**E-FA-10 DELETION REQUEST FORM**

This form is used to request the removal of an incorrect transaction entered into the Massachusetts Firearms Registration and Transfer System (E-FA-10).

You **must** submit a correct transaction in order for this request to be processed.

**Instructions:**

1. PRINT CLEARLY the information requested below
2. Make a copy of the *inaccurate* transaction record
3. Make a copy of the *accurate* transaction record
4. Send this form and the copies of both transaction records to:
   
   Firearms Records Bureau  
   200 Arlington Street, Suite 2200  
   Chelsea, MA 02150  
   ATTN: E-FA-10 Corrections

5. Keep a copy of the form for your records

**Section 1:**

**NAME:**  

(Please Print)  

LAST FIRST MIDDLE

**DATE OF BIRTH:**  

(MM/DD/YY)  

**DAYTIME TELEPHONE NUMBER *:** ( ____ ) ______________

*In case we need to contact you

**ADDRESS:**  

______________________________________________________________________  

STREET

______________________________________________________________________  

CITY/TOWN STATE ZIP CODE

**Section 2 – Inaccurate E-FA-10 Submission:**

**TICKET NUMBER:**  

(located in upper right hand corner of transaction record)

**INACCURATE INFORMATION** (check all that apply):

[ ] Make  
[ ] Model  
[ ] Serial Number  
[ ] Caliber

[ ] Other (please specify): __________________________________________

**Section 3 - Corrected Transaction Record**

**TICKET NUMBER:**  

(located in upper right hand corner of transaction record)