Associated Students, Inc. Funding Request Form

2018-19

Co	nta	ct

Officer Name:

Officer Title:

Address:

City/State/Zip:

Phone & Email:

Officer Signature

Organization

Estimates / Food Permits

Necessary Documents: Event Flyer w/ ASI Logo

□ Event Estimates / Invoices Club/Organization: Master of Social Work Organization

CSI Event Reg. Form

Event Title: Pizza Fundraiser

Date(s) of Event: 10.23.2018

Semester Fall

Location of Event: Salazar Quad and Main Walkway

Expected Total Attendance:

Expected Attendance of Cal State LAStudents:

50+

Event Description and Total Cost Breakdown

Briefly describe the event:

Member of the organization will be selling items to fundraise for our organization in order to raise funds for future events.

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

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

This program will help students learn about our organization and create a networking relationship

Hospitality

Description	Amount	
Pizza (25)	\$250.59	
Drinks	\$63.30	
Chips	\$32.75	
Napkins, Plates, Gloves	\$44.60	

Honoraria/Contracts

Description	Amount

Marketing

Description

Amount

Other

Description	Amount
Ice	\$8.75

Event Summary

Total Cost of Event:

\$399.99

Amount Requested from ASI:

\$399.99

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:



18 SEP 28 PM12:37:45

MSWSO



October 23rd, 2018 Salazar Quad and Main Walkway 11:30 AM - 3 PM

Lunch Special \$2.50



ASSOCIATED STORENTS, INC.





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:	Master Social Work Student Organization	PHONE: DATE: 9/2	2/18
EVENT CONTACT NAME:		EMAIL:	
NAME OF EVENT: Pizza Fur	ndraiser	LOCATION: Salazar Quad & Main Walk Way	
EVENT DATE: 10/23/18	BEGIN TIME: 11:30am END TIME: 3:	:00pm ESTIMATED ATTENDANCE: 50+	
TYPE OF ACTIVITY (THE UNI	VERSITY'S GENERAL RELEASE WILL BE REQUIRED FO	OR CERTAIN EVENTS,)	
✓ PROCEEDS TO BENEFIT		TUAL PROGRAM RECREATIONAL PROGRAM	
DANCE/PARTY		MUNITY SERVICE CONFERENCE/CONVENTION	
OTHER:	SPEAKI	KER/PANEL	
WILL YOUR EVENT INCLU	DE ANY OF THE FOLLOWING? (PLEASE CHECK	(ALL THAT APPLY)	
SPORTS ACTIVITY OR C	COMPETITION BEACH/FOREST/PARK CLEAN		
BONFIRE	INDOOR/OUTDOOR COOK	KING DOMESTIC TRAVEL	
AMPLIFIED SOUND	ANIMALS		
	ENT BELOW (INCLUDE ALL ACTIVITIES): ill be selling Costco Pizza, water, sodas, and chips ou		
HOW WILL YOU MARKET	THIS EVENT? (CHECK ALL THAT APPLY)		
PRINTED POSTCARDS	PRINTED POSTERS/FLIERS SOCIAL MEDIA:	• OTHER: email	
WHO WILL BE INVITED? (C	CHECK ALL THAT APPLY):		
STUDENT ORG, MEMBE		ILIX COLLEGES & STATE.	SUEST LIST
	general Cal State LA campus will be listed in the nter for Student Involvement.	ne Student Organization Calendar of Events distributed in ✓ NO, I DO NOT WISH FOR MY EVENT TO BE PO	
	DMISSION CHARGE, REGISTRATION FEE, OR RAISE ement regarding proceeds to benefit transactions of the company of	e ANY PROCEEDS TO BENEFIT THE ORGAZNIZATION? on the back of this form)	YES -
WILL A MOVIE BE SHOWN	? ✓ NO YES (If yes, please attach written	proof of viewing rights.)	
WILL THE EVENT HAVE SE	CURITY? VO YES If yes, please explain	ain	-
WILL FOOD BE SERVED A		Correspondence of the control of the	
IF YES, WHO WILL PRO		OTHER: Costco	
A completed food pe	rmit is required for all on-campus events with fo	ood unless the food is provided by University Catering.	
WILL ALCOHOL BE PRESE		attach a completed request to serve alcoholic beverag m may take up to two weeks for review and possible appro	
WILL THE EVENT BE HELD IN	N A RESTAURANT/VENUE WHERE ALCOHOL IS AVAIL	LABLE? V NO YES Initials	10.00
If so, pleas	e affirm organization members and guests wi		RS ON PAGE
WILL OFF-CAMPUS MED	IA BE NOTIFIED ABOUT THE EVENT (NEWSPAF	PER, TV, RADIO, ETC.)? ✓ NO YES, PLEASE PROVIDENCE ON WILL BE INVITED ON	
DOES THE STUDENT ORGA	ANIZATION WANT TO PURCHASE SPECIAL EVE	ENT INSURANCE FOR THIS EVENT? VO YES	
the University-Student Un	lent organization events are not covered for liabil ion. Student organization officers or the advisor m surance for a particular event, please contact CSI.	ility or other insurance by California State University, Los a may be held personally liable. If the student organization wo	Angeles o ould like to

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.

proceede and		ione and organization in toda		and the second s	311.3 1.21 2.1.7 2.1.1.02	
	being done as a fund 0, chips will be sold		o benefit mem	bers and officers of the MSWSO.	Pizza slices will be	sold for \$1, drinks will be
PRESIDENT			SIGN	ATURE: Missially 7	Remito	DATE 9/22/18
TREASURER			SIGN	ATURE: //au H		DATE 9/22/18
U-SU STUDEN	T ORGANIZATION AG	CCOUNT #		or APPROVED	EXEMPT STATUS: C	SI VERIFICATION CA
EVENT G	UIDELINES					
to comply w	ith any of the follow	ving guidelines may'resul	t in disciplina	ganization. They are intended t ry action taken against the org. d online in the Student Organiz	anization including	
CONDUCT:		umes full responsibility for the c disciplinary action by the Center		ipants at the event, Any violation of U olvement or Student Conduct.	niversity policy may su	bject the participants and/or
ALCOHOL:	alcoholic beverage Beverages form in Approved alcohol (s requires authorization from addition to this Event Regist consumption events and eve Sexual Violence Prevention &	n the University tration Form. P ents held when	Beverages, any event (on or off ca Your organization must complete lease allow at least 3 weeks for this e alcohol is available (but will not be rained (SVPT) members to be in at	e and submit a Requ s form to be review se consumed) requi	uest to Serve Alcoholic ed by the University. e at least two TiPS certified
PUBLICITY;	marketing registere been registered. Al	d events are required to be	stamped by C sted for up to	ve Procedures AP P003 and AP P SI prior to their approved posting. a period of fourteen (14) calendar the posting.	Stamps can be obt	ained after the event has
GENERAL RELEASE:				or to organization member and gu nitting all completed forms and rec		
FOLLOW AL MAY BE SUB	L GUIDELINES SET F	ORTH BY THE UNIVERSITY. FION BASED ON MY ORGAN	I ACKNOWLE IIZATION'S RE	ENSURE THAT THE EVENT WHIC DOGE THAT THIS EVENT AND ANY COGNITION STATUS. E (PLEASE USE BLUE OR BLACK INK	ASSOCIATED EVEN	
ADVISOR'S	NAME		Own-	hun Hor	6	7-28-19
CENTER CSI VERIFI ASSISTAI GENERAL NOTIFIC	FOR STUDENT IN IES THE ORG. IS REC NT DEAN OF STUI . RELEASE REQUIF : ATIONS: IC AFFAIRS	VOLVEMENT (U-SU 204 COGNIZED BY THE UNIVERSIDENTS: WELLNESS & EN RED FOR ALL PARTICIPAL DATE:	SITYIGAGEMENT		DATE:	DATE: 9 28.15
	OF PUBLIC SAFETY	DATE:	JIL rosto even	U-SU BUSINESS OFFICE		
OTHE	R:	DATE:		M-20 BOSINESS OFFICE	DATE:	

