



Parker Gun Research Letter Request

Please note that you will need a separate form for each Parker letter requested

Your Name: _____ Your Phone Number: _____

Address: _____ Your E-Mail: _____

City: _____ State: _____ Zip Code: _____

Information about your Parker

Serial Number: _____ Grade: _____ Gauge: _____

Action Type: Lifter Top Action Back Action Hammerless

Grip Type: Capped Pistol Grip Straight Round Ball

Forend Type: Splinter Beavertail

Butt Type: DHBP Skeleton Checkered Recoil Pad

Barrel Steel (steel type and/or are stamped): _____

Barrel Length: _____ inches

Comments: _____

Once you have completed this form - please print it out. When mailing to the address below, please make checks payable to the "PGCA" in one of the following amounts:

\$100 for non members (Forum Associates and non PGCA Members)

\$40 for PGCA members

Mail completed form to:
PGCA Research Committee
c/o Chuck Bishop, Chairman
PO Box 126502
Harrisburg, PA 17112