:	DO NOT PUT IN COSTS		
Net Amount:	297.12		
DO NOT H ROUTE THIS CLAIM			
Authorization Code:	DO NOT PUT IN AN AUTH CODE		
Additional Comments for Dealer:			
IF THIS CLAIM SHOULD REJECT FOR ANY REASON, PLEASE CONTACT ME ASAP			
AND FAX A COPY OF THE REJECTION W/TRACKING FORM TO (866) 857-3114			
Retain Copy with Dealer Repair Order			
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Justification:	Repair vehicle		
PAR CRS:	Michelle Oglesby		
Additional Comments:	Thank You!		

PAR GMWA

Pre-Authorization/Warranty Claim Tracking Form

Customer and Vehicle Information			
Date	2/27/09	Service Request #	71-700786140
Customer Name	[REDACTED]		
VIN	1G1ZS58F67F [REDACTED]		
In-Service Date	5/18/2007	Service Contract?	No
Current Mileage	27830	Purchased New/Used?	New
Warranty Blocked?	No		
Branded Title?	No	Mileage at Purchase	0
Dealer and Claim Information			
Dealer Name	Johnny Londoff Chevrolet		
Dealer Svc Mgr	Bruce Weiner	Dir Warranty Admin:	Bill Lee
Dealer Phone	(314) 837-1800	Dealer Fax	314-831-8395
Dealer BAC	111331		
Dealer Division and Code	13-Chevy-03509		
Repair Order Number	319869		
Repair Order Close Date	2/27/09		
Labor Op. Code Z1242	Dollar Amt:	254.50	
Labor Op. Code Z1243	Dollar Amt:		
Cause Code (CC)	MJ		
Failure Code (FC)	98		
PUT EVERYTHING IN NET AMOUNT			
Labor Hours and OLH:	DO NOT PUT IN HOURS		
Parts and Labor Costs:	DO NOT PUT IN COSTS		
Net Amount:	254.50		
DO NOT H ROUTE THIS CLAIM			
Authorization Code:	DO NOT PUT IN AN AUTH CODE		
Additional Comments for Dealer:			
IF THIS CLAIM SHOULD REJECT FOR ANY REASON, PLEASE CONTACT ME ASAP			
AND FAX A COPY OF THE REJECTION W/TRACKING FORM TO (866) 857-3114			
Retain Copy with Dealer Repair Order			
Internal PAR Information			
Complaint:	Power steering failure caused cust to collide with another vehicle, breaking her tail light.		
Cause:	n/a		
Correction:	Repair tail light since cause was not customer's fault.		
Justification:	Repair vehicle		
PAR CRS:	Michelle Oglesby		
Additional Comments:	Thank You!		

PAR GMWA

Pre-Authorization/Warranty Claim Tracking Form

Customer and Vehicle Information			
Date	2/27/09	Service Request #	71-700786140
Customer Name	[REDACTED]		
VIN	1G1ZS58F67F [REDACTED]		
In-Service Date	5/18/2007	Service Contract?	No
Current Mileage	27830	Purchased New/Used?	New
Warranty Blocked?	No		
Branded Title?	No	Mileage at Purchase	0
Dealer and Claim Information			
Dealer Name	Johnny Londoff Chevrolet		
Dealer Svc Mgr	Bruce Weiner	Dlr Warranty Admin:	Bill Lee
Dealer Phone	(314) 837-1800	Dealer Fax	314-831-8395
Dealer BAC	111331		
Dealer Division and Code	13-Chevy-03509		
Repair Order Number	319869		
Repair Order Close Date	2/27/09		
Labor Op. Code Z1242	Dollar Amt:	254.50	
Labor Op. Code Z1243	Dollar Amt:		
Cause Code (CC)	MJ		
Failure Code (FC)	98		
PUT EVERYTHING IN NET AMOUNT			
Labor Hours and OLH:	DO NOT PUT IN HOURS		
Parts and Labor Costs:	DO NOT PUT IN COSTS		
Net Amount:	254.50		
DO NOT ROUTE THIS CLAIM			
Authorization Code:	DO NOT PUT IN AN AUTH CODE		
Additional Comments for Dealer:			
IF THIS CLAIM SHOULD REJECT FOR ANY REASON, PLEASE CONTACT ME ASAP			
AND FAX A COPY OF THE REJECTION W/TRACKING FORM TO (866) 857-3114			
Retain Copy with Dealer Repair Order			
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Cause:	n/a		
Correction:	Repair tail light since cause was not customer's fault.		
Justification:	Repair vehicle		
PAR CRS:	Michelle Oglesby		
Additional Comments:	Thank You!		

ATTN : STACEY

FROM : CASHIER

PLEASE CALL WITH
PAYMENT
THANK YOU

314-837-1800
X 318

Charged to END of
month

3 1 9 6 1 7



*** INVOICE ***

1375 DUNN ROAD
I-270 AT WASHINGTON AVE.
FLORISSANT, MISSOURI 63031
(314) 837-1800

ST. LOUIS, MO

HOME : BUS :

DUPLICATE 3
PAGE 1

SERVICE ADVISOR: 392 TODD HOEFERLIN

SERVICE ADVISOR: 392 TODD HOEFERLIN

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG	
	07	CHEVROLET MALIBU	1G1ZS58F67F		27830/27830	T978	
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
18MAY07 DD			WAIT 26FEB09		120.00	CHG	27FEB09
R.O. OPENED		READY	OPTIONS: DLR:03509 ENG:2.2 Liter MFI DOHC				

16:23 25FEB09	15:06 27FEB09
---------------	---------------

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
------	--------	------	------	-------	------	-----	-------

A OWNER STATES LEFT REAR TAIL LAMP IS CRACKED

S10 LEFT TAIL LAMP REPLACE

865 STEINKUEHLER, RONALD LIC#: Y

C 0.30

36.00	36.00
-------	-------

1 15868494 LAMP

PARTS:	261.12	LABOR:	36.00	OTHER:	0.00	TOTAL LINE A:	297.12
--------	--------	--------	-------	--------	------	---------------	--------

27830 *****SEE BRUCE WEINER FOR PAYMENT DETAILS***** REPLACE LR TAIL LAMP
ASSY.

TELEPHONE NO. (314) 8371800

SERVICE HOURS 7:00-6:00 MON-FRI

ALL NEW PARTS AND LABOR ARE WARRANTED FOR 12 MONTHS OR 12,000 MILES WHICHEVER EVENT FIRST OCCURS

Thank You!

for allowing us to service
your vehicle

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 any liability in connection with the sale of this item/items.

DESCRIPTION	TOTALS
LABOR AMOUNT	36.00
PARTS AMOUNT	261.12
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	0.00
TOTAL CHARGES	297.12
LESS	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	297.12

CUSTOMER COPY

200 

JOHNNY LONDOFF

03/02/2009 10:23 FAX 3148301729

TULSA OK 740

12 FEB 2009 PM 3:47



TULSA, OK

02-17-09A08:36 RCVD

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

REIMBURSEMENT Dept.

P.O. BOX 33170

DETROIT,

48232+3170

48232-3170

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 12 FEB. 2009

17-Digit Vehicle Identification Number (VIN): 1G1ZT64825F [REDACTED]

Mileage at Time of Repair: 60,961 Date of Repair: 8-5-08

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: TULSA State: OK ZIP Code: [REDACTED]

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

Evening Telephone Number (include Area Code): SAME

Amount of Reimbursement Requested: \$ 657.77

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)

PAID CASH

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

*Mailed
2-12-09*





Classic

Your CHEVY Connection

8501 OWASSO EXPRESSWAY OWASSO, OK 74055 (918) 272-1101

ORIGINAL

GM Goodwrench.

Insist on GENUINE



GM Parts.

CUSTOMER NO. 69597	ADVISOR O DALE GARRISON	TAG NO. 457 1012	INVOICE DATE 08/05/08	INVOICE NO. CVCS291687
TULSA, OK	LABOR RATE	LICENSE NO.	MILEAGE 6,096	COLOR WHITE/
	YEAR / MAKE / MODEL 05/CHEVROLET/MALIBU			DELIVERY DATE
	VEHICLE I.D. NO. 1 G 1 Z T 6 4 8 2 5 F			SELLING DEALER NO.
	F.T.E. NO.			P.O. NO.
	R.O. DATE 08/02/08			PRODUCTION DATE
BUSINESS PHONE	COMMENTS			MO: 6098

LABOR & PARTS
J# 1 20CVZ STEERING HOURS: 2.50 TECH(S):960 221.55
CUSTOMER STATES: POWER STEERING LIGHT CAME ON AND HAD NO
POWER STEERING
CAUSE: DTC C0545 STEERING TORQUE SENSOR FAILURE
CORRECTION: REPLACED STEERING COLUMN RECALIBRATE STEERING

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 1	1	15926870	COLUMN 6.518	376.95
JOB # 1 TOTAL PARTS				376.95

JOB # 1 TOTAL LABOR & PARTS 598.50

J# 2 98CVZ ALT. TRANS. HOURS: TECH(S):269 0.00

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 2 TOTAL PARTS				0.00

JOB # 2 TOTAL LABOR & PARTS 0.00

J# 3 96CVZ COURTESY WASH HOURS: TECH(S):269 0.00
CORRECTION: PERFORMED COURTESY WASH

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 3 TOTAL PARTS				0.00

JOB # 3 TOTAL LABOR & PARTS 0.00

MISC	CODE	DESCRIPTION	CONTROL NO
JOB # A	SS	ENVIRO WASTE @ SHOP SUPPLIES	
TOTAL - MISC			19.50

TOTALS

***** THANK YOU FOR CHOOSING CLASSIC CHEVROLET *****

WE ARE VERY INTERESTED IN YOUR OPINION
YOU MAY SOON RECEIVE A SURVEY FROM YOUR VEHICLE MANUFACTURER
IF YOU CANNOT ANSWER ALL QUESTIONS "COMPLETELY SATISFIED"

PLEASE CONTACT YOUR SERVICE ADVISOR
*** ED MCLAUGHLIN = 918-272-7348 ***
*** DALE GARRISON = 918-272-7344 ***
*** CHARLIE MERZ = 918-272-7344 ***

PARTS DESIGNATED WITH AN (ASTERISK) INDICATES LIFETIME
GUARANTEE FOR CUSTOMER PAY REPAIRS

TOTAL LABOR....	221.55
TOTAL PARTS....	376.95
TOTAL SUBLET...	0.00
TOTAL G.O.G....	0.00
TOTAL MISC CHG.	19.50
TOTAL MISC DISC	0.00
TOTAL TAX.....	33.77

TOTAL INVOICE \$ 651.77

THANK YOU FOR YOUR BUSINESS !!!!!

[] VISA [] A/E [X] CASH [] CHARGE#
[] M/C [] DISCOVER [] CHECK

CUSTOMER SIGNATURE

IMPORTANT

YOU MAY RECEIVE A QUESTIONNAIRE
FROM GM IN THE NEXT FEW DAYS. IF
FOR ANY REASON YOU CANNOT GRADE
US "COMPLETELY SATISFIED" PLEASE
CONTACT OUR SERVICE MANAGER.

THANK YOU

SERVICE HOURS

MONDAY TO FRIDAY
7:00 A.M. TO 6:00 P.M.
SATURDAY
8:00 A.M. TO 1:00 P.M.

PARTS HOURS

MONDAY TO FRIDAY
7:00 A.M. TO 6:00 P.M.
SATURDAY
8:00 A.M. TO 1:00 P.M.

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

SUPPLIES - A token charge equivalent to
10% of the labor charge is included for
supplies used on your vehicle. Maximum
charge of \$19.50. Applicable supply items
are: Nuts, bolts, washers, tape, pins,
aerospray, shellac, solvent, rags,
carburetor cleaner, towels, solder, battery
cleaner, wire, window sealer, hazardous
waste, etc.

THANK YOU FOR THIS OPPORTUNITY
TO SERVE YOU. IT IS OUR AIM TO PER-
FORM ALL THE REPAIRS REQUESTED
ON THIS REPAIR ORDER TO YOUR
COMPLETE SATISFACTION. IF OUR
SERVICE WAS SATISFACTORY TELL
YOUR FRIENDS, IF NOT PLEASE TELL
US IMMEDIATELY.

THANK YOU
CLASSIC CHEVROLET

11-3170

WARRANTY ON NEW GENERAL MOTORS SERVICE REPLACEMENT PARTS AND ACCESSORIES

"The Dealer" warrants that (1) for a period of 12 months after sale of new General Motors replacement Parts and Accessories "over-the-counter", or (2) within 12 months or 12,000 miles, whichever first occurs, after installation thereof by our dealership on a motor vehicle, it will repair or furnish a replacement part for any defective or malfunctioning part or accessory.

This warranty covers only repairs or replacements made necessary due to defects in material or workmanship. It does not cover conditions resulting from negligence, alteration, accident or use for which the part or accessory was not designed or approved by General Motors; loss of time, inconvenience, loss of use of the vehicle or other consequential damages; or labor for removal from the vehicle and reinstallation of a part or accessory sold "over-the-counter". Repairs or replacements qualifying under this warranty will be performed by our dealership within a reasonable time following delivery of the malfunctioning part or accessory to our place of business.

Defective or malfunctioning parts or accessories must be delivered to our dealership's place of business during regular hours for warranty repair or replacement. Our dealership must be furnished with the purchaser's copy of the original sales slip on counter sales, or purchaser's copy of the repair order on dealer installations, to validate date of purchase and vehicle mileage, as applicable.

THIS IS THE ONLY EXPRESS WARRANTY APPLICABLE TO OUR SERVICE REPLACEMENT PARTS AND ACCESSORIES, AND OUR DEALERSHIP NEITHER ASSUMES NOR AUTHORIZES ANYONE TO ASSUME FOR IT ANY OTHER OBLIGATION OR LIABILITY IN CONNECTION WITH SUCH PARTS AND ACCESSORIES.



P.O. BOX 810 • 8501 OWASSO EXPWY. • OWASSO, OK 74055 • PHONE: 272-1101

CLASSIC LIMITED PARTS AND LABOR WARRANTY

90 DAYS OR 4000 MILES, WHICHEVER COMES FIRST.

LABOR WARRANTY TO BE PERFORMED IN OUR SHOP ONLY AND ON PARTS INSTALLED.

April 13, 2011

[REDACTED]
Tulsa, OK [REDACTED]

Dear [REDACTED]

Enclosed is the GM Product Recall/Special Coverage Customer Reimbursement Claim Form. Please complete the form in its entirety and return it to the address listed on the bottom of the form. We will be happy to review your request for reimbursement for the listed repair once we have received this completed form.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center
Service Request: 71-703138577

GENERAL MOTORS PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition related to the recall or special coverage notification you received corrected before December, 2007, 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 General Motors dealer.

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

If your claim is:

- Approved, you will receive a check from General Motors,
- Denied, you will receive a letter from General Motors with the reason(s) for the denial, or
- Incomplete, you will receive a letter from General Motors 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 questions about this reimbursement procedure, please call the toll-free telephone number provided at the bottom of the form. If you need assistance with any other concern, please contact the appropriate Customer Assistance Center at the telephone number listed below:

Division	Number	Deaf, Hearing Impaired or Speech Impaired *
Buick	1-800-521-7300	1-800-832-8425
Cadillac	1-800-458-8006	1-800-833-2622
Chevrolet	1-800-222-1020	1-800-833-2438
GMC	1-800-462-8782	1-800-462-8583
Pontiac	1-800-762-2737	1-800-833-7668
Oldsmobile	1-800-442-6537	1-800-833-6537
Hummer	1-866-486-6376	
Virgin Islands	1-800-496-9994	
GM Medium Duty	1-800-862-4389	
Puerto Rico – English	1-800-496-9992	
Puerto Rico – Español	1-800-496-9993	

* Utilizes Telecommunication Devices for the Deaf/Text Telephones (TDD/TTY)

Product Special Coverage Customer Reimbursement Claim Form

This section to be completed by Claimant

Date Claim Submitted: _____

17-Digit Vehicle Identification Number (VIN): _____

Current Mileage of Vehicle: _____

Mileage at Time of Repair: _____ Date of Repair: _____

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: _____ State: _____ 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 recall.

Claimant's Signature: _____

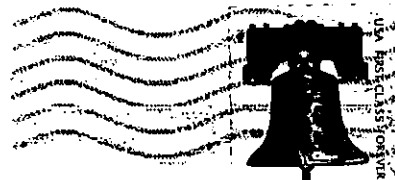
Please mail this claim form and the required documents to:

General Motors
PO Box 33170
Detroit, MI 48232-5170

All recall and Special Coverage reimbursement questions should be directed to 1-800-204-0261

TULSA OK 741

24 FEB 2008 PM 6 T



Tulsa, OK

02-27-09A08:48 0488

02-27-09A08:57 0548

REIMBURSEMENT DEPT.
P.O. Box 33170
Detroit, MI

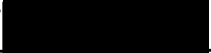
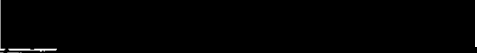
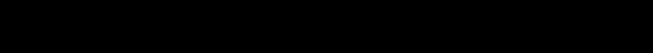
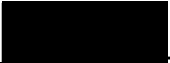

SERVICE REQUEST: 71-703138577

48232+5170

48232-5170

CUSTOMER REIMBURSEMENT CLAIM FORM

This section to be completed by Claimant

Date Claim Submitted: 12 FEB. 2009
 17-Digit Vehicle Identification Number (VIN): 1G1ZT64825F 
 Mileage at Time of Repair: 60,961 Date of Repair: 8-5-08
 Claimant Name (please print): 
 Street Address or PO Box Number: 
 City: TULSA State: OK ZIP Code: 
 Daytime Telephone Number (include Area Code): 
 Evening Telephone Number (include Area Code): SAME
 Amount of Reimbursement Requested: \$ 651.77

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)

PAID CASH

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





CHEVROLET

Customer Assistance Center

February 20, 2009

Chevrolet Division
General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

[REDACTED]
Tulsa, OK [REDACTED]

Dear [REDACTED]

Enclosed is the GM Product Recall/Special Coverage Customer Reimbursement Claim Form. Please complete the form in its entirety and return it to the address listed on the bottom of the form. We will be happy to review your request for reimbursement for the listed repair once we have received this completed form.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center
Service Request: 71-703138577

2-24-2009

Signed Reimbursement form enclosed.

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

April 13, 2011

[REDACTED]
Lake Charles, LA [REDACTED]

Dear [REDACTED]

Thank you for your recent inquiry. We are sorry you have experienced concerns with your vehicle. Customer satisfaction is a top priority for us.

Enclosed is the Owner Loyalty Certificate valid towards the purchase, SmartLease or SmartBuy of a new, unused General Motors vehicle. With such a wide selection of vehicles to choose from (Buick, Cadillac, Chevrolet, GMC, HUMMER, Pontiac, Saab, Saturn), we are sure you will find a vehicle that's right for you.

To ensure that you have the opportunity to obtain the best value possible, this certificate may be used in addition to any other retail purchase incentive programs available at the time you purchase your new vehicle. We hope you will take advantage of this special incentive offer. Simply present the certificate to your dealer after you have negotiated your best deal, sign the certificate and your dealer will complete the necessary information and process it for you.

We are proud you made Chevrolet your choice when you purchased your 2007 Malibu and trust you will give us the opportunity to retain you as a valued Chevrolet customer. Should you have any questions regarding General Motors' products and current incentives, please call our Marketing Support department at 1-800-950-2438. You may also begin your vehicle shopping online by visiting gm.com or any of our divisional websites.

Sincerely,

Chevrolet Customer Assistance Center
Service Request: 71-703303156

Issued by:
Chevrolet

Certificate No. 1G1ZT58N37F [REDACTED]

Issue Date: April 13, 2011

Issued exclusively for:

[REDACTED]

Lake Charles, LA [REDACTED]

Valid through: April 14, 2010

Amount: Two Thousand Dollars and Zero Cents
****\$2,000.00****

PROVOSTY, SADLER, DELAUNAY,
FIORENZA & SOBEL

ATTORNEYS AND COUNSELORS AT LAW

POST OFFICE DRAWER 1791
ALEXANDRIA, LOUISIANA 71309-1791

03-31-

0:18 RCVD



02 1A

0004620769

\$ 00.42⁰

MAR 25 2009

MAILED FROM ZIP CODE 71301

General Motors Corporation
Post Office Box 33170
Detroit, Michigan 48232

4823245170



PROVOSTY, SADLER, deLAUNAY, FIORENZA & SOBEL

ATTORNEYS AND COUNSELORS AT LAW
A PROFESSIONAL CORPORATION

WILLIAM H. deLAUNAY, JR.

ALBIN A. PROVOSTY

H. BRENNER SADLER

RONALD J. FIORENZA

DAVID R. SOBEL

FREDERICK B. ALEXIUS

JOSEPH J. BAILEY

H. BRADFORD CALVIT

CATHERINE G. BRAME

BARRY RAY LAICHE

ANDREW E. SCHAEFFER

JOHN P. DOGGETT

JOHN D. RYLAND

MAIN OFFICE

934 THIRD ST., SUITE 800
P.O. BOX 1791
ALEXANDRIA, LOUISIANA 71309-1791
TELEPHONE (318) 445-3631
TELEFAX (318) 445-9377
E-MAIL: attys@provosty.com

REAL ESTATE OFFICE

3600 JACKSON ST., SUITE 106A
ALEXANDRIA, LOUISIANA 71303
TELEPHONE (318) 445-3631
TELEFAX (318) 561-9945
E-MAIL: attys@provosty.com

MARKSVILLE OFFICE

237 S. WASHINGTON STREET
MARKSVILLE, LOUISIANA 71351
TELEPHONE (318) 253-4435
TELEFAX (318) 253-6626
E-MAIL: attys@provosty.com

LeDoux R. PROVOSTY (1894-1980)
RICHARD B. SADLER, JR. (1912-1990)
LeDoux R. PROVOSTY, JR. (1930-1995)

DAVID W. LAMBERT
JEREMY C. CEDARS
JAMES W. STANDLEY, IV
JOHN W. MALOY
THEODORE D. VICKNAIR
BECKY BRIGNAC BECK
GEORGE I. FINE

RICKY L. SOOTER, SPECIAL COUNSEL
JOSEPH R. MARTIN, OF COUNSEL
E. TRENT MCCARTHY, OF COUNSEL

*BOARD CERTIFIED IN TAXATION
*ALSO ADMITTED IN TEXAS
*ALSO ADMITTED IN GEORGIA
*ALSO ADMITTED IN TENNESSEE
*ALSO ADMITTED IN NEVADA

March 25, 2009

Ms. Nicole Johnson
Chevrolet Customer Assistance Center
Post Office Box 6855
Chicago, Illinois 60680

General Motors Corporation
Post Office Box 33170
Detroit, Michigan 48232

RE: [REDACTED]
(Our File No. 144747)

Dear Ms. Johnson:

Please be advised that this firm has been contacted by the above-referenced [REDACTED] in connection with the issues she continues to experience with her 2007 Chevrolet Malibu (VIN: 1G1ZT58N37F [REDACTED]). According to the information provided by [REDACTED] since her purchase of this vehicle, there has been a persistent knocking in the front end of the vehicle.

[REDACTED] indicates that her vehicle has been inspected at Billy Navarre Chevrolet in Lake Charles, Louisiana on several occasions, but that the problem cannot apparently be rectified, as it would now appear to be a manufacturer's defect.

As such, it is hereby requested that this issue be addressed and that the problem be identified and addressed so that her vehicle may be fit for its intended use. It is [REDACTED] desire that this issue be settled amicably; however, failure to comply with this request will likely leave her no alternative but to pursue further action.

Should you wish to discuss this matter further, please contact [REDACTED] directly at the address provided herein. Your courtesies with respect to resolving this matter are sincerely appreciated.

Sincerely,

PROVOSTY, SADLER, deLAUNAY,
FIORENZA & SOBEL

JAMES W. STANDLEY, IV

JWS:tb
CC: [REDACTED] (144747)

Lake Charles, LA [REDACTED]

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

April 13, 2011

[REDACTED]
Glendale, AZ [REDACTED]

Service Request Number: 71-705273815

Dear [REDACTED]

We have received your request for assistance, but have been unable to contact you using the telephone number provided or any listed in our records.

If your situation has been resolved to your satisfaction, no further action is necessary. If it has not, we invite you call us at 1-800-222-1020. Please refer to the service request number listed above when you reach our representative.

Total customer satisfaction is important to us at Chevrolet. If we can be of any assistance, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center



CHEVROLET

Customer Assistance Center

Chevrolet Division

General Motors Corporation

P.O. Box 33170

Detroit, MI 48232-5170



02 1M

\$ 00.42⁰

0004243385

FEB 27 2009

MAILED FROM ZIP CODE 48083

03-09-09A08:22 RCVD

NIXIE

850 DE 1

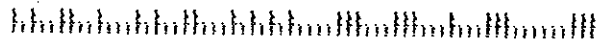
00 03/04/09

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 48232517070

*2790-09098-27-40

8530243385-20090327





CHEVROLET

Customer Assistance Center

Chevrolet Division
General Motors Corporation
P.O. Box 33170
Detroit, MI 48232-5170

February 27, 2009

Customer Did Not Receive
Letter From GM

[REDACTED]
Glendale, AZ [REDACTED]

Service Request Number: 71-705273815

Dear [REDACTED]

We have received your request for assistance, but have been unable to contact you using the telephone number provided or any listed in our records.

If your situation has been resolved to your satisfaction, no further action is necessary. If it has not, we invite you call us at 1-800-222-1020. Please refer to the service request number listed above when you reach our representative.

