

## COUNTY OF FRESNO DEPARTMENT CONTRIBUTION APPROVAL FORM

Event/Sponsorship/Contribution Date:	Event/Sponsor	rship/Contribution Name:	Dollar amount proposed to be contributed:		
09/12/2025	25 <sup>th</sup> Annual C	ASA Event	\$ <u>2,500</u>		
	<u> </u>				
Are the funds going to an entity? If so, please list the names of directors and officers of entity:					
CASA (Court Appointed Special Advocates) (Please see attached for list of directors.)					
Source of funds used and statement that such funds are eligible for such proposed financial expenditure:					
Federal and State allocations for promoting/outreach activities that support State and Federal funded programs.					
Number of staff attending:	Is there a reg	uired fee to attend?	s No		
10	If Yes, what does the Department receive for the fee? Dinner and a table				
10		o, mat account bepartment.	<u>Difficient data di data</u>		
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Benefit to the Department or County for Participating?  Continued partnership and strengthen relationships with volunteer advocates to improve system and individual case gaps.					
Continued partnership and strengthen	Telationships w	with volunteer advocates to in	iprove system and mulvidual case gaps.		
Is there a public purpose for the propos	ed financial exp	enditure?			
This event is part of CASA's fundraising	g efforts to cont	tinue their work in the commu	unity.		
How is the proposed financial expenditure connected to the County?					
As DSS and CASA work closely together, CASA is considerd a valued partner of the County.					
Is this a Sponsorship?		Has the Department done this in the past?			
☐ Yes      No		🛛 Yes 🗌 No			
List of materials to be passed out?					
None.					
Is this a required activity?					
If so, by which entity?					
If participation is denied, is funding or program jeopardized? Explain:					
Collaboration is hindered as these are judge appointed advocates to support kids going through the Child Welfare System.					

Additional justificat	ion for this request:				
Department head o	r designee name:				
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Department contact for questions:					
County Council coun					
County Counsel app	oroval as to legal form:		<b>-</b>		
	hkruthers 9/30/2025 4:15:44 PM  County Counsel signature and date	[⊠ Sign] Double click!			
CAO Review:					
	afloresbecker 10/6/2025 9:41:57 AM  CAO signature and date	[ Sign] Double click!			