

## Concealed Weapon Permit Request to Renew

I \_\_\_\_\_ request to renew my Concealed Weapon Permit (CWP).  
Print Name

It expires on \_\_\_\_\_.

I state that nothing has changed that should affect the renewal of my CWP.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please attach the old permit, enclose a check for \$25.00, made payable to MCSO and list any changes from the old permit (i.e. name change, address, weight, hair color, driver's license number, etc.) below.

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Mail or hand deliver to:

Musselshell County Sheriff's Office  
820 Main Street  
Roundup, MT 59072  
406-323-1402