Associate Funding Funding Funding Contact Officer Name:		Trigonization Club/Organization: Financial Management	lecessary Documents:  I Event Flyer w/ A.S.I. Logo  CSI Event Reg. Form  Estimates / Food Permits  Event Estimates / Invoices gement Association	
Officer Title: Address: City/State/Zip: Phone & Email: Officer Signature:		Event Title: General Meeting  Date(s) of Event: 5/2/2018 Sen  Location of Event: SH 343  Expected Total Attendance: Expected Attendance of Cal State LA.S	A0 tudents:	
Briefly describe the event: Guest speaker will speak to students about experience and background in the financial industry. Students will be able to ask questions and network with professional speaker.		Is the event open to all Cal State LA students?: Yes  How will this program enhance the Cal State LA experience?: Educate students about the financial industry, several different career paths within finance.		
Description In-N-Out Cheeseburgers Starbucks Giftcard Water	Amount 94.50 10.00 3.99	Honoraria/Contracts  Description	Amount	
Marketing  Description Flyers	Amount 4.50	Other  Description Tax  CA redemption value	Amount 8.98 1.60	
Total Cost of Event: 123  Amount Requested from A.S.I.:  Amount from other sources:  What other resources are you employing None	3.570 123.57 0 for this event?	Important:  (1) All Funding Request Forms must be a Friday, the week before the Funding Standard (2) Additionally, funding request forms must be a than 10 business days (2 weeks) prior (3) Deadline for Request for Payment or 15 days after the event.	turned in by 12 PM Sub-Committee Meetings. Just be turned in no less to the event.	

All forms must have a Time Stamp and

staff initial:

### STUDENT ORGANIZATION EVENT REGISTRATION FORM





This form must be completed 10 business days prior to the event date. Reservations for on campus events will not be confirmed unless this form has been completed. No publicity may be distributed or posted online until this form has been submitted for off campus events or until the reservation confirmation process has been completed for on campus events. Signatures must be completed in blue or black ink.

END TIME: 4:00

NAME OF ORGANIZATIO	n:FMancial	Managewern	Association
			_

PHONE

**EVENT CONTACT NAME:** 

NAME OF EVENT: | ACEPS VISITS FMA)

EVENT DATE: 5/2/18

BEGIN TIME: 3:00

LOCATION: SH C343

**EMAIL:** 

ESTIMATED ATTENDANCE: 40

TYPE OF ACTIVITY (THE UNIVERSITY'S GENERAL RELEASE WILL BE REQUIRED FOR CERTAIN EVENTS.)

BENEFITS TO PROCEED

**EDUCATIONAL PROGRAM** 

SPIRITUAL PROGRAM

RECREATIONAL PROGRAM

DANCE/PARTY

SOCIAL PROGRAM

COMMUNITY SERVICE

CONFERENCE/CONVENTION

WILL YOUR EVENT INCLUDE ANY OF THE FOLLOWING? (PLEASE CHECK ALL THAT APPLY)

SPORTS ACTIVITY OR COMPETITION

FOREST/PARK CLEAN-UP

INTERNATIONAL TRAVEL

**BEACH CLEAN-UP** 

INDOOR/OUTDOOR COOKING

DOMESTIC TRAVEL

**BEACH BONFIRE** 

PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES):

COO of LACERS will be a guest speaker at our general meeting this week. Speaker will take questions from students & Speak about his experience & background.

WHO IS INVITED (CHECK ALL THAT APPLY):

STUDENT ORG. MEMBERS

CAL STATE LA COMMUNITY

OTHER COLLEGES & UNIV.

**GENERAL PUBLIC** 

**GUEST LIST** 

Events intended for the general Cal State LA campus will be listed in the Student Organization Calendar of Events distributed in a biweekly email by the Center for Student Involvement, NO, I DO NOT WISH FOR MY EVENT TO BE POSTED.

WILL THE EVENT HAVE AN ADMISSION CHARGE, REGISTRATION, PARTICIPATION FEE, OR RAISE ANY PROCEEDS TO BENEFIT THE ORGANIZATION? (If yes, please complete statement regarding proceeds to benefit transactions on the back of this form) YES

WILL A MOVIE BE SHOWN?



YES (If yes, please attach written proof of viewing rights.)

WILL THE EVENT HAVE SECURITY?



YES If yes, please explain

WILL FOOD BE SERVED AT THE EVENT?

IF YES, WHO WILL PROVIDE THE FOOD?

**UNIVERSITY CATERING** 

If so, please affirm organization members and guests will not consume alcohol.

OTHER: In-N-OUT

A completed food permit is required for all on-campus events with food unless the food is provided by University Catering.

WILL ALCOHOL BE PRESENT AT THE EVENT?



YES. Please attach a completed request to serve alcoholic beverages. (This form may take up to two weeks for review and possible approval.)

YES

WILL THE EVENT BE HELD IN A RESTAURANT/VENUE WHERE ALCOHOL IS AVAILABLE?

Initials

PLEASE LIST 2 TIPS TRAINED MEMBERS ON PAGE 2.

WILL OFF-CAMPUS MEDIA BE NOTIFIED ABOUT THE EVENT (NEWSPAPER, TV, RADIO, ETC.)?



YES, PLEASE PROVIDE WHO WILL BE INVITED ON PAGE 2.

DOES THE STUDENT ORGANIZATION WANT TO PURCHASE SPECIAL EVENT INSURANCE FOR THIS EVENT?

NO

Please be aware that student organization events are not covered for liability or other insurance by California State University, Los Angeles or the University-Student Union. Student organization officers or the advisor may be held personally liable. If the student organization would like to purchase Special Event Insurance for a particular event, please contact CSI.

Updated 08.18.17 | Page 1 of 2

#### STATEMENT REGARDING PROCEEDS TO BENEFIT TRANSACTIONS

As officers of this recognized student organization at Cal State LA, we affirm that all proceeds raised or assets assigned will be used solely for the benefit of the organization as a whole. Further, it is affirmed that no proceeds or assets of this organizations will accrue to the benefit of any officer, member, or any private person. We also affirm that all proceeds transactions for this event will comply with all University policies and procedures including but not limited to ICSUAM Policy 3141.01 and the Cal State LA Student Organization Funds Administration Policy.

Describe the admission charge, registration, participation fee, or any proceeds that will be raised to benefit the organization. Please include how much the organization will be charging for any of these proceeds.

PRESIDENT:	•		SIGNATURE:		DATE:		
TREASURER:			SIGNATURE:		DATE:		
The following	ith any of the following	g quidelines may resu	the student organization. They are	nst the organizat	tion including suspension of		
recognition, conduct:	n, events and use of facilities. More information can be found online in the Student Organization Handbook.  The organization assumes full responsibility for the conduct of participants at the event. Any violation of University policy may subject the participants and/or the organization to disciplinary action by the Center for Student Involvement or Student Conduct.						
ALCOHOL:	What is that in December 200. Algebraic Reverges any event (on or off campus) that involves the						
PUBLICITY:	All publicity materia of this organization	I must have the name do not necessarily re	of the sponsoring group and the flect those of the students, staff, f	following staten aculty, or admin	nent: "The actions and opinions istration of Cal State LA."		
GENERAL RELEASE:	The second secon						
FOLLOW AL MAY BE SUB	L GUIDELINES SET FOR BJECT TO CANCELLATIO ORG, OFFICER'S NAM	TH BY THE UNIVERSITY N BASED ON MY ORGA	PONSIBILITY TO ENSURE THAT THE E  (. I ACKNOWLEDGE THAT THIS EVEN NIZATION'S RECOGNITION STATUS.  SIGNATURE (PLEASE USE BLUE O	T AND ANY ASSO	ORGANIZATION IS SPONSORING WILL CLATED EVENT SPACE RESERVATIONS  DATE:		
			my Gw		04-11-18		
CENTER CSI VERIF	FIES THE ORG. IS RECO	DLVEMENT (U-SU 20	SIGNATURE:		DATE: 4 12 18		
	L RELEASE REQUIRE				· ·		
	CATIONS:	-	<del></del>	***************************************			
PUE	BLIC AFFAIRS	DATE:	ATHLETICS		DATE:		
DE	PT. OF PUBLIC SAFETY	DATE:	FACILITIES USE	COORDINATOR	DATE:		
NOTES O	R UPDATES:						

## CALIFORNIA STATE UNIVERSITY, LOS ANGELES TEMPORARY FOOD FACILITY PERMIT

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883)	~3	# 1	a k	₩:	- Ta	14	8.0	

