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. CODE	E, ASSIGNMENT	NO., P.P.C.)
(INCLUDE ZIP CODE AND	COUNTY)					017-0050-B1B	
Bridgetown Gun Shop Bridgetown Gun Shop				3. PERMIT/LICE	NSE NUMBER 4 77G02806	a. TARGET DATE 6/15/2017	4b. TARGET HOURS
24042 Hwy 51 Suite 0					BY (SIGNATURE,		
Crystal Springs,MS 39	9059, Copia	ah					,
6. ATF OFFICER(S) ASSIGN	 IED						
	Lead Inves	tigator					
7. ASSIGNED BY (SIGNATU	JRE, TITLE A	ND DATE)					
(b) (6) , Are	a Supervis	or, 10/06/2016					
8. PURPOSE/SPECIAL INS	TRUCTIONS	,					
9. INSPECTION RESULTS	CHE	CK IF NO VIOLAT	TIONS. ADJUS	TMENTS. ETC	10. TRAV	EL EXPENSES (0	 OPTIONAL)
NO. OF VIOLATIONS	5	NO. OF REFERE			2111 - PEF	-	<u> </u>
NO. OF TECS CHECKS	11	NO. OF TECS H	ITS		2112 - P.O	.A.	
NO. OF TAX		\$ VALUE OF TAX	X INCREASES		2113 - CO	MM. AIR	
ADJUSTMENTS		\$ VALUE OF TAX	X DECREASES	3	2114 - REI	NTAL CAR	
NO. OF ASSESSMENTS		\$ VALUE OF AS	SESSMENTS		2115 - GP	V EXPENSES	
NO. OF CLAIMS		\$ VALUE OF CLA	AIMS		2116 - MIS	SC.	
NO. OF TAX PERIODS		\$ VALUE OF TAX	KES VERIFIED)	TOTAL \$ F	OR INSP.	
11. ATF OFFICER'S RECOM Submitted by (b) (6) Submitted on: 12/08/20	- Indus	N try Operations II	nvestigator				
Viols WL ONLY an	d No Reca	I Inspection					
			12. TIME ACC	COUNTING DATA			
ATF OFFICER'S NAME (MC	ONTH, YEAF	R, HOURS) (b)	(6)				
OCT 2		8.00					
NOV 2		26.00					
DEC 2		1.00					
ATF OFFICER'S SUBTOTAL	-	35.00	ATF OFFICER'S	S SIGNATURE			
TOTAL HOURS		35.00					
			13. REVIEW	AND ROUTING			
REVIEW COMMENTS AND Viols WL ONLY and							
	EVIEWED	CONC CON	UR	SEE COMMENTS	X FINAL DIS		
SIGNATURE AND TITLE	ondoor				REVIEW DA	TE 12/15/20	 16
(b) (6) Area Sup	ervisor					12/13/20	

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. CODE, ASSIGNMENT NO., P.P.C.) 777070-2017-0050-B1B				
Bridgetown Gun Shop, LLC Bridgetown Gun Shop	3. PERMIT/LICENSE NUMBER 164029077G02806	4a. TARGET DATE 6/15/2017	4b. TARGET HOURS		
24042 Hwy 51 Suite C Crystal Springs,MS 39059, Copiah	5. REQUESTED BY (SIGNATURI	E, TITLE AND DATE)			
ROUTING SEQUENCE AND DATE					
☐ 1. ☐ 2. ☐ 3. ☐ 4.	CONTROL FILE POSTE	D DATE			



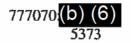
U.S. Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

100 W. Capitol; Suite 1403 Jackson, MS 39269

www.atf.gov

December 15, 2016



WARNING LETTER

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Bridgetown Gun Shop LLC Mr. Paul Westblade 2042 Hwy 51 Suite C Crystal Springs, MS 39059 RE: 164029077G02806

Dear Mr. Westblade:

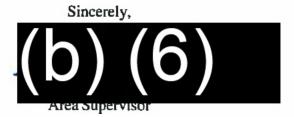
During a recent compliance inspection at your firearms business covering the period of August 21, 2015 through November 10, 2016, you were cited for violations of 27 Code of Federal Regulations, Part 478. The violations were discussed with you during the inspection. A copy of the Report of Violations, 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. October 9 2018 Document Production 372

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 contac (b) (6) at (b) (6)



