

FOR OFFICIAL USE ONLY

SECTION E

Application Number (if any):	
Date of Receipt:	Method of Submission:
Fees Paid:	Receipt Number:
Name of Receiving Officer:	Signature of Receiving Officer:

FOR REVIEW BOARD USE ONLY

DATE SUBMITTED TO REVIEW BOARD:	
REVIEW BOARD COMMENT(S):	
REVIEW BOARD CHAIRMAN SIGNATURE:	

DATE SUBMITTED TO MINISTER OF NATIONAL SECURITY:	
MINISTER'S DECISION AND DATE:	

DATE RECEIVED FROM THE MNS:	
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Date Submitted to Board:	
BOARD DECISION & DATE	
COMMENTS: (State type and caliber of firearm if approved)	
Board Chairman Signature	
Board Member Signature	
Board Member Signature	
Board Member Signature	
Board Member Signature	