

**DEPARTMENT OF THE TREASURY
BUREAU OF ALCOHOL, TOBACCO AND FIREARMS
REPORT OF MULTIPLE SALE OR OTHER DISPOSITION OF PISTOLS AND REVOLVERS**

(Please complete all information)

1. FEDERAL FIREARMS LICENSEE (FFL) NUMBER, BUSINESS OR TRADE NAME AND ADDRESS <i>(include number, street, city, State and ZIP Code)</i> <i>(Recommend use of rubber stamp identifying your FFL name and address as it appears on your Federal Firearms License)</i>	2. DATE TRANSFERRED <div style="background-color: #cccccc; height: 60px; width: 100%;"></div>
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3. HANDGUNS ACQUIRED IN THE LAST FIVE BUSINESS DAYS				
TYPE <i>(Pistol or Revolver)</i>	SERIAL NUMBER	MANUFACTURER & IMPORTER	MODEL	CALIBER

4. TRANSFEREE'S NAME *(Last, first, middle)*

5. RESIDENCE ADDRESS <i>(Number, street, city, county, State, ZIP Code)</i>	6. SEX	7. RACE
	8. IDENTIFICATION NUMBER	

9. TYPE OF IDENTIFICATION	10. ID STATE	11. DATE OF BIRTH	12. PLACE OF BIRTH <i>(City, county state, country)</i>
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WHEN FAX IS AVAILABLE, PLEASE FAX TO 1-877-283-0288 OTHERWISE MAIL TO THE ADDRESS PRE-PRINTED ON REVERSE.

INSTRUCTIONS

1. This form is to be used by licensees to report all transactions in which an unlicensed person has acquired two or more pistols and/or revolvers at one time or during five consecutive business days.
2. A separate form is to be submitted for each unlicensed person.
3. Complete items 1- 12.
4. **The report is to be submitted to:**
 - a. Copy 1 - The National Tracing Center no later than the close of business on the day that the multiple sale or other disposition occurs. FAX this form to 1-877-283-0288 or see the reverse side of this form for the address of the National Tracing Center.
 - b. Copy 2 - The official designated by the State or local authorities to receive the form, or in the absence of such designation, to the department of State police or State law enforcement agency in the jurisdiction where the handgun transfer occurred.
 - c. Copy 3 - Retain for your official records.
5. Additional forms may be obtained through the ATF Distribution Center, P.O. Box 5950, Springfield, Virginia 22150, (703) 455-7801.

DEPARTMENT OF THE TREASURY
BUREAU OF ALCOHOL, TOBACCO AND FIREARMS
NATIONAL TRACING CENTER
P.O. BOX 1061
FALLING WATERS, W V 25419-1061

AFFIX
POSTAGE
HERE

(FOLD ON THIS LINE)

PAPERWORK REDUCTION ACT NOTICE

This request is in accordance with the Paperwork Reduction Act of 1995. The information collection documents certain sales or other dispositions of handguns for law enforcement purposes. The information is used to determine if the buyer (*transferee*) is involved in a unlawful activity, or is a person prohibited by law from obtaining firearms. The information requested is mandatory and required by statute (18 U.S.C. 923(g)).

The estimate average burden associated with this collection is 12 minutes per respondent or recordkeeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to Reports Management Officer, Document Services Branch, Bureau of Alcohol, Tobacco and Firearms, Washington, D.C. 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.