

## Holloman Air Force Base -- Fundraiser Request Form

**49th Force Support Squadron**

**POC:** Mrs. Kathleen Germain

**DSN:** 572-1751

**E-mail:** [kathleen.germain@us.af.mil](mailto:kathleen.germain@us.af.mil) / or [49FSS.private.org@us.af.mil](mailto:49FSS.private.org@us.af.mil)

***Please submit in advance, allow 2 weeks for review and processing***

*AFI 34-223, Private Organizations*

*AFI 36-3101, Fundraising*

*Joint Ethics Regulations (JER)*

2-301. Government e-mail and/or telephone are for official use and authorized purposes only.

2-302. Gambling Prohibited.

Requester's Name:		Phone (non-military):	
E-mail (non-military):		Submission Date:	
This fundraiser will be	(Please Check One)	Are you advertising?	Yes <input type="checkbox"/> or No <input type="checkbox"/> (check one)
On Base <input type="checkbox"/>	Off Base <input type="checkbox"/>	<b>Any advertisements must be submitted with this form.</b>	

AFI 34-223, para. 10.1.2.3 If advertising, the advert MUST contain the following disclaimer:  
**THIS IS A PRIVATE ORGANIZATION. IT IS NOT A PART OF THE DEPARTMENT OF DEFENSE OR ANY OF ITS COMPONENTS AND IT HAS NO GOVERNMENTAL STATUS.**

Organization's Name:			
National Organization <input type="checkbox"/>	Charter <input type="checkbox"/>	Unofficial Activity <input type="checkbox"/>	
Private Organization <input type="checkbox"/>	If PO, certified current date		
Fundraiser Time	Date(s)		

AFI 34-223, para. 10.10.2 "Occasional Fundraising" For example, a theatre performance might last a single night; whereas, a cookie sale might last three days over a holiday week.

Date of Last Fundraiser		<b>Limit of 3 per quarter</b>	Request # of Qtr	1st <input type="checkbox"/>	2nd <input type="checkbox"/>	3rd <input type="checkbox"/>
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Location(s):

Purpose(s):

Description / Plan of Action (who, what, how):

**Statement of Understanding (please initial next to each item)**

1. No fundraising and/or advertising will occur prior to obtaining approval. \_\_\_\_\_
2. Limited fundraising is permitted during the Combined Federal Campaign and/or Air Force Assistance Fund Campaign. AFI 36-3101, para. 5.1. \_\_\_\_\_
3. A private organization is a non-federal entity, and IAW JER 2-311, government resources may not be used. \_\_\_\_\_
4. No fundraising may occur in the workplace other than in common areas (e.g. base quarters, entrances, lobbies, concourses, or break areas). AFI 36-3101, para. 5.3.4.6. (Additional restrictions apply for raffles, AFI 34-223, para. 10.20.6.) \_\_\_\_\_
5. Liability insurance is required unless waived, and even if waived, it may be wise to procure. Private organizations and their members are personally and severally liable for any obligations arising from the private organization's operations. AFI 34-223, para. 10.15. \_\_\_\_\_
6. The private organization and its members assume the risk for holding this fundraiser, and they will hold harmless the Department of Defense and its agencies. Additionally, the members have been briefed and are aware that they are liable for the operations of the private organization. \_\_\_\_\_
7. Official e-mail may not be used to advertise for private organizations; however, official communications may be used to advertise events of interest to unit Airmen ( e.g. lunchtime sale of food), but the communication must avoid the appearance of endorsement. AFI 36-3101, para. 5.5.4. \_\_\_\_\_
8. Private organizations may not make direct solicitations for donations from non-members on base. AFI 34-223, para. 10.12. \_\_\_\_\_
9. Private organizations and their members may not solicit DoD personnel who are junior in rank, grade or position, or to the family members of such personnel, on or off duty. J ER 5-409. \_\_\_\_\_
10. Private organizations will not sell or serve alcoholic beverages. AFI 34-223, para. 10.14. \_\_\_\_\_

If your fundraiser involves one of the following and/or involves food preparation, coordination with their POC is required before submitting to FSS. Public Health provides training on food handling.			
FSS Facilities		Off Base Entities	
POC Name	Date	POC Name	Date
Signature		Signature	
Base Chapel (575-572-7211)		AAFES (575-479-1509)	
POC Name	Date	POC Name	Date
Signature		Signature	
Public Health (49 AMDS/SGPM) (575-572-3306, ext 5)		Commissary (DECA) (575-572-5127)	
POC Name	Date	POC Name	Date
Signature		Signature	

**49 WG/ JA Recommendation:**

Legally Sufficient  or Legally Insufficient  (check one)

Remarks:

Signature:

Review Date

**FSS Commander Approval or Disapproval:**

Signature:

Remarks:

Phillip C. Martin, Lt Col, USAF  
Commander, 49th FSS

Approve:

Disapprove:

Review Date: