



PRODUCT RECALL

LA102 .243 Calibre

First name

Last name

Email address

Daytime contact number

After hours contact number

LA102 .243 Calibre Rifle Serial number

Your rifle Cerakote colour? (please tick)

Armour Black

Titanium

Your rifle stock type? (please tick)

Polymer

Walnut

Laminate

State/Territory where your rifle is registered?

Name of firearms dealer where your rifle was returned?

Date returned (DD/MM/YYYY)

Printed Name

Signature

Date (DD/MM/YYYY)

I consent to having my information collected and stored

(please tick)

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