



POLICE DEPARTMENT, COUNTY OF SUFFOLK, N.Y.
 ACCREDITED LAW ENFORCEMENT AGENCY
TRANSFER OF WEAPONS HELD BY SCPD PROPERTY SECTION
 PDCS-4224

CC #: _____

Instructions: Form must be completed by Transferor of firearm(s)

Page ____ of ____

I, _____
 (Print Name) (D.O.B.)

hereby **TRANSFER OWNERSHIP** of the below listed weapons being held by the Suffolk County Police Department Property Section under **Invoice #:** _____.

MAKE	SERIAL #	MODEL	CAL	TYPE

Transferred To:

 (Print Name of new owner) D.O.B.

 (Address of new owner)

Signature of Transferring Owner (Sign only in presence of Notary) **Date**

STATE OF NEW YORK}
 COUNTY OF SUFFOLK}

On this _____ day of _____, 20 _____, before me personally came _____, known to me to be the individual described herein and who acknowledged and executed the instrument above.

Notary Public