Assignment and Report

| I. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) | 2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 777040-2016-0061-B1B | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| KELLY, THOMAS MARSHALL KELLY FIREARMS AND AMMUNITION | 3. PERMIT/LICENSE NUMBER 4a. TARGET DATE 4b. TARGET HOURS 164109078L03198 12/31/2015 | | | | | | | |
| 72 HWY 607 PICAYUNE,MS 39466, PEARL RIVER | 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, 10/15/2015 | | | | | | | | |

8. PURPOSE/SPECIAL INSTRUCTIONS

CONDUCT MANUFACTURER & IMPORTER FULL INSPECTION USING CURRENT GUIDELINES SET FORTH IN IOI MANUAL. ADDITIONALLY, MISSING AFMER REPORTS SHOULD BE DOCUMENTED IN NARRATIVE REPORT AND FORWARDED TO ATF HEADQUARTERS.

| INSPECTION RESULTS | CHE | ECK IF NO VIOLATIONS, ADJUSTMENTS, ETC | 10. TRAVEL EXPENSES (OPTIONAL) |
|--------------------|-----|--|--------------------------------|
| NO. OF VIOLATIONS | 5 | NO. OF REFERRALS | 2111 - PER DIEM |
| NO. OF TECS CHECKS | 9 | 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: 01/25/2016 Alternate Recommendation (See Narrative)

Viols WL ONLY and Recall Inspection

| | | 12. TIME ACCOUNTING DATA | |
|---------------------------------|-----------|--------------------------|--|
| ATF OFFICER'S NAME (MONTH, YEAF | R, HOURS) | b)(6) | |
| NOV 2015 | 1.00 | | |
| DEC 2015 | 34.00 | | |
| JAN 2016 | 7.00 | | |
| ATF OFFICER'S SUBTOTAL | 42.00 | ATF OFFICER'S SIGNATURE | |
| TOTAL HOURS | 42.00 | | |
| | | 13. REVIEW AND ROUTING | |

REVIEW COMMENTS AND RECOMMENDATION

Viols WL ONLY and No Recall Inspection

| REVIEWED | CONCUR | SEE COMMENTS | FINAL DISPOSITION | |
|---|--------|--------------|------------------------|--|
| SIGNATURE AND TITLE (b)(6) - Area Supervisor | (b)(6) | | REVIEW DATE 01/29/2016 | |

Assignment and Report

| 1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) | | | 2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 777040-2016-0061-B1B | | | | | | |
|--|--------|--------------------|---|--|--|--|--|--|--|
| KELLY, THOMAS MARSHALL KELLY FIREARMS AND AMMUNI | | 3. PERMIT/LICEN | | | | | | | |
| 72 HWY 607 PICAYUNE,MS 39466, PEARL RIV | | A COLONIA DICA | 164109078L03198 12/31/2015 5. REQUESTED BY (SIGNATURE, TITLE AND DATE) | | | | | | |
| | 13. F | REVIEW AND ROUTING | | | | | | | |
| REVIEW COMMENTS AND RECOMMEND see PII dated 2/01/16 MDWREN | ATION | | | | | | | | |
| Viols WL ONLY and No Recall Insp | ection | | | | | | | | |
| | CONCUR | SEE COMMENTS | FINAL DISPOSITION | | | | | | |
| SIGNATURE AND TITLE MDWREN - DIO | | | REVIEW DATE 02/01/2016 | | | | | | |
| ROUTING SEQUENCE AND DATE 1. 2. 3. 4. | | CONTRO | OL FILE POSTED DATE | | | | | | |

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 KELLY, THOMAS MARSHALL KELLY FIREARMS AND AMMUNITION | Street Address 72 HWY 607 | | City PICAYUNE | State MS | Zip Code 39466- | County PEARL RIVER | Page 1 of 4 Pages |
|---|------------------------------|------------------------------|------------------|--|---------------------------------|-----------------------|----------------------|
| License/Permit/Registry Number (If any) 164109095L03198 | | Expiration Date 11/1/2018 | | the later of the l | of Inspection 1gh 12/09/2015 | | |

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:

The Licensee failed to properly maintain the Acquisition and Disposition records for a Manufacturer per ATF regulations.

(b) (3) - Public Law 112-55 (125 Stat. 552), (b) (3) - (26 USC § 6103) within

the time frame required.

(b) (3) - Public Law 112-55 (125 Stat. 552), (b) (3) - (26 USC § 6103) within the time frame required.

(b) (3) - Public Law 112-55 (125 Stat. 552), (b) (3) - (26 USC § 6103) vithout first recording either the Acquisition or Disposition within the required A & D records.

Citation: 27 CFR 478.123(d)

Date Corrections to be Made:

(If not corrected immediately)

(If not corrected immediately)

Corrective Action to be Taken: Investigator(b)(6) instructed the FFL to properly record the acquisition and disposition o(b) (3) - (26 USC § 6103) firearms within seven (7) business days of receipt or completion of an ATF Form 4473 and completion of the transfer.

