

Los Angeles County Commission for Women (LACCW) Awards (Trust) Fund Budget Criteria and Spending Plan

1. The fiscal year, for purposes of the Los Angeles County Commission for Women (LACCW), begins July 1st. The LACCW budget is adopted at a meeting in July or as soon in the fiscal year as the financials of the previous year are available to the Commission.
2. The TOTAL TRUST FUND BALANCE is comprised of unspent monies including President's Fund from the previous fiscal year, proceeds from the prior year awards luncheon, interest income, income from other functions and any undesignated donations and honoraria.
3. ~~An amount not to exceed \$2,500 of the total budget shall be allocated as seed monies for such expenses as deposits, printing costs, and publicity for the Woman of the Year Awards Luncheon. The amount of the seed monies expended shall be considered an expense of the Woman of the Year event.~~ *An amount of \$2,500 shall be allocated to the Commission's Designated Funds each fiscal year as seed money for the annual Women of the Year Awards Luncheon event(s) to use for deposits, printing costs, and publicity.* The remainder of the unspent seed monies shall be returned to the TOTAL TRUST FUND BALANCE.

~~An amount of \$2,500 shall be allocated annually for donations to domestic violence shelters and/or other valid domestic violence service providers from each of the five Supervisorial districts (\$500 per district) as determined by the Commission before distribution.~~

4. A budget comprised of yearly expenses of the Commission LACCW shall be allocated annually and identified as Designated Funds. Such items ~~as annual publications, Association meetings, dues, conferences, and travel expenditures, tickets to events determined to be attended by commissioners on an annual basis, refreshments for the installation of officers, and expenses of the annual retreat, Town Hall Meeting, and June and December meetings with Community groups and organizations~~ *may include: NACW & ACCW Association meetings and travel expenditures, conferences, dues, media/promotional expenses, printing publications and reports, district town hall meetings, June yearly meeting with community groups and organizations and the Women of the Year Luncheon expenses* shall be submitted to the commission for consideration at the time of the adoption of the budget.
5. ~~All undesignated funds shall be considered to be as follows:~~

An amount not to exceed \$5,000 shall be allocated as the President's Fund and shall be utilized by her or ~~a designated Commissioner~~ *her designee* representing the LACCW at Los Angeles County community functions and /or state and national association meetings. *Such expenditures shall be approved by the commission at a regularly*

scheduled meeting.

6. The remaining balance of the undesignated funds shall be allocated to the ~~full Commission~~ LACCW and called the Flexible Spending ~~Account~~ Funds. At the beginning of the fiscal year, the ~~full Commission~~ LACCW budget Flexible Spending Funds will be divided equally by ~~a 12-month spending cycle~~ Five (5) supervisory districts. ~~Any unused Funds from each spending cycle district that are not spent shall roll over to the next month total be returned remain in to the Total Trust Fund Balance.~~ The LACCW Commission, by a majority vote, shall determine all expenditures of the Flexible Spending ~~Account~~ Funds.

- ❖ The President will endeavor to assure *the* LACCW representation ~~funding allocation is~~ as equally as possible applied in all supervisorial districts.
 - ❖ ~~There will be no Monies will~~ shall not be appropriated for political fundraising or political activities events of any type kind. Political fundraising includes all events in which proceeds go to any individual politician or any political party.
 - ❖ The ~~Commission~~ LACCW may actively support or oppose a ballot measure in accord with any position taken by ~~once the Board of Supervisors. has taken a position on the ballot measure. Obviously, the LACCW position must be in accordance with the Board's position.~~
 - ❖ All expenditures shall be assessed and ~~judged~~ approved according to the criteria and as to their worthiness in furthering the mission and the annual goals of the LACCW ~~Commission for Women.~~
 - ❖ Donations shall not be made to an individual.
 - ❖ Organizations outside of Los Angeles County shall not be considered for financial support.
7. All requests for funds allow the LACCW 30 days to make a determination. The *organization or commissioner* requesting funds for any organization must fill out the LACCW's *Donation Request* form which requires the following information before consideration of a request. *In addition the Action Plan for the use of the funds must accompany the Donation Request form.*

- ❖ Name of organization
- ❖ Mission of organization - purpose and goals
- ❖ Organization identification - non-profit status / tax ID number
- ❖ History of organization
- ❖ Time of existence
- ❖ Listing of Board of Directors
- ❖ Location of Organization
- ❖ Constituency it serves within Los Angeles County.
- ❖ Purpose and goals of the event for which support is being requested
- ❖ Commissioners or requesting organizations shall be specific in their request regarding the kind type of support being requested,

i.e. monetary contributions, use of Commission's name or logo, access to mailing resources, and staff assistance.

