

Indefinite Layoff

Informational Package

St. Louis North Assembly Plant

Information Included:

- Labor Market, Employment / Payroll Contact #
- Unemployment Instructions – Indefinite Layoff
- Accrued Vacation Pay / PAA Clarification
- Wage Verification Instructions
- Work Event: Layoff (Benefit Information)

ST. LOUIS NORTH ASSEMBLY PLANT

NOTICE TO ALL EMPLOYEES

Effective Monday, August 24, 2009 you will be placed on an Indefinite Layoff unless otherwise notified. Please use the attached information to assist in making your labor market selections and filing for State Unemployment and SUB.

LABOR MARKET SELECTION

Employees who are placed on Indefinite Layoff are eligible to make a Labor Market Selection. Selections may be made beginning August 24, 2009.

Elections must be completed at the North Plant Employment Office.

COMPLEX EMPLOYMENT OFFICE HOURS

The St. Louis Complex Employment Office (at St. Louis North) is currently open the following hours:

Monday thru Friday:
8:00am to 11am
(636) 343 - 3360

Kiosks are located in the North Plant Employment Lobby for your use. You can also access many of the Kiosk functions through Dashboard Anywhere at <http://dashboardanywhere.chrysler.com>.

PAYROLL SERVICES

Payroll Phone Contact
Toll Free: **(877) 827 - 7744**

If you need to contact a payroll representative, please utilize the toll free number above. Calls may be made Monday thru Friday from 7am to 5pm.

ST LOUIS NORTH ASSEMBLY PLANT

INFORMATION NOTICE INSTRUCTIONS - HOW TO FILE FOR UNEMPLOYMENT DURING AN *INDEFINITE LAYOFF*

To reactivate or open a new state unemployment claim, all employees on an indefinite layoff must contact the State Unemployment office the first week of your layoff. Once your claim has been open or reactivated, you must contact the State Office each week to file your claim for the previous week. If State System Benefits are denied, you must bring your statement from the State Office to the Plant to apply for SUB on the Employee Central Kiosk. If you receive TRA, you must bring your TRA payment statement to the Plant to apply for SUB on the Employee Central Kiosk.

You can make your unemployment claim by telephone or on line. To file your claim by telephone, you must call **(314) 340-4950 in the local St Louis calling area or 1-800-320-2519 if outside the local calling area.** Select from the menu "Filing a claim" and the Interactive Voice Response System will identify the week to be claimed and ask a series of questions that can be answered using the touch-tone telephone keypad. You can also file your claim on line at www.moclaim.com.

Use the following schedule to make your claims:

FOR STATE CLAIM ENDING DATE	DATES YOU CAN MAKE A CLAIM
7-18-09 thru 8-22-09	NONE. NORMAL PAY WILL BE ISSUED BY CHRYSLER
8-29-09	ALL EMPLOYEES MUST CONTACT THE STATE BETWEEN MONDAY, AUGUST 24, 2009 TO FRIDAY, AUGUST 28, 2009 TO OPEN OR REACTIVATE THEIR CLAIM.
8-29-09	BEGINNING MONDAY, AUGUST 31, 2009, EMPLOYEES MUST CONTACT THE STATE EACH WEEK TO FILE THEIR CLAIMS FOR THE PREVIOUS WEEK

**TO AVOID COMPLICATIONS WITH YOUR STATE UNEMPLOYMENT AND SUB,
YOU NEED TO CALL DURING THE DATES LISTED ABOVE.**

Those filing who establish a new benefit year will receive "Information for Workers" pamphlet in the mail. This pamphlet will provide detailed information concerning the filing for benefits. The pamphlet is also available at any local Workforce Development Office or on the Internet at www.dolir.state.mo.us/es/dolir4b2.htm

St. Louis Complex Employment Office
July 1, 2009

St. Louis North ASSEMBLY PLANT



IMPORTANT NOTICE

ACCRUED VACATION PAY AND UNUSED PAA PAY CLARIFICATION

PLEASE NOTE THAT PURSUANT TO THE P.M. & P NATIONAL AGREEMENT, ANY UNUSED PAA TIME AND ACCURED VACATION WILL BE PAID TO EMPLOYEES IN MAY OF THE FOLLOWING YEAR.

