

FILE NUMBER: # 6162

DATE OPENED P/S: 11/8/94

DATE TIME: _____

LAST NAME: FLORES

FIRST NAME: Rodolfo

STREET: Attorney at Law 117 W. South St

CITY: Uvalde STATE: TX ZIP: 78801

HOME PHONE: _____ WORK PHONE: 512 278 4501

ARMS SERVICE NUMBER: _____

DATE OPENED REM. _____ DATE OF INCIDENT: _____ DATE CLOSED: _____

MFD. BY: Fern CALIBER: 270 MODEL: 700 SERIAL: 6524685 RAMAC: _____

DATE CODE: _____ DATE MFD: _____ OBSOLETE? ☒ (If yes, circle the x)

BULLET WEIGHT: _____

PRODUCT TYPE: ☒ F ☐ A ☐ T ☐ O (Circle one) TYPE CONCERN: ☐ PI ☐ PD ☐ P ☒ S ☐ C ☐ P/S

CONCERN CODE: W14 CUSTOMER'S CONCERN: LTP

ANALYSIS CODE: _____ ANALYSIS: _____

CAUSE CODE: _____ CAUSE: _____

DATE TO ANALYSIS: _____ CUSTODY: _____ DATE FROM ANALYSIS: _____

ASSIGNED TO: Kast

CLASSIFICATION: ☐ UNJ ☐ UNC ☐ UND ☐ J

PRELITIGATION: ☒ (If yes, circle the x) LITIGATION: ☒ (If yes, circle the x)

SETTLEMENT DETAIL: _____

SETTLEMENT AMOUNT: _____