<u>Mercedes Mars Red Settlement:</u> Instructions for Claiming Reimbursement for Qualified Past Repairs

To submit a Reimbursement Claim Form for reimbursement of Qualified Past Repairs, please carefully review and follow the below instructions. Please take note that this Claim Form <u>must</u> be accompanied by certain required items of proof described below. Please only fill out and submit a Claim Form if you meet the requirements for reimbursement described below.

<u>WHO:</u>

You may only file a claim if you are a Class Member. You are a Class Member if you fit the following description and do not opt out of the Settlement: You are a current owner, former owner, current lessee, or former lessee of a Mercedes-Benz vehicle purchased or leased in the United States and originally painted Mars Red or Fire Opal (collectively, "590 Mars Red").

Excluded from the Class are: (a) persons who have settled with, released, or otherwise had claims adjudicated on the merits against Defendants that are substantially similar to the Litigation Claims (*i.e.*, alleging that 590 Mars Red paint is inadequate, of poor or insufficient quality or design, or defective, due to peeling, flaking, bubbling, fading, discoloration, or poor adhesion of the paint or clearcoat); (b) Defendants and their officers, directors and employees, as well as their corporate affiliates and the corporate affiliates' officers, directors and employees; (c) counsel to any of the parties; and (d) the Honorable Mark H. Cohen, the Honorable James Holderman, and members of their respective immediate families.

WHAT:

Only Qualified Past Repairs are eligible for reimbursement: A Qualified Past Repair is a repair that occurred before the Effective Date of the Settlement related to repainting any non-plastic exterior surface of a Subject Vehicle because of peeling, flaking, or bubbling of the exterior clearcoat not caused by external influences such as automobile accidents, scratches, or road debris. Qualified Past Repairs are limited to refinishing of affected areas only, in accordance with Defendants' Technical Service Bulletin, LI98.00-P-058914 (viewable at www.MarsRedPaintSettlement.com and attached to the Settlement Agreement as Exhibit A).

WHEN:

To request reimbursement for Qualified Past Repairs that occurred before May 28, 2021, you must submit a Reimbursement Claim Form postmarked by July 27, 2021 or submit the completed electronic Reimbursement Claim Form online at www.MarsRedPaintSettlement.com by July 27, 2021.

To request reimbursement for Qualified Past Repairs that occurred after May 28, 2021 but before the Effective Date of the Settlement, you must submit a Reimbursement Claim Form postmarked within 60 days of the date of repair or submit the completed electronic Reimbursement Claim Form online at www.MarsRedPaintSettlement.com.

The Effective Date is 75 days after the date of the Court's final approval of the Settlement, or, if there are appeals of the Settlement approval, 14 days after the date on which any appeals of the approval of the Settlement have been resolved in favor of the Settlement.

* If the vehicle had more than 150,000 miles or was more than fifteen years past its original inservice date when the repair was made, the repair does not qualify for reimbursement.

HOW:

Any Class Member who wishes to request reimbursement for a Qualified Past Repair must submit a completed and signed Reimbursement Claim Form via mail or by completing the electronic Reimbursement Claim Form at www.MarsRedPaintSettlement.com, along with the items of proof listed below in this section.

You may submit a claim by mailing this Reimbursement Claim Form to the Settlement Administrator at the address printed below:

Mercedes Mars Red Settlement c/o JND Legal Administration PO BOX 91223 Seattle, WA 98111

If you wish to make claims for repairs to more than one vehicle, please use a separate Reimbursement Claim Form for each vehicle.

If you wish to make claims for more than one repair/service to the same vehicle, please attach additional pages and answer all the questions in Section II for each claimed repair/service.

Your reimbursement claim for a Qualified Past Repair must include a completed and hand-written or electronically signed Reimbursement Claim Form and the following items of proof:

- (a) An itemized repair order, invoice, or other documentation showing that the Subject Vehicle received a qualified repair (e.g., the repair invoice must show that part of the vehicle has been repainted) and the cost of the qualified repair. A repair shall not qualify for reimbursement if the reason for the repair described in any related repair order is for repairs due to an automobile accident, scratches, road debris, or other external influence that is unrelated to the alleged Mars Red paint defect (e.g., chemical burn, tree sap, or bird droppings);
- (b) Proof of your payment for the repair, which could include a credit card receipt or statement, an invoice showing a payment, a receipt showing cash or other form of payment, or other such proof; and
- (c) Proof of your ownership or leasing of the Subject Vehicle at the time of the repair.

