

E-MAIL FORMAT FOR NAF UNIT ENHANCEMENT FUNDS REQUEST
SEND TO: 87fss.unitenhancement.funds@us.af.mil

TO: 87 FSS/FSR	FROM:	DATE:	AMOUNT REQUESTED:
CHOSE FUNCTION TYPE: GROUP PICNIC UNOFFICIAL PARTY		EVENT DATE & LOCATION:	
EXPLANATION: CHECK ALL THAT APPLY <small>AFMAN 34-201 para4.3.1. Organizational Parties and Picnics: The installation commander establishes guidelines on expenditure levels at your installation for Wing, Group, Squadron or organizational parties and picnics. Exercise care to assure all eligible personnel, to the extent possible, are able to attend and the basic needs of the Morale, Welfare, and Recreation program are being met.</small>			
ODR RENTAL	FOOD/NON-ALCOHOLIC BEVERAGES	OTHER RENTALS	
ATTENDANCE: MIL: _____ CIV _____	TOTAL COST:	AVERAGE COST PER PERSON:	
PROJECT OFFICER:			
REQUESTING OFFICIAL AUTHENTICATION			
TYPED NAME, GRADE, & TITLE:		SIGNATURE:	Date:

APPROVAL STEPS

PROJECT OFFICER	POC- NAME-PHONE # NAME-GRADE-TITLE	Date:
COMMANDER/DELEGATED AUTHORITY _____ <i>Signature</i>	Approved ___ Disapproved ___ Amount	Date:
Unit Fund Custodian:	For FSS/FSR notification of approval purpose only	Date: