Assignment and Report

1. OPERATING NAME AND ADDRESS	2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.)							
(INCLUDE ZIP CODE AND COUNTY)	775025	775025-2016-0035-B1B						
Parkway Pawn & Gun LLC	3. PERMIT/LICENSE NUMBER	4a. TARGET DATE	4b. TARGET HOURS					
Parkway Pawn & Gun	461121028H04874	5/1/2016						
2 Knox Plaza	5. REQUESTED BY (SIGNATUR	E, TITLE AND DATE)						
Barbourville,KY 40906, Knox	05/01/2016							

6. ATF OFFICER(S) ASSIGNED

(b)(6) - Assigned Investigator (b)(6) - Lead Investigator

7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)

(b)(6) , Area Supervisor, 10/03/2015

8. PURPOSE/SPECIAL INSTRUCTIONS

Conduct full EEI Inspection following instructions provided in the Frontline Manual and FY 16 Coding Guidelines.

9. INSPECTION RESULTS	CHE	CK IF NO VIOLATIONS, ADJUSTM	IENTS ETC	10. TRAVEL EXPENSES	(OPTIONAL)
NO. OF VIOLATIONS	7	NO. OF REFERRALS		2111 - PER DIEM	OT HOWE,
NO. OF TECS CHECKS	31	NO. OF TECS HITS		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 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: 11/04/2015. On October 14, 2015, IOI (b)(6) and IOI (b)(6) began an on-site FFL inspection of Parkway Pawn & Gun LLC in Barbourville, Kentucky. James Miles, LLC Member/Responsible Person, assisted IOI (b)(6) and IOI (b)(6) during this inspection by providing access to the licensee's inventory and records. IOI (b)(6) and IOI (b)(6) held a closing conference with Mr. Miles on October 28, 2015.

IOI (b)(6) issued a report of violations to the licensee. The licensee was cited for seven (7) violations of the Gun Control Act (See ATF Form 5030.5, Worksheet 1 and Worksheet 2, and Exhibits 1-23). IOI (b)(6) recommends a warning letter and recall inspection.

Violation #2 rises to a warning letter. See ATF F 4473 Number: (b)(3) 112 Public Law 55 125 STAT 552 (b)(6). On this form, the licensee transferred a firearm to an individual who, although not actually prohibited at the time of transfer, appeared to be prohibited. The transferee answered "yes" in Item 11.f. (Have you ever been adjudicated mentally defective?). The licensee proceeded to contact NICS and transfer a firearm to the transferee. On October 16, 2015, IOI (b) (6) queried the transferee in NCIC. No prohibiting information was identified. (See Violation #2 on ATF Form 5030.5, Worksheet 2, and Exhibit 23)

The other violations cited during this inspection rise to a report of violations only.

At the time of inspection, the licensee had 455 firearms in inventory. The licensee had 328 ATF Forms 4473 on file for the inspection period. In the past 12 months, the licensee had acquired firearms and disposed of approximately firearms.

See Narrative Report, Worksheets and Exhibits for more information.

