

DATE OPENED P/S: 12/14/94

LAST NAME: Miner

FIRST NAME: Thad

STREET: 2615 Waugh Dr. #288 CITY: Houston STATE: TX ZIP: 77006

HOME PHONE: 713-529-3001 WORK PHONE: \_\_\_\_\_ A.S. REPAIR: \_\_\_\_\_

DATE OPENED REM: \_\_\_\_\_ DATE OF INCIDENT: \_\_\_\_\_ DATE CLOSED: \_\_\_\_\_

MFD. BY: Rem CALIBER: 300 Win MODEL: 700

SERIAL \_\_\_\_\_ RAMAC: \_\_\_\_\_ DATE CODE: \_\_\_\_\_ DATE MFD: \_\_\_\_\_

\_\_\_\_\_ OBSOLETE? ☒ BULLET WEIGHT: \_\_\_\_\_

PRODUCT TYPE: F 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: \_\_\_\_\_ CAUSE: \_\_\_\_\_

DATE TO ANALYSIS: \_\_\_\_\_ CUSTODY: \_\_\_\_\_ DATE FROM ANALYSIS: \_\_\_\_\_

ASSIGNED TO: Kurt CLASSIFICATION: UNJ UNC UND J

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

SETTLEMENT DETAIL: \_\_\_\_\_

SETTLEMENT AMOUNT: \_\_\_\_\_

CUSTOMER CONCERN: Claims FSR

COMMENTS: Letter requesting gun be returned

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