FOID Application Inadvertent Yes Answer – Adjudicated Mental Defective

AFFIDAVIT

The undersigned, ________________________________, being first duly sworn upon oath, states as follows:

1. My Firearm Owner’s Identification (FOID) Application Number is ________________________.

2. On or about _________________ (date), I received notification from the Illinois State Police that my FOID application was denied. The stated reason for the denial is that on my application I indicated that I have been adjudicated by a court as a mental defective or ordered by a court, board or authorized entity to in-patient or out-patient mental health treatment.

3. I hereby certify that I answered this question in error and that I have not been adjudicated by a court as a mental defective or ordered by a court, board or authorized entity to in-patient or out-patient mental health treatment.

4. I understand that this affidavit shall constitute part of my license 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 _____________, __________.

__________________________________________
Notary Public