

SWORN STATEMENT FORM

INSTRUCTIONS:

1. This form **must be signed in the presence of the notary.**
2. Present a valid ID at the time of signing.
3. It is your obligation to check your state's law regarding any other notary requirements.
4. If this form is not filled out in its entirety, hand signed and properly notarized, it will be rejected and your claim will be denied.

DECLARATION:

I, _____ [your name], hereby state the following facts:

A Subject Vehicle¹ I own or lease as of May 19, 2022, or which I previously owned or leased before May 19, 2022, required the repair or replacement of an IPM or Inverter prior to February 13, 2023.

I cannot locate documentation (an invoice, a repair order, a receipt, etc.) pertaining to that repair or replacement. Accordingly, I am providing the following information to the best of my recollection and knowledge:

Name and address of Toyota Dealer or third-party shop that performed the repair or replacement of the IPM or Inverter in my Subject Vehicle **(response is mandatory or claim will be denied)**:

Approximate date on which the repair or replacement of the IPM or Inverter in my Subject Vehicle occurred **(response is mandatory or claim will be denied)**: ____

Which part was repaired or replaced **(response is mandatory or claim will be denied)**:
IPM or Inverter? _____

Total amount I paid for the repair or replacement of the IPM or Inverter **(response is mandatory or claim will be denied)**: \$ _____

¹ Subject Vehicle means 2010 to 2015 model year Prius vehicles and 2012 to 2017 model year Prius V vehicles that were the subject of Safety Recall E0E, F0R, J0V, and/or 20TA10, even if the Safety Recall was not performed on the vehicle.

Total amount I paid for towing (if any) related to the repair or replacement of the IPM or Inverter **(if claiming reimbursement for towing expenses, response is mandatory or claim will be denied)**: \$ __

Total amount I paid for a rental car (if any) related to the repair or replacement of the IPM or Inverter **(if claiming reimbursement for rental car expenses, response is mandatory or claim will be denied)**: \$ __

Reason(s) that I do not have a receipt, invoice, or other proof relating to the repair or replacement of the IPM or Inverter **(response is mandatory or claim will be denied)**(if you need more space, please attach separate sheet):

I declare or certify, verify, or state under penalty of perjury under the laws of the United States of America that the information and facts set forth above are true and correct to the best of my recollection and knowledge.

Executed on _____ [Date]

In the State/Commonwealth of: _____

County/Parish of: _____

Your Signature: _____

[Must be hand-signed]

[Notary Signature and Stamp]