Viols WL ONLY and Recall Inspection

U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

Assignment and Report

1. OPERATING NAME AND ADDRESS			2. U.I. NUMBER	(ORG. SEG. CC	DE, ASSIGNMENT N	IO., P.P.C.)			
(INCLUDE ZIP CODE AND COUNTY)					-2016-0035-B1B				
Parkway Pawn & Gun LLC			1		4a. TARGET DATE	4b. TARGET HOURS			
Parkway Pawn & Gun			46112102	28H04874	5/1/2016				
2 Knox Plaza			5. REQUESTED	. REQUESTED BY (SIGNATURE, TITLE AND DATE)					
Barbourville,KY 40906, Knox			05/01/2016						
			ACCOUNTING DATA						
ATF OFFICER'S NAME (MONTH, YEAR, I		0)(6)							
OCT 2015	32.00	·							
ATF OFFICER'S SUBTOTAL	32.00	ATF OFFIC	ER'S SIGNATURE						
ATF OFFICER'S NAME (MONTH, YEAR, I	HOURS))(6)							
OCT 2015	61.00								
NOV 2015	24.00								
		l							
ATF OFFICER'S SUBTOTAL	85.00	ATF OFFIC	ER'S SIGNATURE						
TOTAL HOURS	117.00								
		13. RE\	IEW AND ROUTING						
REVIEW COMMENTS AND RECOMMEND	ATION								
W/L mailed 11/23/2015. PII sent to	the FFLC on	same date.							
Viols WL ONLY and Recall Inspect	on								
The state of the s									
	A		yy	Ay					
REVIEWED	X CON	ICUR	SEE COMMENTS	Anne	DISPOSITION				
SIGNATURE AND TITLE				REVIEW [E			
(b)(6) - Area Supervisor					11/23/201	ວ 			
ROUTING SEQUENCE AND DATE									
□ 1.									
			CONTR		D DATE				
3.			CONTR	OL FILE POSTE	D DAIE				

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 Parkway Pawn & Gun LLC Parkway Pawn & Gun	Street Address 2 Knox Plaza		City Barbourville	State KY	Zip Code 40906-	County Knox	Page 1 of 10 Pages
License/Permit/Registry Number (If any) 461121028H04874		Expiration Date 8/1/2018			f Inspection h 10/28/2015		

Inspection Results

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

Number: 1

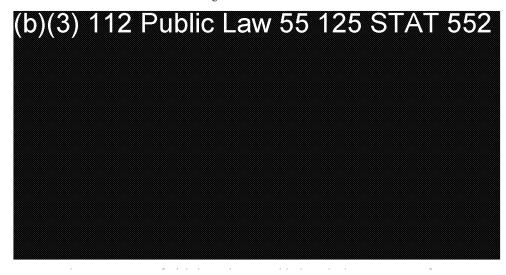
Nature of Violation:

Failure to record certain required information on ATF Forms 4473. All of the Forms 4473 listed below contained multiple errors. In total, this violation occurred in instances. There were blank entries on the following ATF Forms 4473:

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

(If not corrected immediately)

Corrective Action to be Taken: In the future, the licensee will record all of the required information on the ATF Forms 4473.



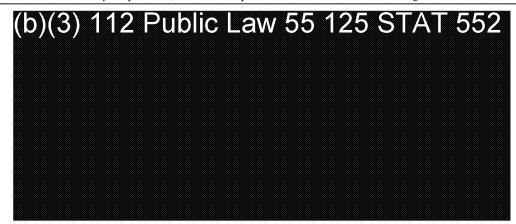
Instructions

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Name of Proprietor Parkway Pawn & Gun LLC Parkway Pawn & Gun	Street Address 2 Knox Plaza		City Barbourville		State KY	Zip Code 40906-	County Knox	Page 2 of 10 Pages
License/Permit/Registry Number (If any) 461121028H04874		Expiration Date 8/1/2018		1		f Inspection h 10/28/2015		

Inspection Results

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



Citation: 27 CFR 478.21(a)

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 Parkway Pawn & Gun LLC Parkway Pawn & Gun	Street Address 2 Knox Plaza		City Barbourville	State KY	Zip Code 40906-	County Knox	Page 3 of 10 Pages
License/Permit/Registry Number (If any) 461121028H04874		Expiration Date 8/1/2018			f Inspection h 10/28/2015		

Inspection Results

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

Number: 2

Nature of Violation:

The licensee transferred a firearm to an individual who, although not actually prohibited at the time of transfer, appeared to be prohibited. On ATF Form 4473, the transferee answered "yes" in Item 11.f. (Have you ever been adjudicated mentally defective?). The licensee proceeded to contact NICS and transfer a firearm to the transferee. On October 16, queried the transferee in NCIC. No prohibiting information was identified.

Form Number:

Citation: 27 CFR 478.99(c)

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

(If not corrected immediately)

Corrective Action to be Taken: In the future, the licensee will review the ATF Form 4473 prior to contacting NICS and conducting a background check. If the transferee answers "yes" to any of the prohibiting questions in Section A, the licensee will stop the transaction immediately and will not contact NICS.

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 Parkway Pawn & Gun LLC Parkway Pawn & Gun	Street Address 2 Knox Plaza		City Barbourville	Sta	Zip Code 40906-	County Knox	Page 4 of 10 Pages
License/Permit/Registry Number (If any) 461121028H04874		Expiration Date 8/1/2018			of Inspection gh 10/28/2015		

Inspection Results

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

Number: 3

Nature of Violation:

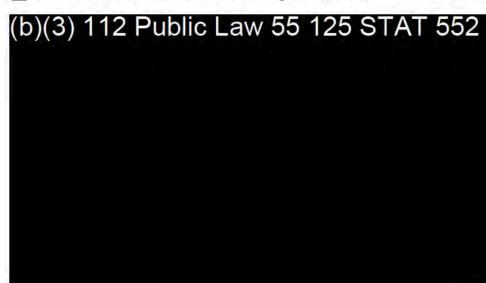
Failure to obtain complete and accurate information on the Forms 4473.

ATF Forms 4473.

the Forms 4473 listed below contained multiple errors. In total, this violation occurred in instances. There were blank entries on the following ATF Forms 4473:

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

Corrective Action to be Taken: In the future, the licensee will obtain complete and accurate (If not corrected immediately) ATF Forms 4473.



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 Parkway Pawn & Gun LLC Parkway Pawn & Gun	Street Address 2 Knox Plaza		City Barbourville		State KY	Zip Code 40906-	County Knox	Page 5 of 10 Pages
License/Permit/Registry Number (If any) 461121028H04874		Expiration Date 8/1/2018		` ´		f Inspection h 10/28/2015		

Inspection Results

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

(b)(3) 112 Public Law 55 125 STAT 552

Citation: 27 CFR 478.124(c)(1)

Number: 4

Nature of Violation:

Failure to record certain required information or entries on the following ATF Forms 4473:

ATF Forms 4473. There were blank

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

Corrective Action to be Taken: In the future, the licensee will record all of the required information on the ATF Forms 4473. (If not corrected immediately)

(b)(3) 112 Public Law 55 125 STAT 552

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

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 Parkway Pawn & Gun LLC Parkway Pawn & Gun	Street Address 2 Knox Plaza		City Barbourville		State KY	Zip Code 40906-	County Knox	Page 6 of 10 Pages
License/Permit/Registry Number (If any) 461121028H04874		Expiration Date 8/1/2018		1		f Inspection h 10/28/2015		

Inspection Results

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

Number: 5

Nature of Violation:

Failure to record certain required information on ATF Forms 4473. Both of the Forms 4473 listed below contained multiple errors. In total, this violation occurred in instances. There were blank entries on the following ATF Forms 4473:

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

Corrective Action to be Taken: In the future, the licensee will record all of the required information on the ATF Forms 4473.

(b)(3) 112 Public Law 55 125 STAT 552

Citation: 27 CFR 478.124(c)(4)

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 Parkway Pawn & Gun LLC Parkway Pawn & Gun	Street Address 2 Knox Plaza		City Barbourville	Stat KY	Zip 4090	Code 06-	County Knox	Page 7 of 10 Pages
License/Permit/Registry Number (If any) 461121028H04874		Expiration Date 8/1/2018		Date(s) or Per 10/14/2015 t				

Inspection Results

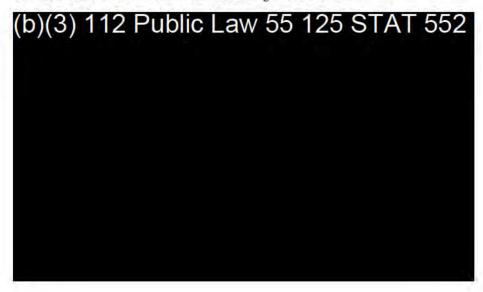
An examination of your premises, records and operations has disclosed the following violations which have been explained to you:

Number: 6

Nature of Violation:

Failure to record certain required information on ATF Forms 4473.

