AUDI SUNROOF SETTLEMENT REIMBURSEMENT CLAIM FORM

Under the Settlement Agreement in *Gjonbalaj*, et al. v. Volkswagen Group of America, Inc., Civil Action No. 2:19-cv-007165-BMC (Eastern District of New York), you must, **no later than October 23, 2023**, complete, sign and mail this Claim Form, together with the required records and declaration(s) set forth below, to **Gjonbalaj v. Volkwagen Group of America, Inc., c/o JND Legal Administration, PO Box 91101, Seattle, WA 98111**, in order to receive reimbursement of past out-of-pocket expenses paid for up to two (2) qualifying covered repairs to address a diagnosed condition of leakage of liquid into the vehicle's interior from the sunroof while it was in the fully closed position with the sunroof glass not broken, cracked or otherwise damaged, and, if applicable, to address a diagnosed condition of liquid damage to a Settlement Class Vehicle's interior seats, carpets/floor mats, interior ceiling, and failure of electrical components directly caused by a diagnosed condition of leakage and liquid ingress into the vehicle's interior from said vehicle's sunroof while it was in the fully closed position with the sunroof glass not broken, cracked or otherwise damaged.

If you seek reimbursement for more than one Settlement Class Vehicle, you must complete, sign and mail to JND a separate claim form, together with the required records and declaration(s), for each reimbursement claim.

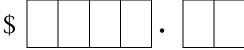
Verify Your Contact Information:

If your contact information is incorrect, please correct it in the boxes provided below:

First Name:	MI:	Last Name:	
Address:		<u> </u>	
City:	State:		Zip Code:
Telephone Number:	Vehicle	Phicle Model:	
Vehicle ID Number (VIN):	Vehicle	e Make:	

- 1. With this Claim Form, you must submit an original or legible copy of a repair invoice, receipt, or other records containing the following information:
 - (a) Your full name;
 - (b) The Vehicle Identification Number (VIN) of your Settlement Class Vehicle that was repaired;
 - (c) The name and address of the authorized Audi dealership or other service center that performed the repair;
 - (d) The date of the repair and the vehicle's mileage at the time of repair;
 - (e) That the repair was to address a diagnosed condition of leakage of liquid into the vehicle's interior from the sunroof while it was in the fully closed position with the sunroof glass not broken, cracked or otherwise damaged, and, if applicable, to address a diagnosed condition of liquid damage to a Settlement Class Vehicle's interior seats, carpets/floor mats, interior ceiling, and failure of electrical components directly caused by a diagnosed condition of leakage and liquid ingress into the vehicle's interior from said vehicle's sunroof while it was in the fully closed position with the sunroof glass not broken, cracked or otherwise damaged, performed prior to **August 22, 2023** and within seven (7) years and 80,000 miles of the vehicle's In-Service Date;
 - (f) A description of the repair performed, including the parts repaired/replaced and a breakdown of the parts and labor costs;
 - (g) The amount paid for the repair and proof of that payment;
 - (h) If the repair was performed during the original New Vehicle Limited Warranty period, and was not performed by an authorized Audi dealer: You must also submit, in addition to the above, documentation (such as a written estimate or invoice) confirming that prior to having it performed, you first attempted to have the repair performed by an authorized Audi dealer and that the dealer would not or was unable to perform the repair free of charge. If you are unable to obtain such documentation despite a good faith effort to do so, you may, instead, submit, with your completed Claim Form, a signed Declaration attesting to this fact and setting forth the good faith efforts you made to obtain the documentation. A form Declaration can be downloaded from the settlement website: www.SunroofSettlement.com.
 - (i) If you are not a person to whom the Claim Form was addressed, you must submit proof of ownership of the Settlement Class Vehicle that is the subject of the Claim.

2.	State the Total Dollar Amount Claimed for Reimbursement for the Paid Repair(s):



3.	payment, concession any source, include	ion, or goodwill accomn ling from Audi, an Audi	of the repair cost for which you are seeking to be reimbursed, did you receive any a, or goodwill accommodation or discount(s) for all or any part of that amount from g from Audi, an Audi dealership, an insurer, service contract provider, or extended or any other person or entity?					
	☐ Yes	□ No						
		dwill accommodation or	e total amount of the cost for which y r discount(s), and provide information					
	Ψ	•						
Sign &	& Date this Claim	Form below:						
		(we) supplied in this Cla ment is signed under per	aim Form is true and correct to the best nalty of perjury.	of my (our) knowledge				
Signa	ture		Date					
Mail 1 2023,		and all required Docu	ments/Paperwork, postmarked no l	ater than October 23				
			swagen Group of America, Inc.					
		c/o JND	Legal Administration PO Box 91101					
		;	Seattle, WA 98111					

For more information, please view the Class Notice, call the Settlement Claim Administrator at 1-866-848-0947, or visit www.SunroofSettlement.com.