

DATE OPENED P/S: 7/10/95

LAST NAME: Outdoorsman

FIRST NAME: _____

STREET: 632 Big Horn Ave CITY: Worland STATE: WY ZIP: 82401

HOME PHONE: _____ WORK PHONE: 307-347-2891 A.S. REPAIR: 95-14617

DATE OPENED REM: 5/12 DATE OF INCIDENT: _____ DATE CLOSED: 7/10

MFD. BY: Rem CALIBER: 7mm MODEL: 700

SERIAL A666 8099 RAMAC: _____ DATE CODE: DQ DATE MFD: 9/78

_____ OBSOLETE? ☒ BULLET WEIGHT: _____

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

CONCERN CODE: 1002 CUSTOMER'S CONCERN: FSR

PROBLEM CODE: _____ PROBLEM: _____

CAUSE CODE: 4006 CAUSE: AA

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

ASSIGNED TO: Karl CLASSIFICATION: ☒ UNJ ☐ UNC ☐ UND ☐ J

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

SETTLEMENT DETAIL: Requiescat in pace

SETTLEMENT AMOUNT: _____

CUSTOMER CONCERN: _____

COMMENTS: _____

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