

Standard Operating Procedure (SOP)

AMMUNITION STORAGE

TXSG SOP 4120.10
12 AUGUST 2021

Texas State Guard (TXSG)
PO Box 5218
Austin, TX 78763

OPR: Chief of Logistics, TXSG (T4, TXSG)



ROBERT J. BODISCH, SR.
MG, TXSG
Commanding

Summary. This SOP provides guidance to the Texas State Guard for procedures for storing ammunition.

Applicability. This SOP applies to all units and all personnel in TXSG.

Management Control Process. This SOP references management control processes established in TMD (Texas Military Department) and Department of the Army Regulatory requirements.

Proponent and Exception Authority. The proponent for this SOP is the T4, TXSG. The T4 has the authority to approve exceptions to this SOP that are consistent with controlling law and regulation.

Supplementation. Supplementation of this SOP or establishment of command and local forms on the TXSG procedures for the storing of ammunition is prohibited without prior approval from the Commanding General (TXSG), through the T4, ATTN: NGTX- TLG, P.O. Box 5218, Austin, TX 78763-5218.

Suggested Improvements. Users are invited to send comments and suggested improvements concerning this SOP directly to the T4, ATTN: NGTX-TZ, P.O. Box 5218, Austin, TX 78763-5218.

Distribution. A

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Chapter 1 Introduction

References

- a. AR 385-10, The Army Safety Program, February 2017
- b. AR 190-11, Physical Security of Arms, Ammunition and Explosives, January 2019
- c. DA Pam 385-64, Ammunition and Explosives Safety Standards, October 2013
- d. DA PAM 710-2-1, Using Unit Supply System (Manual Procedures), December 2016

Purpose. To establish responsibilities and procedures for the storage of ammunition. In a unit's approved location.

General.

a. Ammunition will be issued and stored at brigade level when all requirements in this Standard Operating Procedure (SOP) for Ammunition Storage are met.

b. Duty and training quantities of ammunition will be stored in a specified approved location.

- 1) Duty Ammunition. Used to meet physical security requirements.
- 2) Training Ammunition. Used at an approved range for proficiency or qualification purposes.

Chapter 2 Administrative Requirements.

a. Inspection of the storage area using the TXSG Arms Room Inspection Checklist to identify risks associated with ammunition storage. Inspection results are good for one (1) year and will be maintained in the approved storage location.

b. Risk Assessment Worksheet for ammunition storage will be completed and signed to document risks and controls associated with ammunition storage. Overall risk approval levels: Low = Company Commander, Medium = Battalion Commander, High = 1st O6 in chain. The risk assessment worksheet is good for one (1) year and will be posted in the approved storage location.

c. A valid Ammunition Storage License will be maintained and posted in the approved storage area. The ammunition storage license will be signed by the TXSG Ammunition Safety Officer and the local Commander. Storage licenses are good for one (1) year,

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until there is a change of command, or a change in the type/quantity of ammunition stored; and will be posted in the approved location.

d. A valid Security Construction Statement (SCS) will be maintained and posted in the approved storage area. An SCS is good for five (5) years and will be posted in the approved location.

Chapter 3 Storage Conditions.

a. Remain in their original packaging and not be stored in weapons magazines. One outer pack of 9mm of operational ammunition can be opened for use.

b. Be stored in metal containers or cabinets secured with a padlock outside the vicinity of combustibles, solvents, petroleum products or radioactive items. If the storage container weighs less than 500lbs it should be fastened to the structure with bolts or chains.

c. Be stored in compliance with compatibility requirements, specified in chapter seven of DA Pam 385-64.

d. Be stored with a minimum of two fire extinguishers, suitable for the hazards involved, available for immediate use.

e. Be stored with the appropriate fire symbol affixed to the outside of the storage facility and any container ammunition is stored in. A WARNING-RESTRICTED AREA sign and an Access Roster will be posted on the access doors to the storage area.

f. Be stored with keys for locks in different locations when ammunition is stored in the same area. The number of keys will be held to a minimum.

g. Be stored at least 18" from any heat source (radiators, heaters, hot water pipes).

Chapter 4 Operational/Inventory Requirements. Personnel who supervise ammunition storage operations will:

a. Always abide by the Cardinal Rule: Expose the minimum number of people for the minimum time to the minimum amount of ammunition.

b. Ensure ammunition is inventoried monthly. Submit completed inventories to T4 NLT: 5th day of every month. Brigade will keep copies the ammunition inventories for one year.

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c. Ensure all personnel who routinely work where ammunition is stored are briefed annually on the risks associated with ammunition storage using both this approved SOP and the Risk Assessment Worksheet. All personnel are required to sign the SOP, annually, documenting their understanding of the requirements.

d. Ensure TXSG units comply with all locally required ammunition storage requirements. In the event a conflict exists between this requirement and another requirement, the more protective or stringent standard will be applied.

e. Ensure all requirements associated with the issue and turn in of ammunition are complied with.

f. Ammunition will be issued on hand receipted on a TXSG Form 4420.10 05OCT20 for consumption accountability.

Chapter 5 Requesting Ammo and Disposing of Residue

a. Ammo will be requested and purchased by the T4 Section Point of Contact (POC). T4 Section POC will pick-up the requested ammunition and conduct a joint inventory with T4 Asset Manager for storage.

b. Copies of the receipts, lateral transfers, donations of ammo, any documents applicable to the acquisition of ammunition will be kept for 1 year.

c. ICS213 RR form will be used when requesting ammo for missions or training events. The ICS213 RR will be approved (signature in block 10) by Chief of Staff or his representative. Representatives will be on file on Notice of Delegation of Authority (DA Form 1687).

e. Properly transport and conduct the turn-in of ammunition.

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ENCLOSURES TO FOLLOW

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Enclosure 1. TXSG Arms Room Inspection Checklist

TEXAS STATE GUARD ROOM INSPECTION CHECKLIST FOR STORAGE OF AMMUNITION		
UNIT		
ADDRESS:		BLDG/RM:
COMPLETED BY:		PHONE:
DATE OF INSPECTION:		
NOTE: All potential discrepancies may not be addressed with a checkpoint below. See Remarks. Basic references used for this inspection are DA PAM 385-64, SB 742-1, DA PAM 710-2-1 and AR 190-11.		
ITEM	Satisfactory	Unsatisfactory
1. Is the correct fire symbol posted on the entrance to the storage facility and on any containers Arms&Explosives is stored in? DA PAM 385-64, Para 6-14c		
2. Is there a memo signed by the Commander specifying the type and quantity of Arms &Explosives required to be stored posted in the storage area? AR 190-11 Para 5-8(c)		
3. Is there a valid explosive license for Arms Room? AR 385-10 Para 5-7 (N/A for TXSG)		
4. Is there a valid Security Construction Statement (DA Form 4604)? (signed by CFMO) AR 190-11 Para 2-2d		
5. Is there a Risk Assessment Worksheet (DD Form 2977) completed & signed by the current commander? DA PAM 385-64, Para 8-3		
6. Is there a current SOP covering ammunition storage and handling? DA PAM 385-64 Para 2-4		
7. Are there 2ea serviceable 10:BC Fire Extinguishers available for immediate use? DA PAM 385-64, Para 6-10		
8. Is there a NO SMOKING sign posted at the entrance to the facility? DA PAM 385-64, Para 6-3b(7)		
9. Is there a record of monthly inventories being conducted? DA PAM 710-2-1, Para 9-9a (N/A for initial inspections)		
10. Do the supporting documents (hand receipt, property book, etc) match the quantities and lot numbers of munitions on hand? DA PAM 710-2-1 (N/A for initial inspections)		
11. Do the head stamps on the small arms concur with the LOT numbers on record and the lot numbers indicated on the outer pack? MIL STD 1168C, 6.3 (N/A for TXSG)		
12. Are the ammunition cans or boxes marked properly with the NSN, DODIC, QTY, NOMENCLATURE, and LOT number? MIL STD 129P Chap 4 (N/A for TXSG)		
13. Are munitions stored in their original container with original packaging? One outer pack of ammo may be opened for guard or military police forces AR 190-11, Para 8-3e		
14. Are munitions stored in a metal container or cabinet secured with a secondary padlock? If the container weighs less than 500lbs, is it fastened to the structure with another padlock? AR 190-11 Para 5-8c		

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15. Is the ammunition separated by DODIC and LOT number in individual containers and is there adequate ventilation throughout the stacks? DA PAM 385-64, Para 3-1b <p style="text-align: center;">(N/A for TXSG)</p>		
16. Is the ammunition in serviceable condition? DA Pam 385-64 Para 3-2h		
17. Is there at LEAST 18 inches between the ammunition and any heat source like heaters, radiators, hot water pipes, etc.? DA PAM 385-64 Para 3-1b		
18. Is the arms room itself neat and orderly, with good housekeeping practices? No excess trash, dirt, oily rags, etc. DA PAM 385-64 Para 2-7		

LIST ALL A&E STORED

TYPE (Op/Ceremonial/Trng)	DODIC	LOT #	QUANTITY	DATE ISSUED
<i>i.e. 5.56mm Security/Operational</i>	<i>A058</i>	<i>LC-95M102-003</i>	<i>200 rds</i>	<i>15SEP2016</i>

REMARKS:

RESULTS OF ARMS ROOM INSPECTION: PASS FAIL

IF FAIL, Date of Scheduled Re-inspection: _____

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Enclosure 2. Risk Management Worksheet, pages 10-13

DELIBERATE RISK ASSESSMENT WORKSHEET					
1. MISSION/TASK DESCRIPTION STORAGE OF OPERATIONAL/CEREMONIAL/CONTINGENCY/TRNG AMMUNITION				2. DATE (DDMM/YYYY)	
3. PREPARED BY					
a. Name (Last, First, Middle Initial) YOUR NAME			b. Rank/Grade	c. Duty Title/Position YOUR POSITION	
d. Unit YOUR UNIT		e. Work Email YOUR EMAIL		f. Telephone (DSN/Commercial (include Area Code))	
g. UIC/CIN (as required)		h. Training Support/Lesson Plan or OPORD (as required)		i. Signature of Preparer	
Five steps of Risk Management: (1) Identify the hazards (2) Assess the hazards (3) Develop controls & make decisions (4) Implement controls (5) Supervise and evaluate (Step numbers not equal to numbered items on form)					
4. SUBTASK/SUBSTEP OF MISSION/TASK	5. HAZARD	6. INITIAL RISK LEVEL	7. CONTROL	8. HOW TO IMPLEMENT/ WHO WILL IMPLEMENT	9. RESIDUAL RISK LEVEL
Storage of Ammunition	Loss of accountability of Ammunition	L	Establish accountability of ammo stored in arms room IAW TXSG SOP	How: Initial Inventory/Inspection Who: T4, G4, Appointed POC	L
		L	All Ammo will be signed out by the number of rounds requested.	How: Round Count per Person Who: T4, G4, Appointed POC	L
		L	Monthly inspections of rounds by type, quantity, damaged and faulty, and supporting paperwork	How: CSDP Inspections; Spot checks Who: T4, G4, Appointed POC	L
		L	Ammo will be stored in original containers which will remain in the safe, when not in use.	How: Monthly CSDP Inspection Who: T4, G4, Appointed POC	L
		L	Each ammunition containers seal will be inspected upon opening the safe.	How: Initial Inventory/Inspection Who: T4, G4, Appointed POC	L
Additional entries for Items 6 through 9 are provided on page 2.					
10. OVERALL RESIDUAL RISK LEVEL (All controls implemented): <input type="checkbox"/> EXTREMELY HIGH <input type="checkbox"/> HIGH <input type="checkbox"/> MEDIUM <input checked="" type="checkbox"/> LOW					
11. OVERALL SUPERVISION PLAN AND RECOMMENDED COURSE OF ACTION The Ammo SOP, Command Supply Discipline program, TXSG SAV Checklist, T4 Deputy Asset Manager, Brigade G4 Command, and Appointed POC (if applicable) will ensure compliance with all published standards, procedures, and controls identified on this worksheet. Active risk analysis will Identify, Evaluate, & Mitigate any additional risks, as they arise.					
12. APPROVAL OR DISAPPROVAL OF MISSION OR TASK <input type="checkbox"/> APPROVE <input type="checkbox"/> DISAPPROVE					
a. Name (Last, First, Middle Initial)		b. Rank/Grade	c. Duty Title/Position		d. Signature of Approval Authority
e. Additional Guidance:					

