

# Greene County Sheriff's Office

**Sheriff Gene Fischer**

## Concealed Carry License Address Change Notification

I am in possession of a Concealed Handgun License issued by the Greene County Sheriff's Office:

Effective \_\_\_\_\_ my new address :  
Date

Street Address	City	County	Zip

Name (as printed on license)	License Number	Date of Birth

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please complete all fields of this form and mail to:

Greene County Sheriff's Office  
Attn: Concealed Carry License  
120 E. Main Street  
Xenia, Ohio 45385