

DEPARTMENT OF THE ARMY  
HEADQUARTERS, **NAME OF YOUR UNIT**  
**NAME OF YOUR MSU**  
FORT CARSON, COLORADO 80913

AFZC- **XXXX** (70-10)

DATE

TO: CCTT, Rodney M. Thomas, Bldg. 2135 Khe Sanh St., 226-7804/7806 or 524-3628, FAX 226-7812

SUBJECT: Request for Close Combat Tactical Trainer Support

1.

- A. EXERCISE UNIT:
- B. DATES AND ***TIMES*** OF TRAINING:
- C. POC & PHONE:
- D. NUMBER OF PERSONS TO BE TRAINED:
- E.. NUMBER AND TYPES OF MODULES:
- F. # OF AAR'S PER DAY
- G. TRAINING OBJECTIVE(S)/REQUIREMENTS (e.g. # platoons, # half troops, # Troops/CO) ***REQUESTED PER DAY***:

2. Phone number for the under signed is XXX-XXXX.

Commander  
Unit Requesting Support  
TITLE

NAME  
HQ for Unit Requesting Support  
S-3/RS3