

**OFFICIAL REQUEST FOR APPROVAL FOR
FUNDRAISING ACTIVITY IAW AFI 36-3101**

Instructions: Complete this form and provide the original with all necessary attachments to 51 FSS/FSR. Final approval authority is Commander, 51st Force Support Squadron. Your request will be coordinated with appropriate staffing agencies and a written response will be given to you. Therefore, it is necessary that you submit your request at least 3 weeks prior to the proposed event. **Remember, you may not begin your fundraising effort until you have written approval from the Commander, 51st Force Support Squadron.**

MEMORANDUM FOR 51 FSS/FSR

_____ Date

FROM: _____
Name of Entity Requesting Approval

* If your entity is a **private organization**, attach a copy of the most recent legal review of your constitution/charter/by-laws.

* When an unofficial activity's/organization's current monthly assets (which include cash inventories, receivables, and investments) exceed a monthly average of \$1,000 over a 3-month period, the activity/organization must become a PO, discontinue on-base operations, or reduce its current assets.

SUBJECT: Fundraiser Request – Food or Refreshment Dispensed

1. We would like permission to conduct a fundraising event _____ 200__ at _____
(Date)

(Exact Location)

Will any activity related to this fundraiser be engaged in any workplace location (AFI 36-3101 does not include building entrances, concourses, and lobbies as part of the workplace). Note halls and aisle ways and all other locations in a building are not exempted from the area encompassing the workplace. Activities include use of any Air Force communications system (government email, fax, telephone, bits, etc) to communicate with personnel in the workplace. Unofficial bulletin boards may be used for fundraising purposes provided the locations are identified in your request and approved by 51 FSS/FSR. Activities include transmission to workplace communications devices in connection with solicitation for the fundraiser during the duty hours of any Osan personnel? Yes___No___

2. The details of this fundraiser include (use supplemental sheet as necessary):

a. Non-food items to be sold, including chances or tickets: _____

b. Food items or refreshments to be sold or consumed: _____

c. Method(s) of solicitation for the fundraiser (personal contact, booth, circulars, telephone, personnel email, etc) (attach copies of all proposed flyers, circulars, direct contact writings or scripts, etc): _____

d. Method(s) and locations of advertisement: _____

e. Categories of individuals who will be solicited or to whom sales will be made (sponsoring organization membership, members of other private organizations, Osan personnel or subgroups of Osan personnel, retirees, dependents, general public, base housing residents, contractor personnel, etc): _____

f. List all intended uses of proceeds, including to whom or to what group's proceeds will be given and what, if any, their relationship is to your organization or the military community: _____

3. As the individual submitting this request for the entity named above, I certify the following to be true (you must initial each line):

_____ a. This proposed fundraiser is NOT part of a continuous resale activity. PO or unofficial activity/organization may conduct occasional sales for fund-raising purposes; "Occasional" is defined as not more than two (2) per calendar quarter.

_____ b. This proposed fundraiser does not involve the sale of alcohol or any form of gambling activity (including lotteries, raffles or door prizes based on purchase of anything).

_____ c. A trained food handler will be present at all times during the event. (Food handler training can be obtained by contacting Military Public Health, Building 768 at 784-4494, unless waived in the approval letter)

_____ d. Prior approval from the Osan AB, Korea Fire Chief has been obtained for our location to grill food. Proper safety precautions will be taken and a fire extinguisher and telephone will be readily available.

_____ e. All military members will be in civilian attire and in a non-duty status.

_____ f. The use of government resources will NOT be used. The use of government resources (such as government supplies, equipment and email) to advertise the sale is prohibited. This prohibition extends to using official Air Force letterhead or staff summary sheet to request event approval.

_____ g. Poster/circulars will be in no way suggest, infer or indicate a level of DoD organization sponsorship or endorsement of the fundraiser and will not be posted on official bulletin boards.

_____ h. Poster/circulars will disclose the identity of the conducting organization and all uses for fundraising proceeds.

_____ i. This fundraiser will NOT involve the one-on-one solicitation of junior ranking members by higher-ranking participants in the fundraising effort.

_____ j. The Joint Ethics Regulation, DoD 5500.7-R is a punitive regulation, which prohibits DoD employees from soliciting (asking or obtaining) donations from local businesses. The JER also prohibits raffles (selling anything of value for a chance to win a prize).

_____k. Event approval extends only to the information provided. We understand that if we seek to change our event plans we would be required to obtain approval for any change.

_____l. If fundraising in a work area is approved, sales must be exclusively directed to the membership of requesting organization. All proceeds from the fundraiser must only be used to benefit personnel in the respective military service or DoD agency by which the requesting organization's membership is employed or donated to the Air Force Assistance Fund (or, if applicable, the officially sponsored umbrella charitable fund for another military service.)

_____m. If the fundraiser involves athletic or other non-sedentary activities, including lifting, carrying, pushing or pulling, we will make sure all participants are made aware of proper safety practices and enforce their use.

4. I am the organization's _____, if you have any questions, please contact
(Title)
me at _____ (Phone). (must be signed by either the president (or head) or
secretary of the organization)

(Signature)

(Printed Name)

1st Ind, 51 FSS/DD

MEMORANDUM FOR 51 FSS/FSR

Approve/disapprove

MARK R. MAXFIELD
Deputy Director, 51st Force Support Squadron

COORDINATION		
AGENCY	NAME /SIGNATURE	DATE
Military Public Health		
Fire Department		