Associated Students, Inc. ■ Event Flyer w/ ASI Logo **LFunding Request Form** CSI Event Reg. Form 2018-19 Estimates / Food Permits **Organization** Contact ■ Event Estimates / Invoices Club/Organization: Hermanos Undios Officer Name Event Title: Pupusas Fundraiser Officer Title Select One... Date(s) of Event 9/11/2018 Address Semester City/State/Zip Location of Event: CSULA 50+ Phone & Email Expected Total Attendance: Officer Signature 50+ Expected Attendance of Cal State LAStudents: **Event Description and Total Cost Breakdown** Is the event open to all Cal State LA students?: Select One... Briefly describe the event: We will be selling pupusas and aguas frescas to all How will this program enhance the Cal State LA experience?: anyone at CSULA. Feed hungry people for their lunch break. **Hospitality Honoraria/Contracts** Description Description Amount **Amount** \$193.60 Purusas Marketing Other Description **Amount** Description Amount **Event Summary** For Office Use Only • Do Not Write Below \$0,000 Important: Total Cost of Event: (1) All Funding Request Forms must be turned in by 12 PM Amount Requested from ASI: \$ 193.60 Friday, the week before the Funding Sub-Committee Meetings. (2) Additionally, funding request forms must be turned in no less Amount from other sources: than 10 business days (2 weeks) prior to the event. (3) Deadline for Request for Payment or Purchase Order (RPP) is What other resources are you employing for this event? 15 days after the event. All forms must have a Time Stamp and staff initial: 118 A16 30 Pat 25: 47

Necessary Documents:

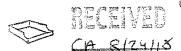


STUDENT ORGANIZATION EVENT REGISTRATION FORM



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: Hermanos Unidos PHONE: DATE: 8/15/2018
EVENT CONTACT NAME: EMAIL:
NAME OF EVENT: Fundraiser LOCATION: Front of BookStore
EVENT DATE: 9/1(/208) BEGIN TIME: 12:00pm END TIME: 2:00pm ESTIMATED ATTENDANCE: 20+
TYPE OF ACTIVITY (THE UNIVERSITY'S GENERAL RELEASE WILL BE REQUIRED FOR CERTAIN EVENTS.) PROCEEDS TO BENEFIT
WILL YOUR EVENT INCLUDE ANY OF THE FOLLOWING? (PLEASE CHECK ALL THAT APPLY) SPORTS ACTIVITY OR COMPETITION BEACH/FOREST/PARK CLEAN-UP INDOOR/OUTDOOR COOKING MAPPLIFIED SOUND ANIMALS PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES):
We will be selling Aguas frescas such as horchata tamarindo, and Jamaica, we will also be selling Apusas frescas such as horchata tamarindo, and Jamaica, we will also be selling Apusas
HOW WILL YOU MARKET THIS EVENT? (CHECK ALL THAT APPLY)
PRINTED POSTCARDS PRINTED POSTERS/FLIERS SOCIAL MEDIA: Instagram and facebook OTHER:
WHO WILL BE 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 FEE, OR RAISE ANY PROCEEDS TO BENEFIT THE ORGAZNIZATION? (If yes, please complete statement regarding proceeds to benefit transactions on the back of this form) VES
WILL A MOVIE BE SHOWN? NO YES (If yes, please attach written proof of viewing rights.)
WILL THE EVENT HAVE SECURITY? V NO YES If yes, please explain
WILL FOOD BE SERVED AT THE EVENT? NO V YES
IF YES, WHO WILL PROVIDE THE FOOD? UNIVERSITY CATERING OTHER:
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? NO 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? NO YES INITIALS
If so, please affirm organization members and guests will not consume alcohol. PLEASE LIST 2 TIPS and SVPT TRAINED MEMBERS ON PAGE 2.
WILL OFF-CAMPUS MEDIA BE NOTIFIED ABOUT THE EVENT (NEWSPAPER, TV, RADIO, ETC.)? NO WILL BE INVITED ON PAGE 2.
DOES THE STUDENT ORGANIZATION WANT TO PURCHASE SPECIAL EVENT INSURANCE FOR THIS EVENT? V 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 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.



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: TREASURER: U.SU STUDENT ORGANIZATION ACCOUNT #: SIGNATURE: SIGNAT	·g ·c· ·c· ·y ·· · ········ · p· ··········
TREASURER U-SU STUDENT ORGANIZATION ACCOUNT #: FOR following guidelines are provided for the benefit of the student organization. They are intended to to comply with any of the following guidelines may result in disciplinary action taken against the organization recognition, events and use of facilities. More information can be found online in the Student Organization comply with any of the following guidelines may result in disciplinary action taken against the organization comply with a provided for the benefit of the student organization to disciplinary action to disciplinary action to found in the Student Organization for the organization assumes full responsibility for the conduct of participants at the event. Any violation of University the organization to disciplinary action by the Center for Student Involvement or Student Conduct. ALCOHOL: In accordance with Administrative Procedure 019 - Alcoholic Beverages, any event (on or off camp alcoholic beverages requires authorization from the University. Your organization must complete an Beverages form in addition to this Event Registration Form. Please allow at least 3 weeks for this for Approved alcohol consumption events and events held where alcohol is available (but will not be organized to must will see the procedure of the posting of the procedure of the posting of the procedure of the procedure of the procedure of fourteen (14) calendar day VALID THRU* stamp must be clearly visible on the face of the posting. GENERAL RELEASE: If your event will require the use of general release waivers prior to organization member and guest to comply with all instructions provided by CSI, including submitting all completed forms and request to comply with all instructions provided by CSI, including submitting all completed forms and request to comply with all instructions provided by CSI, including submitting all completed forms and request to comply with all instructions provided by CSI, including submitting all completed forms and request of the procedure	
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NOTIFICATIONS:	
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PUBLIC AFFAIRS DATE: ATHLETICS	DATE:
DEPT. OF PUBLIC SAFETY DATE:	DATE:
OTHER: U-SU BUSINESS OFFICE	DATE:

CALIFORNIA STATE UNIVERSITY, LOS ANGELES TEMPORARY FOOD FACILITY PERMIT

Print Form

Clear Form

Date of Event: 09/11/2018	Estimated Attendance: 50
Name of Event: Pupusas fundraiser	
Type of Event: fundraiser	Location: CSULA Front of bookstore
Sponsoring Organization: Hermanos Undios	
Authorized Representative	Phone Fax:
Time:	El Guanaquito
Access Time: 10:30 am a.m./p.m. to 11:54 am	1 a.m./p.m. 6706 Normandie Ave, Los Angeles, CA-90096
Event Time: <u>12:00 pm</u> a.m./p.m. to <u>2:00 pm</u>	a.m./p.m.
Type of Food Service:	
Bake Sale Snacks Food Sale Barbecue Potluck Other (des	Catering Cat
List <u>all</u> food and potentially hazardous food (<i>see</i> Temporary Fingredients), use back of page if necessary. <u>pupusas and aguas f</u>	Food Facility Guidelines for definition) items to be sold/served (include frescas
at El Cruchaquita. Address is at the ri	
List all beverages to be sold/served: Aguas Frescas suc	on as norchata and jamica
Where will beverages be prepared or purchased? on site	
Method/s of maintaining proper holding temperatures for pote water jars	entially hazardous food/s during transportation and service:
handling orientation (offered at the beginning of Fall and Spri	es on campus, the Sponsoring Organization shall have attended a food ng quarters), agrees to read, understand, and comply with the CSLA service. Failure to comply with the rules may result in the loss of food linary action.
coverage from the Associated Students, Inc. (ASI) at least two	ne Sponsoring Student Organization agrees to obtain proper insurance of weeks prior to the event date and ASI agrees to include the Sponsoring Cemporary Food Permit will not be approved unless accompanied by a
Services for any food or beverage the sponsoring organiza	t, Los Angeles, University-Student Union, or University Auxiliary tion provides to the campus community. This permit should be was and approvals; otherwise there is no guarantee of completion by the
All signatures shall be obtained in the following order. St	ident organizations need all signatures; other organizations 1, 3 and 4 only.
The officers	
1. Signature of Sponsoring Organization Chairperson	Authorized Representative to be present at event
	8/30/18
2. Center for Student Involvement (III) 204) (Student Organiz	Date (30/18)
3. University Auxiliary Services, Inc. (Galgen Eagle Bldg 314)	18-539 Date 1, 8/30/18
4. Environmental Health & Safety (Corporate Yard Bldg. 244	

Revised 05/2012

Update

323-343-6406

72444 B0001/00012 E7914mm

EXTERNAL SPACE REQUEST FORM

CALIFORNIA STATE UNIVERSITY, LOS ANGELES 5154 State University Drive, Rm # 107 Los Angeles, CA 90032-8636 Phone: (323) 343-2450 Fax (323) 343-2454

	CASH CANAS STATE UNIVERSITY, LOS ANGELES UNIVERSITY STUDENT UNION
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Staff Advisor Name:	Advistin Cervai	1 + en		Email	
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		Event In	formation		
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Signature:			Date: <u>%/</u>	241.28 2018	
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Confirmation by the A	iminstration and fin		se Only: Initials:	1 Oate: <i>D8</i> /	27/18
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9/11/2018

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PUPUSERIA Y RESTAURANTE 6706 Normandie Ave LA,CA (323) 750-7873 TENEMOS ESPECIALES TODO LOS DIAS

#182221 08/28/2018 3:21:03PM 000000 01 CLERKOT

\$187.00 17@ 11.00 Non taxable \$6.60 10 6 60 Non taxable

ITENS 180 CASH

\$193.60

PUPUSERIA 6706 Norda NAQUITO Y Restaurante Ne de la ca -7873 ESPECIALES LAS TENEMO TODO

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