

P.O. Box 183581 | Arlington, TX 76096-3581

Account:				
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If you are purchasing the vehicle from GM Financial: If you are purchasing from or returning to a dealership: 1. Take this form with you to the GM dealership. Complete and send with payment to: 2. Complete and sign this document. 3. Give the document to the GM dealership and get a copy GM Financial Leasing for your records. Attn: Treasury Operations P.O. Box 99606 If you forget this form and you don't sign an odometer Arlington, TX 76096-9606 statement at the dealership, complete this after you turn in your vehicle and send it to GM Financial one of the following ways: By fax: 1-877-470-9870 By email: LeaseEndExperience@gmfinancial.com Note: Customers located in AZ, AR, CO, FL, HI, KS, NC, By mail: **GM Financial** PA, SD and VT can not purchase their vehicles directly P.O. Box 183692 from GM Financial; residents of these states will need Arlington, TX 76096-3692 to visit a GM dealership to purchase. LEASED VEHICLE ODOMETER DISCLOSURE NOTICE AND STATEMENT Federal law (and state law, if applicable) requires that the lessee disclose the mileage of a leased vehicle to the lessor in conjunction with the transfer of ownership. Failure to complete or making a false statement may result in fines and/ or imprisonment. Complete the disclosure form below and return it to GM Financial. _ (print name of person making disclosure) state that the odometer now reads _ (no tenths) miles and (please check one box): ☐ I hereby certify that, to the best of my knowledge, it reflects the actual mileage of the vehicle described below; or ☐ I hereby certify that, to the best of my knowledge, the odometer reading reflects the amount of mileage in excess of its mechanical limits; or ☐ I hereby certify that the odometer reading is NOT the actual mileage. VIN (Vehicle Identification Number): Year: Make: Model: Body Type: Lessee Name: Lessee Address: (Street) (City) (ZIP Code) (State) **PLEASE SIGN HERE** Lessee Signature Date of Statement --- for GM financial use only below this line $\,-$

Lessor Name and Address:	Lessor Signature:			
GM Financial				
P.O. Box 183692 Arlington, TX 76096-3692	Date Disclosure Form Sent to Lessee:			
	Date Completed Disclosure Form Received by Lessor:			