LE NUMBER: _____

DATE OPENED P/S: 10/6/94

DATE TIME: _____

LAST NAME: Jimmy's Mens Store & Pawn Shop

FIRST NAME: _____

STREET: PO Box 547 22 Elgin Pkwy

CITY: Ft Walton Beach STATE: Fl ZIP: 32549

HOME PHONE: _____ WORK PHONE: 904-244-5184

ARMS SERVICE NUMBER: 9427964

DATE OPENED REM. 9/30 DATE OF INCIDENT: _____ DATE CLOSED: 10/6/94

MFD. BY: Rem CALIBER: 6MM MODEL: 788 SERIAL: 6110741 RAMAC: _____

DATE CODE: — DATE MFD: — OBSOLETE? (X) (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: _____ CUSTOMER'S CONCERN: Fires when safe is on

ANALYSIS CODE: _____ ANALYSIS: _____

CAUSE CODE: _____ CAUSE: Parts missing

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

ASSIGNED TO: Kast

CLASSIFICATION: (UNJ) UNC UND J

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

SETTLEMENT DETAIL: Repair at Spec. Price

SETTLEMENT AMOUNT: _____