

## Annual &/or Quarterly NAF Unit Funds Request

Submit request by email at least 14 workdays prior to date of event to: 23 FSS NAF Funding Requests in order to ensure timely processing. Questions concerning this form can be directed to the Resource Management Flight (229) 257-4361/4362/5652

**Name of Requestor:**

**Date of Request:**

**Name of Requesting Organization:**

**Date of Function:**

**Period Covering:** FY \_\_\_\_\_ Quarter \_\_\_\_\_

**Request authorization for one of the following**

\_\_\_\_\_ (Group) Quarterly Unit Funds authorized \$1.00 per assigned military and civilian members (excludes contractors)

\_\_\_\_\_ (Squadron) Quarterly Unit Funds authorized \$1.00 per assigned military and civilian members (excludes contractors)

\_\_\_\_\_ (Squadron) Annual Unit Funds authorized \$2.00 per assigned military and civilian members (excludes contractors)

**Utilizing the following NAF Activity for this function**

\_\_\_\_\_ Moody Field Club

\_\_\_\_\_ Moody Equipment Rental

\_\_\_\_\_ Quiet Pines Golf Course

\_\_\_\_\_ Grassy Pond

\_\_\_\_\_ Moody Bowling Center

\_\_\_\_\_ Moody Base Pools

**Request authorization to use up to \$ \_\_\_\_\_ in NAF Unit Funds to support the above function.**

**Name and Grade of Requesting Officer**

**Signature of Requesting Officer**

**FSS Review & Recommendation**

Assigned Military Members \_\_\_\_\_ Assigned Civilian Members \_\_\_\_\_ Total Dollar Authorization \_\_\_\_\_

**Resource Manager or Designee Name and Grade**

**Signature of Resource Manager/Designee**

**The above request is approved (not to exceed \_\_\_\_\_)/disapproved. Notify the originator of this action and the requirement to provide a copy of this signed approval letter to the FSS Activity.**

**Name and Grade of Approving Official**

**Signature**