

DATE OPENED P/S: 12/12/44 6323
LAST NAME: Simona Sport Shop / Bohn
FIRST NAME: _____
STREET: 2840 Hwy 10 CITY: Mounds View STATE: MN ZIP: 55112
HOME PHONE: 612-434-6721 WORK PHONE: 784-2888 A.S. REPAIR: _____
DATE OPENED REM: 12/11 DATE OF INCIDENT: 11/12 DATE CLOSED: 12/12
MFD. BY: Rem CALIBER: _____ MODEL: 700
SERIAL 369743 RAMAC: _____ DATE CODE: DE DATE MFD: 9/68

OBSOLETE? ☒ BULLET WEIGHT: _____
PRODUCT TYPE: ☒ A ☐ T ☐ O (Circle one) TYPE CONCERN: PI PD P(S)C P/S
CONCERN CODE: 1008 CUSTOMER'S CONCERN: FBC
PROBLEM CODE: _____ PROBLEM: _____
CAUSE CODE: 4015 CAUSE: IM
DATE TO ANALYSIS: _____ CUSTODY: _____ DATE FROM ANALYSIS: _____
ASSIGNED TO: fast CLASSIFICATION: UNJ UNC UND J
PRELITIGATION: ☒ (If yes, circle the x) LITIGATION: ☒ (If yes, circle the X)
SETTLEMENT DETAIL: Repair N/C
SETTLEMENT AMOUNT: 40
CUSTOMER CONCERN: FBC - see letter David Bohn

COMMENTS: firing pin, sear, trigger, connector and
 Housing had excessive amount of old
 solidified oil on them (gummy)

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