

FRG FUNDRAISER REQUEST FORM

UNIT NAME _____

TODAY'S DATE: _____

REQUESTED BY: _____
(NAME OF FAMILY READINESS GROUP)

*DATE/DATES OF FUNDRAISER: _____

*TYPE OF FUNDRAISER: _____
(EX: BAKE SALE/AUCTION/CAR WASH/RAFFLE, ETC)

***FUNDRAISER (F/R) LOCATION : _____
(EXAMPLES: PX/ COMMISSARY, ETC)

PURPOSE OF FUNDRAISER: - _____

FUNDRAISER HOURS FROM _____ 'TIL _____

POINT OF CONTACT NAME FOR FUNDRAISER (PRINTED) _____

TELEPHONE NO: _____ E-MAIL ADDRESS: _____

I, The Commander or Acting Commander of this FRG, has verified that the FRGs' annual fund raising total is **UNDER** the allowed limit of **\$10,000.00**.
I have **consulted with an ethics advisor** (e.g. the Brigade Judge Advocate or AdLaw Attorney) for advisement.

COMMANDER AUTHORIZING FUNDRAISER SIGNATURE AND DATE

***NOTE:** FUNDRAISER REQUESTS MUST BE SUBMITTED NO LATER THAN 8-10 **WORKING** DAYS PRIOR TO FUNCTION.

***NOTE:** COMMANDER MAY APPROVE FUNDRAISERS HELD IN THE CO, BN, BDE, AND/OR MOTOR POOL AREA PROVIDED THE FUNDRAISER HAS BEEN REVIEWED BY THE DA ETHICS ADVISOR. ANY FUNDRAISER OUTSIDE OF THE UNIT FOOTPRINT MUST BE APPROVED THROUGH DFMWR.