Forms 4473 listed below contained multiple errors. In total, this violation occurred in instances. There were blank entries on the following ATF Forms 4473:



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

Corrective Action to be Taken: In the future, the licensee will record all of the required (If not corrected immediately) information on the ATF Forms 4473.

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 Parkway Pawn & Gun LLC Parkway Pawn & Gun	Street Address 2 Knox Plaza		City Barbourville		State KY	Zip Code 40906-	County Knox	Page 8 of 10 Pages
License/Permit/Registry Number (If any) 461121028H04874		Expiration Date 8/1/2018		` ′		f Inspection h 10/28/2015		

Inspection Results

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



Citation: 27 CFR 478.124(c)(5)

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 Parkway Pawn & Gun LLC Parkway Pawn & Gun	Street Address 2 Knox Plaza		City Barbourville		State KY	Zip Code 40906-	County Knox	Page 9 of 10 Pages
License/Permit/Registry Number (If any) 461121028H04874		Expiration Date 8/1/2018		` ´		f Inspection h 10/28/2015		

Inspection Results

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

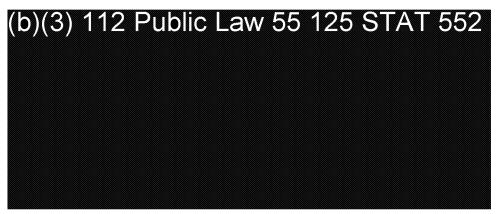
Number: 7

Nature of Violation:

Failure to timely record the disposition of a firearm in the A&D record in The following firearms had been transferred, but they had not been logged out in the licensee's A&D record prior to this inspection:

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

Corrective Action to be Taken: On October 15, 2015, the licensee made all of the required disposition entries in the A&D record. In the future, the licensee will timely record all firearms dispositions in the A&D record.



Ultimately, no firearms were missing from inventory upon inventory reconciliation.

U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

Report of Violations

			ructions						
Please write firmly with a ball point pen when representative. The remaining copies will be	n completing this form. ATF submitted with the complete	officers will prepare to officers will prepare to officers.	his form in triplica opervisors will det	ate. The or ach one co	riginal co	py will be given the completed re	to the proprietor or a r	responsible	
	,	a maper went reper a se			, p. , 110111				
Name of Proprietor	Street Address		City		State	Zip Code	County	Page	10 of
Parkway Pawn & Gun LLC Parkway Pawn & Gun	2 Knox Plaza		Barbourville		KY	40906-	Knox	10 Pa	ges
Faikway Fawii & Guii									
License/Permit/Registry Number (If any)		Expiration Date		Date(s) or Period of Inspection					
461121028H04874		8/1/2018 10/14/2015 through 10/28/2015							
Inspection Results									***************************************
An examination of your premises, records and	l operations has disclosed th			explained 1	to you:				
Citation: 27 CFR 478.125(e)									
I Have Received a Copy of This Report of Violations (Proprietor's signature and title)								Date	
Signature and Title of ATF Officer								Date	

1040 Monarch Street, Suite 250 Lexington, Kentucky 40513

November XX, 2015



CERTIFIED MAIL/ RETURN RECEIPT REQUESTED

Parkway Pawn & Gun LLC Attention: James Miles 2 Knox Plaza Barbourville, KY 40906

Dear Licensee:

During a recent compliance inspection at your firearms business covering the period of October 14, 2015, through October 28, 2015, you were cited for violations of 27 Code of Federal Regulations, Part 478. A copy of the ATF Form 5030.5, Report of Violations, issued at the time of the inspection is enclosed.

The violations were fully explained to you by Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) Industry Operations Investigator (IOI) (b)(6) . You indicated that you understood the requirements of the firearms laws and regulations. You further indicated that corrective actions 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 effort 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.

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.

Sincerely yours,

(b)(6)
Area Supervisor
Lexington II Field Office

Enclosure

cc: Federal Firearms Licensing Center Director, Industry Operations File