

ATTN: PLEASE MAKE SURE TO USE THIS AS YOUR FAX COVER SHEET TO ENSURE TIMELY REIMBURSEMENT

ATTN: Service Department

Repair Facility:

MERCEDES BENZ OF CALABAS

RO number:

711276

VIN:

W1K5J4GB7PN334174

Customer Name: TSEPENYUK NATALIA

Contract #: 0057029912

Claim #: 16496846

Dear Sir or Madam,

For prompt and accurate claim reimbursement, please submit the following documents in order to receive payment:

- Final invoice signed by customer

- Sublet bill, if there is one associated

- Tow bill, if there is one associated - Any other documents related to this claim for payment reimbursement.

- Tire(s) Old and New DOT number(s) typed on invoice and marked for position.

(DOT requirement only applies to the approved Tire claims)

This is your claim confirmation. Unless you provide additional detail and supporting documentation you will be paid the below reimbursement amount for the services provided. Any request for an additional reimbursement amount is subject to review and approval by the claims department. If you have any questions regarding this matter, please feel free to contact us at (866) 406-1315.

\$344.35 Sincerely, Subtotal: \$28,79 Claims Department Sales Tax: \$ - 0.00 Safe-Guard Products International, LLC Deductible: \$373.14 1-855-427-9756 Total Amount: Return Fax:

mbclaims@firstclassprotection.com Return Email:

| Qty | Sub-Component | Location | Description | Old DOT Number | Part Number | Requested | Approved |
|------|-------------------|---------------|-----------------------------------|----------------|-------------|-----------|-----------|
| 1.00 | TIRE REPLACEMENT | LEFT FRONT | Bridgestone 225/40R19 Sku, 008 | 7GJ2V3V2922 | q8402816 | \$ 298.10 | \$ 298.10 |
| 1.00 | WHEEL WEIGHTS | | WHEEL WEIGHTS | | | \$ 5.00 | \$ 5,00 |
| 1.00 | LABOR | | LABOR | | | \$ 37.00 | \$ 37.00 |
| 1.00 | DISPOSAL FEE | | DISPOSAL FEE | | | \$ 2.50 | \$ 2,50 |
| 1.00 | TIRE/DISPOSAL TAX | | TIRE/DISPOSAL TAX | | | \$ 1.75 | \$ 1.75 |
| 1.00 | SALES TAX | | 9.50% | | PARTS ONLY | \$ 28.79 | \$ 28.79 |

IMPORTANT to: You may initiate or check the status of a payment request for an approved claim any time at https://www.claimpaymentsdirect.com by entering the claim number and last 8-characters of the VIN.

711276

Mercedes-Benz of Calabasas

INVOICE

Authorized Mercedes-Benz Retailer

NATALIA TSEPENYUK 21722 ROSCOE APT 15 CANOGA PARK, CA 91304

24181 Calabasas Road

PAGE 1

Calabasas, CA 91302 (818) 223-3102 B.A.R.# AC 250333 E.P.A# CAD 982486946

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| Original Estimate [Parts & Labor] | Total Additional | Approved 8y: | Date & Time | Authorization Obtained By: | *HAZARDOUS WASTE DISPOSAL | DESCRIPTION | TOTALS |
|--------------------------------------|----------------------------------|---------------------------------------|------------------|-------------------------------|--|------------------------|--------|
| (Parts & Labor) | Cost Authorized | | | ☐ _{Telephone} | COSTS: We have added this charge to cover costs associated | LABOR AMOUNT | |
| \$ | \$ | | | Trak (and wellpridg) | with the handling, management | | |
| Revised Estimate | \$ | | | Fax (See Attached) | and disposal of toxic wastes or | CAO, OIL, LODE | |
| | <u> </u> | <u> </u> | | UE-mail (See Attached) | hazardous substances under California and Federal Law. | SUBLET AMOUNT | |
| LJ Tire press | | n service was perfo ii RR — psi LF | | | | WASTE DISPOSAL COSTS * | |
| | psi LFps r declined tire pres | sure check/inflatio | n service. | Initials | ALL PARTS ARE NEW UNLESS OTHERWISE | TOTAL CHARGES | |
| By signing be | elow, you acknow | vledge that you | were notified of | and authorized the | INDICATED | LESS INSURANCE | |
| | | t) any replaced pa | | | Some Parts Not Returnable | SALES TAX | |
| DATE | cus | TOMER SIGNATUR | lE . | AUTHORIZED DEALE | RSHIP REPRESENTATIVE SIGNATURE | PLEASE PAY | |

NATALIA TSEPENYUK

21722 ROSCOE APT 15

CANOGA PARK, CA 91304

711276

Mercedes-Benz of Calabasas

INVOICE

Authorized Mercedes-Benz Retailer

24181 Calabasas Road Calabasas, CA 91302

PAGE 2

(818) 223-3102

| HOME:818-4 | 45-4 | 730 | CONT: 747- | 388 | -4090 | | | B.A | A.R.# AC 250 | 333 | E.P./ | A# CAD 982 | 486946 | |
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MB FIRST CLASS CLAIM#16496846 \$373.14 THANK YOU FOR VISITING MERCEDES-BENZ OF CALABASAS.

SERVICE HOURS MONDAY-FRIDAY 7:00AM TO 7:00PM SERVICE IS NOW OPEN SATURDAY 8:00AM TO 5:00PM EMERGENCY 24 HOUR SERVICE 1-800-367-6372 WE WILL NOT BE RESPONSIBLE FOR ITEMS LEFT IN CAR OR ANY AFTERMARKET PRODUCTS IN YOUR CAR.

| Original Estimate (Parts & Labor) | Total Additional Cost Authorized | Approved By: | Date & Time | Authorization Obtained By: | *HAZARDOUS WASTE DISPOSAL | DE001111 11011 | TOTALS |
|--------------------------------------|-------------------------------------|------------------------------|------------------|---|--|---------------------------|--------|
| (Faits of Laudi) | Cost Authorized | | | Telephone | COSTS: We have added this charge to cover costs associated | LABOR AMOUNT | 37.00 |
| | \$ | | | | with the handling, management | PARTS AMOUNT | 298.10 |
| evised Estimate | \$ | | | □Yelephone □Fex [See Attached] | and disposal of toxic wastes or | UAO, OIL, LODE | 0.00 |
| | | | | LE-mail (See Attached) | hazardous substances under California and Federal Law. | SUBLET AMOUNT | 0.00 |
| ☐ Tire press RF | ure check/inflation psi LF ps | n service was perfe ii RR | | | | WASTE DISPOSAL COSTS * | 9.25 |
| Customer | declined tire press | sure check/inflatio | n service. | Initials | ALL PARTS ARE NEW UNLESS OTHERWISE | TOTAL CHARGES | 344.35 |
| , signing be | low, you acknew | vledge that you | were notified of | f and authorized the and that you received | INDICATED | LESS INSURANCE | 373,14 |
| | portunity to inspec | | | | Some Parts Not Returnable | SALES TAX | 28.79 |
| DATE | cus | TOMER SIGNATUR | RE | AUTHORIZED DEALE | RSHIP REPRESENTATIVE SIGNATURE | PLEASE PAY THIS AMOUNT | 0 00 |

** PRE-INVOICE ** Mercedes-Benz of Calabasas

ACCOUNTING

NATALIA TSEPENYUK 21722 ROSCOE APT 15 CANOGA PARK, CA 91304 .

PAGE 1

24181 Calabasas Road Calabasas, CA 91302 (818) 223-3102

| HOME:818-4 | 45-47 | 730 CONT | :747-3 | 88-4090 | | | В | .A.R.# AC 25 |)333 E.F | .A# CAD 982 | 486946 |
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| for had the opportunit | y to inspec | t) any replaced pa | rts as reque | sted by you. | | Some Parts Not Ret | | SALES TAX | | | |
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NATALIA TSEPENYUK

21722 ROSCOE APT 15

CANOGA PARK, CA 91304

711276 Mercedes-Benz of Calabasas

ACCOUNTING

Authorized Mercedes-Benz Retailer

24181 Calabasas Road

PAGE 2

Calabasas, CA 91302 (818) 223-3102

| HOME:818-4 BUS: | 145-4 | | CONT: 747 | | | CEL | RVICE ADV | /ISOD: | | AC 2503 | | E.P.A# CAD | 982486946 | |
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| | JUSI, SA | LE, & CO | MP TOTA | LS 2840 | <u> </u> | | |
|---------------------------------------|-------------------------------------|----------------------|--------------------|---|--|---------------------------|--------|
| Original Estimate (Parts & Labor) | Total Additional Cost Authorized | Approved By: | Date & Time | Authorization Obtained By: | *HAZARDOUS WASTE DISPOSAL | DESCRIPTION | TOTALS |
| (Laure or rapor) | Cost Admonzed | | | Tetephone | COSTS: We have added this charge to cover costs associated | LABOR AMOUNT | 37.00 |
| 1 | \$ | | | Li Fax (See Atteched) DE-mail (See Atteched) | with the handling, management | PARTS AMOUNT | 298.10 |
| Revised Estimate | 5 | | | ☐Telephone | and disposal of toxic wastes or | [and, Oic, cobs | 0.00 |
| · · · · · · · · · · · · · · · · · · · | | <u> </u> | | DE-mail (See Attached) | hazardous substances under California and Federal Law. | SUBLET AMOUNT | 0.00 |
| Tire press | | service was perfo | | | | WASTE DISPOSAL COSTS * | 9.25 |
| Customer | psi rrps declined tire pres | sure check/inflation | Rpsi n service. | Initials | ALL PARTS ARE NEW UNLESS OTHERWISE | TOTAL CHARGES | 344.35 |
| y signing be | ilow, you acknov | vledge that you | were notified of | and authorized the | INDICATED | LESS INSURANCE | 373.14 |
| | | t) any replaced pa | | and that you received by you. | Some Parts Not Returnable | SALES TAX | 28.79 |
| DATE | CUS | TOMER SIGNATUR | E. | AUTHORIZED DEALE | RSHIP REPRESENTATIVE SIGNATURE | PLEASE PAY THIS AMOUNT | 0 00 |

711276

Mercedes-Benz of Calabasas

INTERNAL

Authorized Mercedes-Benz Retailer

NATALIA TSEPENYUK 21722 ROSCOE APT 15 CANOGA PARK, CA 91304 .