EMPLOYEES ARE REMINDED THAT PAY FOR PAYMENT IN LIEU AND UNUSED PAA IN MAY IS NOT REPORTABLE OR DEDUCTIBLE FOR STATE UNEMPLOYMENT PURPOSES.

PLANT HUMAN RESOURCES DEPARTMENT

7/01/09

INSTRUCTIONS: Wage Verification

Chrysler Group, LLC uses **The Work Number** to provide automated employment and income verification on our employees. You have a couple of options to get the information you need instantly.

Option 1: www.theworknumber.com

Use a credit card or become a member to get instant Web verifications.

Option 2: 1-800-367-5690

Use a credit card or become a member to get a voiced or faxed verifications in minutes.

To Obtain Proof of Employment Only

- 1). Contact The Work Number by using one of the above options.
- 2). Follow the prompted instructions.

You will need the following information:

- DaimlerChrysler Corporation Employer Code : **11821**
- Employee's Social Security Number provided by the employee.

To Obtain Proof of Employment plus Income

- 1). Follow steps 1 and 2 above.

You will need the additional information:

- A Salary / Wage Key Authorization Code (provide by the employee).
- Employees may get a Salary/Wage Key by visiting <http://www.theworknumber.com/employee> or calling 1-800-367-2884.

Special Instructions for Social Service Agencies

Registered Users

- Get verifications at : www.theworknumber.com/socialservices or by calling -800-660-3399.
- Enter your registered fax number, if applicable, or other identifying codes.
- Your verification will be faxed directly to this pre-registered fax number.

New Users

Please call 1-800-996-7566 to register to use **The Work Number**. Registration is a one-time process and takes approximately 5 minutes.

For additional questions or more information regarding the benefits of membership, please call:

The Work Number Client Services Center

Monday - Friday; 7:00a.m. – 8:00 p.m. (CST)

1-800-996-7566

1-800-424-0253 (TTY – Deaf)

INSTRUCTIONS: Wage Verification (Continued)

Instructions for Verifying My Employment Only (No Income/Wage)

The Work Number will allow you to provide any third-party verifier (lender, landlord, bank, mortgage company, etc.) with proof of your employment. Fill-in the required information and give a copy to your verifier. You may want to keep a copy for your records as well.

INFORMATION REQUIRED

1. Your social security number: _____ - _____ - _____
2. DaimlerChrysler Corporation's company code: **11821**
3. Give this sheet to your Verifier.

Instructions for Verifying My Employment AND Income/Wage

The Work Number will allow you to provide any third-party verifier (lender, landlord, bank, mortgage company, etc.) with proof of your employment and income/wage. Fill-in the required information and give a copy to your verifier. You may want to keep a copy for your records as well.

INFORMATION REQUIRED:

1. Salary/Wage Key (see instructions below) _____
2. Your social security number: _____ - _____ - _____
3. DaimlerChrysler Corporation's (company code: **11821**)
4. Give this sheet to your Verifier.

Employee Instructions: Getting a Salary/Wage Key

Access *The Work Number* at : www.theworknumber.com or call 1-800-367-5690

You will need this information:

- DaimlerChrysler Corporation company code : **11821**
- Your DCID
- Your PIN : this is the middle two numbers of your SSN and birth date mm/dd/yy.
Example: SSN:123-45-6789; Birth Date: July 4 1972; your PIN would be :45070472
- Next select the Create a Salary Key link. A new window will appear. Locate your Salary Key under the first column of the table. **You will give this to the verifying third-party.** See the above **Information Required**.
Call 1-800-367-2884 if you need assistance with creating a Salary/Wage Key

What your Verifier needs to do to retrieve your Verification

DaimlerChrysler Corporation uses *The Work Number* (a service of TALX Corporation) to provide automated employment and income verifications on our employees.

1. Go to www.theworknumber.com and click the verifier's icon.
2. Enter the required information (above) when prompted.
3. Verifier, if you do not have Internet access or would prefer to use the telephone, call 1-800-367-5690. If you have any questions about the service, complete instructions and information are available at www.theworknumber.com or by calling 1-800-996-7566 (voice) / 1-800-424-0253 (TTY/deaf).

Work Event: Layoff

(From <http://dashboardanywhere.chrysler.com>)

BENEFIT INFORMATION AND RESOURCES

Check with Benefit Express for health care, life insurance and pension benefit information and assistance by phone at 1-888-456-7800 or access Your Benefits Resources (YBR) website at <http://resources.hewitt.com/chrysler>. If you lose or forget your YBR password, call Benefit Express and speak to a representative. You will be asked to verify five pieces of personal information. Then you will be able to set a new password for yourself so you can log on to the website.

For Savings Plan information and assistance, call Merrill Lynch at 1-800-483-7283. You can also log on to the Merrill Lynch website at www.benefits.ml.com to manage your accounts online.

Final Paycheck & Compensation

All paychecks will be mailed to your home address on file.

Expense Reporting

Any outstanding expense reports or other advances should be resolved prior to your last day worked to avoid possible delay in receiving your final check.

Address Changes

Inform the company of your address, name, marital status, or other personal data. Address changes must be submitted on Dashboard Anywhere, or by using the Employee Central Kiosk. If your zip code changes, a change in health care plans may be required. Contact Benefit Express at 888-456-7800 for more information.

Payment In-lieu of Vacation (PILV)- Paid Absence Allowance (PAA)

If you worked at least thirteen (13) pay periods in the current vacation year:

- You will be eligible, depending on the number of pay periods worked, for a full or prorated payment in lieu of vacation which will be sent to your plant next May.
- If you have one (1) or more years of seniority next May 1, you will, depending on the number of pay periods worked, be credited with a full or prorated paid absence allowance which may be used during the vacation year commencing next May.

Any unused paid absence allowance and unused deferred payment in lieu of vacation currently credited to you will be paid to you at the time payment in lieu of vacation is paid next may.

Profit Sharing

If you are placed on an indefinite layoff during the plan year for which a profit sharing payment is made and are otherwise eligible as of December 31 of the plan year, you will receive a payment based on your eligible pay during the plan year.

- The plan provides that the payment be distributed no later than two (2) and one-half months

- following the end of the plan year.
- If you are an inactive employee at the time of the distribution, the profit sharing payment will be mailed to your address of record.

Taxes

Consult Your Tax Advisor / Internal Revenue Service (IRS) Web site

Log-on to the "Internal Revenue Service" web site at <http://www.irs.com> to learn more about the IRS laws that govern estimated tax payment and exemption rules. If you have moved, provide your new mailing address to the IRS.

Federal W-4 Tax Withholding Allowance Certificate

A qualifying work or life event may require you to file a new Federal W-4 Employee Withholding Allowance Certificate to claim your proper withholding allowance.

If a change to your state and local tax withholdings is required, you may complete the required change on Dashboard Anywhere.

UAW GROUP LEGAL SERVICES PLAN

Your eligibility ends if you have been continuously laid off for a period exceeding twenty four months (24) after the month in which your layoff began.

HEALTH CARE

Health Care Eligibility

When Coverage Stops

Hospital, Surgical, Medical, Dental, Vision and Hearing (HSMDVH) coverage remains in effect until the end of the month following the month in which your layoff begins. HSMDVH coverage continues on the basis of your years of seniority as of the date your layoff begins in accordance with the following table:

Years of Seniority on Date Layoff Begins	Maximum Number of Months For Which Company Provided Coverage is Continued
Less than 1	0
1 but less than 2	3
2 but less than 3	5
3 but less than 4	7
4 but less than 5	9
5 but less than 10	12
10 and Over	24

Dental will run out the month after the month you are laid off. Confirm coverage with Benefit Express at 1-888-456-7800.

After the last month for which the company provides coverage, you may continue HSMDVH coverage for a period of 12 additional months by paying the required monthly premium amount for such coverage.

Cash-Pay Administrator

The cash-pay administrator is Benefit Express regardless of the health care plan in which you are enrolled. You must contact Benefit Express at 888-456-7800 within thirty (30) days prior to your coverage termination if you wish to continue coverage.

Dental Coverage

Dental coverage remains in effect until the end of the calendar month following the month in which your layoff begins. Thereafter, dental coverage may not be continued.

Health Care Coverage Continuation

You may be eligible to continue your health and dental care coverage through COBRA or through Benefit Express.

