**RHODE ISLAND FIREARM BILL OF SALE**

**PART 1 -** THE PARTIES

|  |  |
| --- | --- |
| **SELLER** | Full Name: [BUYER NAME] Driver’s License No: [DRIVER'S LICENSE #]  Street Address: [STREET ADDRESS] City: [CITY]  State: Rhode Island ZIP: [ZIP CODE] Phone: [PHONE NUMBER] |

|  |  |
| --- | --- |
| **BUYER** | Full Name: [SELLER NAME] Driver’s License No: [DRIVER'S LICENSE #]  Street Address: [STREET ADDRESS] City: [CITY]  State: [STATE] ZIP: [ZIP CODE] Phone: [PHONE NUMBER] |

**PART 2 -** FIREARM(S)

1. **Cost ($)**: [ENTER COST] Make: [ENTER MAKE] Model: [ENTER MODEL]

Action:  Bolt |  Semi-Automatic |  Pump |  Lever |  Break

Caliber/Gauge: [CALIBER/GAUGE] Serial Number (SN): [FIREARM SERIAL #]

1. **Cost ($)**: [ENTER COST] Make: [ENTER MAKE] Model: [ENTER MODEL]

Action:  Bolt |  Semi-Automatic |  Pump |  Lever |  Break

Caliber/Gauge: [CALIBER/GAUGE] Serial Number (SN): [FIREARM SERIAL #]

1. **Cost ($)**: [ENTER COST] Make: [ENTER MAKE] Model: [ENTER MODEL]

Action:  Bolt |  Semi-Automatic |  Pump |  Lever |  Break

Caliber/Gauge: [CALIBER/GAUGE] Serial Number (SN): [FIREARM SERIAL #]

**TOTAL COST ($):** [TOTAL FIREARM COSTS]

**PART 3 -** TRADE / PURCHASE

- Seller accepts monetary funds in the amount of [PAYMENT AMOUNT to be paid:

* - On the date of this bill of sale, known as [MM/DD/YYYY].
* - At a future date, no later than [MM/DD/YYYY].
* - Other [OTHER PAYMENT TERMS].

- Seller accepts a trade for the firearm(s), described as [ENTER TRADE TERMS HERE].

**PART 4 -** BUYER’S DISCLOSURE

**Buyer declares the following statements are true and he/she:**

* Is not under the legal age to own a firearm;
* Has never been convicted in any court of a crime punishable by imprisonment for a term exceeding 1 year;
* Is not a fugitive from justice;
* Is not an unlawful user of or addicted to any controlled substance;
* Has never been adjudicated as a mental defective or has been committed to a mental institution;
* Is not an alien illegally or unlawfully in the United states or an alien admitted to the United states under a nonimmigrant visa;
* Has not been discharged from the Armed Forces under dishonorable conditions;
* Having been a citizen of the United states, has never renounced his or her citizenship;
* Is not subject to a court order that restrains the person from harassing, stalking, or threatening an intimate partner or child of such intimate partner;
* Has not been convicted of a misdemeanor crime of domestic violence;
* Can lawfully receive, possess, ship, or transport a firearm;
* Is not a person who is under indictment or information for a crime punishable by imprisonment for a term exceeding 1 year.

**Buyer’s Signature:** [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/)

**PART 5 -** SELLER’S DISCLOSURE

**Seller declares the following statements are true and he/she:**

* Has verified that the firearm details are correct and the serial number is legible;
* Is the lawful owner of the firearm and has the legal right to sell the firearm;
* Has no knowledge of defects in the firearm;
* Believes the firearm is fit to be used for its intended purpose;
* Has never been used in a manner of questionable or certain illegality;
* Assumes no responsibility after the transfer of ownership has taken place.

**Seller’s Signature:**

**PART 6 -** SIGNATURES

On this [MM/DD/YYYY] the buyer and seller agree to the above described terms and conditions for the sale/trade/exchange of the firearm.

**Seller Signature:**

Printed Name: [SELLER PRINTED NAME]

**Buyer Signature:**

Printed Name: [BUYER PRINTED NAME]

**Witness 1 Signature:**

Printed Name: [WITNESS PRINTED NAME]

**Witness 2 Signature:**

Printed Name: [WITNESS PRINTED NAME]

**PART 7 -** ACKNOWLEDGMENT OF NOTARY PUBLIC (IF APPLICABLE)

STATE OF [NOTARY ONLY: STATE]

[NOTARY ONLY: COUNTY] County, ss.

On [NOTARY ONLY: SIGNING DATE], before me appeared

[NOTARY ONLY: BUYER NAME] as **Buyer** of this Bill of Sale who proved to me through government issued photo identification to be the above-named person, in my presence executed foregoing instrument and acknowledged that he/she executed the same as his/her free act and deed.

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 **Notary Public**

My commission expires: [NOTARY ONLY: EXPIRATION]

STATE OF [NOTARY ONLY: STATE]

[NOTARY ONLY: COUNTY] County, ss.

On [NOTARY ONLY: SIGNING DATE], before me appeared

[NOTARY ONLY: SELLER NAME] as **Seller** of this Bill of Sale who proved to me through government issued photo identification to be the above-named person, in my presence executed foregoing instrument and acknowledged that he/she executed the same as his/her free act and deed.

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 **Notary Public**

My commission expires: [NOTARY ONLY: EXPIRATION]