

# CERTIFICATE OF ARMS STORAGE

## SECTION I – ORGANIZATION INFORMATION

1. Organization Name:

2. City:

3. State:

## SECTION II – ARMS STORAGE INFORMATION

Rifles received from the US Army TACOM Life Cycle Management Command will be stored as specified below:

### (Check Only One)

In the arms room of a National Guard Armory, US Army Reserve Center, Military installation, or local Law Enforcement Agency.

In a secured room located within the organization inaccessible to the general public.

Other. Please specify \_\_\_\_\_.

## SECTION III – ACKNOWLEDGEMENT

I hereby certify that to the best of my knowledge and belief this storage facility meets the requirements of local, state and federal laws applicable to the security of firearms and that all of my statements are true, correct, complete and made in good faith. I understand and acknowledge that concealing material fact and/or making a false statement is a violation of Title 18 USC §1001 and may result in the cancellation of the Conditional Deed for any US Army property on loan to my organization and is punishable by fine or imprisonment.

1. Signature of Highest Ranking Official:

2. Date Signed:

3. Printed Name of Person Signing (First, Middle Initial, Last):

4. Title of Signer:

5. Organization Telephone Number:

6. Organization Email Address:

**Mail to:** US ARMY TACOM LCMC, ATTN: AMSTA-LCL-IWD, M/S 419D, 6501 East 11 Mile Road, Warren, MI 48397-5000

**ADPO R-1, March 2015**