# 451

# Associated Students, Inc. Funding Request Form

For the Students, by the Students 2017-18

Necessary	Documents:

- ☐ Event Flyer w/ A.S.I. Logo
- □ CSI Event Reg. Form
- ☐ Estimates / Food Permits
- ☐ Event Estimates / Invoices

Contact

Officer Name:

Officer Title:

Address:

City/State/Zip:

Phone & Email:

Officer Signature: \_

## **Organization**

Club/Organization: Financial Management Association

Event Title: Mexican Sweet Bread Fundraiser

Date(s) of Event: 02/14/2018 Semester Spring

Location of Event: On Campus

Expected Total Attendance: 100

Expected Attendance of Cal State LA.Students:

100

## **Event Description and Total Cost Breakdown**

Briefly describe the event:

Selling La Fama Panaderia Mexican Sweet Bread to raise money for the Financial Management Association.

Is the event open to all Cal State LA students?: Yes

How will this program enhance the Cal State LA experience?:

Event will provide an inexpensive and quick snack for students.

## Hospitality

Description	Amount
200 Mini Mexican Sweet Breads	100
2 Plates/ 3 Napkins	5.00
Disposable Gloves	2.00

### Honoraria/Contracts

Description	Amount
N/A	
-	

### Marketing

Description	<sub>I</sub> Amount
Fuji Film Instax- 1 Pack	13.44
2 Balloons	2.00

### **Other**

Description	, Amount
Taxes-	10.71
•	

### **Event Summary**

Total Cost of Event \_133.15 o

Amount Requested from A.S.I.:

133.15

Amount from other sources:

What other resources are you employing for this event?

(1) Table and (2) Chairs

## For Office Use Only • Do Not Write Below

### Important:

- (1) <u>All Funding Request Forms must be turned in by 12 PM</u>
  Friday, the week before the Funding Sub-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.

## All forms must have a Time Stamp and

staff initial:



110 JAN 30 FK12:29:57

# 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: Financial Ma	nagement Association	PHONE:	DATE: 01/22/2017
EVENT CONTACT NAME: Richard Lozar	10	EMAIL:	garanta di kacamatan da kacamata Kacamatan da kacamatan da kacama
NAME OF EVENT: Fundraiser		LOCATION: On Camp	nus - VSU Walkinay 1
EVENT DATE: 02/14/2018 BEGINTIM	IE: 8am END TIME: 2pm	ESTIMATED ATT	•
	IERAL RELEASE WILL BE REQUIRED FOR CEF TIONAL PROGRAM SPIRITUAL P PROGRAM COMMUNITY	ROGRAM RECR	EATIONAL PROGRAM ERENCE/CONVENTION
WILL YOUR EVENT INCLUDE ANY OF T	HE FOLLOWING? (PLEASE CHECK ALL TE	ΙΔΤ ΔΡΡΙΥ)	
SPORTS ACTIVITY OR COMPETITION BEACH CLEAN-UP BEACH BONFIRE PLEASE DESCRIBE THE EVENT BELOW The event will be on campus. The Financial	FOREST/PARK CLEAN-UP INDOOR/OUTDOOR COOKING INCLUDE ALL ACTIVITIES):	☐INTERNAT	nterior de la Marietta de Marietta de Colonia de Coloni
who is invited (check all that app    Student org. members   Cal. st		LLEGES & UNIV. ☐GE	ENERAL PUBLIC ☐ GUEST LIST
STUDENT ORG. MEMBERS CALS	STATE LA COMMONITY OTHER CC	LLEGES & UNIV.	ENERAL PUBLIC GUEST LIST
Events intended for the general Cal S weekly email by the Center for Stude	tate LA campus will be listed in the Stud nt Involvement.		r of Events distributed in a bi- OR MY EVENT TO BE POSTED.
WILL THE EVENT HAVE AN ADMISSION ORGANIZATION? (If yes, please complete WILL A MOVIE BE SHOWN? NO WILL THE EVENT HAVE SECURITY?	CHARGE, REGISTRATION, PARTICIPATION STATEMENT REGISTRATION, PARTICIPATION STATEMENT OF COMMENTS.  YES (If yes, please attach written proof of the comments of	transactions on the back	ROCEEDS TO BENEFIT THE of this form) NO YES
WILL FOOD BE SERVED AT THE EVENT	? NO V YES		
IF YES, WHO WILL PROVIDE THEFOOD		R: Purchased from La Fama	Panaderia
	d for all on-campus events with food unl	The state of the s	
WILL ALCOHOL BE PRESENT AT THE EV		•	erve alcoholic beverages. eview and possible approval.)
	IT/VENUE WHERE ALCOHOL IS AVAILABLE?		tials PLEASE LIST 2 TIPS TRAINED
	nization members and guests will not o		MEMBERS ON PAGE 2.
	D ABOUT THE EVENT (NEWSPAPER, T		YES, PLEASE PROVIDE WHO WILL BE INVITED ON PAGE 2.
DOES THE STUDENT ORGANIZATION W	ANT TO PURCHASE SPECIAL EVENT INS	URANCE FOR THIS EVEN	T? ✓NO YES
	on events are not covered for liability or ganization officers or the advisor may be articular event, please contact CSI.		





