

Exhibit 6

U.S. Department of Justice
Bureau of Alcohol, Tobacco, Firearms and Explosives

OMB No 1140-0003 (05/31/2015)

**Report of Multiple Sale or Other
Disposition of Pistols and Revolvers**

(Please complete all information)

1. Date of Report 07/14/2020	2a. Federal Firearms License (FFL) Number 1-63-101-01-3D-01774
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2b. Business or Trade Name and Address (If you have complete information available on a rubber stamp, please place information here.)
Walter Craig, LLC, The Sportsmans Headquarters
 1201 NE Blvd.
 Montgomery, AL 36117

2c. Are any of the firearm(s) connected to another multiple sale? (If yes, specify date) See instruction 2. Yes No Date

2d. If you sold these firearms at a gun show or other qualifying event, identify the event and provide a complete address of the event.

3. Any Combination of Pistols and Revolvers Disposed of to the Same Unlicensed Person at One Time or During Any Five Consecutive Business Days

Type (Pistol or revolver)	Serial Number	Manufacturer	Model	Importer	Caliber	Transfer Date
PISTOL	HZS8814	SMITH&WESSON	M&P40	SMITH&WESSON	40S&W	7/14/20
PISTOL	JCK9567	SMITH&WESSON	M&P40	SMITH&WESSON	40 S&W	7/14/20
REVOLVER	ABE543505	TAURUS	UL856	TAURUS	38 SPL	7/14/20
REVOLVER	ABE547735	TAURUS	UL856	TAURUS	38SPL	7/14/20

4. Transferee's Name (Last, first, middle)
 BANDY-EVANS, TABITHA, RASHAY ANQUINETTA

5. Residence Address (Number, street, city, county, state, zip code)
 TROY, PIKE, AL

6. Sex FEMALE	7a. Ethnicity <input type="checkbox"/> Hispanic or Latino <input checked="" type="checkbox"/> Not Hispanic or Latino	7b. Race (Check one or more boxes) (See instruction 5) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input checked="" type="checkbox"/> African American or Black <input type="checkbox"/> White <input type="checkbox"/> Native Hawaiian or Other Pacific Islander
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8. Identification Number	9. Type of Identification (ID) NONDRIVER ID	10. ID State AL	11. Date of Birth 1994	12. Place of Birth (City, state, country) TROY, AL USA
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13. If the buyer of the firearms listed in item 4 is a person authorized to act on behalf of a corporation, company, association, partnership or other such business entity, you must complete the following, if applicable: (See instruction 6.)
 Name and Address of Business Entity

14a. Identify the official designated by the State or local authorities where you, the FFL, will be forwarding Copy 2.
 Montgomery County Sheriff's Office
 Name of Agency
 115 South Perry St Montgomery, AL 36104
 Street Address, City, and State

14b. Date Copy 2 was forwarded to Agency 07/15/20

15. Additional Information Relating to the Transfer of the Firearms (if applicable)

16. Name of Employee Filling Out This Form	Date 07/14/2020
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