

## Warranty Extension Reimbursement Request Form

If you have incurred out-of-pocket expenses directly related to a repair that would have been covered under this warranty extension and would like to request reimbursement:

1. Please provide legible copies of receipts, invoices and/or repair orders and keep the originals for your records. *Documents will not be returned.*

Documentation must include:

- The name and address of the person who paid for the repair.
- The Vehicle Identification Number (VIN) of the repaired vehicle.
- A description of the problem and what repair was done, and the name, address and phone number of the repair facility that performed the work.
- Proof of payment for the repair and date payment was made (cancelled check, bank statement, etc.).

2. Please mail this form and required documentation to: **AUDI OF AMERICA, INC.**

**Attn: Warranty Extension Reimbursement  
3800 Hamlin Road, Auburn Hills, MI 48326**

**Please note:**

- Your claim will be acted upon within 60 days of receipt. If your claim is approved, you will receive a check from Audi. Reimbursement may be limited to the amount the repair would cost if it had been completed by an authorized Audi dealer.
- If your claim is incomplete we will contact you and offer you the opportunity to provide additional documentation to support your claim.
- If your claim is denied we will contact you with the reason(s) for denial.

Statements made in support of this reimbursement request are true and the accompanying documents are actual copies reflecting the actual expense(s) incurred.

--WEDM -----Campaign Code(s)



Customer's Signature \_\_\_\_\_

Preferred Phone

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Email Address

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Questions? Please call 1-800-253-2834