

Oklahoma Council on Law Enforcement Education and Training Municipal Judge Firearms Qualification Report

## PART 1 - TO BE COMPLETED BY THE MUNICIPAL JUDGE

Social Security or CLEET Number:	Phone # :
Name (Last, First MI):	
Mailing Address:	
Municipality Represented:	
By signing below, I certify under penalty of perjury that:  1. There are no willful misrepresentations, omissions, or falsification.  2. I am a Municipal Judge for the State of Oklahoma.  3. I am authorized to carry a firearm for personal protection pursuar Statutes.  4. I have successfully completed the approved firearms training could	nt to Title 20, Section 129 of the Oklahoma
SIGNATURE:	DATE:
PART 2 - TO BE COMPLETED BY A CERTIFIED FIR	EARMS INSTRUCTOR
Date of Qualification:	
Location of Qualification:	39
Printed Name of Rangemaster or Person Supervising Qualification:	
By signing below, I certify under penalty of perjury that:  1. The above named person completed the approved handgun qua on the 25-round CLEET Handgun Qualification Course.  2. I am a certified firearms instructor.  3. There are no willful misrepresentations, omissions, or falsification	
CLEET Firearms Instructor Number:	Phone #:
SIGNATURÉ:	DATE: