ASSOCIATED Students, Inc.

"...For the Students, by the Students!" **2018-19**

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

Contact		Organization	nates / Food Permits					
Officer Name:		Club/Organization: Financial Management Association						
Officer Title:		Event Title: Pizza Fundraiser						
Address:		Date(s) of Event 9/5/18 Sem	ester Select One					
City/State/Zip:		Location of Event: Near CSULA Bookstore	•					
Phone & Email:		Expected Total Attendance: Expected Attendance of Cal State LAStudents:						
Officer Signature								
Event D	escription a	nd Total Cost Breakdown						
Briefly describe the event:		Is the event open to all Cal State LA students	7 Select One					
Pizza fundraiser Selling pizza to raise funds for club		How will this program enhance the Cal State Provide an additional food option for students at a raising funds for CSULA organization	A experience?					
Hospitality		Honoraria/Contracts						
Description Costco Pizza Quantity	Amount 10	Description	Amount					
Price (per single pizza)	\$9.95							
Marketing		Other						
Description	Amount	Description Total Price of Pizza (before taxes)	Amount \$99.50					
`		Taxes (total)	\$9.45					
Event Summary		For Office Use Only • Do Not W	lvita Balaw					
Total Cost of Event:	\$0.00	Important:						
Amount Requested from ASI:	\$108.95	(1) All Funding Request Forms must be turned in Friday, the week before the Funding Sub-Com	mittee Meetings.					
Amount from other sources:		(2) Additionally, funding request forms must be ture than 10 business days (2 weeks) prior to the even	rned in no less					
What other resources are you employing	for this event?	(3) Deadline for Request for Payment or Purchase 15 days after the event.	e Order (RPP) is					
		All forms must have a Time Stamp and staff initial: DS	115141					

ORGANIZATION FORM T ORGANIZATION





Updated 08.18.17 | Page 1 of 2

leted 10 business days prior to the event date. Reservations for on campus events will not be confirmed unless this form

neted. No publicity may be distributed or posted online until this form has been submitted for off campus events or until the agon confirmation process has been completed for on campus events. Signatures must be completed in blue or black ink.
NAME OF ORGANIZATION: Financial Management Association PHONE: DATE: 8/6/18
EVENT CONTACT NAME:
NAME OF EVENT: Fundraiser LOCATION: On earnpus
EVENT DATE: 9/4/8 BEGIN TIME: 10:30 am END TIME: 2:30 pm ESTIMATED ATTENDANCE: 10/A
TYPE OF ACTIVITY (THE UNIVERSITY'S GENERAL RELEASE WILL BE REQUIRED FOR CERTAIN EVENTS.) **JENEFITS TO PROCEED EDUCATIONAL PROGRAM SPIRITUAL PROGRAM RECREATIONAL PROGRAM DANCE/PARTY SOCIAL PROGRAM COMMUNITY SERVICE CONFERENCE/CONVENTION OTHER: Fundraiser for FMA (Finencial Magazenent Association
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/OUTDCOR COOKING DOMESTIC TRAVEL BEACH BONFIRE PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES):
> Fundraiser
> selling pizza on campu to resse for our club
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 bi- weekly email by the Center for Student Involvement.
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) NO 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? NO YES IF YES, WHO WILL PROVIDE THE FOOD? UNIVERSITY CATERING OTHER: Costro Pitza 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.)
WILL THE EVENT BE HELD IN A RESTAURANT/VENUE WHERE ALCOHOL IS AVAILABLE? If so, please affirm organization members and guests will not consume alcohol. PLEASE LIST 2 TIPS TRAINED MEMBERS ON PAGE 2.
WILL OFF-CAMPUS MEDIA RE NOTIFIED ABOUT THE EVENT (NEWSDADED TV DADIO ETC.)2 YES, PLEASE PROVIDE WHO
DOES THE STUDENT ORGANIZATION WANT TO PURCHASE SPECIAL EVENT INSURANCE FOR THIS EVENT? (NO) YES
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 pallocitative event, please contact [15].

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.

		organization will be o				ls.				
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PRESIDENT			s	IGNATURE:	<u>S</u>	<u>L</u>	Ven	\rightarrow	DATE:	16/18
TREASURE			s	SIGNATURE:	Med	nolez	Chectica	rejo	DATE: <u>\forall</u>	76/18
EVENT G	UIDELINES							<i>U</i>	A STATE OF THE STA	
to comply w	ith any of the follov	vided for the benefit oving guidelines may reactivities. More informa	esult in discipli	inary action	taken ag	ainst the	organizatio	n including		
CONDUCT:		ssumes full responsibilit d/or the organization to								y subject
ALCOHOL:	consumption of a submit a Reques 3 weeks for this f alcohol is availab	th Administrative Pro ilcoholic beverages re t to Serve Alcoholic B orm to be reviewed b le (but will not be cor ditional guidelines ma	equires author Beverages form by the Universinsumed) requi	rization from n in additio ity. Approve ire at least t	n the Uni n to this ed alcoho	iversity. Event Re ol consur	Your organiz egistration F mption even	ration must orm. Please ts and ever	complete a e allow at le nts held whe	and ast ere
PUBLICITY:		rial must have the nar on do not necessarily					_			
GENERAL RELEASE:	-	require the use of gen quired to comply with nents.		•	_					
FOLLOW ALI MAY BE SUB STUDENT O	L GUIDELINES SET F JECT TO CANCELLAT DRG. OFFICER'S NA	ES THAT I WILL TAKE RE ORTH BY THE UNIVERS TION BASED ON MY ORG AME	ITY. I ACKNOW GANIZATION'S I	LEDGE THAT	THIS EVE	ENT AND	ANY ASSOCI			
ADVISOR'S	NAME *			H-	2	>		3	18/19	Ŝ
CENTER CSI VERIFI	FOR STUDENT IN SESTHE ORG. IS REC NT DEAN OF STUD	KNOWLEDGI VOLVEMENT (U-SU) OGNIZED BY THE UNIV DENTS: WELLNESS &	204) PERSITY	\$10 N	FICE NATURE			,	DATE: 23//8	
NOTIFIC	:ATIONS:									
	LIC AFFAIRS T. OF PUBLIC SAFET	DATE:			LETICS ILITIES US	SE COORI		PATE:		
	R UPDATES:			_						

