## Assignment and Report

| 1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) GUNS INC 235 HOMER CORRIHER RD CHINA GROVE,NC 28023, ROWAN |  |  | 2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., PP.C.)763025-2016-0041-B1B |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | 3. PERMIT/LICENSE NUMBER <br> 156159016 C 18125 |  | $\begin{gathered} \hline \text { 4a. TARGET DATE } \\ 12 / 30 / 2015 \\ \hline \end{gathered}$ | 4b. TARGET HOURS 40 |
|  |  |  | 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, 10/30/2015 |  |  |  |  |  |  |
| 8. PURPOSEISPECIAL INSTRUCTIONS CONDUCT FULL DE/COMPLIANCE INVESTIGATION |  |  |  |  |  |  |
| 9. INSPECTION RESULTS | CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC |  |  | 10. TRAVEL EXPENSES (OPTIONAL) |  |  |
| NO OF VIOLATIONS | 4 | NO. OF REFERRALS |  | 2111 - | ER DIEM |  |
| NO. OF TECS CHECKS | 42 | NO. OF TECS HITS |  | 2112 - | 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. |  |  |  |
| 11. ATF OFFICER'S RECOMMENDATION Submitted by (b)(6) - Industry Operations Investigator |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Submitted on-1 $12 / 20 / 0015$ <br> Warning Letter, ROV Only and No Recall. |  |  |  |  |  |  |
| Mr. Terry McCreary and Mrs. Jody Overcash were queried in OpenFox on November 02, 2015 and Ms. Dara Jane Myers was queried in OpenFox on December 09, 2015. No prohibiting factors were disclosed. |  |  |  |  |  |  |



| 1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) | 2. U1. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 763025-2016-0041-B18 |  |  |
| :---: | :---: | :---: | :---: |
| GUNS INC <br> 235 HOMER CORRIHER RD | 3. PERMTILICENSE NUMBER 156159016 C 18125 | $\begin{gathered} \text { 4a. TARGET DATE } \\ 12 / 30 / 2015 \end{gathered}$ | 4b. TARGETHOURS 40 |
| CHINA GROVE,NC 28023, ROWAN | 5. REQUESTED BY (SIGNATURE, TITLE AND DATE) |  |  |

ROUTING SEQUENCE AND DATE
$\square X . \quad$ FFLC
$\square 2$.
$\square 3$.
$\square 4$.
$\qquad$

## 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 <br> GUNS INC | Street Address <br> 235 HOMER CORRIHER RD | City <br> CHINA GROVE | State <br> NC | Zip Code <br> 28023- | County <br> ROWAN <br> 3 Pages |
| :--- | :--- | :--- | :--- | :--- | :--- |
| License/Permit/Registry Number (If any) <br> 156159016 C 18125 | Expiration Date <br> $3 / 1 / 2016$ | Date(s) or Period of Inspection <br> $11 / 30 / 2014$ through 11/30/2015 |  |  |  |

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 Or enter | Violation: <br> ccasion Licensee transferred a firearm, when purchaser $\square$ failed to correct Place of Birth Information in Block \#3, o |
| Citation: | 27 CFR 478.124 (c)(1) |
| Number: | 2 |
|  | Violation: <br> ccasion Licensee transferred a firearm when purchaser's ID information for <br>  |
| Citation: | 27 CFR 478.124(c)(3)(i) |

## Date Corrections to be Made:

(If not corrected immediately)
Corrective Action to be Taken: Licensee is contacting the purchaser in order to complete the (If not corrected immediately) Place of Birth information.

## Date Corrections to be Made:

 (If not corrected immediately)Corrective Action to be Taken: Licensee is contacting the purchaser in order to complete the (If not corrected immediately) ID information in block 20a (i.e. Driver's License number and Driver's License Expiration Date).

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| Name of Proprietor <br> GUNS INC |
| :--- |

## Instructions

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Citation: 27CFR478.126a


U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives 6701 Carmel Road, Suite 200
Charlotte, North Carolina 28226

## CERTIFIED RETURN-RECEIPT

Mr. Terry McCreary
Guns, Inc.
235 Homer Corriher Road
China Grove, NC 28023
RE: 1-56-159-01-6C-18125

## Dear Mr. McCreary:

During a recent compliance inspection at your firearms business covering the period of November 30, 2014 to November 30, 2015, you were cited for violations of Title 27, Code of Federal Regulations, Part 478. A copy of the Report of Violations, Form 5030.5, issued at the time of the inspection is enclosed.

All violations were fully explained to you by the Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) Investigator (b)(6) . You indicated that you understood the requirements of the firearms laws and regulations and that corrective action would be taken to eliminate future violations.

The records you are required to maintain and the business operations you conduct are important to law enforcement in our continuing efforts to reduce violent crime and protect the public. It is essential that you comply with all Federal laws and regulations that govern your firearms business. This is critical to carrying out our mission to protect the public and ensure that criminals do not gain access to firearms. ATF appreciates the efforts you and other industry members make in this area, and we look forward to continuing to work with you in that regard.

Mr. Terry McCreary
Guns, Inc.
RE: 1-56-159-01-6C-18125

You are reminded that retention of your Federal firearms license is conditioned upon your compliance with Federal laws and regulations. Any future violations, either repeat or otherwise, could be viewed as willful and may result in the revocation of your license. Please ensure that future compliance is achieved.

Should you have any questions regarding this matter, please contact Investigator (b) (6) at (b)(6)

Sincerely yours,


Area Supervisor, Industry Operations Charlotte III, Charlotte Field Division

Enclosure
cc: National Licensing Center
Charlotte Field Division