Clear Form

Date of Event: <u>5/2/18</u>	Estimated Attendance: 40
Name of Event: LACERS VISITS FMA!	
Type of Event: General Meeting Location:	H C343
Sponsoring Organization: Financial Management Ass	
Authorized Representative:	Fax:
Time:	In-N-OU Burger
Access Time: $3.00$ a.m./p.m. to $4.00$ a.m./p.m. Event Time: $3.00$ a.m./p.m. to $4.00$ a.m./p.m.	3277 70 00 00 00 00 00
Type of Food Service:  Bake Sale Snacks Food Sale Catering Barbecue Potluck Other (describe below)  Describe Other:	(Provide caterer's complete name and address in space above this box; see Paragraph 6.2(e) in Temporary Food Facility Guidelines for further instructions.)
List <u>all</u> food and potentially hazardous food (see Temporary Food Facility Guidingredients), use back of page if necessary	delines for definition) items to be sold/served (include
Where will this food be prepared or purchased [Note no Home Baked/Cooked]  List all beverages to be sold/served:	tems are Allowed]? In-N-OU+
Where will beverages be prepared or purchased? Zabys	
Method/s of maintaining proper holding temperatures for potentially hazardous  Agreement: For the privilege of selling foods and/or beverages on campus, the handling orientation (offered at the beginning of Fall and Spring quarters), agreement Temporary Food Facility Guidelines governing food sales or service. Failure that and/or beverage selling/serving privileges and possibly disciplinary action.	e Sponsoring Organization shall have attended a food ees to read, understand, and comply with the CSLA
<u>Insurance</u> : (Student Organizations Only) As a prerequisite, the Sponsoring Stroverage from the Associated Students, Inc. (ASI) at least two weeks prior to t Student Organization's activity in its insurance policy. This Temporary Food I proof of ASI insurance.	he event date and ASI agrees to include the Sponsoring
No liability will be assumed by California State University, Los Angeles, University and Food or beverage the sponsoring organization provides to submitted at least 10 days prior to the activity for proper reviews and approval event date.	the campus community. This permit should be
All signatures shall be obtained in the following order. Student organization	ons need all signatures; other organizations 1, 3 and 4 only
M.Mal.	
1. Signature of Sponsoring Organization Chairperson	Authorized Representative to be present at event
W	4/12/2018
2. Center for Student Involvement (UU 204) (Student Organizations Only)	Date
Mal h	4/12/18
3. University Auxiliary Services Mrs. (Golden Eagle Bldg 314)	336 4/12/18
4. Environmental Health & Safety (Corporate Yard Bldg. 244) Permi	









### FINANCIAL MANAGEMENT ASSOCIATION

# General Meeting

Wednesday May 2, 2018 3:00 – 4:00 pm SH 343

> Come meet the Chief Operating Officer of LACERS at our meeting!

**Q&A Session and Networking Opportunity available at end of meeting** 

Building a bridge between students and professionals #FMACSULA



Financial Management Association (FMA)

Project Title: LACERS visits FMA!

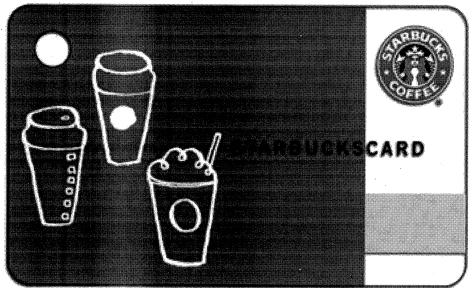
Project Description: General Meeting: 05/02/2018

Invoice Number: 8

Description	Quantity	Unit Price	Cost
In-N-Out Burgers	35	\$ 2.70	\$ 94.50
Water	1	\$ 3.99	\$ 3.99
Flyers	30	\$ 0.15	\$ 4.50
Starbucks Gift Card	1	\$ 10.00	\$ 10.00
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	<u> </u>	\$	<u>.</u>
	<u> </u>	\$	
		Subtotal	\$112.99
		Tax: 9.50%	\$ 8.98
		CA redemption value	\$ 1.60
		(for water bottles)	
		Total	\$ 123.57



In-N-Out menu pictured above^



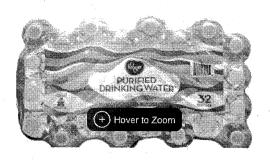
Starbucks Gift Card

← → C & Secure https://www.ralphs.com/p/kroger-purified-water-mini-bottles/0001111085813#

Same-Day Delivery: Free delivery on your first order! Visit the delivery tab to start shopping or check delivery availability in your

Shop Departments  $\lor$  Savings & Rewards  $\lor$  Our Brands  $\lor$  Recipes & Ideas  $\lor$  Pharmacy & Wellness  $\lor$ 

Home > Search: water > Kroger Purified Water Mini Bottles





**Kroger Purified Water Mini Bottles** 

32 bottles / 8 fl oz UPC: 0001111085813

\$3.99

Sign In to Add

O Aisle

Water from Ralphs