QUALIFICATION CHECKLIST FOR CEREMONIAL RIFLES RECOGNIZED VETERANS' ORGANIZATIONS

SECTION I – REQUESTING ORGANIZATION INFORMATION			
1. Organization Name:	2. Mailing Address:		3. City/State/Zip Code:
4. Telephone Number:	5. Organization Email Addr		6. Name of Representative:
SECTION II – ORGANIZATION CONTACT INFORMATION (IF DIFFERENT THAN ABOVE)			
1. Mailing Address:		2. City/State/Zip Code:	
3. Telephone Number:		4. Email Address:	
SECTION III – REQUIRED INFORMATION			
Number of Active Organization Members		Number of Honor Guard Members	
Number of Rifles You Currently Have (complete attached inventory form) A. Number of New and/or Replacer rifles required			
SECTION IV – SHIPPING ADDRESS FOR NEW RIFLES			
Shipping Address for the new rifles <u>cannot be a private residence or PO Box</u> . <u>Must be open during</u> <u>normal business hours 9 am to 5 pm Monday thru Friday</u> . Please note that we <u>cannot</u> notify you when the rifles will be shipped.			
Business Name:	2. Business Hours:		3. Business Telephone Number:
4. Street Address:	5. City/State/		Code:
SECTION V – REQUESTED DOCUMENTS			
All documents outlined below must be signed by the highest ranking official for the organization			
Written Request sent to national headquarters for verification that the organization is in good standing. National headquarters will forward your request to the Army Donations Program at TACOM for processing.			
Certificate of Arms Storage (enclosed)			
Certificate of Compliance with Title 10 USC §4683 (enclosed)			
Ceremonial Rifle Inventory (enclosed) Privacy Act Notice (enclosed)			

Mail to: US ARMY TACOM LCMC, ATTN: AMSTA-LCL-IWD, M/S 419D, 6501 East 11 Mile Road, Warren, MI 48397-5000 ADPO RC-R, March 2015