Consolidated Omnibus Budget Reconciliation Act (COBRA)

COBRA is an alternative to any continuation of layoff coverage made available by the company. For example, as a laid-off employee, you may choose to continue company-provided coverage or COBRA continuation coverage on a self-pay basis.

- If you choose COBRA, the company-provided layoff coverage will be canceled.
- If no COBRA election is made, layoff coverage continuation provisions will be applied automatically.

COBRA requires employers to offer qualified persons the opportunity for an extension of health care coverage for eighteen (18) months following layoff.

- If you are eligible for COBRA coverage, you will have to pay the applicable premium (including an administrative fee).

The COBRA administrator is Benefit Express regardless of the health care plan in which you are enrolled. If you do not receive a COBRA notice within thirty (30) days after your employment terminates, contact Benefit Express at 888-456-7800.

Non-Group Conversion Coverage

After your coverage (company-provided, cash-pay, COBRA) terminates, you may be eligible for non-group conversion coverage through the health care plan in which you are enrolled.

- You must contact your health plan within thirty (30) days from the date your coverage period ends.

Note: There is no group conversion coverage for dental or vision coverages.

LIFE & DISABILITY PROGRAM

Group Insurance

Group life insurance includes: Basic Group Life, Survivor Income Benefits (SIB), Accidental Death and Personal Loss Insurance(ADPL), Sickness & Accident (S&A), Extended Disability Benefit (EDB).

When Coverage Stops

If you are laid off, your group life, S&A, and EDB coverage will continue until the end of the month following the month in which your layoff begins. Thereafter, if your layoff is a qualifying layoff under the SUB Plan, your group life, survivor income benefit, and ADPL insurance coverage will continue on the

basis of your years of seniority on the date layoff begins, in accordance with the following table:

If your year(s) of seniority on date layoff begins is:	The maximum number of months for which company-provided insurance will be continued:
Less than 1	0
1 but less than 2	3
2 but less than 3	5
3 but less than 4	7
4 but less than 5	9
5 but less than 10	12
10 and Over	24

Continuation of Coverage

Following the last month of company provided group life insurance coverage, you may continue your group life, survivor income benefit, and ADPL insurance coverage for an additional 12 months by paying the required monthly premium to Benefit Express. You will be notified prior to the termination of group life coverage by Benefit Express of the amount of your coverage, monthly premium amount, and payment instructions.

Group Life Conversion

If all or a portion of your group life insurance terminates because your active employment terminates, the amount of life insurance which terminates may be converted as follows :

- At termination of employment - up to 100% of life insurance coverage in force on the day prior to the termination date.
- At plan termination - the lesser of a) \$10,000 or b) the difference between life insurance coverage under the plan and coverage under any other plan for which you are eligible.

How to Convert Your Policy

In order to convert, written application must be made for an individual policy and the first premium must be paid within thirty-one (31) days after resignation or discharge.

- No evidence of insurability will be required.
- Contact Met Life Insurance office at 1-888-892-5472 for an application form.
- The individual policy will become effective at the end of the thirty-one (31) day period during which conversion is permitted.

The premiums for the converted policy will be at the Insurance Carrier's then customary rates or the same policy issued to any other person of the same class of risk and age at the time the converted policy becomes effective.

An individual policy will be in exchange for all benefits and privileges under the group life insurance policy, except with respect to any amount of life insurance which may be continued after the effective date of the individual policy, as described in the Summary Plan Description under "The Benefit Amount After Age 65" in the section entitled "Group Life Insurance."

If You Return to Work At Chrysler

If you are subsequently recalled, your group life insurance coverage will begin on the first day you return to active work.

Optional & Dependent Group Life (OGL& DGL) Insurance

When Coverage Stops

If you are laid off, your insurance coverage will continue through the end of the month covered by your payroll deduction. Thereafter, you may continue your optional group life insurance by paying the required premiums to Benefit Express. The insurance may be continued for a period (not to exceed 24 months) equal to that for which you may be covered for company-provided coverage under the Life and Disability Program, and thereafter for an additional 12 months.

Continuation of Coverage

You will receive notification from Benefit Express instructing you to contact them if you wish to continue coverage through monthly direct billing. Contact Benefit Express at 1-888-456-7800 for additional information.

