

# Unite Event Request

APF:

NAF:

This section completed by C3

## Osan

Unique Event Title:

## AB 2023

Squadron/Flight/Shop/Workcenter:

Unite POC:

Phone:

Event POC:

Phone:

Event Date:

Projected Location:

Projected Start Time:

End Time:

Maximum Participation projected:

Per Person Projected Out Of Pocket (\$ / W):



**DETAILED EVENT DESCRIPTION** - *Who, What, Where, When, How, Why*

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

*LIST ITEMS BY COST, QTY & WHERE - INCLUDE SURCHARGE & CC FEE ESTIMATES*

**Total APF:**

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

*LIST ITEMS BY COST & WHERE - INCLUDE SURCHARGE & CC FEE ESTIMATES*

**Total NAF:**

**Reviewed by COMMUNITY COHESION COORDINATOR (C3) SIGNATURE:**

**COMMANDER or DESIGNEE SIGNATURE:**