Associated Students, Inc. Necessary Documents: Event Flyer w/ ASI Logo Funding Request Form CSI Event Reg. Form For the Students, by the Students!" 2018-19 Estimates / Food Permits **Organization** Contact Event Estimates / Invoices Club/Organization: Academic Honors Association Officer Name Event Title: Fun B 4 Finals: Game Night Officer Title Date(s) of Event: 11/30/18 Fall Address Semester Location of Event: KHD1047 City/State/Zip 20 Phone & Email Expected Total Attendance: 20 Officer Signature Expected Attendance of Cal State LAStudents: **Event Description and Total Cost Breakdown** Yes Is the event open to all Cal State LA students?: Briefly describe the event: The Academic Honors Association will hold a game night near How will this program enhance the Cal State LA experience?: | I his event will help students relax and meet new the end of the semester where students can come together to people. It will be a good, fun way to relieve stress play board games and relax. before finals. Honoraria/Contracts Hospitality Description Amount Description Amount Food (Pizza and Chips) \$88.85 Beverages \$21.88 Marketing Other Description Description Amount Amount For Office Use Only • Do Not Write Below Event Summary \$110.73 Important: **Total Cost of Event:** (1) All Funding Request Forms must be turned in by 12 PM \$110.73 Amount Requested from ASI: Friday, the week before the Funding Sub-Committee Meetings. (2) Additionally, funding request forms must be turned in no less \$0 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:

416 SEP 25 pm2:00:57

TUNBAFINALS

AHA

FRIDAY NOVEMBER 30TH

APM-7PM

HONORS COLLEGE LOUNGE KING HALL D1047



For more information contact: aha.marketing.csula@gmail.com



ASSOCIATED STUDENTS, INC.
THE ACTIVITIES AND OPINIONS PRESENTED ARE NOT

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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: ACCIDENTIC HONORS ASSOCIATION PHONE ATE: 9/21/18
EVENT CONTACT NAME
NAME OF EVENT: Fun B 4 Finals: Game Night LOCATION: KHD1047
EVENT DATE: 11 30 18 BEGIN TIME: 4:00 PM END TIME: 7:00 PM 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 BONFIRE INDOOR/OUTDOOR COOKING OMESTIC TRAVEL ANIMALS
PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES): Will be serving: Costco Pizza: Board Games Chips Pepsi products for drinks Gourmet Popcorn
HOW WILL YOU MARKET THIS EVENT? (CHECK ALL THAT APPLY) PRINTED POSTCARDS PRINTED POSTCARDS 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) NO XYES
WILL A MOVIE BE SHOWN? 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 X YES IF YES, WHO WILL PROVIDE THE FOOD? UNIVERSITY CATERING OTHER: Cost o Wholesale 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. WILL OFF-CAMPUS MEDIA BE NOTIFIED ABOUT THE EVENT (NEWSPAPER, TV, RADIO, ETC.)? NO YES, PLEASE PROVIDE WHO WILL BE INVITED ON PAGE 2. DOES THE STUDENT ORGANIZATION WANT TO PURCHASE SPECIAL EVENT INSURANCE FOR THIS EVENT? NO YES
Please be aware that student organization exercises are not covered for liability or other insurance by California State University. Los Angeles or the University-Student Union. Student organization logicals if the advisor may be held personally liable. If the student organization would like to purchase Special Event Insurance for a particular event, please contact (1).

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.

