Caldwell Police Department

110 S. 5th Ave.

Caldwell, ID 83605

DR#:

Telephone (208) 455-3115

CASE #:

IN THE DISTRICT COURT OF THE THIRD JUDICIAL DISTRICT OF THE

STATE OF IDAHO, IN AND FOR THE COUNTY OF CANYON

IN THE MATTER OF THE **RETURN OF WEAPONS** SEIZED BY THE CALDWELL POLICE DEPARTMENT STATE OF IDAHO) **County of Canyon** COMES NOW ______, in the County of Canyon, who, being first duly sworn, deposes and says: 1. That my true legal name is ______; although I have used the name(s) of _______. 2. That my true date of birth is _______. 4. That my place of birth is ______. 5. That I have lived in the state(s) of ______ 6. That the Caldwell Police Department seized weapon(s) described as: 7. The weapon(s) in the matter was (were) seized on ______.

8. That I am the owner of the weapon(s) described in #6. Choose **YES** or **NO**. (If you answer NO, skip question #9 below and go to #10).

9.	That I purchased the weapon(s) described in #6 on (date) from
10.	That I have personal knowledge that the owner of the weapon(s) described in #6 is this
	person: (insert person's name here)
11.	That I (select one) CAN / CANNOT provide documentation as to proof of ownership of the
	weapon(s) described in #6 (initials).
12.	That I have $\underline{\textbf{NOT}}$ been convicted, or received a Withheld judgment, of a crime punishable
	by imprisonment for a term exceeding one year, whether or not sentence has been
	imposed (initials).
13.	That I am not a fugitive from justice (initials).
14.	That I do not have any outstanding warrants for my arrest in any state
	(initials).
15.	That I have not been convicted of Driving While Under the Influence of Drugs (prescription
	or illegal) within the last year (initials).
16.	That I am not suffering from any mental illness, have not been adjudicated as a menta
	defective, and have never been involuntarily committed to a mental institution (initials).
17.	That I am not present in the United States illegally or unlawfully, nor am I present in the
	United States pursuant to a non-immigrant VISA (initials).
18.	That I have not been dishonorably discharged from any United States armed forces (initials).
19.	That I do not have a current Domestic Violence Restraining Order (civil Protection Order
	entered against me in any state (initials).
20.	That I have never been convicted of a violence related offence that would make it
	unlawful for me to possess a firearm under Federal or Idaho state law (initials)
	I have no current Orders from any judge in any state prohibiting me from possession a
	firearm (initials).
22.	That the above statements made by me are COMPLETE, ACCURATE AND TRUE to the besi
	of my knowledge (initials).

23. That I understand any false statement	ts made in this Affidavit would constitute perjury, a
felony punishable by imprisonment in	the Idaho State Correctional Institution for not less
than one (1) year and not more that for	ourteen (14) years (initials).
Signature (in front of notary)	Residence (street address, city, state, zip)
	Phone number (with area code)

STATE OF IDAHO) : SS.	
County of Canyon		
On this	day of	, 20, before me, a notary publi
in and for the State	of Idaho, personall	y appeared
Known to me to be	the person who ex	ecuted the within instrument, and acknowledge
to me that he or she	e executed the sam	e.
FURTHER, _		has personally sworn to the trut
and veracity of the A	Affidavit herein con	tained.
IN WITNESS	WHEREOF, I have	set my hand and affixed my official seal with th
day and year last ab	ove written.	
		Notary Public for Idaho
(SEAL)		Residing at
		iviy commission expires.