

# PROOF OF EXAMINATION

To: Butte County Sheriff's Office

Please be advised that on \_\_\_\_\_, at \_\_\_\_\_  
Date Range Name

\_\_\_\_\_  
First, Middle, Last

\_\_\_\_\_  
D.O.B.

demonstrated proficiency in ☐ qualification ☐ requalification with the weapon(s) described below:

|                |                |
|----------------|----------------|
| Make: _____    | Make: _____    |
| Serial: _____  | Serial: _____  |
| Caliber: _____ | Caliber: _____ |
| Model: _____   | Model: _____   |
| Type: _____    | Type: _____    |
| Make: _____    | Make: _____    |
| Serial: _____  | Serial: _____  |
| Caliber: _____ | Caliber: _____ |
| Model: _____   | Model: _____   |
| Type: _____    | Type: _____    |

**\*PLEASE verify the serial numbers are correct. Without the proper serial numbers, registration of the weapon can't be verified, as a result the weapon will NOT appear on your permit.**

☐ **Part One of the 16-hour Initial CCW Course or 8-hour Renewal with Qualification**

This qualification was conducted as part of a minimum eight-hour class in defensive firearms training, which the above stated individual has successfully completed. The class emphasized basic laws and liabilities that apply to the use of deadly force and concealed carry, as well as general firearms safety, use, and marksmanship and in compliance with the minimum standards of instruction mandated by the Butte County Sheriff.

**This completes Part One, 8 hours of the 16-hour Initial or the 8-hour Renewal Course**

I, the undersigned, declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_ Instructor's Name: \_\_\_\_\_

Instructor's Signature: \_\_\_\_\_

☐ **Part Two of the 16-hour CCW Course**

This class was conducted as part of a minimum sixteen-hour class in defensive firearms training, which the above stated individual has successfully completed. The class emphasized firearms safety, use, and marksmanship and in compliance with the minimum standards of instruction mandated by the Butte County Sheriff.

**This completes Part Two, total of 16-hours for the Initial Course**

I, the undersigned, declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_ Instructor's Name: \_\_\_\_\_

Instructor's Signature: \_\_\_\_\_