

MEMORANDUM FOR 6 SVS/SVFP  
6 AMW/JA  
6 MSG/CC

\_\_\_\_\_ (date)

FROM: Name of Private Organization \_\_\_\_\_

SUBJECT: Request for Waiver of Insurance Coverage Requirement

1. Request \_\_\_\_\_ (Name of Organization) be granted a waiver of the requirement for liability insurance pursuant to AFI 34-223.
2. Activities of this informal/formal private organization consist largely of activities with extremely low liability exposure such as monthly meetings, squadron parties,  
\_\_\_\_\_  
and other gatherings.

\_\_\_\_\_  
Organization Officer

1st Ind, 6 SVS/SVFP

MEMORANDUM FOR 6 SVS/CC

Recommend approval/disapproval for the following reasons: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
MARGARET A. JOHNSON, YC-02  
6th Services PO Monitor

2d Ind, 6 SVS/CC

MEMORANDUM FOR 6 AMW/JA

Recommend approval/disapproval.

\_\_\_\_\_  
Commander, 6th Services Squadron

3d Ind, 6 AMW/JA

MEMORANDUM FOR 6 MSG/CC

Recommend approval/disapproval.

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Staff Judge Advocate

4th Ind, to \_\_\_\_\_ Ltr, \_\_\_\_\_, Request for Waiver of Insurance  
Coverage Requirement

6 MSG/CC

MEMORANDUM FOR 6 SVS/SVFP

Approved/Disapproved.

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Commander, 6th Mission Support Group