EXHIBIT A – FORM 77Rs

Nics Number: 101Z7TVT6 Nics Date: 4/5/2021

Section 1 TRANSFEREE (PURCHASER) VOLUNTARY REGISTRATION INFORMATION Designated Collector	Yes
Government Issued ID Type: DRIVER'S LICENSE Government Issued ID #: M560139013937	
Government Issued ID State of Issue: Maryland Social Security Number:	
Last Name: MINOR First Name: DEMETRIUS Middle Name: Suffix: NONE	
Maiden Name (if applicable) : Nick Name (if applicable):	
Street Address: 12644 GREY EAGLE CT Is Baltimore City resident: NO	
Town/City: GERMANTOWN County: MONTGOMERY State: Maryland Zipcode: 20874	
DOB: 12/09/1991 Place of Birth (City & State): SILVER SPRING, Maryland Country: UNITED STAT	ES
Height: 5'11" Weight: 400 Race: BLACK Sex: M Eyes: BROWN	iir: BLACK
Home Phone : Work Phone : _(240)477-2250 Mobile Phone : _(240)477-2250 Occupation : UNEM	PLOYED
Section 2a DEALER INFORMATION	
Dealer 062715 Dealer Name: Engage Armament LLC Phone: (301)838	-3151
Number:	
Street Address: 701 E. Gude Dr Town/City: Rockville State: Maryland Zipcode: 7	20850
Sales Person Last Name: RABANALES First Name: RACHEL Middle Name: ELIZABETH S	uffix:
Section 2b TRANSFEROR (SELLER) INFORMATION (**For Secondary Sale and Gifts Only**)	
Government Issued ID #: State: Social Security #:	
Last Name: First Name: Middle Name: Suffix:	
Street Address: Town/City: State: Zipcode:	
DOB: Race: Sex: Home Phone: Work Phone:	
Section 3	
Date Form Forwarded: 03/30/2021	
Current Disposition Date: 04/05/2021 Current Disposition: NOT DISAPPROVED	·
Signature of Approving Offical: Maryland State Police Date Form Received Final: 04/06/2021	

437 Numb	per: 000001000932104		Purchase Type:	New	
Make:	TAURUS	Model:	G2 C	Model Number:	1-G2C931-12 (9 MM)
Caliber:	9 mm	Barrel Length:	3.20	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	ACA475492	Country of Origin:	BRAZIL
Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?				YES	
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?				NA	
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?					YES

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 5 Sign upon Application Completion

Transferee/Voluntary Registrant: DEMETRIUS MINOR

Transferor Dealer: RACHEL RABANALES

Section 6 Sign upon Transfer of Firearm

Transferee: DEMETRIUS MINOR

Transferor/Dealer: CHRISTOPHER MAIENSCHEIN

Transfer Date: 04/06/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to pur	rchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /ID) #:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination published Alcohol, Tobacco, Firearms and Explosives.	ed by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL)	or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?	NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

Notice: 7-Day Waiting Period. A dealer or other person may not sell, rent, transfer, or purchase a regulated firearm until after 7 days following the time a firearm application is forwarded to the Maryland State Police. For a secondary sale or transfer, the application must be forwarded by a dealer or a designated law enforcement agency.

Information Release

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 03/16/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 03/16/2021

Firearm Dealer/Transferor: RACHEL RABANALES Date Submitted to MDSP for Review: 03/30/2021

Nics Number: 101ZMSPVZ Nics Date: 4/12/2021

Section 1 TRANSFEREE (PURCHA	SER) VOLUNTARY REGISTRATION	INFORMATION	Designated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gove	ernment Issued ID #: M5601	139013937
Government Issued ID State of Issued		Social Security Number:	
			C. H. NONE
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) : Street Address: 12644 GREY EAGL	E CT	Nick Name (if applicable):	e City resident: NO
-	County: MONTGOMER		
Town/City: GERMANTOWN	COUNTY COUNTY	State: Maryland	Zipcode: 20874
DOB: 12/09/1991 Place o	f Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height : <u>5'11"</u> Weight : <u>400</u>	Race: BLACK	Sex: <u></u>	M Eyes: Hair: BLACK BROWN
Home Phone : W	/ork Phone: (240)477-2250	Mobile Phone : (240)477-22	
	(2.10) 223	(2.0)	
Section 2a DEALER INFORMATION	DN		
Dealer 062715	Dealer Name: Eng	age Armament LLC	Phone: (301)838-3151
License Number:	<u></u>		
Street Address: 701 E. Gude Dr	Town/City:	Rockville State:	Maryland Zipcode: 20850
Sales Person Last Name: WEAVE	R First Na	me: DERYCK Mic	ddle Name: Suffix:
Section 2b TRANSFEROR (SELLER)	INFORMATION (**For Secondary	Sale and Gifts Only**)	
Government Issued ID #:	State:	S	Social Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB: Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:			
Current Disposition Date:		Current Dispo	
Signature of Approving Offical:		Date Form Received	
Reviewer:	DERYCK WEAVER	Barrack/E	Dealer: Engage Armament LLC

Section 4

FIREARM INFORMATION (Must be Completed by Transferor/Dealer)

437 Numb	per: 000001000934991		Purchase Type:	New	
Make:	GLOCK	Model:	19	Model Number:	19X
Caliber:	9 mm	Barrel Length:	4.02	Type:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial # :	BTDV743	_ Country of Origin:	AUSTRIA
that is not l	Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?				
or before D external sat	Safety Lock: A dealer may not December 31, 2002, unless the handg fety lock. If the handgun was manufuted, or transferred with an external	gun is sold, offere factured on or bef	d for sale, rented, or	transferred with an	NA
handgun m transferred	Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?				
SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.					
Section 5 Sign upon Application Completion Section 6 Sign upon Transfer of Firearm					

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

DEMETRIUS MINOR

Transferee/Voluntary Registrant:

Transferor Dealer:

DERYCK WEAVER

Transferee: DEMETRIUS MINOR

Transferor/Dealer: DERYCK WEAVER

Transfer Date: 04/14/2021

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to pur	rchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /ID) #:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination published Alcohol, Tobacco, Firearms and Explosives.	ed by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL)	or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?	NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

Notice: 7-Day Waiting Period. A dealer or other person may not sell, rent, transfer, or purchase a regulated firearm until after 7 days following the time a firearm application is forwarded to the Maryland State Police. For a secondary sale or transfer, the application must be forwarded by a dealer or a designated law enforcement agency.

Information Release

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health—General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 04/07/2021

Signature of Transferee/Voluntary Registrant and Tran	sferor (Sign upon completing Part 1 o	of this Application)
I certify under penalty of perjury that the information cont or omitted information can result in the disapproval of this		erstand that any false
Applicant/Voluntary Registrant: DEMETRIUS MINOR	Date Applicant/Registrant Signed:	04/07/2021
Firearm Dealer/Transferor: DERYCK WEAVER	Date Submitted to MDSP for Review:	04/07/2021

Nics Number: 101ZR6YB8 Nics Date: 4/14/2021

Section 1 TRANSFEREE (PURCHA	ASER) VOLUNTARY REGISTRATION	I INFORMATION	Designated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gov	ernment Issued ID #: M56013	9013937
Government Issued ID State of Iss		Social Security Number:	
		- · · -	C. If NONE
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :	r cr	Nick Name (if applicable):	City was idented NO
Street Address: 12644 GREY EAGL			City resident: NO
Town/City: GERMANTOWN	County: MONTGOMER COUNTY	State: Maryland	Zipcode: 20874
DOB: <u>12/09/1991</u> Place o	of Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height : <u>5'11"</u> Weight : <u>400</u>	Race: BLACK	Sex: <u>M</u>	Eyes: Hair: BLACK BROWN
Home Phone :W	Vork Phone : (240)477-2250	Mobile Phone : (240)477-225	Occupation : UNEMPLOYED
Section 2a DEALER INFORMATION	ON		
Dealer 062715	Dealer Name: Eng	age Armament LLC	Phone: (301)838-3151
License Number:			
Street Address: 701 E. Gude Dr	Town/City:	Rockville State: N	Maryland Zipcode: 20850
Sales Person Last Name: RAYM0	OND First Na	me: ANDREW Mide	dle Name: STARR Suffix:
Section 2b TRANSFEROR (SELLER) INFORMATION (**For Secondary	/ Sale and Gifts Only**)	
Government Issued ID #:	State:	Sc	ocial Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB: Race:	Sex:	Home Phone:	Work Phone:
Section 3			
	0.4.400.40004		
Date Form Forwarded:			NOT DISABBLE VITE
Current Disposition Date:		Current Disposi	
Signature of Approving Offical:		Date Form Received I	
Reviewer:	ANDREW RAYMOND	Barrack/De	ealer: Engage Armament LLC

437 Numb	er: 000001000935960		Purchase Type:	New	_
Make:	GLOCK	Model:	17	Model Number:	GEN 5
Caliber:	9 mm	Barrel Length:	4.50	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	BTBG105	Country of Origin:	AUSTRIA
that is not l	Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?				
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?					NA
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?				YES	

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 5 Sign upon Application Completion Section 6 Sign upon Transfer of Firearm Transferee/Voluntary Registrant: DEMETRIUS MINOR Transferee: DEMETRIUS MINOR Transferor Dealer: ANDREW RAYMOND Transferor/Dealer: DERYCK WEAVER Transfer Date: 04/16/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior	to purchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Back	lge /ID#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination p Alcohol, Tobacco, Firearms and Explosives.	ublished by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL) or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
, , ,	
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Marylaw, carries a maximum penalty of more than 2 years?	rland NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which y received a sentence of more than 2 years?	vou NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryla that carries a maximum penalty of more than 2 years if committed by an adult?	

11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?

NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

Notice: 7-Day Waiting Period. A dealer or other person may not sell, rent, transfer, or purchase a regulated firearm until after 7 days following the time a firearm application is forwarded to the Maryland State Police. For a secondary sale or transfer, the application must be forwarded by a dealer or a designated law enforcement agency.

