



**CALIFORNIA DEPARTMENT OF JUSTICE  
BUREAU OF FIREARMS  
Notice of No Longer in Possession**  
(Pen. Code § 28000)



DOJ/BOF Case No.:

Check appropriate box: ☒ Handgun/Long Gun (complete sections A,B,D,E) ☐ Assault Weapon/.50 BMG Rifle (complete sections A,C,D,E)

**A. Owner Information**

Last Name Ho		First Name Vincent		Middle Name B		Date of Birth 11/6/68	
Residence Street Address 1902 40th Avenue #3			City Oakland		State CA	Zip Code 94601	
Mailing Address (if different)			City		State	Zip Code	
CA DL, ID, or Military ID No. A7704428	Telephone Number (510)241-9449		Is the owner deceased? <input type="radio"/> Yes <input checked="" type="radio"/> No		Date of Death		County of Death

**B. Handgun/Long Gun Information**

Date Purchased/Acquired 2015	Serial Number 799029	If Handgun: <input checked="" type="radio"/> Semi-auto <input type="radio"/> Revolver <input type="radio"/> Single Shot <input type="radio"/> Other			If Long Gun: <input type="radio"/> Rifle <input type="radio"/> Shotgun	
Make (as stamped on firearm) Colt	Model (3032 Tomcat, KP95, 17C) 1911	Caliber 45	Firearm Origin (US, Italy, China) US		Barrel Length	

**C. Assault Weapon/.50 BMG Rifle Information - Voluntary cancellation of registration (Cal. Code Reg., tit. 11, § 5473)**

AWR/.50 BMG Registration No.	Serial Number	Make (as stamped on firearm)	Model (e.g., AK47, AR15, TEC 9)	Caliber
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**D. Disposition (see detailed instructions on reverse)**

☐ Seized by or surrendered to law enforcement agency - law enforcement agency name and signature required:  
Law enforcement agency: \_\_\_\_\_ Report No.: \_\_\_\_\_  
and/or agent or representative: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

☐ Reported to law enforcement as: ☐ Lost ☐ Stolen Report No.: \_\_\_\_\_ Date: \_\_\_\_\_

☒ Sold/transferred to a licensed firearms dealer: Dealer name: Castro Valley Bullseye Date: 2016  
Dealer address: 22287 Redwood Road, Castro Valley, CA 94546 (No longer in business, closed in 2016)

☐ Sold/transferred to a family member or private party: Transferee name: \_\_\_\_\_ Transfer date: \_\_\_\_\_  
Transferee address: \_\_\_\_\_ Transferee telephone: \_\_\_\_\_

☐ Firearms Ownership Record/Operation of Law/Intra familial transfer submitted ☐ Copy of completed form or DOJ acknowledgement letter attached

☐ Verified destroyed: Destruction method: \_\_\_\_\_ ☐ Verification (i.e. insurance claim) attached. Destruction date: \_\_\_\_\_

☐ No longer resident of California: New state/country of residence: \_\_\_\_\_ Date residency established: \_\_\_\_\_  
☐ Copy of government issued identification attached from new state/country of residence

☐ Transferred firearms to person/dealer in another state: Transferee name: \_\_\_\_\_ Transfer date: \_\_\_\_\_  
Transferee address: \_\_\_\_\_ Transferee telephone: \_\_\_\_\_

☐ Documentation of sale/transfer attached Federal Firearms License No. (if applicable): \_\_\_\_\_

☐ Returned to dealer/manufacture: Dealer/manufacture name: \_\_\_\_\_ Return date: \_\_\_\_\_  
Dealer/manufacture address: \_\_\_\_\_ ☐ Documentation from manufacturer attached

**E. Declaration**

I declare under penalty of perjury under the laws of the State of California the forgoing is true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_