24181 Calabasas Road (818) 223-3102

E.P.A# CAD 982486946

PAGE 1

Calabasas, CA 91302

B.A.R.# AC 250333

| HOME:818-4 | 45-4 | 730 | CONT: 747- | 388 | 3-4090 | | | B.A.H.# AC 2 | 50333 E.P. | A# CAD 982 | 486946 |
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| ESTIMATE: | 37.0 | 0 | | | 20FE | 324 08 | :51 SA: 145 | L | | | |
| CONTACT | · ; | | | | | | | | | | |
| ****** | *** | *** | ***** | *** | **** | ***** | ***** | ***** | **** | | |
| | | | | | | | | | | | |
| MB FIRST | CLA | SS (| CLAIM#1649 | 9684 | 46 T | HANK Y | OU FOR VISIT | ING MERC | EDES-BENZ | OF | |
| \$373.14 | | | | | C | ALABAS. | AS. | | | | |
| • | | | | | S | ERVICE | HOURS MONDAY | Y-FRIDAY | 7:00AM TO | 7:00P | M |
| | | | | | S | ERVICE | IS NOW OPEN | SATURDA | T MA00:8 Y | O 5:00 | PM |
| | | | | | | | CY 24 HOUR SI | | | | |
| | | | | | | | NOT BE RESPO | | | | N |
| | | | | | | | ANY AFTERMARI | | | | |
| | | | | | - | | | | | | |
| | | | | | | | | | | | |

| | COST, SAI | LE, & CO | MP TOTA | LS | 0 | 0 | 0 | | |
|-------------------|--|------------------------------------|------------------|--|-----------------------------|---------------------|-----------|---------------------------|--------|
| Original Estimate | Total Additional | Approved By: | Date & Time | Authorization | *HAZARDOUS | WASTE | DISPOSAL | DESCRIPTION | TOTALS |
| (Parts & Labor) | Cost Authorized | | | Obtained By: | COSTS: We charge to cov | | dded this | LABOR AMOUNT | 0.00 |
| \$ | \$ | | | ☐Fex [See Attached] ☐E-med (See Attached) | with the han | | | PARTS AMOUNT | 0.00 |
| Revised Estimate | \$ | | | DTelephone DFax (See Atjached) | and disposal | | | GAS, OIL, LUBE | 0.00 |
| 7 | | | | QE-mail (See Attached) | hazardous California and | | | SUBLET AMOUNT | 0.00 |
| | ure check/inflation | | | | | | | WASTE DISPOSAL COSTS * | 0.00 |
| Customer | _psi LFps declined tire press | i RRpsi LF sure check/inflation | n service. | Initials | | RTS ARE S OTHERV | | TOTAL CHARGES | 0.00 |
| By signing be | low, you acknow | ledge that you | were notified of | and authorized the | INIT | DICATED. | 1100 | LESS INSURANCE | 0.00 |
| | perform the service portunity to inspec | | | and that you received by you. | Some Pa | rts Not Re | eturnable | SALES TAX | 0.00 |
| DATE | cus | TOMER SIGNATUR | E | AUTHORIZED DEALE | RSHIP REPRESEN | TATIVE SI | BNATURE | PLEASE PAY THIS AMOUNT | 0.00 |

Customer

NATALIA TSEPENYUK 21722 ROSCOE APT 15 CANOGA PARK, CA 91304

WATER 711276

WORKORDER

Mercedes-Benz of Calabasas

Authorized Mercedes-Benz Retailer

24181 Calabasas Road Calabasas, CA 91302 (818) 223-3102

PAGE 1

acknowledge notice and oral approval of an increase in the original estimated price.

