ASI

Associated Students, Inc. Funding Request Form

"...For the Students, by the Students/2015-16

Necessary	Documents:
-----------	------------

- Event Flyer w/ ASI Logo
- CSI Event Reg. Form
- Estimates / Food Permits

Contact		Organization	Event Estimates / Invoices
Officer Name: Johnny chi		Club/Organization: Public Health Student A	Association
Officer Title: Vice President		Event Title: Fall Fundraiser, Pizza Fundra	iser
Address: 417 S 2nd st		Date(s) of Event: 11/25/15 Qua	arter(<u>Fall)/ Winter / Sprinc</u>
City/State/Zip: Alhambra, CA, 91801		Location of Event: King Hall Walkway, US	SU walkway
Phone & Email: (626) 234-5342, Vpreside	nt.phsa@gmail.com	Expected Total Attendance: n/a	
Officer Signature:		Expected Attendance of Cal State L.A.	Students: <u>n/a</u>
Event l	Description and	d Total Cost Breakdown	
Briefly describe the event:		Is the event open to all Cal State L.A. s	tudents?: YES
4 fundraising events during the fall quarter, t	otal estimate of all 4	How will this program enhance the Cal	State L.A. experience?:
events is \$495.52 10/14 - Porto's & Boba, 10/24 - Pizza Fundrais Boba, 11/25 - Pizza Fundraiser	er, 11/09 - Porto's &	Creates funding for Public health Stude advocates for a healthier environment health students in volunteering events f	by involving the public
Hospitality		Honoraria/Contracts	
Description Portos	Amount \$153.47	Description	Amount
Boba from Banh Mi Che Cali	\$81.75		
Costco	\$260.30		
total	\$495.52		
Marketing	_	Other	
Description	Amount	Description	Amount
Event Summar	у	For Office Use Only • Do I	
Total Cost of Event:	\$495.52	Approved Ar	nounts
Amount Requested from A.S.I.:	\$495.52	Hospitality: Honoraria/Contracts:	
Amount from other sources:	\$0.00	Marketing:	
•	<u> </u>	Other:	
What other resources are you employ	ing for this event?	U-SU:	
		Total:	
n/a		l i ,	cognized?: te Approved:

Important: (1) All Funding Request Forms must be turned in by 12 PM Monday, the week of the Finance Committee Meetings.

(2) Additionally, funding request forms must be turned in no less than 10 business days (2 weeks) prior to the event. (3) Deadline for Request for Payment or Purchase Order (RPP) is 15 days after the event.

