Austin Police Retired Officer's Association CERTIFICATE OF FIREARMS PROFICIENCY

Applicant						
First Name	M.I.	Last Name			TCLEOSE PID or SSN	
Weapon Type(s):sem	i-autom	aticRevolve	er			
Firearms Instructor						
First Name	M.I. Last Name				☐ TCLEOSE Firearms Instructor	
Law Enforcement Agency/Business Name		☐ CHL Instructor # Mailing Address				
Mailing Add				;		
City	County	'	Zip Code Telepho		hone Number	
Range Location (if other than the	e Location (if other than the above address)					
Trange Location (if other than the above address)			Date of qualification			
			1			
I,, certify that the above named applicant has met the minimum						
Firearms/CHL Instructor firearms proficiency requirements as established in TCOLE Commission Rule $\S218.9$ (c) (1) under the following						
conditions:						
(1) P. 27 or similar si	lhauatta	toract				
(1) B-27 or similar si(2) Combat scoring;	nouette	target;				
(3) A minimum of 50 rounds,						
(4) Fired at ranges from point blank to at least 15 yards with a least 20 rounds at or beyond seven yards;						
(5) Including at least one timed reload; and(6) Minimum passing percentage of 70 (175 out of a possible 250 for 50 rounds).						
(o) withintant passing	percen	tage of 70 (175 out of a	possible 230 loi	50 rounds	·)-	
Signature of Firearms/CHL Instructor			· · · · · · · · · · · · · · · · · · ·	Date		
4 and 7 - 6.						
Affidavit						
I,	, do	swear or affirm that I n	neet the requiren	nents esta	blished in the Texas Occupations	
Applicant			•			
					ninal Investigators and Chapter 44,	
Title 18, United States Code, Section 926C(c) Qualified Retired Law Enforcement Officers. I am honorably retired (benefits eligible) after not less than a total of 10 years of service as a commissioned peace officer with one or more state or local law						
enforcement agencies or federal criminal investigator as designated by the Texas Code of Criminal Procedure Article 2.122.,						
or a qualified retired law enfor						
					d for any period during my term of	
service as a commissioned officer. I was not retired for reasons of mental instability and have no psychological or physical disability that would interfere with the proper handling of a handgun. I have met the minimum qualifications for a handgun						
as established in TCOLE Com			lugun. I nave me	t the mini	mum quamications for a nanugun	
Signature of Applicant			Date			
Sworn to and ascribed before n	ne the ur	ndersigned official on this	sday of			
•						
Notary Public		dis Fall of All (All Section Control And All And				