

SUPERIOR COURT OF THE STATE OF CALIFORNIA  
IN AND FOR THE COUNTY OF SAN DIEGO

**CLAIM FORM INSTRUCTIONS**

*Logan and Anita Lockabey, et al. v American Honda Motor Co., Inc.*, Case No. 37-2010-00087755-CU-BT-CTL



\*\*\*\*\*PRESORT

NAME  
ADDRESS  
CITY STATE ZIP  
IMB

**TO: PURCHASERS OR LESSEES OF HONDA CIVIC HYBRID (“HCH”) VEHICLES, MODEL YEARS (“MY”) 2003-2009**

**The proposed settlement described in this Claim Form supersedes the prior proposed settlement in *John True, et al. v. American Honda Motor Co., Inc.*, Case No. 5:07-cv-287-VAP-OP (C.D. Cal.), which was described in a notice mailed in October 2009.**

**Please disregard the prior notice.**

This Claim Form must be postmarked by the Claim Form deadline which will be six months from the Effective Date. The Claim Form deadline will be no sooner than October 15, 2012, but may be later. The Effective Date, once known, will be posted on [www.hchsettlement.com](http://www.hchsettlement.com). **IF YOU DO NOT SUBMIT A CLAIM FORM BY THE DUE DATE, AS DIRECTED BELOW, YOU WILL NOT RECEIVE THE BENEFITS DESCRIBED IN THE NOTICE. PLEASE READ THIS ENTIRE FORM CAREFULLY.**

**I. PART I - ELIGIBILITY AND INSTRUCTIONS**

If you purchased or leased an HCH MY 2003-2009 in the United States, and have not timely requested exclusion from the Settlement Class, or have requested exclusion but desire to be a member of the Settlement Class, you are eligible to make a claim using this Claim Form.

A full description of the settlement benefits can be found in the Notice attached to this Claim Form, and also is available at [www.hchsettlement.com](http://www.hchsettlement.com). You only need to submit this Claim Form to receive (a) a Cash Payment(s) and/or Rebate Certificate(s), (b) a DVD copy of the online Fuel Economy Video if you would like a personal copy, and (c) for members of the MY 2006-2008 Subclass, (i) to elect participation in the ADR rather than elect to receive the additional benefits being made available to the Subclass under this settlement, or (ii) to submit a claim for reimbursement for IMA battery replacement (subject to the terms set forth in the Notice at paragraph 6(c)).

If you timely requested exclusion from the Settlement Class and submit a Claim Form, you are thereby electing to again become a member of the Settlement Class.

All persons who are members of the Settlement Class and who did not timely request exclusion from the Settlement Class are bound by the terms of the judgment entered by the Court and release their claims against AHM described in the Notice whether or not they submit a Claim Form. Complete this Claim Form and submit it on or before the Claim Form deadline which will be six months from the Effective Date. The Claim Form deadline will be no sooner than October 15, 2012, but may be later. The Effective Date, once known, will be posted on [www.hchsettlement.com](http://www.hchsettlement.com). Send the Claim Form by U.S. Mail, postage prepaid, to:

Settlement Administrator  
PO Box 2566  
Faribault, MN 55021-9566

DO NOT SUBMIT YOUR CLAIM FORM TO THE COURT. If you have questions regarding this settlement, contact the Settlement Administrator. Questions may be sent by mail addressed to the Settlement Administrator or you may call 1-877-465-4797.

**Questions? Contact the Settlement Administrator at 1-877-465-4797 or visit [www.hchsettlement.com](http://www.hchsettlement.com).**

# CLAIM FORM

Logan and Anita Lockabey, et al. v American Honda Motor Co., Inc.,  
Case No. 37-2010-00087755-CU-BT-CTL

FOR OFFICIAL USE ONLY

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## II. PART II - SETTLEMENT CLASS MEMBER INFORMATION



\* 0 1 2 3 4 5 6 7 8 9 \*

\*\*\*\*\*PRESORT

NAME  
ADDRESS  
CITY STATE ZIP  
IMB

<input type="checkbox"/>	<b>Check this box and provide your current name and address if</b> the pre-printed address to the left is incorrect or out of date, <b>OR</b> there is no pre-printed data to the left.
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Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone Number: ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Evening Phone Number: ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

HCH Model and Year: \_\_\_\_\_ and \_\_\_\_\_ VIN: \_\_\_\_\_

If you are submitting this Claim Form on behalf of another person who is a Settlement Class Member, please explain why you have the authority to do so and attach a copy of any Power of Attorney or other documents that you may have.

## III. PART III - SELECTION OF BENEFITS

### A. CASH PAYMENT(S)

For a full description of the cash payments and eligibility to claim them, please see the Notice at paragraph 6(a). **To claim the cash payment, please check all that apply:**

- I am a Settlement Class Member dissatisfied with the fuel economy I have achieved in my HCH and would like to claim the \$100 cash payment.
- I am a member of the MY 2006-2008 Subclass, and I am dissatisfied with the performance of the IMA Battery in my HCH and/or the July 2010 Software Update and am not electing to participate in the Dispute Resolution Program (ADR). I would like to claim the additional \$100 cash payment.