| | | , | | , | | r | MOL I | | | (010) 223-310 |)2 | |
|---------------------------|--------------------------------|---------------------------|-------------------------|--|--|---|---|---|------------------------|--|---|------------------------|
| HOME | : 818 - 4 | 145-4 | 730 | CONT: 747- | 388-4090 | | | В., | A.R.# AC 250 | D333 E.P.A | # CAD 9824 | 186946 |
| BUS: | | | | CELL: 747- | | SER | VICE AD | /ISOR: 14 | 51 JAZ | MIN, QUINTE | TRO | |
| CO | LOR | YEAR | | MAKE/MODEL | | | VIN | | LICENSE | MILEAGE | | TAG |
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| - DEL | DATE | 23 | MER | CEDES-BEN | | | 4GB7PN3 | ············ | | 12474/ | | T994 |
| DEL | DATE | PROD. | DATE | WARR. EXP. | PROMIS | FD | PO NC |), [F | RATE | PAYMENT | INV. DA | ATE |
| 2055 | 324 DI | | | | ** WAITE | R ** | | | | CASH | | |
| | RO. OPEN | | T | READY | OPTION | | :05179 | | L | CASH | | |
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| | 32024 | | | | | | | | | | | |
| | OP CC | DE | TECH | | DESCRIPT | | | | | | | |
| # A | MB1 | | | CMNT | CLIENT S | TATES | THE LEF | r front | TIRE I | S FLAT. CH | łK and | |
| | EST. | T.BB | 37 N | 0 TOTAL 3 | ADV OLD | DOT# /G | U2V3V29: | 22 - 225 | /40R19 | 93W | . 11_ | |
| | HOI. | шык | 37.0 | O IOIAB 3 | 7.00 | | | | | Clark 164 | 411 | |
| | | g . Žive : | | | | | | | | 166 | 1968 | 46 |
| | | | | | | | | | | | , | <i>,</i> |
| # B | NIDB | | . , | IPS | *No Inte | rval D | ue Vehi | cle Hist | ory In | dicatesNo | | |
| | | 4. | | | Maintena | nce In | terval 1 | Due | | | | |
| ** | | ¥.* | | | | | | | | | | |
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| # °C | CARB | | | IPS | *Inspect | and A | djust T | ire Pres | sures | Reset Tire | <u>.</u> | |
| | • | | | | Monitori | ng Sys | tem | | | | | |
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| 1 | . , | | | | | | \mathcal{I} | NOW! | 701 | 9 9975 | 28 | 316 |
| Preli | mınar | y Es | tima | te : \$37. | 00 | | 1 | - 10001 | | 1 000 | | |
| **** | ***** | **** | *** | ***** | ****** | ***** | ++++++ | | ىلىنى باستىنىڭ ماكىماك | ale als afs. als | | |
| sti. | | · | | *** | | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | ~ | | | | | |
| I | 110 | | | MCS | NFL | 7 > - | To 1 | | $- \cap$ | | | |
| | | <u> </u> | | | NUC | | 10 7 | | - | · · | | • |
| | | | | | | | v i meet manuraci | lurer approved sol | rce part require | dicated. Remanufacture | i at our discret | lion Additional |
| repairs, bu | /N/REASSE/ | VIBLY: If uthorize c | you auth | norize teardown of | the vehicle or com | mencement | of information is | available upon re Dealership does no | quest. You may | y inspect all parts rem | loved from the | e vehicle upor |
| teardown, | reassembly | or partiall | y complet | ed work and you ago to provide an estima | ee to pay the same. | | warranty arran | gement and they a upon request. | re not exempt o | due to their size, weight | or other facto | rs, they will be |
| Iteardown | and reassem | ibiv charo | e (includir | g parts and labor) is | \$ | . The estimat | 1 | Some Parts I | Not Returnable | ☐ Please Save Replace OF ESTIMATE YOU | ced Parts | DEOCUE OF |
| You under | stand that | disassemb | ly may p | event restoration of | the vehicle to its fo | ormer conditio | _ INHIALING BI | ESIDE ONE OF TI | IE FOLLOWING | G CHOICES AND IND | ICATE THE B | EST WAY TO |
| SUBLE | T REPAIRS: | Some re | pairs mu | st be sublet due to | the type of service | e required Ti | WR | ITTEN ESTIMAT | E C | RAL ESTIMATE | ELECT | RONIC EST. |
| PAYMENT | III be disclos | ed upon re agree to | equest. nav for a | di lahor and materia | le in Caeb or approx | vod oradit an | By Telephon | e at: | | By Fax to: | | |
| delivery of | the vehicle | to me or i | o otner p 3 davs af | ayment arrangemen ter receiving notice ti | ts in advance) simul | Itaneously wi | th | | INARY ESTI | MATE \$ | | ********** |
| lup. An exi | ress mecha | inics lien is | hereby a | cknowledged on the understand that a | vehicle to coours th | a cost of labo | r. DE | SIGNATION OF PE | RSON TO AUTI | HORIZE ADDITIONAL W | ORK OR PAR | rs. |
| iwiii be ass | essed and s | hall accrue | e daily if I | fail to pick up the vompleted or after the | chicle within 2 days | from the date | | | | authorize any addition e for parts and labor; | al work not sp | ecified or parts |
| rali to autr | iorize repairs | 5. | | | | | I verile of Design | nee: | | | | 1/41 |
| sign my n Repair Ord | ame upon a | any check | s, drafts | the Dealership as my or other forms of p | r accomey-in-fact and payment issued in p | autnonze it ayment of th | is Customer: | | | E-iviali Address: Date: | | |
| By Signing | Below: Lac | ree that: (| 1) I have | read this Repair Ord | er and I authorize the | e completion | Original Estimate (Parts & Labor) | Total Additional Cost Authorized | Approved | By: Date & Time | Auth | orization ained By: |
| tne servici Dealership | es/repairs lis is not resno | sted above insible for | e in acco loss or da | rdance with the ter | ms and conditions | herein; (2) th | ne | \$ | | | Telephone | |
| vehicle on | streets, hig | a or any o hwavs or | ther caus | ë beyond its control; Idways for the puro | (3) the Dealership n | nay operate th | ne | <u> </u> | | | E-mail (See | Attached) |
| ivenicie: ar | 10 14) 1 AUT | wize the | retrieval | of on-board data as cle manufacturer for | needed to facilitate | unhida tandi | rs s | \$ | | | ☐ Tulephone ☐ Fex (See At ☐ E-mail (See | tachedi Attachedi |
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Date

NATALIA TSEPENYUK

21722 ROSCOE APT 15

CANOGA PARK, CA 91304

711276

Mercedes-Benz of Calabasas

Authorized Mercedes-Benz Retailer

WORKORDER

24181 Calabasas Road Calabasas, CA 91302

PAGE 2

(818) 223-3102

| HOME:818-4 | 45-4 | 730 | CONT: 747- | 388- | 4090 | | | B.A.R.# AC | 250333 E.P. | A# CAD 982 | 486946 |
|------------|-------|------|------------|------|--------|--------|---------------------------------------|------------|-------------|------------|--------|
| BUS: | | | CELL: 747- | 388- | 4090 | SER | VICE ADVISOR: | 1451 JA | ZMIN, QUINT | 'ERO | |
| COLOR | YEAR | | MAKE/MODEL | | | | VIN | LICENS | E MILEAGI | E IN/ OUT | TAG |
| | 23 | MER | CEDES-BEN | Z CL | A 25 | W1K5J | 4GB7PN334174 | | 12474/ | / | T994 |
| DEL DATE | PROD. | DATE | WARR. EXP. | | PROMIS | ED | PO NO. | RATE | PAYMENT | INV. D | ATE |
| 20FEB24 DD | | | | ** | WAITE | R ** | | | CASH | | |
| R.O. OPEN | ED | | READY | | OPTION | S: DLR | :05179 | • | | | |
| 20FEB2024 | 08:5 | 1 | | | | | · · · · · · · · · · · · · · · · · · · | | | | |