HOW MUCH:

The amount of reimbursement you may receive for Qualified Past Repairs varies depending on the coverage period during which the Qualified Past Repair occurred, as shown below.

Period One is defined as the time period during which the Subject Vehicle has or had fewer than seven years (84 months) or 105,000 miles from the Subject Vehicle's original in-service date, whichever occurred first. Qualifying Past Repairs that occurred during Period One will be reimbursed at 100% of the out-of-pocket cost paid subject to certain limitations in the Settlement Agreement.

Period Two is defined as the time period from the end of Period One until the Subject Vehicle has or had fewer than ten years (120 months) or 150,000 miles from the Subject Vehicle's original in-service date, whichever occurred first. Qualifying Past Repairs that occurred during Period Two will be reimbursed at 50% of the out-of-pocket cost paid subject to certain limitations in the Settlement Agreement.

Period Three is defined as the time period from the end of Period Two until the Subject Vehicle has or had fewer than fifteen years (180 months) or 150,000 miles from the Subject Vehicle's original in-service date, whichever occurred first. Qualifying Past

Repairs that occurred during Period Three will be reimbursed at 25% of the out-of-pocket cost paid subject to certain limitations in the Settlement Agreement.

If the vehicle had more than 150,000 miles or was more than fifteen years past its in-service date when the repair was made, the repair does not qualify for reimbursement under the Settlement.

If the repair was performed by an Independent Service Center, the reasonable repair cost shall not exceed 10% of what the same repair would have cost if it were performed at an Authorized Service Center.

You are only eligible to be reimbursed for actual out-of-pocket costs. If any part of your repair cost was covered by MBUSA, an Authorized Mercedes-Benz Service Center, or any other form of coverage such as insurance or an extended warranty, you will not be reimbursed for the portion of the cost you did not pay out-of-pocket.

* * *

If you believe your claim for a Qualifying Past Repair is wrongfully denied or should have been approved for a greater amount, you may notify the Settlement Administrator that you believe your claim was wrongfully decided and you will be afforded an opportunity to present your reasons to a Third Party Neutral, who will make a final and non-appealable decision as to whether your claim should have been approved or decided differently.

If you have questions about how to complete your claim, contact the Settlement Administrator at info@MarsRedPaintSettlement.com.

You may be asked for additional information. Follow all instructions on the Reimbursement Claim Form and make sure to inform the Settlement Administrator of any changes in your address after you submit your Reimbursement Claim Form.

Mercedes Mars Red Settlement: Reimbursement Claim Form for Reimbursement of Qualified Past Repairs

I. CONTACT INFORMATION

Full Name	
Mailing Address – Line 1	
Mailing Address – Line 2 (If Applicable)	
City	State Zip Code
Telephone Number	Email Address
II VEHICI E IN	NEODWATION
II. <u>VEHICLE IN</u> Vehicle Identification Number (VIN)	NFORIVIATION .
Vehicle Model	Vehicle Model Year
Dates you owned/leased the Vehicle (start/end)	Date of service*
_	
Mileage at time of service*	Amount paid for repairs
Was any part of the cost covered (e.g., in the foinsurance, "goodwill" from the dealership, or other	orm of warranty or extended warranty coverage, er payment assistance)?
☐ YES ☐ NO	
If you answered "yes" to the previous que amount(s)received:	estion, list the source(s) of payment and

			d Mercedes-Benz Se ers/service-maintena	rvice Center? <u>nce/schedule-service</u> for a list)
	☐ YES	□ NO		
Name 8	& Address of S	ervice Provider		
Please	e list and desc	cribe the documen	ts you are attaching t	o support your claim:
		I	II. CERTIFICATION	<u>N</u>
By sig	ning this form	, I swear under pe	enalty of perjury that:	
1.	or former les		le identified above a	owner, former owner, current lessee, nd am the rightful owner of the claim
2.	The docume	ents I have submit	ted in support of this	claim are true and accurate copies.
3.	The information of my knowledge		s Reimbursement Cla	aim Form is true and correct to the best
Settler	nent Agreeme	ent and consent to	the dismissal of any p	Release detailed in Section 6 of the re-existing action or proceeding relating at by me or by others on my behalf.
	e than one pe ned by all per	_	the claims asserted,	the Reimbursement Claim Form must
Signatu	ure:			Date:
Signatu	ıre:			Date:

Date:

Signature: