

Incoming FFL Transfer



Date: _____

Customer: _____

Dealer: _____

Address: _____

Address: _____

City, State: _____

City, State: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

Firearm Manufacturer: _____

Model: _____ Caliber: _____ Serial #: _____

Internal

Is the firearm CA compliant/on the roster? YES / NO

Did you add the firearm to the wish list? YES / NO

Was an invoice created with the transfer fee, dros and tax? YES / NO

Invoice #: _____

Once complete, save in the shared under FFL - Incoming FFL
Name the document: Customer first and last name

Employee Name: _____