

**HANDGUN CERTIFICATE
DENIAL OR REVOCATION APPEAL**

IN THE COUNTY COURT OF _____ COUNTY, NEBRASKA
(county of your residence)

Case # _____
(case number assigned by Clerk of the Court)

(your name) Appellant

VS.

(chief of of police or sheriff name) Appellee

**HANDGUN CERTIFICATE
DENIAL OR REVOCATION APPEAL**

I, _____, having received, no more than ten days ago, a denial of a
(your name)
handgun certificate or a revocation of my handgun certificate, appeal the denial or revocation, which is
attached to this document. A filing fee of ten dollars (\$10.00) has been submitted with this appeal.
According to the chief of police or sheriff, the handgun certificate was denied or revoked because

(reason the chief of police or sheriff stated for denying or revoking the handgun certificate)

_____.

Signature Date _____

Name

Street Address/P.O. Box

City/State/ZIP Code

Phone E-mail Address

Attachment: Handgun Certificate denial or revocation