

## Assignment and Report

1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY)  ANDREW D MACFARLANE ADM GUN AND RIFLE MAKERS 500 N KIMBALL AVE #109 SOUTHLAKE, TX 76092, TARRANT		2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 781080-2015-0266-B1B																																																		
		3. PERMIT/LICENSE NUMBER 575439015J04948	4a. TARGET DATE 9/1/2015	4b. TARGET HOURS																																																
		5. REQUESTED BY (SIGNATURE, TITLE AND DATE)																																																		
6. ATF OFFICER(S) ASSIGNED (b)(6) - Lead Investigator																																																				
7. ASSIGNED BY (SIGNATURE, TITLE AND DATE) (b)(6) Area Supervisor, 02/25/2015																																																				
8. PURPOSE/SPECIAL INSTRUCTIONS																																																				
<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="2" style="padding: 5px;">9. INSPECTION RESULTS</td><td colspan="2" style="padding: 5px;"><input type="checkbox"/> CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC</td><td colspan="2" style="padding: 5px;">10. TRAVEL EXPENSES (OPTIONAL)</td></tr><tr><td style="padding: 5px;">NO. OF VIOLATIONS</td><td style="padding: 5px;">5</td><td style="padding: 5px;">NO. OF REFERRALS</td><td style="padding: 5px;"></td><td style="padding: 5px;">2111 - PER DIEM</td><td style="padding: 5px;"></td></tr><tr><td style="padding: 5px;">NO. OF TECS CHECKS</td><td style="padding: 5px;">36</td><td style="padding: 5px;">NO. OF TECS HITS</td><td style="padding: 5px;"></td><td style="padding: 5px;">2112 - P.O.A.</td><td style="padding: 5px;"></td></tr><tr><td style="padding: 5px;">NO. OF TAX ADJUSTMENTS</td><td style="padding: 5px;"></td><td style="padding: 5px;">\$ VALUE OF TAX INCREASES</td><td style="padding: 5px;"></td><td style="padding: 5px;">2113 - COMM. AIR</td><td style="padding: 5px;"></td></tr><tr><td style="padding: 5px;"></td><td style="padding: 5px;"></td><td style="padding: 5px;">\$ VALUE OF TAX DECREASES</td><td style="padding: 5px;"></td><td style="padding: 5px;">2114 - RENTAL CAR</td><td style="padding: 5px;"></td></tr><tr><td style="padding: 5px;">NO. OF ASSESSMENTS</td><td style="padding: 5px;"></td><td style="padding: 5px;">\$ VALUE OF ASSESSMENTS</td><td style="padding: 5px;"></td><td style="padding: 5px;">2115 - GPV EXPENSES</td><td style="padding: 5px;"></td></tr><tr><td style="padding: 5px;">NO. OF CLAIMS</td><td style="padding: 5px;"></td><td style="padding: 5px;">\$ VALUE OF CLAIMS</td><td style="padding: 5px;"></td><td style="padding: 5px;">2116 - MISC.</td><td style="padding: 5px;"></td></tr><tr><td style="padding: 5px;">NO. OF TAX PERIODS</td><td style="padding: 5px;"></td><td style="padding: 5px;">\$ VALUE OF TAXES VERIFIED</td><td style="padding: 5px;"></td><td style="padding: 5px;">TOTAL \$ FOR INSP.</td><td style="padding: 5px;"></td></tr></table>					9. INSPECTION RESULTS		<input type="checkbox"/> CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC		10. TRAVEL EXPENSES (OPTIONAL)		NO. OF VIOLATIONS	5	NO. OF REFERRALS		2111 - PER DIEM		NO. OF TECS CHECKS	36	NO. OF TECS HITS		2112 - P.O.A.		NO. OF TAX ADJUSTMENTS		\$ VALUE OF TAX INCREASES		2113 - COMM. AIR				\$ VALUE OF TAX DECREASES		2114 - RENTAL CAR		NO. OF ASSESSMENTS		\$ VALUE OF ASSESSMENTS		2115 - GPV EXPENSES		NO. OF CLAIMS		\$ VALUE OF CLAIMS		2116 - MISC.		NO. OF TAX PERIODS		\$ VALUE OF TAXES VERIFIED		TOTAL \$ FOR INSP.	
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	3. PERMIT/LICENSE NUMBER 575439015J04948	4a. TARGET DATE 9/1/2015	4b. TARGET HOURS
	5. REQUESTED BY (SIGNATURE, TITLE AND DATE)		

