

UNITE EVENT REQUEST



REQUESTING UNIT:

UNITE POC:

EMAIL:

EVENT INFORMATION

DATE OF EVENT:

EVENT LOCATION:

PROJECTED START TIME:

END TIME:

PLANNED NUMBER OF PARTICIPANTS:

PROJECTED FEES TO BE PAID BY PARTICIPANTS:

DETAILED EVENT DESCRIPTION:

APF (ACTIVITY) FUNDING BREAKDOWN (\$13.50/PP):

YOU MUST BREAK DOWN EVERY EXPENSE - DO NOT LUMP ACTIVITIES/EXPENSES TOGETHER

NAF (FOOD/BEVERAGE) FUNDING BREAKDOWN (\$5.00/PP):

YOU MUST BREAK DOWN EVERY EXPENSE - DO NOT LUMP EXPENSES TOGETHER

C3 use only:

Funds Available APF \$ _____ NAF \$ _____

POC/Request CC Sent: _____ Rec: _____

APF Sub: _____ # _____ Approved: _____

NAF Sub: _____ # _____ Approved: _____

Pcard Spending Req: _____ Approved: _____

AAR Req: _____ Rec'd: _____ Filed: _____

Commander's Signature:

ALL ACTIVITIES REQUIRE A COMMANDER'S SIGNATURE & APPROVAL FROM THE AIR FORCE SERVICES CENTER