



### FORM 8

QUEENSLAND Weapons Act 1990 Section 30(5)(b)



Ver.2—01/07/200

# RECEIPT FOR SURRENDERED WEAPON(S)

#### Note:

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# 5. POLICE STATION USE ONLY

Name of receiving station					
Receiving member—Name		O/C—Name			
Rank and Reg. No./ Level and Payroll No.		Rank and Reg. No.			
Signature		Signature			
Date	Day Month Year	Date	Day	Month	Year



## 6. WEAPON(S) DETAILS

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#### Privacy Collection Statement

The collection of this information is authorised by the Weapons Act 1990. The information you provide will not be used or disclosed without your consent unless such use or disclosure is authorised or required by law, including the Weapons Act 1990 (Qld), Police Service Administration Act 1990 (Qld) and the Information Privacy Act 2009 (Qld). You have a right to access personal information that the QPS holds about you, subject to any exceptions in relevant legislation. If you wish to seek access to your personal information or inquire about the handling of your personal information, please contact PSBA Right to Information and Privacy by email at [a@p[]&\.qld.gov.au or by telephone 07 3364 4666.