CALABASAS MOTORCARS WILL NOT ACCEPT RESPONSIBILITY FOR ITEMS LEFT IN CAR OR AFTERMARKET ACCESSORIES

| BY LAW, YOU MAY CHOOSE ANOTHER LICENSED SMOG CHECK FACILITY TO PERFORM ANY MEEDED REPAIRS OR ADJUSTMENTS WHICH THE SMOG CHECK TEST INDICATES ARE NECESSARY. TEARDOWN/REASSEMBLY: If you authorize teardown of the vehicle or commencement of repairs, but do not authorize completion of a repair or service, a charge may be imposed for teardown, reassembly or partially completed work and you agree to pay the same. | inf red wa |
|--|-----------------------------|
| It is necessary to disassemble the vehicle to provide an estimated price for repairs. The estimated teardown and reassembly charge (including parts and labor) is \$ The maximum time for reassembly will be X | ES |
| You understand that disassembly may prevent restoration of the vehicle to its former condition, X | INI CC |
| SUBLET REPAIRS: Some repairs must be sublet due to the type of service required. The location will be disclosed upon request. PAYMENT TERMS: I agree to pay for all labor and materials in Cash or approved credit card (unless the Dealership agrees to other payment arrangements in advance) simultaneously with delivery of the vehicle to me or 3 days after receiving notice that the vehicle is ready to be picked up. An express mechanics lien is hereby acknowledged on the vehicle to secure the cost of labor, materials, storage and/or towing charges. I understand that a storage charge equal to \$ will be assessed and shall accrue daily if I fail to pick up the vehicle within 3 days from the date I am notified that the repairs have been completed or after the communication of an estimate if I fail to authorize repairs. POWER-OF-ATTORNEY: I hereby appoint the Dealership as my attorney-in-fact and authorize it to sign my name upon any checks, drafts or other forms of payment issued in payment of this Repair Order. X | By I h no Na Fa |
| By Signing Below: I agree that: (1) I have read this Repair Order and I authorize the completion of the services/repairs listed above in accordance with the terms and conditions herein; (2) the Dealership is not responsible for loss or damage to the vehicle or articles left in the vehicle in case of fire, theft, hail, wind or any other cause beyond its control; (3) the Dealership may operate the vehicle on streets, highways or public roadways for the purpose of testing and/or inspecting the vehicle; and (4) I authorize the retrieval of on-board data as needed to facilitate vehicle repairs | \$ Ser |

and the sharing of that data with the vehicle manufacturer for diagnostic or research purposes.

ARTS: All parts are new unless otherwise indicated. Remanufactured and refurbished parts that eet manufacturer approved source part requirements may be installed at our discretion. Additional formation is available upon request. You may inspect all parts removed from the vehicle upon quest. If our Dealership does not have to return the parts to the manufacturer of distributor under a arranty arrangement and they are not exempt due to their size, weight or other factors, they will be turned to you upon content. ☐ Some Parts Not Returnable ☐ Please Save Replaced Parts STIMATE: PLEASE CHOOSE THE KIND OF ESTIMATE YOU WANT TO RECEIVE BY ITTIALING BESIDE ONE OF THE FOLLOWING CHOICES AND INDICATE THE BEST WAY TO ONTACT YOU IF NECESSARY.

WRITTEN ESTIMATE ORAL ESTIMATE ELECTRONIC EST.

Telephone at: By Fax to: E-Mail to:_

PRELIMINARY ESTIMATE \$_

DESIGNATION OF PERSON TO AUTHORIZE ADDITIONAL WORK OR PARTS. ereby designate the individual named below to authorize any additional work not specified or parts t included in the original written estimated price for parts and labor:

ime of Designee: _Phone Number:_ x Number: _ E-Mail Address:

istomer: Date: iginal Estimate 'arts & Labor] Yotal Additional Cost Authorized Approved By: Date & Time DE mail (See Attached) levised Estimate Talsphona Déax (See Altach E-mod (See Atjached)

acknowledge notice and oral approval of an increase in the original estimated price.



Vehicle Master Inquiry (VMI) FOR INTERNAL USE ONLY

Dealer: 05179

VIN:W1K5J4GB7PN334174

VIN:

W1K5J4GB7PN334174

Owner:

NONE

Engine No: 26092030459798

FIN:

W1K1183461N334174

Transmission

72403302012042

Vehicle Info

Model/Year: CLA250C 2023

Upholstery: 651 -Black MB-Tex / Microfiber w/ Red Stitching

Paint:

696 -Night Black

Warranty & Sale

Warranty Start:

11/29/2022

Retail Date:

11/29/2022

Selling Dealer:

05146

Production Info

Radio Code:

Serial No:

Prod Date:

08/02/2022

Status: 0-NORMAL

Status Need Authorization Mileage Discrepancies

Warranty < 30 Days

Review History

Informational Status

| Status Code | Status Description |
|-------------|--|
| | Mercedes me connect is not active, please consult with customer. |
| 65 | Vehicle eligible for extended emissions coverage based on the retail state |

Service Packages

| Type | Description | Start Date | End Date | Miles Fm | Miles To | DLR or GEN | Contract # |
|------|---|------------|------------|----------|----------|------------|------------|
| MBFS | INTERIOR & EXTERIOR | 12/30/2023 | 12/30/2030 | 0 | 999999 | | 7392 |
| MBFS | Paintless Dent Repair | 12/29/2023 | 12/29/2027 | 0 | 999999 | | 0057029911 |
| MBFS | PLUS FIRST CLASS WHEEL & TIRE | 12/29/2023 | 12/29/2027 | 0 | 999999 | | 0057029912 |
| MNT | STR PPMSC-3 Services - 3 Service Used Car PPM (For 2009 and later model years) | 12/29/2023 | 03/28/2027 | 9129 | 44129 | 05146 | 6894092 |
| MBFS | First Class Lease Protection | 12/29/2023 | 12/29/2027 | 0 | 999999 | | PE12372768 |

