Faculty Student Association of DMC-Student Activity Fund Residence Hall Council (RHC)

FY 2018 = June 1, 2017 through May 31, 2018

CERTIFIED BUDGET

Yellow highlights show necessary changes made in Certificaton

Account	Description	Prior FY 2017 @5/31/17 Actual	Submitted Budget FYE 2018	Certified Budget 2018	Comments
Income					
40-42092-009-30001	ACTIVITIES FEES INCOME BALANCE	\$ 4,510.00	4,470	4,510	based on actual prior yr
40-49001-009-30001	ROLLOVER BALANCE	2,017.49	1,000	3,023	Actual FY 2017 funds not spent as of 5/31/17.
Total Income		\$ 6,527.49	5,470	7,533	Formula Cell- Do not alter
Program Expenses					
40-70009-009-30001	ADMINISTRATION FEE	\$ 236.00	236	242	2.4% Increase
40-71000-009-30001	FLOOR ALLOTMENTS	1,216.72	1,207	1,497	\$290 added from FY2017 expense paid after 5/31/17
40-70135-009-30001	MEETINGS	2,043.50	1,850	2,730	\$880 added from FY2017 expense paid after 5/31/17
40-70173-009-30001	PROGRAMS & PROJECTS	7.80	900	2,423	Remainder of actual 5/31/17 rollover added here
Total Program Expense		\$ 3,504.02	4,193	6,892	Formula Cell- Do not alter
Balance Before Reserves		3,023.47	1,277	641	Formula Cell- Do not alter
Reserves:					
40-30008-009-30001	RESERVE FUND	-	641	641	=18.3% of prior yr actual expenses
Total Reserves		\$ -	641	641	Formula Cell- Do not alter
Total Expenses + Reserve	 	\$ 3,504.02	4,834	7,533	Formula Cell- Do not alter
Total Net Income less Exp	enses + Reserves	\$ 3,023.47	636	0	Formula Cell- Do not alter
*SUNY Reserve Guidelines	s >5% and <100% of prior year actual ex	xpenses			



August 1, 2017

TO:

Jia Jian Li, President

Residence Hall Council (RHC)

FROM:

Richard J. Bentley, President

Faculty Student Association (FSA)

SUBJECT:

RHC Budget Certification for Fiscal Year 2018 (June 1, 2017 to May 31, 2018).

Attached is a copy of RHC's certified budget for Student Activity Fees (SAF) for the fiscal year 2018 that began June 1, 2017 pursuant to the budget that the RHC approved on 4/19/17. This budget has been certified on behalf of the Campus President in accordance with the SUNY Board of Trustees SAF Guidelines. The following changes were made to the submitted budget:

- Rollover Balance: The actual year end 5/31/17 unused funds were \$3023. RHC must make conscious efforts to
 increase its program and activities to spend its annual SAF income by May 31st or consider reducing its future fee
 rate.
- There were 2 payment forms submitted after 5/31/17 (Floor allotments @ \$290 and Meetings@ \$880.). These amounts have been added to the respective 2018 account budgets to reflect that these prior year (2017) expenses are being from current year (2018) funds.
- The **Reserve Fund** at **\$641**. Represents 18.3% of RHC's prior year actual expenses and meets SUNY guidelines (minimum of 5%; maximum 100% of prior year actual expenses).
- The Annual Accounting Fee was increased 2.4% from \$236 to \$242.

Please be aware that:

- Payments signature requirements: In accordance with the RHC bylaws, the <u>Treasurer plus one other RHC officer</u> shall sign all payment requests.
- Expenses may be drawn from appropriate accounts in accordance with this certified budget, dependent on the positive cash balance of the account at the time of disbursements.
- The Council may submit a revised budget for additional certification at any time during the year.
- This certified budget is posted on the FSA webpage, Forms and Document (link)
- FSA Payment forms(link), SAF Meeting Minutes Guidelines (link), other SAF documents (link) are available online.

Please feel free to contact me at Ext. 2186 if you have questions or concerns.

xc: Chris Sena, FSA Interim Controller (w/original documents)

Deshawn Hilliard

via eMail:

Tanmai Shah, VP Ana Diaz, Treasurer

Diona Symester, Secretary

Justin Alger, Dir, Residential Life and Services

Meg O'Sullivan AVP Student Life Amy Urghart, Director Student Center

Peter Ljutic, Bursar (no SAF rate increase: Current flat rate=\$20/yr)



Date Completed: 4/27/17

- Instructions: 1. Complete this form All Signatures on this form must be ORIGINAL signatures (pages 1 & 2). blank form avail on FSA website,
 - 2. Attach the detail SAF Budget Worksheet as approved by the student council,
 - 3. Attach the SIGNED meeting minutes showing the budget detail was approved by the student council.

Submit all 3 documents to FSA Business Office (Mail Stop 1219) by SAF Budget deadline (see annual cover letter for May date).

SAF BUDGET REQUEST AND AGREEMENT FOR FISCAL YEAR: June 1, 20 17 thru May 31, 20 18

NAME OF STUDENT ORGANIZATION: Residence Hall Council

Officer	Print Name	Term of Office until (end date)	eMail (best way to reach you)	Phone # (best way to reach you)
President (if other Title, specify:)	Jia Jian Li	5/31/18	jiajian.li@downstate.edu	(646) 239-3844
Vice President (if other Title, specify:)	Tanmai Shah	5/31/18	tanmai.shah@downstate.edu	(646) 725-4203
Secretary/if other	Ana Diaz	5/31/18	ana.diaz@downstate.edu	(917) 693-9541
Transurar (if other	Diona Symester	5/31/18	diona.symester@downstate.edu	(646) 912-4365

AUTHORIZED SIGNATURE(S) FOR PAYMENT FORMS (check your council bylaws - some have specific authorized signator requirements):

Signature	* 13 2- 2:	Signature X Secretary Wiona Synul &	~
Pres Print Name	President Jia Jian Li	Treas Print Name Treasurer Diona Symester	
Signature	× Talaa	Signature X	
VP Print Name	Vice President Tanmai Shah	Secy Print Name Secretary Treeseer Ana Diaz	

SINGLE SIGNATURES ARE REQUIRED FOR DISBURSEMENTS.

Other signature restrictions, if any (insert any special instructions such as club accounts which may have different authorized signature requirements) per RHC Constition RHC TREAS + 1 other RHC Office

V.3/17/15

AGREEMENT Between THE FACULTY STUDENT ASSOCIATION OF DOWNSTATE MEDICAL CENTER, INC. And

Residence Hall Council

(Insert Name of Student Organization)

The Faculty Student Association (FSA) is allowed to receive, hold, and disburse monies as agent for recognized Student Activity Fee organizations on the SUNY Downstate Medical Center campus and is performing in accordance with the established "Policies and Procedures for Trust and Agency (T&A) Accounts" and the SUNY Board of Trustee "Guidelines on Student Activity Fees" documents.

In consideration thereof, the applicant above hereinafter referred to as "depositor' requests and authorizes the FSA to act as its agent for the receipt, custody, and disbursement of funds pursuant to those documents. The depositor hereby agrees to pay an administrative fee to FSA as determined annually by the FSA Board of Directors. This amount shall be deducted from the depositor's account(s) at the start of each fiscal year.

As the designated agent, FSA will endeavor to maintain accounts consistent with the purposes and within the scope and authorizations set forth by the depositor in this Budget Request. Disbursements will be processed in accordance with FSA Business Office procedures provided the appropriate signatories have executed the payment request. FSA reserves the right to refuse to pay out any funds that, in its own recognizance, FSA feels are unauthorized or improper.

Depositor recognizes that FSA acts in a fiduciary capacity with T&A Accounts and insofar as depositor's account is a T&A Account, FSA assumes no liability for depositor's actions and/or agreements or commitments with any third parties. FSA assumes liability only with respect to its duties as an agent for custody and disposal of funds. Depositor agrees to hold harmless the FSA from any and all actions against it resulting from actions of depositor. In recognition thereof, this application is presented for review and certification.