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DELIBERATE RISK ASSESSMENT WORKSHEET					
4. SUBTASK/SUBSTEP OF MISSION/TASK	5. HAZARD	6. INITIAL RISK LEVEL	7. CONTROL	8. HOW TO IMPLEMENT/ WHO WILL IMPLEMENT	9. RESIDUAL RISK LEVEL
Storage of Ammunition	Segregation of different types of ammunition	L	Ammo will be stored separately in the original boxes, containers, sealed or by count.	How: Monthly Inspection Who: T4, G4, Appointed POC	L
Storage of Ammunition	Fire @ the A&E Storage Site.	L	At least two fire extinguishers will be kept where the ammo is stored at all times.	How: Monthly Inspection Who: T4, G4, Appointed POC	L
		L	Proper Signs will be posted on the ammo room door, denoting it contains an explosive hazard	How: SOP, Monthly Inspection Who: T4, G4, Appointed POC	L
		L	Grass initially & routinely cleared 50' around the storage site, no smoking allowed within 100'	How: SOP, Monthly Inspection Who: T4, G4, Appointed POC	L
Storage of Ammunition	Degradation of ammunition	L	Ammunition will be inspected monthly for any signs of degradation	How: Monthly Inspection Who: T4, G4, Appointed POC	L
		L	A dehumidifier will be used in the arms safe, area, if applicable.	How: Monthly Inspection Who: T4, G4, Appointed POC	L
Storage of Ammunition	Not having Ammo/ inability to react to force protection	L	Outer doors to common access area locked when not in use.	How: Daily Checks Who: T4, G4, Appointed POC	L
Personnel Entry to Storage Site	Unauthorized or non-essential personnel in AE storage area	L	Develop personnel access roster to AE storage site.	How: Ammo SOP, Monthly Inspection Who: T4, G4, Appointed POC	L
Storage of Brass/Residue/Unserviceable AE	Mixing storage of brass/residue/unserviceable AE with live AE	L	Brass/Residue/Unserviceable ammo will be turned-in, disposed off, to applicable facility.	How: As required Who: T4, G4, Appointed POC	L
Personnel guarding/working in storage site	Untrained personnel working in storage site	L	All personnel working near ammo safe will be briefed on all requirements associated with their job	How: Ammo SOP Who: T4, G4, Appointed POC	L
				How: Who:	
				How: Who:	
				How: Who:	
				How: Who:	

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DELIBERATE RISK ASSESSMENT WORKSHEET					
Risk Assessment Matrix	Probability <i>(expected frequency)</i>				
	Frequent: Continuous, regular, or inevitable occurrences	Likely: Several or numerous occurrences	Occasional: Sporadic or intermittent occurrences	Seldom: Infrequent occurrences	Unlikely: Possible occurrences but improbable
Severity <i>(expected consequence)</i>	A	B	C	D	E
Catastrophic: <i>Death, unacceptable loss or damage, mission failure, or unit readiness eliminated</i>	I	EH	EH	H	M
Critical: <i>Severe injury, illness, loss, or damage; significantly degraded unit readiness or mission capability</i>	II	EH	H	H	M
Moderate: <i>Minor injury, illness, loss, or damage; somewhat degraded unit readiness or mission capability</i>	III	H	M	M	L
Negligible: <i>Minimal injury, loss, or damage; little or no impact to unit readiness or mission capability</i>	IV	M	L	L	L
Legend: EH – extremely high risk H – high risk M – medium risk L – low risk					
13. RISK ASSESSMENT REVIEW <i>(Required when assessment applies to ongoing operations or activities)</i>					
a. Date	b. Last Name	c. Rank/Grade	d. Duty Title/Position	e. Signature of Reviewer	
14. FEEDBACK AND LESSONS LEARNED					
16. ADDITIONAL COMMENTS OR REMARKS					

