



*Associated Students, Inc.*  
Recognized Student  
Organization Funding



2024-2025 • [WWW.ASICALSTATELA.ORG](http://WWW.ASICALSTATELA.ORG)



# Upcoming Topics

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# Funding Overview

- ASI funds events hosted by recognized student organizations in order to plan and host diverse and engaging events to increase Cal State LA campus involvement and community
- ASI funding is on a first-come, first-served basis based on available funds
- ASI funding is on a reimbursement basis

# Eligibility



**Recognized and in good standing with the University**



President and/or Treasurer completed the Funding Workshop or module on Presence

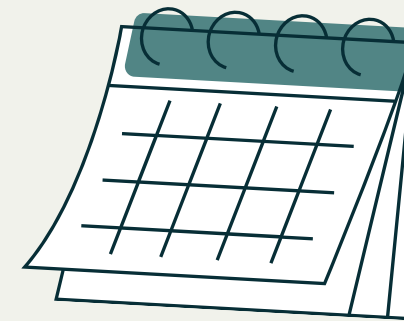


Eligible for up to \$3,500 per semester based on first come first serve basis of ASI available funds

# Event Eligibility

- Approved Event Registration Form from CSI on Presence
- Open to all Cal State LA students
- Only funds events based on the academic calendar

presence



# Purchase Eligibility



- ◆ Funding Price List -  
list limits on hospitality, marketing, honorarium, equipment, and others
- ◆ Merchandise must be sweatshop free  
determined by the sweatshop-free list or  
confirmation from the company
- ◆ **Purchases must be made prior to the event**
- ◆ Not applicable to the “Prohibited Expenses”  
List in ASI Policy 204  
(next slide)

# Purchase Eligibility cont.

## Prohibited Expenses - ASI Policy 204

Utilities costs

Alcohol, tobacco, marijuana, firearms, medications, or any controlled substances

Salaries, fees, honorariums for Cal State LA instructors, tutors, or faculty and staff

Office supplies - unless specifically used for an event

Organization's or individual member's local, state, regional, or national membership fees

Expenses associated with the membership recruitment of non-Cal State LA students

Scholarships or scholarship donations

Programs for the benefit of, or targeted to, non-Cal State LA Students

Programs exclusively benefiting or targeted to members of a specific group and is not open to all Cal State LA students

# Funding Distribution

*Recognized Student Organizations can submit a funding request packet prior to the event or after the event has occurred*

## *Prior -*

- Funding requests should be submitted no less than 10 business days prior to the date of the event to provide time for the event planning efforts.


## *After -*

- ASI may consider allocating funds after an event has occurred.
- Post-event funding requests will only be considered in the semester when they occur.
- The last day to submit a funding request is by the deadline for the last Finance meeting of the semester





# Funding Request Packet

- ASI Funding Request Form
  - All information must be typed and signed
- Approved CSI Event Registration Form 
- Event Flier with ASI Logo
- Estimates and relevant invoices for the events
  - Screenshots of the items or provide links

# ASI Funding Request Form



ASSOCIATED STUDENTS, INC.  
**FUNDING REQUEST FORM**

**PART 1 - NOTICE & CHECKLIST**

**IMPORTANT**

- All Funding Request Packets must be submitted by 12 PM Friday, the week before the Funding Sub-Committee Meetings.
- Funding Request Packets must be turned in no less than 5 business days (1 week) prior to the event.
- Deadline for Request for Payment or Purchase Order (RPP) is 15 days after the event.

CSI EVENT REGISTRATION FORM   
  EVENT ESTIMATES / INVOICES (NOT PAID)   
  EVENT FLYER WITH ASI LOGO   
  REQUIRED SUPPORTING MATERIAL BASED ON PURCHASES/EVENT

**PART 2 - CONTACT & ORGANIZATION**

OFFICER NAME: \_\_\_\_\_ CLUB/ORG: \_\_\_\_\_  
 OFFICER TITLE: \_\_\_\_\_ EVENT TITLE: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ DATE(S) OF EVENT: \_\_\_\_\_ SEMESTER: FALL  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ EVENT LOCATION: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_ TOTAL ATTENDANCE: \_\_\_\_\_  
 SIGNATURE: \_\_\_\_\_ EXPECTED CAL STATE LA STUDENTS ATTENDANCE: \_\_\_\_\_

**PART 3 - EVENT DESCRIPTION**

IS THE EVENT OPEN TO ALL CAL STATE LA STUDENTS?  YES  NO    HOW WILL THIS PROGRAM ENHANCE THE CAL STATE LA EXPERIENCE?