Rev'd. 7/27/15

Funds Expire: BOD / Finance

Account: __

STUDENT ORGANIZATION EVENT REGISTRATION FORM





		The second secon	•
NAME OF ORGANIZATION: Public Health Student Association	n.	PHONE: (310)977-778	39 DATE: 10/24/2015
EVENT CONTACT NAME: Allison Lim		EMAIL: pr	esident.phsa.csula@gmail.com
NAME OF EVENT: PHSA Porto's and Boba Fundraiser	, t	OCATION: University	Student Union Walkway
EVENT DATE: 10/14/15 BEGIN TIME: 11:00 am	END TIME: 3:00 pm	ESTIMATED ATT	ENDANCE: 5
TYPE OF ACTIVITY (THE UNIVERSITY'S GENERAL RELEASE WII	L BE REQUIRED FOR CERTAIN	NEVENTS.)	
FUNDRAISER EDUCATIONAL PROGRAM	SPIRITUAL PROGRAM	1 RECREATIO	NAL PROGRAM
DANCE/PARTY SOCIAL PROGRAM	COMMUNITY SERVICE	E CONFEREN	CE/CONVENTION
OTHER:			and the second
PLEASE DESCRIBE THE EVENT			•
Public Health Student Association will sell Porto's baked goods underfunded association.	and milk tea boba from Bahn	Mi Che Cali on October	14, in order to raise funds for our
		•	*
WHO IS INVITED (CHECK ALL THAT APPLY):			•
STUDENT ORG. MEMBERS CAL STATE L.A. COMMU	INITY OTHER COLLEC	GES & UNIV. 🚺 GEN	NERAL PUBLIC GUEST LIST
The state of the s			lar of Events distributed in a
Events intended for the general Cal State L.A. campus bi-weekly email by the Center for Student Involvement.		· ·	R MY EVENT TO BE POSTED.
WILL THE EVENT HAVE AN ADMISSION CHARGE, REGIS	TRATION FEE, OR DONAT	ION?	
(If yes, please complete statement regarding cash transaction		****	W MUCH?
WILL A MOVIE BE SHOWN? NO YES (If yes, please	e attach written proof of vie	wing rights.)	
WILL THE EVENT HAVE SECURITY? NO YES IF	es, please explain		•
WILL FOOD BE SERVED AT THE EVENT? NO YES	And the second of the second o	e e e e e e e e e e e e e e e e e e e	
IF YES, WHO WILL PROVIDE THE FOOD? UNIVERSITY	CATERING THER SE	elf- Purchased	-
A completed food permit is required for all on-campu	*****		University Catering.
WILL ALCOHOL BE PRESENT AT THE EVENT? NO			ve alcoholic beverages. riew and possible approval.)
WILL THE EVENT BE HELD IN A RESTAURANT/VENUE WI	•	·	
If so, please affirm organization			
WILL OFF-CAMPUS MEDIA BE NOTIFIED ABOUT THE EVE	NT (NEWSPAPER, TV, RAI	010, ETC.)? 6 NO] YES
DOES THE STUDENT ORGANIZATION WANT TO PURCHAS	E SPECIAL EVENT INSURA	NCE FOR THIS EVENT	? D NO YES
Please be aware that student organization events are not on the University-Student Union. Student organization officers of purchase Special Event Insurance for a particular event, please	or the advisor may be held p se contact CSI.	insurance by California personally liable. If the s	State University, Los Angeles or tudent organization would like to
MY SIGNATURE BELOW INDICATES THAT I WILL TAKE	RESPONSIBILITY TO ENSU	RE THAT THE EVENT	WHICH MY ORGANIZATION IS
SPONSORING WILL FOLLOW ALL GUIDELINES SET FOR			
STUDENT ORG. OFFICER'S NAME S	IGNATURE (PLEASE USE BLUE	OR BLACK INK ONLY)	DATE:
Allison Lim	alliton tin		9/25/15
ADVISOR'S NAME	119(Ma.1)		aladin
Dr. Claudia Toledo-Corral	MATHUR	n'	4/28/13
			Updated 6.25.15 Page 1 of 2

CALIFORNIA STATE UNIVERSITY, LOS ANGELES TEMPORARY FOOD FACILITY PERMIT

Date of Event: 10/14/2015	Estimated Attendance: 5
Name of Event: Public Health Student Association I	Porto's and Boba Fundraiser
Type of Event: Fundraiser	Location: University Student Union WALK WAY 7
Sponsoring Organization: Public Health Student Association	ciation
Authorized Representative: Allison Lim	Phone: (310) 977-7789 Fax:
Time:	Early Mi Che Cali Portos Bakery
Access Time: 10:30 am a.m./p.m. to 3:30 pm	- 1 1 2 1/d 1 3 2 1 2 1 2 1 1/d 1 3 2 1 2 1 1/d 1 1/d 1 1/d 1
Event Time: 11:00 am a.m./p.m. to 3:00 pm	
Type of Food Service:	
Bake Sale Snacks ✓ Food Sale	Catering Catering
Barbecue Potluck Other (descr	ribe below) Facility Guidelines for further instructions.)
Describe Other:	
List <u>all</u> food and potentially hazardous food (see Temporary Fooingredients), use back of page if necessary. <u>Guava pastry</u> . <u>Potato b</u>	od Facility Guidelines for definition) items to be sold/served (include balls, cheese rolls, and milk tea with boba
Where will this food be prepared or purchased [Note no Home E	Baked/Cooked Items are Allowed]? Porto's Bakery
List all beverages to be sold/served: Milk Tea Boba	
Where will beverages be prepared or purchased? Bahn Mi C	he Cali
Method/s of maintaining proper holding temperatures for potent	
Tent to keep out heat and ice chest for drinks	
handling orientation (offered at the beginning of Fall and Spring	on campus, the Sponsoring Organization shall have attended a food g quarters), agrees to read, understand, and comply with the CSLA rvice. Failure to comply with the rules may result in the loss of food nary action.
coverage from the Associated Students, Inc. (ASI) at least two w	Sponsoring Student Organization agrees to obtain proper insurance weeks prior to the event date and ASI agrees to include the Sponsoring inporary Food Permit will not be approved unless accompanied by a
Services for any food or beverage the sponsoring organizatio	Los Angeles, University-Student Union, or University Auxiliary on provides to the campus community. This permit should be s and approvals; otherwise there is no guarantee of completion by the
All signatures shall be obtained in the following <u>order</u> . Stude	ent organizations need all signatures; other organizations 1, 3 and 4 only
allison Lin	Allison Lim
1. Signature of Sponsoring Organization Chairperson	Authorized Representative to be present at event
JAA_	9128115
2. Center for Student Involvement (UU 2047 (Student Organizati	ions Only) Date
Mud. of	9/28/15
3. University Auxiliary Services) Inc. (Golden Eagle Bldg 314)	Date
Kew J. M.	# 15-616 9/28/15
4. Environmental Health & Safety (Corporate Yard Bldg. 244)	Permit No. Date

