

# Associated Students, Inc. Funding Request Form

"...For the Students, by the Students 2017-18

- Event Flyer w/ A.S.I. Logo
- SI Event Reg. Form
- Estimates / Food Permits

178	Event	Estimates /	Invoicee
460	LACIII	Louinateo/	IIIAOICES

Contact		Event	Estimates / Invoices		
Officer Name:		Club/Organization: Beta Alpha Psi			
Officer Title:		Event Title: Spring Awards Banquet			
Address:		Date(s) of Event: 4/26/18 Semester	Fall . j		
City/State/Zip:		Location of Event: Luminarias			
Phone & Email:		Expected Total Attendance:	120		
Officer Signature:	_	Expected Attendance of Cal State LA.Studen	ts:60		
Event De	escription an	d Total Cost Breakdown			
Briefly describe the event:		Is the event open to all Cal State LA students?: Yes			
Spring networking banquet is an eve		How will this program enhance the Cal State LA experience?:			
intended to recognize the accomplist student organizations. The event will for professionals from public and priviplications students and our CSULA Fact	ll cater dinner vate firms,	The event will provide networking opportunities and empowering speeches from professionals that will create long lasting memories. Past students from the event have received job offers and internships.			
Hospitality		Honoraria/Contracts			
Description Luminarias: Location & Dinner	Amount \$4,292.84	Description	Amount		
Center Piece x 15	\$479.85				
Marketing Description	Amount \$0.00	Other  Description	Amount		
Event Summary		For Office Use Only • Do Not	Write Below		
Total Cost of Event:	\$4,772.69	Important:			
Amount Requested from A.S.I.:  Amount from other sources:  What other resources are you employing	\$3,000.00 \$1,722.69 If for this event?	<ul> <li>(1) All Funding Request Forms must be turned in by 12 PM Friday, the week before the Funding Sub-Committee Meetings.</li> <li>(2) Additionally, funding request forms must be turned in no less than 10 business days (2 weeks) prior to the event.</li> <li>(3) Deadline for Request for Payment or Purchase Order (RPP) is 15 days after the event.</li> </ul>			
Fundraising		All forms must have a Time Stamp and staff initial:	2:21:41		

## 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.

NAME OF ORGANIZATION: Beta Alpha Psi

PHONE:

DATE: 01/10/2018

EVENT CONTACT NAME: Josue Enriquez

EMAIL:

LOCATION: Luminarias 3500

NAME OF EVENT: Spring Awards Banquet

**EVENT DATE: 4/26/2018** 

BEGIN TIME: 6:00 pm

END TIME: 11:00 pm

ESTIMATED ATTENDANCE: 120

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

BENEFITS TO PROCEED

**EDUCATIONAL PROGRAM** 

SPIRITUAL PROGRAM

RECREATIONAL PROGRAM CONFERENCE/CONVENTION

DANCE/PARTY

SOCIAL PROGRAM

COMMUNITY SERVICE

OTHER:

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):

Spring networking banquet is an event that is intented to recognize the accomplishments of our student organizations. The event will cater dinner for professionals from public and private firms, fellow students, and our CSULA faculty. It will provide networking opportunities and empowering speeches that will create long lasting memories. The accounting department will be providing scholarships to worthy canditates that meet the requirements.

WHO IS INVITED (CHECK ALL THAT APPLY):

TUDENT ORG, MEMBERS

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)

WILL A MOVIE BE SHOWN?

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

WILL THE EVENT HAVE SECURITY?

NO

YES If yes, please explain

WILL FOOD BE SERVED AT THE EVENT?

UNIVERSITY CATERING

OTHER: Luminarias

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?

IF YES, WHO WILL PROVIDE THE FOOD?



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

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

If so, please affirm organization members and guests will not consum

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?

11 1

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 would like to purchase Special Event Insurance for a patitional control of the student organization would like to

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 reised 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.

