

F-11



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Kevin Feely Date: 11/21/18

Club Name: Boys Basketball

Acct. No.: 3230 Acct. Balance to Date: \$400

Type of Fund Raiser: Candy Sales

Purpose of Fund Raiser: For Team Meals / Fall League

Start Date of Project: 12/18 Completion Date of Project: 2/28

Date of Sale(s): From 7:35 To: 2:35

Sale Area/Location: Big Gym / C123

Sale will be monitored by: Kevin Feely / Charlie Tinas

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: [Signature]

Vendor Business Name: Gertude Hawk

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: [Signature] Date: \_\_\_\_\_

### Vice Principal Signature

Signature: [Signature] Date: \_\_\_\_\_

### School Treasure Signature

Signature: [Signature] Date: \_\_\_\_\_

### Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Kevin Feely Date: 11/19/18

Club Name: Boys Basketball

Acct. No.: 3230 Acct. Balance to Date: \$400

Type of Fund Raiser: Clothing Sales

Purpose of Fund Raiser: Sell clothes w/ Union Basketball  
on them for team meals and protein bars

Start Date of Project: 12/15/18 Completion Date of Project: 12/22/18

Date of Sale(s): From 12/15/18 To: 12/22/18

Sale Area/Location: Big Gym or C123

Sale will be monitored by: Kevin Feely / Charlee Titus

### \*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: A & B Promotions / James Boler

Vendor Business Name: A + B Promotion (908) 499-8187

Vendor Address: \_\_\_\_\_  
City: Cranford, State & Zip code: NJ 07016

Unit Cost of Product/Service: \$ \_\_\_\_\_  
Proposal Sale Price: \$ \_\_\_\_\_  
Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_  
Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: [Signature] Date: 11/20/18

### Vice Principal Signature

Signature: [Signature] Date: \_\_\_\_\_

### School Treasure Signature

Signature: [Signature] Date: 11/20/18

### Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information	
Faculty Member (s): <u>Kevin Feely</u>	Date: <u>11/13/18</u>
Club Name: <u>Boys Basketball</u>	
Acct. No.: <u>3230</u>	Acct. Balance to Date: <u>\$480</u>

.....

Type of Fund Raiser: Selling Clothing Apparel

Purpose of Fund Raiser: To raise money for spring league + Senior night

.....

Start Date of Project: 12/19      Completion Date of Project: 12/23

Date of Sale(s): From 12/19 - ~~12/20~~      To: 12/23

Sale Area/Location: Big Gym

Sale will be monitored by: Kevin Feely

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

Faculty Advisor Signature	
Signature: <u>[Signature]</u>	Date: <u>11/13/18</u>

Vice Principal Signature	
Signature: <u>[Signature]</u>	Date: <u>11/14/18</u>

School Treasure Signature	
Signature: <u>[Signature]</u>	Date: <u>11/14/18</u>

Placed on BOE Meeting Agenda for:			
Month: _____	Year: _____	Approved:    YES    NO <input type="checkbox"/> <input type="checkbox"/>	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

*Caps*  
*sent 11/12/18*  
*over email*

**Applicant Information**

Faculty Member (s): Lester Lembyk Date: 11/12/18

Club Name: Boys Soccer Club

Acct. No.: 3380 Acct. Balance to Date: 81.00

Type of Fund Raiser: sell - water

Purpose of Fund Raiser: help pay for Boys Soccer Team  
end of year party

Start Date of Project: Dec 19 Completion Date of Project: June 2019

Date of Sale(s): From Dec 19 To: June 2019

Sale Area/Location: Boys office - High School

Sale will be monitored by: Lester Lembyk

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: - purchase items at B S's / Costco

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

**Faculty Advisor Signature**

Signature: [Signature] Date: \_\_\_\_\_

**Vice Principal Signature**

Signature: [Signature] Date: 11/12/18

**School Treasure Signature**

Signature: [Signature] Date: \_\_\_\_\_

**Placed on BOE Meeting Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_





# UNION HIGH SCHOOL STUDENT ACTIVITIES FUND RAISER PROPOSAL

**Applicant Information**

Faculty Member (s): ADAM RAFFAELE Date: 11/19/18

Club Name: UNION HIGH SCHOOL HIKING CLUB

Acct. No.: 2072 Acct. Balance to Date: \_\_\_\_\_

.....  
Type of Fund Raiser: CHOCOLATE BAR SALE

Purpose of Fund Raiser: RAISE FUNDS FOR END OF YEAR TRIP

Start Date of Project: JANUARY 2019 Completion Date of Project: MAY 2019

Date of Sale(s): From JANUARY 2019 To: MAY 2019

Sale Area/Location: ON STUDENT'S PERSON (CARRIERS)

Sale will be monitored by: ADAM RAFFAELE

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: MARTIN GENDRON

Vendor Business Name: FUNDRAISING.COM

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ 4,220

Proposal Sale Price: \$ 1/BAR

Total Cost of all Products Not to Exceed: \$ 4,220

Minimum Total Profit Expected: \$ 4,180

**Faculty Advisor Signature**

Signature: [Signature] Date: 11/19/18

**Vice Principal Signature**

Signature: [Signature] Date: 11-19-18

**School Treasure Signature**

Signature: [Signature] Date: 11-20-18

**Placed on BOE Meeting Agenda for:**

Month: Dec Year: 2018 Approved: YES  NO  By: \_\_\_\_\_

11/19/2018

Township of Union Schools Mail - Fundraising

- Acknowledge that you are 18 years of age or older, as Fundraising.com does not sell to minors without the written consent of a parent or guardian.

I have read and agree to the above.

For more information, please do not hesitate to contact me. Thank you for choosing Fundraising.com

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Marty Gendron

Fundraising Adviser since 2001

Tel: 1-800-443-5353 ext. 3900075

**FUNDRAISING**

**From:** Adam Raffaele <araffaele@twpunionschools.org>

**Sent:** November 19, 2018 1:18 PM

[Quoted text hidden]

[Quoted text hidden]



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): Wendy McNair Date: 11/28/18

Club Name: Union High School Girls Basketball

Acct. No.: 3320 Acct. Balance to Date: \$ 11.13

Type of Fund Raiser: Free Throw Fundraiser

Purpose of Fund Raiser: Raise funds for the girls basketball program

Start Date of Project: 1/21/19 Completion Date of Project: 2/8/19

Date of Sale(s): From \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: Main gym

Sale will be monitored by: Wendy McNair

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: Wendy McNair

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

**Faculty Advisor Signature**

Signature: Wendy McNair Date: \_\_\_\_\_

**Vice Principal Signature**

Signature: [Signature] Date: \_\_\_\_\_

**School Treasure Signature**

Signature: [Signature] Date: \_\_\_\_\_

**Placed on BOE Meeting Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): Linda Tonta Date: 11/30/18

Club Name: Athletic Trained Act

Acct. No.: 3220 Acct. Balance to Date: \$ 488.68

Type of Fund Raiser: W/candy sales after games during winter season

Purpose of Fund Raiser: Scholarships for helpers-athletic events during Fall/winter season.

Start Date of Project: Dec 19, 2018 Completion Date of Project: Thru end of season March 15.  
 Date of Sale(s): From 11 To: 11  
 Sale Area/Location: Big gym  
 Sale will be monitored by: L. Tonta, L. Williams

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_  
 Proposal Sale Price: \$ \_\_\_\_\_  
 Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_  
 Minimum Total Profit Expected: \$ \_\_\_\_\_

**Faculty Advisor Signature**

Signature: Linda Tonta Date: 11/30/18

**Vice Principal Signature**

Signature: Linda Tonta Date: 11/30/18

**School Treasure Signature**

Signature: [Signature] Date: 11/30/18

**Placed on BOE Meeting Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): MARIANNE DECZYNSKI Date: 11/26/18

Club Name: Drama

Acct. No.: 41 Acct. Balance to Date: \$8550.41

Type of Fund Raiser: Candy / Soda Sale

Purpose of Fund Raiser: To raise money for Drama Club.

Start Date of Project: 12/1/19 Completion Date of Project: 6/17/19

Date of Sale(s): From # ongoing To: \_\_\_\_\_

Sale Area/Location: KMS

Sale will be monitored by: MARIANNE DECZYNSKI

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: Costco

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ VARIOUS

Proposal Sale Price: \$ 1.00 per item

Total Cost of all Products Not to Exceed: \$ 1000

Minimum Total Profit Expected: \$ 500

**Faculty Advisor Signature**

Signature: Marianne Deczynski Date: 11/26/18

**Vice Principal Signature**

Signature: [Signature] Date: 11/27/18

**School Treasure Signature**

Signature: Alyssa Melillo Date: 11/27/18

**Placed on BOE Meeting Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_

Township of Union Board of Education  
**STUDENT ACTIVITY ACCOUNT - REIMBURSEMENT REQUEST**

EVERY EFFORT TO PAY WITH A CHECK FROM THE STUDENT ACTIVITY ACCOUNT DIRECTLY TO THE VENDOR MUST BE MADE BEFORE REIMBURSEMENT WILL BE CONSIDERED.

*Student Activity Reimbursement requests must be pre-approved by the principal and superintendent prior to the purchase. If this Student Activity Reimbursement Request form is not submitted prior to purchase the reimbursement will NOT be processed.*

Date: 11/26/18  
 Employee Name: MARIANNE DECZYNSKI  
 Acct Name: DRAMA  
 Acct. No.: 41

Reason for Reimbursement Request:  
To purchase items for candy/soda sale for Drama Club activities

Estimate of Itemized Expenses

DESCRIPTION	COST
<i>Purchases of candy/soda</i>	\$ 1000.00
<i>for lobby sale to benefit Drama Club students</i>	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$

TOTAL AMOUNT OF REIMBURSEMENT: \$ 1000.00 NOT TO EXCEED

Note: Sales tax is not eligible for reimbursement.

A COPY OF THIS APPROVAL MUST ACCOMPANY YOUR OFFICIAL REQUEST FOR REIMBURSEMENT, ALONG WITH CONFIRMING RECEIPTS.

IF TOTAL AMOUNT EXCEEDS \$999 BOARD APPROVAL IS REQUIRED

Marianne Deczynski 11/26/18  
 Employee Signature Date

FOR OFFICIAL USE ONLY:			
Approved	More Info. Needed	Not Approved	Date
Principal Signature <u>[Signature]</u>			Date <u>11/27/18</u>
Approved	More Info. Needed	Not Approved	Date
Superintendent or Designee Signature			Date

# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): Christina Neas / Alyssa Melillo Date: 1/27/18

Club Name: Student Council

Acct. No.: 19 Acct. Balance to Date: \$5,074.24

Type of Fund Raiser: Smartys Raffle

Purpose of Fund Raiser: Raise money for 8th grade trip. Students will guess how many smartys are in a large glass jar.

Start Date of Project: 1/14/18 Completion Date of Project: 1/18/19

Date of Sale(s): From 1/14/19 To: 1/18/19

Sale Area/Location: Cafeteria

Sale will be monitored by: Christina Neas / Alyssa Melillo

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: N/A Candy donated by

Vendor Business Name: N/A Thomas Melillo

Vendor Address: N/A

City: N/A State & Zip code: N/A

Unit Cost of Product/Service: \$ Donated

Proposal Sale Price: \$ 1 per guess

Total Cost of all Products Not to Exceed: \$ N/A

Minimum Total Profit Expected: \$ 50

**Faculty Advisor Signature**

Signature: [Signature] Date: \_\_\_\_\_

**Principal Signature**

Signature: [Signature] Date: 1/27/18

**School Treasure Signature**

Signature: Alyssa Melillo Date: 1/27/18

**Placed on BOE Meeting Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved:  YES  NO By: \_\_\_\_\_

# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): Christina Neas / Alyssa Melillo Date: 11/27/18

Club Name: Student Council

Acct. No.: 19 Acct. Balance to Date: \$5,074.24

Type of Fund Raiser: Little Caesars Pizza Kits

Purpose of Fund Raiser: To raise money for the 8th grade trip.

Start Date of Project: 1/4/19 Completion Date of Project: 1/17/19

Date of Sale(s): From 1/4/19 To: 1/17/19

Sale Area/Location: KMS

Sale will be monitored by: Christina Neas / Alyssa Melillo

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: Zack Mullinax

Vendor Business Name: Little Caesars Pizza Kits

Vendor Address: 2211 Woodward Avenue  
City: Detroit State & Zip code: MI 48201-3400

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$20-40 / per kit

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$300

**Faculty Advisor Signature**

Signature: [Signature] Date: \_\_\_\_\_

**Principal Signature**

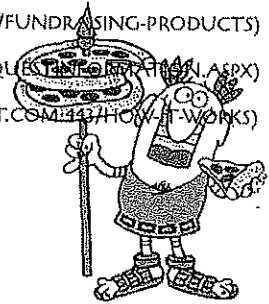
Signature: [Signature] Date: 11/27/18

**School Treasure Signature**

Signature: Alyssa Melillo Date: 11/27/18

**Placed on BOE Meeting/Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# Getting Started

[HOW IT WORKS \(/HOW-IT-WORKS\)](#)

[GETTING STARTED \(/GETTING-STARTED\)](#)

[TIPS & TOOLS \(/FUNDRAISING-TIPS-AND-TOOLS\)](#)

[VIDEOS \(/VIDEOS.ASPX\)](#)

[FAQS \(/FAQS\)](#)

[PROFIT \(/FUNDRAISING-PROFIT\)](#)

[START A FUNDRAISER \(/START-A-FUNDRAISER\)](#)

[Start a Fundraiser \(/start-a-fundraiser\)](#)

[Request Info \(/RequestInformation.aspx\)](#)

[Shop for Kits \(/fundraising-products?shop=1&t=landing\)](#)

[Customer Testimonials](#)

See the difference that Pizza Kit fundraisers make for our customers and how a Pizza Kit fundraiser could help your group!  
[\(/testimonial-stories\)](#)

## Getting Your Fundraiser Started Is Easy!

### Register Your Fundraiser

It's easy to get your Little Caesars® Pizza Kit fundraiser started! You can **Register Online** ([/LoginCreate.aspx?returnto=/StartFundraiser.aspx](#)) at your convenience 24 hours a day, or by calling our Customer Care Center Monday-Friday from 8:30 a.m. - 8:00 p.m. ET. We will guide you through the entire process by working with you to schedule your delivery day and time to help ensure your group/organization will be on the way to earning Big! Big! Dough!

### Big! Big! Profit

The more Little Caesars® Pizza Kits your group/organization sells, the more dough you make. Earn \$6 on every Kit sold\*! You'll be amazed at how quickly your profits ([/fundraising-profit](#)) add up!

### Selling Period

We recommend actively selling for 2-3 weeks. During this time, your Sellers collect their orders and payment. As customers place their Pizza Kit orders, ask your Sellers to collect payment by check made payable to your group/organization. To get the most out of your fundraiser, be sure to take advantage of our e-mail invites and easy-to-use online sales tools.

### Placing Your Order

We suggest allowing one week to collect Order Forms from your Sellers, gather any late orders and tally the number of Kits you need to have delivered and place your final order.

### Making Payment

Payment for your group/organization's fundraiser is due at delivery ([/pick-up-locations](#)). The delivery driver will accept payment in the form of a cashier's check or money order. School checks will also be accepted. Delivery drivers cannot accept cash, organization/personal/starter checks or credit cards.

### Delivery Day

Your Kits will be delivered directly to your group/organization in a refrigerated truck. To ensure a quick and smooth delivery, be sure to have your delivery in an accessible area, avoiding stairs whenever possible. Enlist one volunteer helper for every 100 items sold to ensure sorting and distributing your orders goes smoothly. Schedule your pick-up time 1-3 hours after your delivery time to allow enough time to unload, count and sort orders.

\*Delivery minimums and under the minimum charges will apply and may vary in [Canada](http://www.pizzakit.ca/) (<http://www.pizzakit.ca/>).

[Start New Fundraiser \(/StartFundraiser.aspx\)](#)

# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): Laura Detjen Date: 11/26/18

Club Name: French Club

Acct. No.: 49 Acct. Balance to Date: \$0.00

Type of Fund Raiser: Bounce Sale

Purpose of Fund Raiser: Raise funds for Mardi Gras school celebration

Start Date of Project: 1/4/19 Completion Date of Project: 1/4/19

Date of Sale(s): From 1/14/19 To: 1/14/19

Sale Area/Location: KMS / main lobby

Sale will be monitored by: Laura Detjen

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: N/A - students donate items

Vendor Business Name: N/A

Vendor Address: N/A

City: N/A State & Zip code: N/A

Unit Cost of Product/Service: \$ N/A

Proposal Sale Price: \$ 1-2 per item

Total Cost of all Products Not to Exceed: \$ N/A

Minimum Total Profit Expected: \$ 50.00

Signature: [Signature] Faculty/Advisor Signature Date: 11/26/18

Signature: [Signature] Principal Signature Date: 11/27/18

Signature: [Signature] School Treasure Signature Date: 11/26/18

**Placed on EGE Meeting Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_

# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): Laura Detjen Date: 11/26/18

