

Faculty Student Association of DMC-Student Activity Fund

School of Public Health Student Council (SPH)

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

CERTIFIED BUDGET

Yellow highlights indicate revisions during certification

Account	Description	FY 2017 Actual @ 5/31/17	Submitted Budget FY 2018	Certified Budget FY 2018	Comments
Income					
40-42092-013-30001	ACTIVITY FEES INCOME	5,430	5,540	5,430	based on prior yr actual after final Bursar reconciliation
40-40001-013-30001	ROLLOVER BALANCE	5,643	5,529	5,419	Actual prior yr funds not spent as of 5/31/17.
Total Income		11,073	11,069	10,849	Formula Cell- Do not alter
Program Expenses	In Title Alpha sequence				
40-70009-013-30001	ADMINISTRATION FEE	53	54	54	
40-70044-013-30001	CLUBS	0	940	940	
40-70055-013-30001	CONFERENCE SUPPORT	2,000	1,800	1,800	
40-70097-013-30001	EVENTS	1,583	2,000	2,000	
40-70135-013-30001	MEETINGS EXPENSES	168	400	400	
40-70174-013-30001	PROGRAMS & PROJECTS	1,850	5,575	5,355	Adjusted net excess balance after Bursar final reconciliation
Total Program Expense		5,654	10,769	10,549	Formula Cell- Do not alter
Balance Before Reserves		5,419	300	300	Formula Cell- Do not alter
Reserves:					
40-30008-013-30001	RESERVE FUND	0	300	300	=5.3% of prior yr expenses
Total Reserves		0	300	300	Formula Cell- Do not alter
Total Expenses + Reserves		5,654	11,069	10,849	Formula Cell- Do not alter
Total Net Income less Expenses + Reserves		5,419	0	0	Formula Cell- Do not alter
*SUNY Reserve Guidelines >5% and <100% of prior year actual expenses					



Faculty Student Association of DOWNSTATE Medical Center

August 1, 2017

TO: Kirsten Weisbeck, President
School of Public Health Student Council (SPH)
Via eMail and posted on FSA website.

FROM: Richard J. Bentley, President,
Faculty Student Association (FSA)

SUBJECT: SPH Budget Certification for FY 2017 (6/1/17 thru 5/31/18).

Attached is a copy of SPH's certified budget for Student Activity fees (SAF) for the fiscal year 2018 that began June 1, 2017. The SPH approved the submitted budget at their 6/27/17 meeting, which has been modified as needed and has been certified on behalf of the Campus President in accordance with the SUNY Board of Trustees Guidelines with the following adjustments:

- **SAF Revenue:** Has been adjusted to **\$5,430** which was the actual prior year total SAF income after DMC Bursar's final FYE 5/31/17 SAF income reconciliation.
- **Rollover:** Revised to the actual 5/31/17 rollover of unused funds at **\$5,419**. While the SPH Council's 2018 budget does plan for increased program and activity spending to address this large rollover, if the Council fails to increase its activities and programs as planned, the Council must consider reducing its current SAF rate in future years. The above revisions result in a revised grand total income at **\$10,849**.
- **Program & Projects:** The net of the above revisions results has been made in this account being adjusted to **\$5,355** in order to balance SPH's 2018 Budget.
- **Reserve Fund:** SPH submitted a reserve fund at \$300 which represents 5.3% of prior year's actual expenses and is within the SUNY Guidelines (min 5% but no more than 100% of prior year's actual expenses).

Please be aware that:

- **Authorized Signators:** SPH's Constitution Article VI.b.4 which states that "all payments forms shall be signed by the Treasurer. In the absence or unavailability of the Treasurer, any other Council officer may sign a payment form but must provide a copy of the payment form they signed to the Treasurer within five days".
- 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.
- [FSA Payment Form \(link\)](#), [SAF Meeting Minutes Guidelines \(link\)](#), and [other SAF documents \(link\)](#) are available online.

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

cc: Chris Sena, FSA Interim Controller (w/original documents)
Deshawn Hilliard, FSA Bookkeeper;

via eMail:

Michelle Davis, VP
Louette Saint Victor, Secretary
Margot Swift, Treasurer
LeConte Dill, PhD, Faculty Advisor
Peter Ljusic, Bursar (No SAF rate change; Rate is \$10/semester flat fee: Summer, Fall, Spring)

Pascal Imperato, MD, Dean
Jeffrey Putman, VP Student Affairs
Meg O'Sullivan, AVP Student Life
Amy Urqhart, Director, Student Center



Date Completed: 5/31/2017

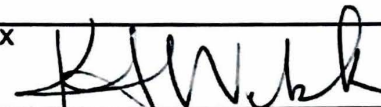
- Instructions:** 1. Complete this form All Signatures on this form must be ORIGINAL signatures (pages 1 & 2). blank form avail on FSA website,
 2. Attach the detail SAF Budget Worksheet as approved by the student council,
 3. Attach the SIGNED meeting minutes showing the budget detail was approved by 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, 20¹⁷ thru May 31, 20¹⁸

NAME OF STUDENT ORGANIZATION: SPH Student 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:)	Caroline Dolce	June 2017	caroline.dolce@downstate.edu	917-5865487
Vice President (if other Title,specify:)	Diana Yusim	June 2017	diana.yusim@downstate.edu	347-461-2511
Secretary(if other Title,specify:)	Eleonora F. d'Amore	June 2017	eleonora.f.damore@downstate.edu	347-515-0769
Treasurer (if other Title,specify:)	Kirsten Weisbeck	June 2017	kirsten.weisbeck@downstate.edu	585-314-1547

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

Signature	X Officers Updated 6/28/17; Update Form Attached	Signature	X  June 2017 President
Pres Print Name	PresidentCaroline Dolce	Treas Print Name	TreasurerKirsten Weisbeck
Signature	X Officers Updated 6/28/17; Update Form Attached	Signature	X Officers Updated 6/28/17; Update Form Attached
VP Print Name	Vice PresidentDiana Yusim	Secy Print Name	Secretary Eleonora F. d'Amore

Check One: ☒ JOINT or ☐ 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)

Subsequently updated on 6/28/17 upon election of new officers. Payment Forms require SINGLE signature of Trwasurer as per SPH Constitution, In absence of Treasurer, any other officerer may sign payment form and must provide Treasurer with signed copy within 5 days.

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

SPH Student Council

(Insert Name of Student Organization)

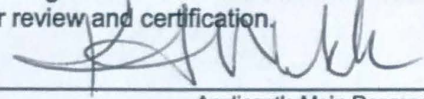
The Faculty Student Association (FSA) is allowed to receive, hold, and disburse monies as agent for recognized Student Activity Fee organizations on the SUNY Downstate Medical Center campus and is performing in accordance with the established "Policies and Procedures for Trust and Agency (T&A) Accounts"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

Agreed and Accepted: X



Applicant's Main Representative Signature

5/31/2017

Date

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

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".

Certification Comments:

SPH Council undertook an eMail vote on 5/16/17 to approve 2018 Budget. The new Council then ratified the eMail budget vote at their meeting on 6/27/17. Newly elected officers submitted signature updates on 6/28/17. See FSA certification cover letter dated 8/1/17 which highlights revisions made following the DMC Bursar final SAF income reconciliation adjustments for FYE 5/31/17.

CERTIFIED BY



SIGNATURE

Date of Certification: 8/1/17

SAF BUDGET REQUEST & AGREEMENT FORM

FACULTY STUDENT ASSOCIATION
OF DOWNSTATE MEDICAL CENTER, INC.

SAF Account Authorized Signature Update Form

Instructions:

Use this Form ONLY to update authorized signators on SAF Accounts

1. Complete this form.

2. Attach the relevant meeting minutes showing the election of new officers being changed.

Submit both documents to FSA Business Office (Box 1219, Student Center Room 2-09).

NAME OF STUDENT ORGANIZATION: School of Public Health Student CouncilAFFECTED FSA SAF Account(s): All SPH ACCTS: 40-XXXXXX-013-XXXXXThe FSA - Student Activity Fee Certified Budget and Agreement dated 5/31/17 is hereby amended as follows:☒ Remove the following Authorized Signator(s) as of _____:

Print Name(s) to be Removed	Prior Title
<u>Caroline Dolce</u>	<u>President</u>
<u>Diana Yustin</u>	<u>Vice President</u>
<u>Eleonora F. d'Amore</u>	<u>Secretary</u>
<u>Kirsten Weisbeck</u>	<u>Treasurer</u>

☒ Add the following NEW Authorized Signator(s):

Officer Title	Print Name	Term of Office Ends (date)	Phone # (best way to reach you)	Signature (must be submitted as an original signature)
<u>President</u>	<u>Kirsten Weisbeck</u>	<u>5/31/18</u>	<u>585-314-1547</u>	<u>[Signature]</u>
<u>VP</u>	<u>Michelle Davis</u>	<u>5/31/18</u>	<u>347-622-7415</u>	<u>[Signature]</u>
<u>Secretary</u>	<u>Loisette Saint-Vict</u>	<u>5/31/18</u>	<u>917-847-1175</u>	<u>[Signature]</u>
<u>Treasurer</u>	<u>Margot Swift</u>	<u>5/31/18</u>	<u>(202)490-4517</u>	<u>[Signature]</u>

Check One: JOINT or ☒ SINGLE SIGNATURES REQUIRED FOR DISBURSEMENTS.

Other signature restrictions, if any (check your council bylaws - some do specify authorized signator requirements; insert any special instructions such as club accounts which may have different authorized signatures)

Pursuant to SHP Constitution, All payments forms shall be signed by the Treasurer. However, in the absence or unavailability of the Treasurer, any other Council officer may sign a payment form but must provide a copy of the payment form they signed to the Treasurer within five days.

Kirsten Weisbeck
[Signature]
 Applicant's Main Representative Signature

6/28/17
 Date

DO NOT WRITE BELOW THIS LINE (FSA USE ONLY)

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"; Insert comments, if any:

[Signature]
 FSA Approval SIGNATURE

8/1/17
 Date

School of Public Health Student Council Meeting

SPH Lounge

Tuesday June 27th, 2017

4:00pm – 4:56pm

Attendance: *see sheet*

I. Approval of Meeting Minutes

At the last meeting we prepared for the new council. We also debriefed on the various events we had in the last month: LinkedIn webinar and National Public Health Events. Both events went well and garnered positive feedback from faculty and students. We finalized our community service project, which took place the first 2 weeks of June. We addressed the various student council requests, in response to Dr. Landsbergis' efforts at addressing the needs of SPH students.

Eleonora motioned to approve minutes. Kirsten seconds the motion. Motion approved unanimously.

II. Approval of 2017-2018 budget

After reviewing the proposed budget for the new academic year, Kirsten invites us to approve the proposed budget for the 2017-2018 student council.

ratifies Budget eMail vote taken on 5/16/17
Kirsten motions to approve the budget. Eleonora seconds the motion. Motion approved unanimously.

III. Introductions and Explanation of Roles and Events

Each current member described the roles and duties of their position. This information was also provided as a handout to all incoming members. Caroline described the role of President and Vice President, seeing as Diana could not attend this meeting. Kirsten described the role of Treasurer, Eleonora described the role of Secretary, and Nicole described the role of Events Coordinator.

New members were given a chance to ask questions and clarify any points. Eleonora made sure nobody had any questions left and the meeting continued as planned.

IV. Prospective Members State Interest

The current council asked interested members to state which position they would like to take on, how they plan on fulfilling those roles, and how much time they are able to commit each week given the demands of the council.

Justin explained that although he initially expressed the desire to be VP, he understands that his availability is not sufficient. He therefore would like to be a member at large and will support the council to the most of his ability with the understanding that he will be going abroad in March-May.

Daniela expressed interest in the Vice President role. She has enjoyed being a member at large of the council over the last year. She has ideas for National Public Health Week, bringing together various schools within Downstate. She will no longer be taking classes on campus in the fall, just working on her FE and CE. She plans on working full time which may limit her availability at meetings.

Michelle would like to be President or Vice President, although she prefers VP. She has been involved in clubs throughout the school, namely BFC, and feels that being a part of those clubs, she has the in to bridge the current gap. She is finishing up with her CE in the fall and will have time to come to campus as needed.

Kirsten is interested in the President role. She has been on the council as Treasurer for the past year. She has experience with the council, understands the demands and is ready to take it on. She will be on campus taking the remainder of her classes and has time to commit to the council.

Nathalie is interested in the Events coordinator position. She has experience setting up events and is familiar with the neighborhood. She has ideas for events and is eager to organize fun activities for SPH Students.

Lousette, although unable to attend the meeting, emailed her preferences – she would like to be Secretary of the council. She has experience in that role through prior work and will be of great assistance to the council. She is available to attend meetings on campus.

