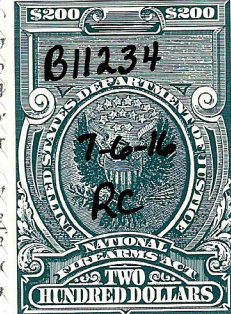


Application for Tax Paid Transfer and Registration of Firearm

ATF Control Number 2a. Transferee's Name and Address <i>(Including tradename, if any) (See instruction 2)</i> MICHAEL JON LUND 556 CRESWOOD LOOP CRESWELL, OR 97426	Submit in Duplicate to: National Firearms Act Branch Bureau of Alcohol, Tobacco, Firearms and Explosives, P.O. Box 530298 Atlanta, GA 30353-0298
2b. County LANE	1. Type of Transfer <i>(Check one)</i> <input type="checkbox"/> Sub <input type="checkbox"/> mor <input type="checkbox"/> mad <input type="checkbox"/> Tob <input type="checkbox"/> app <input type="checkbox"/> will <input type="checkbox"/> "Na" <input type="checkbox"/> (See 3d. Num of R Pren
3a. Transferor's Name and Address <i>(Including trade name, if any) (Executors: see instruction 2k)</i> EMERALD VALLEY ARMORY, LLC 155 E OREGON AVE CRESWELL, OR 97426	3b. Transferor's Telephone Number and Area Code 541-895-2666
3c. If Applicable: Decedent's Name, Address, and Date of Death	



Check or amount of alcohol, tobacco, or other products. Upon office required or you. If Code less 3a.

The above-named and undersigned transferor hereby makes application as required by Section 5812 of the National Firearms Act to transfer and register the firearm described below to the transferee.

4. Description of Firearm <i>(Complete items a through h)</i>			d. Model	
a. Name and Address of Manufacturer and/or Importer of Firearm ADVANCED ARMAMENT LAWRENCEVILLE, GA USA	b. Type of Firearm <i>(See instruction 1c)</i>	c. Caliber, Gauge or Size <i>(Specify)</i>	762-SD	Length <i>(Inches)</i>
	SILENCER	7.62MM	e. Of Barrel: N/A	f. Overall: 9.10"
h. Additional Description or Data Appearing on Firearm <i>(Attach additional sheet if necessary)</i>			g. Serial Number B11234	

5. Transferee's Federal Firearms License <i>(If any)</i> (Give complete 15-digit number) (See instruction 2b)				6. Transferee's Special (Occupational) Tax Status <i>(If any)</i>	
First 6 digits	2 digits	2 digits	5 digits	a. Employer Identification Number	b. Class
993039	07	7G	03182	27-2279762	CLASS III
7. Transferor's Federal Firearms License <i>(If any)</i> (Give complete 15-digit number) (See instruction 2b)				8. Transferor's Special (Occupational) Tax Status <i>(If any)</i>	
First 6 digits	2 digits	2 digits	5 digits	a. Employer Identification Number	b. Class
993039	07	7G	03182	27-2279762	CLASS III

Under Penalties of Perjury, I Declare that I have examined this application, and to the best of my knowledge and belief it is true, correct and complete, and that the transfer of the described firearm to the transferee and receipt and possession of it by the transferee are not prohibited by the provisions of Chapter 44, Title 18, United States Code; Chapter 53, Title 26, United States Code; or Title VII of the Omnibus Crime Control and Safe Streets Act, as amended; or any provisions of State or local law.

9. Consent to Disclosure of Information to Transferee <i>(See instruction 8)</i> <input checked="" type="radio"/> Do or <input type="radio"/> Do Not <i>(Circle one)</i> Authorize ATF to Provide Information Relating to this Application to the Above-Named Transferee.		
10. Signature of Transferor <i>(or authorized official)</i>	11. Name and Title of Authorized Official <i>(Print or type)</i> RAYE R. GUNTER / MANAGER	12. Date 02-17-2016

The Space Below is for the use of the Bureau of Alcohol, Tobacco, Firearms and Explosives

By authority of the Director, This Application has been Examined, and the Transfer and Registration of the Firearm Described herein and the Interstate Movement of that Firearm, when Applicable, to the Transferee are:	Stamp Denomination
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<input checked="" type="checkbox"/> Approved <i>(with the following conditions, if any)</i>	<input type="checkbox"/> Disapproved <i>(For the following reasons)</i>
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Signature of Authorized ATF Official <i>Robin L Chesek</i>	Date JUL 06 2016
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Transferee Information

The following questions must be answered by any transferee who is **not** a Federal firearms licensee or government agency. The transferee shall give full details on a separate sheet for all "YES" answers. (See instruction 2d)

13. Are You:	Yes	No	14. Have You:	Yes	No
a. Charged by information or under indictment in any court for a crime punishable by imprisonment for a term exceeding one year?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Been convicted in any court of a crime for which the judge could have imprisoned you for more than one year, even if the judge actually gave you a shorter sentence?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. A fugitive from justice?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Been discharged from the armed forces under dishonorable conditions?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. An alien who is illegally or unlawfully in the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Been adjudicated mentally defective or been committed to a mental institution?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Under 21 years of age?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Renounced your United States citizenship?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. An unlawful user of or addicted to, marijuana, or any depressant, stimulant, or narcotic drug, or any other controlled substance?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Been convicted in any court of a misdemeanor crime of domestic violence? This includes any misdemeanor conviction involving the use or attempted use of physical force committed by a current or former spouse, parent, or guardian of the victim, or by a person with a similar relationship with the victim.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Subject to a court order restraining you from harassing, stalking or threatening an intimate partner or child of such partner?	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

15. Transferee's Certification (See instruction 2e)

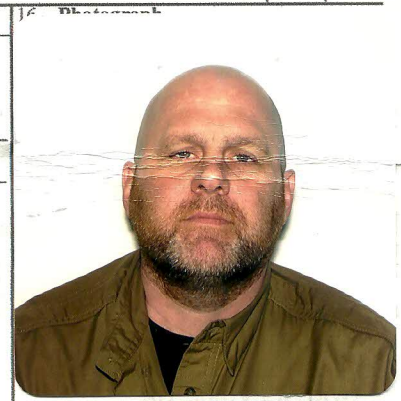
I, MICHAEL JON LUND, have a reasonable necessity to
 (Name of Transferee)
 possess the machinegun, short-barreled rifle, short-barreled shotgun, or destructive device described on this application for the following reason(s) SHOOTING ENJOYMENT AND COLLECTION

and my possession of the device or weapon would be consistent with public safety (18 U.S.C. 922(b) (4) and 27 CFR 478.98).

UNDER PENALTIES OF PERJURY, I declare that I have examined this application and the documents submitted in support thereof, and to the best of my knowledge and belief it is true, correct and complete.

Michael Jon Lund
 (Signature of Transferee)

02-17-2016
 (Date)



17. Law Enforcement Certification (See instruction 2e)

I certify that I am the chief law enforcement officer of the organization named below having jurisdiction in the area of residence of

MICHAEL JON LUND I have no information indicating that the transferee will use the firearm or device
 (Name of Transferee)

described on this application for other than lawful purposes. I have no information that the receipt or possession of the firearm or device described in item 4 would be place the transferee in violation of State or local law.

Blaine Searice
 (Signature and Title of Chief Law Enforcement Officer)

02-29-2016
 (Date)

Lane County Sheriff's Office
125 East 8th Avenue
Eugene, Oregon 97401
541-682-4150

(Organization)
 (County) (Telephone Number)

Important Information for Currently Registered Firearms

If this registration document evidences the current registration of the firearm described on it, please note the following information.

Estate Procedures: For procedures regarding the transfer of firearms in an estate resulting from the death of the registrant identified in item 2a, the executor should contact the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405.

Change of Address: Unless currently licensed under the Gun Control Act, the registrant shall notify the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405, in writing, of any change to the address in Item 2a.

Change of Description: The registrant shall notify the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405, in writing, of any change to the description of the firearm in Item 4.

Interstate Movement: If the firearm identified in item 4 is a machinegun, short-barreled rifle, short-barreled shotgun, or destructive device, the registrant may be required by 18 U.S.C. § 922(a)(4) to obtain permission from ATF prior to any transportation in interstate or foreign commerce.

Restrictions on Possession: Any restriction (see approval block on face of form) on the possession of the firearm identified in item 4 continues with the further transfer of the firearm.

Persons Prohibited from Possessing Firearms: If the registrant becomes prohibited by 18 U.S.C. § 922 from possessing a firearm, the registrant shall notify the NFA Branch, Bureau of Alcohol, Tobacco, Firearms and Explosives, 244 Needy Road, Martinsburg, WV 25405, in writing, immediately upon becoming prohibited for guidance on the disposal of the firearm.

Proof of Registration: This approved application is the registrant's proof of registration and it shall be made available to any ATF officer upon request.