Public Health Student Association

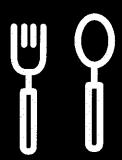
Fall Fundraiser

Help Support PHSA!!

Wednesday October 14
University Student Union Walkway



Boba \$2 Porto's \$1.50





STUDENT ORGANIZATION FORM

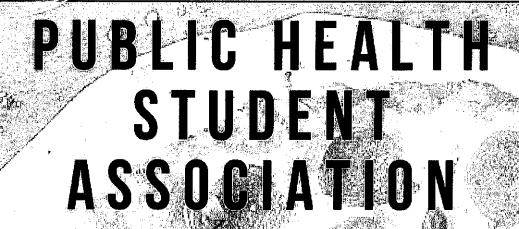
COMPLETED



NAME OF ORGANIZATION: Fublic Health Student Associa	tion	PHONE: (310)9/7-7/89	MIE: 09/25/15
EVENT CONTACT NAME: Allison Lim		EMAIL: president.phsa.csu	la@gmail.com
NAME OF EVENT: PHSA Pizza Fundraiser	•	LOCATION: King Hall	•
EVENT DATE: 10/24/15 BEGIN TIME: 11:00	END TIME: 3:00	ESTIMATED ATTENDANCE: 5	
TYPE OF ACTIVITY (THE UNIVERSITY'S GENERAL RELEASE)	WILL BE REQUIRED FOR CERTAI	N EVENTS.)	
FUNDRAISER EDUCATIONAL PROGRAM	SPIRITUAL PROGRAM	M RECREATIONAL PROGRAM	м .
DANCE/PARTY SOCIAL PROGRAM	COMMUNITY SERVICE	E CONFERENCE/CONVENTI	ON
OTHER:		4	en in
PLEASE DESCRIBE THE EVENT			
Public Health Student Association will sell Costco Pizza at the	e King Hall walkway on Octobe	er 28 in order to raise funds for our under	funded association.
		·	
		$e^{i\omega_{i}}$	$\mathcal{A}_{k_1,k_2} = \mathcal{A}_{k_2,k_3}$
			•
WHO IS INVITED (CHECK ALL THAT APPLY):		CECALIAN MACAGENER II BUDI (C	
STUDENT ORG. MEMBERS CAL STATE L.A. COMI	MONITY OTHER COLLE	GES & UNIV. GENERAL PUBLIC	GUEST LIST
Events intended for the general Cal State L.A. campu			Age of the second second
bi-weekly email by the Center for Student Involvemen	ot. A la la lamenta de la	NO, I DO NOT WISH FOR MY EVENT T	O BE POSTED.
WILL THE EVENT HAVE AN ADMISSION CHARGE, REG	· · · · · · · · · · · · · · · · · · ·	·	
(If yes, please complete statement regarding cash transac	ctions on the back of this form	n) NO YES, HOW MUCH?	
WILL A MOVIE BE SHOWN? NO YES (If yes, ple	ase attach written proof of vie	ewing rights.)	
WILL THE EVENT HAVE SECURITY? NO YES	if ves. please explain		
and the second of the second second of the s	and the second of the second o	o and and many agreement specially be about the legal of	ter in the property of the second
WILL FOOD BE SERVED AT THE EVENT? NO 10 YE	********	en e	
IF YES, WHO WILL PROVIDE THE FOOD? UNIVERSIT			
A completed food permit is required for all on-came	ous events with food unless t	he food is provided by University Cat	ering.
WILL ALCOHOL BE PRESENT AT THE EVENT? NO			-
		up to two weeks for review and possib	ile approval.)
WILL THE EVENT BE HELD IN A RESTAURANT/VENUE If so, please affirm organization		mer. [7]	
WILL OFF-CAMPUS MEDIA BE NOTIFIED ABOUT THE E	VENT (NEWSPAPER, TV. RA	DIO. ETC.)?	
DOES THE STUDENT ORGANIZATION WANT TO PURCHA		The state of the s	YES
Please be aware that student organization events are not the University-Student Union. Student organization officer purchase Special Event Insurance for a particular event, ple	t covered for liability or other is or the advisor may be held	insurance by California State Universi	
MY SIGNATURE BELOW INDICATES THAT I WILL TAKE	E DESDONSIBILITY TO ENSI	IDE TUAT THE EVENT WHICH MY OF	GANIZATION IS
SPONSORING WILL FOLLOW ALL GUIDELINES SET FO		WE TON'T THE WARREST ABBITCHEST OF	CAMEATON IS
STUDENT ORG, OFFICER'S NAME	SIGNATURE (PLEASE USE BLUI	E OR BLACK INK ONLY) DATE:	
Allison Lim	allison Lin	10/25/	15
ADVISOR'S NAME	1 / Sahla 1	1 / 2	1
Dr. Claudia Toledo-Corral	(XI) HHOUL	<u> </u>	15
	0	Indatal 6	25.15 Page 1 of 2