BRIEFLY DESCRIBE THE EVENT: \_\_\_\_\_

**PART 4 - COST BREAKDOWN**

	DESCRIPTION:	AMOUNT:		DESCRIPTION:	AMOUNT:
<b>HOSPITALITY</b>			<b>HONORARIA / CONTRACTS</b>		
<b>MARKETING</b>			<b>OTHER</b>		

**PART 5 - EVENT SUMMARY**

TOTAL COST OF THE EVENT	OFFICE USE ONLY
_____	STAFF INITIALS _____
TOTAL REQUESTED FROM ASI _____	TIME STAMP: _____
AMOUNT FROM OTHER SOURCES _____	
WHAT OTHER RESOURCES ARE YOU EMPLOYING FOR THIS EVENT: _____	

FOR THE STUDENTS, BY THE STUDENTS    REV 09/2022

# Part 2 - Contact & Information

- Must be filled out and signed by an officer
- Make sure the given contact information is regularly checked
- **Event information must match with CSI Event Registration Form information**
- For expected attendance, use whole number estimates (e.g. 15, 50, & not 30-50, 50+)

PART 2 - CONTACT & ORGANIZATION	
OFFICER NAME: <input type="text"/>	CLUB/ORG: <input type="text"/>
OFFICER TITLE: <input type="text"/>	EVENT TITLE: <input type="text"/>
ADDRESS: <input type="text"/>	DATE(S) OF EVENT: <input type="text"/> SEMESTER: FALL
CITY: <input type="text"/> STATE: <input type="text"/> ZIP: <input type="text"/>	EVENT LOCATION: <input type="text"/>
PHONE: <input type="text"/> EMAIL: <input type="text"/>	TOTAL ATTENDANCE: <input type="text"/>
SIGNATURE: <input type="text"/>	EXPECTED CAL STATE LA STUDENTS ATTENDANCE: <input type="text"/>



# Part 3 - Event Description

- All events must be open to all Cal State LA students to qualify for ASI funding
- Fill in the information as requested -
  - Briefly describe the event
  - How will this program enhance the Cal State LA experience?

PART 3 - EVENT DESCRIPTION	
IS THE EVENT OPEN TO ALL CAL STATE LA STUDENTS? <input type="checkbox"/> YES <input type="checkbox"/> NO	HOW WILL THIS PROGRAM ENHANCE THE CAL STATE LA EXPERIENCE?
BRIEFLY DESCRIBE THE EVENT: <input type="text"/>	<input type="text"/>

# Part 4 -

## Cost Breakdown: Overview

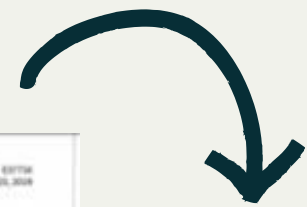
- Fill in the table with all event expenses with their cost and a description
- **Better to have a general description than a specific one**
- If more space is needed, attach an additional spreadsheet detailing costs
- *ASI shall fund 70% of expenses when an event is a fundraiser or if the student organization is charging for attendance/participation*

PART 4 - COST BREAKDOWN			
HOSPITALITY	DESCRIPTION:	AMOUNT:	
HONORARIA / CONTRACTS	DESCRIPTION:	AMOUNT:	
MARKETING	DESCRIPTION:	AMOUNT:	
OTHER	DESCRIPTION:	AMOUNT:	

# Cost Breakdown - Hospitality

PART 4 - COST BREAKDOWN			
DESCRIPTION:	AMOUNT:	DESCRIPTION:	AMOUNT:
HOSPITALITY		HOSPITALITY / CONTRACT	
MARKETING		OTHER	

Item	Qty	Unit Price	Total
Food/Beverage			
1000 Buffet Style Dinner - 1000 Seater	1	175.00	175.00
1000 Buffet Style Dinner - 1000 Seater	1	175.00	175.00
1000 Buffet Style Dinner - 1000 Seater	1	175.00	175.00
1000 Buffet Style Dinner - 1000 Seater	1	175.00	175.00
1000 Buffet Style Dinner - 1000 Seater	1	175.00	175.00



Event catered by Golden Eagle Hospitality (UAS)

- Requires a Banquet Event Order (BEO) form instead of a food permit

Temporary Food Permit Request Application

Name of Department/Other Organization: Associated Students, Inc.

Event Name/Title: LEADS Night

Event Location: UAS Plaza

Event Start Date: 01/21/2020 Event End Date: 02/01/2020 Hours of Operation: 3:00 - 4:30 pm

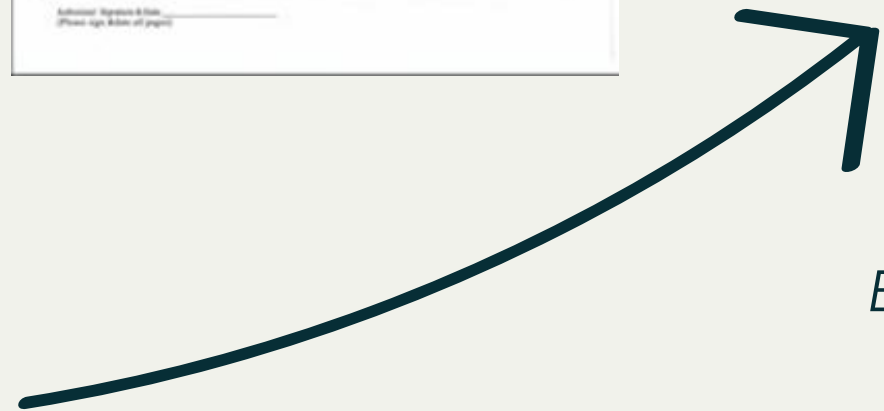
Contract Name: Amelia Mollinedo Email: amemolli@ucsd.edu Phone: (760)343-4736

**CERTIFICATE OF COMPLETION**

This is to certify that [Redacted] has completed the course **Food Safety and Handling** on **Aug 28, 2019**

Food and drinks bought through an off-campus vendor

- **Requires signed food permit & food handler certificates**



Based on actual student attendance, ASI will fund up to:

- Breakfast 8 am-11 am: Up to \$15.00
- Lunch 11 am - 4 pm: Up to \$20.00
- Dinner 4 pm - 11:59 pm: Up to \$27.00

# Cost Breakdown - Honoraria & Contracts

## Payments for speakers

- ASI will consider modest and reasonable speaker fees
- A contract or invoice will be required for reimbursement of speaker fees and honoraria.
- ASI may fund noncash equivalents, such as merchandise, flowers, etc., in place of fees and honoraria up to \$50.00 per event.
- Cal State LA faculty and staff fees cannot be funded with ASI funding

PART 4 - COST BREAKDOWN					
HOSPITALITY	DESCRIPTION:	AMOUNT:	HONORARIA / CONTRACTS	DESCRIPTION:	AMOUNT:
MARKETING	DESCRIPTION:	AMOUNT:	OTHER	DESCRIPTION:	AMOUNT:

# Cost Breakdown - Marketing

All designs for merchandise must be provided in the funding packet

- All clothing must be manufactured by sweatshop-free companies
  - A list of sweatshop-free companies is available on the ASI website
- May fund up to 100% of merchandise purchased to hand out to all Cal State LA students
- May fund up to 50% of merchandise purchased if given only to club members
- May fund up to 70% of merchandise if it is being sold and not given out for free to students

## Printing Fliers

- The funding limit is determined by the paper size and color of B&W.

