### Faculty Student Association of DMC-Student Activity Fund

# Residence Hall Council (RHC) FY 2019 = June 1, 2018 through May 31, 2019

#### **FY 2019 CERTIFIED BUDGET**

red ink = changes made in Certification

	red ink = chai	nges n	nade in Cer	tification		
A	D	@	or FY 2018 25/31/18	Submitted Budget	Certified Budget	
Account	Description		Actual	FYE 2019	2019	Comments
Income						
40-42092-009-30001	ACTIVITY FEES INCOME BALANCE	\$	4,430	4,470	4,430	based on actual prior yr
40-49001-009-30001	ROLLOVER BALANCE		3,023	1,000	2,299	Actual FY 2018 funds not spent as of 5/31/18.
Total Income		\$	7,453	5,470	6,729	Formula Cell- Do not alter
Program Expenses						
40-70009-009-30001	ADMINISTRATION FEE	\$	242.00	236	242	2.4% CPI Increase
40-71000-009-30001	FLOOR ALLOTMENTS		696	1,207	1,207	
40-70135-009-30001	MEETINGS		2,658	1,850	1,850	
40-70173-009-30001	PROGRAMS & PROJECTS		1,559	900	2,789	Net Result of all other revisions placed here
Total Program Expense		\$	5,155	4,193	6,088	Formula Cell- Do not alter
Balance Before Reserves			2,299	1,277	641	Formula Cell- Do not alter
Reserves:						
40-30008-009-30001	RESERVE FUND		-	641	641	=28% of prior yr actual expenses
Total Reserves		\$	-	641	641	Formula Cell- Do not alter
Total Expenses + Reserves	<u> </u> 	\$	5,155	4,834	6,729	Formula Cell- Do not alter
Total Net Income less Expe	enses + Reserves	\$	2,299	636	(0)	Formula Cell- Do not alter
*SUNY Reserve Guidelines	s >5% and <100% of prior year actual e	expens	ses			

### See accompanying following pages:

- 1. Budget certification cover letter,
- 2. Budget Authorized Signatures and Agreement,
- 3. Meeting Minutes at which Council approved the submitted budget



August 29, 2018

TO: Dylan Ofri, President

Residence Hall Council (RHC) via eMail and posted on FSA website (link)

Richard J. Bentley, President FROM:

Faculty Student Association (FSA)

SUBJECT: RHC Budget Certification for Fiscal Year 2019 (June 1, 2018 to May 31, 2019).

Attached is a copy of RHC's certified budget for Student Activity Fees (SAF) for the fiscal year 2019 that began June 1, 2018 pursuant to the budget that the RHC approved on 5/9/18. 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 RHC's actual year end unused funds at 5/31/18 was \$2,299. RHC must make efforts to increase its program and activities to spend its annual SAF income by May 31st or consider reducing its future fee rate.
- Administration Fee: The FSA fee was increased by CPA of 2.4% from \$236 to \$242.
- Programs & Projects: The net of the above revisions results has been made in this account being adjusted to \$2,789 in order to balance RHC's budget (bottom line net to zero).

#### Please be aware that:

- Payments signature requirements: In accordance with the RHC bylaws, the Treasurer plus one other RHC officer 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.
- Programs & Projects and Reserve Fund require RHC meeting minutes approving use, since purpose is undesignated at this time of certification.
- The Council may submit a revised budget for additional certification at any time during the year.
- 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.

Anthony Condoleo, FSA Interim Controller (w/original documents) CC: Daniel Minnock, bookkeeper Samantha Williams, VP Megan Chang, Treasurer Georgiana Yang, 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: 5/9/18

- 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 18 thru May 31, 20 19

# 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:)	Dylan Ofri	5/31/19	dylan.ofri@downstate.edu	(516) 300-2246
Vice President (if other Title,specify:)	Samantha Williams	5/31/19	samantha.williams-sph@downstate.edu	(516) 761-1721
Secretary(if other Title,specify: Treasurer	Georgiana Yang	5/31/19	georgiana.yang@downstate.edu	718-577-8685
Treasurer (if other Title, specify:) Se ( ) Se ( )	Megan Chang	5/31/19	megan.chang@downstate.edu	(516) 491-0819

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

Signature	×	Signature	× 9 5 0	
Pres Print Name	President Dylan Ofri	Treas Print Name	Treasurer Megan Chang	12
Signature	×	Signature	Mesella	
VP Print Name	Vice President Samantha Williams	Secy Print Name	Secretary Georgiana Yang	$\exists K$

Check One: X OINT 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)

The RHC Constitution Section VII.E requires "all disbursements must be cosigned by the Treasurer plus one other RHC officer (President, Vice-President, or Secretary)".