### 13. REVIEW AND ROUTING

#### REVIEW COMMENTS AND RECOMMENDATION

Viols WC with WL and Recall

☒ REVIEWED

☒ CONCUR

☐ SEE COMMENTS

☒ FINAL DISPOSITION

#### SIGNATURE AND TITLE

KRMURPHY - Director, Industry Operations

#### REVIEW DATE

07/29/2015

#### ROUTING SEQUENCE AND DATE

- ☐ 1. \_\_\_\_\_
- ☐ 2. \_\_\_\_\_
- ☐ 3. \_\_\_\_\_
- ☐ 4. \_\_\_\_\_

CONTROL FILE POSTED DATE \_\_\_\_\_

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

Report of Violations

Instructions

Please write firmly with a ball point pen when completing this form. ATF officers will prepare this form in triplicate. The original copy will be given to the proprietor or a responsible representative. The remaining copies will be submitted with the completed inspection report. Supervisors will detach one copy from the completed report for their files.

Name of Proprietor ANDREW D MACFARLANE ADM GUN AND RIFLE MAKERS	Street Address 500 N KIMBALL AVE #109	City SOUTHLAKE	State TX	Zip Code 76092-	County TARRANT	Page 1 of 2 Pages
License/Permit/Registry Number (If any) 575439015J04948	Expiration Date 9/1/2015	Date(s) or Period of Inspection 07/15/2015 through 07/16/2015				

Inspection Results

An examination of your premises, records and operations has disclosed the following violations which have been explained to you:

Number: 1

Nature of Violation:  
Failure of the licensee to have at least (b)(3) transferees (b)(6) (b)(3) 112 PL 55 125 STAT 552 recertify the ATF Forms 4473s [items 24 and 25] when the transfers of the firearms took place on different days from the dates that the transferees signed Section A.

Citation: 27 CFR 478.21(a)

Date Corrections to be Made:  
(If not corrected immediately)

Corrective Action to be Taken: The licensee was instructed to have transferees recertify the ATF Forms 4473s [items 24 and 25] when the transfers of firearms take place on different days from the dates that the transferees sign Section A.

Number: 2

Nature of Violation:  
Failure of the licensee to have at least (b)(3) transferees (b)(6) (b)(3) 112 PL 55 125 STAT 552 (b)(6) (b)(3) ) to complete the ATF Forms 4473 completely and correctly.

Citation: 27 CFR 478.124(c)(1)

Date Corrections to be Made:  
(If not corrected immediately)

Corrective Action to be Taken: The licensee was instructed to establish a double check system so at least (b)(3) people are checking each ATF Form 4473 for errors before the customers leave the premises.

Number: 3

Nature of Violation:  
Failure of the licensee to complete all the NICS information [item 21b] on at least (b)(3) ATF Forms 4473 (b)(6) (b)(3) 112 PL 55 125 STAT 552

Citation: 27 CFR 478.124(c)(3)(iv)

Date Corrections to be Made:  
(If not corrected immediately)

Corrective Action to be Taken: The licensee was instructed to record all the NICS information provided for every ATF Form 4473.

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September 2022 Document Production

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ATF E-Form 5030 5  
Revised April 2005

Report of Violations

Instructions

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License/Permit/Registry Number (If any) 575439015J04948		Expiration Date 9/1/2015	Date(s) or Period of Inspection 07/15/2015 through 07/16/2015			

Inspection Results

An examination of your premises, records and operations has disclosed the following violations which have been explained to you:

Number: 4

Nature of Violation:

Failure of the licensee to complete and submit ATF Forms 3310.4 for at least (b)(6) (b)(7)(C) multiple handgun sales involving (b)(6) handguns.

Date Corrections to be Made:  
(If not corrected immediately)

Corrective Action to be Taken:  
(If not corrected immediately)

The licensee was instructed to complete and submit ATF Forms 3310.4 for the unreported multiple handgun sales and to timely submit multiple sales in the future when two or more handguns are transferred to the same person within five days.

Citation: 27 CFR 478.126a

Number: 5

Nature of Violation:

Failure of the licensee to complete and submit at least (b)(6) (b)(7)(C) ATF Form 3310.12 involving (b)(6) multiple rifles with certain calibers.

Date Corrections to be Made:  
(If not corrected immediately)

Corrective Action to be Taken:  
(If not corrected immediately)

The licensee was instructed to timely complete and submit ATF Form 3310.12 when two or more rifles with certain calibers are transferred to the same person within five days.

Citation: 18 U.S.C. 923(g)(5)(A).

I Have Received a Copy of This Report of Violations (Proprietor's signature and title)	Date
Signature and Title of ATF Officer	Date