FOR OFFICE PURPOSES ONLY CONTROL #:	
•	MWR <u>30 DAYS PRIOR</u> to the fundraising event. Return form to: 00 S Novosel St. Room 310, Fort Novosel, Alabama 36362
	n (VSO):
	<u></u>
	Phone Signature
Location Manager: Print	Phone
5. Donation/Fee Charged:	
6. Will this event require any Militar	y or Logistical support? Yes/No
7. The requestor hereby acknowledge	es the following will apply to the requested fundraising event:
a. I understand fundraising of CFC or AER.	g in the Federal workplace is not authorized, except in support
	he requesting organization's responsibility to obtain any at at a specified location from that location's management.
c. I understand "raffles" a sign will be displayed stating, "Donation	are not permitted. If the event is a "donation give-a-way", a on Not Required to Receive a Ticket".
any coercion from a superior or subord will be briefed in regard to safety. I un	pation must be on a voluntary basis, on personal time, without linate. Prior to their participation in the event, all personnel aderstand the event will not be conducted as a military unit, g events is prohibited, and no official DA endorsement will
certificate must be obtained and provide	ves the sale of food items, I understand that a food handling led to your office with this form. I understand that I can obtain sine, and they can be reached at 334-255-7930.
f. I understand we will not solicit commercial sponsorship or offer commercial advertising and will not display <i>any type of</i> donor recognition for any donations (monetary or in-kind) we receive, since it then becomes commercial sponsorship/advertising. I understand we do not have the authority to agree contractually to provide commercial sponsorship <i>or</i> commercial advertising on Fort Novosel.	
Point of Contact:	
D1	
Email Address:	
(Signature of Requestor)	(Date)