Club Name: French Club

Acct. No.: 49 Acct. Balance to Date: \$ 0.<sup>00</sup>

Type of Fund Raiser: Bake Sale

Purpose of Fund Raiser: To raise funds for Mardi Gras school celebration

Start Date of Project: 2/4/19 Completion Date of Project: 2/4/19

Date of Sale(s): From 2/4/19 To: 2/4/19

Sale Area/Location: main lobby / kms

Sale will be monitored by: Laura Detjen

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: N/A - Students donate items

Vendor Business Name: N/A

Vendor Address: N/A

City: N/A State & Zip code: N/A

Unit Cost of Product/Service: \$ N/A

Proposal Sale Price: \$ 1-2 per item

Total Cost of all Products Not to Exceed: \$ N/A

Minimum Total Profit Expected: \$ 50

Signature: [Signature] Faculty Advisor Signature Date: 11/26/18

Signature: [Signature] Principal Signature Date: 11/27/18

Signature: [Signature] School Treasure Signature Date: 11/26/18

**Placed on BOE Meeting Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_

# HANNAH CALDWELL ELEMENTARY SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): Anne Marie Caldarola Date: 11/15/18

Club Name: \_\_\_\_\_

Acct. No.: \_\_\_\_\_ Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Artome, LLC

Purpose of Fund Raiser: Student premier Art Show to raise funds for Schools Art Club, Supplies, Trips and Murals.

Start Date of Project: January 28, 2019 Completion Date of Project: April 18, 2019

Date of Sale(s): From April 4, 2019 To: April 18, 2019

Sale Area/Location: Hannah Caldwell Gymnasium

Sale will be monitored by: Anne Marie Caldarola and PTA

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: Patricia Martinez

Vendor Business Name: Artome, LLC

Vendor Address: 1225 OLD ALPHARETTA ROAD SUITE#290

City: ALPHARETTA State & Zip code: GA 30005

Unit Cost of Product/Service: \$ \$19.00 plus tax / artwork

Proposal Sale Price: \$ \$25.00 / artwork

Total Cost of all Products Not to Exceed: \$ N/A

Minimum Total Profit Expected: \$ N/A

**Faculty Advisor Signature**

Signature: *Kathryn D. Duveman A Caldarola* Date: 11/28/18

**Vice Principal Signature**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**School Treasure Signature**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Placed on BOE Meeting Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



Township of Union Schools K-12



Diane Cappiello &lt;dcappiello@twpunionschools.org&gt;

## Fwd: Your scan (Scan to My Email)

1 message

Lori-Ann Boyd <lboyd@twpunionschools.org>  
To: Diane Cappiello <dcappiello@twpunionschools.org>

Tue, Dec 4, 2018 at 11:40 AM

Hey Diane,

Please add the attached item to the December 18th BOE Agenda.

**School/Club:** National Art Honor Society**School Account #:** 2030**Type of Fundraiser:** Coffee & Canvas Night Fundraiser - January**Date of Event:** January 2nd - January 25th, 2019**Purpose of Fund Raiser:** To raise funds for the Senior Scholarship Fund.**School/Club:** National Art Honor Society**School Account #:** 2030**Type of Fundraiser:** Valentine's Day Carnation Sale Fundraiser**Date of Event:** January 22nd - February 14th, 2019**Purpose of Fund Raiser:** To raise funds for the Senior Scholarship Fund.**School/Club:** National Art Honor Society**School Account #:** 2030**Type of Fundraiser:** Coffee & Canvas Night Fundraiser - March**Date of Event:** March 1st - March 22nd, 2019**Purpose of Fund Raiser:** To raise funds for the Senior Scholarship Fund.**School/Club:** Junior Class**School Account #:** 2228**Type of Fundraiser:** Spring Pep Rally - Pie in the Face Fundraiser**Date of Event:** May 1st - May 22nd, 2019**Purpose of Fund Raiser:** To raise funds for the Junior Class of 2020.**School/Club:** Junior Class**School Account #:** 2228**Type of Fundraiser:** Stop the "Bop" Fundraiser**Date of Event:** February 7th - June 14th, 2019**Purpose of Fund Raiser:** To raise funds for the Junior Class of 2020.**School/Club:** Class of 2019**School Account #:** 2214**Type of Fundraiser:** Food Truck Fundraiser**Date of Event:** December 19th - June 14th, 2019**Purpose of Fund Raiser:** To raise funds for the Senior Class of 2019.

Thanks,

Lori-Ann A. Boyd

TWP of Union Board of Education

2369 Morris Avenue

Union, NJ 07083

P: 908.851.4439

lboyd@twpunionschools.org

**HUMAN. KIND. BE BOTH. -Lori A. Boyd**

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# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): T.A. Ocasio + T. DAMO Date: 11/27/18

Club Name: Activities AA Honor Society

Acct. No.: 2030 Acct. Balance to Date: 257.76

Type of Fund Raiser: coffee and canvas night march

Purpose of Fund Raiser: senior scholarship fund

Start Date of Project: 3/1/19 Completion Date of Project: 3/22/19

Date of Sale(s): From 3/1/19 To: 3/22/19

Sale Area/Location: D210 UHS

Sale will be monitored by: T.A. Ocasio + T. DAMO

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: [Signature] Date: 11/27/18

