

Office of Attorney General Derek Schmidt
Concealed Carry Handgun Licensing Unit
Class Roster Report
Pursuant to K.S.A. 75-7c04(b) and K.A.R. 16-11-3(c)

Primary Instructor

Last Name	First Name	Mid.Initial	State Issued DL or ID Number

Secondary Instructor(s)

Last Name	First Name	Mid.Initial	State Issued DL or ID Number

Date(s) of Class

Start Date	End Date

Location of Class (where classroom portion was conducted)

Address	City	State

Location of the Range (where live fire exercise was conducted)

Address	City	State

Class Roster

Last Name	First Name	Mid.Initial	State Issued DL or ID Number