- ❖ Information whether the organization ~~ever~~ **has previously** received a donation from the LACCW.
- ❖ Recipient's name, time of the event, and amount of donation.

Commissioners must submit all requested **documentation materials** to the commission staff 30 days prior to the next scheduled Commission meeting for consideration of any funding by the Commission.

8. The LACCW's *Donation Recipient Response* form **must shall** be attached with a donation check. The commissioner requesting funds for ~~the work of~~ an organization or an organization requesting funds ~~organization is requested~~ **required** to fill out the form that **includes requires** the following information, ~~and The organization is also requested to~~ return the form within 60 days of receipt of the funds, ~~or The funded organization that has received funds from LACCW~~ may present their reports at one of the Commission's meetings upon request.
 - ❖ Name of organization
 - ❖ Event information
 - ❖ Amount of donation received
 - ❖ How the donation was used
 - ❖ How the donation assisted women in the Los Angeles County
 - ❖ How the donation contributed to the success of the event
9. The LACCW's *Rejection of Donation* form shall be sent out to ~~the~~ **an** organization ~~which fails to receive funds by vote of~~ the Commission. ~~.once voted upon~~
10. The Consolidated Trust Fund Expenditures and Balance Report shall be submitted to the LACCW on a quarterly basis. ~~The name of the Commissioner and/or organization requesting funds will be furnished in the report.~~
11. ~~Flowers and other~~ Expressions of sympathy up to \$100 may be ~~donated to a County approved not-for-profit entity in memory of~~ sent to a Commissioner or Commission staff ~~member~~ upon his or her ~~own hospitalization or upon the death of a family member as defined in the Los Angeles County Code. Specifically, the death of a father, mother, stepfather, stepmother, father-in-law, mother-in-law, brother, sister, husband, wife, child, stepchild, grandfather, grandmother, grandchild or domestic partner would qualify for this amount. This policy also provides condolences up to \$100 for family members or domestic partners in the event of the death of a commissioner or commission staff.~~

**UNUSUAL CIRCUMSTANCES MAY CAUSE EXCEPTIONS TO BE MADE
SUCH AS; TIME CONSTRAINTS, LACK OF A QUORUM, OR MEETING
CANCELLATION.**

Effective: ~~02/28/2008~~ 02/14/11
Drafted by RD



Los Angeles County Commission for Women



APPLICATION FOR DONATION

All requests for funds must be received 30 days prior to the next scheduled LACCW meeting (see attached meeting schedule). The requesting organization must provide the following information before consideration of a request.

Name of Organization

Address

City, State

Zip

Telephone Number

FAX Number

Website Address

Contact Person

Title

Cell (optional)

E-mail

Organizational Identification

(Non-profit status/tax I.D. number): _____

Mission of Organization (Purpose and Goals):

History of Organization and Time of Existence:

Los Angeles County Commission for Women
APPLICATION FOR DONATION
(Page 2)

Listing of Board of Directors:

Event Information – Date/Time, Location and Target Number of Attendees:

Date/Time: _____

Location: _____

Target Number of Attendees: _____

Event Information – Purpose and Goals:

* Event publicity materials may be included (optional)

In what Los Angeles County District will this event take place?
(Please enter the district number)

In what Los Angeles County District does your organization belong to?
(Please enter the district number)

Constituency served within Los Angeles County (age, gender, ethnicity, income level, geographical region, etc.):

Specific Request (i.e. monetary contribution, use of LACCW's name or logo, access to mailing resources, and/or staff assistance)

Los Angeles County Commission for Women
APPLICATION FOR DONATION
(Page 3)

How will this donation benefit the organization?

Have you received donation funds from LACCW before? If yes, please specify the event, time, and amount of donation. If more than once, please specify the two most recent occasions.

No (____), this is the first time we received donation from LACCW.

Yes (____), we have received donation(s) from LACCW previously.

First Occasion: Name of the Event _____ Date of the Event: _____ Donation Amount: _____
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Second Occasion: Name of the Event _____ Date of the Event: _____ Donation Amount: _____

Please send this form to:
Los Angeles County Commission for Women
500 W. Temple Street, Rm. B-50, Los Angeles, CA 90012
PH: 213-974-1455
FAX: 213-633-5102
www.laccw@bos.lacounty.gov

For CW Office Only: _____
Date Received Received By Date of Review Reviewed By
(Yes____) (No____)
Place on Agenda: _____
Reason for not placing on agenda

Los Angeles County Commission for Women
APPLICATION FOR DONATION
(Page 4)

_____	(Yes___) (No___)	(Yes___) (No___)	_____
Date of CW Board Meeting	Action Taken	Notification Sent	Amount Approved

Reason for Rejection