### Vice Principal Signature

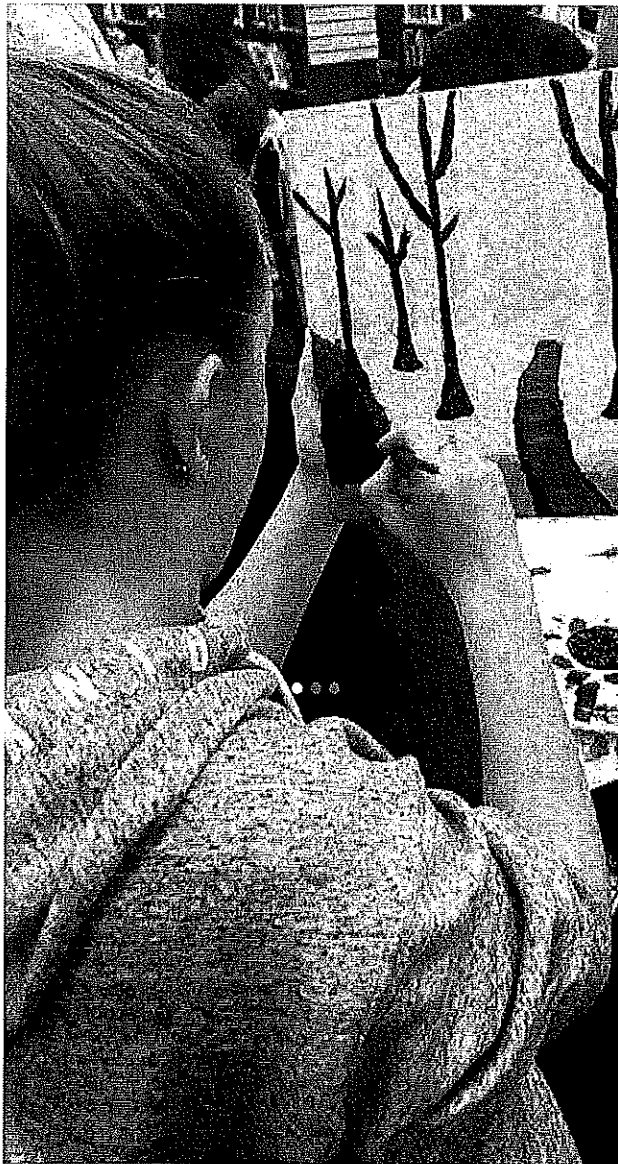
Signature: [Signature] Date: 11/27/18

### School Treasure Signature

Signature: [Signature] Date: 12/7/18

### Placed on BOE Meeting Agenda for:

Month: Dec Year: 2018 Approved: YES  NO  By: \_\_\_\_\_



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uhs.nahs Thank You to everyone who attended our Coffee&Canvas Night!

FEBRUARY 9

Log in to like or comment.



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): T. Arrieta Ocasio + T. DAMO Date: 11/27/18

Club Name: National ARA Honor Society

Acct. No.: 2030 Acct. Balance to Date: 257.76

Type of Fund Raiser: Coffee @ canvas Night January

Purpose of Fund Raiser: Senior scholarship fund

Start Date of Project: 1/2/19 Completion Date of Project: 1/25/19

Date of Sale(s): From 1/2/19 To: 1/25/19

Sale Area/Location: D210 DHS

Sale will be monitored by: T. A. Ocasio + T. DAMO

## \*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 11/27/18

## Vice Principal Signature

Signature: [Signature] Date: 11/27/18

## School Treasure Signature

Signature: [Signature] Date: 12/4/18

## Placed on BOE Meeting Agenda for:

Month: Dec Year: 2018 Approved: YES  NO  By: \_\_\_\_\_



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uhs.nahs Paint Night 🎨!

APRIL 7, 2017

Log in to like or comment.



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): T. A. Ocasio Date: 11/27/18

Club Name: National AA Honor Society

Acct. No.: 2030 Acct. Balance to Date: 257.76

Type of Fund Raiser: Valentines DAY CARNATION SALE

Purpose of Fund Raiser: Senior scholarship fund

Start Date of Project: 1/22/19 Completion Date of Project: 2/14/19

Date of Sale(s): From 1/22/19 To: 2/14/19

Sale Area/Location: D210 UHS

Sale will be monitored by: T.A Ocasio + T. DAMO

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 11/27

## Vice Principal Signature

Signature: [Signature] Date: 11/27/18

## School Treasure Signature

Signature: [Signature] Date: 12/4/18

## Placed on BOE Meeting Agenda for:

Month: Dec Year: 2018 Approved: YES  NO  By: \_\_\_\_\_



uhs.nahs • Follow

uhs.nahs Our carnations are ready for delivery tomorrow morning!

FEBRUARY 13

Log in to like or comment.



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Michael DiPaolo & Adam Koffele Date: 11/30

Club Name: Junior Class

Acct. No.: 2214 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Spring Pep Rally ~ Pie in Face

Purpose of Fund Raiser: Raise money for junior class to be spent during senior year.

Start Date of Project: May 2019 Completion Date: \_\_\_\_\_

Date of Sale(s): From \_\_\_\_\_ To \_\_\_\_\_

Sale Area/Location: \_\_\_\_\_

Sale will be monitored by: \_\_\_\_\_

*I will ~~not~~ carry*

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: No Sales

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: [Signature] Date: 11/30/18

### Vice Principal Signature

Signature: [Signature] Date: 12/3/18

### School Treasure Signature

Signature: [Signature] Date: 12/4/18

### Placed on BOE Meeting Agenda for:

Month: Dec Year: 2018 Approved: YES  NO  By: \_\_\_\_\_





# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Michael DiPaolo & Adam Raffaele Date: 11/30

Club Name: Junior Class

Acct. No.: 2214 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Stop the "Pop" ~ Music on loop ~~all~~ during lunch  
Start of Battle all the classes

Purpose of Fund Raiser: Raise money for Junior class ~~and~~ to be used during  
their senior year

Start Date of Project: 2/7/18 Completion Date of Project: \_\_\_\_\_

Date of Sale(s): From \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: Senior Cafeteria

Sale will be monitored by: Michael DiPaolo Adam Raffaele & Junior class officers

### \*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: No Sales

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: Michael DiPaolo Date: 11/30/18

### Vice Principal Signature

Signature: Jim Ostry Date: 12/3/18

### School Treasure Signature

Signature: [Signature] Date: 12/4/18

### Placed on BOE Meeting Agenda for:

Month: Dec Year: 2018 Approved: YES  NO  By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUND RAISER PROPOSAL

