

Remington Arms Co., Inc.  
Product Service  
Legal Case #:6154

Case Information

RE#	Date Opened	Date Opened(PS)	Date Closed	Incident Date	Pre Lit	Lit	Obsolete
233242	6/8/2011	4/28/2011	6/10/2011				

Customer Information

Type	Business	First Name	Last Name	Street	City	State	Zip	Age	Contact
Incident		John	Schlesinger	PO Box 29309	San Francisco	CA	94129		C 415-335-6467 F 415-440-1007 E johnschlesinger@mindspring.com

Incident Information

Claims	Codes	Repair Est.	Medical Treatment	Medical Status
PI				
PD	Cause:4038	Could Not Duplicate Concern	Unknown	
S	Concern:1008	Fired on Bolt Closing		
C	FBC			

4/28/11: Customer called in. He stated he had a FBC with rifle. No damage, No injury. He didn't have the date of incident. df

Firearm Information

Mfg.	Type	Model/Ga.	SKU	Serial	Bbl.	DOM
Remington	CF/BA	700/22-250 REM	84216	G6940440	LE	2/23/2010 11:19:25 AM
Date Purchased	Where Purchased	Accessories	Original Owner			
6/5/2010	ACUSPORT (OH) CORPORATION	SCOPE BASE,BOTTOM HALF RINGS	Y			

CONCERN:FBC

Ammunition Information - None Defined

Other Products Information - None Defined

Settlement

Remington/700/CF/BA

Settlement	Release of Claims	Release Date	Reimbursement	Cash Settlement	Reim. Date APV	Cash Date APV
Per Ilion - Replace TA - warranty						
	Repair/Replacement Cost	Repair/Replacement Date				
	\$52.88	6/23/2011				

4/28/11: Mailing ARS, letter, form. df 6/23/11: Per Ilion - Could not duplicate concern. TA functions properly. Will replace TA, clean & test fire to restore confidence in rifle - warranty. df

Examination[Remington/CF/BA]

Part	Sub-Part	Code	Comment
Examination	Examiner		B.TRAVIS
	Exam Date		6/10/2011
	Product Type		RF
	Action Type		A
	Assigned To		T.NAGLE
Cause	4038	Could Not Duplicate Concern	
Barrel	Description		26" 22-250 REM HB
	Date Code		LE
	Bore Plugged	False	
	Bulged	False	

	Fired	False	
	Fired while Obstructed		
	Muzzle/Crown Condition	Like new; Functioning	
Bolt	Firing Pin	Like new; Functioning	
	Shroud	Like new; Functioning	
	Face	Slightly Worn; Functioning	
	Handle	Like new; Functioning	
	Stop	Like new; Functioning	
Extractor	Condition	Slightly Worn; Functioning	
	Cut Condition	Slightly Worn; Functioning	
	Ext/Eject Test	False	
Locking	Block Condition	---Select---	
	Lug Condition	Slightly Worn; Functioning	
	Notch Condition	---Select---	
Overall	Exterior Condition	Like new; Functioning	
	Stock Condition	Like new; Functioning	
	Fore End Condition	---Select---	
Receiver	Condition	Like new; Functioning	
	Bulged	False	
Safety	Description		XMP SAFETY
	Function	Like new; Functioning	
	Sub-Assembly	Non-ISS	
Sear	Lift	---Select---	.012
	Notch	Like new; Functioning	
	Tests	Test Fired	False
Feeding Test		False	
Trigger	Condition	Like new; Functioning	
	Pull	---Select---	5#
	Altered	False	
	Sub-Assembly	X-Mark Pro	
Non-Remington Components	Description		SCOPE BASE,BOTTOM HALF RINGS

# Remington®

2611  
LEZ/10  
SA  
1012

6154

April 28, 2011

John Schlesinger  
PO Box 29309  
San Francisco, CA 94129  
Ph: 415-335-6467

Ref: # 6154, Model 700, Serial # G6940440

Dear Mr. Schlesinger,

Enclosed is a prepaid UPS shipping label to cover shipment of your firearm to our factory for examination and a form to fill out.

**Please include a copy of this letter and form to put inside the shipping container. The letter and form inside is important as sometimes the outside label gets damaged in transit and we want to be sure the firearm is logged in correctly. Mark the ends of the box with "Product Service".** Product Service will be inspecting the firearm and will contact me with the results.

