

RECALL RESPONSE CARD

RECALL # 15-059-HUS

CUSTOMER NAME: _____
VEHICLE IDENTIFICATION "VIN" NO: _____
RECALL COMPLETED BY: _____
COMPLETION DATE: ____/____/____
PLEASE SELECT ONE OF THE FOLLOWING:
____ VEHICLE IS NO LONGER IN SERVICE - DECLINES RECALL
____ VEHICLE NO LONGER REGISTERED TO THIS OWNER
____ RECALL REMEDY HAS BEEN COMPLETED
SIGNATURE: _____ DATE: _____

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