### Applicant Information

Faculty Member (s): Cheryl Piske, Tara Scaramuzzi, Will Eckert, Megan Kaplan Date: \_\_\_\_\_

Club Name: Senior Class

Acct. No.: 2204 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Food Truck

Purpose of Fund Raiser: raise money for Senior Class

- food trucks would serve lunch on the 1/2 days and 10% - 25% would go to the senior class

Start Date of Project: now Completion Date of Project: June 2018

Date of Sale(s): From 12/21, 1/9, 1/22-1/28, 3/13, 3/13, 5/24, 6/21-6/26 To: \_\_\_\_\_

Sale Area/Location: \_\_\_\_\_

Sale will be monitored by: all 4 advisors

by not  
the place  
all of  
listed  
dates

### \*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: Different food trucks throughout the school year - all would meet the standards established by the Union Township Fire Department

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ 0

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: Cheryl Piske Date: 12/3/18

### Vice Principal Signature

Signature: [Signature] Date: 12/3/18

### School Treasure Signature

Signature: [Signature] Date: 12/4/18

### Placed on BOE Meeting Agenda for:

Month: Dec Year: 2018 Approved: YES  NO  By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUND RAISER PROPOSAL

### Applicant Information

Faculty Member (s): Cheryl Viske, Teri Scaramozzi, Will Eichert, Megan Kaplan Date: \_\_\_\_\_

Club Name: Senior Class

Acct. No.: 2204 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Food Truck

Purpose of Fund Raiser: raise money for Senior Class

- food trucks would serve lunch on the 1/2 days and 10% - 25% would go to the senior class

Start Date of Project: now Completion Date of Project: June 2018

Date of Sale(s): From 12/21, 1/9, 1/22-1/28, 2/13, 3/13, 5/24, 6/21-6/26 To: \_\_\_\_\_

Sale Area/Location: \_\_\_\_\_

Sale will be monitored by: all 4 advisors

### \*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: Different food trucks throughout the school year - all would meet the standards established by the Union Township Fire Department

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ 0

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: Cheryl Viske Date: 12/3/18

### Vice Principal Signature

Signature: [Signature] Date: 12/3/18

### School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_

may not take place on all of the listed 's



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): William Echert Date: 12/3/18

Club Name: Senior Class

Acct. No.: 2214 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Senior Class T-shirt/Sweatshirt

Purpose of Fund Raiser: Raise funds for Senior class activities

Start Date of Project: 1/2/2019 Completion Date of Project: 1/16/19

Date of Sale(s): From 1/2/2019 To: 1/16/19

Sale Area/Location: Senior advisor classrooms.

Sale will be monitored by: Senior Class Advisors

### \*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: 2K Printing & Promotions Glenn Zuhl

Vendor Business Name: \_\_\_\_\_

Vendor Address: 170 Westfield Ave

City: Roselle Park State & Zip code: NJ 07204

Unit Cost of Product/Service: \$ 7.25 9.50

Proposal Sale Price: \$ 15 short-sleeve 20 long sleeve

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: [Signature] Date: 12/3/18

### Vice Principal Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



Phone: 908.547.5000 Fax: xxx-xxx-xxxx  
 E-Mail: billing@2kprinting.com  
 170 W. Westfield Ave Roselle Park NJ, 07204

# SALES ORDER

Order Date	Due Date	Order Number
11/27/2018 (Tue)	12/7/2018 (Fri)	S 17055

178 shirt/30 SwtPant/25 Dri-Fit/150 Mgnt

**Bill To:**

**Union High School**  
 Cheryl Fiske  
 2350 N 3rd St.  
 Union, NJ 07083

---

Phone: 908-419-4005 Cell: - -  
 E-Mail: cfiske@twpunionschools.org Fax: - -

**Ship To:**

---

Ship Method: Pick Up

Terms	Sales Rep	Customer PO
Due on receipt	Glenn	UHS178/UHS25/UHS25BP/UHS150-1

Style	Description	Colors /Stitches	Size	Qty	Rate	Amount
2400	<b>Long Sleeve T-Shirts</b> GIL Adult L/S Ultracotton Tee	BLACK	S	5	10.50	52.50
			M	8	10.50	84.00
			L	12	10.50	126.00
			XL	8	10.50	84.00
5000	<b>Short Sleeve T-Shirts</b> Gildan - Heavy Cotton 100% Cotton T-Shirt. 5000	Black	S	4	7.00	28.00
			M	12	7.00	84.00
			L	7	7.00	49.00
			XL	6	7.00	42.00
			2XL	2	9.00	18.00
12000	<b>Crew Neck Sweatshirts</b> Gildan - DryBlend 153 Crewneck Sweatshirt. 12000	Black (3XL)	S	3	13.50	40.50
			M	3	13.50	40.50
			L	7	13.50	94.50
			XL	3	13.50	40.50
18500	<b>Hoodies</b> Gildan - Heavy Blend153 Hooded Sweatshirt. 18500	Black	S	12	16.00	192.00
			M	26	16.00	416.00
			L	19	16.00	304.00
			XL	13	16.00	208.00
			2XL	5	19.00	95.00

Sweatpants get small U on left leg.  
 Zip Ups get Large U on back and small U on Front Left Chest.

<b>Total</b>	4266.22
<b>Tax Amount</b>	0.00
<b>Net Total</b>	4266.22
<b>Payments</b>	0.00
<b>Balance Due</b>	4266.22

Please allow for a 1-2% spoilage rate on all orders. Orders under 50 pieces allow for a 1-2 piece spoilage rate. Spoilage over 2% will be credited.



Phone: 908.547.5000 Fax: xxx-xxx-xxxx  
 E-Mail: billing@2kprinting.com  
 170 W. Westfield Ave Roselle Park NJ, 07204

# SALES ORDER

Order Date	Due Date	Order Number
11/27/2018 (Tue)	12/7/2018 (Fri)	S 17055

178 shirt/30 SwtPant/25 Dri-Fit/150 Mgnt

**Bill To:**

**Union High School**  
 Cheryl Fiske  
 2350 N 3rd St.  
 Union, NJ 07083

---

Phone: 908-419-4005 Cell: - -  
 E-Mail: cfiske@twpunionschools.org Fax: - -

**Ship To:**

---

Ship Method: Pick Up

Terms	Sales Rep	Customer PO
Due on receipt	Glenn	UHS178/UHS25/UHS25BP/UHS150-1

Style	Description	Colors /Stitches	Size	Qty	Rate	Amount
18600	Custom Screen Printing <b>Zip Up Hoodies</b> Gildan - Heavy Blend153 Full-Zip Hooded Sweatshirt	2 Cols, Center - Front Black		<b>155</b>		
			S	5	21.00	105.00
			M	8	21.00	168.00
			L	1	21.00	21.00
			XL	6	21.00	126.00
12300	Custom Screen Printing Custom Screen Printing <b>SweatPants</b> 12300 Gildan Ultra Blend Open Bottom Pocketed Swea	2 Cols, Chest - Left 2 Cols, Center - Back Black		<b>23</b>		
			S	9	20.50	184.50
			M	11	20.50	225.50
			L	4	20.50	82.00
			XL	4	23.50	94.00
PC380	Custom Screen Printing <b>Dri-Fit T-Shirt</b> Port & Company® Performance Tee	2 Cols, Leg - Left Black		<b>30</b>		
			S	5	12.00	60.00
			M	5	12.00	60.00
			L	10	12.00	120.00
			XL	5	12.00	60.00
	Custom Screen Printing	2 Cols, Center - Front		<b>25</b>		

Sweatpants get small U on left leg.  
 Zip Ups get Large U on back and small U on Front Left Chest.

<b>Total</b>	4266.22
<b>Tax Amount</b>	0.00
<b>Net Total</b>	<b>4266.22</b>
<b>Payments</b>	0.00
<b>Balance Due</b>	<b>4266.22</b>

Please allow for a 1-2% spoilage rate on all orders. Orders under 50 pieces allow for a 1-2 piece spoilage rate. Spoilage over 2% will be credited.



Phone: 908.547.5000 Fax: xxx-xxx-xxxx  
 E-Mail: billing@2kprinting.com  
 170 W. Westfield Ave Roselle Park NJ, 07204

# SALES ORDER

Order Date	Due Date	Order Number
11/27/2018 (Tue)	12/7/2018 (Fri)	S 17055

178 shirt/30 SwtPant/25 Dri-Fit/150 Mgnt

**Bill To:**

---

**Union High School**  
 Cheryl Fiske  
 2350 N 3rd St.  
 Union, NJ 07083

---

Phone: 908-419-4005 Cell: - -  
 E-Mail: cfiske@twpunionschools.org Fax: - -

**Ship To:**

---

Ship Method: Pick Up

Terms	Sales Rep	Customer PO
Due on receipt	Glenn	UHS178/UHS25/UHS25BP/UHS150-1

Style	Description	Colors /Stitches	Size	Qty	Rate	Amount
BG614	<b>Cinch Backpacks</b>	Black		25	8.50	212.50
	Port & Company@ Core Fleece Sweatshirt Cinch Pack Custom Screen Printing	2 Cols, Center - Front		25		
3501	<b>Magnets</b> Custom Outdoor Magnets	Full Color	5" x 4.783"	150	4.25	637.50
SET UP	Set up fee - WAIVED!!!			1		
SHIPPING	FedEx Ground Shipping to NJ Included			1		

Sweatpants get small U on left leg.  
 Zip Ups get Large U on back and small U on Front  
 Left Chest.

<b>Total</b>	4266.22
<b>Tax Amount</b>	0.00
<b>Net Total</b>	4266.22
<b>Payments</b>	0.00
<b>Balance Due</b>	4266.22

Please allow for a 1-2% spoilage rate on all orders. Orders under 50 pieces allow for a 1-2 piece spoilage rate. Spoilage over 2% will be credited.



Diane Cappiello &lt;dcappiello@twpunionschools.org&gt;

---

**Fwd: Your scan (Scan to My Email)**

1 message

---

**Lori-Ann Boyd** <lboyd@twpunionschools.org>  
To: Diane Cappiello <dcappiello@twpunionschools.org>

Tue, Dec 4, 2018 at 1:42 PM

**Hi Diane,**

If it is not too late, please add these items to the December 18th BOE Agenda.

**School/Club:** National Art Honor Society**School Account #:** 2030**Type of Fundraiser:** Canvas /Mural Raffle**Date of Event:** February 1st -April 30th, 2019**Purpose of Fund Raiser:** To raise funds for the Senior Scholarship Fund.**School/Club:** Intercultural Student Organization (ISO)**School Account #:** 2022**Type of Fundraiser:** Chocolate Bar Sale**Date of Event:** January 1st - March 1st, 2019**Purpose of Fund Raiser:** To raise funds for field trips and Senior Scholarships.**School/Club:** Intercultural Student Organization (ISO)**School Account #:** 2022**Type of Fundraiser:** Cultural Food/ Bake Sale**Date of Event:** January 7, 2019**Purpose of Fund Raiser:** To raise funds for field trips and Senior Scholarships.

Thank You!

Lori-Ann A. Boyd

TWP of Union Board of Education

2369 Morris Avenue

Union, NJ 07083

**P: 908.851.4439**


lboyd@twpunionschools.org

**HUMAN. KIND. BE BOTH. -Lori A. Boyd**

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3221K





# UNION HIGH SCHOOL STUDENT ACTIVITIES FUND RAISER PROPOSAL

### Applicant Information

Faculty Member (s): T.A. Occasio + T. DAMO Date: 12/4/18

Club Name: National Art Honor Society

Acct. No.: 2030 Acct. Balance to Date: 706.97

Type of Fund Raiser: Canvas/Mural Raffle

Purpose of Fund Raiser: Raise funds for senior Scholships - tickets 5.00/each - winner gets mural/canvas painted for their classroom.

