

STAFF SUMMARY SHEET

	TO	ACTION	SIGNATURE (Surname), GRADE AND DATE		TO	ACTION	SIGNATURE (Surname), GRADE AND DATE
1	75 MDG/ DGPM	Coord	Food Safety 586-9780	6			
2	AAFES	Coord	Berry Eleanora DSN 777-3907	7			
3	75 FSS/FSR	Coord	Monika Johns 775-6793	8			
4	75 FSS/CLEA	Review		9			
5	75 FSS/CC	Sign		10			

SURNAME OF ACTION OFFICER AND GRADE	SYMBOL	PHONE	TYPIST'S INITIALS	SUSPENSE DATE
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SUBJECT	DATE
Request for Fundraising Event	

SUMMARY

- Request the 75 FSS/CC approve the fundraising event below.
- ****fill in the information*****
 Type of fundraising event:
 Sponsoring organization:
 Purpose:
 Proposed time and date:
 Location/building number:
 Person(s) coordinating fundraiser name/phone number:
 Person(s) responsible for cleanup/phone number:
 Item(s) to be sold:
 Where food will be purchased:
 How will food be kept cold or hot during preparation:
 How will food be kept cold or hot during serving:
- ****Choose Applicable*****
 Food is being sold. I have coordinated this SSS with Food Safety, 75 MDG/SGPM.
 This fundraiser is being held at AAFES, or is in competition with AAFES. I have coordinated this SSS with AAFES.
 This fundraiser is being held at _____. I have coordinated this event with the building custodian or manager.
- RECOMMENDATION: 75 FSS/CC approve this fundraiser by signing this staff summary sheet above. IAW AFI 34-223, sec. 6.4 delegated authority.

Signature of Project Officer