I hope that this action will keep you a loyal Remington customer.

Sincerely,  
Dell Fulcher  
Consumer Affairs Administrator  
Remington, H&R, Marlin  
Phone: 1-800-243-9700 press 0 and ask for ext 8686  
Fax: 336-548-7872

Serial Number:

G6940440

Model: 700



RE00233242

could not duplicate concern  
T.A. functions properly. Will  
replace TPA, clean & test Rm to  
restore confidence in rifle,

RECEIVED  
JUN 22 2011

WAM only

Remington Arms Company, Inc. • 870 Remington Drive • P.O. Box 700 • Madison, NC 27025  
Phone 800-243-9700 • [www.remington.com](http://www.remington.com)

Print

Reset

Model Number: <b>700SPS</b>		Serial Number: <b>G-6940440</b>	
Are you the original owner?: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
Name: <b>JOHN SCHLESINGER</b>		Date of Purchase: <b>6/5/10</b>	
Address (no PO Boxes): <b>20 RAYCLIFF TER</b>			
City: <b>SAN FRANCISCO</b>		State: <b>CA</b>	Zip: <b>94115</b>
Phone (Daytime): <b>415-335-6467</b>		Fax: <b>415-440-1007</b>	
E-mail Address:(if e-mail address is provided, notification of receipt and shipment will be sent) <b>johnschlesinger@mindspring.com</b>			
E-mail Address: <input type="checkbox"/> I would like to receive future e-mail updates from Remington.			
Please describe your problem and date of occurrence: <b>Misfire upon ejecting round from chamber, when opened and closed bott. August, 2010</b>			
500 characters left			
<b>Ammunition Information:</b>			
Manufacturer:		Type:	
Other (i.e. bullet weight/type, shot size, powder):			
<b>Handload Information:</b>			
Powder Used:		Powder Weight:	
Case/Hull Used:		Primer Used:	
Bullet Type/Shot Size:		Reloader Used:	
<b>Firearms Care (Cleaning and Lubrication):</b>			

Brand of cleaning solution used: <input type="text"/>
How often do you clean the bore? (Months or Number of rounds) <input type="text"/>
How often do you clean the action? (Months or Number of rounds) <input type="text"/>
How often do you clean the trigger assembly? (Months or Number of rounds) <input type="text"/>
Brand of lubricant used: <input type="text"/>
How often do you lubricate the bore? (Months or Number of rounds) <input type="text"/>
How often do you lubricate the action? (Months or Number of rounds) <input type="text"/>
How often do you lubricate the trigger assembly? (Months or Number of rounds) <input type="text"/>
Have you reviewed the cleaning and maintenance recommendations on our web site or in our owners manual? > <input type="checkbox"/> YES <input type="checkbox"/> NO
When was the last time that your firearm was serviced by a Remington authorized repairman/gunsmith?) <input type="text"/>
What were the services performed?) <input type="text"/>
<p>Ship your INSURED firearm by either UPS or Parcel Post to:</p> <p style="text-align: center;"><b>Remington Arms Co., Inc.</b>  <b>Attn: Arms Service Division</b>  <b>14 Hoefler Avenue</b>  <b>Ilion, NY 13357</b></p>
<p><input type="checkbox"/> <b>WARNING: DO NOT SEND LIVE OR SPENT SHELLS IN YOUR FIREARM OR IN THE SAME BOX WITH THE FIREARM. THIS IS A VIOLATION OF FEDERAL LAW. IF YOU FEEL YOU MUST SEND SPENT SHELLS PLEASE SEND THEM IN A SEPARATE PACKAGE AND INCLUDE NAME, ADDRESS (WITH ZIP CODE), TELEPHONE AND MODEL AND SERIAL NUMBER OF YOUR FIREARM.</b></p> <p style="text-align: center;">:: Record the serial number of your firearm before sending it.  :: Pack your firearm for safety and to prevent further damage in shipping and handling.  Preferably,  ship in a firearm box. (Note: Original boxes may not be returned.)  :: Remove all accessories from your firearm to prevent loss or damage.  :: Provide a return address on both the outside and inside the box. Shipments without a proper</p>

return address will be refused.

