CALIFORNIA DEPARTMENT OF JUSTICE
BUREAU OF FIREARMS

Employee Certificate of Eligibility Report of Employment

This form is to be completed and submitted to the Department of Justice (DOJ) when a person who currently holds a valid Certificate of Eligibility (COE) becomes an employee of a licensed California firearms dealer who requires that his/her employees to obtain a COE (Pen. Code, § 26915). The transmittal of this form to DOJ will associate your name with the dealer with whom you are employed. If, during the term of this COE, or upon renewal, you are found to be lawfully prohibited from possessing firearms, your COE will be revoked and you and the licensee certified on this form will be notified of the revocation.

To ensure your privacy, when you terminate employment with this firearms dealership, complete a Employee Certificate of Eligibility Termination of Employment Notice (BOF 118) and submit to DOJ. The transmittal of that form to DOJ will result in DOJ disassociating your name with the dealership.

COE HOLDER INFORMATION:

Last Name _____ First Name _____ Middle Name _____ COE Number _____

Physical Address _____ City _____ State _____ Zip Code _____

Mailing Address (if different) _____ City _____ State _____ Zip Code _____

CA Driver License or Identification Number _____ Date of Birth _____ Telephone Number _____

CALIFORNIA FIREARMS DEALERSHIP INFORMATION:

Dealership Name _____ California Firearms Dealer (CFD) Number _____

Name of Licensee _____

Business Address _____ City _____ State _____ Zip Code _____

EMPLOYEE COE HOLDER CERTIFICATION:

I certify I currently hold the COE listed above. My employer has informed me that I am required to maintain a current COE and provide a copy to him/her. I understand that if my COE is revoked, the licensee of the dealership named above will be notified of the revocation. I understand that if I terminate my employment with this dealership to ensure the protection of my privacy I will notify DOJ by submitting an Employee Certificate of Eligibility Termination of Employment Notice (BOF 118) to DOJ within ten (10) days of termination. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature _____ *Date* _____

If you have any questions, please contact the Bureau of Firearms at (916) 227-2153. Mail completed form to:

Department of Justice
Bureau of Firearms - COE
P.O. Box 160367
Sacramento, CA 95816-0367
FAX: (916) 227-1021