# 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.

Agreed and Accepted: X	5/9/18
	Applicant's Main Representative Signature Date
	all original signatures, (2) The Budget Worksheet (detail), and (3) the Council's SIGNED MEETING MINUTES showing their 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 on Student Activity Fees Certification Comments:	with the FSA guidelines entitled "Policies and Procedures for Trust and Agency Accounts" and "SUNY Board of Trustee Guideline".
RHC had approved	d and submitted a budget that was not balanced (bottom line was a surplus of \$636). Revisions that
were necessary dur	ing the certification process to acheive a balanced budget are explicated in the accompanying cover
memo dated 8/29/.	18
CERTIFIED BY	SIGNATURE Date of Certification: 8 29 18

RHC Meeting

Date: May 9th, 2018 Time: 6:00pm

Location: 825 Lounge

#### **Minutes**

Minutes recorded by Megan Chang Let residents grab food then start at 6:10 Warm welcome – by Dylan Ofri

#### Introduction E-board:

- President Dylan Ofri
- Vice President Samantha Williams
- Secretary Megan Chang
- Treasurer Georgiana Yang
- Advisor Dr. Justin Alger, Director of Residential Life & Services

Attendance (attached): A quorum of 10% of voting members was achieved with 31 voting members (23 from 825 and 8 from 811)

#### Budget:

- Motion: ratification of the 2018-2019 budget
  - Jonathan Leong motioned and David Choucka seconded. Motion passed unanimously.
  - Budget and attendance sheet attached

#### Old Business:

- Retention process
  - If you have not yet responded to Jennifer Hayes about what your housing plans are for next year,
     PLEASE REACH OUT TO HER ASAP
  - Ryan Pang wanted to know whether he can keep his things in his room, even if he's not staying over the summer
- Laundry project completed!
  - o Free laundry by TeddyMats
  - o If any problems, please come talk to Dr. Alger
- Heating project ongoing replacing heating/hot water system over summer
  - Will be completed by next heating season (October)

#### New Business:

- Dylan's storage/sale of furniture, books
  - When moving out, if have any gently used items that don't want, please donate them to the Residence Halls! Can bring them to front desk.
- Strategic plan development committee we'll be sending out a survey
  - o "What programs have you enjoyed? What programs would you like to see?"
    - Downstate Olympics, Thanksgiving Dinner, Multicultural Fair

Advisor, Dr. Justin Alger, Comments:

N/A

Open Forum: (Open discussion for Residents to make suggestions about what they would like to see the RHC do in the future)

Minutes respectfully submitted by RHC secretary, Megan Chang, on 5/9/18



Quorum: A quorum of at least 10% of all voting members of each building, 811 and 825 (ie: 10% of 811NYA members plus 10% of 825NYA members), must be present to conduct business, The Secretary will determine if the number of voting members present meets the number required for quorum. The total number of voting members residing in each building will be obtained by the Secretary from Residential Life and Services at the beginning of each academic year.

# Residence Hall Council (RHC) MEETING MINUTES ATTENDANCE COVER SHEET

Date Meeting Was Held:_	Wednesday 5/9/18	Time Meeting Was Held:	6pm	
Place Meeting Was Held:	825 Lounge			

Print Name of Member or Guest (can customize to pre-print voting member names)	811 or 825NYA	Voting Member	Signature
	020	(Yes/No)	
JACK BARRAH	825		0/5 755
Jana Kren - Lor	825		(1)
Phin Lee C	82 r		PLATY GO
Angel Jians	825		A
VehaGepka	828		Mela
Ronan Main'	825		Win
Chinelo Debray	825		Clo Doyale
Juse Sinus	225		alan!
Steve Ferrary	825		Sten Les
Isaa Vingun	825		seer Nin
Jia June	825		172
Matthew Moy	825		Here
Jack 7hm	811		
VUDARE HVANC	825		
Michael Chen	825		mr ct
Shirley Hai	825		ender
Michelle Garcia	825		mobile
			4

Use additional sheets if necessary, or continue on reverse side

Mogulley 5/9/18



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Place Meeting Was Held:	825 Lou	nge			

Print Name of Member or Guest (can customize to pre-print voting member names)	811 or 825NYA	Voting Member (Yes/No)	Signature
Megan Chang	825	~	Mugalha
Dilan of.	825	V	000
Georgiana lang	825		
Alex Cire	811		sety
Haoxuan Yvan	8(1	/	Any
Michael Jakerrase	822		m
Kyan Yang	811	/	( Kyafay
Sadahat Chardney	825	1	
David Choueka	825		2
Josis Moother	811	<b></b>	47263
Javier Ciona	311	V	Janes .
Anthony Filipovic	311	V	Alfra
Lauran Vicente	911		
Tasnia Mahmud	825	i/	7 1
			5.

Use additional sheets if necessary, or continue on reverse side

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## **Student Activity Fund**

### RESIDENCE HALL COUNCIL

### Proposed Budget Draft for Fiscal Year 2018 (June 1, 2018 thru May 31, 2019)

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 2018 - 2019	
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	
70199-05-009-360	MEETINGS	\$	1,850.00	
70199-05-009-490	PROGRAMS & PROJECTS	\$	900.00	
Total Program Expense		\$	4,192.72	
Balance Before Reserves		\$	1,277.28	
Reserves:				
70199-05-009-520	RESERVE FUND* (= >5% and <100% prior yr expenses)			
Total Reserves		\$	641.00	
Total Expenses + Reserve	s 	\$	4,833.72	
Total Net Income less Exp	enses + Reserves	\$	636.28	