

Associated Students, Inc.

Funding Request Form

2018-19

Students, by the Students!

Necessary Documents:

- Event Flyer w/ ASI 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: Kalahi Filipino American Student Organization
 Event Title: Porto's Fundraiser
 Date(s) of Event: 11/8/18 Semester Fall
 Location of Event: USU Walkway
 Expected Total Attendance: _____ 100
 Expected Attendance of Cal State LA Students: _____ 100

Event Description and Total Cost Breakdown

Briefly describe the event:

We will be selling guava rolls, cheese rolls, and potato balls from Portos on the USU walkway.

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

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

This fundraiser will help raise funds for future events that can enhance the lives of Cal State LA Students through Filipino culture.

Hospitality

Description	Amount
150 Potato Balls	\$98.55
75 Guava Rolls	\$49.27
100 Cheese Rolls	\$65.70

Honoraria/Contracts

Description	Amount

Marketing

Description	Amount

Other

Description	Amount

Event Summary

Total Cost of Event: \$213.52
 Amount Requested from ASI: _____
 Amount from other sources: _____
 What other resources are you employing for this event?

For Office Use Only • Do Not Write Below

Important:

- (1) *All Funding Request Forms must be turned in by 12 PM 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.*

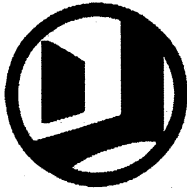
All forms must have a Time Stamp and

staff initial: SL

LN

18 OCT 26 4:50:27

JP @ 22p pm



CALIFORNIA STATE UNIVERSITY, LOS ANGELES
UNIVERSITY STUDENT UNION

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

Requestor Information

Name of Sponsoring club/organization: Kalawi Filipino American Student Org
 Reservation Contact Name* [Redacted] Event Contact** [Redacted]
 Phone number: [Redacted] Phone Number: [Redacted]
 Email: [Redacted] Email: [Redacted]

Faculty/Staff Advisor Name:

Email:

*The Reservation Contact must be listed on the Student Organization Officer Information Form as registered by the Center for Student Involvement and their signature is required on the subsequent reservation confirmation form.

** The Event Contact does not have to be listed on the Student Organization Officer Information Form. The Event Contact will be able to check in, revise, and sign for the Reservation Confirmation once it has already been signed by the Reservation Contact, but will be unable to add or change the Event Contact.

Event Information

Date	Start Time	AM	PM	End Time	AM	PM
11-08-18	9:00	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2:05	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

Preferred Location: 1st choice: Library South ~~Library~~ Railing #4 2nd choice: Library South Railing #3
 Initial JD I understand the U-SU does NOT provide equipment (e.g. tables, canopies and chairs) to locations outside of the U-SU Plaza and U-SU Walkway.
 Purpose for tabling is to provide: General Information Food Sale/Distribution** Fundraiser**
 If food will be distributed and/or sold, please describe: Porto's Fundraiser

**A Temporary Food Permit & Event Registration Form will be required if food will be sold or distributed during regular information tabling or for fundraising.
 Decorations or banners/signs/letters will be displayed. Yes No If so, specify what type: club banner
 Will there be amplified sound of any kind? Yes No **An approved amplified sound permit and event registration form will be required.
 Requestor's Signature: [Signature] Date: 10-25-18

For Office Use Only:

Confirmation by the Administration and Finance Office Initials: _____ Date: _____

Areas Requested	Day(s)	Time(s)

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: Kalab Filipino American Student PHONE: [REDACTED] DATE: 10/23/18
 EVENT CONTACT NAME: [REDACTED] EMAIL: [REDACTED]
 NAME OF EVENT: Porto's fundraiser LOCATION: Library South Building #3
 EVENT DATE: 11-08-18 BEGIN TIME: 9:00 am END TIME: 2:00 pm ESTIMATED ATTENDANCE: 75

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

- PROCEEDS TO BENEFIT EDUCATIONAL PROGRAM SPIRITUAL PROGRAM RECREATIONAL PROGRAM
 DANCE/PARTY SOCIAL PROGRAM COMMUNITY SERVICE CONFERENCE/CONVENTION
 OTHER: [REDACTED] SPEAKER/PANEL

WILL YOUR EVENT INCLUDE ANY OF THE FOLLOWING? (PLEASE CHECK ALL THAT APPLY)

- SPORTS ACTIVITY OR COMPETITION BEACH/FOREST/PARK CLEAN-UP INTERNATIONAL TRAVEL
 BONFIRE INDOOR/OUTDOOR COOKING DOMESTIC TRAVEL
 AMPLIFIED SOUND ANIMALS

PLEASE DESCRIBE THE EVENT BELOW (INCLUDE ALL ACTIVITIES):

This event is to help us with our big spring event (Filipino Culture Night) we are using the proceeds for props and other necessities

HOW WILL YOU MARKET THIS EVENT? (CHECK ALL THAT APPLY)

- PRINTED POSTCARDS PRINTED POSTERS/FLIERS SOCIAL MEDIA: csuka.kalab OTHER: [REDACTED]

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 bi-weekly 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 ORGANIZATION?

(If yes, please complete statement regarding proceeds to benefit transactions on the back of this form) NO YES

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 [REDACTED]

WILL FOOD BE SERVED AT THE EVENT? NO YES

IF YES, WHO WILL PROVIDE THE FOOD? UNIVERSITY CATERING OTHER: Porto's

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: [REDACTED] PLEASE LIST 2 TIPS and SVPT TRAINED MEMBERS ON PAGE 2.
 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 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.

RECEIVED

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



Date of Event: Nov 8, 2018 Estimated Attendance: 75
 Name of Event: Porto's Fundraiser
 Type of Event: Fundraiser Location: Library South Railing # 3
 Sponsoring Organization: Kalahi Filipino American Student Organization
 Authorized Representative: [Redacted] Phone: [Redacted] Fax: _____

Time:
 Access Time: 8:00 a.m. / p.m. to 3:00 a.m. / p.m.
 Event Time: 9:00 a.m. / p.m. to 2:00 a.m. / p.m.

315 N Brand Blvd
Glendale CA 91203

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 all food and potentially hazardous food (see Temporary Food Facility Guidelines for definition) items to be sold/served (include ingredients), use back of page if necessary. Cheese rolls, guava rolls, potato balls

Where will this food be prepared or purchased [Note no Home Baked/Cooked Items are Allowed]? these food will be prepared and purchased in portos

List all beverages to be sold/served: n/a

Where will beverages be prepared or purchased? n/a

Method/s of maintaining proper holding temperatures for potentially hazardous food/s during transportation and service: we will be picking up these food at portos as soon as they're prepared, and take these back to campus

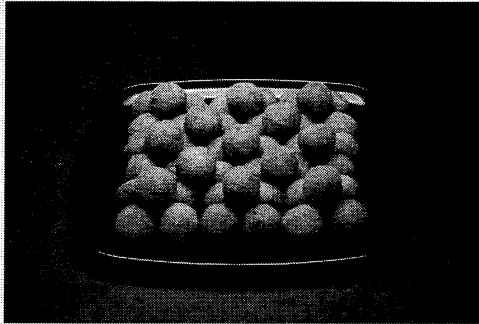
Agreement: For the privilege of selling foods and/or beverages on campus, the Sponsoring Organization shall have attended a food handling orientation (offered at the beginning of Fall and Spring quarters), agrees to read, understand, and comply with the CSLA Temporary Food Facility Guidelines governing food sales or service. Failure to comply with the rules may result in the loss of food and/or beverage selling/serving privileges and possibly disciplinary action.

Insurance: (Student Organizations Only) As a prerequisite, the Sponsoring Student Organization agrees to obtain proper insurance coverage from the Associated Students, Inc. (ASI) at least two weeks prior to the event date and ASI agrees to include the Sponsoring Student Organization's activity in its insurance policy. This Temporary Food Permit will not be approved unless accompanied by a proof of ASI insurance.

No liability will be assumed by California State University, Los Angeles, University-Student Union, or University Auxiliary Services for any food or beverage the sponsoring organization provides to the campus community. This permit should be submitted at least 10 days prior to the activity for proper reviews and approvals; otherwise there is no guarantee of completion by the event date.

All signatures shall be obtained in the following order. Student organizations need all signatures; other organizations 1, 3 and 4 only.

1. Signature of Sponsoring Organization Chairperson: [Signature] Authorized Representative to be present at event: [Redacted]
 2. Center for Student Involvement (UU 204) (Student Organizations Only): [Signature] Date: 10/23/18
 3. University Auxiliary Services, Inc. (Golden Eagle Bldg 314): [Signature] 18-826 Date: 10/23/18
 4. Environmental Health & Safety (Corporate Yard Bldg. 244): [Signature] [Redacted] Permit No. Date: 10/23/18



POTATO BALL™ STUFFED POTATO (PARTY SIZED)

DESCRIPTION

Our classic mashed potato ball filled with picadillo (ground beef, onions, peppers, and Spanish seasonings) coated in panko bread crumbs and fried to perfection. Available in counts of 25 and 50. Served cold for later heating. Platter available at additional price. If requested hot, they will be heated upon your arrival and served in an aluminum foil pan with lid (additional charge). Please allow 10-15 minutes for heating, 24 hour advance order required.

Price:
\$15.00 25 Count.

\$30.00 50 Count. Item prices are subject to change.



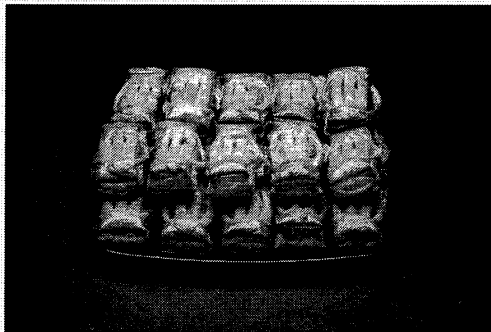
CHEESE ROLL™ (PARTY SIZED)

DESCRIPTION

A Porto's classic! Flaky butter puff pastry filled with Porto's signature cream cheese. Served in a box in 25 count. Platter available at additional charge. 24 hour advance order required.

Price:
\$15.00 25 Count.

\$30.00 50 Count. Item prices are subject to change.



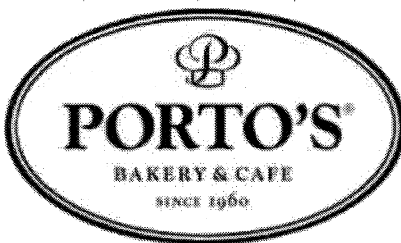
REFUGIADO™- GUAVA & CHEESE PASTRY (PARTY SIZED)

DESCRIPTION

A Porto's classic! Flaky butter puff pastry filled with Porto's signature cream cheese. Served in a box in 25 and 50 count. Platter available at additional charge. 24 hour advance order required.

Price:
\$15.00 25 Count.

\$30.00 50 Count. Item prices are subject to change.



FUNDRAISER

Thursday, 11/08/18
9AM-2PM
USU Walkway

