



CALIFORNIA DEPARTMENT OF JUSTICE BUREAU OF FIREARMS Designee Firearm Relinquishment Information (Supplemental Form)



Firearm Relinquishment Information (Attach completed BOF 1025 Form(s) and/or Receipts)

Firearm Type: <input type="radio"/> Handgun <input type="radio"/> Rifle <input type="radio"/> Shotgun	Serial Number:	Make:	Model:
--	----------------	-------	--------

Caliber:	Color:	Firearm Origin:	Barrel Length:	<input type="radio"/> in. <input type="radio"/> cm.	Category (i.e. semi-automatic, single-shot, bolt action):
----------	--------	-----------------	----------------	--	---

Describe Firearm (Identification Marks):

Firearm Relinquished to:

Law Enforcement Agency (LEA) ORI No., LEA Name, and Address Relinquished Firearm Date

Licensed Firearm Dealer (CFD) CFD No., Name, and Address Relinquished Firearm Date

Print Name and Title of LEA Representative or CFD Salesperson/Associate Signature of LEA Representative or CFD Salesperson/Associate

Firearm Type: <input type="radio"/> Handgun <input type="radio"/> Rifle <input type="radio"/> Shotgun	Serial Number:	Make:	Model:
--	----------------	-------	--------

Caliber:	Color:	Firearm Origin:	Barrel Length:	<input type="radio"/> in. <input type="radio"/> cm.	Category i.e. semi-automatic, single-shot, bolt action):
----------	--------	-----------------	----------------	--	--

Describe Firearm (Identification Marks):

Firearm Relinquished to:

Law Enforcement Agency (LEA) ORI No., LEA Name, and Address Relinquished Firearm Date

Licensed Firearm Dealer (CFD) CFD No., Name, and Address Relinquished Firearm Date

Print Name and Title of LEA Representative or CFD Salesperson/Associate Signature of LEA Representative or CFD Salesperson/Associate

Firearm Type: <input type="radio"/> Handgun <input type="radio"/> Rifle <input type="radio"/> Shotgun	Serial Number:	Make:	Model:
--	----------------	-------	--------

Caliber:	Color:	Firearm Origin:	Barrel Length:	<input type="radio"/> in. <input type="radio"/> cm.	Category i.e. semi-automatic, single-shot, bolt action):
----------	--------	-----------------	----------------	--	--

Describe Firearm (Identification Marks):

Firearm Relinquished to:

Law Enforcement Agency (LEA) ORI No., LEA Name, and Address Relinquished Firearm Date

Licensed Firearm Dealer (CFD) CFD No., Name, and Address Relinquished Firearm Date

Print Name and Title of LEA Representative or CFD Salesperson/Associate Signature of LEA Representative or CFD Salesperson/Associate