STATE OF ILLINOIS )

ILLINOIS STATE POLICE ) FOID Application Number: # FIREARMS RECORDS CHALLENGE UNIT )

# FOID Application Inadvertent Yes Answer AFFIDAVIT

The undersigned, , being first duly sworn

*(print full legal name)*

Upon oath, states as follows:

1. My Firearm Owner’s Identification (FOID) Card Application Number is .
2. On or about *(date),* I received notification from the Illinois State Police that my FOID application was denied due to answering yes on a criminal history question.
3. I hereby certify that I answered such question(s) in error and that I am not prohibited from possessing firearms under Illinois or Federal law.
4. I understand that this affidavit shall constitute part of my FOID Card application.
5. I understand that pursuant to Section 14 (d-5) of the FOID Card Act, entering false information on this affidavit is punishable as perjury under Section 32-2 of the Criminal Code of 2012.

# FURTHER AFFIANT SAYETH NOT.

Signature

Subscribed and sworn to before me

This day of , .

**Return To:**

Illinois State Police

Firearms Record Challenge Unit

801 S. 7th Street, Suite 400-M

Springfield, IL 62703

ISP.FRCU@illinois.gov

Notary Public

ISP 2-714 (12/20)