

## Assignment and Report

|   |  |  |                        |                         |
|---|--|--|------------------------|-------------------------|
| <b>1. OPERATING NAME AND ADDRESS</b><br>(INCLUDE ZIP CODE AND COUNTY)<br>HANSON, KEITH ALAN<br>READY RESERVES<br>4639 CORONA DRIVE STE 64<br>CORPUS CHRISTI, TX 78411, NUECES | <b>2. U.I. NUMBER (ORG. SEG. CODE, ASSIGNMENT NO., P.P.C.)</b><br>782110-2016-0400-B1B   |  |                        |                         |
|   | <table border="1" style="width: 100%; border-collapse: collapse;"><tr><td style="width: 33%;"><b>3. PERMIT/LICENSE NUMBER</b><br/>574355015K05839</td><td style="width: 33%;"><b>4a. TARGET DATE</b></td><td style="width: 33%;"><b>4b. TARGET HOURS</b></td></tr></table> | <b>3. PERMIT/LICENSE NUMBER</b><br>574355015K05839 | <b>4a. TARGET DATE</b> | <b>4b. TARGET HOURS</b> |
| <b>3. PERMIT/LICENSE NUMBER</b><br>574355015K05839  | <b>4a. TARGET DATE</b>   | <b>4b. TARGET HOURS</b>                            |                        |                         |
|   | <b>5. REQUESTED BY (SIGNATURE, TITLE AND DATE)</b>   |  |                        |                         |

  

|   |  |
|---|--|
| <b>6. ATF OFFICER(S) ASSIGNED</b><br>(b)(6) - Assigned Investigator<br>(b)(6) - Assigned Investigator<br>(b)(6) - Assigned Investigator<br>(b)(6) - Lead Investigator |  |
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| <b>7. ASSIGNED BY (SIGNATURE, TITLE AND DATE)</b><br>(b)(6), Area Supervisor, 07/13/2016 |  |
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| <b>8. PURPOSE/SPECIAL INSTRUCTIONS</b> |  |
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|                              |   |                                       |  |                     |  |
|------------------------------|---|---------------------------------------|--|---------------------|--|
| <b>9. INSPECTION RESULTS</b> | <input type="checkbox"/> CHECK IF NO VIOLATIONS, ADJUSTMENTS, ETC | <b>10. TRAVEL EXPENSES (OPTIONAL)</b> |  |                     |  |
| NO. OF VIOLATIONS            | 2   | NO. OF REFERRALS                      |  | 2111 - PER DIEM     |  |
| NO. OF TECS CHECKS           | 17  | 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.  |  |

  

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| <b>11. ATF OFFICER'S RECOMMENDATION</b><br>Submitted by (b)(6) - Industry Operations Investigator<br><br>Submitted on: 10/21/2016<br><br>Viols WL ONLY and No Recall Inspection |  |
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| <b>12. TIME ACCOUNTING DATA</b>         |        |
| ATF OFFICER'S NAME (MONTH, YEAR, HOURS) | (b)(6) |
| OCT 2016                                | 11.00  |
| ATF OFFICER'S SUBTOTAL                  | 11.00  |
| ATF OFFICER'S SIGNATURE                 |        |
| ATF OFFICER'S NAME (MONTH, YEAR, HOURS) | (b)(6) |
| OCT 2016                                | 10.00  |
| ATF OFFICER'S SUBTOTAL                  | 10.00  |
| ATF OFFICER'S SIGNATURE                 |        |
| ATF OFFICER'S NAME (MONTH, YEAR, HOURS) | (b)(6) |
| OCT 2016                                | 36.00  |
| ATF OFFICER'S SUBTOTAL                  | 36.00  |
| ATF OFFICER'S SIGNATURE                 |        |
| TOTAL HOURS                             | 57.00  |

## Assignment and Report

|  |   |                 |                  |
|--|---|-----------------|------------------|
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|  | 3. PERMIT/LICENSE NUMBER<br>574355015K05839                                     | 4a. TARGET DATE | 4b. TARGET HOURS |
|  | 5. REQUESTED BY (SIGNATURE, TITLE AND DATE)                                     |                 |                  |
|  |   |                 |                  |

### 13. REVIEW AND ROUTING

REVIEW COMMENTS AND RECOMMENDATION  
Viols WL ONLY and No Recall Inspection

☒ REVIEWED

☒ CONCUR

☐ SEE COMMENTS

☒ FINAL DISPOSITION

|   |        |                           |
|---|--------|---------------------------|
| SIGNATURE AND TITLE<br>(b)(6) - Area Supervisor | (b)(6) | REVIEW DATE<br>10/21/2016 |
|---|--------|---------------------------|

