CO-REGISTRATION OF FIREARMS

TO: _____ Pistol Permit # _____

ADDRESS:_____

COUNTY of Issue:_____ Date of Issue_____

☐ Who is an immediate family member.

☐ Who has had a NICS check completed by a dealer.

Make	Caliber	Serial	Model	RV/SS/SA

X_____ ____/____/____

Signature of Owner Date

_____ _____

Pistol Permit #

_____

Address