<u>SUMMARY OF REPAIR HISTORY</u>

[For Defect(s) claimed ONLY]

CONSUMER: ____

VEHICLE YEAR/MAKE/MODEL: ____

DEFECT/NONCONFORMITY: ______________________________DATE PURCHASED:____________________

DATE IN	DATE OUT	REPAIR ORDER #	MILEAGE	ITEM/ACTION	NUMBER OF BUSINESS DAYS IN GARAGE	DAYS CONTESTED (MFG USE ONLY)