:: Ship your INSURED firearm by either UPS or Parcel Post. Remington is not responsible for damage or loss during shipment, so you may elect to purchase insurance from your carrier.

Charge repairs will be processed using the following guidelines:

:: Repairs \$75.00 and under will be completed and returned to you C.O.D. (To avoid C.O.D. Charges, please include your credit card number and expiration date with your gun)

:: For Repairs over \$75.00, you will receive a written estimate detailing the nature of the repair, applicable taxes and shipping. You will have 30 days to approve the repair estimate. Repairs can be paid by check, money order, or credit card (American Express, Discover, MasterCard, or VISA). If you wish, you can expedite repairs over \$75.00 by setting a pre-authorized amount that can be billed to your credit card. We process checks electronically through Check21.

U.S. Department of Justice  
Bureau of Alcohol, Tobacco, Firearms and Explosives

# Firearms Transaction Record Part I - Over-the-Counter

**WARNING:** You may not receive a firearm if prohibited by Federal or State law. The information you provide will be used to determine whether you are prohibited under law from receiving a firearm. Certain violations of the Gun Control Act, 18 U.S.C. §§ 921 et. seq., are punishable by up to 10 years imprisonment and/or up to a \$250,000 fine.

Transferor's Transaction  
Serial Number (if any)

5614-00559

Prepare in original only. All entries must be handwritten in ink. Read the Notices, Instructions, and Definitions on this form. "PLEASE PRINT."

### Section A - Must Be Completed Personally By Transferee (Buyer)

1. Transferee's Full Name

Last Name <b>SCHLESINGER</b>	First Name <b>JOHN</b>	Middle Name (if no middle name, state "NMN") <b>HAROLD</b>
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2. Current Residence Address (U.S. Postal abbreviations are acceptable. Cannot be a post office box.)

Number and Street Address <b>20 RAYCLIFF TER</b>	City <b>SAN FRANCISCO</b>	County <b>SAN FRANCISCO</b>	State <b>CA</b>	ZIP Code <b>94115</b>
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3. Place of Birth

U.S. City and State <b>HARTFORD CT</b>	-OR- Foreign Country	4. Height Ft. <b>5</b> In. <b>6</b>	5. Weight (Lbs.) <b>150</b>	6. Gender Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	7. Birth Date Month <b>12</b> Day <b>27</b> Year <b>47</b>
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8. Social Security Number (Optional but will help prevent misidentification)  
**REDACTED**

9. Unique Personal Identification Number (UPIN) if applicable (See Instructions for Question 9.)  
**14**

10. Race ( ethnicity) (Check one or more boxes. See Instructions for Question 10.)

<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Asian	<input checked="" type="checkbox"/> White

11. Answer questions 11.a. (see exceptions) through 11.i. and 12 (if applicable) by checking or marking "yes" or "no" in the boxes to the right of the questions.

a. Are you the actual transferee/buyer of the firearm(s) listed on this form? Warning: You are not the actual buyer if you are acquiring the firearm(s) on behalf of another person. If you are not the actual buyer, the dealer cannot transfer the firearm(s) to you. (See Instructions for Question 11.a.) Exception: If you are picking up a repaired firearm(s) for another person, you are not required to answer 11.a. and may proceed to question 11.b.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
b. Are you under indictment or information in any court for a felony, or any other crime, for which the judge could imprison you for more than one year? (See Instructions for Question 11.b.)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
c. Have you ever been convicted in any court of a felony, or any other crime, for which the judge could have imprisoned you for more than one year, even if you received a shorter sentence including probation? (See Instructions for Question 11.c.)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
d. Are you a fugitive from justice?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
e. Are you an unlawful user of, or addicted to, marijuana or any depressant, stimulant, narcotic drug, or any other controlled substance?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
f. Have you ever been adjudicated mentally defective (which includes a determination by a court, board, commission, or other lawful authority that you are a danger to yourself or to others or are incompetent to manage your own affairs) OR have you ever been committed to a mental institution? (See Instructions for Question 11.f.)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
g. Have you been discharged from the Armed Forces under dishonorable conditions?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
h. Are you subject to a court order restraining you from harassing, stalking, or threatening your child or an intimate partner or child of such partner? (See Instructions for Question 11.h.)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
i. Have you ever been convicted in any court of a misdemeanor crime of domestic violence? (See Instructions for Question 11.i.)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
j. Have you ever renounced your United States citizenship?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
k. Are you an alien illegally in the United States?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
l. Are you a nonimmigrant alien? (See Instructions for Question 11.l.) If you answered "no" to this question, do NOT respond to question 12 and proceed to question 13.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
12. If you are a nonimmigrant alien, do you fall within any of the exceptions set forth in the instructions? (If "yes," the licensee must complete question 20d.) (See Instructions for Question 12.) If question 11.l. is answered with a "no" response, then do NOT respond to question 12 and proceed to question 13.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