The event with SHII	ll be 45 dollars per pe ey ho う	rson, that will include — Jawan G	food and admisio へつりo 〜〜	on. All proceeds go		ne end of every ye エモシードム	
PRESIDENT	. Nairi Mirzakhanya	<b>n</b>	SIC	SNATURE:	做起		DATE: 1/22/18
TREASURE	R: Joseph Penunia		Su Su	GNATURE:	IPE		DATE 1/23/18
EVENT G	UIDELINES						1
to comply w	ith any of the follow	vided for the benefit ring guidelines may r scilities. More inform	result in disciplin	iary action taken a	egainst the organiz	rafion including	oletely. Failure suspension of
CONDUCT:	The organization as	sumes full responsibil d/or the organization	lity for the conduc	at of participants at	the event. Any viola	ation of University	/ policy may subject onduct.
ALCOHOL;	consumption of a submit a Request 3 weeks for this for alcohol is available	h Administrative Pro Icoholic beverages r to Serve Alcoholic i orm to be reviewed i e (but will not be co Itional guidelines mo	requires authoriz Beverages form by the University Insumed) requir	zation from the Ui in addition to this y. Approved alcof	niversity. Your org s Event Registration nol consumption e	anization must on Form, Please Vents and even	complete and allow at least a held where
PUBLICITY:	All publicity mater of this organization	fal must have the na n do not necessarily	ame of the spons reflect those of	soring group and the students, sta	the following state ff, faculty, or admi	ement: "The acti nistration of Ca	ons and opinions State LA,"
GENERAL RELEASE:	if your event will re organization is rec requested docum	equire the use of ge juired to comply wit ents. P	neral release wath all instructions	provided by CSI,	anization member , including submitt	and guest parti ing all complete	cipation, your ed forms and
FOLLOW AL	L GUIDELINES SET FO	S THAT I WILL TAKE R ORTH BY THE UNIVERS ON BASED ON MY OR	SITY, I ACKNOWLE	EDGE THAT THIS EV	ENT AND ANY ASS	ORGANIZATION	IS SPONSORING WILL SPACE RESERVATIONS
STUDENT O	NAME PHILIP		SIGNATUR		E OR BLACK INK ONLY  KING	DATE:	1/2018
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hamid manual	IC AFFAIRS	DATE:		ATHLETICS	EE COORDINATOR	DATE:	
	OF PUBLIC SAFETY	DATE:		Tarinies n	SE COORDINATOR	DATE:	
MUIESON	UPDATES:						



# SPRING AWARDS BANGULET

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Giricher Prinses

SSE 010 amil March Zert

SZE 010 amil Afril 4th

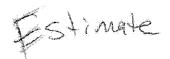
SSE 010 amil April 4th

Usachre April 11 at 1459 PM

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# LUMINARIAS

### Isabel Orozco (323) 268 - 4393 {Catering Sales Manager}

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portion.	Profitation and Profita	SHIP GALARIA DE LEGICA PARA	essenting all and the second s	Event Date:	Thursday, April 26, 2018
Contact:				Room:	View
Phone:				Time:	6pm - 11pm
	Descr	iption		Price	Total
120	per pe	erson		\$27.00	\$3,240.00
					\$0.00
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	7			Sub Total	\$3,240.00
				21% Service Charge	\$680.40
				Sub Total	\$3,920,40
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	* .			management of the second process of the seco	\$0.00
				Sub Total	\$3,920.40
:				*Current Sales Tax	\$372.44
		li .		TOTAL	\$4,292.84
				Less Deposit #	Amount
Deposif Due Upon					
Booking	30%	\$1,288			
2nd Deposit Due Mid Way	30%	\$1,288			<u></u>
50% down if your event is within 90 days of booking	50%	\$2,146			
······································					
	-			Total Deposits:	\$ 1
				TOTAL DUE	\$4,292.84
			t		

FINAL BALANCE DUE 10 DAYS PRIOR TO EVENT DATE IN FORM OF CASH, CREDIT CARD OR CASHIER'S CHECK ONLY.



# R SHOPPING CART

Product(s) Currently in Your Cart

Rose and Lily Lemonade Bouquet SKU: BF7-11K-2

Remove Item »

Delivery Info

Change Date »

Delivery to: 90028 Date: 04/26/2018

Card - Blank Càrd There will be 15 of these center pieces

Signed:

Josue

Card

Edit Card »

Price

Rose and Lify Lemonade Bouquet

\$39.00 \$31.99

Product Subtotal:

\$31.99

If you have a discount code, please enter if here (optional):

Your discount has been applied.

You Saved: Order Subtotal:

\$8.00 \$31.99

Continue Shopping

Continue to Secure Checkout







