

## 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: EXPLAIN THE COHESIVE ACTIVITIES BEING PLANNED

APF (ACTIVITY) FUNDING BREAKDOWN (\$15.00/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

COMMUNITY COHESION COORDINATOR (C3) SIGNATURE:

COMMANDER/DESIGNEE SIGNATURE:



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