

RELEASE OF CLAIM

I [REDACTED] (hereinafter referred to as "Releasor(s)"), on behalf of myself and my assigns, heirs and executors, in consideration of \$ 10,000.00 paid by General Motors LLC, hereby release(s) and discharge(s) General Motors LLC, General Motors Company, their subsidiaries, their authorized independent dealers, any designers and suppliers of vehicles, parts and components that are distributed by them, and their respective agents and employees (hereinafter referred to as "Releasees") from any and all claims, causes of action, demands, damages, and claims for attorney's fees and costs which directly or indirectly arise from, are related to, or are in any way associated with the purchase, repair, maintenance, operation, alteration, or use of Releasor(s) 2017 Chevrolet Volt bearing Vehicle Identification Number [REDACTED] Subject Vehicle"), including but not limited to any claims based on any alleged defects in the subject vehicle. This Release of Claim shall not be construed to release any of the above named persons or entities from any liability regarding claims of personal injury or products liability arising out of the use or operation of the Subject Vehicle after the date of execution of this release. Notwithstanding the above, General Motors LLC agrees to honor the remaining term of the manufacturer's express limited warranty, which accompanied the sale of the subject vehicle. If Releasor(s) has initiated any court, arbitration or other proceeding against Releasees, Releasor(s) immediately will dismiss the proceeding with prejudice.

The subject vehicle's mileage is 31,437 on the date of the signing of this release.

Releasor(s) has carefully read and understand(s) this release. Releasor(s) agree(s) and acknowledge(s) that this Release constitutes the entire agreement between Releasor(s) and Releasees, and Releasor(s) is not relying on any representations, promises or inducements other than those stated in this release.

PLEASE READ CAREFULLY BEFORE SIGNING. BY SIGNING THIS RELEASE, YOU ARE SIGNIFYING THAT YOU HAVE READ IT, UNDERSTAND IT, AND AGREE TO ITS TERMS.

I agree to the terms of this Release of All Claims

[REDACTED]
Address

Claimant's Signature

Address

Durham, NC
City, State, Zip Code

City, State, Zip Code

STATE OF NORTH CAROLINA
COUNTY OF DURHAM



Sworn to (or affirmed) and subscribed by Robert Alan Eick. _____ 0 19.



Signature

Print, type or stamp Commissioned Name of Notary Public

Personally Known _____ OR Produced identification X

Type of identification NCDL

My commission expires: 3/10/2020