CALIFORNIA STATE UNIVERSITY, LOS ANGELES TEMPORARY FOOD FACILITY PERMIT

Date of Event: 10/24/2015		Estimated Attendance: 5
Name of Event: Public Health Student Association P	izza Fundrai	
Type of Event: Fundraiser	Location: \tau	NG HALL WALKWAY
Sponsoring Organization: Public Health Student Associ	ation	
Authorized Representative: Allison Lim	Phone: (310)	977-7789 Fax:
Time: Access Time: 10:30 am a.m./p.m. to 3:30 pm a. Event Time: 11:00 am a.m./p.m. to 3:00 pm a.	_	Costico 2207 W Commonwealth Ave Albundra, CA 91503 (626) 29a:-7464
Type of Food Service: Bake Sale Snacks Food Sale Barbecue Potluck Other (describe Describe Other:	Catering be below)	(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 ingredients), use back of page if necessary. <u>Pizza (cheese/popperoni</u>	Facility Guidel	lines for definition) items to be sold/served (include
Where will this food be prepared or purchased [Note no Home Ba	ked/Cooked Iter	ns are Allowed]? Costco
List all beverages to be sold/served: n/a		
Where will beverages be prepared or purchased? n/a		
Method/s of maintaining proper holding temperatures for potential Pizza will be enclosed in boxes to maintain sanital	•	od/s during transportation and service:
Agreement: For the privilege of selling foods and/or beverages or handling orientation (offered at the beginning of Fall and Spring of Temporary Food Facility Guidelines governing food sales or servi and/or beverage selling/serving privileges and possibly disciplinar	uarters), agrees ice. Failure to c	to read, understand, and comply with the CSLA
Insurance: (Student Organizations Only) As a prerequisite, the Specoverage from the Associated Students, Inc. (ASI) at least two were Student Organization's activity in its insurance policy. This Temp proof of ASI insurance.	eks prior to the	event date and ASI agrees to include the Sponsoring
No liability will be assumed by California State University, Los Services for any food or beverage the sponsoring organization submitted at least 10 days prior to the activity for proper reviews a event date.	provides to the	campus community. This permit should be
All signatures shall be obtained in the following <u>order</u> . Student	organizations r	need \underline{all} signatures; other organizations 1, 3 and 4 only.
allison fin		Allison Lim
. Signature of Sponsoring Organization Chairperson	A	authorized Representative to be present at event
2. Center for Student Involvement (UU 204) (Student Organization	ıs Only)	Date 9/28/15
3. University Auxiliary Services Inc. (Golden Eagle Bldg 314)	# 15-6	Date 1 9/28/15
. Environmental Health & Safety (Corporate Yard Bldg. 244)	Permit No.	Date
)		Revised 05/2012



HELP SUPPORT PHSA!

October 24 at KING HALL WALKWAY

Pepperoni'& Cheese \$2/slice



STUDENT ORGANIZATION COMPLETED EVENT REGISTRATION FORM



NAME OF ORGANIZATION	ON: Public Health Student Association	on.	PHONE: (3	10)977-7789	DATE: (19/25/15
EVENT CONTACT NAME	: Allison Lim		E	MAIL: president.	phsa.csula@gm	ail.com
NAME OF EVENT: PHSA	Pizza Fundraiser		LOCATION:	King Hall	•	
EVENT DATE: 11/09/15	BEGIN TIME: 11:00	END TIME: 3:00	ESTIMA	TED ATTENDAN	CE: 5	
TYPE OF ACTIVITY (THE	UNIVERSITY'S GENERAL RELEASE WI	LL BE REQUIRED FOR CERT	AIN EVENTS.)			<u> </u>
FUNDRAISER	EDUCATIONAL PROGRAM	SPIRITUAL PROGRA		ECREATIONAL PR	ROGRAM	
DANCE/PARTY	SOCIAL PROGRAM	COMMUNITY SERVI	ICE C	ONFERENCE/CO	VENTION	
OTHER:						11. 4
PLEASE DESCRIBE THE I	EVENT					
Public Health Student Association.	ociation will sell Costco Pizza at the I	King Hall walkway on Nove	mber 9 in order	to raise funds for o	our underfunded	İ
	•	•				
						* 2 *
WHO IS INVITED (CHECK	(ALL THAT APPLY):					
	BERS CAL STATE L.A, COMMI	JNITY OTHER COLL	EGES & UNIV.	GENERAL	PUBLIC	GUEST LIST
	he general Cal State L.A. campus e Center for Student Involvement.	_	_	on Calendar of E		
	AN ADMISSION CHARGE, REGIS tatement regarding cash transacti	•		YES, HOW MUC	H?	
WILL A MOVIE BE SHOW	/N? NO YES (If yes, pleas	e attach written proof of v	riewing rights.)	-		
WILL THE EVENT HAVE S	<u> </u>	es, please explain				
WILL FOOD BE SERVED	AT THE EVENT? NO PYES	London District Control of the Control of Co	Localitica Bossian - Garden L	Caranta Company Company	was and the second	A A CONTRACT OF
	OVIDETHE FOOD? UNIVERSITY		Self-Purchassed	· !		
•	permit is required for all on-campu	 .			ity Catering.	
The state of the s	SENT AT THE EVENT?	YES. Please attach a co	mpleted requ	est to serve alco	holic beverag	
WILL THE EVENT BE LIE	LD IN A RESTAURANT/VENUE W	(This form may take			a possible appr iitials	oval.)
	If so, please affirm organization				Televis	
WILL OFF-CAMPUS MEI	DIA BE NOTIFIED ABOUT THE EVI	ENT (NEWSPAPER, TV, R	ADIO, ETC.)?	NO YES		
DOES THE STUDENT OR	GANIZATION WANT TO PURCHAS	E SPECIAL EVENT INSUR	ANCE FOR TH	IS EVENT? 📵 N	O 🔲 YES	
the University-Student Un	ident organization events are not onion. Student organization officers issurance for a particular event, pleas	or the advisor may be held se contact CSI.	er insurance by I personally liab	le. If the student	organization we	Angeles or ould like to
MY SIGNATURE BELOW	V INDICATES THAT I WILL TAKE I	RESPONSIBILITY TO ENS	URE THAT TH	E EVENT WHICH	MY ORGANIZ	ATION IS
	LLOW ALL GUIDELINES SET FOR			·		
STUDENT ORG. OFFICE	R'S NAME S	IGNATURE (PLEASE USE BL	ve or black ink	ONLY) DATE	.	
Allison Lim		allyon Sur	l a	9/	24/15	
ADVISOR'S NAME		1/2084/11	<i>I.</i> –	(and return training or and instanting to	6-1-	
Dr. Claudia Toledo-Corra	.	-{LO[14]L		9	P9/15	
				Und	atad 6 25 15	Dagg 1 of 2

CALIFORNIA STATE UNIVERSITY, LOS ANGELES TEMPORARY FOOD FACILITY PERMIT

		I EMPORARI TOOD I II.		_
			Estimated Attendan	ce: <u>5</u>
ate of Ev	ent: 11/09/2015	lent Association Pizza Fu	ndraiser	
ame of E	vent: Public Health Stor	Location	ı: King Hall	
ype of Ev	rent: Fundraiser	uth Student Association		
1.4.	- Organization: Fubile 1100	aith Student Association Phone:	(310) 977-7789 F	ax: _ \
uthorized	d Representative: Allison Li	III FILORO	~ ∙	
ime:	ccess Time: 10:30 am a.m. vent Time: 11:00 am a.m.	/a.m. to 3:30 pm a.m./p.m.	Allyman CA	info3
Type of F	ood Service: Bake Sale Snac	ks Food Sale Cock Other (describe below	catering above this box; see in Facility Guidelines	omplete name and address in space paragraph 6.2(e) in Temporary Food for further instructions.)
)	Describe Other:	c - 4 (gra Temporary Food Facili	ty Guidelines for definition) items to be sold/served (include
List <u>all</u> fo	ood and potentially hazardous its), use back of page if necess	ary. <u>Pizza (cheese/pepperoni)</u>		
Where w	ill this food be prepared or pu	rchased [Note no Home Baked/C	ooked Items are Anoweug	
	r to be sold/served:	/a		
List an c	vill beverages be prepared or p	ourchased? n/a	4 C - 4/a during trans	portation and service:
Where v	of maintaining proper holdi	ng temperatures for potentially he	azardous 1000/s during during	
Agreen handlin	nent: For the privilege of selling orientation (offered at the brary Food Facility Guidelines	ng foods and/or beverages on car eginning of Fall and Spring quart governing food sales or service.	npus, the Sponsoring Organ ers), agrees to read, underst Failure to comply with the tion.	and, and comply with the CSLA rules may result in the loss of food
and/or Insura	nce: (Student Organizations Oge from the Associated Student	only) As a prerequisite, the Spons ats, Inc. (ASI) at least two weeks incurance policy. This Tempora	prior to the event date and a ry Food Permit will not be a	ASI agrees to include the Sponsoring approved unless accompanied by a
Studen proof o No lia	of ASI insurance. bility will be assumed by Ca res for any food or beverage	lifornia State University, Los A the sponsoring organization pr	ngeles, University-Studen ovides to the campus com approvals; otherwise there	t Union, or University Auxiliary munity. This permit should be is no guarantee of completion by the
submi	tted at least 10 days prior to to	de activity for proper	intions need all signat	ures; other organizations 1, 3 and 4 or
All ai	onatures shall be obtained in	a the following <u>order</u> . Student o	thursanous need ==	
True an				
a	llion for	Chairmanan	Authorized Re	presentative to be present at event
1. Si	mature of Sponsoring Organiz	of land		9 728 / 15 Date
	- Car Student Involvement	(UU 204) (Student Organization	s Only)	ah xlii
		4		Date
3. U	niversity Auxiliary Services,	inc. (Golden Eagle Bldg 314)	15-615	9/28/15
	invironmental Health & Safet	§	Permit No.	Date Revised 05/
4. E	nvironmental Health & Salet	(Any)		,

PUBLIC HEALTH STUDENT ASSOCIANION

HELP SUPPORTURESA!

November 9 at KING-HALL WALKWA Pepperon & Cheese \$2/slice

ASI

"...For the Students, by the Students!"

