

# UNITE EVENT REQUEST



REQUESTING UNIT:

UNITE POC:

EMAIL:

## EVENT INFORMATION

DATE OF EVENT:

EVENT LOCATION:

PROJECTED START TIME:

END TIME:

PLANNED NUMBER OF PARTICIPANTS:

PROJECTED FEES TO BE PAID BY PARTICIPANTS:

DETAILED EVENT DESCRIPTION:

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

YOU MUST BREAK DOWN EVERY EXPENSE - DO NOT LUMP ACTIVITIES/EXPENSES TOGETHER

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

YOU MUST BREAK DOWN EVERY EXPENSE - DO NOT LUMP EXPENSES TOGETHER

COMMUNITY COHESION COORDINATOR (C3) SIGNATURE:

COMMANDER SIGNATURE:





# UNITE VENDOR TRACKER

REQUESTING UNIT:

DATE OF EVENT:

VENDOR/BUSINESS NAME	NAME OF PERSON YOU COORDINATED WITH	PHONE #	ADDRESS/WEB LINK	WHAT/HOW MANY IS BEING PURCHASED /RENTED	DOWNPAYMENT	TOTAL PAID	PAYMENT DUE DATE	C3 INTERNAL ONLY
					YES			
					YES			
					YES			
					YES			
					YES			
					YES			
					YES			
					YES			
					YES			
					YES			
					YES			

IF ORDERING FROM ONLINE SOURCES LIKE AMAZON PLEASE PROVIDE AN OFFICIAL SCOTT AIR FORCE BASE ADDRESS THAT THE ITEMS WILL NEED TO BE SENT TO:



QUICK REMINDERS: BE SURE TO INFORM VENDORS THAT WE ARE TAX EXEMPT!  
PLEASE SHARE ONLINE "WISH LIST" TO C3UNITE@GMAIL.COM