

BOB

DATE

TO:
(MANUFACTURER)

ADDRESS

No. H470133

ATTN: Fran Cole

☐ RETURN AUTHORIZATION REQUEST (SEND _____ LABELS)

☐ LISTED ITEMS HAVE BEEN RETURNED (From Dept. _____)

INVOICE NUMBER	DATE OF INVOICE	LOT NUMBER	QUANTITY	ITEM/SKU NUMBER	CLASS CODE	PRICE AT COST	EXTENSION AT COST	PRICE AT RETAIL	EXTENSION AT RETAIL
			1ea	700 ADL 30/00					
				SN 6577001					
See Attach Letter for Details									
						SUB TOTAL			
						TRANSP			
						TOTAL			

RETURNED BY BIG BEAR SPORT CENTERS

(NAME OF STORE)

ADDRESS

CITY AND STATE

DATE SHIPPED

DEPT. MANAGER

REASON

Agri-Village

4800 10th Ave. So.

Great Falls, MT 59405

11-6-91

VIA

SHIPPING CLERK

Mr. Webster said that when he was moving the safety from safe to fire, the gun discharged. No one was injured as a result of the discharge.

Please examine and test this gun to determine if any defects are present.

Your speedy handling of this matter would be very helpful.

Please address any correspondence in this matter to my personal attention at:

Big Bear Sport Centers
4800 10th Avenue South
Great Falls, Montana 59405
(406) 761-6300
ATTN: Chuck McKenzie