

DATE OPENED P/S: 12-30-94

6420

LAST NAME: Tobias

FIRST NAME: Johnny

STREET: 3129 B Shuman CITY: Magnolia STATE: MS ZIP: 39652

HOME PHONE: _____ WORK PHONE: _____ A.S. REPAIR: 94 35116

DATE OPENED REM: 12-7-94 DATE OF INCIDENT: _____ DATE CLOSED: 12-30-94

MFD. BY: Len CALIBER: 25/06 MODEL: 700

SERIAL C6835359 RAMAC: _____ DATE CODE: EN DATE MFD: 10-23

____ OBSOLETE? X 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: it got off when safety is released

PROBLEM CODE: 4040 PROBLEM: _____

CAUSE CODE: 4006 CAUSE: _____

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

ASSIGNED TO: _____ CLASSIFICATION: UNJ UNC UND J

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

SETTLEMENT DETAIL: Repair at special price

SETTLEMENT AMOUNT: \$ 28.00

CUSTOMER CONCERN: _____

COMMENTS: _____

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