### 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.

		rganization will be cha MLXI CAN			oceeds 1	MIL go t	<b>0</b> ,149,000
	nization			ATURE: M. Ma	$\emptyset$	DATE:	1-23-18
TREASURER	: Hector Banuelos		SIGN.	ATURE:		DATE	1/23/1
	UIDELINES	**************************************					
to comply w	ith any of the followi	ided for the benefit of t ng guidelines may resul cilities. More informatior	lt in disciplinar	y action taken against	the organizat	ion including susper	
CONDUCT:		sumes full responsibility for the organization to di			-		
ALCOHOL:	consumption of alc submit a Request 3 weeks for this fo alcohol is available	n Administrative Proced coholic beverages requ to Serve Alcoholic Beve rm to be reviewed by th (but will not be consultional guidelines may b	ires authoriza erages form in ne University. med) require a	tion from the Universit addition to this Event Approved alcohol con	ty. Your orgar : Registration sumption eve	nization must compl Form. Please allow ents and events held	ete and at least I where
PUBLICITY:		al must have the name n do not necessarily refl	•		. •		•
GENERAL RELEASE:	=	quire the use of genera uired to comply with all nts.					
FOLLOW ALI	L GUIDELINES SET FO JECT TO CANCELLATION DRG. OFFICER'S NAME	THAT I WILL TAKE RESPO RTH BY THE UNIVERSITY. ON BASED ON MY ORGAN ME	I ACKNOWLED IIZATION'S REC	GE THAT THIS EVENT A	ND ANY ASSOC		RESERVATIONS
ADVISOR'S			27	In.		1-22-1	
CENTER I	FOR STUDENT INV ES THE ORG. IS RECO IT DEAN OF STUDE	NOWLEDGME  DLVEMENT (U-SU 204  GNIZED BY THE UNIVERS  ENTS: WELLNESS & EN  D FOR ALL PARTICIPAL	I) SITY IGAGEMENT	SIGNATURE:		DATI	E:
NOTIFIC	ATIONS:						
	IC AFFAIRS	DATE:		ATHLETICS		DATE:	
DEPT	. OF PUBLIC SAFETY	DATE:		FACILITIES USE COC	ORDINATOR	DATE:	
NOTES OF	UPDATES:						

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

Print Form

Clear Form

Date of Event: _02/14/2018	Estimated Attendance: 100
Name of Event: Mexican Sweet Bread Fundraiser Event	
Type of Event: Fundraiser Location: CS	ULA Campus USU Malkway 1_
Sponsoring Organization: Financial Management Association	3 =
Authorized Representative: Richard Lozano Phone:	Fax:
Time:	
Access Time: 8AM a.m./p.m. to 2pm a.m./p.m.	903
Event Time: 8AM a.m./p.m. to 2pm a.m./p.m.	
Type of Food Service:	·
Bake Sale Snacks ✓ Food Sale Catering  Barbecue Potluck Other (describe 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.)
Describe Other:	
List <u>all</u> food and potentially hazardous food (see Temporary Food Facility Guide ingredients), use back of page if necessary. <u>Mexican Sweet Bread</u>	elines for definition) items to be sold/served (include
Where will this food be prepared or purchased [Note no Home Baked/Cooked Ite Panaderia Mexican Sweet Bread-Chocolate and Vanilla	ms are Allowed]? Purchasing La Fama
List all beverages to be sold/served: None	
Where will beverages be prepared or purchased? n/a	
Method/s of maintaining proper holding temperatures for potentially hazardous for $\mathbf{n/a}$	ood/s during transportation and service:
Agreement: For the privilege of selling foods and/or beverages on campus, the Shandling orientation (offered at the beginning of Fall and Spring quarters), agree Temporary Food Facility Guidelines governing food sales or service. Failure to and/or beverage selling/serving privileges and possibly disciplinary action.	s to read, understand, and comply with the CSLA
<u>Insurance</u> : (Student Organizations Only) As a prerequisite, the Sponsoring Stude coverage from the Associated Students, Inc. (ASI) at least two weeks prior to the Student Organization's activity in its insurance policy. This Temporary Food Peproof of ASI insurance.	event date and ASI agrees to include the Sponsoring
No liability will be assumed by California State University, Los Angeles, University of any food or beverage the sponsoring organization provides to the submitted at least 10 days prior to the activity for proper reviews and approvals; event date.	ne campus community. This permit should be
All signatures shall be obtained in the following order. Student organizations	need <u>all</u> signatures; other organizations 1, 3 and 4 only.
Richard Lozano R.Z.	Richard Lozano
1. Signature of Sponsoring Organization Chairperson	Authorized Representative to be present at event
2. Center for Student Involvement (UU 204) (Student Organizations Only)	Date
(Amen OVI oc.	1/2h/1C
3. University Auxiliary Services, Inc. (Golden Eagle Bldg 314)	Date .
KM Sena en	1/20/10
4. Environmental Health & Safety (Corporate Yard Bldg. 244) Permit N	To. Date



Revised 05/2012



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## **OUTDOOR EVENT REQUEST FORM**

CALIFORNIA STATE UNIVERSITY, LOS ANGELES 5154 State University Drive, Rm # 107 Los Angeles, CA 90032-8636 Phone: (323) 343-2465 Fax (323) 343-2454

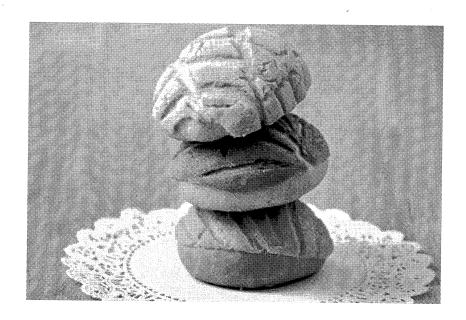
TYPE OF SPONSOR: ORecognized Club/Org O Cal State LA De	
Organization Name: Financial Managemen Ass.	Reservation Contact: Leslie Orellana
Phone Number:	Email:
Date of Event*: 2 14 / 2018	Title of Event: Mexican Swelf Bread
	Event End Time: 1.300m Access End time: 1.300m
Event Contact: FEICH VUZGUEZ	Phone Number:
Amplified Sound (Maximum two hours) Start: 9:0000	n End: 1:00 pm Amplified Sound Level: 1 0 2 0 3
Faculty/Staff Advisors Name: <u>Yalan</u> Feng	Extension:
If you represent an <b>off campus</b> organization:  1) Please provide billing address:	
Street Address:	City/State/Zip Code:
2) You must fill out Schedule B regarding event insurance.	
	그렇게 얼마를 가는 사람들이 그렇게 하는 것이다.
EVENT INFORMATION	
Please check YES or NO to the following statements regarding event details:  Registration, admission fees, or donations are being accepted:	OYES SNO Ifso, please specify amount: \$
There will be guest participants that are 51% from off-campus:  There will be vendors fair or exhibitors as part of this event:	OYES ONO
Alcohol will be served: Food will be served:	YES NO If so, an approved request to serve Alcoholic Beverages form must be submitted.  System Ono If so, who is providing?
This event is directed related to the educational mission of the University:  This event is sponsored or promoted by a non-University or off-campus organizati  This event is a profit-making venture (i.e. product show, or solicitation of goods or service)	A VEG A VO
Decorations, banners, or signs will be displayed:	small Banners/Balloons(2)  SYES ONO Ifyes, please describe: Social media Bunners.
The media will be notified about the event (newspapers, television, radio stations etc.): A movie/film/documentary will be shown at this event: This event is co-sponsored by the University-Student Union:	YES NO OYES NO If so, viewing rights must be provided before event can be confirmed. OYES NO If so, specify: OCCC OCSI Other:
MEDIA SERVICES - OUTD	OOR EQUIPMENT REQUEST
Basic PA II - Select components needed (Comes with MP3 Player)	Plaza Concert PA - Select components needed (Comes with CD & MP3 Player)
☐Wireless Microphone (1 available) ☐Wired Microphone up to 2 available System	wit a PA in that fits rineeds.  □ Wired Microphone
Additional AV Equipme	ent Plaza Podium Expected Attendance Setup Count

