

File Number:	12565		Arms Service number:	80000703	
Last Name:	ULKIE		First Name:	JAMES	
Street:	PO BOX 802		City:	DAYTON	
State:	TX	Zip:	77535	Home Ph:	409-258-5150
Work Ph:		Product Type:	F	F A T	
Type Concern:	S	PI PD P S	Concern Code:	1008	
Concern:	FIRED ON BOLT CLOSING				
Cause Code:	4040	Cause:	OTHER - COULD NOT DUPLICATE		
Assigned To:	SUPRY	Classification:	UND	UNJ UNC UND	
Settlement Detail:	INSTALL NEW TPA N/C			Settlement Amount:	540.00
Date Opened Rem:	12/13/99	Date Opened by P/S:	12/13/99	Caliber:	308
Date of Incident:		Date Closed:	12/13/99	Bullet Weight:	
Date to Analysis:		Date from Analysis:		Manufacturer:	
Model:	700	Serial:	E6487940	Date Code:	
RAMAC:	700	Litigation:	<input type="checkbox"/>	PreLitigation:	<input type="checkbox"/>
Obsolete:	<input type="checkbox"/>				
Custody:		Comments:	Claims FGBC - could not duplicate concern - replace TPA to restore customer confidence - n/c		
Time of Modification:	2:10:15 PM		Date of Modification:	12/13/99	

Serial Number: E6487940

Model ID: 700



RE00000203

Could not duplicate customer
Concern.

Replace TPA n/c as gesture of goodwill

Charge 230145

FLS 12/13/99

REMINGTON REPAIR INSTRUCTIONS

Name: JAMES ULKIE
Mailing Address: PO Box 802

Model: 700 ADL .308 WIN

Serial #: E6487940

DAYTON TX 77535

Date of Purchase: SPRING 1999
(If available, please attach a copy of the proof of purchase.)

Telephone: Day 409 258 5153
Evening _____

Please describe the problem you are having with your firearm: When trying to close bolt with bullet in chamber the gun fired. I did not have my finger on the trigger.

Optional Information:

Ammo Type: 308 WIN Brand Remington or Handload Specifications: _____
Bullet Weight: 150 gr Shot Size: _____

If your firearm has previously been repaired/evaluated by Remington or a Remington Authorized Repair Center, please provide copies of your repair paperwork.

Your firearm will be evaluated using the following criteria to determine if the repair will be charged to Remington: Date of Purchase Type of Repair Condition/Owner Maintenance

Payment

Chargeable repairs under \$75 will be completed and returned C.O.D.. To avoid C.O.D processing, you may provide credit card authorization now. An estimate will be mailed for repairs over \$75. If you wish, you can also expedite repairs over \$75 by setting a pre-authorized amount that can be billed to your credit card.

You may repair my firearm and bill my credit card for charges up to \$ _____.

Credit Card Number: _____ Expiration Date: _____
(American Express, Discover, MasterCard, or Visa)

Signature: _____

Reminders:

Record your serial number—it will help reference your repair.

Properly package your unloaded firearm. Do not ship in a hard case. If you would like to order a box, please call our Parts Department: 800-243-9700, 9 a.m.- 5p.m., EST.

Do not send live/loaded ammunition with your firearm.

Remove all accessories.

UPS DRIVER INSTRUCTIONS: YOU ARE AUTHORIZED TO
ACCEPT THIS PACKAGE WITHOUT A RECEIPT RECORD.

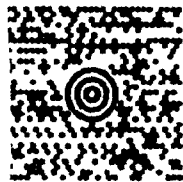
A.R.S.

FROM: Name: JAMES ULKIE
Street: PO BOX 802
City: DAYTON State: TX ZIP Code: 77535

SHIP TO: REMINGTON ARMS

14 HOFELER AVE

ILION NY 13357 1888



(420) SHIP TO POSTAL CODE



(420) 13357 1888

UPS GROUND

TRACKING #: 1Z E13 390 06 1004 4081

