

Ref. # 010727

REMINGTON ARMS COMPANY, INC.
Trigger Assembly
Special Replacement Program

(A) GUNSMITH

GUN OWNER

Name _____
Street _____
City, State, Zip _____
Telephone _____
(Area Code)

Name _____
Street _____
City, State, Zip _____
Telephone _____
(Area Code)

Control No.
(For Rem. Use Only)

Control No.
(For Rem. Use Only)

(B) FIREARM INFORMATION

Model (Check One)

- ☐ 1. Rem 600
☐ 2. Rem 660
☐ 3. Mohawk 600
☐ 4. XP-100

Caliber (Check One)

- ☐ 1. 222 Rem.
☐ 2. 6mm Rem.
☐ 3. 243 Win.
☐ 4. 303 Win.
☐ 5. 6.5mm Rem. Mag.

Caliber (Check One)

- ☐ 6. 350 Rem. Mag.
☐ 7. 35 Rem.
☐ 8. 223 Rem.
☐ 9. 221 Rem. "Fireball"
☐ 10. Rechambered

Serial No.

(C) MODIFICATION INFORMATION

Method Gun Received From Owner:

(Check One)

- ☐ Hand Delivered
☐ UPS
☐ U.S. Mail
☐ Other _____
(Specify)

Month Day Year

Date Gun Received From Owner

Estimated Completion Date

IMPORTANT — This Copy Must Be Completed and Mailed Immediately Upon Receipt of Gun.

PARTS CONTROL COPY
(Completed form to be mailed immediately upon receipt of gun)

R2508223

Ref. #

3-3, 57

REMINGTON ARMS COMPANY, INC.
Trigger Assembly
Special Replacement Program

(A) GUNSMITH

GUN OWNER

Name _____
 Street _____
 City, State, Zip _____
 Telephone _____
 (Area Code) _____
 Control No.

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 (For Rem. Use Only)

Name _____
 Street _____
 City, State, Zip _____
 Telephone _____
 (Area Code) _____
 Control No.

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 (For Rem. Use Only)

(B) FIREARMS INFORMATION

Model (Check One)

- ☐ 1. Rem 600
☐ 2. Rem 660
☐ 3. Mohawk 600
☐ 4. XP-100

Caliber (Check One)

- ☐ 1. 222 Rem.
☐ 2. 6mm Rem.
☐ 3. 243 Win.
☐ 4. 308 Win.
☐ 5. 6.5mm Rem. Mag.

Caliber (Check One)

- ☐ 6. 350 Rem. Mag.
☐ 7. 35 Rem.
☐ 8. 223 Rem.
☐ 9. 221 Rem. "Fireball"
☐ 10. Rechambered

Serial No.

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(C) MODIFICATION INFORMATION

Method Gun Received From Owner:

(Check One)

- ☐ Hand Delivered
☐ UPS
☐ U.S. Mail
☐ Other _____
 (Specify)

Month Day Year

Date Gun Received From Owner

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Estimated Completion Date

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(D) INVOICE DATA

Date Work Completed

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Charges: Modification Charge \$5.00
 Transportation _____
 Other (Detail Below) _____
 Total \$ _____

Gunsmith Signature _____

Date _____

INVOICE COPY
 (to be mailed for payment upon completion of work)

R2508224