

Policy & Procedures Update Fundraising, Cash Handling & Requisitions

## Today's Agenda

- Fundraising approval process & guidelines
- Cash Handling
- Requisitions
  - PO, Vendor payments, reimbursement
- Transition to Colleague

Links to forms and copies of documents are found in the chat and will be posted at www.yccdfoundation.org.

# Fundraising Request & Approval Process

Submit 60 days IN ADVANCE

**Event Name & Purpose** 

**Date & Location** 

**Expected attendance & fee** 

**Outside Vendors?** 

**Expected Net revenue** 

Person in charge & contact info

Foundation Fund & F-Code

**Need any online forms?** 

**APPROVALS** 



Fundraising Event / Activity Request Form

Request form, with appropriate approvals, must be submitted to the Foundation at least 60 days prior to the event or start of solicitations

prior to the event or start of solicitations	
General Information	
Form Completed By:	Date:
Phone:	Email:
Event/Activity Name:	
Purpose of Event/Activity:	
Date(s) of Event/Activity:	<u>OR</u> fromto
Proposed location of Event/Activity:	
Estimated Attendance:	Attendance Fee:
Are any outside vendors to be used to solici	t funds? If so, please list:
Expected Net Revenue:	
Person in charge of Event and email:	
How will the event be promoted:	
Foundation Fund being supported:	F-Code:
Will you need the Foundation to create an <b>e</b> page: ☐ Yes ☐ No	vent/activity registration and/or donation giving
<u>Approvals</u>	
Immediate Supervisor (Print Name & Title)	Signature & Date
College President or Designee (Print Name & Title)	Signature & Date
Foundation Office Use Only Date Received: Accepted By: Comments:	Date of Response:

## Fundraising Process Guidelines

- I. Promotional Materials: Submit for review prior to publishing
- 2. Legal Name: Yuba Community College District Foundation with Tax ID number 23-7222541. Don't use tax ID without legal name.
- **3.Do not refer to a program/team as a "Foundation"**; refer to it as a "Fund" of the YCCD Foundation. For example: Funds will support Yuba College DSPS Fund of the YCCD Foundation.
- **4. Facility**: On-campus use YCCD facility form and process; Off-campus, have agreements made out to Foundation and forward to YCCDF for signature. If deposits are required, submit a Requisition. Use the Foundation's address on all documents. **Do not use your home or campus address**

## Fundraising Process Guidelines

- **5. Food**: Outside vendor, provide agreement, made out to the Foundation. Deposit? Submit Requisition
- **6.Alcohol**: BP 3560 and FBP 5.01; approval by Chancellor; ABC Permit
- **7. Registration**: Online, mail, on-site? If online, coordinate online page with Foundation. If using a third-party, forward agreement to the Foundation for review and signature.
- 8. Thank Yous: All participants. (IRS donors of \$250+; event with a cost of \$75+) Within one week submit participant list, amount paid, and address or email for required thank you.
- **9. Raffles:** Use Foundation's State Registration number RF0017149. **No 50/50**. Keep income separate and report to Foundation office.

## FBP 12.02: Cash Handling

- approved by Board of Directors - February 2025

**BACKGROUND:** Any YCCD dept., athletic team, student service, or program that handle cash must be aware of and committed to controls to prevent mishandling and safeguard against loss.

- Internal controls protect YCCD employees.
- \* This policy is intended prevent and/or detect cash loss. Managers that handle Foundation cash are responsible for maintaining a proper environment of internal controls.

**POLICY STATEMENT:** "to establish immediate control over all cash and checks received and to ensure the prompt deposit to the Foundation's bank account. Cash receipts shall be protected from misappropriation." "Only YCCD employees, and approved volunteers are permitted to handle cash as defined under this policy and in accordance with Foundation AP I 2.02.

\* This policy applies to all personnel, and volunteers who handle Foundation cash - receiving, processing or depositing, and who retain, or store cash prior to its deposit.

## FAP 12.02: Cash Handling

**ADMINISTRATION:** Director is responsible for policy. Policy is guided by GAAP, GASB, YCCD policies and CCCSC office.

**RECEIPT OF PAYMENTS BY MAIL:** Payments received by mail, should be processed through the Foundation. Any department that receives a payment should forward it to the Foundation Office.

**SAFEGUARDING & STORING CASH:** Cash must never be left unattended; access must be restricted to designated individuals and secured in a locked environment to restrict access.

**DEPOSITING CASH:** Cash collected from events shall be forwarded to the Foundation with a dual-signed **Cash Handling Form**; or deposit with the College Cashier. For deposits with Cashier a Cash Handling Form and copy of the Cashier's receipt must be forwarded to the Foundation.

CHECKS: All checks should be made payable to "Yuba Community College District Foundation" (YCCD Foundation). Notation of the purpose made at the bottom.

## CASH HANDLING FORM

Complete at end of event.

Two people count cash And sign.

Return to Foundation or cashier with the cash.



#### **Cash Handling Form**

Person Completing the Form: Department:     Total Cash: \$ Total Checks: \$     Currency			0			
Department:   Department:   Total Cash: \$   Total Checks: \$	Foundation Fund and F-Code:		Date of Activity / Event:			
Total Cash: \$			College:			
Currency   No. of Bills   Total   Cumul     \$100						
\$100			Total Checks: \$			
\$50 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Currency	No. of Bills	Total	Cumulative Total		
\$20	\$100		\$	\$		
\$10	\$50		\$	\$		
\$5 \$ \$ \$ \$  Coin \$ \$ \$  TOTAL \$ \$  Opening Balance \$ \$  Checks  No. of Checks: Total Value of Checks: \$  Please attach copies of all checks.  Counted by: Date:  Print Name / Signature  Cashier Verified: Date:	\$20		\$	\$		
\$ S S S S S S S S S S S S S S S S S S S	\$10		\$	\$		
Coin \$ \$ \$  TOTAL \$ \$  Opening Balance \$ \$  Checks  No. of Checks: Total Value of Checks: \$  Please attach copies of all checks.  Counted by: Date:  Print Name / Signature  Counted by: Date:  Cashier Verified: Date:	\$5		\$	\$		
TOTAL \$  Opening Balance \$  Checks  No. of Checks: Total Value of Checks: \$  Please attach copies of all checks.  Counted by: Date:  Print Name / Signature  Counted by: Date:  Print Name / Signature  Cashier Verified: Date:	\$1		\$	\$		
Opening Balance \$  Checks  No. of Checks: Total Value of Checks: \$  Please attach copies of all checks.  Counted by: Date:  Print Name / Signature  Counted by: Date:  Print Name / Signature  Cashier Verified: Date:	Coin		\$	\$		
Checks  No. of Checks: Total Value of Checks: \$  Please attach copies of all checks.  Counted by: Date:  Print Name / Signature  Counted by: Date:  Print Name / Signature  Cashier Verified: Date:	TOTAL			\$		
Checks  No. of Checks: Total Value of Checks: \$  Please attach copies of all checks.  Counted by: Date:  Print Name / Signature  Counted by: Date:  Print Name / Signature  Cashier Verified: Date:	Opening Balance			\$		
No. of Checks: Total Value of Checks: \$  Please attach copies of all checks.  Counted by: Date:  Counted by: Date:  Print Name / Signature  Cashier Verified: Date:				\$		
Please attach copies of all checks.  Counted by: Print Name / Signature  Counted by: Date:  Print Name / Signature  Cashier Verified: Date:	<u>Checks</u>					
Counted by: Print Name / Signature	No. of Checks:		Total Value of Che	cks: \$		
Print Name	Please attach copies o	f all checks.				
Counted by: Date:	Counted by:			Date:		
Print Name / Signature  Cashier Verified: Date:		Print Nan	ne / Signature			
Cashier Verified: Date:	Counted by:	Print Nan	ne / Signature	Date:		
	Cashier Verified:			Date:		
	-		ne / Signature			

## FAP 12.02: Cash Handling

**RETURNED CHECKS:** Returned Checks may result in fees. Individuals whose checks are returned will be assessed a fee per YCCD policy. When checks are returned the Fund that accepted the check will be responsible for fees.

**EVENT & ACTIVITY CASH:** Receipts must be provided and copies submitted with deposits. **Exceptions:** entry at the door, snack bars, and script tickets for drinks, door prizes or raffles.

Cash must be deposited, by close of business the day following event, or Monday following a weekend event. The Foundation will record each transaction. All cash must be counted under dual custody using a Cash Handling Form with two signatures.

**USING CASH:** All Cash must be deposited. It may not be used for purchases, refunds, to pay expenses. Under no circumstances may expenses be paid from cash.