Send (1) This form with all original signatures, (2) The Budget Worksheet (detail), and (3) the Council's SIGNED MEETING MINUTES showing their

Applicant's Main Representative Signature

April 27, 2017

12.0	approval of this budget, to the FSA Business Office (DMC Mail Stop 1219); A copy will be returned after certification. DO NOT WRITE BELOW THIS LINE (FSA USE ONLY)
100	CERTIFICATION
	Approved in accordance with the FSA guidelines entitled "Policies and Procedures for Trust and Agency Accounts" and "SUNY Board of Trustee Guidelines
	on Student Activity Fees". Submitted Budget approved at 4/19/17 RHC 19tg. Revisions during certification. • Actual Rollovere 5/31/17 was \$3,073.
	certification Actual Rollover@ 5/31/17 was \$3,073.
	· Prior year expenses submitted after 5/31/17 were added to the applicable acc
	CERTIFIED BY Clara Certification: 8/31/17

Agreed and Accepted: X

Official RHC meeting minutes

Date: Wednesday, April 19, 2017

Location: 825 Lobby, Residence Halls

Time: 6:00PM

- 1. Warm welcome by Michael
- 2. Attendance (attached): A quorum of 10% of voting members was achieved with 28 voting members (11 from 811 and 17 from 825)
- 3. Introduction eboard: President Michelle Garcia

Vice President - Michael Chen 2019

Secretary - Izumi Watanabe

Treasurer - Edwin Jimenez

- 4. Quick reminder about who we are and what we do by Edwin
- 5. Review of budget current status by Edwin
 - \$4,670.30 last meeting, \$4,333 currently, total spent so far \$2,493.87
 - New ping pong table and foosball ball table to be purchased.
 - 2017-2018 Budget Ratification: Claudia Zmijewski introduced a motion and Diona Symester seconded to approve the attached budget. Motion Unanimously Approved.
- 6. Blood drive -April 25th 9am-6pm by Michael
 - Volunteers can email Dr. Justin Alger directly
- 7. Downstate Olympics April 29th by Michelle
 - 825: contact JJ, Ana, Patrick to participate
 - 811: contact Matt, Claudia to participate
 - People who want to participate can email team captains directly
- 8. Allow RA's to promote their events
 - Andrew's event Medserts soon!
- 9. Director of Residential Life & Services, Dr. Justin Alger announcements
 - Hot water and heat shutdown Saturday April 22-Sunday April 23 9pm-5am
 - Continuing negotiation for wifi options and laundry services
- 10. Nominations/votes for RHC eboard 2017-18
 - President: JJ Li
 - Vice President: Tanmai Shah
 - Treasurer: Ana Diaz
 - Secretary: Diona Symester
- 11. Open forum: No items

Minutes respectfully submitted by Michael Chen, RHC Vice President 4/19/17

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RHC Attendance 4.19.17 825 Labby
811 NYA

Sherilyne Co Sherilyne Co Sheng Ri Nan

Tanmai Shah Mutthew Votal Z Suki Tsangn

Claudia Zmijewski

825 NYA

Richard Pong. Patrick 400 Khushan Shah SADID ASAD Alvin 1+0

Are Diaz

Jin Jin Li.
Nadle Toussant
Samuel Embinder
Richie Chen
Omoalhe Tira-

Malika Watters

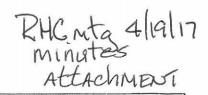
Janeane Humphney

Hannah Snyder

Michael Chen

Anu Balkae

Min Byo Neh



Student Activity Fund RESIDENCE HALL COUNCIL

Proposed Budget Draft for Fiscal Year 2018 (June 1, 2017 thru May 31, 2018)

Councils are not required to use this Excel Worksheet if it already has another budget document format that works well Whatever format you use, must have provisions for all Income (must describe how it was calculated). Expenses, and Reserve(s). Additional rows can be inserted as needed.

Account	Description		Proposed Budget 2017 - 2018	
Income				
40000-05-009-000	EST SAF ACTIVITY FEE INCOME	\$	4,470.00	
40001-05-009-000	ROLLOVER BALANCE	\$	1,000.00	
Total Income		\$	5,470.00	
Program Expenses				
70199-05-009-020	ADMINISTRATION FEE	\$	236.00	
70199-05-009-250	FLOOR ALLOTMENTS	\$	1,206.72	+290
70199-05-009-360	MEETINGS	\$	1,850.00	4800
70199-05-009-490	PROGRAMS & PROJECTS	\$		Anyexa
Total Program Expense		\$	4,192.72	
Balance Before Reserves		\$	1,277.28	
Reserves:				
70199-05-009-520 RESERVE FUND* (= >5% and <190% prior yr expenses)				
Total Reserves		\$	641.00	
Total Expenses + Reserve	es T	\$	4,833.72	
Total Net Income less Ex	penses + Reserves	\$	636.28	