Total customer satisfaction is important to us at Chevrolet. If we can be of any assistance, please don't hesitate to email us using the Contact Us link at Chevrolet.com or call us at 1-800-222-1020.

Sincerely,

Chevrolet Customer Assistance Center

DATE
04/30/09

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

*****1,167 DOLLARS

*****28 CENTS

AMOUNT
*****1,167.28

PAY
TO THE
ORDER
OF

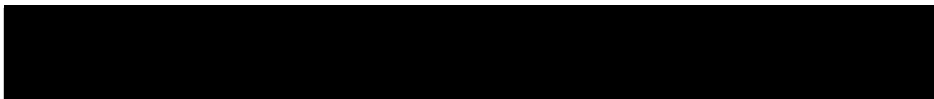
PALATINE IL

North American Operations
General Motors Corporation
Disbursement Account

Ben D. Albee
SIGNATURE

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

AUDIT

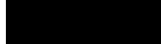


North American Operations

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

DETACH BEFORE DEPOSITING CHECK

CHECK NO.



PAYMENT
DATE

04/30/09

VENDOR
IDUN NO. BB 000000108

1

VENDOR NAME

REGISTER NO. DESCRIPTION	INVOICE DATE	DOC. REFERENCE NUMBER	% DISC.	INVOICE AMOUNT	DISC. AMOUNT	NET AMOUNT
1G1ZT54845F	04/29/09 71-705565919	VH 1-BMCBDJ 1-BMCBDJ	00.0000	1,167.28	.00	1,167.28
TOTAL				1,167.28	.00	1,167.28

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

M3

April 13, 2011

[REDACTED]
Palatine, IL [REDACTED]

Service Request: 71-705565919

Dear [REDACTED]

We sincerely regret that you experienced a concern with your 2005 Chevrolet Malibu, which resulted in an unexpected repair expense to you.

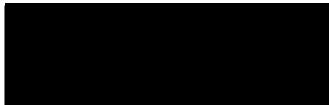
We value you as a Chevrolet owner and your satisfaction with our products is a high priority. After consideration, we believe you are entitled to a reimbursement. We have enclosed a check in the amount of \$1,167.28. We hope this goodwill adjustment will offset, to some degree, the inconvenience that this repair may have caused you.

At Chevrolet, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to contact our Executive Office at 1-313-667-7153. Please refer to your service request number listed above and we will be happy to assist you.

Sincerely,

General Motors Executive Office

SR# 71-705565919



04/01/2009 08:22 AM

To karyn.yufenu@gm.com

cc

bcc

Subject Chevy Malibu 1G1ZT54845F [REDACTED] Repair receipt

Hi Karyn,

I had the work carried out on my Malibu on Monday, to have the Intermediate Steering Shaft replaced. You asked me to provide a copy of the receipt, so I've attached it in pdf format. The amount I was charged for labor amounted to £77.63, which equates to \$110.23 @ \$1.42 to the £ (see the FT exchange rates for Monday, March 30 here -> <http://markets.ft.com/ft/markets/reports/FTReport.asp?dockey=ECR-300309>)

I hope this is sufficient information for you to process the reimbursement. Please contact me if you need any more.

Many thanks, and I look forward to hearing from you.

Take care,



Chevy repair receipt March 2009.jpg

previous \$ 1038.94
- 837.99 prev. paid
200.95

Reimburse

current 110.23

200.95
+ 856.10 2nd repair

110.23
~~1038.94~~
\$1167.28

BURTONKE

COPY

04-28-09A08:29 RCVD

CHRYSLER

Dodge

Jeep

Repair #1

Servicing, Repairs and M.O.T.'s
for all British and Foreign makes and models

Ford

Mildenhall Auto Centre Ltd



9 Chiswick Avenue, Mildenhall, Suffolk. IP28 7AY

Tel: (01638) 713962 / 711939 Fax: (01638) 718465

Web: www.MildenhallAutoCentre.ltd.uk

VAT Registration No. 370 3950 55

SR # 71-705505919

INVOICE

JCTC

NUMBER

36973

DATE TAXED

031358

ORDER NO.

23/01/08

A.C. REF.

N/A

LABOUR

Replaced Power Steering Rack etc. as per.

TSB 06-02032-007b (document i.d.1973984).

135.00

Replaced right outer tie rod end as badly worn.

PARTS

1.00	26055104	ROD KIT	@	30.22	30.22
1.00	15858368	GEAR STR RACK	@	272.35	272.35
1.00	12346241	LUBRICANT	@	10.86	10.86
1.00	01	ENVIROMENTAL CHARGES	@	5.00	5.00

MILDENHALL AUTO CENTRE LTD

9 CHISWICK AVENUE

MASTERCARD

MASTERCARD

TCC

SALE

CUSTOMER COPY

AMOUNT

£532.79

VERIFIED BY PIN

THANK YOU

PLEASE KEEP THIS RECEIPT

FOR YOUR RECORDS

13:58 23/01/08 40DLR 20

AUTH CODE: 008188

RECEIPT 4713

COPY

MILDENHALL AUTO CENTRE LTD

Reg No W
Make CHEV. MALIBU
Mileage 33202
Chass No 1G1ZT54845F
Eng. No.

Notes 4

paid in pds

+ 2.5% CHARGE IF PAYING BY CREDIT CARD

VATABLE ITEMS	453.43
TOTAL VAT	79.36
SUB TOTAL	532.79
ZERO RATED	0.00
INVOICE TOTAL	532.79

Jan 23, 2008: 0.7467407215 units per EUR

Financial Times - Wall Street

All in
May 2009

1.3391528963 EUR per unit

532 x 1.95 = 1,040

1.95 to the pound

Repair #2

SR# 71-705565919

CHRYSLER Dodge Jeep

Servicing, Repairs and M.O.T's
for all British and Foreign makes and models

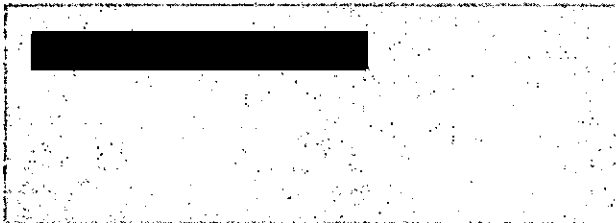
Ford

Mildenhall Auto Centre Ltd



9 Chiswick Avenue, Mildenhall, Suffolk IP28 7AY
Tel: (01638) 713962/711939 Fax: (01638) 718465
Website: www.MildenhallAutoCentre.ltd.uk
VAT Registration No. 370 3950 55

INVOICE



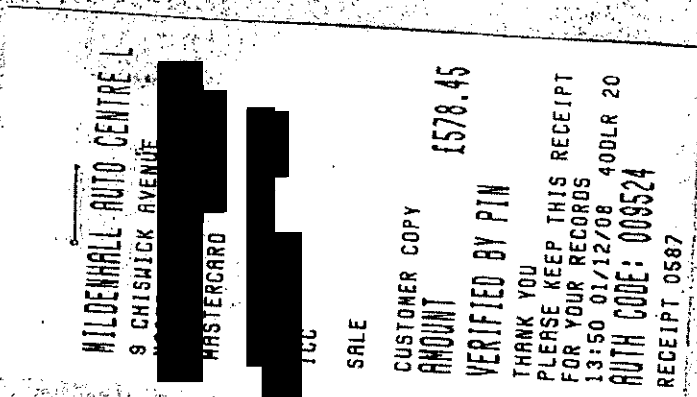
JOB NO.:	39025
NUMBER:	034307
DATE/TAX POINT	01/12/08
ORDER NO.:	N/A
A/C REF:	

LABOUR

Replaced PAS Rack 135.00

PARTS

1100-23907150 STEERING GEAR @ 368.00 368.00



COPY

Reg No: [REDACTED]
Make: CHEV. MALIBU
Mileage: 56253
Chass No: 101ZTS4845P [REDACTED]
Eng. No: [REDACTED]
Notes: [REDACTED]

VARIABLE ITEMS	503.00
TOTAL VAT	75.45
SUB TOTAL	578.45
ZERO RATED	0.00
INVOICE TOTAL	578.45

SPECIALS: FREE MOT WITH FULL SERVICE

Jan. 12, 2008 Dec. 1, 2008 - waiting

1.0000000000

1.0000000000

1.48 to pd

578.45 x 1.48 =

Repair # 3

SR# 705505919

CHRYSLER Dodge JeepServicing, Repairs and M.O.T's
for all British and Foreign makes and models**Ford****Mildenhall Auto Centre Ltd**9 Chiswick Avenue, Mildenhall, Suffolk IP28 7AY
Tel: (01638) 713962/711939 Fax: (01638) 718465
Website: www.MildenhallAutoCentre.ltd.uk
VAT Registration No. 370 3950 55

INVOICE

JOB NO.:	39764
NUMBER:	035348
DATE/TAX POINT	30/03/09
ORDER NO.:	N/A
AVO REF:	

LABOUR

Replaced intermediate steering shaft. 67.50
(GM Supplied)
Road tested, no further noise.

COPY

Reg No	W
Make	CHEV. MALIBU
Mileage	65352
Chass No	1G1ZT54845F
Eng. No.	
Notes	3

VARIABLE ITEMS	67.50
TOTAL VAT	10.13
SUB TOTAL	77.63
ZERO RATED	0.00
INVOICE TOTAL	77.63

SPECIALS: FREE MOT WITH FULL SERVICE

SR# 71-705565919

St Marys Cottage
St Marys Lane
Pilton
Somerset
BA4 4BD
United Kingdom

30th December 2008

Chevrolet North America
PO Box 33170
Detroit
MI 48232
USA

Warranty Repair under Ref 71-582828763

Dear Sir/Madam,

Please find enclosed all relevant documentation which I have been asked to submit regarding a Warranty claim for my Chevrolet Malibu (VIN 1G1ZT54845F [REDACTED]).

In February 2008, I made a Warranty claim under the above Reference for a replacement steering rack. This was reimbursed in due course with Check No [REDACTED] dated 5/29/08. However, in recent months the problem returned on the new rack, and on Nov 11th I again called GM Customer Service and spoke to Elaine Martin. I explained what had happened and she reviewed the history. Because of the previous reimbursement, she said there would be no issues this time and to go ahead to have the repair made in the same way as previously, and it would be processed as normal, probably more speedily.

I have been asked to provide the original invoice with proof of payment, and proof of ownership (for which I have provided a copy of the UK Registration Certificate). To help you with assessing and processing, I am also providing a number of additional documents. These documents are as follows:

- A copy of the bill of Sale from Woodfield Chevrolet, Schaumburg, IL
- A copy of my last registration document issued in the USA, valid to August 2007

The total amount paid for the Warranty repairs is £578.45. In order to assist you, as like last time I have a US mailing address to which the check can be posted, as follows:

1095 E Cottonwood Way
Palatine
IL 60074

COP TV

If you require further information, please do not hesitate to contact me, either by post or by email ([REDACTED]).

I look forward to hearing from you soon
Kind regards

[REDACTED]

SR# 71-705565919

CHRYSLER Dodge JeepServicing, Repairs and M.O.T's
for all British and Foreign makes and models*Ford***Mildenhall Auto Centre Ltd**9 Chiswick Avenue, Mildenhall, Suffolk IP28 7AY
Tel: (01639) 713962/711939 Fax: (01638) 718465
Website: www.MildenhallAutoCentre.ltd.uk
VAT Registration No. 370 3950 55

ORIGINAL INVOICE

JOB NO.:	39025
NUMBER:	034307
DATE/TAX POINT	01/12/08
ORDER NO.:	N/A
A/C REF:	

LABOUR

Replaced PAS Rack 135.00

PARTS

1.00 25902150 STEERING GEAR @ 368.00 368.00

COPY

Reg No	WM
Make	CHEV. MALIBU
Mileage	56253
Chass No	1G1ZT54845F
Eng. No.	
Notes	2

VARIABLE ITEMS	503.00
TOTAL VAT	75.45
SUB TOTAL	578.45
ZERO RATED	0.00
INVOICE TOTAL	578.45

SPECIALS: FREE MOT WITH FULL SERVICE

SR# 71-705565919

UK Registration Certificate



Registration Mark

VM54 KJY

COPY 1894129

V5C

5/06

United Kingdom

UK

Registration Certificate

European Community

Permiso de circulación
Osvědčení o registraci
Registreringsattest
Zulassungsbescheinigung
Registrierungsbescheinigung
Άδεια κυκλοφορίας /
Ματαναγωγικό Πτυχίο

Certificat d'immatriculation
Carta di circolazione
Registračias apliecība
Registrācijas liudzīmas
Forgalni engedély
Certifikat în Registrare
Kortekenbewijs

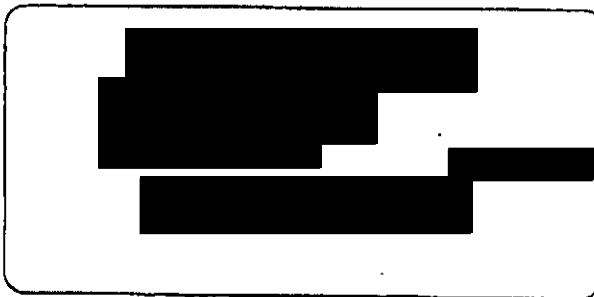
Dowód Rejestracyjny
Certificado de matrícula
Osvedčenie o evidencii
Prometno dovoljenje
Reģistrēšanas apliecība
Registreringsbeviset

Please keep this Registration Certificate
with the Guidance Notes (INS160).

An executive agency of the
Department for
Transport

1 Registered Keeper

Document Reference Number



The Registered Keeper remains liable for the vehicle
until DVLA is notified of its sale/transfer/scrapped/export
and is responsible for ensuring the vehicle is properly
registered and licensed.

DVLA may disclose vehicle keeper details for various
lawful purposes. (See Guidance Notes INS160).

For further information go to: www.direct.gov.uk/motoring

2 The Previous Registered Keeper

(Z.1) NONE

COPY

(Z.2)

(Z)

3 Special Notes

1. WAS REGISTERED/USED OVERSEAS. DECLARED MANUFACTURED 2006.
2. CUSTOMS RESTRICTED UNTIL 17 02 2008 - FOR ADVICE CONTACT HM CUSTOMS.
3. SVA CERT ISSUED 19 04 2007 EMISSION LIMIT - %CO 0.5; 0.3FI HC 0.02FI; LAMBDA 0.97-1.03.

CUSTOMER COPY

71-
SR# 705565919

COPY

6552517



60173



SCHAUMBURG, IL

**2007 Illinois Registration Identification Card**
Jesse White, Illinois Secretary of State

ININ08/12/06:01:0932: 78.00 CC

6552517 7H4185554 R 0807

Vehicle Year 2005		Vehicle Make CHEVROLET		VIN 1G1ZTS4845F	
Weight or CC's		Body Style 4 DOOR		Application Type PASSENGER	
Axes	Leased/Rental	Unit Number	File Number	County 018 COOK	
Drivers License Number(s) or FEIN(s) [REDACTED]			Expiration Date AUGUST 31, 2007		
			Renewal Fee Due		
Official Use Only 0582517					

COPY

JAN 22 2009 13:44 FR

TO 913136677070

P.07/0E

SR # 71-705565919

MILDENHALL AUTO CENTRE L
9 CHISWICK AVENUE

MASTERCARD

ICC

SALE

CUSTOMER COPY

AMOUNT 1578.45

VERIFIED BY PIN

THANK YOU
PLEASE KEEP THIS RECEIPT
FOR YOUR RECORDS

13:50 01/12/08 400LR 20

AUTH CODE: 009524

RECEIPT 0587

ORIGINAL

COPY

PITTSBURGH PA 152

18 MAY 2009 PM 3 T



Uniontown PA

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

05-20-09A08:26 RCVE

General Motors Corporation
Customer and Relationship Services
P.O. Box 33170
Detroit MI 48232-9170

48232+9170





General Motors Corporation
Customer and Relationship Services
PO Box 33170
Detroit, MI 48232-5170

Special Coverage Customer Reimbursement Claim Form

This section to be completed by Claimant

Date Claim Submitted: 5-15-09

17-Digit Vehicle Identification Number (VIN): 1G1ZT628X5F [REDACTED]

Current Mileage of Vehicle: 36458

Mileage at Time of Repair: 35500 Date of Repair: 3-24-09

Claimant Name (please print): [REDACTED]

Street Address or PO Box Number: [REDACTED]

City: Uniontown State: PA Zip Code: [REDACTED]

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

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

Amount of Reimbursement Requested: \$ 418.79 (2nd receipt)

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 recall.

Claimant's Signature: [REDACTED]

Please mail this claim form and the required documents to:

General Motors
PO Box 33170

Detroit, MI 48232-5170

All recall and Special Coverage reimbursement questions should be directed to 1-800-204-0261

DA
of 7
17/3/83
R23'0
14.1
fries 6/32

43
Mar 24 05

18/04 05 Malibu May 25

1 Muffler Assy	483.20
1 Seal	6.07
1 P. Cover Control Arm	220.09
1 Air Filter	5.25
4/2.8.11 and ORIGINAL	15.75
1 Oxygen Sensor	2.00
1 Air Filter	17.00
1 Air Filter	25.00
Exhaust system leaks & noisy: Replace Muffler & front U pipe to rear. Ball joint loose: Replace Lower control arm.	300.00
4 - 4-wheels	
Change oil & filter & fluid levels, tire pressure & car on a level. Replace restricted air filter. Road test & adjust engine functions	109.36
Adjust AC operation	64.17
Adjust headlights	1133.53

DAVID'S AUTO SHOP

124 Lebanon Avenue
Uniontown, Pennsylvania 15401
PHONE: 724-438-3445

Mar 24, 09

8/04 05 Malibu Maxx 3.5
161ZT678Y5A

1	L. Control Arm Assy.	220.09
---	----------------------	--------

Check for poor fire wear.
PF ball joint loose. Replaced 175.00
Lower control arm &
ball joint Assy. Align
Car & wheels. 120.00
TST.

☐ ORIGINAL

395.09

Tax 23.70

418.79

April 15, 2011

[REDACTED]
Uniontown, PA [REDACTED]

Dear [REDACTED]

Enclosed is the GM Product Recall/Special Coverage Customer Reimbursement Claim Form. Please complete the form in its entirety and return it to the address listed on the bottom of the form. We will be happy to review your request for reimbursement for the listed repair once we have received this completed form.

At GM, our commitment to customer satisfaction is a top priority. If you have future questions, please don't hesitate to email us using the Contact Us link at GM.com or call us at 1-800-222-1020.

Sincerely,

GM Customer Assistance Center
Service Request: 71-709889929

GENERAL MOTORS PRODUCT SPECIAL COVERAGE CUSTOMER REIMBURSEMENT PROCEDURE

If you have paid to have this condition related to the special coverage notification you received corrected within a period of 7 years or 70,000, 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 General Motors dealer.