NOTES OR UPDATES: (TIPS-CERTIFIED/SVPT TRAINED MEMBERS, SOCIAL MEDIA SITES/HANDLES, INVITED MEDIA, ADDITIONAL INFORMATION/REQUIREMENTS)

CALIFORNIA STATE UNIVERSITY, LOS ANGELES TEMPORARY FOOD FACILITY PERMIT

Date of Event: 10/23/2018	Estimated Attendance: 50
Name of Event: Pizza Fundraiser	
Type of Event: Fundraiser	Location: Cal State LA Salazar Hall and Main Walkway
Sponsoring Organization: Master of Social Work Student C	rganization
	Phone: Fax:
Time:	
Access Time: 11:30 am a.m./p.m. to 3:00 pm a.	m./p.m.
Event Time: 11:30 am a.m./p.m. to 3:00 pm a.	m./p.m.
Type of Food Service:	
Bake Sale Snacks Food Sale Barbecue Potluck Other (describe	Catering e 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 ingredients), use back of page if necessary.	Facility Guidelines for definition) items to be sold/served (include
Costco pizza, chips, soda, gatorade, and water	
Where will this food be prepared or purchased [Note no Home Baccostco Wholesale, 2207 Commonwealth Ave, Alhambra	ked/Cooked Items are Allowed]?
List all beverages to be sold/served: Water, Gatorade, and S	oda
Where will beverages be prepared or purchased? Costco Whol	
Method/s of maintaining proper holding temperatures for potentia	
Cooler, gloves for handling food, plates, napkins	
handling orientation (offered at the beginning of Fall and Spring	ice. Failure to comply with the rules may result in the loss of food
coverage from the Associated Students, Inc. (ASI) at least two we	ponsoring Student Organization agrees to obtain proper insurance eeks prior to the event date and ASI agrees to include the Sponsoring porary Food Permit will not be approved unless accompanied by a
Services for any food or beverage the sponsoring organization	os Angeles, University-Student Union, or University Auxiliary provides to the campus community. This permit should be and approvals; otherwise there is no guarantee of completion by the
All signatures shall be obtained in the following order. Studen	nt organizations need all signatures; other organizations 1, 3 and 4 only
Moringlumil	
1. Signature of Sponsoring Organization Chairperson	Authorized Representative to be present at event
Cen Bas	9-28-18
2. Center for Student Involvement (UU 204) (Student Organizati	ons Only) Date
(1) 1 Conti	01/28/18
3. University Auxiliary Services, Inc. (Golden Eagle Bldg 314)	Date / /
Wan Thomas	18-681 9/28/18
4 Environmental Health & Safety (Cornorate Yard Ridg 244)	Permit No. Date

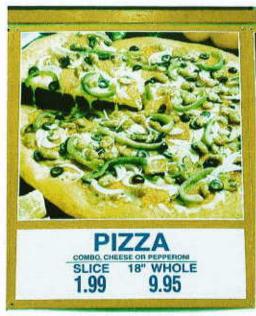
Invoice #5



Event Date: 10.23.2018

*Invoice only an estimate

Description	Quantity	Price	Total Price
Waters	2 cases	2.99	\$6.53
Gatorade	2 cases	15.99	\$34.94
Sodas (Pepsi)	2 cases	9.99	\$21.83
Gloves	1 box (80 pack)	8.99	\$10.65
Plates	1 big bag	12.99	\$15.39
Napkins	2 big bag	8.49	\$18.55
Pizza	25 boxes	9.95	\$250.59
Chips	2 box	14.99	\$32.75
ICE	2 bags	3.99	\$8.72
Total		Subtotal	\$399.96



















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Frito Lay Classic Mix Variety Pack 1 oz, 54-count

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2 Business Day Deviney When Ordered by 12pm No Separate Delvery Fee With Orders CA 575 Or Usin

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