

## ILLINOIS STATE POLICE

## APPLICATION FOR FIREARM OWNER'S IDENTIFICATION CARD

Remit exactly \$10.00 in check or money order payable to FOID. THIS FEE IS NONREFUNDABLE

Official Use Only

Last Name: H e r s l e y  
 First Name: T e m p e s t  
 Middle Initial: E  
 Suffix:  
 Mailing Address (Illinois Residency Required):  
 City/Town: Madison  
 State: IL  
 Zip Code: 61201  
 County: Madison  
 Date of Birth (MM/DD/YYYY): 01/19/95



List Any Previous Names (Last Name, First Name, Middle Initial)

Social Security Number

GENDER: Male ☐ Female ☒  
 RACE: Black ☐ White ☒ Other ☐  
 HEIGHT: 5' 02"  
 WEIGHT: 110 lbs  
 EYE COLOR: SELECT ONE: Blue  
 HAIR COLOR: SELECT ONE: Brown

1. Place of Birth (U.S. State or Foreign Country)

I l l i n o i s

If you are 18 years of age or older, you must provide your most current Illinois Driver's License # or Illinois State Identification #.

 Illinois Driver's License Number OR  
 Illinois State Identification Number
1a. Are you a United States citizen/naturalized citizen? Yes ☒ No ☐
 If NO, you must provide your  
 alien registration number  
 or provide other proof of  
 documentation.

(Alien # - Resident Alien Card/Permanent Resident Card) (Admission # Form I-94/I-94W)

2. Have you ever been convicted of a felony?

3. In the past 5 years, have you been a patient in a mental institution or any medical facility used primarily for the care or treatment of persons for mental illness?

4. Are you addicted to narcotics?

5. Are you intellectually disabled?

6. Are you subject to an existing order of protection which prohibits you from possessing a firearm?

7. Within the past 5 years, have you been convicted of battery, assault, aggravated assault, violation of an order of protection, or a substantially similar offense in which a firearm was used or possessed?

8. Have you ever been convicted of domestic battery or a substantially similar offense (misdemeanor or felony)?

9. Have you ever been adjudicated a delinquent minor for the commission of an offense that if committed by an adult would be a felony?

10. Are you an alien who is unlawfully present in the United States?

11. Have you ever been adjudicated as a mental defective?

Warning: This application is governed by the Firearm's Owner's Identification (FOID) Card Act and must be completed by the applicant or his/her parent or legal guardian in its entirety, or it will be denied. Entering false information on an application for a FOID Card is punishable as a Class 2 felony in accordance with Section 14(d-5) of the FOID Card Act. This application and the information contained herein may be provided to third parties with whom the Illinois State Police (ISP) has contracted in order to complete the processing of my FOID card application. In such cases, however, the ISP requires the companies acting on our behalf abide by all state and federal laws and our privacy policies and institute safeguards to protect the confidentiality of your information.

Area Code Daytime Phone Number

618

e-mail: [REDACTED]

SIGNATURE REQUIRED (Please sign inside the box)

Date: 03/14/13

IF YOU ARE UNDER 21: The minor applicant and their parent or legal guardian must complete this section. The signature of the applicant's parent or legal guardian is required on both the front of the application and on the back affidavit.

## Parent or Legal Guardian Information

Relationship: Mark with an X  
 Father ☐  
 Mother ☒  
 Legal Guardian ☐  
 Parents or legal guardian must be 21 years of age and eligible to acquire or possess firearms or firearm ammunition.  
 Legal Guardian must submit a copy of legal guardianship court order.

Parent/Guardian Last Name

W o o d y

Date of Birth (MM/DD/YYYY)

[REDACTED]

Male ☐ Female ☒

Illinois Driver's License or State ID#

[REDACTED]

First Name

C e a r a

Date of Birth (MM/DD/YYYY)

[REDACTED]

Male ☐ Female ☒

Illinois Driver's License or State ID#

[REDACTED]

Signature of Parent/Legal Guardian Required

[REDACTED]

Date

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

## PARENT/LEGAL GUARDIAN AFFIDAVIT

**ONLY FOR "UNDER 21 YEARS OF AGE" APPLICATIONS**

Parent or Legal Guardian Signature Certification: I being first duly sworn upon oath, states as follows: (1) I am not currently prohibited from holding a FOID card insofar as: (a) I have not been convicted of a felony or have been granted relief from such conviction to hold a FOID card; (b) I have not, in the past 5 years, been a patient in a mental institution or any medical facility used primarily for the care or treatment of persons for mental illness; (c) I am not addicted to narcotics; (d) I am not intellectually disabled; (e) I am not subject to an existing order of protection which prohibits me from possessing a firearm, (f) I have not, within the past 5 years, been convicted of battery, assault, aggravated assault, violation of an order of protection, or a substantially similar offense in which a firearm was used or possessed; (g) I have not ever been convicted of a domestic battery or a substantially similar offense (misdemeanor or felony); (h) I have not been adjudicated a delinquent minor for the commission of an offense that if committed by an adult would be a felony; (i) I am not an alien who is unlawfully present in the United States; and (j) I have never been adjudicated as a mental defective. (2) I hereby give my consent for this minor applicant to possess and acquire firearms and firearm ammunition and understand I shall be liable for any damages resulting from the minor applicant's use of firearms or firearm ammunition. **FURTHER AFFIANT SAYETH NOT.**

I hereby authorize the Illinois State Police to verify answers given with any government or private entity authorized to hold records relevant to my citizenship, criminal history and mental health treatment or history.