### B. REBATE CERTIFICATES

For a description of the Rebate Certificates available under this Settlement, and the terms and conditions of those Rebate Certificates, please see the Notice at paragraph 6(b). **If you would like to claim a Rebate Certificate, please select from the following options:**

- Option A** (see the Notice at paragraph 6(b) for a full description)
- OR
- Option B** (see the Notice at paragraph 6(b) for a full description)

**In addition to the selection above, if you are a member of the MY 2006-2008 Subclass not electing to participate in ADR and would like to claim an additional Option B Rebate Certificate, please indicate below:**

- MY 2006-2008 Additional Option B Certificate** (see the Notice at paragraph 6(b) for a full description)

**CLAIM CONTINUED ON PAGE 2. TURN OVER TO COMPLETE AND SIGN CLAIM.**



\* 3 0 9 4 \*



\* C F \*



\* 1 - 2 \*

IMPORTANT: DO NOT PURCHASE OR LEASE A NEW CAR IN RELIANCE ON RECEIVING ANY OF THESE REBATES. AVAILABILITY OF THE REBATES ABOVE IS STRICTLY CONTINGENT ON THE COURT GRANTING FINAL APPROVAL OF THE SETTLEMENT, AND ON THE SETTLEMENT BECOMING EFFECTIVE AFTER THE APPEAL PERIOD HAS EXPIRED. PURCHASES MADE PRIOR TO THE EFFECTIVE DATE WILL NOT COUNT FOR OPTION A OR B REDEMPTION PURPOSES. NO REBATE CERTIFICATES WILL BE ISSUED PRIOR TO THE EFFECTIVE DATE OF THIS SETTLEMENT.

**C. REIMBURSEMENT FOR IMA BATTERY REPLACEMENT**

For a description of the Extended Warranty Period and the terms for reimbursement for IMA Battery Replacements, see the Notice at paragraph 6(c).

**If you qualify and would like to submit a claim for reimbursement, please check the following box and enclose a copy of the repair invoice, receipt, or comparable similar documents.**

**My IMA Battery failed during what would have been the Extended Warranty Period, and I would like reimbursement for its replacement. I am enclosing documentation of my Out-Of-Pocket Expenses for replacing the IMA Battery.**

**D. DISPUTE RESOLUTION PROGRAM – MEMBERS OF THE MY 2006-2008 SUBCLASS ONLY**

For a full description of the Dispute Resolution Program (ADR), please see the Notice at paragraph 6(e). Check this box ONLY if you would like to be eligible to participate in ADR as described in the Notice. Please note that if you check this box, you will be ineligible to receive the additional \$100 cash payment and additional Option B Rebate Certificate described above.

**I would like to be eligible to participate in ADR instead of receiving the additional \$100 cash payment and the additional \$500 Option B Rebate Certificate. I understand that if I participate in this program, and elect to proceed with formal ADR proceedings, I will be required to pay \$250 towards JAMS' dispute resolution filing fees, as well as my own attorneys' fees and costs should I elect to hire counsel to represent me in the ADR proceedings.**

**E. FUEL ECONOMY DVD – MAILED COPY**

For a description of the Fuel Economy Video, see the Notice at paragraph 6(d). This video will be available online for viewing at [www.hchsettlement.com](http://www.hchsettlement.com) on the Fuel Economy Video tab after the Effective Date. If you would like to also receive a DVD copy of this video, please check the following box:

**I would like to receive a personal DVD copy of the Fuel Economy Video in the mail.**

**IV. PART IV - CERTIFICATION**

I declare under penalty of perjury under the laws of the United States of America and the State of California that the information in this Claim Form is true and correct. This Claim Form was executed on:

\_\_\_\_\_ (month), \_\_\_\_ \_\_\_\_ (year) in \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ (city, state, country).

SIGN YOUR NAME HERE: \_\_\_\_\_

PRINT OR TYPE YOUR NAME HERE: \_\_\_\_\_

**PROCESSING OF CLAIMS WILL TAKE TIME. CLAIM FORMS WILL NOT BE PROCESSED UNTIL AFTER THE EFFECTIVE DATE, AND NO MONEY OR REBATE CERTIFICATES WILL ISSUE UNTIL AFTER THE EFFECTIVE DATE OF THIS SETTLEMENT. THE SETTLEMENT ADMINISTRATOR RESERVES THE RIGHT TO AUDIT ANY CLAIM FORMS SUBMITTED. PLEASE CHECK THE SETTLEMENT WEBSITE PERIODICALLY FOR UPDATES ON THE STATUS OF THE SETTLEMENT. THANK YOU FOR YOUR PATIENCE.**

**CHECKLIST**

Please make sure you have:

1. Filled out the Claimant Information in Part II.
2. Selected the benefits for which you are eligible in Part III.
3. Completed the Certification in Part IV.
4. Kept a copy of your completed Claim Form for your records.
5. Mailed your Claim Form so that it is postmarked on or before the Claim Form deadline which will be six months from the Effective Date. The Claim Form deadline will be no sooner than October 15, 2012, but may be later. The Effective Date, once known, will be posted on [www.hchsettlement.com](http://www.hchsettlement.com). Mail the Claim Form to:

SETTLEMENT ADMINISTRATOR  
P.O. BOX 2566  
FARIBAULT, MN 55021-9566