Option Codes

| Option | Description | Option | Description |
|--------|--------------------------------------|--------|---|
| -CA | | A17 | *************************************** |
| AA5 | | B09 | |
| B51 | TIREFIT KIL | B59 | DYNAMIC SELECT |
| D07 | Wheel Locking Bolts | D16 | LED Logo Projectors |
| D49 | First Aid Kit | DA3 | Parking Assistance Package |
| DC1 | Night Package | DG3 | AMG Line Package |
| DP1 | Premium Package | F118 | |
| FC | | G033 | |
| GA | | H45 | Aluminum Linear Grain Trim |
| HA | | K15 | |
| K38 | | L | |
| L5C | Multifunction Sport Steering Wheel | M20 | |
| M260 | | P17 | KEYLESS-GO Package |
| P47 | Surround View System | P49 | Mirror Package |
| P55 | Night Package | PVH | |
| R01 | High Performance Tires | R7K | |
| RVK | 19" AMG Multispoke Wheels, Black | SAB | |
| U10 | Passenger Seat Weight Sensing System | U22 | 4-Way Lumbar Support |
| U26 | AMG Floor Mats | U55 | Black Exterior:Spare Tire Carrier |
| U59 | Seat comfort package | U62 | Light & Sight Package |
| US3N | | VL | |
| VR | | 12B | Owners Manual |
| 132 | | 14U | Smartphone Integration |
| 163 | | 166 | |



Vehicle Master Inquiry (VMI) FOR INTERNAL USE ONLY

Dealer : 05179 VIN:W1K5J4GB7PN334174

| Option | Description | Option | Description |
|--------|---|--------|-----------------------------------|
| 16U | Apple CarPlay™ - | 17U | Android Auto |
| 1B4 | | 186 | |
| 1V8 | | 213 | Parameter Steering |
| 232 | Garage Door Opener | 234 | Blind Spot Assist |
| 235 | PARKTRONIC with Active Parking Assist | 242 | Passenger Seat Memory |
| 249 | Auto-dimming Driver and Rearview Mirrors | 258 | Active Brake Assist |
| 264 | License Plate Holder | 270 | GPS Antenna |
| 273 | Vehicle Exit Warning | 275 | Power Driver Seats with Memory |
| 286 | Luggage nets on back of front seats | 287 | Split-Folding Rear Seats |
| 294 | Driver Knee Airbag | 310 | Twin Cupholders |
| 342B | | 345 | Rain Sensor Wipers |
| 34U | Remote Services Premium | 351 | eCall-Emergency System |
| 355 | Extended MBUX functions" | 362 | HERMES Communications module LTE |
| 367 | Live Traffic | 37U | Remote Services Advanced |
| 3U7 | | 400 | Rear Center Arm Rest |
| 413 | Panorama Sunroof | 429 | 7-Speed DCT |
| 431 | Galvanized Shift Paddles | 440 | Cruise Control w/o speed limiter |
| 446 | Touchpad | 458 | 10.25" Instrument Cluster Display |
| 461 | English Inscriptions | 475 | Tire Pressure Monitoring System |
| 494 | USA specification | 4B8 | USB adapter cable |
| 500 | Power Folding Mirrors | 501 | Surround View Camera |
| 517 | HD Radio | 51U | Black Headliner |
| 536 | SiriusXM Radio with Free Trial Period | 543 | Double Sun Visors |
| 548 | MBUX Multimedia System | 551 | Anti-Theft Alarm System |
| 581 | Dual Zone Climate Control | 632 | LED Headlamps |
| 634 | Omission of first-aid kit | 636 | Omission of Warning Triangle |
| 650A | | 651A | |
| 668 | Sea Packing & Dispatch | 677 | Lowered Comfort Suspension |
| 696U | | 6P5 | |
| 6U0 | | 705L | |
| 763 | Remote Key with Panic Button | 772 | AMG Body Styling |
| 7U3 | Sport Seats | 7XXL | |
| 803 | Technical modifications | 859 | 10.25" Center Display |
| 871 | HANDS FREE ACCESS | 873 | Heated Front Seats |
| 877 | Multi-Color Ambient Lighting | 889 | KEYLESS-GO® |
| 897 | Inductive wireless charging and NFC pairing | 8U6 | |
| 916 | Large Capacity Fuel Tank | 950 | AMG Line |
| 986 | Identification label with VIN number | 989 | VIN Code |

Damage History

| | | Dealer Code | RO No | Line No | | TO THE RESERVE AND ADDRESS. | RO Close Date | 11017-010-01-01-0 | | Seq No |
|--------------|-------------------------------|----------------|--------|---------|-----------|-----------------------------|------------------|-------------------|------|-----------|
| 1 21852 ZZ 0 | Dealer Pre- Delivery (PDI) | 05146 | 136196 | A | 107272190 | 10/21/2022 | 10/21/2022 | | RAPS | |

Customer Pav Data

| Dealer Code | | | Repair Close Date | RO Mileage | OP Code/Part # | Description |
|----------------|---------|------------|----------------------|---------------|------------------|---|
| 05146 | 1164495 | 12/22/2023 | 12/22/2023 | 0009133 | 073 | Loaner safety inspection to include synthetic oil and filter change |
| 05146 | 1164495 | 12/22/2023 | 12/22/2023 | 0009133 | A0009862000 16 | WINDSHIELD CLEANING AGENT |
| 05146 | 1164495 | 12/22/2023 | 12/22/2023 | 0009133 | A0019893701 USA9 | MB Genuine Engine Oil 5W- |
| 05146 | 1164495 | 12/22/2023 | 12/22/2023 | 0009133 | A2701800109 | TS OIL FILTER ELEMENT |
| 05146 | 1164495 | 12/22/2023 | 12/22/2023 | 0009133 | N007603014106 | SEAL RING, VLRUB |
| 05146 | 1154827 | 08/18/2023 | 08/23/2023 | 0005032 | 098 | CUSTOMER STATES: |
| 05146 | 1154827 | 08/18/2023 | 08/23/2023 | 0005032 | 098 | SUBLET REPAIRS |
| 05146 | 1145940 | 04/29/2023 | 05/01/2023 | 0003165 | 098 | CUSTOMER STATES: |
| 05146 | 1145940 | 04/29/2023 | 05/01/2023 | 0003165 | 098 | SUBLET REPAIRS |
| 05146 | 1130242 | 10/21/2022 | 10/21/2022 | 0000008 | 072 | PERFORM NEW CAR DETAIL |
| 05146 | 1130242 | 10/21/2022 | 10/21/2022 | 8000000 | 090 | SUPPLY LICENSE PLATE FRAMES FOR VEHICLE |

NATALIA TSEPENYUK

21722 ROSCOE APT 15

CANOGA PARK, CA 91304

711276

Mercedes-Benz of Calabasas

Authorized Mercedes-Benz Retailer

24181 Calabasas Road Calabasas, CA 91302

(818) 223-3102

WORKORDER

PAGE 1

| HOME | :818-4 | 45-4 | 730 | CONT: 747- | 388-4090 | | | B.A.R.# AC 25 | 50333 E.P.A | # CAD 9824 | 486946 | |
|-----------------------|----------------------|-------------------|----------|-------------------------------------|-------------------|--|-----------------------------|--|--|---------------|------------------|--|
| BUS: | | | | CELL: 747- | | SER | VICE ADVISOR: | 1451 JA | ZMIN, QUINTE | ERO | | |
| COLOR YEAR MAKE/MODEL | | VIN | | LICENSE | | MILEAGE IN/ OUT | | | | | | |
| | 23 MERCEDES-BENZ CLA | | Z CLA 25 | W1K5J | 4GB7PN334174 | | 12474/ | 12474/ | | | | |
| DEL | DATE | PROD. | DATE | WARR, EXP. | PROMIS | ED | PO NO. | RATE | PAYMENT | INV. D | ATE | |
| | B24 DD | | | | ** WAITE | | | | CASH | | | |
| | R.O. OPEN | ED | | READY | OPTION | s: DLR | :05179 | | | | | |
| | B2024 | | | | | | | | | | | |
| | OP CO | DE | TECH | | | | NSTRUCTIONS | | | | | |
| # A | MB1 | | | CMNT | | | THE LEFT FRO | | | HK and | | |
| | EST: | LBR | 37.0 | 0 TOTAL 3 | | DOT#7G | J2V3V2922 - | 225/40R1 | 9 93W | | | |
| # B | NIDB | | | IPS | | | oue Vehicle H terval Due | istory I | ndicatesNo | | | |
| # C | CARB | | | IPS | | *Inspect and Adjust Tire Pressures Reset Tire Monitoring System | | | | | | |
| # D | MBI | | | IPS | *Perform | ı Inspe | ctions per M | ercedes-l | Benz Servio | ce She | et | |
| **** | ***** | *** | *** | ****** | ***** | ***** | ****** | ***** | **** | | | |
| Prel | iminar | y Es | tima | te : \$37. | 00 | | | | | | | |
| **** | ***** | **** | **** | ***** | ***** | ***** | ***** | ***** | **** | | | |
| | | | | | | | | | | | | |
| BY LAW | , YOU MAY (| CHOOSE DJUSTME | ANOTHER | LICENSED SMOG (CH THE SMOG CHEC | CHECK FACILITY TO | PERFORM AI | YY PARTS: All parts are nev | v unless otherwise red source part requ | indicated. Remanufacture irements may be installe | ed and refurb | ished parts that | |

TEARDOWN/REASSEMBLY: If you authorize teardown of the vehicle or commencement of repairs, but do not authorize completion of a repair or service, a charge may be imposed for teardown, reassembly or partially completed work and you agree to pay the same. It is necessary to disassemble the vehicle to provide an estimated price for repairs. The estimated teardown and reassembly charge (including parts and labor) is \$ The maximum time for reassembly will be You understand that disassembly may prevent restoration of the vehicle to its former condition. SUBLET REPAIRS: Some repairs must be sublet due to the type of service required. The location will be disclosed upon request. | Section will be disclosed upon request. |
PAYMENT TERMS: I agree to pay for all labor and materials in Cash or approved credit card (unless the Dealership agrees to other payment arrangements in advance) simultaneously with delivery of the vehicle to me or 3 days after receiving notice that the vehicle is ready to be picked up. An express mechanics lien is hereby acknowledged on the vehicle to secure the cost of labor, materials, storage and/or towing charges. I understand that a storage charge equal to \$ will be assessed and shall accrue daily if I fail to pick up the vehicle within 3 days from the date I am notified that the repairs have been completed or after the communication of an estimate if I fail to authorize repairs. POWER-OF-ATTORNEY: I hereby appoint the Dealership as my attorney-in-fact and authorize it to sign my name upon any checks, drafts or other forms of payment issued in payment of this Repair Order. X By Signing Below: I agree that: (1) I have read this Repair Order and I authorize the completion of the services/repairs listed above in accordance with the terms and conditions herein; (2) the Dealership is not responsible for loss or damage to the vehicle or articles left in the vehicle in case of fire, theft, half, wind or any other cause beyond its control; (3) the Dealership may operate the vehicle on streets, highways or public roadways for the purpose of testing and/or inspecting the vehicle; and (4) I authorize the retrieval of on-board data as needed to facilitate vehicle repairs and the sharing of that data with the vehicle manufacturer for diagnostic or research purposes.