CALIFORNIA STATE UNIVERSITY, LOS ANGELES TEMPORARY FOOD FACILITY PERMIT

Print Form

Clear Form

Date of Event: 9/6/18	Estimated Attendance:
Name of Event: Fundraiser for FMA	
Type of Event: Loca	tion: On Campus
Sponsoring Organization: Financial Maragement	Association
Authorized Representative:	e:
Time:	Address:
Access Time: 10:30 fa.m./p.m. to 2130 a.m./p	
Event Time: 0,30 a.m./p.m. to 7:30 a.m./p	m.)
Type of Food Service:	
Bake Sale Snacks Food Sale	Catering (Provide caterer's complete name and address in space above this box; see Paragraph 6.2(e) in Temporary Food
Barbecue Potluck Other (describe be	ow) Facility Guidelines for further instructions.)
Describe Other:	
List all food and potentially hazardous food (see Temporary Food Fac	
ingredients), use back of page if necessary.	770
	- Alua cos
Where will this food be prepared or purchased [Note no Home Baked/	Cooked Items are Allowed]?(S\CS THUTAMISIA)
List all beverages to be sold/served:	
Where will beverages be prepared or purchased?	
Method/s of maintaining proper holding temperatures for potentially h	azardous food/s during transportation and service:
Agreement: For the privilege of selling foods and/or beverages on carhandling orientation (offered at the beginning of Fall and Spring quart Temporary Food Facility Guidelines governing food sales or service. and/or beverage selling/serving privileges and possibly disciplinary and	ers), agrees to read, understand, and comply with the CSLA Failure to comply with the rules may result in the loss of food
<u>Insurance</u> : (Student Organizations Only) As a prerequisite, the Spons	
coverage from the Associated Students, Inc. (ASI) at least two weeks Student Organization's activity in its insurance policy. This Temporar proof of ASI insurance.	
No liability will be assumed by California State University, Los As Services for any food or beverage the sponsoring organization pro submitted at least 10 days prior to the activity for proper reviews and event date.	ovides to the campus community. This permit should be
All signatures shall be obtained in the following order. Student or	ganizations need <u>all</u> signatures; other organizations $1, 3$ and 4 only
Andola Anheura	
1. Signature of Sponsoring Organization Chairperson	Authorized Representative to be present at event
was the	8/22/18
2. Center for Student Involvement (UH) 204) (Student Organizations of	
/4 M M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8/22/18
3. University Auxiliary Services, Inc. (Golden Eagle Bldg 314)	Date
(Jan Showar	18-507 8/23/18
1 Environmental Health & Safety (Cornorate Vard RIda 211)	Permit No. Date



Will be fundrasing



Wednesday Sept. 5, 2018 10:30am - 2:30 pm King Hall \$2 per slice

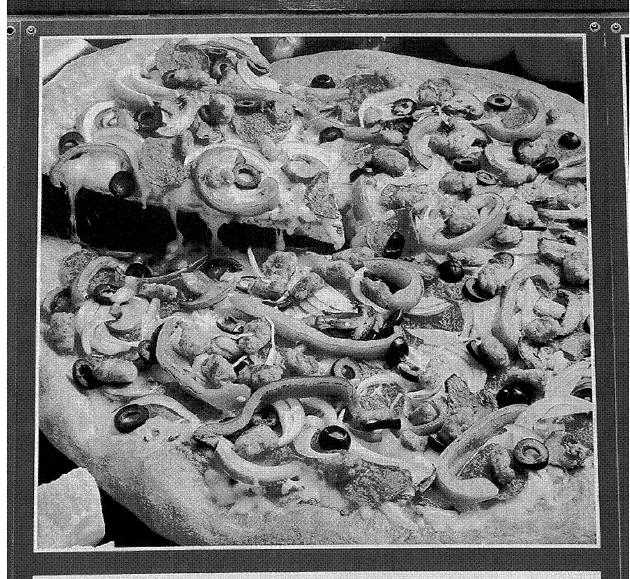




Fmacsula1@gmail.com







PIZZA

COMBO, CHEESE OR PEPPERONI
SLICE 18" WHOLE
1.99 9.95