STUDENT ORGANIZATION EVENT REGISTRATION FORM





NAME OF ORGANIZATION	ON: Public Health Student Association	on	PHONE: (310)977-7789 DA	TE: 10/24/2015
EVENT CONTACT NAME	: Allison Lim		EMAIL: president.phsa.csula	@gmail.com
NAME OF EVENT: PHSA	Porto's and Boba Fundraiser	L	OCATION: University Student Union W	⁷ alkway
EVENT DATE: 11/25/15	BEGIN TIME: 11:00 am	END TIME: 3:00 pm	ESTIMATED ATTENDANCE: 5	
TYPE OF ACTIVITY (THE	UNIVERSITY'S GENERAL RELEASE W	ILL BE REQUIRED FOR CERTAIN	EVENTS.)	
FUNDRAISER	EDUCATIONAL PROGRAM	SPIRITUAL PROGRAM	RECREATIONAL PROGRAM	
DANCE/PARTY	SOCIAL PROGRAM	COMMUNITY SERVICE	CONFERENCE/CONVENTIO	N
OTHER:		•	the state of the s	
PLEASE DESCRIBE THE	EVENT	······································		
Public Health Student Assunderfunded association.	ociation will sell Porto's baked goods	and milk tea boba from Bahn N	Mi Che Cali on November 25, in order to	raise funds for our
.*				
WHO IS INVITED (CHECK		_		-
STUDENT ORG. MEMI	BERS LICAL STATE L.A. COMM	UNITY OTHER COLLEG	GES & UNIV. GENERAL PUBLIC	JGUEST LIST
Events intended for t	he general Cal State L.A. campus	will be listed in the Studen	t Organization Calendar of Events dis	stributed in a
	e Center for Student Involvement	_	NO, I DO NOT WISH FOR MY EVENT TO	
WILL THE EVENT HAVE	AN ADMISSION CHARGE, REGI	STRATION FEE OR DONAT	ION?	
	statement regarding cash transact			
WILL A MOVIE BE SHOW	/N? NO YES (If yes, plea	se attach written proof of view	wing rights.)	
WILL THE EVENT HAVE	SECURITY? NO YES IF	yes, please explain		
WILL FOOD BE SERVED	AT THE EVENT? NO PYES	3	e de la companya del companya de la companya del companya de la co	
IF YES, WHO WILL PR	OVIDE THE FOOD? UNIVERSITY	CATERING OTHER: Se	If-Purchased	•
A completed food	permit is required for all on-camp	us events with food unless th	e food is provided by University Cater	ring.
WILL ALCOHOL BE PRE	SENT AT THE EVENT?		pleted request to serve alcoholic be p to two weeks for review and possible	
WILL THE EVENT BE HE	ELD IN A RESTAURANT/VENUE W If so, please affirm organization			· .
WILL OFF-CAMPUS ME	DIA BE NOTIFIED ABOUT THE EV	ENT (NEWSPAPER, TV, RAD	DIO, ETC.)? ONO YES	
DOES THE STUDENT OR	GANIZATION WANT TO PURCHAS	SE SPECIAL EVENT INSURAN	NCE FOR THIS EVENT? 10 NO TO	ÆS.
the University-Student U	udent organization events are not inion. Student organization officers nsurance for a particular event, plea	or the advisor may be held p	insurance by California State University ersonally liable. If the student organizat	/, Los Angeles or tion would like to
·	V INDICATES THAT I WILL TAKE OLLOW ALL GUIDELINES SET FO		RE THAT THE EVENT WHICH MY ORG	SANIZATION IS
STUDENT ORG. OFFICE	ER'S NAME	SIGNATURE (PLEASE USE BLUE	OR BLACK INK ONLY) DATE:	
Allison Lim		allion Lin	9/25,	/19
ADVISOR'S NAME Dr. Claudia Toledo-Corra	ત્રી	(lWhle-	- 9hs	/15
	•	~~~///	Lindstod 6 21	E 15 Dags 1 of 2

