

Renk v. Audi Canada Inc. et al Administrator
P.O. Box 4454, Toronto Station A
25 The Esplanade, Toronto, ON M5W 4B1



ADQ

Udo Renk v. Audi Canada Inc., et al.
ONTARIO SUPERIOR COURT OF JUSTICE
Court File No. CV-16-564517-00CP
Jacques Bouchard v. Audi Canada Inc., et al.
SUPERIOR COURT OF QUÉBEC
Court File No. 500-06-000828-166

Must Be Postmarked No Later Than December 4, 2020

WRITTEN OBJECTION / STATEMENT OF SUPPORT FORM

CLAIMANT INFORMATION

<input type="text"/>			<input type="text"/>	<input type="text"/>		
First Name			M.I.		Last Name	
<input type="text"/>						
Primary Address						
<input type="text"/>						
Primary Address Continued						
<input type="text"/>				<input type="text"/>	<input type="text"/>	
City				State	Zip Code	
<input type="text"/>		<input type="text"/>		<input type="text"/>		
Foreign Province		Foreign Postal Code		Foreign Country Name/Abbreviation		

PROPOSED FUEL RATING SETTLEMENT IN CANADA FOR ELIGIBLE MY2013-2017 GASOLINE AUDI, BENTLEY, PORSCHE AND VOLKSWAGEN VEHICLES

SUBMIT THIS FORM ONLY IF YOU WISH TO SUBMIT TO THE COURT
AN OBJECTION TO THE PROPOSED SETTLEMENT

OR

A STATEMENT OF SUPPORT OF THE PROPOSED SETTLEMENT

1. SUBMITTER IDENTIFICATION

Provide the following information about the person (i.e., the current or former vehicle owner or lessee) submitting or, if applicable, on whose behalf you are submitting, this form. **PLEASE PRINT.**

<input type="text"/>	—	<input type="text"/>	—	<input type="text"/>
Phone Number				
<input type="text"/>				
Email Address (if available)				



FOR CLAIMS PROCESSING ONLY	OB <input type="text"/>	CB <input type="text"/>	<input type="radio"/> DOC <input type="radio"/> LC <input type="radio"/> REV	<input type="radio"/> RED <input type="radio"/> A <input type="radio"/> B
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2. REPRESENTATIVE IDENTIFICATION (IF SUBMITTING ON BEHALF OF A PERSON WHO IS DECEASED OR A MINOR OR FOR OTHER REASON)

If you are objecting to the Settlement on someone else's behalf, please provide the following personal identification information and attach a copy of your power of attorney, court order or other authorization that allows you to represent this person. **PLEASE PRINT.**

YOU ARE SUBMITTING THIS FORM ON BEHALF OF SOMEONE WHO IS:

DECEASED A MINOR OTHER REASON (Identify:)

Representative's First Name

Representative's Last Name

Representative's Relationship to Requestor

Representative's Mailing Address

Representative's Mailing Address Continued

City State Postal Code

Foreign Province Foreign Postal Code Foreign Country Name/Abbreviation

— —
Representative's Phone Number

Representative's Email Address (if available)

Representative's Law Firm Name (if applicable)

3. ELIGIBLE VEHICLE IDENTIFICATION

Please provide the following information concerning the Eligible Vehicle originally sold or leased in Canada that, as of October 5, 2020, the Requestor owns or owned or, alternatively, leases or leased from Volkswagen Finance, Audi Finance or Porsche Financial Services Canada, Inc. (including Bentley Financial Services Canada). If there is more than one vehicle, please provide the following information for other vehicles in an attachment. **PLEASE PRINT.**

BRAND: Audi Bentley Porsche Volkswagen

Vehicle Model Model Year

Vehicle Identification Number (VIN)



4. PROOF OF OWNERSHIP/LEASE

Provide in the box below your objection to, or statement in support of, the proposed Settlement. You can also provide your objection or statement of support in an attachment.

OBJECTION OR STATEMENT OF SUPPORT:

5. SETTLEMENT APPROVAL HEARINGS

The Superior Court of Québec will hold a Settlement approval hearing at 1 Notre-Dame Street East, Montréal on December 15, 2020 at 9:30 a.m. ET.

Do you intend to appear at this hearing? Yes No

If "Yes", will you be appearing through a lawyer? Yes No

The Ontario Superior Court of Justice will hold a Settlement approval hearing at 130 Queen Street West, Toronto on December 14, 2020 at 10 a.m. ET.

Do you intend to appear at this hearing? Yes No

If "Yes", will you be appearing through a lawyer? Yes No



If you will be appearing through a lawyer, please provide the following personal identification information for your lawyer. If more than one lawyer represents you, please provide the following information for other lawyers in an attachment.

Lawyer's First Name										Lawyer's Last Name									
Lawyer's Mailing Address																			
Lawyer's Mailing Address Continued																			
City										State					Postal Code				
Foreign Province										Foreign Postal Code					Foreign Country Name/Abbreviation				
Lawyer's Phone Number																			
Lawyer's Email Address (if available):																			
Lawyer's Law Firm Name (if applicable)																			

6. SIGNATURE

Signature: _____

Dated (mm/dd/yyyy): _____

Print Name: _____

NOTE: THIS FORM WILL BE INVALID UNLESS SIGNED PERSONALLY BY THE SUBMITTER EXCEPT WHERE THE SUBMITTER IS DECEASED, A MINOR OR LEGALLY INCAPACITATED.

IF YOU WISH TO OBJECT TO OR MAKE A STATEMENT IN SUPPORT OF THE PROPOSED SETTLEMENT, YOUR FORM CAN BE SUBMITTED BY MAIL, COURIER OR EMAIL.

YOUR FORM AND ANY ATTACHMENT(S) **MUST** BE POSTMARKED ON OR BEFORE DECEMBER 4, 2020 BY THE SETTLEMENT ADMINISTRATOR AT P.O. BOX 4454, TORONTO STATION A, 25 THE ESPLANADE, TORONTO, ON M5W 4B1.