13. What is your State of residence (if any)? (See Instructions for Question 13.)  
**CALIFORNIA**

14. What is your country of citizenship? (List/check more than one, if applicable. If you are a citizen of the United States, proceed to question 16.)  United States of America  
 Other (Specify)

15. If you are not a citizen of the United States, what is your U.S.-issued alien number or admission number?

**Section D - Must Be Completed By Transferor (Seller)**

Intitions / under through led from or felony purpose

26. Manufacturer and/or Importer (If the manufacturer and importer are different, the FFL should include both.)	27. Model	28. Serial Number	29. Type (pistol, revolver, rifle, shotgun, receiver, frame, etc.) (See instructions for question 29)	30. Caliber or Gauge
REMINGTON	700SPSV	G-6951300	RIFLE	22-250
REMINGTON	400SPSV	G-6940440	RIFLE	22-250

30a. Total Number of Firearms (Please *handwrite* by printing e.g., one, two, three, etc. **Do not use numerals.**) 30b. Is any part of this transaction a Pawn Redemption?  Yes  No  
 TWO

30c. For Use by FFL (See Instructions for Question 30c.)

**Complete ATF Form 3310.4 For Multiple Purchases of Handguns Within 5 Consecutive Business Days**

31. Trade/corporate name and address of transferor (seller) (Hand stamp may be used.) 32. Federal Firearms License Number (Must contain at least first three and last five digits of FFL Number X-XX-XXXXX.) (Hand stamp may be used.)

**DARIN'S GUN EXCHANGE**  
 950 Randolph St.  
 Napa, CA. 94559 **9-68-028-02-2D-38293**

**The Person Transferring The Firearm(s) Must Complete Questions 33-36. For Denied/Cancelled Transactions, The Person Who Completed Section B Must Complete Questions 33-35.**

I certify that my answers in Sections B and D are true, correct, and complete. I have read and understand the Notices, Instructions, and Definitions on ATF Form 4473. On the basis of: (1) the statements in Section A (and Section C if the transfer does not occur on the day Section A was completed); (2) my verification of the identification noted in question 20a (and my reverification at the time of transfer if the transfer does not occur on the day Section A was completed); and (3) the information in the current State Laws and Published Ordinances, it is my belief that it is not unlawful for me to sell, deliver, transport, or otherwise dispose of the firearm(s) listed on this form to the person identified in Section A.

33. Transferor's/Seller's Name (Please print) 34. Transferor's/Seller's Signature 35. Transferor's/Seller's Title 36. Date Transferred

*Darin's Gun Exchange* *Darin's Gun Exchange* *Manager* *6.5.10*

**NOTICES, INSTRUCTIONS AND DEFINITIONS**

**Purpose of the Form:** The information and certification on this form are designed so that a person licensed under 18 U.S.C. § 923 may determine if he or she may lawfully sell or deliver a firearm to the person identified in Section A, and to alert the buyer of certain restrictions on the receipt and possession of firearms. This form should only be used for sales or transfers where the seller is licensed under 18 U.S.C. § 923. The seller of a firearm must determine the lawfulness of the transaction and maintain proper records of the transaction. Consequently, the seller must be familiar with the provisions of 18 U.S.C. §§ 921-931 and the regulations in 27 CFR Part 478. In determining the lawfulness of the sale or delivery of a long gun (rifle or shotgun) to a resident of another State, the seller is presumed to know the applicable State laws and published ordinances in both the seller's State and the buyer's State.

buyer wish to make a record of your discovery, then photocopy the inaccurate form and make any necessary additions or revisions to the photocopy. You only should make changes to Sections B and D. The buyer should only make changes to Sections A and C. Whoever made the changes should initial and date the changes. The corrected photocopy should be attached to the original Form 4473 and retained as part of your permanent records.

