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	First Name	Middle Name	Date of Birth
Ho	Vincent	B	11/6/68

Residence Street Address	City	State	Zip Code
1902 40th Avenue #3	Oakland	CA	94601
Mailing Address (if different)	City	State	Zip Code

CA DL, ID, or Military ID No.	Telephone Number	Is the owner deceased?	Date of Death	County of Death
A7704428	(510)241-9449	○ Yes ◉ No		

B. Handgun/Long Gun Information

Date Purchased/Acquired	Serial Number	If Handgun:	If Long Gun:
2015	H066200330	○ Semi-auto ○ Revolver ◉ Single Shot ○ Other	◉ Rifle ○ Shotgun

Make (as stamped on firearm)	Model (3032 Tomcat, KP95, 17C)	Caliber	Firearm Origin (US, Italy, China)	Barrel Length
Izhmash (Izhevsk)	Biathlon 73	22	Russia	

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

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/manufacturer: Dealer/manufacturer name: _____ Return date: _____
Dealer/manufacturer 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: _____