



INTER CLUB COUNCIL AT UNIVERSITY OF CALIFORNIA, MERCED ALLOCATION OF FUNDS PROPOSAL FINAL APPROVAL DOCUMENT



ICC MEETING DATE: 3/21/17 EVENT DATE: 4/21/17 EVENT NAME: Vitals Workshop Margo Souza Collab CLUB: Global Medical Training TOTAL AMOUNT REQUESTED: \$80.00 TOTAL AMOUNT APPROVED: \$80.00 <u>VOTE</u> YES: 6 NO: 0

Katelyn Filzgened ASUCM PRESIDENT SIGNATURE: DATE:

APPROVED: Automatically Approved 04/04/17

NOT APPROVED:

From:	asucm@ucmerced.edu on behalf of Associated Students of UC Merced
То:	UCM Inter-Club Council
Subject:	Form submission from: ICC Proposal Form
Date:	Saturday, March 11, 2017 4:13:42 PM

Submitted on March 11, 2017 Submitted by anonymous user: [::ffff:98.242.48.141] Submitted values are:

Club Name: Global Medical Training Event Title: Vitals Workshop Margo Souza Collab Event Date: Apr. 21, 2017 Total Amount Requested: \$80.00 Contact Name (First and Last): Angela Van Contact E-Mail: avan@ucmerced.edu Are You a New or Returning Club for the 2016-2017 Academic Year? New What Type of Proposal is This? Small Ticket Start Time of Event: 11:30 am End Time of Event: 1:30 pm Event Location: SSB 120 Description of Event: The event is geared towards providing students hands-on experience on how to take vital signs, such as taking blood pressure, temperature, pulse rate, and respiration rate. There will be volunteer health professionals that will teach attendees and allow them to practice and hone in on their skills on taking vitals. Have You Received an ASUCM Line Item for this Event? No Budget Breakdown: http://asucm.ucmerced.edu/sites/asucm.ucmerced.edu/files/webform/icc_proposal_gmt.docx Are You Bringing in a Speaker: Yes Description of Speaker (Optional):

The results of this submission may be viewed at: http://asucm.ucmerced.edu/node/135/submission/8801



INTER-CLUB COUNCIL AT UNIVERSITY OF CALIFORNIA, MERCED - RCO EVENT FUNDING PROPOSAL -



<u>RCO Name:</u> Global Medical Training (GMT)

Event Title: Vitals Workshop Margo Souza Collab

Total Amount Requested: \$80

<u>FACILITIES</u> – [insert requested amount here]

FACILITY	VENDOR	RENTAL RATE	HOURS O/USE	TOTAL PRICE

<u>HONORARIUM/SPEAKER</u> – [insert requested amount here]

Name(s) of Honorarium/Speaker(s):

Description of Services/Cost:

<u>**PERFORMER</u> – [insert requested amount here]**</u>

Name(s) of Performer(s):

Description of Services/Cost:

<u>ADVERTISING</u> – [insert requested amount here]

ITEM	VENDOR	UNIT PRICE (\$x.xx)	# O/ UNITS	TOTAL	
					SUBTOTAL
					TAX
					GRAND TOTAL

<u>FOOD/DRINKS</u> – [insert requested amount here]

				\$79.9 7	SUB
				470.07	
Case of Water Bottles	Savemart	\$5	2	\$10.00	1
Medium Pinwheel	Savemart	19.99	1	\$19.99	
Fresh Baked Variety Cookie Tray	Savemart	19.99	1	\$19.99	
Large Pinwheel	Savemart	29.99	1	\$29.99	
ITEM	VENDOR	UNIT PRICE (\$x.xx)	# O/ UNITS	TOTAL	

\$79.9 7	SUBTOTAL
	TAX (if applicable)
\$79.9 7	GRAND TOTAL

<u>ADDITIONAL SUPPLIES</u> – [insert requested amount here]

ITEM	VENDOR	UNIT PRICE (\$x.xx)	# O/ UNITS	TOTAL	
					SUBTOTAL
					TAX
					GRAND TOTAL

<u>OTHER</u> – [insert requested amount here]

ITEM	VENDOR	UNIT PRICE (\$x.xx)	# O/ UNITS	TOTAL	
					SUBTOTAL
					TAX
					GRAND TOTAL