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Instructions for Completing DD Form 2977, "Deliberate Risk Assessment Worksheet"	
<p>1. Mission/Task Description: Briefly describe the overall Mission or Task for which the deliberate risk assessment is being conducted.</p>	<p>10. Overall Risk After Controls are Implemented: Assign an overall residual risk level. This is the highest residual risk level (from block 9).</p>
<p>2. Date (DD/MM/YYYY): Self Explanatory.</p>	<p>11. Supervision Plan and Recommended Course of Action: Completed by preparer. Identify specific tasks and levels of responsibility for supervisory personnel and provide the decision authority with a recommend course of action for approval or disapproval based upon the overall risk assessment.</p>
<p>3. Prepared By: Information provided by the individual conducting the deliberate risk assessment for the operation or training . Legend: UIC - Unit Identification Code; CIN - Course ID Number; OPORD - operation order; DSN - defense switched network; COMM - commercial</p>	<p>12. Approval/Disapproval of Mission/Task: Risk approval authority approves or disapproves the mission or task based on the overall risk assessment, including controls, residual risk level, and supervision plan. Space provided for authority to provide additional guidance; use continuation page if needed.</p>
<p>4. Sub-task/Sub-Step of Mission/Task: Briefly describe all subtasks or substeps that warrant risk management.</p>	<p>13. Risk Assessment Review: Should be conducted on a regular basis. Reviewers should have sufficient oversight of the mission or activity and controls to provide valid input on changes or adjustments needed. If the residual risk rises above the level already approved, operations should cease until the appropriate approval authority is contacted and approves continued operations.</p>
<p>5. Hazard: Specify hazards related to the subtask in block 4.</p>	<p>14. Feedback and Lessons Learned: Provide specific input on the effectiveness of risk controls and their contribution to mission success or failure. Include recommendations for new or revised controls, practicable solutions, or alternate actions. Submit and brief valid lessons learned as necessary to persons affected.</p>
<p>6. Initial Risk Level: Determine probability and severity. Using the risk assessment matrix (page 3), determine level of risk for each hazard specified. probability, severity and associated Risk Level; enter level into column.</p>	<p>15. Additional Comments or Remarks: Preparer provides additional comments, remarks, or information to support the risk assessment. If block 15 is used as a continuation of block 14, strike through the block number and title.</p>
<p>7. Control: Enter risk mitigation resources/controls identified to abate or reduce risk relevant to the hazard identified in block 5.</p>	<p>Additional Guidance: Block 4-9 continuance page may be reproduced as necessary for processing of all subtasks/ substeps of the mission/task. If a complete page is not utilized, write "NOTHING FOLLOWS" on the first unused row, immediately after the final item assessed.</p>
<p>8. How to Implement / Who Will Implement: Briefly describe the means of employment for each control (i.e., OPORD, briefing, rehearsal) and the name of the individual unit or office that has primary responsibility for control implementation.</p>	
<p>9. Residual Risk Level: After controls are implemented, determine resulting probability, severity, and residual risk level.</p>	

DD FORM 2977 INSTRUCTIONS, JAN 2014

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Enclosure 3. ICS 213 RR

RESOURCE REQUEST (ICS 213 RR), Adapted for FDA

1. Incident Name:			2. Date/Time			3. Resource Request Number:					
Requestor	4. Order (Use additional forms when requesting different resource sources of supply.):										
	Qty.	Kind	Type	Detailed Item Description: (Vital characteristics, brand, specs, experience, size, etc.)	Cost	5. Resource Status					
						Received by	Date/Time	Assigned to	Released to	Date/Time	
6. Requested Delivery/Reporting Location:											
7. Suitable Substitutes and/or Suggested Sources:											
8. Requested by Name/Position:					9. Priority: <input type="checkbox"/> Urgent <input type="checkbox"/> Routine <input type="checkbox"/> Low			10. Section Chief Approval:			
Logistics	11. Logistics Order Number:					12. Supplier Phone/Fax/Email:					
	13. Name of Supplier/POC:										
	14. Notes:										
	15. Approval Signature of Auth Logistics Rep:					16. Date/Time:					
17. Order placed by:											
Finance	18. Reply/Comments from Finance:										
	19. Finance Section Signature:					20. Date/Time:					
ICS 213 RR, Page 1											

Updated by FDA 2/2011

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Enclosure 4. Notice of Delegation of Authority, DA 1687

NOTICE OF DELEGATION OF AUTHORITY - RECEIPT FOR SUPPLIES					DATE
<i>For use of this form, see DA PAM 710-2-1. The proponent agency is DCS, G-4.</i>					
AUTHORIZED REPRESENTATIVE(S)					
ORGANIZATION RECEIVING SUPPLIES			LOCATION		
LAST, FIRST, MIDDLE INITIAL	AUTHORITY		SIGNATURE AND INITIALS		
	REQ	REC			
			SIGNATURE		
			SIGNATURE		
			SIGNATURE		
			SIGNATURE		
AUTHORIZATION BY RESPONSIBLE SUPPLY OFFICER OR ACCOUNTABLE OFFICER					
THE UNDERSIGNED HEREBY <input type="checkbox"/> DELEGATES TO <input type="checkbox"/> WITHDRAWS FROM THE PERSON(S) LISTED ABOVE					
THE AUTHORITY TO: _____					
REMARKS					

I ASSUME FULL RESPONSIBILITY					
UNIT IDENTIFICATION CODE			DODAAC/ACCOUNT NUMBER		
LAST, FIRST, MIDDLE INITIAL	GRADE	TELEPHONE NUMBER	EXPIRATION DATE	SIGNATURE	
				SIGNATURE	

DA FORM 1687, NOV 2015

PREVIOUS EDITIONS ARE OBSOLETE

APD LC v1.01ES

Enclosure 5. WARNING Sign

WARNING

RESTRICTED AREA

THIS STORAGE AREA HAS BEEN DECLARED A RESTRICTED AREA BY AUTHORITY OF THE TEXAS STATE GUARD COMMANDER, ADJUTANT GENERAL, COMMANDING OFFICER, IN ACCORDANCE WITH THE PROVISIONS OF THE DIRECTIVE ISSUED BY THE SECRETARY OF DEFENSE ON 20 AUGUST 1954, PURSUANT TO THE PROVISIONS OF SECTION 21, INTERNAL SECURITY ACT OF 1950, UNAUTHORIZED ENTRY IS PROHIBITED. ALL PERSONS AND VEHICLES ENTERING HEREIN ARE LIABLE TO SEARCH, PHOTOGRAPHING, MAKING NOTES, DRAWING, MAPS OR GRAPHIC REPRESENTATION OF THIS AREA OR ITS ACTIVITIES IS PROHIBITED UNLESS SPECIFICALLY AUTHORIZED BY THE COMMANDING OFFICER. ANY SUCH MATERIAL FOUND IN THE POSSESSION OF UNAUTHORIZED PERSONS WILL BE CONFISCATED.

Enclosure 6. Fire Symbol Sign

E

Fire Symbol for HC/D 1.4



Fire Symbol 4

Hazard Class 1 Division 4

24" NSN 7690-01-082-6709

12" NSN 7690-01-081-9584

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TEXAS MILITARY DEPARTMENT
TEXAS STATE GUARD
APPLICABLE LETTERHEAD NAME

NGTX-Office Symbol

Date

MEMORANDUM FOR RECORD

SUBJECT: Unaccompanied Access Roster

1. References: AR 190-11 (Physical Security of Arms, Ammunition, and Explosives), 9 September 2013.

2. The purpose of this memorandum is to identify the individuals with the unaccompanied access to the ammunition storage facility.

3. Effective immediately, as a result of duty appointment, the following personnel are to be given unaccompanied access to the ammunition storage area of the HQ, TXSG Guard, 2200 W. 35th St., Austin, Texas 78763-5218 located in building #32 on Camp Mabry.

<u>Rank/Name</u>	<u>Duty Phone#</u>	<u>Contact Phone#</u>	<u>Duty Position</u>
SGT Snuffy, Joe	555-754-0001	555-555-7777	G4- 1 st Brigade

4. The point of contact for this memorandum is the undersigned at, phone number email:

Signature
Last, First
CPT,
Brigade XO

Enclosure 7. Unaccompanied Access Roster

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Texas State Guard								
Ammunition Tracker								
<u>Training Ammunition</u>								
No.	Date Posted	Item Description	Quantity Received	Quantity Issued	Quantity Returned	Balance Oh-Hand per rounds	Signature	Date:
1	19-Mar-21	Hornady Ammo 9mm 13gr-90235 (9 bxes of 50 rds ea)	0	0	0	500	<i>Josephine Sniffly</i>	19-Mar-21
2	27-May-21	Hornady Ammo 9mm 13gr-90235 (9 bxes of 50 rds ea)	0	0	0	500	<i>John Wayne</i>	27-May-21

Enclosure 8. Ammunition Inventory Tracker