PART 4 - COST BREAKDOWN			
HOSPITALITY	DESCRIPTION:	AMOUNT:	
HONORARIA / CONTRACTS	DESCRIPTION:	AMOUNT:	
MARKETING	DESCRIPTION:	AMOUNT:	
OTHER	DESCRIPTION:	AMOUNT:	



# Cost Breakdown - Other

- Costs that fall outside of the prior 3 categories - e.g.
  - Travel - may fund the lodging, transportation, and registration fees up to the maximum amount allowable
    - Lodging: based on CSU rates - \$333 per night per room
    - Transportation: When the traveler uses their own vehicle, \$0.67 per mile will be used. Airfare reimbursement will be based on coach seating rates.
  - Decorations - may fund up to a maximum of \$300 for an event
  - Equipment - may fund the full cost of equipment rentals
  - Supplies - may fund programming supplies that are necessary for the success of the program
  - Gift Cards for Cal State LA Students - may fund if used as prizes for a competitive event or awards for individual achievement
- Supply as much supporting documentation and information

PART 4 - COST BREAKDOWN			
HOSPITALITY	DESCRIPTION:	AMOUNT:	
HONORARIA / CONTRACTS	DESCRIPTION:	AMOUNT:	
MARKETING	DESCRIPTION:	AMOUNT:	
OTHER	DESCRIPTION:	AMOUNT:	

# Event Flier with ASI Logo

## Acceptable



## Not Acceptable



# Finding & Using Examples

## Past Finance Committee Meetings on the ASI Website

- Ideas of events that could be funded and submitted paperwork for said event



### *Some Examples:*

- <https://asicalstatela.org/sites/default/files/content/attachments/2024/01/financial-management-association-229-30124redacted.pdf>
- <https://asicalstatela.org/sites/default/files/content/attachments/2024/02/rehabilitation-counseling-association-31524redacted.pdf>
- <https://asicalstatela.org/sites/default/files/content/attachments/2024/03/leeaf-32624redacted.pdf>
- <https://asicalstatela.org/sites/default/files/content/attachments/2024/03/latin-american-studies-society-32124redacted.pdf>



# Funding Request Packet Submission

- The deadline for submissions is Friday 12 pm before the intended meeting.
  - Email sent date/time will serve as the timestamp
- Email all relevant files to:
  - ASI VP for Finance - [asivpf@calstatela.edu](mailto:asivpf@calstatela.edu)
  - Amanda Maldonado - [amaldo95@calstatela.edu](mailto:amaldo95@calstatela.edu)
  - Dena Florez - [dflorez3@calstatela.edu](mailto:dflorez3@calstatela.edu)
- ASI Staff will get back to the student organization representative submissions no later than Monday morning to correct any errors or to submit additional documents
- **Any paperwork not finalized or completed before Wednesday 12 pm will not be on the agenda for the upcoming Finance Meeting**

# Preparation & Expectations for Meeting

- Finance Committee meetings are held alternating Thursdays at 2 pm
- The earlier you submit the funding requests, the earlier your student organization will be on the agenda
- Review the meeting agenda posted on the ASI website to confirm your student organization's spot on the agenda. The agenda is posted on Monday at 2 pm the week of the meeting.
  - *Email as soon as possible if there is an error.*



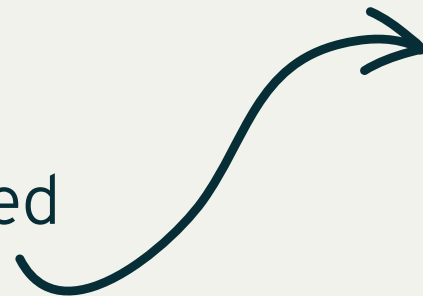



# Presenting at the Meeting

- Attending the meeting during which the funding request is considered is highly encouraged but not required
  - An allocation may not be approved if the committee has unanswered questions about the proposed event request
- Finance Committee Dates and Deadlines can be found here:  
ASI Website - Student Orgs Tab - Funding Proposals Deadline  
<https://asicalstatela.org/services/clubs-and-organizations-funding/club-funding-proposals-deadline>