**Over-the-Counter Transaction:** The sale or other disposition of a firearm by a seller to a buyer, at the seller's licensed premises. This includes the sale or other disposition of a rifle or shotgun to a nonresident buyer on such premises.

**State Laws and Published Ordinances:** The publication (ATF P. 5300.5) of State firearms laws and local ordinances ATF distributes to licensees.

**Exportation of Firearms:** The State or Commerce Departments may require you to obtain a license prior to export.

**Section A**

**Question 1. Transferee's Full Name:** The buyer must personally complete Section A of this form and certify (sign) that the answers are true, correct, and complete. However, if the buyer is unable to read and/or write, the answers (other than the signature) may be completed by another person, excluding the seller. Two persons (other than the seller) must then sign as witnesses to the buyer's answers and signature.

When the buyer of a firearm is a corporation, company, association, partnership, or other such business entity, an officer authorized to act on behalf of the business must complete Section A of the form with his or her personal information, sign Section A, and attach a written statement, executed under penalties of perjury, stating: (A) the firearm is being acquired for the use of and will be the property of that business entity and (B) the name and address of that business entity.

ATF Form 4473 (5300.6) Part 1  
 Revised August 2008

After the seller has completed the firearms transaction, he or she must make the completed, original ATF Form 4473 (which includes the Notices, General Instructions, and Definitions), and any supporting documents, part of his or her permanent records. Such Forms 4473 must be retained for at least 20 years. Filing may be chronological (by date), alphabetical (by name), or numerical (by transaction serial number), as long as all of the seller's completed Forms 4473 are filed in the same manner. **FORMS 4473 FOR DENIED/CANCELLED TRANSFERS MUST BE RETAINED:** If the transfer of a firearm is denied/cancelled by NICS, or if for any other reason the transfer is not complete after a NICS check is initiated, the licensee must retain the ATF Form 4473 in his or her records for at least 5 years. Forms 4473 with respect to which a sale, delivery, or transfer did not take place shall be separately retained in alphabetical (by name) or chronological (by date of transferee's certification) order.

If you or the buyer discover that an ATF Form 4473 is incomplete or improperly completed after the firearm has been transferred, and you or the

I certify that my answers to Section A are true, correct, and complete. I have read and understand the Notices, Instructions, and Definitions on ATF Form 4473. I understand that answering "yes" to question 11.a. if I am not the actual buyer is a crime punishable as a felony under Federal law, and may also violate State and/or local law. I understand that a person who answers "yes" to any of the questions 11.b. through 11.k. is prohibited from purchasing or receiving a firearm. I understand that a person who answers "yes" to question 11.l. is prohibited from purchasing or receiving a firearm, unless the person also answers "yes" to question 12. I also understand that making any false oral or written statement, or exhibiting any false or misrepresented identification with respect to this transaction, is a crime punishable as a felony under Federal law, and may also violate State and/or local law. I further understand that the repetitive purchase of firearms for the purpose of resale for livelihood and profit without a Federal firearms license is a violation of law (See Instructions for Question 16).

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16. Transferee's/Buyer's Signature [Signature] 17. Certification Date 5-15-10

**Section B - Must Be Completed By Transferor (Seller)**

18. Type of firearm(s) to be transferred (check or mark all that apply):  
 Handgun  Long Gun (rifles or shotguns)  Other Firearm (Frame, Receiver, etc. See Instructions for Question 18.)  
 19. If sale at a gun show or other qualifying event:  
 Name of Event \_\_\_\_\_  
 City, State \_\_\_\_\_

30a. Tc  
30c. Fr  
31. Tr  
us

20a. Identification (e.g., Virginia Driver's license (VA DL) or other valid government-issued photo identification.) (See Instructions for Question 20.a.)  
 Issuing Authority and Type of Identification CDL Number on Identification D4069196 Expiration Date of Identification (if any)  
 Month 12 Day 27 Year 14

20b. Alternate Documentation (if driver's license or other identification document does not show current residence address)

20c. All Aliens: Type and dates of documents that establish 90-day residency (e.g., utility bills or lease agreements). (See Instructions for Question 20.c.)  
 Type(s) of Document \_\_\_\_\_ Date(s) of residence indicated on documents \_\_\_\_\_

20d. Nonimmigrant Aliens Must Provide: Type of documentation showing an exception to the nonimmigrant alien prohibition. (See Instructions for Question 20.d.)

