REIMBURSEMENT PLAN

Requirements for Reimbursement

If you meet all of the following requirements, you are eligible to receive reimbursement under this plan:

- 1. You own or have owned a 2007-2013 CX-9 built between October 24, 2006 and April 26, 2013.
- 2. You have paid for vacuum power brake booster unit replacement prior to the launch of SSP93.
- 3. You have an original or legible copy of the paid repair order or invoice receipt showing:
 - Vehicle model and year, and vehicle identification number (VIN)
 - Your name and address at the time of repair
 - Description of the concern reported
 - Power brake unit replacement
- 4. Mail this reimbursement application form with the applicable payment receipts in the enclosed envelope to:

Mazda North American Operations Attn: Recall Reimbursement Dept P.O. Box 57085 Irvine, CA 92619-7085

Procedure for Reimbursement Request

If your vehicle has had the power brake unit replaced <u>prior to the launch of SSP93</u>, you may apply for reimbursement by doing the following:

- 1. Complete the Reimbursement Application Form found on the reverse side of this page.
- 2. Mail the Reimbursement Application Form with a <u>legible</u> copy of the paid repair order and/or invoice using the enclosed envelope. Include any applicable payment receipts, i.e. credit card receipt, cancelled check, etc.
- 3. **Retain copies** of the paid repair order or invoice and this application form for your records.
- 4. You will be reimbursed for the amount you have paid for power brake unit replacement.

If you wish to correspond with Mazda regarding this reimbursement plan, please write to the above address and refer to your vehicle identification number (VIN).

Any reimbursement application form that is incomplete, illegible, or sent without the legible copy of the paid repair order or invoice will be returned for completion. If Mazda has any questions concerning your application for reimbursement, you may be contacted. Please allow 6-8 weeks for processing.

REIMBURSEMENT APPLICATION FORM

2007-2013 CX-9 Power Brake Unit Warranty Extension Program SSP93

(Please type or print)

	Name:				İ	
	- -	First	Middle	Last		
	Address:					
	Street Address					
			1	I		
	-	City	State	Zip Code		
		Home:				
	Phone Num	work:				
	Vehicle Ider	ntification Number (VIN):				
			(17 digits	in length)		
	Total Amou	nt of Reimbursement Requested:				
				Dollars Cents		
•		INSTRUCTIONS FOR GENERAL RELEASE DESCRIBED BELOW:				
			d thoroughly de identification	n number		
		Sign the G	eneral Releas	e (below)]	
		Gene	eral Relea	se		
		a Motor Corporation ("Mazda") to date. The vehicle identificati		mbursement for vacuum power brake l N) is:	oooster unit	
	VIN:					
all claims for North Americ their respect	such insp can Opera ive directo	pection/repair costs. This rele tions, its regions/distributors	ease shall be s (foreign and ees, divisions	Mazda, its agents, and its related en nefit Mazda and its authorized agent domestic), its authorized dealershi , subsidiaries, and affiliated compar	: Mazda ps, and all	
	Dated: _	Sig	jned:			