# After the Meeting - Award Letter

- Summary of the approved expenditure for the event from the Finance Committee meeting
- Sent out within a week of the meeting presented at
- Needs signature from student organization President or Treasurer
- Submitted with the Request for Payment (RPP) and used as a reference for what purchases ASI will be able to reimburse
- Will state any notes/stimulations mentioned in the meeting





## FINANCE COMMITTEE AWARD LETTER

2023 - 2024

CONGRATULATIONS! Your Club/Organization's event has been approved for ASI Funding. The Club/Organization is responsible for turning in a **completed** Request for Payment form within **15 business days** after the event (see "Request for Payment Form (RPP)" for details). If your paperwork is not completed and turned in on time, the Club/Organization will forfeit all appropriated funds (unless arrangements have been made before the 15 days). Please note that all funding requests must follow the Finance Committee's Policy 204 and stipulations noted above, in order to receive full funding.

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Club/Organization: Los Angeles Economic Equity Accelerator & Fellowship      Date of Meeting: 11/30/23

Event Title: LEEAF Posada

Event Date: December 5, 2023      Amount Funded: \$859.04      Date RPP is Due: 1/03/24

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Approved Items + Amounts:			
Items	Amounts	Items	Amounts
• Giveaways Items	\$ 200.84	•	
• Decorations	\$ 57.26	•	
• Catering	\$ 600.94	•	
•		•	
		<b>TOTAL:</b>	<b>\$ 859.04</b>

Notes/Stipulations:

**DON'T FORGET TO SUBMIT THIS AWARD LETTER & THE FOLLOWING ITEMS:**

- EVENT FLYER WITH ASI LOGO
- ORIGINAL AWARD LETTER
- EVENT EVALUATION FORM
- PROOF OF PAYMENT (examples below):
  - Credit/Debit Card Receipt
  - Copy of cancelled check (front & back)
  - Original Receipts attached and taped to a blank sheet (do not place tape on ink)

PRINT STUDENT OFFICER NAME

Vanessa Laguna  
Vanessa Laguna (Dec 5, 2023 21:08 PST)

STUDENT OFFICER SIGNATURE

Shreyas Belur  
Shreyas Belur (Dec 4, 2023 15:36 PST)


SHREYAS BELUR  
ASI VICE CHAIR FOR FINANCE

Andrew Klein  
Andrew Klein (Dec 5, 2023 16:34 PST)

ANDREW KLEIN  
ASI VICE PRESIDENT FOR FINANCE

If you have any questions, please feel free to contact me at:  
323-343-4778 or by email at: asivpf@calstatela.edu

ASSOCIATED STUDENTS, INC. AT CAL STATE LA  
5154 STATE UNIVERSITY DRIVE, ROOM 203 • LOS ANGELES CA 90032





# Request for Payment (RPP)

## Overview - Parts



1. Request for Payment Form
2. Event Evaluation Form
3. Award Letter
4. Clear, Scanned-in Original itemized receipt(s)
5. Check Requisition Form(s) *(if applied)*



# RPP Form

- Make sure contact information is regularly checked
- Must be typed
- If more room is required, attach an additional spreadsheet



**ASSOCIATED STUDENTS, INC.**  
**REQUEST FOR PAYMENT**  
 CALIFORNIA STATE UNIVERSITY, LOS ANGELES  
 5154 State University Drive • U-SU Rm 203 • Los Angeles, CA 90032  
 Voice: 323.343.4778 • Fax: 323.343.6420

Clubs &  
Organizations

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**Check Payable To:**

Club/Organization: Cal State LA -

Event Title: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Signature: \_\_\_\_\_

**Requestor/Contact:**

Name: \_\_\_\_\_

CIN: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

---

Give Description of Item, Event, Location, - Include an Original Invoice or receipt.