Revised 05/2012

CALIFORNIA STATE UNIVERSITY, LOS ANGELES TEMPORARY FOOD FACILITY PERMIT

Date of Event: 11/25/2015	Estimated Attendance: 5
Name of Event: Public Health Student Association F	
Type of Event: Fundraiser	Location: University Student Union WAUKWAY
Sponsoring Organization: Public Health Student Assoc	
Authorized Representative: Allison Lim	Phone: (310) 977-7789 Fax:
Event Time: 11:00 am a.m./p.m. to 3:00 pm a Type of Food Service: Bake Sale Snacks Food Sale Barbecue Potluck Other (descri	Sambon. Sam
ingredients), use back of page if necessary. Guava pastry. Potato be	·
Where will this food be prepared or purchased [Note no Home Bo	aked/Cooked Items are Allowed]? FOILOS BAREIY
List all beverages to be sold/served: Milk Tea Boba	
Where will beverages be prepared or purchased? Bahn Mi Ch	ne Cali
Method/s of maintaining proper holding temperatures for potential Tent to keep out heat and ice chest for drinks	
handling orientation (offered at the beginning of Fall and Spring	rice. Failure to comply with the rules may result in the loss of food
Insurance: (Student Organizations Only) As a prerequisite, the S coverage from the Associated Students, Inc. (ASI) at least two we	ponsoring Student Organization agrees to obtain proper insurance seks prior to the event date and ASI agrees to include the Sponsoring porary Food Permit will not be approved unless accompanied by a
Services for any food or beverage the sponsoring organization	os Angeles, University-Student Union, or University Auxiliary a provides to the campus community. This permit should be and approvals; otherwise there is no guarantee of completion by the
All signatures shall be obtained in the following order. Studen	at organizations need <u>all</u> signatures; other organizations 1, 3 and 4 only.
allison Sin	Allison Lim
1. Signature of Sponsoring Organization Chairperson	Authorized Representative to be present at event
<i></i>	9/28/15
2. Center for Student Involvement (UU 204) (Student Organization	ns Only) Date
Must The	4/28/1
. University Auxiliary Services, Inc. (Golden Fagle Bldg 314)	#15-617 9/28/15
Environmental Health & Safety (Corporate Yard Bldg. 244)	Permit No. Date
	· · · · · · · · · · · · · · · · · · ·

Public Health Student Association

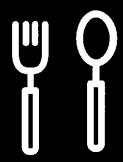
Fall Fundraiser

Help Support PHSA!!

Wednesday November 25
University Student Union Walkway



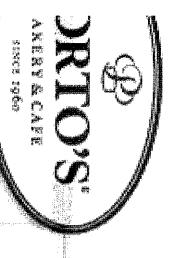
Boba \$2 Porto's \$1.50





495.52	Total (includes tax)			
130.15	12 Costco	12	\$9.95	Combination Pizza
130.15	12 Costco	12	\$9.95	Pepperoni Pizza
81.75	50 Bahn Mi Che Cali	50	\$1.50	Milk Tea Boba
51.01	60 Porto's Bakery	60	\$0.78	Guava Strudel
49.05	60 Porto's Bakery	60	\$0.75	Cheese Roll
53,41	50 Porto's Bakery	50	\$0.98	Potato Ball
Total \$	Purchased From	Amount	Price	Item 💝

THE TOTOS PACES CON LOS CONTRACTORS OF THE PACES OF THE P



And Torios

8

Plant Burbark

order Prince

BAKERY

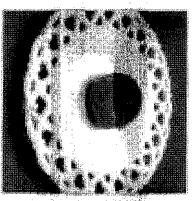
SETTASONY TWO.

YOUNG WINDOWS HOME BAKERY

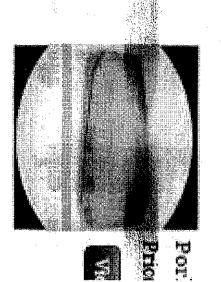


Ment Die Dastel de

WILLIAM CONTRACTOR



Fototo Ballin





www.portosbakery.com/bakery/sweets/puffpastriesstrudelscroissants/all

Q Search



Alook at: Burbank Glendale Downey

BAKERY

SEE ITEMS ONLY FOR-

验All Stores

CAKES

CAFE

Burbank

Glendale

CATERING

Search Porto's

8

Puff Pastrics, Thudels and Eicissants . HOME . BAI

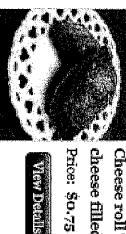
Our Most Popular Puff Pastries, Strudel and Croissant Items...



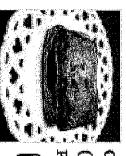
guava & cheese Refugiado TM-

Price: \$0.80

View Details



cheese filled pastry Cheese roll TM-



Price: \$0.78 Guava strudel (pastel de guayaha)

75 FA DRINKS \$300 PA

STATEMENT TO THE PROPERTY OF T

T I FREE

買一送一 BUY 1 GET 1 FREE