\_\_\_\_\_  
Parent or Legal Guardian Signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

**Note:** Any person who is prohibited from acquiring or possessing firearms or firearm ammunition by any Illinois state statute or by federal law is ineligible for a FOID card.

Please allow 30 days for processing and delivery of your Firearm Owner's Identification Card.

Printed by the Authority  
of the State of Illinois



**With this application you must include:**

- |  |             |
|--|-------------|
| <input checked="" type="checkbox"/> Photograph         | CHECK OR    |
| <input checked="" type="checkbox"/> FOID Fee - \$10.00 | MONEY ORDER |
| <input checked="" type="checkbox"/> Signature          | ONLY        |

Internet Address <http://www.isp.state.il.us>  
Customer Service Telephone: 217-782-7980  
(For Hearing Impaired only TDD 1-800-255-3323)

**Mail To:**  
**Illinois State Police - FOID**  
**Post Office Box 19233**  
**Springfield, IL 62794-9233**

Commission on  
Accreditation for Law  
Enforcement Agencies



ISP Central Printing Section  
Printed on Recycled Paper  
ISP 6-181 (9/12) 100M  
[www.illinois.gov](http://www.illinois.gov)







**Firearm Services Bureau**

Your Firearm Owner's Identification (FOID) application(s) is being returned to you for completion or correction. The Illinois State Police is unable to process your application as submitted for the following reason(s):

- ☐ **Application re-submission needed.** Application is incomplete, illegible or damaged in mail. The condition of the application you submitted is not acceptable for processing. Fully complete the enclosed application and return it promptly in the enclosed envelope.
- ☒ **The Application is incomplete.** The highlighted portions of the application must be completed. *The application is for two 1908 Remington-Union City pistols, not a handgun, and should be marked as such.*
- ☐ **Out-of-date application.** Complete the enclosed FOID application.
- ☐ **No photograph/unacceptable photograph.** Submit a recent, clear, head and shoulder photograph, approximately 1 by 1 1/2 in size.  
☐ Photo image too dark or poor quality. ☐ We can longer process without photo.
- ☐ **No Illinois driver's license number or state identification number provided.** (If you are employed in the protective, security, or public safety fields in Illinois AND that employment requires you to have a FOID card OR you are in the United States Armed Services on permanent duty assignment in Illinois, you may be eligible for relief from this requirement. Please call the Firearms Services Bureau at 217/782-3849, if you would like information on the relief process.)
- ☐ **Illinois resident requirement.** Only Illinois residents may be issued a FOID card. Your application was submitted with an out of state address. Please call the Firearms Services Bureau at 217/782-5067 if you have questions concerning your eligibility.
- ☐ **Written consent is not from a parent or legal guardian.** The relationship shown is not a parent or legal guardian; therefore it is not acceptable. If the individual listed on the enclosed application is your legal guardian, submit a copy of the legal guardian court order with the enclosed application. A spouse is not a legal guardian without guardianship papers.
- ☐ **No guardianship papers provided.** The relationship shows Legal Guardian. Please submit a copy of the legal guardianship court order papers.
- ☐ **No processing fee provided.** Submit a \$10.00 check or money order payable to FOID with your photograph and application. Do not submit cash or copies of the money order.
- ☐ **Incorrect fee or incomplete check.** Please submit correct fee/check with the enclosed application.  
☐ incorrect fee ☐ cash not accepted ☐ check not signed ☐ payee not completed
- ☐ **No Alien Number provided** The question "Are you a United States citizen or a naturalized citizen?" was answered "No". Please provide your INS/Alien Number and your country of birth.

Please make the necessary corrections and return the FOID application, \$10.00 payment and photo to:

Illinois State Police - FOID  
 Post Office Box 19233  
 Springfield, Illinois 62794-9233

Additional FOID applications can be found at <http://www.isp.state.il.us/foid/firearms.cfm>. Please contact us at 217/782-7980 if you have any further questions.

<b>UNITED STATES POSTAL SERVICE</b>		<b>POSTAL MONEY ORDER</b>	
Serial Number	20907676203	Ver. Item, Day	2013-03-15
Post Office	620250	U.S. Dollars and Cents	<b>\$10.00</b>
Amount	TEN DOLLARS & 00¢	*****	
Pay to	FOID		
Address	Illinois State Police - Ford P.O. Box 19233 Springfield IL 62719-0233		
City	Springfield, IL		
State	Illinois		
Zip	62719-0233		
SEE REVERSE WARNING - NEGOTIABLE ONLY IN THE U.S. AND POSSESSIONS			

ILLINOIS STATE POLICE-FOID  
BOX 19233  
SPRINGFIELD, IL 62794-9233

TEMPEST HORSLEY  
3000 DUNE AVENUE  
GRANITE CITY, IL 62041

2013-03-15 10:00 AM

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