Information Release

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 04/09/2021

Signature of Transferee/Volum	ntary Registrant and Transferor	(Sign upon completing Part 1 of	this Application)	
I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.				
Applicant/Voluntary Registrant:	DEMETRIUS MINOR	Date Applicant/Registrant Signed:	04/09/2021	
Firearm Dealer/Transferor:	ANDREW RAYMOND	Date Submitted to MDSP for Review:	04/09/2021	

Nics Number: 10220CFD4 Nics Date: 6/4/2021

Section 1 TRANSFEREE (PURCHA	ASER) VOLUNTARY REGISTRATIO	N INFORMATION	Designated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gov	ernment Issued ID #: <u>M560</u>	139013937
Government Issued ID State of Iss	ue: Maryland	Social Security Number:	
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :		Nick Name (if applicable):	
Street Address: 12644 GREY EAG	LE CT	Is Baltimor	e City resident: NO
Town/City: GERMANTOWN	County: MONTGOMER	State: Maryland	Zipcode: 20874
DOB: 12/09/1991 Place of	of Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height : 5'11" Weight : 400	Race: BLACK	Sex:	M Eyes: Hair: BLACK BROWN
Home Phone :W	Vork Phone : (240)477-2250	Mobile Phone : (240)477-2	250 Occupation : UNEMPLOYED
Section 2a DEALER INFORMATION	ON		
Dealer 062715 License Number:	Dealer Name: Eng	gage Armament LLC	Phone: (301)838-3151
Street Address: 701 E. Gude Dr	Town/City	Rockville State:	Maryland Zipcode: 20850
-			
Sales Person Last Name: WEAVI Section 2b TRANSFEROR (SELLER) INFORMATION (**For Secondar		iddle Name: Suffix:
	,	•	
Government Issued ID #:	State:		Social Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB : Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:	05/29/2021		
Current Disposition Date:	06/04/2021	Current Dispo	osition: NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Received	d Final: 06/05/2021
Reviewer:	DERYCK WEAVER	Barrack/	Dealer: Engage Armament LLC

Section 4

FIREARM INFORMATION (Must be Completed by Transferor/Dealer)

437 Numbe	er: 000001000952336		Purchase Type:	New	
Make:	GLOCK	Model:	43	Model Number:	N/A
Caliber:	9 mm	Barrel Length:	3.41	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	AEXZ257	Country of Origin:	UNITED STATES
that is not li	Handgun Roster: A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?				
or before De external safe	Safety Lock: A dealer may not secember 31, 2002, unless the handgut told. If the handgun was manufated, or transferred with an external seconds.	un is sold, offere actured on or bef	d for sale, rented, or t	ransferred with an	NA
handgun ma transferred v	d Mechanical Safety Device: anufactured on or after January 1, 20 with and approved mechanical safety is it sold, offered for sale, rented, or the	003. unless the hay device. If the h	andgun is sold, offere andgun was manufac	d for sale, rented, or tured on or after January	YES

437 Number: 000001000952332		Purchase Type:	New	
Make: GLOCK	Model:	26	Model Number:	26
Caliber: 9 mm	Barrel Length:	3.47		SEMI-AUTOMATIC HANDGUN
Finish: OTHER	Serial # :	BTEX642	_ Country of Origin:	AUSTRIA
Handgun Roster : A person may rethat is not listed on the handgun roster the handgun Roster?				YES
External Safety Lock: A dealer or before December 31, 2002, unless t external safety lock. If the handgun wa for sale, rented, or transferred with an	NA			
Integrated Mechanical Safety handgun manufactured on or after Janu				YES
transferred with and approved mechan 1, 2003, was it sold, offered for sale, re	ical safety device. If the h	andgun was manufac	ctured on or after January	
		**	·	
437 Number: 000001000952335		Purchase Type:	New	
437 Number: 000001000952335 Make: GLOCK	Model:	,	New Model Number:	27
	Model: Barrel Length:	27		27 SEMI-AUTOMATIC HANDGUN
Make: GLOCK	Barrel Length:	27	Model Number:	SEMI-AUTOMATIC
Make: GLOCK Caliber: 40 S&W Finish: OTHER Handgun Roster: A person may r	Barrel Length: Serial # :	27 3.43 BTFD468 nandgun manufacuree	Model Number: Type: Country of Origin: d after January 1, 1985,	SEMI-AUTOMATIC HANDGUN
Make: GLOCK Caliber: 40 S&W Finish: OTHER	Barrel Length: Serial # :	27 3.43 BTFD468 nandgun manufacuree	Model Number: Type: Country of Origin: d after January 1, 1985,	SEMI-AUTOMATIC HANDGUN AUSTRIA
Make: GLOCK Caliber: 40 S&W Finish: OTHER Handgun Roster: A person may rethat is not listed on the handgun roster the handgun Roster? External Safety Lock: A dealer:	Barrel Length: Serial #: not sell or offer for sale a l . If the handgun was manumay not sell, offer for sale	27 3.43 BTFD468 nandgun manufacured after Januarie, rent, or transfer a h	Model Number: Type: Country of Origin: d after January 1, 1985, ry 1, 1985. Is it listed on	SEMI-AUTOMATIC HANDGUN AUSTRIA
Make: GLOCK Caliber: 40 S&W Finish: OTHER Handgun Roster: A person may rethat is not listed on the handgun roster the handgun Roster?	Barrel Length: Serial #: not sell or offer for sale a length: If the handgun was manumay not sell, offer for sale he handgun is sold, offere as manufactured on or bef	27 3.43 BTFD468 nandgun manufacured after Januar e, rent, or transfer a h d for sale, rented, or	Model Number: Type: Country of Origin: d after January 1, 1985, ry 1, 1985. Is it listed on andgun manufacured on transferred with an	SEMI-AUTOMATIC HANDGUN AUSTRIA YES
Make: GLOCK Caliber: 40 S&W Finish: OTHER Handgun Roster: A person may rethat is not listed on the handgun roster the handgun Roster? External Safety Lock: A dealer or before December 31, 2002, unless the external safety lock. If the handgun was for sale, rented, or transferred with an Integrated Mechanical Safety	Barrel Length: Serial #: not sell or offer for sale a length: If the handgun was manufactured on or before external safety lock? Device: A dealer may not sell.	27 3.43 BTFD468 andgun manufacured after Januaritactured after Januaritactured after Januaritactured, or ore December 31, 20 ot sell, offer for sale,	Model Number: Type: Country of Origin: d after January 1, 1985, ry 1, 1985. Is it listed on andgun manufacured on transferred with an 102, was it sold, offered	SEMI-AUTOMATIC HANDGUN AUSTRIA YES
Make: GLOCK Caliber: 40 S&W Finish: OTHER Handgun Roster: A person may rethat is not listed on the handgun roster the handgun Roster? External Safety Lock: A dealer or before December 31, 2002, unless the external safety lock. If the handgun was for sale, rented, or transferred with an	Barrel Length: Serial #: not sell or offer for sale a length: If the handgun was manufactured on or before external safety lock? Device: A dealer may not be a length of the length	27 3.43 BTFD468 mandgun manufacured after Januaritactured after Januaritactured after Januaritactured, or ore December 31, 20 oot sell, offer for sale, andgun is sold, offere andgun was manufactured.	Model Number: Type: Country of Origin: d after January 1, 1985, ry 1, 1985. Is it listed on andgun manufacured on transferred with an 102, was it sold, offered rent, or transfer a ed for sale, rented, or ctured on or after January	SEMI-AUTOMATIC HANDGUN AUSTRIA YES NA
Make: GLOCK Caliber: 40 S&W Finish: OTHER Handgun Roster: A person may rethat is not listed on the handgun roster the handgun Roster? External Safety Lock: A dealer or before December 31, 2002, unless to external safety lock. If the handgun was for sale, rented, or transferred with an Integrated Mechanical Safety handgun manufactured on or after Janutransferred with and approved mechanical was safety and proved mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety	Barrel Length: Serial #: not sell or offer for sale a length: If the handgun was manufactured on or before external safety lock? Device: A dealer may not be a length of the length	27 3.43 BTFD468 mandgun manufacured after Januaritactured after Januaritactured after Januaritactured, or ore December 31, 20 oot sell, offer for sale, andgun is sold, offere andgun was manufactured.	Model Number: Type: Country of Origin: d after January 1, 1985, ry 1, 1985. Is it listed on andgun manufacured on transferred with an 102, was it sold, offered rent, or transfer a ed for sale, rented, or ctured on or after January	SEMI-AUTOMATIC HANDGUN AUSTRIA YES NA
Make: GLOCK Caliber: 40 S&W Finish: OTHER Handgun Roster: A person may rethat is not listed on the handgun roster the handgun Roster? External Safety Lock: A dealer or before December 31, 2002, unless texternal safety lock. If the handgun was for sale, rented, or transferred with an Integrated Mechanical Safety handgun manufactured on or after Janutransferred with and approved mechanical was safety and proved mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety handgun manufactured on or after Janutransferred with and approved mechanical safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manufactured on or after Janutransferred with and safety handgun manuf	Barrel Length: Serial #: not sell or offer for sale a length: If the handgun was manufactured on or before external safety lock? Device: A dealer may not be a length of the length	27 3.43 BTFD468 mandgun manufacured after Januaritactured after Januaritactured after Januaritactured, or ore December 31, 20 oot sell, offer for sale, andgun is sold, offere andgun was manufactured.	Model Number: Type: Country of Origin: d after January 1, 1985, ry 1, 1985. Is it listed on andgun manufacured on transferred with an 102, was it sold, offered rent, or transfer a ed for sale, rented, or ctured on or after January	SEMI-AUTOMATIC HANDGUN AUSTRIA YES NA

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.				
Section 5 Sign upon Application Completion	Section 6 Sign	upon Transfer of Firearm		
Transferee/Voluntary Registrant: DEMETRIUS MINOR	Transferee:	DEMETRIUS MINOR		
Transferor Dealer: DERYCK WEAVER	Transferor/Dealer:	DERYCK WEAVER		
	Transfer Date:	06/05/2021		
Effective October 1, 2013, a person may not purchase, rent, or rece License (HQL) issued by the Secretary of the Maryland Department				
Handgun Qualification License Number: HQL-2020	-040153			
Exceptions to possession of the Handgun Qualification	License:			
(Individuals deemed exempt must provide the proper documentation	on to a Regulated Fire	arms Dealer prior to purchasing a firearm)		
Licensed Firearm Manufacturer. Verfication:				
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state	Department:	Badge /ID#:		
Active member or retired member of the armed forces of the United	States or National Guard	l.		
Branch: ID#:	Duty Station:			
Person purchasing, renting, or receiving an antique, curio, or relic as Alcohol, Tobacco, Firearms and Explosives.	defined in federal law o	r in determination published by the Bureau of		
Inheritance, Voluntary Registration, Privately Made Firearm Registration	ration, and or Unfinished	Frame or Receiver		
Applicant is purchasing a Lower Receiver.				
You may not complete the application unless you possess	a valid Handgun Quali	fication License (HQL) or are exempt.		
Section 8				
1. Are you UNDER 21 years of age?		NO		
2. Are you participating in a straw purchase of a regulated fi	irearm?	NO		
3. Have you ever been convicted of a crime of violence?		NO		
4. Have you ever received probation before judgment (PBJ) for	or a crime of violence	e? NO		

5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?	NO
12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

Notice: 7-Day Waiting Period. A dealer or other person may not sell, rent, transfer, or purchase a regulated firearm until after 7 days following the time a firearm application is forwarded to the Maryland State Police. For a secondary sale or transfer, the application must be forwarded by a dealer or a designated law enforcement agency.

Information Release

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health—General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 05/28/2021

Signature of Transferee/Volu	ntary Registrant and Transferor	(Sign upon completing Part 1 o	f this Application)
	ury that the information contained is sult in the disapproval of this Appli	in this Application is true and accurate. I undecation and lead to my arrest.	erstand that any false
Applicant/Voluntary Registran	t: DEMETRIUS MINOR	Date Applicant/Registrant Signed:	05/28/2021
Firearm Dealer/Transferor:	DERYCK WEAVER	Date Submitted to MDSP for Review:	05/29/2021

Nics Number: 10223ZSWS Nics Date: 6/7/2021

Section 1 TRANSFEREE (PURCHA	SER) VOLUNTARY REGISTRATION	N INFORMATION De	signated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gov	ernment Issued ID #: M560139013	937
Government Issued ID State of Issued	ue: Maryland	Social Security Number:	_
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :		Nick Name (if applicable):	
Street Address: 12644 GREY EAGL	E CT	Is Baltimore City r	esident: NO
Town/City: GERMANTOWN	County: MONTGOMER	State: Maryland	Zipcode: 20874
DOB: 12/09/1991 Place o	f Birth (City & State): SILVER	SPRING, Maryland Co	untry: UNITED STATES
Height : 5'11" Weight : 400	Race: BLACK	Sex: <u>M</u>	Eyes: Hair: BLACK BROWN
Home Phone :W	/ork Phone : (240)477-2250	Mobile Phone : (240)477-2250	Occupation : UNEMPLOYED
Section 2a DEALER INFORMATION	DN		
Dealer 062715 License	Dealer Name: Eng	age Armament LLC	Phone: (301)838-3151
Number:			
Street Address: 701 E. Gude Dr	Town/City:	Rockville State: Maryla	zipcode: 20850
Sales Person Last Name: RABAN			ame: ELIZABETH Suffix:
Section 2b TRANSFEROR (SELLER)) INFORMATION (**For Secondary	/ Sale and Gifts Only**)	
Government Issued ID #:	State:	Social S	Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB : Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:	06/02/2021		
Current Disposition Date:	06/08/2021	Current Disposition:	NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Received Final:	06/09/2021
Reviewer:	RACHEL RABANALES	Barrack/Dealer:	Engage Armament LLC

FIREARM INFORMATION (Must be Completed by Transferor/Dealer)

437 Numb	er: 000001000952905		Purchase Type:	New	
Make:	TAURUS S.A. FORJAS (TAURUS INTERNATIONAL INC.)	Model:	G3	Model Number:	1-G3941
Caliber:	9 mm	Barrel Length:	4.00	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	ACA456782	Country of Origin:	BRAZIL
Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?					YES
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?			NA		
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?				YES	

437 Numb	er: 000001000952908		Purchase Type:	New	
Make:	PIONEER ARMS CORPORATION	Model:	HELLPUP	Model Number:	N/A
Caliber:	7.62X39mm	Barrel Length:	11.73	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	PAC1150019	Country of Origin:	POLAND
	Roster: A person may not sell o isted on the handgun roster. If the h n Roster?				YES
or before D external saf	Safety Lock: A dealer may not eccember 31, 2002, unless the handgerety lock. If the handgun was manufated, or transferred with an external	gun is sold, offere actured on or bef	d for sale, rented, or	transferred with an	NA
					YES
	TURES/CERTIFICATION OF TR under penalty of perjury that the info				III

Section 5 Sign upon Application Completion Transferee/Voluntary Registrant: DEMETRIUS MINOR Transferor Dealer: RACHEL RABANALES Transfer Dealer: RACHEL RABANALES Sign upon Transfer of Firearm Transferee: DEMETRIUS MINOR Transferor/Dealer: RYAN BURKETT Transfer Date: 06/09/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to	purchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge	/ID#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination publ Alcohol, Tobacco, Firearms and Explosives.	shed by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQ	L) or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	d NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO

NO

11. If you are under 30 years of age at the time of completing this application, have you ever been

adjudicated delinquent by a juvenile court for a crime of violence?

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by	NO
court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has bee issued and is in effect?	
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	r NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or 13-705 of the Estates and Trusts Article for any reason other than physical disability?	§ NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 3 days?	0 NA
	YES

Notice: 7-Day Waiting Period. A dealer or other person may not sell, rent, transfer, or purchase a regulated firearm until after 7 days following the time a firearm application is forwarded to the Maryland State Police. For a secondary sale or transfer, the application must be forwarded by a dealer or a designated law enforcement agency.

Information Release

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 06/01/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 06/01/2021

Firearm Dealer/Transferor: RACHEL RABANALES Date Submitted to MDSP for Review: 06/02/2021

Nics Number: 1020X4B6F Nics Date: 5/10/2021

Section 1 TRANSFEREE (PURCHA	SER) VOLUNTARY REGISTRATION	INFORMATION	Designated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gove	ernment Issued ID #: M56013	9013937
Government Issued ID State of Iss		Social Security Number:	
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :	- FIIST Name. DEMETRIOS	Nick Name (if applicable):	Sullix. NOINE
Street Address: 12644 GREY EAGL	F CT		Lity resident: NO
Town/City: GERMANTOWN	County: MONTGOMER		Zipcode: 20874
Town/City. GERMANTOWN	COUNTY	State. Waryland	Zipcode. <u>20074</u>
DOB: <u>12/09/1991</u> Place o	f Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height : <u>5'11"</u> Weight : <u>400</u>	Race: BLACK	Sex: <u>M</u>	Eyes: Hair: BLACK BROWN
Home Phone : W	/ork Phone: (240)477-2250	Mobile Phone: (240)477-225	
	<u> </u>		
Section 2a DEALER INFORMATION	ON		
Dealer 062715	Dealer Name: Eng	age Armament LLC	Phone: (301)838-3151
License Number:			
Street Address: 701 E. Gude Dr	Town/City: I	Rockville State: M	aryland Zipcode: 20850
Sales Person Last Name: ASTOR	IIMA First Na	me: LEONARDO Mido	dle Name: Suffix:
Section 2b TRANSFEROR (SELLER) INFORMATION (**For Secondary	Sale and Gifts Only**)	
Government Issued ID #:	State:	So	cial Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB: Race:	Sex:	Home Phone:	Work Phone:
	_		
Section 3			
	0.7 (0.1 (0.00))		
Date Form Forwarded:		,	NOT DISABBLE OF THE
Current Disposition Date:		Current Disposi	
Signature of Approving Offical:		Date Form Received F	
Reviewer:	LEONARDO ASTORIMA	Barrack/De	aler: Engage Armament LLC

FIREARM INFORMATION (Must be Completed by Transferor/Dealer)

437 Number: 000001000944619		Purchase Type:	New	
Make: GLOCK	Model:	26	Model Number:	26
Caliber: 9 mm	Barrel Length:	3.43	Туре:	SEMI-AUTOMATIC HANDGUN
Finish: OTHER	Serial # :	BSMB754	_ Country of Origin:	AUSTRIA
Handgun Roster: A person may rethat is not listed on the handgun roster the handgun Roster?	YES			
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?				NA
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?				YES

437 Number: 00000100094	462	Purchase Type:	New		
Make: GLOCK	Model:	43	Model Number:	N/A	
Caliber: 9 mm	Barrel Length:	3.41	Туре:	SEMI-AUTOMATIC HANDGUN	
Finish: OTHER	Serial # :	AFFN936	Country of Origin:	UNITED STATES	
	on may not sell or offer for sale a h un roster. If the handgun was manu			YES	
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?					
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?					
SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief. Section 5 Sign upon Application Completion Section 6 Sign upon Transfer of Firearm					

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

DEMETRIUS MINOR

LEONARDO ASTORIMA

Transferee/Voluntary Registrant:

Transferor Dealer:

Transferee: DEMETRIUS MINOR

Transferor/Dealer: RACHEL RABANALES

Transfer Date: 05/11/2021

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to pu	archasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /II	D#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination publish Alcohol, Tobacco, Firearms and Explosives.	ed by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL) or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
, , , ,	
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO

NO

11. If you are under 30 years of age at the time of completing this application, have you ever been

adjudicated delinquent by a juvenile court for a crime of violence?

NO
NO
UNITED STATES
NO
NA
YES

Notice: 7-Day Waiting Period. A dealer or other person may not sell, rent, transfer, or purchase a regulated firearm until after 7 days following the time a firearm application is forwarded to the Maryland State Police. For a secondary sale or transfer, the application must be forwarded by a dealer or a designated law enforcement agency.

Information Release

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 04/16/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 04/16/2021

Firearm Dealer/Transferor: LEONARDO ASTORIMA Date Submitted to MDSP for Review: 05/04/2021

Nics Number: 1022G0DFM Nics Date: 6/15/2021

Section 1 TRANSFEREE (PURCHA	SER) VOLUNTARY REGISTRATION	INFORMATION	Designated Collector Yes
Government Issued ID Type: DI	RIVER'S LICENSE Gove	ernment Issued ID #: M56013	9013937
Government Issued ID State of Issu		Social Security Number:	
Last Name: MINOR	First Name: DEMETRIUS	. — — Middle Name:	Suffix: NONE
Maiden Name (if applicable) :	- FIIST Name. DEMETRIOS	Nick Name (if applicable):	Sullix. NONE
Street Address: 12644 GREY EAGL	E CT	_	City resident: NO
Town/City: GERMANTOWN	County: MONTGOMER'		Zipcode: 20874
DOB: 12/09/1991 Place o	f Birth (City & State): SILVER S	SPRING, Maryland	Country: UNITED STATES
Height : <u>5'11"</u> Weight : <u>400</u>	Race: BLACK	Sex: M	Eyes: Hair: BLACK BROWN
Home Phone :W	ork Phone : (240)477-2250	Mobile Phone : (240)477-225	Occupation : UNEMPLOYED
Dealer 062715 License Number: Street Address: 701 E. Gude Dr Sales Person Last Name: ASTOR	Dealer Name: Enga	Rockville State: M	Phone: (301)838-3151 1aryland Zipcode: 20850 dle Name: Suffix:
Section 2b TRANSFEROR (SELLER)	INFORMATION (**For Secondary	Sale and Gifts Only**)	
Government Issued ID #:	State:	Sc	ocial Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB : Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:	06/11/2021		
Current Disposition Date:	06/17/2021	Current Disposi	ition: NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Received I	Final: 06/19/2021
Reviewer:	LEONARDO ASTORIMA	Barrack/De	ealer: Engage Armament LLC

Section 4

FIREARM INFORMATION (Must be Completed by Transferor/Dealer)

er: 000001000955690		Purchase Type:	New		
GLOCK	Model:	17	Model Number:	GEN 5	
9 mm	Barrel Length:	4.49	Туре:	SEMI-AUTOMATIC HANDGUN	
OTHER	Serial #:	BTNB564	Country of Origin:	AUSTRIA	
Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?					
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?					
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?					
	OTHER OTHER Roster: A person may not sell or isted on the handgun roster. If the han Roster? Safety Lock: A dealer may not secember 31, 2002, unless the handgety lock. If the handgun was manufated, or transferred with an external seed Mechanical Safety Device anufactured on or after January 1, 20 with and approved mechanical safet	GLOCK 9 mm Barrel Length: OTHER Serial #: Roster: A person may not sell or offer for sale a histed on the handgun roster. If the handgun was manufan Roster? Safety Lock: A dealer may not sell, offer for sale eccember 31, 2002, unless the handgun is sold, offere fety lock. If the handgun was manufactured on or before, or transferred with an external safety lock? ed Mechanical Safety Device: A dealer may nanufactured on or after January 1, 2003. unless the hawith and approved mechanical safety device. If the history is a safety device.	GLOCK Model: 17 Barrel Length: 4.49 OTHER Serial #: BTNB564 Roster: A person may not sell or offer for sale a handgun manufacured isted on the handgun roster. If the handgun was manufactured after Januar n Roster? Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a had becember 31, 2002, unless the handgun is sold, offered for sale, rented, or fety lock. If the handgun was manufactured on or before December 31, 200 and the december 31, 200 a	Barrel Length: 4.49 Type: OTHER Serial #: BTNB564 Country of Origin: Roster: A person may not sell or offer for sale a handgun manufacured after January 1, 1985, isted on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on n Roster? Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on eccember 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an fety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered nted, or transferred with an external safety lock? Ped Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a anufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or with and approved mechanical safety device. If the handgun was manufactured on or after January	

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 5 Sign upon Application Completion

Transferee/Voluntary Registrant: DEMETRIUS MINOR

Transferor Dealer: LEONARDO ASTORIMA

Section 6 Sign upon Transfer of Firearm

Transferee: DEMETRIUS MINOR

Transferor/Dealer: RACHEL RABANALES

Transfer Date: 06/19/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior	to purchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Back	lge /ID#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination p Alcohol, Tobacco, Firearms and Explosives.	ublished by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL) or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
, , ,	
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Marylaw, carries a maximum penalty of more than 2 years?	rland NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which y received a sentence of more than 2 years?	vou NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryla that carries a maximum penalty of more than 2 years if committed by an adult?	

11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

х

I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 06/04/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 06/04/2021

Firearm Dealer/Transferor: LEONARDO ASTORIMA Date Submitted to MDSP for Review: 06/11/2021

Nics Number: 1023YY450 Nics Date: 7/22/2021

Section 1 TRANSFEREE (PURCHA	ASER) VOLUNTARY REGISTRATION	N INFORMATION [Designated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gov	ernment Issued ID #: M5601390	13937
Government Issued ID State of Issued ID State ISSUED ID State ID		Social Security Number:	
Government issued in State of issu	ue. <u>Iviai ylailu</u>	Social Security (Variable).	
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :		Nick Name (if applicable):	
Street Address: 12644 GREY EAGL	.E CT	Is Baltimore City	resident: NO
Town/City: GERMANTOWN	County: MONTGOMER COUNTY	State: Maryland	Zipcode: <u>20874</u>
DOB: 12/09/1991 Place o	f Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height : 5'11" Weight : 400	Race: BLACK	Sex: M	Eyes: Hair: BLACK BROWN
Home Phone :W	/ork Phone : (240)477-2250	Mobile Phone : (240)477-2250	Occupation : UNEMPLOYED
Section 2a DEALER INFORMATIO	DN		
Dealer 062715 License Number:	Dealer Name: Eng	gage Armament LLC	Phone: (301)838-3151
Street Address: 701 E. Gude Dr	Town/City	Rockville State: Mary	/land Zipcode: 20850
Sales Person Last Name: RABAN Section 2b TRANSFEROR (SELLER)) INFORMATION (**For Secondary		Name: ELIZABETH Suffix:
Government Issued ID #:	State: -	Socia	Il Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB : Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:	07/17/2021		
Current Disposition Date:	07/23/2021	Current Dispositio	n: NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Received Fina	al: 07/24/2021
Reviewer:	RACHEL RABANALES	Barrack/Deale	er: Engage Armament LLC

437 Numb	er: 000001000873473		Purchase Type:	Used	
Make:	TAURUS S.A. FORJAS (TAURUS INTERNATIONAL INC.)	Model:	G3	Model Number:	N/A
Caliber:	9 mm	Barrel Length:	4.00	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	ABK980872	Country of Origin:	BRAZIL
that is not l	Handgun Roster: A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?				YES
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?				NA	
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?					YES

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 5 Sign upon Application Completion Section 6 Sign upon Transfer of Firearm

Transferee/Voluntary Registrant: DEMETRIUS MINOR Transferee: DEMETRIUS MINOR

Transferor Dealer: RACHEL RABANALES Transferor/Dealer: RACHEL RABANALES

Transfer Date: 07/24/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to put	rchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /ID	#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination published Alcohol, Tobacco, Firearms and Explosives. Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver	ed by the Bureau of
Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL)	or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?	NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health—General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 07/16/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 07/16/2021

Firearm Dealer/Transferor: RACHEL RABANALES Date Submitted to MDSP for Review: 07/17/2021

Nics Number: 10221M1F7 Nics Date: 6/5/2021

Section 1 TRANSFEREE (PURCHA	ASER) VOLUNTARY REGISTRATION	N INFORMATION	Designated Collector Yes			
Government Issued ID Type: DRIVER'S LICENSE Government Issued ID #: M560139013937						
Government Issued ID State of Issu	ue: Maryland	Social Security Number:				
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE			
Maiden Name (if applicable) :		Nick Name (if applicable):				
Street Address: 12644 GREY EAGL	.E CT	Is Baltimore	City resident: NO			
Town/City: GERMANTOWN	County: MONTGOMER COUNTY	State: Maryland	Zipcode: 20874			
DOB: 12/09/1991 Place o	f Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES			
Height : 5'11" Weight : 400	Race: BLACK	Sex: <u>M</u>	1 Eyes: Hair: BLACK BROWN			
Home Phone : W	/ork Phone : (240)477-2250	Mobile Phone : (240)477-22!	Occupation : UNEMPLOYED			
Section 2a DEALER INFORMATION	DN					
Dealer 062715 License Number:	Dealer Name: Eng	gage Armament LLC	Phone: (301)838-3151			
Street Address: 701 E. Gude Dr	Town/Citv:	Rockville State: N	Maryland Zipcode: 20850			
Sales Person Last Name: RABAN			dle Name: ELIZABETH Suffix:			
) INFORMATION (**For Secondary					
Government Issued ID #:	State:	So	ocial Security #:			
Last Name:	First Name:	Middle Name:	Suffix:			
Street Address:	Town/City:	State:	Zipcode:			
DOB: Race:	Sex:	Home Phone:	Work Phone:			
Section 3						
Date Form Forwarded:	06/01/2021					
Current Disposition Date:	06/07/2021	Current Dispos	ition: NOT DISAPPROVED			
Signature of Approving Offical:	Maryland State Police	Date Form Received	Final: 06/09/2021			
Reviewer:	RACHEL RABANALES	Barrack/De	ealer: Engage Armament LLC			

437 Numb	er: 000001000952636		Purchase Type:	New	
Make:	TAURUS S.A. FORJAS (TAURUS INTERNATIONAL INC.)	Model:	G3 C	Model Number:	1-G3C931
Caliber:	9 mm	Barrel Length:	3.20	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	ACB520645	Country of Origin:	BRAZIL
	Roster: A person may not sell or isted on the handgun roster. If the handgun Roster?				YES
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?				NA	
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?				YES	

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 5 Sign upon Application Completion Section 6 Sign upon Transfer of Firearm

Transferee/Voluntary Registrant: DEMETRIUS MINOR Transferee: DEMETRIUS MINOR

Transferor Dealer: RACHEL RABANALES Transferor/Dealer: RYAN BURKETT

Transfer Date: 06/09/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to put	rchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /ID	#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination published Alcohol, Tobacco, Firearms and Explosives. Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver	ed by the Bureau of
Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL)	or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?	NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health—General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 05/31/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 05/31/2021

Firearm Dealer/Transferor: RACHEL RABANALES Date Submitted to MDSP for Review: 06/01/2021

Nics Number: 1023N50NS Nics Date: 7/15/2021

Section 1 TRANSFEREE (PURCHA	ASER) VOLUNTARY REGISTRATION	N INFORMATION	Designated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gov	ernment Issued ID #: M560	0139013937
Government Issued ID State of Issued	ue: Maryland	Social Security Number:	
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :		Nick Name (if applicable):	
Street Address: 12644 GREY EAGL	LE CT	Is Baltimo	re City resident: NO
Town/City: GERMANTOWN	County: MONTGOMER	State: Maryland	Zipcode: 20874
DOB: 12/09/1991 Place o	f Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height : <u>5'11"</u> Weight : <u>400</u>	Race: BLACK	Sex:	M Eyes: Hair: BLACK BROWN
Home Phone :W	/ork Phone : (240)477-2250	Mobile Phone : (240)477-2	2250 Occupation : UNEMPLOYED
Section 2a DEALER INFORMATION	ON		
Dealer 062715 License	Dealer Name: Eng	gage Armament LLC	Phone: (301)838-3151
Number:			
Street Address: 701 E. Gude Dr	Town/City:	Rockville State:	Maryland Zipcode: 20850
Sales Person Last Name: RABAN			liddle Name: ELIZABETH Suffix:
Section 2b TRANSFEROR (SELLER)) INFORMATION (**For Secondar	y Sale and Gifts Only**)	
Government Issued ID #:	State:		Social Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB: Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:	07/09/2021		
Current Disposition Date:	07/15/2021	Current Disp	osition: NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Receive	d Final: 07/16/2021
Reviewer:	RACHEL RABANALES	Barrack/	/Dealer: Engage Armament LLC

437 Numb	er: 000001000963247		Purchase Type:	New	
Make:	SPRINGFIELD ARMORY/INC.	Model:	XD SUB-COMPACT	Model Number:	N/A
Caliber:	9 mm	Barrel Length:	3.00	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	BY499104	Country of Origin:	CROATIA
Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?					YES
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?				NA	
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?					YES

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 5 Sign upon Application Completion

Transferee/Voluntary Registrant: DEMETRIUS MINOR

Transferor Dealer: RACHEL RABANALES

Section 6 Sign upon Transfer of Firearm

Transferee: DEMETRIUS MINOR

Transferor/Dealer: RACHEL RABANALES

Transfer Date: 07/16/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to put	rchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /ID	#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination published Alcohol, Tobacco, Firearms and Explosives. Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver	ed by the Bureau of
Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL)	or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?	NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by	NO
court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has bee issued and is in effect?	
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	r NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or 13-705 of the Estates and Trusts Article for any reason other than physical disability?	§ NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 3 days?	0 NA
	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 06/23/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 06/23/2021

Firearm Dealer/Transferor: RACHEL RABANALES Date Submitted to MDSP for Review: 07/09/2021

Nics Number: 10243GLRL Nics Date: 7/27/2021

Section 1 TRANSFEREE (PURCHAS	SER) VOLUNTARY REGISTRATIO	N INFORMATION	Designated Collector Yes
Government Issued ID Type: DR	IVER'S LICENSE Gov	ernment Issued ID #: M5601	39013937
,			
Government Issued ID State of Issu	e: Maryland	Social Security Number:	
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :		Nick Name (if applicable):	
Street Address: 12644 GREY EAGLE	СТ	Is Baltimore	City resident: NO
Town/City: GERMANTOWN	County: MONTGOMER COUNTY	State: Maryland	Zipcode: 20874
DOB: 12/09/1991 Place of	Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height: <u>5'11"</u> Weight: <u>400</u>	Race: BLACK	Sex:	Eyes: Hair: BLACK BROWN
Home Phone : Wo	ork Phone : (240)477-2250	Mobile Phone : (240)477-22	Occupation : UNEMPLOYED
Section 2a DEALER INFORMATION	N		
Dealer 062715 License	Dealer Name: Eng	gage Armament LLC	Phone: (301)838-3151
Number:			
Street Address: 701 E. Gude Dr	Town/City:	Rockville State: I	Maryland Zipcode: 20850
Sales Person Last Name: WEAVE	R First Na	nme: DERYCK Mid	ddle Name: Suffix:
Section 2b TRANSFEROR (SELLER)	INFORMATION (**For Secondary	y Sale and Gifts Only**)	
Government Issued ID #:	State:	S	ocial Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB: Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:	07/21/2021		
Current Disposition Date:	07/27/2021	Current Dispo	sition: NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Received	Final: <u>07/28/2021</u>
Reviewer:	DERYCK WEAVER	Barrack/D	Pealer: Engage Armament LLC

FIREARM INFORMATION (Must be Completed by Transferor/Dealer)

437 Number:	000001000966204		Purchase Type:	New	
Make: GL	OCK	Model:	20SF	Model Number:	N/A
Caliber: 10	mm	Barrel Length:	4.60	Туре:	SEMI-AUTOMATIC HANDGUN
Finish: OT	HER	Serial #:	BSRA376	_ Country of Origin:	AUSTRIA
Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?					YES
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?				NA	
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?			YES		

437 Numb	er: 000001000966205		Purchase Type:	New	
Make:	STURM RUGER	Model:	RUGER-57	Model Number:	16402
Caliber:	5.7X28 mm	Barrel Length:	4.94		SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	64171586	Country of Origin:	UNITED STATES
Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?				YES	
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?				NA	
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?					YES
	SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.				

Section 5 Sign upon Application Completion

Transferee/Voluntary Registrant: DEMETRIUS MINOR

Transferor Dealer: DERYCK WEAVER

Section 6 Sign upon Transfer of Firearm

Transferee: DEMETRIUS MINOR

Transferor/Dealer: RACHEL RABANALES

Transfer Date: 07/28/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to	purchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge	/ID#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination publ Alcohol, Tobacco, Firearms and Explosives.	shed by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQ	L) or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	d NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO

11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 07/20/2021

Signature of Transferee/Voluntary Registrant and T	(Sign upon completing Part 1 of this A	(pplication)
I certify under penalty of perjury that the information or omitted information can result in the disapproval of	contained in this Application is true and accurate. I understand f this Application and lead to my arrest.	that any false
Applicant/Voluntary Registrant: DEMETRIUS MINC	DR Date Applicant/Registrant Signed: 07,	/20/2021

Nics Number: 102KFZ32C Nics Date: 7/29/2022

Section 1 TRANSFEREE (PURCHA	SER) VOLUNTARY REGISTRATI	ON INFORMATION	Designated Collector Yes
Government Issued ID Type: Di	RIVER'S LICENSE G	overnment Issued ID #: M5601390	013937
Government Issued ID State of Issu	ue: Maryland	Social Security Number:	
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :		Nick Name (if applicable):	
Street Address: 12644 GREY EAGL	E CT	Is Baltimore Cit	y resident: NO
Town/City: GERMANTOWN	County: MONTGOM	ERY State: Maryland	Zipcode: 20874
DOB: 12/09/1991 Place o	f Birth (City & State): SILVE	ER SPRING, Maryland	Country: UNITED STATES
Height : 5'11" Weight : 400	Race: BLACK	Sex: M	Eyes: Hair: BLACK BROWN
Home Phone : W	York Phone : (240)813-5266	Mobile Phone : (240)477-2250	Occupation : UNEMPLOYED
Dealer 062715 License Number: Street Address: 701 E. Gude Dr	Dealer Name: _E Town/City:	ngage Armament LLC Rockville State: Mar	<u> </u>
Sales Person Last Name: FANG			e Name: Suffix:
Section 2b TRANSFEROR (SELLER)	INFORMATION (**For Second	ary Sale and Gifts Only**)	
Government Issued ID #:	State:	Soci	al Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB : Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:	07/23/2022	_	
Current Disposition Date:	09/24/2022	Current Dispositio	on: CANCELED
Signature of Approving Offical:		Date Form Received Fin	al:
Reviewer:	ANDREW FANG	Barrack/Deal	er: Engage Armament LLC

437 Number: Not Entered		Purchase Type:	Used	_
Make: TAURUS	Model:	PT-111 MILLENNIUM-G2	Model Number:	N/A
Caliber: 9 mm	Barrel Length:	3.00	Туре:	SEMI-AUTOMATIC HANDGUN
Finish: OTHER	Serial #:	TJX31400	_ Country of Origin:	BRAZIL
Handgun Roster : A person may not sell or that is not listed on the handgun roster. If the hat the handgun Roster?	YES			
External Safety Lock: A dealer may not so before December 31, 2002, unless the handgr				YES
external safety lock. If the handgun was manufa for sale, rented, or transferred with an external s	actured on or bef			
Integrated Mechanical Safety Devices				N/A
handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?				
SIGNATURES/CERTIFICATION OF TR				
I certify under penalty of perjury that the infor	mation contained	I in this form is true ai	nd accurate to the best of n	ny knowledge and belief.
Section 5 Sign upon Application Cor	mpletion	Section 6 S	ign upon Transfer of	Firearm
Transferee/Voluntary Registrant: DEMETRIL	JS MINOR	Transfei	ree:	
Transferor Dealer: ANDREW FANG		Transferor/Dea	ıler:	
		Transfer Da	ate:	
Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.				

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to pu	archasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge / II	D#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination publish Alcohol, Tobacco, Firearms and Explosives. Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	ned by the Bureau of
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL) or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?	NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health—General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 06/03/2022

Signature of Transferee/Voluntary Registrant and Transferor (Sign upon completing Part 1 of this Application) I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest. Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 06/03/2022 Firearm Dealer/Transferor: ANDREW FANG Date Submitted to MDSP for Review: 07/23/2022

Nics Number: 102469WMZ Nics Date: 7/29/2021

Section 1 TRANSFEREE (PURCHA	SER) VOLUNTARY REGISTRATION	INFORMATION	Designated Collector Yes	
Government Issued ID Type: D	RIVER'S LICENSE GOVE	ernment Issued ID #: M56013	89013937	
· —	_			
Government Issued ID State of Issu	ue: Maryland	Social Security Number:		
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE	
Maiden Name (if applicable) :		Nick Name (if applicable):		
Street Address: 12644 GREY EAGLE CT Is Baltimore City resident: NO				
Town/City: GERMANTOWN	County: MONTGOMER COUNTY	Y State: Maryland	Zipcode: 20874	
DOB: <u>12/09/1991</u> Place o	f Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES	
Height : 5'11" Weight : 400	Race: BLACK	Sex: <u>M</u>	Eyes: Hair: BLACK BROWN	
Home Phone : W	/ork Phone : (240)477-2250	Mobile Phone : (240)477-225	Occupation : <u>UNEMPLOYED</u>	
Dealer 062715 License Number: Street Address: 701 E. Gude Dr Sales Person Last Name: RABAN	Dealer Name: <u>Eng</u> Town/City: <u> </u> JALES First Na	me: RACHEL Mid	Phone: (301)838-3151 Maryland Zipcode: 20850 dle Name: ELIZABETH Suffix:	
Section 2b TRANSFEROR (SELLER)) INFORMATION (**For Secondary	Sale and Gifts Only**)		
Government Issued ID #:	State:	So	ocial Security #:	
Last Name:	First Name:	Middle Name:	Suffix:	
Street Address:	Town/City:	State:	Zipcode:	
DOB : Race:	Sex:	Home Phone:	Work Phone:	
Section 3				
Date Form Forwarded:	07/24/2021			
Current Disposition Date:	07/30/2021	Current Dispos	ition: NOT DISAPPROVED	
Signature of Approving Offical:	Maryland State Police	Date Form Received	Final: 07/31/2021	
Reviewer:	RACHEL RABANALES	Barrack/De	ealer: Engage Armament LLC	

437 Number: 000001000942392		Purchase Type:	Used	
Make: GLOCK	Model:	17 GEN 5	Model Number:	17 GEN 5 MOS
Caliber: 9 mm	Barrel Length:	4.49	Туре:	SEMI-AUTOMATIC HANDGUN
Finish: OTHER	Serial #:	BTBT052	Country of Origin:	AUSTRIA
Handgun Roster : A person may not sell of that is not listed on the handgun roster. If the handgun Roster?	YES			
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?				NA
Integrated Mechanical Safety Device handgun manufactured on or after January 1, 2 transferred with and approved mechanical safe 1, 2003, was it sold, offered for sale, rented, or	YES			

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 5 Sign upon Application Completion

Transferee/Voluntary Registrant: DEMETRIUS MINOR

Transferor Dealer: RACHEL RABANALES

Section 6 Sign upon Transfer of Firearm

Transferee: DEMETRIUS MINOR

Transferor/Dealer: LEONARDO ASTORIMA

Transfer Date: 07/31/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7			
Handgun Qualification License Number: HQL-2020-040153			
Exceptions to possession of the Handgun Qualification License:			
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to put	rchasing a firearm)		
Licensed Firearm Manufacturer. Verfication:			
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /IE	#: 		
Active member or retired member of the armed forces of the United States or National Guard.			
Branch: ID#: Duty Station:			
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination published Alcohol, Tobacco, Firearms and Explosives.	ed by the Bureau of		
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration			
Applicant is purchasing a Lower Receiver.			
You may not complete the application unless you possess a valid Handgun Qualification License (HQL)	or are exempt.		
Section 8			
1. Are you UNDER 21 years of age?	NO		
2. Are you participating in a straw purchase of a regulated firearm?	NO		
3. Have you ever been convicted of a crime of violence?	NO		
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO		
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO		
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO		
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO		
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO		
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO		
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO		
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?			

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health—General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

х

I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 07/22/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 07/22/2021

Firearm Dealer/Transferor: RACHEL RABANALES Date Submitted to MDSP for Review: 07/24/2021

Nics Number: 1024DYL8C Nics Date: 8/4/2021

Section 1 TRANSFEREE (PURCHA	SER) VOLUNTARY REGISTRATION	INFORMATION	Designated Collector Yes		
Government Issued ID Type: D	RIVER'S LICENSE Gove	rnment Issued ID #: M5601390	013937		
Government Issued ID State of Issued	ue: Maryland	Social Security Number:			
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE		
Maiden Name (if applicable) :		Nick Name (if applicable):			
Street Address: 12644 GREY EAGLE CT Is Baltimore City resident: NO					
Town/City: GERMANTOWN	County: MONTGOMER COUNTY	State: Maryland	Zipcode: 20874		
DOB: 12/09/1991 Place o	f Birth (City & State): SILVER S	SPRING, Maryland	Country: UNITED STATES		
Height : 5'11" Weight : 400	Race: BLACK	Sex: <u>M</u>	Eyes: Hair: BLACK BROWN		
Home Phone :W	/ork Phone : (240)477-2250	Mobile Phone : (240)477-2250	Occupation : UNEMPLOYED		
Dealer 062715 Dealer Name: Engage Armament LLC Phone: (301)838-3151 License Number: Street Address: 701 E. Gude Dr Town/City: Rockville State: Maryland Zipcode: 20850 Sales Person Last Name: ASTORIMA First Name: LEONARDO Middle Name: Suffix:					
Section 2b TRANSFEROR (SELLER)) INFORMATION (**For Secondary	Sale and Girls Only ")			
Government Issued ID #:	State:		al Security #:		
Last Name:	First Name:	Middle Name:	Suffix:		
Street Address:	Town/City:	State:	Zipcode:		
DOB : Race:	Sex:	Home Phone:	Work Phone:		
Section 3					
Date Form Forwarded:	07/30/2021				
Current Disposition Date:	08/05/2021	Current Disposition	on: NOT DISAPPROVED		
Signature of Approving Offical:	Maryland State Police	Date Form Received Fir	nal: 08/06/2021		
Reviewer:	LEONARDO ASTORIMA	Barrack/Deal	er: Engage Armament LLC		

FIREARM INFORMATION (Must be Completed by Transferor/Dealer)

437 Numb	er: 000001000968995		Purchase Type:	New	
Make:	STURM RUGER	Model:	RUGER-57	Model Number:	16402
Caliber:	5.7X28 mm	Barrel Length:	4.94	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	64175252	_ Country of Origin:	UNITED STATES
Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?					YES
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?				NA	
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?					YES

437 Numb	er: 000001000968992		Purchase Type:	New	
Make:	GLOCK	Model:	31	Model Number:	N/A
Caliber:	357 Sig	Barrel Length:	4.49	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	BNWB953	Country of Origin:	AUSTRIA
Handgun Roster: A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?					YES
External or before D external sat for sale, rer	NA				
handgun m	ed Mechanical Safety Device anufactured on or after January 1, 2	2003. unless the ha	andgun is sold, offere	d for sale, rented, or	YES
	with and approved mechanical safe as it sold, offered for sale, rented, or				
437 Numb	er: 000001000968993		Purchase Type:	New	
	er: 000001000968993 GLOCK	Model:	Purchase Type: 29 GEN 4	New Model Number:	N/A
	GLOCK	Model: Barrel Length:	29 GEN 4		N/A SEMI-AUTOMATIC HANDGUN
Make:	GLOCK 10 mm		29 GEN 4 3.78	Model Number:	SEMI-AUTOMATIC
Make: Caliber: Finish: Handgur	GLOCK 10 mm OTHER Roster: A person may not sell o	Barrel Length: Serial # : or offer for sale a h	29 GEN 4 3.78 BSRR171 nandgun manufacured	Model Number: Type: Country of Origin: I after January 1, 1985,	SEMI-AUTOMATIC HANDGUN
Make: Caliber: Finish: Handgur	GLOCK 10 mm OTHER Roster: A person may not sell o isted on the handgun roster. If the h	Barrel Length: Serial # : or offer for sale a h	29 GEN 4 3.78 BSRR171 nandgun manufacured	Model Number: Type: Country of Origin: I after January 1, 1985,	SEMI-AUTOMATIC HANDGUN AUSTRIA
Make: Caliber: Finish: Handgur that is not 1 the handgu External	OTHER Roster: A person may not sell o isted on the handgun roster. If the h n Roster? Safety Lock: A dealer may not	Barrel Length: Serial #: or offer for sale a handgun was manusell, offer for sale	29 GEN 4 3.78 BSRR171 nandgun manufacured after Januar e, rent, or transfer a ha	Model Number: Type: Country of Origin: d after January 1, 1985, ry 1, 1985. Is it listed on	SEMI-AUTOMATIC HANDGUN AUSTRIA
Make: Caliber: Finish: Handgur that is not 1 the handgu External or before D external safe	GLOCK 10 mm OTHER Roster: A person may not sell o isted on the handgun roster. If the hin Roster?	Barrel Length: Serial #: or offer for sale a handgun was mand sell, offer for sale gun is sold, offere factured on or bef	29 GEN 4 3.78 BSRR171 mandgun manufacured after Januar e, rent, or transfer a had for sale, rented, or t	Model Number: Type: Country of Origin: d after January 1, 1985, by 1, 1985. Is it listed on andgun manufacured on transferred with an	SEMI-AUTOMATIC HANDGUN AUSTRIA YES
Make: Caliber: Finish: Handgur that is not 1 the handgu External or before D external saf for sale, rer	OTHER OTHER Roster: A person may not sell or isted on the handgun roster. If the hands not seember 31, 2002, unless the hands fety lock. If the handgun was manufated, or transferred with an external ed Mechanical Safety Devices	Barrel Length: Serial #: or offer for sale a handgun was manused sell, offer for sale gun is sold, offere factured on or befasafety lock?	29 GEN 4 3.78 BSRR171 andgun manufacured after Januar e, rent, or transfer a had for sale, rented, or to to becember 31, 200 ot sell, offer for sale,	Model Number: Type: Country of Origin: I after January 1, 1985, ry 1, 1985. Is it listed on andgun manufacured on transferred with an 02, was it sold, offered rent, or transfer a	SEMI-AUTOMATIC HANDGUN AUSTRIA YES
Make: Caliber: Finish: Handgur that is not l the handgu External or before D external saf for sale, rer Integrate handgun m transferred	OTHER OTHER Roster: A person may not sell or isted on the handgun roster. If the hands not sell or isted on the handgun roster. If the hands not secember 31, 2002, unless the hands fety lock. If the handgun was manufated, or transferred with an external	Barrel Length: Serial #: or offer for sale a handgun was manused sell, offer for sale gun is sold, offere factured on or befactured on or befactured on or befactured safety lock? A dealer may now the sale sty device. If the hands	29 GEN 4 3.78 BSRR171 andgun manufacured after Januar e, rent, or transfer a had for sale, rented, or tore December 31, 200 ot sell, offer for sale, andgun is sold, offere andgun was manufac	Model Number: Type: Country of Origin: d after January 1, 1985, y 1, 1985. Is it listed on andgun manufacured on transferred with an 02, was it sold, offered rent, or transfer a d for sale, rented, or stured on or after January	SEMI-AUTOMATIC HANDGUN AUSTRIA YES NA
Make: Caliber: Finish: Handgur that is not l the handgu External or before D external saf for sale, rer Integrate handgun m transferred	OTHER Roster: A person may not sell or isted on the handgun roster. If the hands hands hands hands had becember 31, 2002, unless the hands fety lock. If the handgun was manufacted, or transferred with an external hands had been made and fety lock. If the handgun was manufacted, or transferred with an external hands had been made and fety lock. If the handgun was manufacted, or transferred with an external hands had been made and fety lock. If the handgun was manufacted, or transferred with an external hands had been made and had been	Barrel Length: Serial #: or offer for sale a handgun was manused sell, offer for sale gun is sold, offere factured on or befactured on or befactured on or befactured safety lock? A dealer may now the sale sty device. If the hands	29 GEN 4 3.78 BSRR171 andgun manufacured after Januar e, rent, or transfer a had for sale, rented, or tore December 31, 200 ot sell, offer for sale, andgun is sold, offere andgun was manufac	Model Number: Type: Country of Origin: d after January 1, 1985, y 1, 1985. Is it listed on andgun manufacured on transferred with an 02, was it sold, offered rent, or transfer a d for sale, rented, or stured on or after January	SEMI-AUTOMATIC HANDGUN AUSTRIA YES NA
Make: Caliber: Finish: Handgur that is not l the handgu External or before D external saf for sale, rer Integrate handgun m transferred	OTHER Roster: A person may not sell or isted on the handgun roster. If the hands hands hands hands had becember 31, 2002, unless the hands fety lock. If the handgun was manufacted, or transferred with an external hands had been made and fety lock. If the handgun was manufacted, or transferred with an external hands had been made and fety lock. If the handgun was manufacted, or transferred with an external hands had been made and fety lock. If the handgun was manufacted, or transferred with an external hands had been made and had been	Barrel Length: Serial #: or offer for sale a handgun was manused sell, offer for sale gun is sold, offere factured on or befactured on or befactured on or befactured safety lock? A dealer may now the sale sty device. If the hands	29 GEN 4 3.78 BSRR171 andgun manufacured after Januar e, rent, or transfer a had for sale, rented, or tore December 31, 200 ot sell, offer for sale, andgun is sold, offere andgun was manufac	Model Number: Type: Country of Origin: d after January 1, 1985, y 1, 1985. Is it listed on andgun manufacured on transferred with an 02, was it sold, offered rent, or transfer a d for sale, rented, or stured on or after January	SEMI-AUTOMATIC HANDGUN AUSTRIA YES NA

437 Numb	er: 000001000911757		Purchase Type:	Used		
Make:	SPRINGFIELD ARMORY/INC. (HS PRODUKT)	Model:	HELLCAT	Model Number:	HC9319BLC	
Caliber:	9 mm	Barrel Length:	3.00	Туре:	SEMI-AUTOMATIC HANDGUN	
Finish:	OTHER	Serial #:	BY589829	_ Country of Origin:	CROATIA	
	Roster : A person may not sell or isted on the handgun roster. If the hand n Roster?				YES	
or before D external sat	External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?					
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?						
~-~	SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.					

Section 5	Sign upon Application Completion	Section 6 Sign	upon Transfer of Firearm
Transferee/Vol	untary Registrant: DEMETRIUS MINOR	Transferee:	DEMETRIUS MINOR
Transferor Dea	ler: LEONARDO ASTORIMA	Transferor/Dealer:	LEONARDO ASTORIMA
		Transfer Date:	08/06/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to pur	chasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /ID	#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination published Alcohol, Tobacco, Firearms and Explosives.	ed by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL)	or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO

NO

11. If you are under 30 years of age at the time of completing this application, have you ever been

adjudicated delinquent by a juvenile court for a crime of violence?

NO
NO
UNITED STATES
NO
NA
YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

х

I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 07/29/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 07/29/2021

Firearm Dealer/Transferor: LEONARDO ASTORIMA Date Submitted to MDSP for Review: 07/30/2021

Application Type: DEALER SALE Application #: 2021088538

Nics Number: 10254WHV7 Nics Date: 8/24/2021

Section 1 TRANSFEREE (PURCHA	ASER) VOLUNTARY REGISTRATION	N INFORMATION	Designated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gov	ernment Issued ID #: M560	0139013937
Government Issued ID State of Issued	ue: Maryland	Social Security Number:	
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :		Nick Name (if applicable):	
Street Address: 12644 GREY EAGL	.E CT	Is Baltimor	re City resident: NO
Town/City: GERMANTOWN	County: MONTGOMER	State: Maryland	Zipcode: 20874
DOB: 12/09/1991 Place o	f Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height : 5'11" Weight : 400	Race: BLACK	Sex:	M Eyes: BROWN Hair: BLACK
Home Phone : W	/ork Phone : (240)477-2250	Mobile Phone : (240)477-2	Occupation : UNEMPLOYED
Section 2a DEALER INFORMATION	ON		
Dealer 062715 License	Dealer Name:	gage Armament LLC	Phone: (301)838-3151
Number:			
Street Address: 701 E. Gude Dr	Town/City:	Rockville State:	Maryland Zipcode: 20850
Sales Person Last Name: RABAN			liddle Name: ELIZABETH Suffix:
Section 2b TRANSFEROR (SELLER)) INFORMATION (**For Secondar	y Sale and Gifts Only**)	
Government Issued ID #:	State:		Social Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB: Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:	08/19/2021		
Current Disposition Date:	08/24/2021	Current Disp	osition: NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Receive	d Final: 08/26/2021
Reviewer:	RACHEL RABANALES	Barrack/	/Dealer: Engage Armament LLC

Section 4

FIREARM INFORMATION (Must be Completed by Transferor/Dealer)

437 Numb	er: 000001000974391		Purchase Type:	New	
Make:	TAURUS	Model:	G2 S	Model Number:	1-G2S931
Caliber:	9 mm	Barrel Length:	3.25	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	ACD835962	Country of Origin:	BRAZIL
that is not l	Handgun Roster : A person may not sell or offer for sale a handgun manufacured after January 1, 1985, that is not listed on the handgun roster. If the handgun was manufactured after January 1, 1985. Is it listed on the handgun Roster?				
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?					NA
Integrate handgun m transferred 1, 2003, wa	YES				

437 Number: 000001000974392		Purchase Type:	New			
Make:	TAURUS	Model:	PT-111 MILLENNIUM-G2	Model Number:	N/A	
Caliber:	9 mm	Barrel Length:	3.20	Туре:	SEMI-AUTOMATIC HANDGUN	
Finish:	OTHER	Serial #:	ACD763836	Country of Origin:	BRAZIL	
	Roster: A person may not sell or disted on the handgun roster. If the harn Roster?				YES	
or before D external sa	External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?					
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?						
SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.						
Section 5	Sign upon Application Com	pletion	Section 6	ign upon Transfer of	Firearm	
Transferee	Transferee/Voluntary Registrant: DEMETRIUS MINOR Transferee: DEMETRIUS MINOR					

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Transferor Dealer:

RACHEL RABANALES

Transferor/Dealer: LEONARDO ASTORIMA

Transfer Date: 08/26/2021

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to put	rchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /ID	#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination published Alcohol, Tobacco, Firearms and Explosives.	ed by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL)	or are exempt.
<u> </u>	
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO

NO

11. If you are under 30 years of age at the time of completing this application, have you ever been

adjudicated delinquent by a juvenile court for a crime of violence?

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 08/16/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 08/16/2021

Firearm Dealer/Transferor: RACHEL RABANALES Date Submitted to MDSP for Review: 08/19/2021

Application Type: DEALER SALE Application #: 2021089541

Nics Number: 10257K3M7 Nics Date: 8/26/2021

Section 1 TRANSFEREE (PURCHA	SER) VOLUNTARY REGISTRATION	INFORMATION	Designated Collector Yes
Government Issued ID Type: DF	RIVER'S LICENSE Gove	ernment Issued ID #: M56013	89013937
Government Issued ID State of Issu	ie: Maryland	Social Security Number:	
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :		Nick Name (if applicable):	
Street Address: 12644 GREY EAGL	E CT	Is Baltimore	City resident: NO
Town/City: GERMANTOWN	County: MONTGOMER COUNTY	Y State: Maryland	Zipcode: 20874
DOB: 12/09/1991 Place of	Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height : 5'11" Weight : 400	Race: BLACK	Sex: <u>M</u>	Eyes: Hair: BLACK BROWN
Home Phone : W	ork Phone : (240)477-2250	Mobile Phone : (240)477-225	Occupation : UNEMPLOYED
Section 2a DEALER INFORMATIO	N		
Dealer 062715 License Number:	Dealer Name: Eng.	age Armament LLC	Phone: (301)838-3151
Street Address: 701 E. Gude Dr	Town/City: [Rockville State: N	Maryland Zipcode: 20850
Sales Person Last Name: RABAN	ALES First Na	me: RACHEL Mid	dle Name: ELIZABETH Suffix:
Section 2b TRANSFEROR (SELLER)	INFORMATION (**For Secondary	Sale and Gifts Only**)	
Government Issued ID #:	State:	Sc	ocial Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB : Race:	Sex:	Home Phone:	Work Phone:
Section 3			
Date Form Forwarded:	08/21/2021		
Current Disposition Date:	08/26/2021	Current Disposi	ition: NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Received I	Final: 08/28/2021
Reviewer:	RACHEL RABANALES	Barrack/De	ealer: Engage Armament LLC

Section 5

437 Numb	er: 000001000975091		Purchase Type:	New	_
Make:	GLOCK	Model:	48	Model Number:	N/A
Caliber:	9 mm	Barrel Length:	4.17	Туре:	SEMI-AUTOMATIC HANDGUN
Finish:	OTHER	Serial #:	BSTW539	Country of Origin:	AUSTRIA
	Roster : A person may not sell or isted on the handgun roster. If the hand Roster?				YES
External Safety Lock: A dealer may not sell, offer for sale, rent, or transfer a handgun manufacured on or before December 31, 2002, unless the handgun is sold, offered for sale, rented, or transferred with an external safety lock. If the handgun was manufactured on or before December 31, 2002, was it sold, offered for sale, rented, or transferred with an external safety lock?					NA
Integrated Mechanical Safety Device: A dealer may not sell, offer for sale, rent, or transfer a handgun manufactured on or after January 1, 2003. unless the handgun is sold, offered for sale, rented, or transferred with and approved mechanical safety device. If the handgun was manufactured on or after January 1, 2003, was it sold, offered for sale, rented, or transferred with an approved mechanical safety device?					YES

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 6

Sign upon Transfer of Firearm

Transferee/Voluntary Registrant: DEMETRIUS MINOR Transferee: DEMETRIUS MINOR

Sign upon Application Completion

Transferor Dealer: RACHEL RABANALES Transferor/Dealer: RACHEL RABANALES

Transfer Date: 08/28/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to put	rchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge /IE	#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination published Alcohol, Tobacco, Firearms and Explosives.	ed by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL)	or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?	NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
If you are not a citizen of the United States, what is your INS-issued alien number or admission number?	
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 08/19/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 08/19/2021

Firearm Dealer/Transferor: RACHEL RABANALES Date Submitted to MDSP for Review: 08/21/2021

Application Type: DEALER SALE Application #: 2021095229

Nics Number: 1025XM2XH Nics Date: 9/13/2021

Section 1 TRANSFEREE (PURCHA	ASER) VOLUNTARY REGISTRATION	INFORMATION De	esignated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gove	rnment Issued ID #: M560139013	3937
Government Issued ID State of Issued ID State ISSUED ISSUED ISSUED ID STATE ISSUED ISSU		Social Security Number:	
Government issued in State of iss	ue. <u>Marylanu</u>	Social Security Number.	
Last Name: MINOR	First Name: DEMETRIUS	Middle Name:	Suffix: NONE
Maiden Name (if applicable) :		Nick Name (if applicable):	
Street Address: 12644 GREY EAGL	LE CT	Is Baltimore City	resident: NO
Town/City: GERMANTOWN	County: MONTGOMERY	State: Maryland	Zipcode: 20874
DOB: 12/09/1991 Place o	of Birth (City & State): SILVER S	SPRING, Maryland Co	ountry: UNITED STATES
Height : 5'11" Weight : 400	Race: BLACK	Sex: <u>M</u>	Eyes: Hair: BLACK BROWN
Home Phone :W	/ork Phone : (240)477-2250	Mobile Phone : (240)477-2250	Occupation : UNEMPLOYED
Continu 20			
Section 2a DEALER INFORMATION	JN		
Dealer 062715 License Number:	Dealer Name: Enga	age Armament LLC	Phone: (301)838-3151
Street Address: 701 E. Gude Dr	Town/City: R	cockville State: Maryl	and Zipcode: 20850
Sales Person Last Name: MAIEN			Name: GLEN Suffix:
Section 2b TRANSFEROR (SELLER) INFORMATION (**For Secondary		
Government Issued ID #:	State:	Social	Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address:	Town/City:	State:	Zipcode:
DOB: Race:	Sex:	Home Phone:	Work Phone:
Nace.			Work i florie.
S			
Section 3			
Date Form Forwarded:	09/08/2021		
Current Disposition Date:	09/14/2021	Current Disposition	NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Received Final	: 09/15/2021
Reviewer:	CHRISTOPHER MAIENSCHEIN	Barrack/Dealer	Engage Armament LLC

437 Number: 000001000979652		Purchase Type:	New	
Make: GLOCK	Model:	43X	Model Number:	N/A
Caliber: 9 mm	Barrel Length:	3.41	Туре:	SEMI-AUTOMATIC HANDGUN
Finish: OTHER	Serial # :	BUEH697	Country of Origin:	AUSTRIA
Handgun Roster : A person may not sell of that is not listed on the handgun roster. If the landgun Roster?				YES
External Safety Lock: A dealer may not or before December 31, 2002, unless the hand external safety lock. If the handgun was manufor sale, rented, or transferred with an external	gun is sold, offere factured on or bef	d for sale, rented, or	transferred with an	NA
Integrated Mechanical Safety Device handgun manufactured on or after January 1, 2 transferred with and approved mechanical safe 1, 2003, was it sold, offered for sale, rented, o	2003. unless the ha	andgun is sold, offere andgun was manufac	ed for sale, rented, or etured on or after January	YES

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 5 Sign upon Application Completion

Transferee/Voluntary Registrant: DEMETRIUS MINOR

Transferor Dealer: CHRISTOPHER MAIENSCHEIN

Section 6 Sign upon Transfer of Firearm

Transferee: DEMETRIUS MINOR

Transferor/Dealer: RACHEL RABANALES

Transfer Date: 09/15/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to	ourchasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Badge	ID#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination publi Alcohol, Tobacco, Firearms and Explosives.	shed by the Bureau of
Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQ	L) or are exempt.
Section 8	
1. Are you LINDER 21 years of age?	NO
1. Are you UNDER 21 years of age?	
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	d NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO

adjudicated delinquent by a juvenile court for a crime of violence?

11. If you are under 30 years of age at the time of completing this application, have you ever been

NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 09/07/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 09/07/2021

Firearm Dealer/Transferor: CHRISTOPHER MAIENSCHEIN Date Submitted to MDSP for Review: 09/08/2021

Application Type: DEALER SALE Application #: 2021117038

Nics Number: 1028R0VKF Nics Date: 12/1/2021

Section 1 TRANSFEREE (PURCHA	SER) VOLUNTARY REGISTRATION	INFORMATION	Designated Collector Yes
Government Issued ID Type: D	RIVER'S LICENSE Gove	ernment Issued ID #: M560139	9013937
Government Issued ID State of Iss		Social Security Number:	
Last Name: MINOR	First Name: DEMETRILIS	. ————————————————————————————————————	Suffix: NONE
Maiden Name (if applicable) :	- FIIST Name. DEWETKIOS	Nick Name (if applicable):	Sullix. INOINE
Street Address: 12644 GREY EAGL	E CT		ity resident: NO
Town/City: GERMANTOWN	County: MONTGOMER COUNTY		Zipcode: 20874
DOB: <u>12/09/1991</u> Place o	f Birth (City & State): SILVER	SPRING, Maryland	Country: UNITED STATES
Height : <u>5'11"</u> Weight : <u>400</u>	Race: BLACK	Sex: M	Eyes: Hair: BLACK BROWN
Home Phone : W	/ork Phone : (240)813-5266	Mobile Phone : (240)477-2250	Occupation : UNEMPLOYED
Dealer 062715 License Number: Street Address: 701 E. Gude Dr Sales Person Last Name: MAIEN Section 2b TRANSFEROR (SELLER	Town/City: First Na		
	•	•	
Government Issued ID #:	State:		cial Security #:
Last Name:	First Name:	Middle Name:	Suffix:
Street Address: Race:	Town/City: Sex:	State: State:	Zipcode: Work Phone:
Section 3			
Sections			
Date Form Forwarded:	11/26/2021		
Current Disposition Date:	12/01/2021	Current Disposit	ion: NOT DISAPPROVED
Signature of Approving Offical:	Maryland State Police	Date Form Received F	inal: 12/03/2021
Reviewer:	CHRISTOPHER MAIENSCHEIN	Barrack/Dea	aler: Engage Armament LLC

437 Number: 00	00001000999859		Purchase Type:	New	
Make: GLO	СК	Model:	30 S	Model Number:	N/A
Caliber: 45 A	СР	Barrel Length:	3.78	Туре:	SEMI-AUTOMATIC HANDGUN
Finish: OTH	ER	Serial #:	BUSY628	_ Country of Origin:	AUSTRIA
	ster: A person may not sell of on the handgun roster. If the hater?				YES
or before Decement external safety lo	ety Lock: A dealer may not ber 31, 2002, unless the hand ock. If the handgun was manufor transferred with an external	gun is sold, offere factured on or bef	d for sale, rented, or	transferred with an	NA
handgun manufactransferred with a	Techanical Safety Device ctured on or after January 1, 2 and approved mechanical safe old, offered for sale, rented, or	2003. unless the hatty device. If the h	andgun is sold, offere andgun was manufac	d for sale, rented, or tured on or after January	YES

SIGNATURES/CERTIFICATION OF TRANSFEREE / VOLUNTARY REGISTRANT AND DEALER / TRANSFEROR: I certify under penalty of perjury that the information contained in this form is true and accurate to the best of my knowledge and belief.

Section 5 Sign upon Application Completion

Transferee/Voluntary Registrant: DEMETRIUS MINOR

Transferor Dealer: CHRISTOPHER MAIENSCHEIN

Section 6 Sign upon Transfer of Firearm

Transferee: DEMETRIUS MINOR

Transferor/Dealer: ANDREW RAYMOND

Transfer Date: 12/03/2021

Effective October 1, 2013, a person may not purchase, rent, or receive a handgun unless they possess a valid Handgun Qualification License (HQL) issued by the Secretary of the Maryland Department of State Police or qualify for an exemption status.

Section 7	
Handgun Qualification License Number: HQL-2020-040153	
Exceptions to possession of the Handgun Qualification License:	
(Individuals deemed exempt must provide the proper documentation to a Regulated Firearms Dealer prior to pu	archasing a firearm)
Licensed Firearm Manufacturer. Verfication:	
Current law enforcement officer or person retired in good standing from a law enforcement agency of the United States, the State, or a local law enforcement agency in the state Department: Badge / II	D#:
Active member or retired member of the armed forces of the United States or National Guard.	
Branch: ID#: Duty Station:	
Person purchasing, renting, or receiving an antique, curio, or relic as defined in federal law or in determination publish Alcohol, Tobacco, Firearms and Explosives. Inheritance, Voluntary Registration, Privately Made Firearm Registration, and or Unfinished Frame or Receiver Registration	ned by the Bureau of
Applicant is purchasing a Lower Receiver.	
You may not complete the application unless you possess a valid Handgun Qualification License (HQL) or are exempt.
Section 8	
1. Are you UNDER 21 years of age?	NO
2. Are you participating in a straw purchase of a regulated firearm?	NO
3. Have you ever been convicted of a crime of violence?	NO
4. Have you ever received probation before judgment (PBJ) for a crime of violence?	NO
5. Have you ever received probation before judgment (PBJ) in a domestically related crime?	NO
6. Have you ever been convicted in Maryland or elsewhere of a felony ?	NO
7. Have you ever been convicted in Maryland or elsewhere of a misdemeanor which, under Maryland law, carries a maximum penalty of more than 2 years?	NO
8. Have you ever been convicted in Maryland or elsewhere of a common law offense for which you received a sentence of more than 2 years?	NO
9. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a felony in Maryland if committed by an adult?	NO
10. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for any violation classified as a misdemeanor in Maryland that carries a maximum penalty of more than 2 years if committed by an adult?	NO
11. If you are under 30 years of age at the time of completing this application, have you ever been adjudicated delinquent by a juvenile court for a crime of violence?	NO

12. Are you the respondent against whom a current non ex parte civil protective order has been entered under § 4-506 of the Family Law Article, or against whom an order for protection issued by a court of another state or Native American tribe as defined in §4-508. 1 of the Family Article, has been issued and is in effect?	NO
13. Are you presently charged with a crime punishable by imprisonment for a term exceeding 1 year or are you wanted by a law enforcement agency for the commission of a crime?	NO
14. Are you a habitual drunkard?	NO
15. Are you an addict or habitual user of any controlled dangerous substance?	NO
16. Are you a legal user of cannabis (marijuana) for recreational or medical purposes or are you issued a valid medical cannabis patient identification number or a valid medical cannabis patient identification card?	NO
17. Have you ever been dishonorably discharged from the armed forces of the United States?	NO
18. Have you ever renounced your United States citizenship?	NO
What is your country of citizenship?	UNITED STATES
19. Are you illegally or unlawfully in the United States?	NO
20. Do you suffer from a mental disorder as defined in § 10–101(i)(2) of the Health – General Article and have a history of violent behavior against the firearm applicant or another?	NO
21. Have you ever been voluntarily admitted for more than 30 consecutive days or involuntarily committed for any amount of time to a facility or institution, as defined in § 10-101 of the Health General Act, that provides treatment or services for individuals with mental disorders ?	NO
22. Have you ever been found not criminally responsible or incompetent to stand trial due to a mental disorder or disorders ?	NO
23. Are you currently under the protection of a guardian appointed by a court under § 13-201(c) or § 13-705 of the Estates and Trusts Article for any reason other than physical disability?	NO
24. If you are NOT a designated collector: Have you purchased a regulated firearm within the past 30 days?	NA
25. If a regulated firearm is lost or stolen, the owner of the regulated firearm shall report the loss or theft to the local law enforcement agency with in 72 hours after the owner first discovers the loss or theft.	YES

I, DEMETRIUS MINOR, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Department of State Police, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature concerning this applicant. The intention of this authorization is to provide information, which will be utilized, for investigative resources material for the purpose of processing this application.

I authorize the Department of Health, or any other similar agency or department of the State or another state, to disclose to the Department of State Police information limited to whether I suffer from a mental disorder as defined in §10-101(i)(2) of the Health–General Article and have a history of violent behavior against anyone; or whether I have been voluntarily admitted for more than 30 consecutive days or involuntarily committed to a facility or institution that provides treatment or services for individuals with mental disorders; or whether I am a "Qualifying Patient" for the use of medical cannabis as defined in §13-3301(m)of the Health General Article and have been issued a valid medical cannabis identification number or a valid medical cannabis identification card and the expiration date of said identification number or identification card.

I acknowledge that this information will be used solely as part of the investigation required by Title 5, Subtitle 1 of the Public Safety Article, Annotated Code of Maryland, to determine my eligibility to possess a regulated firearm. In the event that my Application to purchase a regulated firearm is disapproved, I acknowledge that this authorization and any information obtained via this authorization may be used in any proceeding relating to the disapproval.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

I agree to indemnify and hold harmless the person to whom this request is presented, his agents and/or employees, the Secretary and the Department of the State Police and the State of Maryland, from and against all claims, damages, losses and expenses, including the reasonable attorneys' fees arising out of or by reason of complying with this request.

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I, DEMETRIUS MINOR, agree to the release of this information for the purpose of the above referenced investigation.

Release agreement signed on: 11/22/2021

Signature of Transferee/Voluntary Registrant and Transferor

(Sign upon completing Part 1 of this Application)

I certify under penalty of perjury that the information contained in this Application is true and accurate. I understand that any false or omitted information can result in the disapproval of this Application and lead to my arrest.

Applicant/Voluntary Registrant: DEMETRIUS MINOR Date Applicant/Registrant Signed: 11/22/2021

Firearm Dealer/Transferor: CHRISTOPHER MAIENSCHEIN Date Submitted to MDSP for Review: 11/26/2021