

DATE OPENED P/S: 1/16/95

6462

LAST NAME: Leslie Edelman of N.V.

FIRST NAME: _____

STREET: 77309 Box 536 CITY: Montgomery STATE: Pa ZIP: 18936

HOME PHONE: _____ WORK PHONE: _____ A.S. REPAIR: 94-36689

DATE OPENED REM: 12/19/94 DATE OF INCIDENT: _____ DATE CLOSED: 1/16

MFD. BY: Rem CALIBER: 30-06 MODEL: 700

SERIAL 96767284 RAMAC: _____ DATE CODE: PV DATE MFD: 6/79

_____ OBSOLETE? X BULLET WEIGHT: _____

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

CONCERN CODE: 1007 CUSTOMER'S CONCERN: FSR

PROBLEM CODE: _____ PROBLEM: _____

CAUSE CODE: 4015 CAUSE: IM

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

ASSIGNED TO: Kurt CLASSIFICATION: (UNI) UNC UND J

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

SETTLEMENT DETAIL: Repair Spel price

SETTLEMENT AMOUNT: _____

CUSTOMER CONCERN: FSR

COMMENTS: Rust - excessive! (everywhere)

ATTITUDE: IRATE----- ANGRY----- CALM----- PLEASED-----