OGL/DGL Conversion to an Individual Policy

Within thirty-one (31) days after group coverage terminates, you may convert such coverage, without medical examination, to an individual policy by contacting MetLife at 1-888-892-5472.

Optional Group Accident (OGA) Insurance

When Coverage Stops

Personal Leave of Absence

If you are laid off, your OGA coverage will continue through the end of the month covered by your payroll deduction.

Continuation of Coverage

Following the last month of company provided group life insurance coverage, you may continue your OGA coverage by paying the required monthly benefit to Benefit Express. The insurance may be continued for a period (not to exceed 24 months) equal to that for which you may be covered for corporate provided group life insurance under the Life & Disability Program, and thereafter for an additional 12 months.

You will be notified prior to the termination of Corporate provided coverage by Benefit Express of the amount of coverage, monthly premium amount, and payment instructions.

Disability Benefits

Sickness & Accident Benefit (S&A)

If you are laid off, your life, S&A, reinstated S&A and EDB coverage will continue until the end of the month following the month in which your layoff begins.

If You Become Totally Disabled While On a Qualifying Layoff Under the SUB Plan

If you become totally disabled while on a qualifying layoff under the SUB plan, or after the period sickness and accident coverage terminates, you may be eligible for reinstated sickness and accident benefits if you are:

- Eligible for weekly benefits under the SUB plan; and
- Have group life insurance in force.

To file a claim contact Sedgwick CMS at 888-322-4462.

Reinstated Sickness & Accident Benefits

If you become eligible for reinstated sickness and accident benefits, your group life insurance (which includes survivor income and accidental death and personal loss) will continue while you remain totally and continuously disabled but not to exceed the period you are eligible for extended disability benefits (EDB).

If You Return to Work At Chrysler

If you are subsequently recalled, your disability coverage will begin on the first day you return to active work.

Extended Disability Benefits (EDB)

You may be eligible for Extended Disability Benefits after you have exhausted your Reinstated Sickness & Accident benefits if you meet all the eligibility requirements.

DEPENDENT CARE ASSISTANCE PROGRAM (DCAP)

When Participation Stops

Your pretax contributions cease on the date of your layoff. Throughout the plan year, you may continue to submit claims for expenses incurred up to the balance of your account as of the date of your layoff.

- This amount is not the total annual amount that you chose, but rather the deductions withheld prior to your layoff date.

Note: There is no COBRA continuation option for the Dependent Care Assistance Program.

SAVINGS PLANS

Hourly Employees' Deferred Pay Plan (HDPP)

Contributions

Your payroll deductions will cease with your final paycheck. Your account assets purchased with your contributions and earnings are one hundred percent (100%) vested.

Outstanding Loan(s)

If you have any outstanding loan(s) under HDPP, contact the Merrill Lynch Participant Service Center at 800-483-SAVE (7283) to arrange for making regular monthly payments or payment-in-full.

You may pay off the entire outstanding loan balance at any time with a certified check or money order. Your repayment must be accompanied with a completed "Loan Repayment/Payoff Form" provided by Merrill Lynch.

- You are not permitted to make partial repayments.
- Loan repayments will be invested according to your current investment elections and will repay the original type of savings (pretax savings,) used at the time of the loan issuance.
- If you do not have a current investment election for the type of savings being repaid, the repayment will be invested in the Chrysler Stable Value Fund.

Hardship Withdrawal

While on a layoff, you cannot withdraw pretax savings before age fifty-nine (59) and six (6) months unless

you qualify for a hardship withdrawal. Hardship withdrawals are permitted for:

- Qualified medical expenses for you and eligible dependents.
- Expense to prevent eviction from, or mortgage foreclosure on your principal residence.
- Purchase of your principal residence.
- Payment of post-secondary education for the next twelve (12) months for you and eligible dependents.

Withdrawals

After age fifty-nine (59) and six (6) months savings withdrawals are permitted.

Break in Seniority - Assets of More than \$5,000

If you break your seniority and you have assets of five thousand dollars (\$5,000) or more in your account, the assets in your account will remain in the plan until you request that your assets be distributed to you or rolled into another qualified plan.

At age seventy (70) and six (6) months the Internal Revenue Service (IRS) regulations require that you take a distribution of some or all of your account assets.