Description	Quantity	Unit Cost	Extended Cost
	5	\$ 5.00	\$ 25.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
Event Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit/Debit Card			<b>EVENT TOTAL: \$ 25.00</b>
			(Office Use Only)
			AMT. REQUESTED: _____
			APPROVED AMT.: _____

(Please Check One of the Above Payment Methods)

**Pick Up Checks at ASI Administrative Offices, U-SU Rm. 203**

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**Additional Necessary Documents**

**DID YOU TURN IN:**

- RPP Form
- Event Evaluation Form
- Original Award Letter
- Clear, legible, original receipts attached and taped to a blank sheet of paper
- Credit/Debit card receipt statement (if original receipt lost)
- Copy of canceled check (if original receipt lost)

All forms must have a Time Stamp and staff initial:

DATE STAMP GOES HERE


Rev'd. 08/20

Important: Deadline for Request for Payment is 15 business days after the event.



# Event Evaluation Form

It must be filled in completely. Required answers for all questions



## EVENT EVALUATION FORM

Club/Organization: \_\_\_\_\_ Event Title: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Day/Date/Time of Event: \_\_\_\_\_  
 Contact Phone: \_\_\_\_\_ Location: \_\_\_\_\_

<p><b>Actual cost to host event:</b></p> <p>Advertisements _____</p> <p>Supplies _____</p> <p>Facility rentals _____</p> <p>Decorations _____</p> <p>Performance/Speakers _____</p> <p>Food/Refreshments _____</p> <p>Miscellaneous (Specify) _____</p> <p>_____</p> <p style="text-align: right;"><b>Total Cost</b>    \$0.00</p>	<p><b>Attendance:</b></p> <p>Students _____</p> <p>Faculty/Staff _____</p> <p>non-Cal State LA _____</p> <p style="text-align: center;">Total    0</p> <p><b>Actual Attendance:</b></p> <p>Students _____</p> <p>Faculty/Staff _____</p> <p>non-Cal State LA _____</p> <p style="text-align: center;">Total    0</p> <p><b>Co-sponsorship contributions (If applicable):</b></p> <p>Co-sponsorship contributions: _____</p> <p>Income: _____</p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Marketing and advertising methods: \_\_\_\_\_

What was your actual marketing efforts such as posters, postings, sociale media etc.  
 \_\_\_\_\_  
 \_\_\_\_\_

Overall effectiveness	<input type="checkbox"/> great	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> below average	<input type="checkbox"/> poor
Quality of Presenters	<input type="checkbox"/> great	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> below average	<input type="checkbox"/> poor
Audience Reaction	<input type="checkbox"/> great	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> below average	<input type="checkbox"/> poor
Logistical Functionality <small>(set up, technical, facilities etc.)</small>	<input type="checkbox"/> great	<input type="checkbox"/> good	<input type="checkbox"/> fair	<input type="checkbox"/> below average	<input type="checkbox"/> poor

List any specific problems, comments or concerns you had during the planning or implementation stages of the program.  
 \_\_\_\_\_  
 \_\_\_\_\_

Would you repeat this program? Yes No Please explain why below.  
 \_\_\_\_\_  
 \_\_\_\_\_

List suggestions for Improvement (Please be specific with your recommendations as to how would you make this even better)  
 \_\_\_\_\_  
 \_\_\_\_\_

On a scale of 1 to 10, with 10 being the best/highest, how was your experience with applying for ASI funding?   1  

What would make your experience more positive? Any suggestions on making the process overall better.  
 \_\_\_\_\_  
 \_\_\_\_\_



# Receipts



Original Receipts (Clearly Scanned in or Photo)

- Do not cover any ink or text
- Receipt(s) need to be itemized
- Receipts must show how items were paid - cash (PAID STAMP) or show the last 4 digits of the cc
- Online orders must have an email confirmation of purchase summary

If you don't have original receipts, you must do one of the following:

- Credit card - credit card transaction detailing exact charges
- Bank Card - Debit/ATM Statment - Bank Statement
- Check - Copy of canceled check (front/back)
  - For credit card or bank purchases, you may cover other sensitive information not pertaining to the reimbursement
- Must provide a written statement of what items were purchased

# Check Requisition Form *(if apply)*

Submit the check requisition form(s) with the RPP for the individual(s) who paid for the event out-of-pocket

- One per individual who needs to get reimbursed

**If there are multiple check requisition forms, please indicate on each form what each individual purchased to receive reimbursement**

ASSOCIATED STUDENTS, INC.

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**STUDENT ORGANIZATION CHECK REQUISITION FORM**

Student Organization Name: \_\_\_\_\_ Date: \_\_\_\_\_

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<p>Check to be made <b>payable to:</b></p> <p>Name: _____</p> <p>Address: _____</p> <p>City, State Zip: _____</p> <p>Phone Number: _____</p> <p>Check One: <input type="checkbox"/> Mail Check <input type="checkbox"/> Pickup Check</p>	<p>Type of Expense:</p> <p><input type="checkbox"/> Payment with Invoice</p> <p><input type="checkbox"/> Reimbursement with Receipts</p> <p><input type="checkbox"/> Other</p>
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Check Distribution					
Amount Description	Amount	Fund	Organization	Budget Year	Amount
Subscription/Dues					
Supplies & Services					
UAS Catering					
Travel					

**Total Amount Requested:** \$ \_\_\_\_\_

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*(If Applicable)*  
 Event Title: \_\_\_\_\_ Event Date: \_\_\_\_\_ BEO #: \_\_\_\_\_  
 Purpose of Request (ex: reimbursement, travel, honorarium, etc.):

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Student Organization Authorization:

President: \_\_\_\_\_ Advisor: \_\_\_\_\_  
Signature Date Signature Date

Treasurer: \_\_\_\_\_  
Signature Date

ASI Authorization:

ASI Staff: \_\_\_\_\_  
Signature Date

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FOR THE STUDENTS, BY THE STUDENTS REV 06/2024

ASI



# Request for Payment Packet Submission

Email all relevant files to:

- ASI VP for Finance - asivpf@calstatela.edu
  - Amanda Maldonado - amaldo95@calstatela.edu
  - Dena Florez - dflorez3@calstatela.edu
- Email send date/time will serve as a timestamp
  - Deadline is 15 business days after the event date - indicated on the ASI Award Letter



**FINANCE COMMITTEE AWARD LETTER**  
2023 - 2024

CONGRATULATIONS! Your Club/Organization's event has been approved for ASI Funding. The Club/Organization is responsible for turning in a **completed** Request for Payment form within **15 business days** after the event (see "Request for Payment Form (RPP)" for details). If your paperwork is not completed and turned in on time, the Club/Organization will forfeit all appropriated funds (unless arrangements have been made before the 15 days). Please note that all funding requests must follow the Finance Committee's Policy 204 and stipulations noted above, in order to receive full funding.

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Club/Organization:	Los Angeles Economic Equity Accelerator & Fellowship	Date of Meeting:	11/30/23
Event Title:	LEEAF Posada		
Event Date:	December 5, 2023	Amount Funded:	\$859.04
		Date RPP is Due:	1/03/24



# Funding Reconciliation

After the Request for Payment packet is received, an email will be sent via Adobe Sign to confirm how much your student organization will be reimbursed

- This needs to be signed to continue on with the reimbursement process

## EXAMPLE

SHPE Cal State LA  
GMIS Conference  
10/11-10/14/23

Total Approved Amount was: \$ 2,100.00

	Approved	Actual	Paid to Club
Travel - Registration	\$ 2,100.00	\$ 2,125.00	\$ 2,100.00
	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -
	\$ -	\$ -	\$ -
Total:	\$ 2,100.00	\$ 2,125.00	\$ 2,100.00

Amount Paid to Club \$ 2,100.00

Club Representative:

Date:

Amanda Maldonado:  
Administrative Coordinator

Date:

# Receiving Reimbursement Check



For student organizations who bank on campus



The individual(s) who paid out of pocket for the event will receive their individual reimbursement check



For student organizations with an exempt account: off-campus banking



Check made payable to your organization - pick up in the ASI Office, U-SU room #203

**A check can take 2-3 weeks after funding reconciliation is signed**

# General Funding Information

ASI Website - Student Orgs Tab

<https://asicalstatela.org>

Have questions? Reach out to:

ASI Vice President for Finance - [asivpf@calstatela.edu](mailto:asivpf@calstatela.edu)

Amanda Maldonado - [amaldo95@calstatela.edu](mailto:amaldo95@calstatela.edu)