

Assignment and Report

1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) Sherwood Tactical, LLC 3925 Hwy 61 N Cleveland, MS 38732, Bolivar	2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 777070-2016-0360-B1B		
	3. PERMIT/LICENSE NUMBER 164011076K03548	4a. TARGET DATE 8/30/2016	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, 06/30/2016

8. PURPOSE/SPECIAL INSTRUCTIONS

9. INSPECTION RESULTS		<input type="checkbox"/> CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC		10. TRAVEL EXPENSES (OPTIONAL)	
NO. OF VIOLATIONS	1	NO. OF REFERRALS		2111 - PER DIEM	
NO. OF TECS CHECKS	1	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.	

11. ATF OFFICER'S RECOMMENDATION
Submitted by (b) (6) Industry Operations Investigator
Submitted on: 07/26/2016

Viols WL ONLY and No Recall Inspection

12. TIME ACCOUNTING DATA			
ATF OFFICER'S NAME (MONTH, YEAR, HOURS) (b) (6)			
JUL 2016	28.00		
ATF OFFICER'S SUBTOTAL	28.00	ATF OFFICER'S SIGNATURE	
TOTAL HOURS	28.00		

13. REVIEW AND ROUTING

REVIEW COMMENTS AND RECOMMENDATION
Viols WL ONLY and No Recall Inspection

<input checked="" type="checkbox"/> REVIEWED	<input checked="" type="checkbox"/> CONCUR	<input type="checkbox"/> SEE COMMENTS	<input checked="" type="checkbox"/> FINAL DISPOSITION
SIGNATURE AND TITLE (b) (6) - Area Supervisor			
ROUTING SEQUENCE AND DATE 1. (b) (6) 2. (b) (6) 3. (b) (6) 4. (b) (6)		Digitally signed by (b) (6) 09/02/2016 DN: cn=(b) (6), o=ATF, ou=Jackson II New Orleans Field Division, email=(b) (6)@atf.gov, c=US Date: 2016.09.02 12:54:12 -05'00'	

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 Sherwood Tactical, LLC	Street Address 3925 Hwy 61 N	City Cleveland	State MS	Zip Code 38732-	County Bolivar	Page 1 of 1 Pages
License/Permit/Registry Number (If any) 164011076K03548	Expiration Date 10/1/2016	Date(s) or Period of Inspection 07/11/2015 through 07/11/2016				

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 by the licensed manufacturer to record the sale or other disposition of a firearm.
(b) (3) - (26 USC § 6103), (b) (3) - Public Law 112-55 (125 Stat. 552) was missing from inventory at the time of inspection. The disposition was not recorded in the A&D record.

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

(b) (3) - (26 USC § 6103), (b) (3) - Public Law 112-55 (125 Stat. 552), (b) (6)

Citation: 27 CFR 478.123(d)

I Have Received a Copy of This Report of Violations (Proprietor's signature and title)

Date 7/14/16

Signature and Title of ATF Officer

(b) (6)

IOI

Date 7/14/16



U.S. Department of Justice

**Bureau of Alcohol, Tobacco,
Firearms and Explosives**
*100 W. Capitol; Suite 1403
Jackson, MS 39269*

www.atf.gov

September 2, 2016

777070 (b) (6)
5373

WARNING LETTER

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Mr. Jeffery Sherwood
Sherwood Tactical LLC
3925 Hwy 61 N
Cleveland, MS 38732
RE: 164011076K03548

Dear Mr. Sherwood:

During a recent compliance inspection at your firearms business covering the period of July 11, 2015 through July 11, 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 of the violations were fully explained to you by the Bureau of Alcohol Tobacco Firearms and Explosives (ATF) Investigator. You indicated that you understood the requirements of the firearms laws and regulations. You further indicated 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, will be considered as willful and may result in the revocation of your license.

Please ensure that future compliance is achieved. Should you have any further questions regarding this matter, please contact (b) (6) (b) (6)

Sincerely Yours,

(b) (6)

Area Supervisor

Enclosure

Cc: National Licensing Center
Jackson II Field Office