Break in Seniority - Assets of Less than \$5,000

If you break your seniority and you have assets in your account, which are less than five thousand dollars (\$5,000), your account assets will be automatically rolled-over to an IRA. Merrill Lynch will send you additional information.

Tax Withholding for Distributions

Twenty percent (20%) in federal income taxes will automatically be withheld from the taxable portion of your distribution unless it is to be directly rolled over to an IRA, eligible savings, or retirement plan.

SUPPLEMENTAL UNEMPLOYMENT BENEFIT (SUB)

Regular Layoff Benefits

If you have at least one (1) year of seniority as of your last day worked, have a corporate service date prior to 10-29-07, are on a qualifying layoff from the UAW Bargaining Unit, and have registered and reported to a State Employment Service, you may be eligible for regular layoff benefits.

If You Have Other Compensation

It must be reported on the SUB Regular Layoff Benefits application. Your weekly benefit will be reduced by eighty percent (80%) of other gross compensation.

SUB Calculation Formula

Your SUB is calculated using the following formula:

- Ninety-five percent (95%) of weekly "after-tax pay", based on marital status and number of exemptions on the health care system. If entitled to more exemptions, a SUB exemption statement must be filled out. Documentary evidence supporting the listing of additional dependents on the SUB Exemption Statement is required.
- Less thirty dollars (\$30.00) (work expenses not incurred)
- Less gross SSB.
- Less eighty percent (80%) of other gross earnings.

Note: Your total income for the week is subject to child support and/or SUB overpayment recovery, if applicable.

State System Benefit

If you are laid off from a plant located in Michigan, Delaware, Illinois, Indiana, Alabama, New York, Missouri, Ohio, or Wisconsin and receive a State System Benefit (SSB) from such state, an application for your regular layoff benefits will automatically be filed for you for the week or weeks for which such SSB applies.

If You Are Not Eligible for or Receiving an SSB

Follow these steps: :

- You must apply for SUB through your respective Human Resources office.
 - HR will provide you with the application.
- You must show a denial form from the state if you are not receiving a SSB. If ineligible for a SSB, the reason must be permissible under the SUB plan.
- If you have to use a manual SUB application and you receive a SSB, you must indicate the gross amount on the SUB application form.

Separation Payment

If you have at least one (1) year of continuous service and have been on layoff from the company for a continuous period of at least 12 months, you may be eligible for a separation payment.

To receive a separation payment, you must apply in person or by mail after twelve (12) months but within twenty-four (24) months (thirty-six [36] months if you have ten [10] or more years of continuous service) after your layoff or disability begins, unless the company authorizes an earlier application date.

If you become disabled and you are receiving an extended disability benefit under the insurance program, you may apply for a separation payment within thirty (30) days following the last month you were eligible to receive an extended disability benefit (even if that date is after the twenty-four [24] month or thirty-six [36] month period ends).

You may apply for a separation payment at the SUB Office of the location where you last worked.

The company will notify you in writing of the earliest and latest dates you can apply for a separation payment. For that reason it is important to keep your current address on file at all times.

How Your Separation Payment Is Calculated

Your separation payment is determined by multiplying your base hourly rate or your base weekly salary divided by forty (40) plus the cost-of-living allowance in effect on the last day you worked, by the number of hours pay that applies to you in the following table:

If your years of continuous service on the last day worked in a bargaining unit equal:	The hours of separation pay you receive are:
1 but less than 2	50
2 but less than 3	70
3 but less than 4	100
4 but less than 5	135
5 but less than 6	170
6 but less than 7	210
7 but less than 8	255
8 but less than 9	300
9 but less than 10	350

10 but less than 11	400
11 but less than 12	455
12 but less than 13	510
13 but less than 14	570
14 but less than 15	630
15 but less than 16	700
16 but less than 17	770
17 but less than 18	840
18 but less than 19	920
19 but less than 20	1,000
20 but less than 21	1,085
21 but less than 22	1,170
22 but less than 23	1,260
23 but less than 24	1,355
24 but less than 25	1,455
25 but less than 26	1,560
26 but less than 27	1,665
27 but less than 28	1,770
28 but less than 29	1,875
29 but less than 30	1,980
30 and over	2,080

When you receive your separation payment, your seniority with the company will be broken effective the date your application was received.

