

**Must Be Postmarked** No Later Than April 28, 2017



No. 12-md-02311

# Claim Form

Your automobile dealership can make a claim for money benefits if it purchased new vehicles and/or certain parts for resale containing: Air Conditioning Systems, Air Flow Meters, Alternators, Anti-Vibrator Rubber Parts, ATF Warmers and Oil Coolers, Automotive Hoses, Bearings, Ceramic Substrates, Electronic Powered Steering Assemblies, Electronic Throttle Bodies, Fan Motors, Fuel Injection Systems, Fuel Senders, Heater Control Panels, HID Ballasts, Ignition Coils, Instrument Panel Clusters, Inverters, Motor Generators, Power Window Motors, Power Window Switches, Radiators, Spark Plugs, Starters, Valve Timing Control Devices, Windshield Washer Systems, Windshield Wiper Systems, or Wire Harnesses manufactured by one or more of the Settling Defendants and/or their predecessors, subsidiaries and affiliates or those alleged to be their co-conspirators in the District of Columbia or one or more of the following states: Arizona, Arkansas, California, Florida, Hawaii, Illinois, Iowa, Kansas, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nebraska, Nevada, New Hampshire, New Mexico, New York, North Carolina, North Dakota, Oregon, South Carolina, South Dakota, Tennessee, Utah, Vermont, West Virginia, and Wisconsin. These purchases must have been made between January 1, 1998 and August 10, 2016. If your dealership filed a valid Proof of Claim in the first round of dealership settlements in this litigation, you may rely on that Proof of Claim and do nothing further to participate in the current settlements.

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Are you submitting a claim on behalf of a dealership group or an individual dealership? Dealership Group Individual dealership  Dealership/Group Name (This is who payment will be made to):  D/B/A for Dealership:  D/B/A for Dealership:  State License/Registration Number for Dealership:  Drimary Address  Continuation of Primary Address  City State Zip Code  Telephone number  Fill in the circle if you previously submitted a claim in 2015/2016 and are submitting supplemental information  VEHICLE PURCHASES  Please provide the following information for new vehicles your dealership purchased in the states listed above from January 1, 1998 to August 10, 2016. You may either provide information by dealership location or aggregated for your dealership group by state.  I am submitting information for all dealerships																													
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I am submitting information for all dealerships aggregated by state

### Number of Vehicles Purchased

The amount a dealership may be entitled to under these settlements will depend on the number, make, and model of vehicles purchased during the relevant period.

To show how many vehicles your dealership(s) purchased, please submit the year-end OEM financial statements for each OEM from which you purchased new vehicles for each year in the states listed above from 1998 to 2016 (you may provide a year-to-date statement for 2016), AND provide the following information. You may print and attach more pages for any given year.



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You must provide copies of all year-end OEM statements or similar documents showing the number of vehicles purchased or your claim will be invalid.

### NUMBER OF PARTS PURCHASED

The amount a dealership may be entitled to under these settlements for replacement parts will depend on the number of parts or vehicles purchased during the relevant period.

You may show how many relevant parts your dealership(s) purchased from 1998 to 2016 by using the number of vehicles purchased as a substitute for providing the actual invoices for your purchase of those parts.

I choose to use the number of vehicles purchased to document the number of parts purchased

Alternatively, you may show how many relevant parts your dealership(s) purchased from 1998 to 2016 by submitting the actual invoices for your purchase of those parts.

O I choose to submit parts invoices to document the number of parts purchased

If you choose to submit parts invoices, you must provide copies of all invoices or documents showing the number of relevant parts purchased or your claim will be invalid. Your OEM statements will remain confidential. You may redact or remove financial information other than the number of vehicles purchased.

I certify that the information I have included on this Claim Form is correct to the best of my knowledge and that I have the authority to submit a claim for the Dealership Group or Dealership.

Sign	natur	e: _													D	ated:					
You	r Tit	le or	Pos	ition	with	n the	Dea	lersl	hip/C	Grou	p: _										
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You must submit your Proof of Claim either electronically on the Settlement Website at <a href="www.AutoDealerSettlement.com">www.AutoDealerSettlement.com</a> by April 28, 2017, or by First Class Mail postmarked by the deadline of April 28, 2017 to:

Auto Dealer Settlement Administrator PO Box 40007 College Station, TX 77842-4007

