## **Assignment and Report**

			(e)			
OPERATING NAME AND ADDRESS     (INCLUDE ZIP CODE AND COUNTY)		2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 763025-2016-0329-B1B				
JACKSON, BENNIE WAYNE			3. PERMIT/LICENSE NUMBER   4a. TARGET DATE   4b. TARGET HOURS			
HERITAGE ARMS AND FINDINGS			156025019F08606 8/9/2016 40			
5040 OVERCREST DR KANNAPOLIS,NC 28081,	CABARRUS		5. REQUESTED E	BY (SIGNATURE, TITLE AND	DATE)	
6. ATF OFFICER(S) ASSIGNED (b)(6) - Assign (b)(6) - Lead Inv	ned Investigator estigator					
7. ASSIGNED BY (SIGNATURE,	TITLE AND DATE)					
(b)(6) , Area S	upervisor, 06/09/2	016				
8. PURPOSE/SPECIAL INSTRUC	TIONS					
CONDUCT FULL DE/COMP	NVESTIGATION	Ĵ				
9. INSPECTION RESULTS	CHECK IF NO VIO	DLATIONS, ADJUSTM	ENTS, ETC	10. TRAVEL EXPENS	ES (OPTIONAL)	
NO. OF VIOLATIONS	1 NO. OF REF			2111 - PER DIEM		
NO. OF TECS CHECKS	NO. OF TEC	SHITS		2112 - P.O.A.		
NO. OF TAX	\$ VALUE OF	TAX INCREASES		2113 - COMM, AIR		
ADJUSTMENTS	\$ VALUE OF	TAX DECREASES		2114 - RENTAL CAR		
NO. OF ASSESSMENTS	\$ VALUE OF	ASSESSMENTS		2115 - GPV EXPENSE	S	
NO. OF CLAIMS	\$ VALUE OF			2116 - MISC.		
NO. OF TAX PERIODS	25 AZ 0234-LUI 23554	TAXES VERIFIED		TOTAL \$ FOR INSP.	_	
Submitted by (b)(6) Submitted on: 10/04/2016	- Industry Operation	ons Investigator				
Viols WL ONLY and No	Recall Inspection					
	menanar aparasas	12. TIME ACCOU	INTING DATA			
ATF OFFICER'S NAME (MONTH		(b)(6)				
AUG 2016 SEP 2016	3.0 28.5					
ATF OFFICER'S SUBTOTAL	31.5	ATF OFFICER'S S	IGNATURE			
ATF OFFICER'S NAME (MONTH	YEAR HOURS	(b)(6)				
SEP 2016	20.5					
ATF OFFICER'S SUBTOTAL	20.5	the commence and the commence of	IGNATURE			
TOTAL HOURS	52.0	0				
		13. REVIEW AN	ND ROUTING			
REVIEW COMMENTS AND RECO	OMMENDATION					
Viols WL ONLY and No R	ecall Inspection					
⊠ REVIE	VED ⊠.c	ONCUR ⊠SI	EE COMMENTS	☐ FINAL DISPOSITION		
SIGNATURE AND TITLE (b)(6) - Area Supe	A. C.		gitally signed by (b)(6	REVIEW DATE	5/2016	
-		Da	te: 2016.10.05 14:42:0			
ATF EF 5700.14 (10-98) For Office	Poseunient Pro	duction	118		Page 1 of 2	

#### U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

# **Assignment and Report**

OPERATING NAME AND ADDRESS     (INCLUDE ZIP CODE AND COUNTY)	2. U.I. NUMBER (ORG. SEG. CO 763025	DE, ASSIGNMENT N -2016-0329-B1B	O., P.P.C.)
JACKSON, BENNIE WAYNE HERITAGE ARMS AND FINDINGS	3. PERMIT/LICENSE NUMBER 156025019F08606	4a. TARGET DATE 8/9/2016	4b. TARGET HOURS 40
5040 OVERCREST DR KANNAPOLIS,NC 28081, CABARRUS	5. REQUESTED BY (SIGNATURI		40
ROUTING SEQUENCE AND DATE    X 1.   FFLC     2.     3.     4.	CONTROL FILE POSTE	D DATE	

## Report of Violations

Name of Proprietor  JACKSON, BENNIE WAYNE	Street Address 5040 OVERCREST DR		City KANNAPOLIS	State NC	Zip Code 28081-	County CABARRUS	Page 1 of	
HERITAGE ARMS AND FINDINGS								
License/Permit/Registry Number (If any)		Expiration Date		Date(s) or Period of Inspection				
156025019F08606 6/1/2019			09/19/2016 through 09/21/2016					
An examination of your premises, records and	operations has disclosed the		on Results	xplained to you:				
Nature of Violation:  Licensee failed to enter the disposition of a fi and is in violation of 27 CFR 478.125(e) whi shall be recorded by the licensed dealer not la transaction.  Citation: 27 CFR 478.125(e)	ich states: The sale or othe	r disposition of a firearn	(If not corrective A	ions to be Made: ted immediately) ction to be Taken ted immediately)		ere disposed of in the A&I	) book	

Operations Investigator

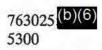


### U.S. Department of Justice

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

www.atf.gov

September 30, 2016



#### WARNING LETTER

### CERTIFIED RETURN RECEIPT REQUESTED

Jackson, Bennie Wayne Heritage Arms and Findings 5040 Overcrest Drive Kannapolis, NC 28081

RE: FFL# 1-56-025-01-9F-08606

Dear Mr. Jackson:

During a recent compliance inspection at your firearms business covering the period of September 19, 2015 to September 19, 2016, you were cited for violations of 27 Code of Federal Regulations, Part 478. The violations were discussed with you during the inspection. 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) Industry Operations 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.

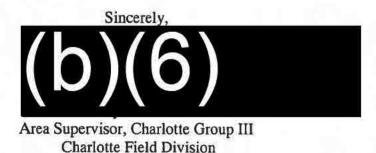
The records you are required to maintain and the business operations you conduct are important to law enforcement in our continuing efforts to reduce violent crime and protect the public. It is essential that you comply with all Federal laws and regulations that govern your firearms business. This is critical to carrying out our mission to protect the public and to ensure that

Jackson, Bennie Wayne FFL# 1-56-025-01-9F-08606

criminals do not gain access to firearms. ATF appreciates the efforts you and other industry members make in this area. We look forward to continuing to work with you in that regard.

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 Industry Operations Investigator (b)(6)



Enclosure

cc: Federal Firearms Licensing Center