If You Are Rehired By Chrysler LLC

If you are rehired by the company within three (3) years from the date you last worked in the bargaining unit and subsequently become eligible for another separation payment, any previous separation payment you received will affect the amount of your second separation payment.

Applying for SUB Benefits

There are different application procedures for each type of SUB benefit. All application forms are available at your location's SUB Office.

Automated SUB Regular Benefit Application Procedure Not Implemented At the Plant

You must apply for regular benefits in person or by mail within seventy-five (75) days after the end of the week for which you claim a benefit, and you must submit a new application form for each weekly benefit. When applying for regular benefits, you must include:

- Evidence that you have received a state system benefit or are entitled to receive a benefit.
- If you are ineligible for a state system benefit, you must submit evidence indicating why the benefit has been denied.
- Your total gross earnings for the week from any employer other than Chrysler including Social Security Benefits.

Regular benefits are mailed to your home or can be electronically deposited in an account at a financial institution of your choice.

Automated SUB Regular Benefit Application Procedure Implemented At the Plant

- The company will utilize state system benefit payment information provided by the states (Alabama, Delaware, Illinois, Indiana, Michigan, Missouri, New York, Ohio, Wisconsin) to calculate the payment of regular benefits for each full week of layoff.
- Your application for a state system benefit for each week will constitute an application for a regular benefit for the respective week.
- If you are ineligible for a state system benefit, you must provide the Employment Office with the denial form from the State. If the denial from the State is one of the acceptable reasons that is listed in the SUB plan, you will be required to submit an application form for each week of layoff in accordance with the present regular benefit application procedure.

Regular benefits are mailed to your home or can be electronically deposited in an account at a financial institution of your choice.

Automated Short Week Benefits

There are no application forms to fill out. Automatic short week benefits are included in your regular paycheck

OVERPAYMENTS, CLAIMS, & MOVING

Supplemental Unemployment Benefit

Supplemental Unemployment Benefit (SUB)

Any overpayments you receive because benefits should not have been paid or because the benefit was greater than it should have been, can be recovered from future benefit payments or from regular paychecks, in amounts as determined under the plan.

Supplemental Unemployment Benefit

Supplemental Unemployment Benefit (SUB) - Claims Appeal Process

If you believe you have been improperly denied a SUB plan benefit or if the benefit you receive is smaller in amount than you believe you are entitled to, you may file a written appeal. The appeal must be filed with your local SUB office within thirty (30) days after the date the payment, notice of denial, or notice of overpayment was mailed.

A local committee has been established for each Chrysler location.

- There are two (2) members representing the Union and two (2) members representing the company.
- The committee will review your appeal and you will be notified in writing if they make a decision.
- There is no further appeal from a decision made by the committee.

If the local committee cannot resolve the issue:

- You will be notified in writing.
- Within thirty (30) days, you (or any two [2] members of the local committee) may make a further appeal to the SUB Board of Administration.
 - The Board of Administration is comprised of three (3) Union representatives and three (3) Company Representatives.
- The Board will review your case and notify you in writing regarding the disposition of your appeal.
 - There is no appeal from the Board's decision.

If You Move - How Your Health Care Benefit May Be Affected

If you or your eligible dependents relocate out of your COBRA health plan's coverage area, you and/or your eligible dependents may lose COBRA benefits. The company is not required to offer a health plan in your new geographic location.

Changing Your Health Care Coverage

Your current health plan may not be available in your new location. Contact Benefit Express at 888-456-7800 and request a health care enrollment kit.

Select Medical and Dental Providers

You and/or your eligible dependents may also need to select primary care physician(s) and/or a dentist. Contact Benefit Express to elect your primary care physician for HMOs, PPOs, and alternative dental facilities.

- Provider directories are available by calling your health plan.

Insurance Identification Card(s)

Within a few weeks of the day your coverage takes effect you will receive your insurance identification card at your new home address.

You may obtain additional cards by contacting Benefit Express. Only you and your covered dependents are permitted to use the identification cards.

Important Note:

Chrysler LLC reserves the right to terminate, suspend, or amend the benefits subject to the applicable Collective Bargaining Agreement. If material changes are made, you will be notified. Upon termination or partial termination of the program, coverage will cease as of the effective date of termination or partial termination.