| equest, if our t varranty arranç eturned to you | gement and they are r | ave to return the pa not exempt due to t | rts to the manufa neir size, weight o | cturer or distributor under r other factors, they will b | | | |
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| Original Estimate (Parts & Labor) | | Approved By: | Date & Time | Authorization Obtained By: | | | |
| \$ | \$ | | | ☐ Tetaphone ☐ Fax (See Attached) ☐ E-mail (See Attached) | | | |
| Revised Estimate | \$ | | | Telephone Fox (See Attached) | | | |

acknowledge notice and oral approval of an increase in the original estimated price.

information is available upon request. You may inspect all parts removed from the vehicle upon

NATALIA TSEPENYUK

711276

Mercedes-Benz of Calabasas

Authorized Mercedes-Benz Retailer

WORKORDER

24181 Calabasas Road Calabasas, CA 91302

21722 ROSCOE APT 15 CANOGA PARK, CA 91304

PAGE 2

(818) 223-3102

| HOME:818-4 | 45-4 | 730 | CONT: 747- | 388-4090 | | | B.A.R.# AC | 250333 | E.P.A# CAD | 982486946 |
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CALABASAS MOTORCARS WILL NOT ACCEPT RESPONSIBILITY FOR ITEMS LEFT IN CAR OR AFTERMARKET ACCESSORIES

| BY LAW, YOU MAY CHOOSE ANOTHER LICENSED SMOG CHECK FACILITY TO PERFORM ANY NEEDED REPAIRS OR ADJUSTMENTS WHICH THE SMOG CHECK TEST INDICATES ARE NECESSARY. TEARDOWN/REASSEMBLY: If you authorize teardown of the vehicle or commencement of repairs, but do not authorize completion of a repair or service, a charge may be imposed for teardown, reassembly or partially completed work and you agree to pay the same. | PA mini rei |
|---|-----------------------------|
| It is necessary to disassemble the vehicle to provide an estimated price for repairs. The estimated teardown and reassembly charge (including parts and labor) is \$ The maximum time for reassembly will be X | ES |
| You understand that disassembly may prevent restoration of the vehicle to its former condition. | 10 |
| SUBLET REPAIRS: Some repairs must be sublet due to the type of service required. The location will be disclosed upon request. PAYMENT TERMS: I agree to pay for all labor and materials in Cash or approved credit card (unless the Dealership agrees to other payment arrangements in advance) simultaneously with delivery of the vehicle to me or 3 days after receiving notice that the vehicle is ready to be picked up. An express mechanics lien is hereby acknowledged on the vehicle to secure the cost of labor, materials, storage and/or towing charges. I understand that a storage charge equal to \$ will be assessed and shall accrue daily if I fail to pick up the vehicle within 3 days from the date I am notified that the repairs have been completed or after the communication of an estimate if I fail to authorize repairs. POWER-OF-ATTORNEY: I hereby appoint the Dealership as my attorney-in-fact and authorize it to sign my name upon any checks, drafts or other forms of payment issued in payment of this Repair Order. X | By I h no Na Fa |
| By Signing Below: I agree that: (1) I have read this Repair Order and I authorize the completion of the services/repairs listed above in accordance with the terms and conditions herein; (2) the Dealership is not responsible for ioss or damage to the vehicle or articles left in the vehicle in case of fire, theft, hail, wind or any other cause beyond its control; (3) the Dealership may operate the vehicle on streets, highways or public roadways for the purpose of testing and/or inspecting the vehicle; and (4) I authorize the retrieval of on-board data as needed to facilitate vehicle repairs | \$ Re |

and the sharing of that data with the vehicle manufacturer for diagnostic or research purposes.

Customer

ARTS: All parts are new unless otherwise indicated. Remanufactured and refurbished parts that neet manufacturer approved source part requirements may be installed at our discretion. Additional iformation is available upon request. You may inspect all parts removed from the vehicle upon squest. If our Dealership does not have to return the parts to the manufacturer or distributor under a varranty arrangement and they are not exempt due to their size, weight or other factors, they will be turned to you upon request, ☐ Some Parts Not Returnable ☐ Please Save Replaced Parts

STIMATE: PLEASE CHOOSE THE KIND OF ESTIMATE YOU WANT TO RECEIVE BY

IITIALING BESIDE ONE OF THE FOLLOWING CHOICES AND INDICATE THE BEST WAY TO

ONTACT YOU IF NECESSARY.

WRITTEN ESTIMATE _____ ORAL ESTIMATE _____ ELECTRONIC EST. y Telephone at: By Fax to: y E-Mail to:_ PRELIMINARY ESTIMATE \$.. DESIGNATION OF PERSON TO AUTHORIZE ADDITIONAL WORK OR PARTS. nereby designate the individual named below to authorize any additional work not specified or parts It included in the original written estimated price for parts and labor: ame of Designee: Phone Number: x Number: _E-Mail Address: istomer: Date: riginal Estimate Parts & Labor) Total Additional Cost Authorized Approved By: Date & Time Authorization Obtained By:

☐ Telephone ☐ Fex (See Attached) ☐ E (nex) (See Attached) vised Estimate

I acknowledge notice and oral approval of an increase in the original estimated price.