**PETTY CASH FUNDS:** Not permitted.

## FAP 12.02: Cash Handling

**ELECTRONIC FUND TRANSFER:** The Foundation will accept payment by EFT. (EFTs will be reconciled monthly.)

**REQUISITIONS:** Payment to vendors, or reimbursements must be **approved in advance** and require a Requisition Form. The Foundation will not make payment without approvals. Payment will be made within ten (10) business days of receipt.

**DISCIPLINARY ACTION:** Failure of an employee to follow internal controls is considered negligence and could be considered misconduct. Any disciplinary actions will be in accordance with YCCD policies and collective bargaining agreements.

EXCEPTIONS: It is understood that situations within departments may require exceptions to this policy. Any exceptions must be approved in advance by the President or Foundation E.D. All exceptions must be date specific.

### Requisitions

Approval required BEFORE any purchases made.

P.O., Vendor Payment or Cash Advance?

Attach a copy of the estimate or invoice

For meal/travel use YCCD per diem guidelines. For multiple people, provide a roster

Fund name and F-code. Codes at www.yccdfoundation.org.

Indicate where PO or payment is to be sent and date needed.

Describe the proposed purchase or enter "see attached"

Print name, sign and date; forward to College President for approval.



3301 E Onstott Road • Yuba City, CA 95991 (530) 749-3868 • foundation@yccd.edu

#### **Foundation Requisition Purchase Form**

The Requisition Purchase Form must be completed and approved prior to placing an order, making a purchase, or receiving a cash advance. When ordering use the Foundation's address at the top of this form for billing purposes, and your campus address for delivery. Do not use a personal address. For purchases made without a preapproved Requisition Purchase Form, reimbursement or payment can not be guaranteed. Once the Requisition Purchase Form is approved a Foundation Purchase Order will be issued, a Cash Advance will be made, or a Foundation Check will be provided to a vendor so the purchase can be completed. A copy of the vendor's estimate or invoice must be attached to this form.

1. REQUESTED BY:	Trayment for vendor	Ousii / tuvuii		
Name:	College/Dept:			
Date: Phone:	Email:	-11.	<u> </u>	
2. VENDOR INFORMATION:				
Name:	Phone:	Ema	il:	
Address:	City	8/ /		
Street	City	State		Zip
3. FOUNDATION FUND INFORMATION:				
		Fund Account No.: F-		
Type of expense:  Invoice payment	Budget transfer	☐ Pu	rchase	
6. DESCRIPTION OF PURCHASE		QT	Y UNIT PRICE	TOTAL
6. DESCRIPTION OF PURCHASE		QT	Y UNIT PRICE	TOTAL
6. DESCRIPTION OF PURCHASE		QT	Y UNIT PRICE	TOTAL
	voice) before routing to Founda		Y UNIT PRICE	E TOTAL
6. DESCRIPTION OF PURCHASE  Attach supporting documents (estimate, receipt or in	voice) before routing to Founda		Y UNIT PRICE	TOTAL
	voice) before routing to Founda			TOTAL
Attach supporting documents (estimate, receipt or in 7. PRINTED NAMES & SIGNATURES:			Sub-total Sub-total	TOTAL
Attach supporting documents (estimate, receipt or in	voice) before routing to Founda		Sub-total Sales tax	TOTAL

## Travel & Meal Money

- YCCD Administrative Procedure 4300
- Must be approved and submitted to Foundation IN ADVANCE
- Meals
  - Breakfast \$10; Lunch \$15; Dinner \$30
  - Provide list of participants and purpose

## Transition to Colleague

- YCCD Foundation has started the process of moving Foundation Accounting/Finance into Colleague. In Colleague, Foundation Funds will be accounted for separately from District Funds.
- What this means
  - Fund Managers will have the ability to track fund balances in Colleague.
    - Donations/Expenses that are related to account(s) will be available for tracking.
  - Requisition Processing and Issuance of Purchase Orders will mirror District process
    - Purchase orders will be required for all expenses prior to incurring expenses
    - Fiscal and Foundation will work together on Foundation approving Requisitions and Fiscal taking over Purchase Order/Check Processing.
- Project Timeline
  - **Currently:** The Foundation is working with Ferrelli to build out the Foundation fund into Colleague and setting up GL accounts.
  - Next Steps: Setting up Purchasing Structure.
  - Completion by ?????????