					tion, will result in an automatic car	ıcellatio
sponsor/department/club/organization's responsibility to follow up with our office.  I understand I, or my event contact, will need to present an ID in order to check-in the day of the event, and ONLY I or my event contact can sign and/or make changes to the reservation.  I understand my reservation must be canceled 2 business days prior to the event date, or it will be considered a No-Show.  I understand that submitting requests less than 10 business days in advance does not guarantee my paperwork will be processed in time.  INFORMATION TABLES/SPECIAL EVENTS  Please provide more information about your event, if needed.	<b></b> ✓ \				n. it is the	
and/or make changes to the reservation.  I understand my reservation must be canceled 2 business days prior to the event date, or it will be considered a No-Show.  I understand that submitting requests less than 10 business days in advance does not guarantee my paperwork will be processed in time.  INFORMATION TABLES/SPECIAL EVENTS  Please provide more information about your event, if needed.	sponsor/department/club/org	ganization's responsibility to	follow up with our off	īce.		
I understand that submitting requests less than 10 business days in advance does not guarantee my paperwork will be processed in time.  INFORMATION TABLES/SPECIAL EVENTS  Please provide more information about your event, if needed.			ID in order to check-i	n the day of the event, and	ONLY I or my event contact can sign	gn
INFORMATION TABLES/SPECIAL EVENTS Please provide more information about your event, if needed.	$ hoto \sum$ I understand my reservation m	ust be canceled <b>2 business</b>	days prior to the even	t date, or it will be conside	red a No-Show.	
Please provide more information about your event, if needed.	I understand that submitting re	equests less than <b>10 busines</b>	ss days in advance do	es not guarantee my pape	rwork will be processed in time.	
Please provide more information about your event, if needed.	ń.					
Please provide more information about your event, if needed.						•
Please provide more information about your event, if needed.	δ <sub>1</sub> ,	Jan Barrell				
Please provide more information about your event, if needed.		•			i .	
Please provide more information about your event, if needed.	INFORMATION TABLES/SPEC	CIAL EVENTS				
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Page 3 of 3 | Updated: 7/19/17

## FINANCIAL MANAGEMENT ASSOCIATION

## MEXICAN SWEET BREAD FUNDRAISER



**FEBRUARY 14th, 2018** 

8AM - 2PM

Building a bridge between students and professionals









## 2 Disposable Gloves

## 2 Plates





3 Napkins

15





Style: Twin Pack Only

\$ **13**<sup>44</sup>

Ships when available in 1-2 days.

Ships from and sold by Amazon.com **exclusively for Prime members**. Gift-wrap available.

One Time Purchase:

	03379e3b-1754-4aff-8ba0-ff714681596	33.JPG
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CLASE DE PASTEL		
CLASE DE RELLENO KIND OF FILLING;		
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Financial Management Association (FMA)

Sweet Bread Fundraiser

Project Title: Mexican Project Description: Invoice Number: 1

Description	Quantity	Unit Price	Cost
Mexican Sweet Bread	200	\$.50	\$100.00
Plates	2	\$1.00	\$2.00
Napkins	3	\$1.00	\$3.00
Disposable Gloves	2	\$1.00	\$2.00
Fuji Film Instax	1	\$13.44	\$13.44
Balloons	2	\$1.00	\$2.00
		\$	nnanananananananananananananananananan
		Subtotal	\$122.44
	tax	8.75	\$10.71
		Total	\$133.15



## Dollar Tree Stores, Inc.

Store# 4530 3309 S Bristol St, S Santa Ana CA 92704-7	te A 262	(714)	557-2709
DESCRIPTION	QTY	PRICE	TOTAL
LUNCH NAPKINS LUNCH NAPKINS LUNCH NAPKINS LUNCH NAPKINS PLATE PAPER PLATES DISPOSABLE GLOVES DISPOSABLE GLOVES PINK HEART BALLOON FOIL BALLOON Bag Fee	1 1 1 1 1 1 1 1 1	1.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00	1.007 1.007 1.007 1.007 1.007 1.007 1.007 1.007 1.007 1.007 0.10N
Sub Total SALES TAX Total		\$10.1 \$0.7 \$10.8	78
US DEBIT  ********  Purchase  Auth/Trace N  Chip Card AID: A00	lumber:	Chip 236549/01	d

Thank You for Shopping at Dollar Tree
Where Everything's \$1.00
Now Shop On-Line at Dollartree.com

\*\*\*\*\*\*\*\*\*\*\*\*\*

We value your opinion!

Please provide your feedback at

www.dollartreefeedback.com

Receive chances to win \$1,000 daily plus\*
instant prizes valued at \$1,500 weekly \*
or by calling 1-877-368-2540.

For complete rules, eligibility and sweepstakes
period and previous winners please visit

www.dollartreefeedback.com

No purchase/survey required to enter.

Sweepstakes sponsored by Empathica, Inc.
across multiple international clients.

Survey Code: 1343 0643 4105 0201

6443 04530 01 023 2862065 Sales Associate:denise

1/23/18 20:49