

Exhibit F

CLAIM FORM FOR SETTLEMENT

Your claim must be submitted online or postmarked by: **MONTH DD, 2026**

2016-2017 Kia Optima and 2017 Kia Sportage

Le Beau, et al. v. Kia America, Inc.,
Case No. 22-cv-001545
U.S. District Court for the Central District of California

GENERAL INSTRUCTIONS

A Settlement was reached between Kia America, Inc. and plaintiffs in a class action lawsuit relating to the window regulators in certain 2016-2017 Kia Optima and all 2017 Kia Sportage vehicles (the "Class Vehicles"). If you received notice that you are a Class Member in this Settlement and currently or previously owned or leased a 2016-2017 Kia Optima or a 2017 Kia Sportage, you may be eligible to submit a Claim for certain benefits.

Please read this Claim Form carefully and answer all questions. Failure to provide required information or documentation could result in a denial of your claim.

This Claim Form may be submitted electronically via the Settlement Website at **URL** or completed and mailed to the address below. Please type or legibly print all requested information, in blue or black ink. Mail your completed Claim Form, including any supporting documentation, by U.S. mail to:

Kia Window Regulator Settlement
c/o Claims Administrator
Claims Administrator mailing address

I. CLASS MEMBER NAME AND CONTACT INFORMATION

Provide your name and contact information below. You must notify the Claims Administrator if your contact information changes after you submit this form. All fields are required.

First Name

Last Name

Street Address

City

State

Zip Code

Email Address

Telephone Number

II. PROOF OF CLASS MEMBERSHIP

Check this box to certify that you currently or previously owned or leased an eligible 2016-2017 Kia Optima or a 2017 Kia Sportage and received notice of the Settlement.

Questions? Go to **URL** or call 1-**XXX-XXX-XXXX**.

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Enter the VIN Number of the Class Vehicle you currently or formerly owned or leased:

VIN Number

III. REIMBURSEMENT FOR OUT-OF-POCKET COSTS

All members of the Settlement Class who submit a valid Claim using this Claim Form and supporting documentation are eligible for reimbursement for past window regulator repairs. The amount that you will be reimbursed will depend on the mileage of your vehicle at the time the window regulator repair occurred, as shown in the chart below:

Mileage at time of Out of Warranty Failure	Percentage (%) of Reimbursement	Dollar Cap (\$) on Reimbursement
Under 35,000 miles	100%	\$400 (100% of \$400)
35,001-55,000 miles	80%	\$320 (80% of \$400)
55,001-75,000 miles	60%	\$240 (60% of \$400)
75,001-125,000 miles	45%	\$180 (45% of \$400)
125,001 miles+	40%	\$160 (40% of \$400)

You must provide supporting documentation for each repair which should include: (1) a repair order from a Kia dealership or reputable third-party repair facility that can be verified at the discretion of the Claims Administrator, that lists a Class Vehicle by VIN, identifies a Window Regulator Repair, the mileage of the Class Vehicle at the time of the Window Regulator Repair, the date of the repair, and the cost for such repair, *and* (2) proof of payment for a Window Regulator Repair by the Class Member (check, credit card receipt, etc.).

Repair 1:

Date of Repair: _____

Mileage of Vehicle on Date of Repair: _____

Cost of Repair: \$_____

Check this circle to affirm that you have included the following documentation related to this repair: (1) a repair order from a Kia dealership or reputable third party repair facility that lists a Class Vehicle by VIN, identifies a Window Regulator Repair, the mileage of the Class Vehicle at the time of the Window Regulator Repair, the date of the repair, and the cost for such repair, *and* (2) proof of payment for a Window Regulator Repair by the Class Member (check, credit card receipt, etc.). If you do not provide this documentation, your claim may be denied.

Repair 2:

Questions? Go to **URL** or call 1-**XXX-XXX-XXXX**.

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Date of Repair: _____

Mileage of Vehicle on Date of Repair: _____

Cost of Repair: \$ _____

Check this circle to affirm that you have included the following documentation related to this repair: (1) a repair order from a Kia dealership or reputable third-party repair facility that lists a Class Vehicle by VIN, identifies a Window Regulator Repair, the mileage of the Class Vehicle at the time of the Window Regulator Repair, the date of the repair, and the cost for such repair, and (2) proof of payment for a Window Regulator Repair by the Class Member (check, credit card receipt, etc.). If you do not provide this documentation, your claim may be denied.

Repair 3:

Date of Repair: _____

Mileage of Vehicle on Date of Repair: _____

Cost of Repair: \$ _____

Check this circle to affirm that you have included the following documentation related to this repair: (1) a repair order from a Kia dealership or reputable third party repair facility that lists a Class Vehicle by VIN, identifies a Window Regulator Repair, the mileage of the Class Vehicle at the time of the Window Regulator Repair, the date of the repair, and the cost for such repair, and (2) proof of payment for a Window Regulator Repair by the Class Member (check, credit card receipt, etc.). If you do not provide this documentation, your claim may be denied.

Repair 4:

Date of Repair: _____

Mileage of Vehicle on Date of Repair: _____

Cost of Repair: \$ _____

Check this circle to affirm that you have included the following documentation related to this repair: (1) a repair order from a Kia dealership or reputable third party repair facility that lists a Class Vehicle by VIN, identifies a Window Regulator Repair, the mileage of the Class Vehicle at the time of the Window Regulator Repair, the date of the repair, and the cost for such repair, and (2) proof of payment for a Window Regulator Repair by the Class Member (check, credit card receipt, etc.). If you do not provide this documentation, your claim may be denied.

Questions? Go to URL or call 1-XXX-XXX-XXXX.

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IV. DEALER SERVICE CARD

As an alternative to Reimbursement for Out-of-Pocket Costs above, **current** Class Vehicle owners and lessees are eligible to obtain a Dealer Service Card in the amount of \$40.00. The Dealer Service Card can be used by Class Members for any service, merchandise, or parts purchase at any authorized Kia dealership’s service department within six (6) months of issuance. You cannot select this option if you submitted a claim for Reimbursement for Out-of-Pocket Costs above. Former Class Vehicle owners and lessees may not select this benefit option. **You must provide documentation to demonstrate that you are a current Class Vehicle owner or lessee.** One example of documentation that would meet this requirement is current vehicle registration.

Check this circle to submit a claim for a \$40.00 Dealer Service Card and to affirm that you have included documentation demonstrating that you are a current Class Vehicle owner or lessee.

V. PAYMENT SELECTION

Please select **one** of the following payment options, which will be used should you be eligible to receive a settlement payment for an Out-of-Pocket expense:

- PayPal Venmo Zelle Check (sent to above address)

VI. ATTESTATION & SIGNATURE

I swear and affirm under the laws of my state that the information I have supplied in this Claim Form is true and correct to the best of my recollection, and that this form was executed on the date set forth below.

Signature

Printed Name

Date

Questions? Go to **URL** or call 1-**XXX-XXX-XXXX**.