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

If your claim is:

- Approved, you will receive a check from General Motors,
- Denied, you will receive a letter from General Motors with the reason(s) for the denial, or
- Incomplete, you will receive a letter from General Motors 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 questions about this reimbursement procedure, please call the toll-free telephone number provided at the bottom of the form. If you need assistance with any other concern, please contact the appropriate Customer Assistance Center at the telephone number listed below:

Division	Number	Deaf, Hearing Impaired or Speech Impaired *
Buick	1-800-521-7300	1-800-832-8425
Cadillac	1-800-458-8006	1-800-833-2622
Chevrolet	1-800-222-1020	1-800-833-2438
GMC	1-800-462-8782	1-800-462-8583
Pontiac	1-800-762-2737	1-800-833-7668
Oldsmobile	1-800-442-6537	1-800-833-6537
Hummer	1-866-486-6376	
Virgin Islands	1-800-496-9994	
GM Medium Duty	1-800-862-4389	
Puerto Rico – English	1-800-496-9992	
Puerto Rico – Español	1-800-496-9993	

* Utilizes Telecommunication Devices for the Deaf/Text Telephones (TDD/TTY)

Special Coverage Customer Reimbursement Claim Form

This section to be completed by Claimant

Date Claim Submitted: _____

17-Digit Vehicle Identification Number (VIN): _____

Current Mileage of Vehicle: _____

Mileage at Time of Repair: _____ Date of Repair: _____

Claimant Name (please print): _____

Street Address or PO Box Number: _____

City: _____ State: _____ 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 recall.

Claimant's Signature: _____

Please mail this claim form and the required documents to:

General Motors
PO Box 33170
Detroit, MI 48232-5170

All recall and Special Coverage reimbursement questions should be directed to 1-800-204-0261

BBB AUTO LINE
Customer Claim Form

Case number: PGM0934662

Contact Date: 03/18/09

Start Date:

Please make any necessary corrections to the information below, print 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: Spring	State: TX	Zip code:
Day phone:	Evening phone:	Cell phone:
Fax:		E-mail address:

SECTION 2: VEHICLE INFORMATION

Make: Pontiac/GMC	Model: G6	Year: 2006	Current mileage: 56000
Name(s) that appears on the vehicle title: Anna Dawson			
Selling dealer/city/state: Automax, Killeen, TX			
Primary Servicing dealer/city/state: Munday Chevrolet,			
Acquired as <input type="checkbox"/> new <input type="checkbox"/> used <input type="checkbox"/> demo <input checked="" type="checkbox"/> leased		Is the vehicle in your possession? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	
Purchase/lease date: 06/23/07		Mileage at purchase/lease:	
First repair attempt date: 02/15/09		First repair attempt mileage: 0	
How often is the vehicle used for business purposes (percentage): 0 %		Number of vehicles owned or leased by the business: Transmission type: <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual	
Has the vehicle been in an accident/had body damage? <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		Date of accident:	
Description of damage:			

SECTION 3: DESIRED OUTCOME (Describe what you want done to resolve your concern)

I would like for GM to recall this sensor, replace or allow me to get a new vehicle because this is a problem that is known and is a safety hazard out on the road knowing my power steering is not ran off fluid but a sensor that could go out at any given time with either a glitch or completely.

Please complete the missing information in the box below and on page 2.

VEHICLE IDENTIFICATION NUMBER _____

Lienholder/Leasing Company _____ Phone Number _____

Account Number _____

SECTION 4: VEHICLE PROBLEMS (List primary problem first)

Case Number: PGM0934662

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
Power Steering (Torque Sensor)				yes

Total days out of service for all problems: _____

Signature of Titled Owner(s) _____ Date _____

Printed Name 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 copies 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: Glenissa Stewart

State: Texas

Customer Name: [REDACTED]

Service Request: 71-
710374230

BBB Case No.:
PGM0934662

Only customer's last name to be recorded

Vehicle ID No.:
1G2ZG558964 [REDACTED]

In Service
Date:
12/3/2005

Vehicle is: New

BAC Code:
119650

Year, Make & Model: 2006 Pontiac G6

Vehicle Purchased Used on: n/a

Mileage at Time of BBB Filing 56,000

Lien holder: GMAC ☐ Other ☐: {Name}

Sale Type: Purchase ☐ Lease ☐ Other ☐ :
{Type}

DVM Name: Joshua Campbell

CAM Name: Larry Shields

Phone/Cell Number: 210-807-0165

Phone Number: 972-443-2901

Svc Mgr Name: n/a

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.

HAS TAC BEEN CONTACTED FOR SERVICE HISTORY Y OR N.? IF **YES** PLEASE INCLUDE TAC # AND EXPLANATION TAC WAS INVOLVED. IF TAC HAS
__N/A_____

IF TAC **HAS NOT BEEN** CONTACTED WHY
NOT_____

☒ Steering

<u>Date:</u>	<u>RO #:</u>	<u>Days</u> <u>Out:</u>	<u>Mileag</u> <u>e:</u>	<u>Description of Complaint and Repair Performed:</u>
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Power steering torque convertor

☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days</u> <u>Out:</u>	<u>Mileag</u> <u>e:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ {Symptom}

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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☐ Recall/Campaign (Not Related to Other Symptoms/Complaints)

<u>Date:</u>	<u>RO #:</u>	<u>Days Out:</u>	<u>Mileage:</u>	<u>Description of Complaint and Repair Performed:</u>
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Has the vehicle ever been involved in an accident Y or N? n/a

Did you confirm your answer with the customer Y or N? n/a

What type of damage was sustained (example front end collision)

Are the RO's attached if the vehicle was in an accident Y or N

Has the customer filed any insurances claims on this Vehicle Y or N n/a

If Yes obtain the following information below

Insurance Company_n/a_____

Insurance Rep (First and Last Name) _____

Phone # _____

Claim Made? Y/N Claim Status: NA

Claim # _____

Did Insurance Company refer customer to GM? NA

Are there any Aftermarket Modifications to the Vehicle Y or N n/a

Have you confirm this with the customer Y or N n/a

List:

Was a Trade Repurchase offered to the customer Y or N n/a

(A Trade Repurchase is to be offered as a settlement before a Straight can be considered)

Date authorized by the DVM/CAM _____

☐ Other

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

What is the customer eligible for based upon the BBB Program Eligibility Guidelines and the States lemon law requirements for meeting presumption? Explain with some Detail

GM Program Summary Repurchase/Replacement: n/a

Lemon Law Repurchase/Replacement: n/a

GM Program Summary Repairs/Reimbursement for past repairs: n/a

THE STATE LEMON LAW READS:

Days out of service: 30

Repairs 4

Time period 12 months / 12,000 miles

Does Lemon Law state nonconformity must continue to exist? yes

If applicable, safety-related repairs 2

Safety-related time period 12 months / 12,000 miles

Number of repair attempts in the presumption period: n/a

Total days out of service during the presumption period: n/a

Total days out of service during customer's ownership: n/a

[illegible]

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