ROUTING SEQUENCE AND DATE

- ☐ 1. \_\_\_\_\_
- ☐ 2. \_\_\_\_\_
- ☐ 3. \_\_\_\_\_
- ☐ 4. \_\_\_\_\_

CONTROL FILE POSTED DATE \_\_\_\_\_



U.S. Department of Justice

Bureau of Alcohol, Tobacco,  
Firearms and Explosives

*McAllen II Field Office*

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OCT 21 2016

*McAllen, TX 78504*

[www.atf.gov](http://www.atf.gov)

CERTIFIED MAIL- RETURN RECEIPT REQUESTED

782110: EDS  
1000

Keith A Hanson  
d/b/a Ready Reserves  
4639 Corona Drive, Ste. 64  
Corpus Christi, TX 78411

REF: 5-74-355-01-5K-05839

Dear Mr. Hanson:

During a recent compliance inspection at your firearms business covering the period of May 8, 2015 to October 19, 2016 you were cited for violations of 27 Code of Federal Regulations, Part 48. A copy of the Report of Violations, Form 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) IO Investigator(s). 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.

Keith A Hanson

Should you have any questions regarding this matter, please contact (b)(6), Area Supervisor at (b)(6).

Sincerely yours

(b)(6)

Area Supervisor, McAllen II

Enclosure

c: National Firearms Licensing Center  
McAllen II Area Office

## 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<br>HANSON, KEITH ALAN<br>READY RESERVES        | Street Address<br>4639 CORONA DRIVE STE 64 | City<br>CORPUS CHRISTI       | State<br>TX  | Zip Code<br>78411- | County<br>NUECES | Page 1 of<br>2 Pages |
| License/Permit/Registry Number <i>(If any)</i><br>574355015K05839 |  | Expiration Date<br>10/1/2018 | Date(s) or Period of Inspection<br>10/18/2016 through 10/19/2016 |                    |                  |                      |

### 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 obtain a properly completed ATF Form 4473, Section A, prior to making an over-the-counter transfer of a firearm to a non-licensee on two (2) forms:

(b)(3), Public Law 112-55, 125 Stat 552, (b)(6)

#### Date Corrections to be Made:

*(If not corrected immediately)*

#### Corrective Action to be Taken:

*(If not corrected immediately)*

Preventative measures were discussed with the licensee. In the future the licensee will ensure the ATF Form 4473 is properly completed prior to the transfer of a firearm.

Citation: 27 CFR 478.124(c)(1)

## Report of Violations

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|  |  |                              |  |                    |                  |                      |
|--|--|------------------------------|--|--------------------|------------------|----------------------|
| Name of Proprietor<br>HANSON, KEITH ALAN<br>READY RESERVES | Street Address<br>4639 CORONA DRIVE STE 64 | City<br>CORPUS CHRISTI       | State<br>TX  | Zip Code<br>78411- | County<br>NUECES | Page 2 of<br>2 Pages |
| License/Permit/Registry Number (If any)<br>574355015K05839 |  | Expiration Date<br>10/1/2018 | Date(s) or Period of Inspection<br>10/18/2016 through 10/19/2016 |                    |                  |                      |

### 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:

Failure to prepare and submit a report of multiple sales or other disposition (ATF Form 3310.4) whenever the licensee sells or otherwise disposes of, two or more pistols, or revolvers, or any combination of pistols or revolvers totaling two or more to an unlicensed person at one time or during any five consecutive business days on three (3) forms:

(b)(3), Public Law 112-55, 125 Stat 552, (b)(6)

(b)(3), Public Law 112-55, 125 Stat 552, (b)(6)

(b)(3), Public Law 112-55, 125 Stat 552, (b)(6)

Citation: 27 CFR 478.126a

#### Date Corrections to be Made:

(If not corrected immediately)

#### Corrective Action to be Taken:

(If not corrected immediately)

The missing ATF Forms 3310.4 (Report of multiple sales or other disposition) were submitted. Preventative measures were discussed with the licensee. In the future the licensee will check ATF Form 4473 for potential multiple sales prior to filing.

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| I Have Received<br>(b)(6)<br>OWNER                  | Date<br>10-19-2016 |
| Signature and Title of ATF Officer<br>(b)(6)<br>IOI | Date<br>10-19-16   |