

VEHICLE RETURN RECEIPT

This form is to be completed when a leased vehicle is returned to Stellantis Financial Services (SFS). Both the customer and the dealer must sign this form at the time of vehicle return. Please retain this form for your records.

LESSEE .	AND VEHICL	E INFORMATI	ON			
Lessee's Name:			Co-Lessee's Name:			
Address:			City:	State:	ZIP:	
Account Nun	nber:					
Lessee's Signature:			Date of Statement:			
YEAR	MAKE	MODEL	BODY	VEHICLE IDENTIF	FICATION NUMBER	
TURN-IN	N INFORMAT	ION	I			
Date of Retu	rn:	Receiving Deale	ership Name:			
Dealer Address:			Dealer Phone Number:			
Dealer Representative:			# of Keys Received:			
Complete to I, mileage of to 1. I her reflection 2. I her	he disclosure for (no he vehicle describ eby certify that to cts the amount o	tenths) miles and to to bed below, unless or the best of my kno f mileage in excess on the odometer reading	print name), state that the best of my knowne of the following owledge the odome of its mechanical lim	t the odometer now wledge that it reflect is checked. eter reading nits.	<i>ı</i> reads	
	INFORMATI ne and Address:	ON Stellantis Financial S	ervices 5757 Woo	odway DR #400 Ho	uston, TX 77057	
By signing b	VLEDGMEN below, the LESSE isclosure stateme	E confirms the vehic	le was returned on	the date above and	affirms the	
Lessee's Signature:				Date:		
By signing b	oelow, the DEALE	R confirms the vehi	cle was received or	the date indicated	above.	
Dealer Signature:			Date:			