

Assignment and Report

1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) MISSION OUTPOST OUTDOOR OUTFITTERS LLC 14400 HWY Z ST ROBERT, MO 65584, PULASKI	2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 779075-2016-0136-B1B			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">3. PERMIT/LICENSE NUMBER 543169026K11383</td> <td style="width: 33%;">4a. TARGET DATE 11/30/2016</td> <td style="width: 33%;">4b. TARGET HOURS</td> </tr> </table>	3. PERMIT/LICENSE NUMBER 543169026K11383	4a. TARGET DATE 11/30/2016	4b. TARGET HOURS
3. PERMIT/LICENSE NUMBER 543169026K11383	4a. TARGET DATE 11/30/2016	4b. TARGET HOURS		
	5. REQUESTED BY (SIGNATURE, TITLE AND DATE)			

6. ATF OFFICER(S) ASSIGNED

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

7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)

(b)(6), Area Supervisor, 10/02/2015

8. PURPOSE/SPECIAL INSTRUCTIONS

RECALL

9. INSPECTION RESULTS		<input type="checkbox"/> CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC	10. TRAVEL EXPENSES (OPTIONAL)	
NO. OF VIOLATIONS	5	NO. OF REFERRALS		2111 - PER DIEM
NO. OF TECS CHECKS	5	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: 12/06/2016
 The former firearms manager, (b)(6), is listed on the FFL as a responsible person but no longer works for the company and should be removed from the FFL. Mr. Garbinski submitted a letter requesting the removal of (b)(6) to IOI (b)(6) during this on-site inspection. The letter is submitted with this report as Exhibit 1. (b)(6), the new gun counter manager, will not be added to the FFL as a responsible person.

Viols WL ONLY and Recall Inspection

12. TIME ACCOUNTING DATA	
ATF OFFICER'S NAME (MONTH, YEAR, HOURS)	(b)(6)
NOV 2016	15.00
DEC 2016	11.00
ATF OFFICER'S SUBTOTAL	26.00
TOTAL HOURS	26.00
	ATF OFFICER'S SIGNATURE

13. REVIEW AND ROUTING

REVIEW COMMENTS AND RECOMMENDATION

Viols WL ONLY and Recall Inspection

<input checked="" type="checkbox"/> REVIEWED <input checked="" type="checkbox"/> CONCUR <input type="checkbox"/> SEE COMMENTS <input type="checkbox"/> FINAL DISPOSITION	
SIGNATURE AND TITLE (b)(6) - Area Supervisor	REVIEW DATE 12/07/2016

Assignment and Report

1. OPERATING NAME AND ADDRESS (INCLUDE ZIP CODE AND COUNTY) MISSION OUTPOST OUTDOOR OUTFITTERS LLC 14400 HWY Z ST ROBERT, MO 65584, PULASKI	2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.) 779075-2016-0136-B1B		
	3. PERMIT/LICENSE NUMBER 543169026K11383	4a. TARGET DATE 11/30/2016	4b. TARGET HOURS
	5. REQUESTED BY (SIGNATURE, TITLE AND DATE)		

13. REVIEW AND ROUTING

REVIEW COMMENTS AND RECOMMENDATION
Viols WL ONLY and Recall Inspection

REVIEWED CONCUR SEE COMMENTS FINAL DISPOSITION

SIGNATURE AND TITLE WLBOWERS - Director Industry Operations	REVIEW DATE 12/12/2016
--	---------------------------

ROUTING SEQUENCE AND DATE

- 1. _____
- 2. _____
- 3. _____
- 4. _____

CONTROL FILE POSTED DATE _____

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 MISSION OUTPOST OUTDOOR OUTFITTERS LLC	Street Address 14400 HWY Z	City ST ROBERT	State MO	Zip Code 65584-	County PULASKI	Page 1 of 3 Pages
License/Permit/Registry Number <i>(If any)</i> 543169026K11383		Expiration Date 10/1/2019	Date(s) or Period of Inspection 11/29/2016 through 11/29/2016			

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 to complete the ATF F 4473 as required by the directions on or pertaining to the ATF F 4473.

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

Citation: 27 CFR 478.21(a)

Date Corrections to be Made:

(If not corrected immediately)

Corrective Action to be Taken:

(If not corrected immediately)

In the future the Licensee will ensure the ATF F 4473 is completed as required by the directions on or pertaining to the ATF F 4473.

Number: 2

Nature of Violation:

Failure to transfer a long gun to an out of state resident in compliance with the transferee's state of residence; (b)(3) 112 Public Law 55 125 STAT 552

Citation: 27 CFR 478.99(a)

Date Corrections to be Made:

(If not corrected immediately)

Corrective Action to be Taken:

(If not corrected immediately)

In the future the Licensee will comply with all residency restrictions for long gun sales.

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 MISSION OUTPOST OUTDOOR OUTFITTERS LLC	Street Address 14400 HWY Z	City ST ROBERT	State MO	Zip Code 65584-	County PULASKI	Page 2 of 3 Pages
License/Permit/Registry Number <i>(If any)</i> 543169026K11383		Expiration Date 10/1/2019	Date(s) or Period of Inspection 11/29/2016 through 11/29/2016			

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 ensure complete transferee information was obtained and noted on the ATF F 4473 prior to the transfer of a firearm.

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

Citation: 27 CFR 478.124(c)(1)

Date Corrections to be Made:

(If not corrected immediately)

Corrective Action to be Taken:

(If not corrected immediately)

In the future the Licensee will ensure that complete transferee information is obtain and recorded on the ATF F 4473 prior to the transfer of a firearm.

Number: 4

Nature of Violation:

Failure to note complete NICS information on the ATF F 4473.

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

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

Date Corrections to be Made:

(If not corrected immediately)

Corrective Action to be Taken:

(If not corrected immediately)

In the future the Licensee will ensure that complete NICS information is recorded on the ATF F 4473.

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 MISSION OUTPOST OUTDOOR OUTFITTERS LLC	Street Address 14400 HWY Z	City ST ROBERT	State MO	Zip Code 65584-	County PULASKI	Page 3 of 3 Pages
License/Permit/Registry Number <i>(If any)</i> 543169026K11383		Expiration Date 10/1/2019	Date(s) or Period of Inspection 11/29/2016 through 11/29/2016			

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 timely log the acquisition of a firearms in (b)(3) 112 Pub instance. Failure to log the disposition of firearms in (b)(3) 112 Pub instances. Failure to accurately record an importer or serial number for a firearms in (b)(3) 112 Pub & LHM instances. Failure to accurately log the date and from whom a firearms was acquired on (b)(3) 112 Public Law 55 125 STAT 562 entries. Failure to log complete (FFL#, 4473#, and/ or date) disposition information on (b)(3) 112 Public Law 55 125 STAT) ATF F 4473s.

Citation: 27 CFR 478.125(e)

Date Corrections to be Made: 12/05/2016

(If not corrected immediately)

Corrective Action to be Taken:

(If not corrected immediately)

The Licensee was instructed to research required record to determine the missing acquisition and disposition information for firearms untimely logged. The Licensee will make the required corrects to the A&D Record including correcting incomplete acquisition and disposition information.

I Have Received a Copy of This Report of Violations <i>(Proprietor's signature and title)</i>	Date
Signature and Title of ATF Officer	Date

Kansas City, MO 64116

December 6, 2016

Mission Outpost Outdoor Outfitters LLC
14400 Hwy Z
St. Robert, MO 65584
543169029K11383

Dear Mr. Blough and Mr. Garbinski:

During a recent inspection at your firearms business on November 29, 2016 covering the period of November 1, 2015 to November 29, 2016, you were cited for violations of Title 27, Code of Federal Regulations, Part 478. The violations were discussed with you during the inspection. A copy of the amended Report of Violations, ATF F 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. 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 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 (b)(6), Industry Operations Investigator, Springfield, MO Field Office at (b)(6).

Sincerely yours,

(b)(6)
Area Supervisor, KC VI

Enclosure