

PROOF OF TRANSFER/ DECLARATION OF NON-POSSESSION	CRIMINAL DISTRICT COURT FOR THE PARISH OF ORLEANS – STATE OF LOUISIANA
DEFENDANT (PRINT NAME) _____ DATE OF BIRTH: _____ RACE: _____ SEX: <input type="checkbox"/> M <input type="checkbox"/> F	PARISH / CITY OF ORLEANS DIVISION: _____ DOCKET: _____ FILED: _____ CLERK: _____

This form is: Declaration of non-possession Proof of transfer

DECLARATION OF NON-POSSESSION
_____ <input type="checkbox"/> I have been court ordered to transfer any firearm(s) that I possess. I hereby declare, under penalty of law, that I do not possess any firearm(s).

PROOF OF TRANSFER
_____ <input type="checkbox"/> I have been court ordered to transfer any firearm(s) I possess. I hereby affirm that I have transferred all firearms in my possession On _____ at _____ a.m./p.m. (DAY/DATE)
<input type="checkbox"/> Transfer to third party <input type="checkbox"/> Contracted storage <input type="checkbox"/> Legal Sale <input type="checkbox"/> Transfer to Sheriff's Office <input type="checkbox"/> Other: _____
Name of entity/person receiving firearm(s): _____
Relationship to defendant: _____
_____ <input type="checkbox"/> I have provided a copy of the Third Party Firearms Acknowledgement Form to the _____ Sheriff's Office.

CONCEALED HANDGUN PERMIT
_____ <input type="checkbox"/> I do not have a concealed handgun permit.
_____ <input type="checkbox"/> I do have Concealed Handgun Permit #: _____ I acknowledge that my concealed handgun permit has been suspended by this Court and I hereby declare that I have surrendered my concealed handgun permit to the Louisiana State Police.

*******IMPORTANT NOTICE*******

Pursuant to LA C.Cr. P. Art. 1001, the defendant shall within **5 days** file this **Proof of Transfer/Declaration of Non-Possession** with the Clerk of Court of the parish or city in which the order was issued. Failure to do so is punishable by contempt of court, and/or violation of applicable State and/or Federal laws.

Signature of Defendant Print Name

OFFICIAL USE ONLY BELOW THIS LINE

Receiving Clerk of Court Date/Time

Transmit to OPSO at firearms@opso.us or facsimile at 504.202.9454.