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**Questions 21, 22, or 23 Must Be Completed Prior To The Transfer Of The Firearm(s) (See Instructions for Questions 21, 22 and 23.)**

21a. Date the transferee's identifying information in Section A was transmitted to NICS or the appropriate State agency: (Month/Day/Year)  
 Month 5 Day 15 Year 10  
 21b. The NICS or State transaction number (if provided) was: #5614.00559

21c. The response initially provided by NICS or the appropriate State agency was:  
 Proceed  Denied  Cancelled  
 [The firearm(s) may be transferred on \_\_\_\_\_ (MDI date provided by NICS) if State law permits (optional)]  
 21d. If initial NICS or State response was "Delayed," the following response was received from NICS or the appropriate State agency:  
 Proceed \_\_\_\_\_ (date)  
 Denied \_\_\_\_\_ (date)  
 Cancelled \_\_\_\_\_ (date)  
 No resolution was provided within 3 business days.

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21e. (Complete if applicable.) After the firearm was transferred, the following response was received from NICS or the appropriate State agency on: \_\_\_\_\_ (date).  
 Proceed  Denied  Cancelled

21f. The name and Brady identification number of the NICS examiner (Optional)  
 \_\_\_\_\_ (name) \_\_\_\_\_ (number)

22.  No NICS check was required because the transfer involved only NFA firearm(s). (See Instructions for Question 22.)

23.  No NICS check was required because the buyer has a valid permit from the State where the transfer is to take place, which qualifies as an exemption to NICS (See Instructions for Question 23.)  
 Issuing State and Permit Type \_\_\_\_\_ Date of Issuance (if any) \_\_\_\_\_ Expiration Date (if any) \_\_\_\_\_ Permit Number (if any) \_\_\_\_\_

**Section C - Must Be Completed Personally By Transferee (Buyer)**

If the transfer of the firearm(s) takes place on a different day from the date that the transferee (buyer) signed Section A, the transferee must complete Section C immediately prior to the transfer of the firearm(s). (See Instructions for Question 24 and 25.)  
 I certify that my answers to the questions in Section A of this form are still true, correct and complete.

24. Transferee's/Buyer's Signature [Signature] 25. Recertification Date 6/5/10

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www.remington.com

Remington Arms Company, Inc.  
870 Remington Drive  
P. O. Box 700  
Madison, NC 27025-0700

### ARS LABEL REQUEST FORM

DATE:	4/28/2011	REQUESTED BY:	Dell
QUANTITY:	1	WEIGHT PER PKG:	10 lbs
PLEASE CHECK ONE			
MEDIA COORDINATOR TO MAIL		I WILL MAIL	XXXXXX
DESCRIPTION:	Ref# 6154 rifle G69040440		

### LABEL INFORMATION

MAIL LABEL TO: John Schlesinger PO Box 29309 San Francisco, CA 94129 Ph: 415-335-6467
RETURN ITEM TO Remington Arms Attn: Product Service Ilion, NY

PLEASE COMPLETE ALL PARTS OF THIS FORM AND SEND TO THE MEDIA COORDINATOR

4XX596 APR 28, 2011 ALL CURR USD 2 OF 2  
 SVC GNDCOM ACT WT 10.0 LBS  
 TRACKING# 1Z4XX5969067927501  
 REF 1: JOHN SCHLESINGER/CD/DMF  
 REF 2: 6154 RIFLE/G69040440

HANDLING CHARGE 0.00  
 SINGLE-PIECE PUB RATE CHRGs:  
 DV 0.00 COD 0.00 SVC T/P USD  
 DC 0.00 DGD 0.00 RS 0.50  
 AH 0.00 PR 0.00 SD 0.00  
 TOT PUB CHG 12.63 PUB+HANDLING 12.63 SP 0.00