Margot was also unable to attend the meeting and emailed us her preferences – she would like to be Treasurer on the council. She enjoys detail oriented tasks such as preparing budgets and keeping track of expenses when the Council hosts events. She regularly communicates professionally through e-mail, and would feel very comfortable staying in contact with Mr. Bentley and other Downstate staff as necessary. She also hopes to use her experience in the MPH program to contribute thoughtful and fun ideas for making SPH a better place and is comfortable promoting events and activities to encourage students to participate.

Based on this information, Eleonora motions to everyone present that the current council step out and discuss who should receive which role.

Nikki seconds the motion. Motion approved unanimously.

V. Discussion among former student council

Based on the information each new member shared, Eleonora, Caroline, Nikki, and Dr Dill discussed how best to distribute the roles. Kirsten was not part of this conversation, seeing as she is running for the President's role.

After careful discussion, we felt that the executive roles should be distributed as follows:

- President: Kirsten Weisbeck

- 1st VP: Michelle
- 2nd VP: Daniela Mackembe
- Treasury: Margot Swift
- Secretary: Lousette Saint Vincent
- Events Coordinator: Nathalie
- Member at large: Justin

The role of Vice President has taken on a much larger task, therefore we feel it best to have two VPs who can divide up the work accordingly.

Eleonora motions to approve these roles and share them with the new members. Nikki seconds the motion.

Motion approved unanimously.

These roles were shared and accepted.

VI. Next Meeting Date

Kirsten, the new president, proposes to send out a doodle poll for the next meeting date.
Motion approved unanimously.

Eleonora motions to adjourn the meeting. Kirsten seconds the motion.

Motion approved unanimously.

Meeting adjourned at 4.56pm.

Respectfully submitted by:



**Eleonora F. d'Amore
SPH Council Secretary**



COUNCIL / CLUB NAME: SPH Student Council

Date Meeting Was Held: JUNE 27, 2017 Time Meeting Was Held: 4:00pm
Place Meeting Was Held: SPH Lounge

[illegible]

Use additional sheets if necessary, or continue on reverse side

Faculty Student Association of DMC-Student Activity Fund

School of Public Health Student Council (SPH)

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

Proposed Budget

Instructions: Fill in **Column E (Budget)**. SAF income has been pre-filled with prior year actual; FSA Admin Fee is increased by 2.4% (CPI). Insert additional rows where necessary; Any needed new account #s will be inserted when budget is certified. Subtotal and Total fields have calculated formulas - do not alter

Submit for certification by deadline: Fri May 5, 2017. Submit to FSA Office (1) this budget with (2) completed [Budget Agreement Form \(link\)](#) and (3) [signed meeting minutes](#) at which the council approved this budget. FSA will return a certified budget to the Council officers once final fiscal year end (May 31) balances are known.

Account	Description	Current YTD Est @5/31/17	Budget FYE 2018	Comments
Income				
40-42092-013-30001	ACTIVITIES FEES INCOME	\$ 5,540.00	5,540	based on prior yr actual
40-40001-013-30001	ROLLOVER BALANCE	5,643.41	5,529	estimate any current yr funds not spent as of 5/31/17 . If a current year expense will be paid after 5/31/17, be sure to add an expense row for it.
Total Income		\$ 11,183.41	11,069	<i>Formula Cell- Do not alter</i>
Program Expenses	in Title Alpha sequence			
40-70009-013-30001	ADMINISTRATION FEE	\$ 53.00	54	
40-70044-013-30001	CLUBS	1,850.00	940	
40-70055-013-30001	CONFERENCE SUPPORT	2,000.00	1,800	
40-70097-013-30001	EVENTS	1,583.15	2,000	
40-70135-013-30001	MEETINGS EXPENSES	168.00	400	
40-70174-013-30001	PROGRAMS & PROJECTS	-	5,575	
Total Program Expense		\$ 5,654.15	10,769	<i>Formula Cell- Do not alter</i>
Balance Before Reserves		5,529.26	300	<i>Formula Cell- Do not alter</i>
Reserves:				
40-30008-013-30001	RESERVE FUND	-	300	
Total Reserves		\$ -	300	<i>Formula Cell- Do not alter</i>
Total Expenses + Reserves		\$ 5,654.15	11,069	<i>Formula Cell- Do not alter</i>
Total Net Income less Expenses + Reserves		\$ 5,529.26	-	<i>Formula Cell- Do not alter</i>
*SUNY Reserve Guidelines >5% and <100% of prior year actual expenses				