		ent the organization.				ior any or are	200 P. 1000000			
There	will be e	un admissi	on fet	or 5 doil	ars for no	2n− m€	mbers.			
PRESIDENT:			SIC	GNATURE: CAO	118 QUELLA	Ø	DATE: 09/06/08			
TREASURER	: [SIG	GNATURE: July	ou Pendamo	/	DATE: 9-6-18			
U-SU STUDENT	ORGANIZATION AC	COUNT #:		or	APPROVED EXE	MPT STATUS:	CSI VERIFICATION			
	UIDELINES									
to comply wi	ith any of the follow	vided for the benefit ving guidelines may racilities. More informa	esult in disciplin	nary action taken a	against the organiz	ation includi	ng suspension of			
CONDUCT:		mes full responsibility for isciplinary action by the C				sity policy may	subject the participants and/or			
ALCOHOL:	In accordance with Administrative Procedure 019 - Alcoholic Beverages, any event (on or off campus) that involves the consumption of alcoholic beverages requires authorization from the University. Your organization must complete and submit a Request to Serve Alcoholic Beverages form in addition to this Event Registration Form. Please allow at least 3 weeks for this form to be reviewed by the University. Approved alcohol consumption events and events held where alcohol is available (but will not be consumed) require at least two TiPS certified members and two Sexual Violence Prevention & Resources Trained (SVPT) members to be in attendance of the entire event. Additional guidelines may be enforced.									
PUBLICITY:	marketing registered been registered. All	d events are required to	o be stamped by se posted for up	CSI prior to their ap to a period of fourte	proved posting. Star	mps can be o	narketing to be used for btained after the event has organizations, the "POSTING			
GENERAL RELEASE:		quire the use of general astructions provided by					your organization is required nts.			
FOLLOW AL	L GUIDELINES SET F	ORTH BY THE UNIVERS	SITY. I ACKNOWI	LEDGE THAT THIS E	VENT AND ANY ASS		TION IS SPONSORING WILL ENT SPACE RESERVATIONS			
		TION BASED ON MY OF			UE OR BLACK INK ONL	Y) DATI	The state of the s			
STUDENT	ORG. OFFICER'S NA	AIME		ma Ha	Tmandon-		1/24/18			
ADVISOR'S	S NAME 0			ns K	odriz)	a/24/18			
	내가 누느!!!! 그리다 깨끗했다	KNOWLEDG VOLVEMENT (U-SU		FOR OFFIC SIGNATU		Y ,,,,,,,,,,,,,,,,,,,,,,,	DATE:			
CSI VERIF	IES THE ORG. IS REC	OGNIZED BY THE UNI	VERSITY		1)		7.23 18			
ASSISTA	NT DEAN OF STU	DENTS: WELLNESS	& ENGAGEME	NT						
GENERAI	L RELEASE REQUIR	RED FOR ALL PARTIC	CIPANTS?	NO YES DA	TE REQUIRED:					
NOTIFIC	EATIONS:									
PUBI	IC AFFAIRS	DATE:		ATHLETICS		DATE:				
DEP1	OF PUBLIC SAFETY	DATE:		FACILITIES U	SE COORDINATOR	DATE:				
Потн		DATE:	***************************************	U-SU BUSIN	ESS OFFICE	DATE:				

CALIFORNIA STATE UNIVERSITY, LOS ANGELES TEMPORARY FOOD FACILITY PERMIT

Print Form

Clear Form

Date of Event: 11/30118	Estimated Attendance: 20
Name of Event: Fun By Finals: Game Night	
Type of Event: Social Program Location: K	HD1047
Sponsoring Organization: Academic Honors Associa	ation
Authorized Representative:	ax:
Time:	2207 W. Commonwealth Ave
Access Time: 3:00 a.m./o.m. to 4:00 a.m.(p.m)	Alhambra, CA 91803
Event Time: 4:00 a.m./o.m to 7:00 a.m./	7.774.00.00.007
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 Facility Guidelines for further instructions.)
Barbecue Potluck X Other (describe below)	.
Describe Other: <u>Petreshments</u> , <u>Pizza</u> , and	
List <u>all</u> food and potentially hazardous food (see Temporary Food Facility Guidingredients), use back of page if necessary. COSTCO PIZZO, Chip	
Where will this food be prepared or purchased [Note no Home Baked/Cooked In	tems are Allowed]? <u>Custco Wholesale</u>
List all beverages to be sold/served: Pepsi socia and Aqua	fing water
Where will beverages be prepared or purchased? Costco Wholeso	
Method/s of maintaining proper holding temperatures for potentially hazardous Agreement: For the privilege of selling foods and/or beverages on campus, the handling 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.	Sponsoring Organization shall have attended a food sees to read, understand, and comply with the CSLA
<u>Insurance</u> : (Student Organizations Only) As a prerequisite, the Sponsoring Stucoverage from the Associated Students, Inc. (ASI) at least two weeks prior to the Student Organization's activity in its insurance policy. This Temporary Food P proof of ASI insurance.	he event date and ASI agrees to include the Sponsoring
No liability will be assumed by California State University, Los Angeles, U Services for any food or beverage the sponsoring organization provides to submitted at least 10 days prior to the activity for proper reviews and approvals event date.	the campus community. This permit should be
All signatures shall be obtained in the following order. Student organization	ns need <u>all</u> signatures; other organizations 1, 3 and 4 only
Omna 4 Inmandey 1. Signature of Sponsoring Organization Chairperson	Authorized Representative to be present at event
A Les	9/25/17
2. Center for Student Involvement (UU 204) (Student Organizations Only)	Date
anair al en en	9/2-5/18 Date -662 9/25/18
3. University Auxiliary Services, Inc. (Golden Eagle Bldg 314)	Date
4. Environmental Health & Safety (Corporate Yard Bldg, 244) Permit	: No. Date



Invoice #: 401

Event Date:

11/30/18

Company Purchasing From:

Costco Wholesale 2207 W Commonwealth Ave, Alhambra, CA 91803 (626) 289-7164

*Invoice only an estimate

Description	Quantity	Price	Subtotal	Tax (\$)	Total
		(\$)	(\$)	(Rate 9.5%)	Cost (\$)
Pizza	7	9.95	69.65	6.62	76.27
Chips	1	11.49	11.49	1.09	12.58
Food					88.85
Pepsi	1	9.99	9.99	0.95	10.94
Diet Pepsi	1	9.99	9.99	0.95	10.94
Beverage					21.88
Estimated Amount					110.73

Pizza:



Diet Pepsi:



Chips:



Pepsi:

