



California State University, Bakersfield
Fundraising Event Approval Form

Workflow Submittal - Upload approved form to the 25live event. (Office of Events)

DATESTAMPS REQ: CAB: VPUA: UC:

Please note: Fields identified with an asterisk (\*) are required.

Requestor Information

CSUB ID\*: Name\*: Title\*: Extn\*:

Dept ID\*: Department Name\*:

Event Details

Event Name\*: Event Date\*:

Event Location\*:

Summary of Activities\*:

Draft Solicitation Materials:

Cost Per Ticket\*: Projected Attendance\*: Estimated Staff Hours\*: 25Live Reference #:

Event Risk Controls

Will the event have the following activities? If the answer is "Yes", then please describe or attach the documentation.

Yes No An auction\*?

Yes No Serve alcohol\*?

Yes No A Raffle\*?

Yes No A controlled game such as "Casino/Gaming"\*?

General Comments:

Required Event Budget

Chartfields for Revenue & Expenses: Fund\*: Dept\*: Bus. Unit\*:

The budget must sufficiently detail anticipated revenue and expenditures to project net revenue and any exchange of goods or services.

(Assigned Upon Approval)

Authorized:

CashNet Code:

Revenue Amount Description

Auction Revenue:

\*\* Raffle Revenue:

Sponsorship Revenue:

Ticket Revenue: \_\_\_\_\_

Other Revenue (Please specify): \_\_\_\_\_

**Total Revenue:** \_\_\_\_\_

**\*\* Raffles will be reviewed and approved by the CSUB Foundation**

<b>Expenses</b>	<b><u>Amount</u></b>	<b><u>Description</u></b>
Entertainment Expenditures:	_____	_____
Food/Beverage Expenditures:	_____	_____
Facility Expenditures:	_____	_____
Printing/Publicity Expenditures:	_____	_____
Admin Fees:	_____	_____
Credit Card Fees:	_____	_____
<b>Total Expenses:</b>	_____	
<b>Total Net Income:</b>	_____	

**Fill-out only if you plan to utilize services of a contract fundraiser** (Attach copy of draft contract)

Will the Fundraiser have Custody of Contributions? Yes  No

Estimated Gross Receipts: \_\_\_\_\_

Amount Paid to Fundraiser: \_\_\_\_\_

Amount Paid to Foundation: \_\_\_\_\_

### **Policy, Terms and Conditions**

Fundraising events with expected gross receipts greater than \$5,000 or those with plans for an auction or raffle of any size must be approved in writing by the delegated authority when the fundraising event utilizes the University name, logo, or trademarks and represents that the University will benefit from the proceeds. Prior to the event's announcement, the delegated authority shall review the fundraising event's budget, drafts of solicitation materials, and action plan to comply with federal, state, and local regulations.

- All marketing, solicitation, and/or registration materials must be submitted with form.
- Purchasing/Procurement will be contacted for any and all venue contracts. Appropriate insurance must be in place prior to event.
- Please allow 5 working days for approval or changes to the request form.

**Requestor**  By checking this box, I am agreeing to the terms and conditions stated above.

Name: \_\_\_\_\_ Requestors Email: \_\_\_\_\_ Date:

**Cabinet Approval**  By checking this box, I approve the Fund Raising Event for the above requestor.

Cabinet Approver: \_\_\_\_\_ Cabinet Approver Email: \_\_\_\_\_ Date:

**CSUB Foundation**  By checking this box, I approve the Fund Raising Event for the above requestor.

Vice President for University Advancement (VPUA) \_\_\_\_\_ VPUA Email: \_\_\_\_\_ Date:

**University Controller**  By checking this box, I approve the Fund Raising Event for the above requestor.

Controller Approver: \_\_\_\_\_ Controller Approver Email: \_\_\_\_\_ Date: