

Warranty/Claims Form

NAME John Doe
 ADDRESS 123 Main St
 CITY Anytown State CA Zip 90210
 PHONE () 555-1234

WITHOUT RECEIPT, COMPLETE BELOW:

STORE WHERE ITEM PURCHASED _____

DRIVER'S LICENSE NUMBER/STATE _____

MAILING ADDRESS (if different) _____

SERVICE DESK USE ONLY

DATE OF REC. _____

TRANS. # _____

REG. # _____

DESCRIPTION	AMOUNT
<i>Fires without pulling trigger. & jams.</i>	
ST# 1000 000 0000000 000 00 000 000	
** RETURNED ENTRY **	
EXPORT	DOY QTY 1 464.00
	SUBTOTAL 464.00
	TAXES 0.00 0.00
	GRAND TOTAL 464.00
	CASH 0.00 464.00
	CHANGE DUE 0.00
THANK YOU FOR SHOPPING WITH US	
04/25/92 15148146	

Remington 700 BDL 7mm mag

Reason for Return: ☐ Parts Missing ☐ Defective ☐ Size ☐ Customer Dissatisfied ☐ Shrink/Fade/Tear

FIRES WHEN CLOSING BOLT

PLAIN DEFECT: _____