Enclosure

Cc: National Licensing Center Jackson II Field Office 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 detech one copy from the completed report for their files. Name of Proprietor Street Address City Zip Code State County Page 1 of Bridgetown Gun Shop, LLC MS 24042 Hwy 51 Suite C Crystal Springs 39059-Copiah 3 Pages Bridgetown Gun Shop License/Permit/Registry Number (If any) **Expiration Date** Date(s) or Period of Inspection 164029077G02806 7/1/2017 08/21/2015 through 11/10/2016 Inspection Results An examination of your premises, records and operations has disclosed the following violations which have been explained to you: Number: 1 Date Corrections to be Mode: (If not corrected immediately) Nature of Violation: Corrective Action to be Tuken: Licensec submitted ATF Form 3310.11 (Federal Firearms Failure by the licensed manufacturer to record the sale or other disposition of a firearm. Licensee Firearms Inventory Theft/Loss Report) as (If not corrected immediately) instructed. The missing firearm was included in the instance, a rifle was missing from inventory at the time of inspection. There was no theft/loss report submitted by the licensee on 11/11/16 and related disposition information recorded in the A&D record, no associated ATF Form 4473 recorded in the A&D record as missing inventory with the could be located, and the firearm could not be located on the business premises. associated ATF Incident Number (F20160002446). Citation: 27 CFR 478.123(d) Number: 2 Date Corrections to be Made: (If not corrected immediately) Nature of Violation: Corrective Action to be Taken: Licensee was instructed to only enter a date for item #36 on Failure by the licensee to sign and date the form islance on (If not corrected immediately) the actual date of transfer of a firearm to a non-licensee.

Citation: 27 CFR 478.124(c)(5)

stance, item 36 "Date Transferred" contained an error made by the licensec.

Bureau of Alcohol, Tobocco, 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 Bridgetown Gun Shop, LLC Bridgetown Gun Shop	Street Address 24042 Hwy 51 Suite	·C	City Crystal Springs	State MS	Zip Code 39059-	County Copiah	Page 2 of 3 Pages
License/Permit/Registry Number (If any) 164029077G02806		Expiration Date 7/1/2017		Date(s) or Period 08/21/2015 three	and the second second		

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 furnish all of the information called for on the form 4473 as indicated by the headings on the form and the instructions on or pertaining to the form instances on separate forms.

instance, item 30a "Total Number of Firearms" was left blank by the licensee.

nstances, item 18 "Type of firearm(s) to be transferred" was left blank by the

Citation: 27 CFR 478.21(n)

Number: 4

Nature of Violation:

Prior to making an over-the-counter transfer of a firearm to a non-licensee; failure by the licensee to obtain a Form 4473 showing certification by the transferee that the transferee is not prohibited by the ACT from transporting, shipping, receiving, or possessing a firearm in [7](3)-page 130 instance of (a)(a)-Profice form.

astance, item 17 "Certification Date" contained an error made by the transferee.

Citation: 27 CFR 478,124(c)(1)

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

(If not corrected immediately)

Corrective Action to be Taken: Licensee was instructed to enter all required information on the ATF Form 4473 prior to the transfer of a firearm to a non-licensee.

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

(If not corrected immediately)

Corrective Action to be Taken: Licensee was instructed to verify the buyer's information, including the entry of the correct date of certification, prior to the transfer of a firearm to the non-licensee.

Report of Violations

Name of Proprietor Bridgetown Gun Shop, LLC	Street Address 24042 Hwy 51 Suite C			Stat	c	Zip Code	County Copiah	Page 3 o	
Bridgetown Gun Shop	24042 Hwy St Suite C		Crystal Springs	Ma		39039-	Copian 3 Pag		
License/Permit/Registry Number (If any)	The of the state o				Date(s) or Period of Inspection				
164029077G02806	7/1/2017			08/21/2015 through 11/10/2016					
As an india promote the state of the			ion Results						
An examination of your premises, records and	operations has disclosed the fol	towing violations v	which have been	explained to yo	o:				
Number: 5			D . O		4 8 797				
				tions to be Mo ected immediate	Service Services				
lature of Violation: After the transferee executed the Form 4473,	fallum by the licenses to essen	I on the form the	100	Action to be Th				cord the date in which	
date on which the licensee contacted the NIC			(If not corn	cted immediate	dy)		acted on the associate of a firearm to a non-l	ed ATF Form 4473 pri	
in stance or form.	20 34 43 43 43 45 45 45 45 45 45 45 45 45 45 45 45 45					to the transfer	or a meaning a non-t	ncensee.	
In instance, item 21a "Date the transtransmitted to NICS or the appropriating Sta	sferee's identifying information to agency: (Month/Date/Year)"	in Section A was was left blank by							
the licensee, Station: 27 CFR 478.124(c)(3)(iv)									
seminar: 51 Ct.le 410 [54[C][5][14]									
	One (Betherator's signature a	nd side i						l Dave	
			OE, ME.	MBER				Date 17/22/200	
Have Received a Copy of This Report of Violati		DESTBLA	OE, ME.	MBER	195			Date 17/23/300	
Have Received a Copy of This Report of Violati			o⊵,ME.	MBER				17/22/200	
Have Received a Copy of This Report of Violati	(6) PAUL 1	DESTBLA	0 €, M€.	MBER				17/22/200	