(b) (3) - (26 USC § 6103)

Immediately.

were entered into the A & D record (1) (3) (26 USC § 6100) irearm dispositions previously "not reported" were located on a ATF F 4473 and ATF Form 4 and logged out of the A & D record. Corrected

12/9/15

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| Name of Proprietor KELLY, THOMAS MARSHALL KELLY FIREARMS AND AMMUNITION | Street Address 72 HWY 607 | | City PICAYUNE | | State MS | Zip Code 39466- | County PEARL RIVER | Page 2 of 4 Pages |
|---|------------------------------|------------------------------|------------------|-------|-------------|---------------------------------|-----------------------|----------------------|
| License/Permit/Registry Number (If any) 164109095L03198 | | Expiration Date 11/1/2018 | | 100 C | | of Inspection igh 12/09/2015 | | |

Inspection Results

complete

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

handguns the FFL failed to

The licensee failed to report the Multiple Sale of handguns and file an ATF F 3310.4 within the

an ATF F 3310.4 and report the Multiple sale of pistols or revolvers to ATF NTC within the

3) 112 Public Law 55 125

Number: 2

- In

Nature of Violation:

required time frame.

required time frame.

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

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

Investigator(b)(6) instructed the FFL to always fill out an ATF F 3310.4 "Report of Multiple Sale or other Dispositions of Pistols and Revolvers" and report the sale of two (2) or more firearms within five (5) business days to ATF.

Investigator (b)(6) also instructed the FFL to be sure and send a copy of the multiple sale form to the local LEO agency by the close of the business day in which the sale took place.

Corrected Immediately. On December 3rd, 2015, the FFL completed an ATF F 3310.4 for each multiple sale and faxed a copy to both ATF NTC and the local LEO agency.

Citation: 27 CFR 478.126a

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instances involving





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| Name of Proprietor KELLY, THOMAS MARSHALL KELLY FIREARMS AND AMMUNITION | Street Address 72 HWY 607 | | City PICAYUNE | | State MS | Zip Code 39466- | County PEARL RIVER | Page 3 of 4 Pages |
|---|------------------------------|-------|------------------|--|-------------|--------------------|-----------------------|----------------------|
| License/Permit/Registry Number (If any) 164109095L03198 | Expiration Date 11/1/2018 | | | Date(s) or Period of Inspection 12/02/2015 through 12/09/2015 | | | | |
| | | Inspe | ection 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:

The Licensee failed to obtain correct information and certification on Section "A" of ATF F 4473 from the purchaser prior to the transfer of a firearm.

forms, Item #17 was blank. - On

form, Item #17 had errors.

Date Corrections to be Made:

(If not corrected immediately)

(If not corrected immediately)

Corrective Action to be Taken: Investigator (b)(6) instructed the FFL to always review the answers of the purchaser in 'Section A" of ATF F 4473 prior to completion of the form and the transfer of the firearm for accuracy and to always make sure the purchaser properly signs and dates the ATF Form 4473.

> The FFL now has a review system in place to verify that the purchaser enters all required information and properly signs and certifies the ATF F 4473 form in Section "A" prior to the transfer of the firearm.

Citation: 27 CFR 478.124(c)(1)

12/9/15

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| Name of Proprietor KELLY, THOMAS MARSHALL KELLY FIREARMS AND AMMUNITION | Street Address 72 HWY 607 | | City PICAYUNE | | State MS | Zip Code 39466- | County PEARL RIVER | Page 4 of 4 Pages |
|---|------------------------------|---------------------------|------------------|---------|-------------|---------------------------------|-----------------------|----------------------|
| License/Permit/Registry Number (If any) 164109095L03198 | | Expiration Date 11/1/2018 | | 1 19-20 | | of Inspection ogh 12/09/2015 | | |

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:

The Licensee failed to follow the headings and directions on ATF F 4473 and record required information on the form prior to the transfer of a firearm.

Date Corrections to be Made:

(If not corrected immediately)

(If not corrected immediately)

Corrective Action to be Taken: Investigator(b)(6) instructed the FFL to always follow the headings and directions on the ATF F 4473 and record the required information on the form prior to transfer of a firearm.

The FFL now has a review system in place to verify that all

required information is recorded on ATF F 4473 forms.

form, Item #11a had an error.

form, Item #24 and Item #25 were blank.

Citation: 27 CFR 478.21(a)

I Have Received a Copy of This Report of Violations (Proprietor's signature and title) Signature and Title of ATF Officer Date 12 U

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U.S. Department of Justice Bureau of Alcohol, Tobacco, Firearms and Explosives One Galleria Blvd., Suite 1700 Metairie, LA 70001

www.atf.gov

February 2, 2016

777048<mark>(b)(6)</mark> 5373

CERTIFIED MAIL – RETURN RECEIPT REQUIRED Thomas Marshall Kelly Kelly Firearms and Ammunition 72 Highway 607 Picayune, MS 39466 Re: 1-64-109-07-8L-03198

Dear Mr. Kelly:

During a recent compliance inspection at your firearms business covering the period of December 2, 2014 thru December 2, 2015, you were cited for violations of Title 27, Code Of Federal Regulations, Part 478. A copy of the Report of Violations, ATF Form 5030.5, issued at 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(s). You indicated that you understood the requirements of the Federal firearms laws and regulations and 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 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 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.

Thomas Marshall Kelly Kelly Firearms and Ammunition

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



Enclosure

cc: Federal Firearms Licensing Center New Orleans III (IO) Field Office