

Fort Benning Training Support Center

Unit Account Information Form

Unit Name: _____

Commander or Responsible Officer: Grade: Phone Number: Email Address:

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Alternate Unit POC's Name: Grade: Phone Number: Email Address:

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*I acknowledge Command Responsibility as an Account Holder at the Fort Moore Training Support Center (TSC). I understand that all TSC property must be returned to the TSC, **OR** the Incoming Commander must sign for the property from the TSC prior to my departure by establishing a TSC account. I further understand that if I fail to properly transfer responsibility of TSC property to the Incoming Commander, I will be held financially responsible for any training equipment that is lost, damaged or destroyed after my departure.*

Signature of Responsible Officer:

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Date:

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