

MEMORANDUM FOR 1 SOFSS/FSRF  
1 SOFSS/FSR  
1 SOW/JA  
1 SOFSS/CC  
IN TURN

Date

FROM: **YOUR PRIVATE ORGANIZATION NAME /UNOFFICIAL NAME**

SUBJECT: Request for Approval of Fundraising Event

1. We submit the following information in support of our request:

a. PROPOSED EVENT: **Type of event (ANY and all flyer/advertising examples must be turned in for approval as well.)**

b. REQUESTING GROUP: **(Provide name of group and state whether it is a listed Private Organization or Unofficial Activity.)**

c. POINT OF CONTACT: **(Name, phone, & fax number – no rank)**

d. DATE(S)/TIME(S)/PLACE(S): \_\_\_\_\_

e. NUMBER OF EVENTS CONDUCTED THIS QUARTER:   X  

f. HOW FUNDS RAISED WILL BE DISTRIBUTED:  
Are any of the proceeds going to charity? \_\_\_\_\_Yes \_\_\_\_\_No  
If yes, what percentage is going to what charity?  
If no, describe what funds will be used for.

g. DETAILS OF PROPOSED EVENT: **(Provide relevant details not otherwise covered above, e.g., whether or not the facility manager has approved the location of a car wash, to enable an informed decision. If the sale of food is involved you must obtain approval from Public Health.)**

2. Off-base solicitation is/is not requested. **(If so, attach copy of proposed solicitation letter MUST be sent with this application.)**

3. Required coordination with Public Health/Commissary/AAFES/SF is attached (as necessary--contact 1 SOFSS/FSR to ensure proper coordination).

**Signature Block  
of requester (no rank)**

- \*Note--Official letterhead and/or staff summary sheets are not to be used for these requests since
- \*AF materials **cannot** be used to support PO activity.
- \*Do not imply unit or Air Force sponsorship of event.
- \*Please delete all unnecessary information and instructions before printing and signing request