

INTERFAMILY TRANSFER FORM

TRANSFEROR (include copy of DL)

Name: _____

Address: _____

Address: _____

City, State, Zip: _____

Email: _____

Cell: _____

Relationship to Transferee: _____

*relationship must be vertical: father/mother to son/daughter, grandparent to grandchild, etc.

TRANSFEE

Name: _____

Address: _____

Address: _____

City, State, Zip: _____

Email: _____

Cell: _____

HANDGUN / LONG GUN / OTHER

Make: _____

Model: _____

Serial Number: _____

I verify that all the information above is true and accurate and that I am gifting the above firearm

Transferor Signature: _____

Date: _____

****UNDER NO CIRCUMSTANCES CAN YOU TRANSFER ANY ASSAULT WEAPONS OR HIGH CAPACITY MAGAZINES!****