Appendix E
EVENT REQUEST WORKSHEET

Date Event Request Received:_____ Event Participation Suspense Date:_____

Event Category Code: _____

WHO: [Name of organization requesting support from ILNG to include POC contact information]

_____

WHAT: [The type of support requested (i.e. GO, speaker, attendance only, Color Guard, band, entire unit, vehicle display, orientation flight, etc.)] _____

WHEN: _____

WHERE: _____

WHY: [Purpose for the inclusion of ILNG in the event (i.e. community relations, training, political event participation, fund raiser, etc.)]

_____

VALUE OF ANY GIFT (MEAL, TICKETS, ETC): $_____ (Will the attendee receive free admission, a meal, or a gift/trophy? If so, what is the fair market value of that gift?)

IS THIS EVENT IN THE BEST INTEREST OF THE ILLINOIS NATIONAL GUARD? **YES** ☐ **NO** ☐

EVENT PARTICIPATION IS NOT ALLOWABLE IF "YES" IS MARKED:

1) IS THIS EVENT A FUNDRAISER? **YES** ☐ **NO** ☐

2) IS THIS A POLITICAL EVENT? **YES** ☐ **NO** ☐

3) DOES THIS EVENT ENDORSE OR SELECTIVELY BENEFIT OR FAVOR ANY PERSON, CORPORATION, WHETHER PROFIT OR NON-PROFIT; RELIGION SECT, QUASI-RELIGIOUS OR IDEOLOGICAL MOVEMENT; FRATERNAL ORGANIZATION, POLITICAL ORGANIZATION OR COMMERCIAL VENTURE?

YES ☐ **NO** ☐

4) IS THIS REQUEST FOR A VEHICLE?

YES ☐ **NO** ☐

IF THIS IS A REQUEST FOR A VEHICLE, HOW WILL IT BE USED?

PARADE? ☐ **STATIC DISPLAY?** ☐ **WOULD A PASSENGER BE CARRIED? (REQUIRES A LIABILITY WAIVER.)** ☐

SPECIFIC REGULATORY GUIDANCE ALLOWING PARTICIPATION: [Regulation, Paragraph, etc.]

Comments/Restrictions:

PAO Approval: Approve ☐ Disapprove ☐

_____ _____

Director of PAO Date

CoS Resource Visibility Check: Concur ☐ Nonconcur ☐

_____ _____

Chief of Staff Date

☐ Recommend Further Review by the USPFO and JAG

_____ _____ Concur ☐ Nonconcur ☐

USPFO for Illinois Date

_____ _____ Concur ☐ Nonconcur ☐

JAG Date

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