Start Date of Project: 2-1-19 Completion Date of Project: 4-30-19

Date of Sale(s): From 2-1-19 To: 2-28-19

Sale Area/Location: D110 - Main office

Sale will be monitored by: T.A. Occasio + T. DAMO

### \*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: [Signature] Date: 12/4/18

### Vice Principal Signature

Signature: [Signature] Date: 12-4-18

### School Treasure Signature

Signature: [Signature] Date: 12-4-18

### Placed on BOE Meeting Agenda for:

Month: <u>Dec</u>	Year: <u>2018</u>	Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____
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# UNION HIGH SCHOOL STUDENT ACTIVITIES FUND RAISER PROPOSAL

## Applicant Information

Faculty Member (s): Morelli Date: 12-4

Club Name: Intercultural Student Organization

Acct. No.: ? Acct. Balance to Date: \$ 11612.09

Type of Fund Raiser: Chocolate Bar Sale

Purpose of Fund Raiser: To raise money for field trips and senior scholarships.

Start Date of Project: January 1st Completion Date of Project: March 1st

Date of Sale(s): From Date received To: March 1st

Sale Area/Location: Independent sale conducted by club members

Sale will be monitored by: \_\_\_\_\_

## \*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: Kimberly Kuzma

Vendor Business Name: World's Finest Chocolate

Vendor Address: 3 Cass Street

City: Keyport State & Zip code: NJ, 07735

Unit Cost of Product/Service: \$36 per (60) count box

Proposal Sale Price: \$1 per chocolate bar

Total Cost of all Products Not to Exceed: \$600 15 (60) count boxes

Minimum Total Profit Expected: \$216

## Faculty Advisor Signature

Signature: J. Morelli Date: 12-4

## Vice Principal Signature

Signature: Kim Usty Date: 12-4-18

## School Treasure Signature

Signature: [Signature] Date: 12-4-18

## Placed on BOE Meeting Agenda for:

Month: Dec Year: 2018 Approved: YES  NO  By: \_\_\_\_\_



# Kastle Fundraising - Sales Agreement

3 Cass St., Keyport, NJ 07735

Phone: 732-525-8333 800-527-8535 Fax: 732-525-0909

Email: Kastlefundraising@gmail.com

Organization Union High School Intercultural Student Organization Date 12/4/18  
 School# (908) 851-6500  
 Acct # \_\_\_\_\_ Fax # ( ) \_\_\_\_\_

Address 2350 N 3rd Street  
 City Union State NJ Zip 07083 County \_\_\_\_\_  
 Contact 1- Jenny Morelli Title \_\_\_\_\_ C # (908) 358-3415  
 Email: jmorellie@twpunionschools.org H# \_\_\_\_\_ Other # \_\_\_\_\_  
 Contact 2- \_\_\_\_\_ Title \_\_\_\_\_ C # ( ) \_\_\_\_\_  
 Email: \_\_\_\_\_ H # \_\_\_\_\_

Terms: Net \_\_\_\_\_ O -Prepaid O -COD Brochure Delivery: \_\_\_/\_\_\_-\_\_\_/\_\_\_ Sale Starts \_\_\_/\_\_\_/\_\_\_  
 S- \_\_\_\_\_ Will Advise \_\_\_\_\_ Sale Ends \_\_\_/\_\_\_/\_\_\_  
 Number in Group: \_\_\_/\_\_\_ Previous Sale: \$ \_\_\_\_\_ K.O. \_\_\_/\_\_\_/\_\_\_

Program(s)	Profit

S.P.- Tally- Bulk- Brochures Collated Y N

Letter: KF-\_\_\_ School-\_\_\_ Supplied to KF-\_\_\_  
 Pre Approved-\_\_\_ Eng-\_\_\_ SP-\_\_\_  
 Checks Payable to: \_\_\_\_\_  
 Special Instructions \_\_\_\_\_

PP: - \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

O - Delivery Charge is applicable for minimum sales. If sale is \_\_\_\_\_ Units or Less, Delivery is \$ \_\_\_\_\_

**Special Instructions:**  
Profit is 40% when purchasing 1-49 carriers  
Profit is 50% when purchasing 50 or more carriers

- Chocolate Bars World's Finest Profit- \* % Delivery Date- \_\_\_/\_\_\_/\_\_\_ - AM or PM

Carriers	Count	Item Description	Unit Price	Total Retail
	<u>60</u>	<u>WFC Variety Pack</u>		
		<u>Freight charge \$45</u>		
		<u>If candy is picked up there is no delivery charge</u>	Sales Tax	
			Freight	
			<b>Total</b>	

Unopened cases may be returned within 30 days of delivery for Credit. Organization will ensure the chocolate is stored in a safe environment and will be responsible for damages. If credit is given, Organization will pay on time or may incur finance charges.

I have been appointed to represent the above organization. I am authorized to contractually obligate the organization for the full amount of this order plus any future orders for the above fundraising project. According to the terms of this agreement, We are \_\_\_\_\_, Are Not \_\_\_\_\_ Tax Exempt. Since our organization considers itself to be Tax Exempt, if the state should bill Kastle Fundraising for sales tax, our organization agrees to be fully responsible for the payment of those same taxes as well as any penalties assessed with in 10 days of being notified by Kastle Fundraising. Sales tax will be charged unless and acceptable Tax Exempt Certificate is provided.

X Adam Kaplan Sales Rep \_\_\_\_\_ Organization's Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Kastle Fundraising Authorized Signature Fax-O Email -O

SINCE 1949™



WORLD'S FINEST®  
CHOCOLATE

The World's Finest Fundraiser!™

WE FUND COMMUNITIES

\$1

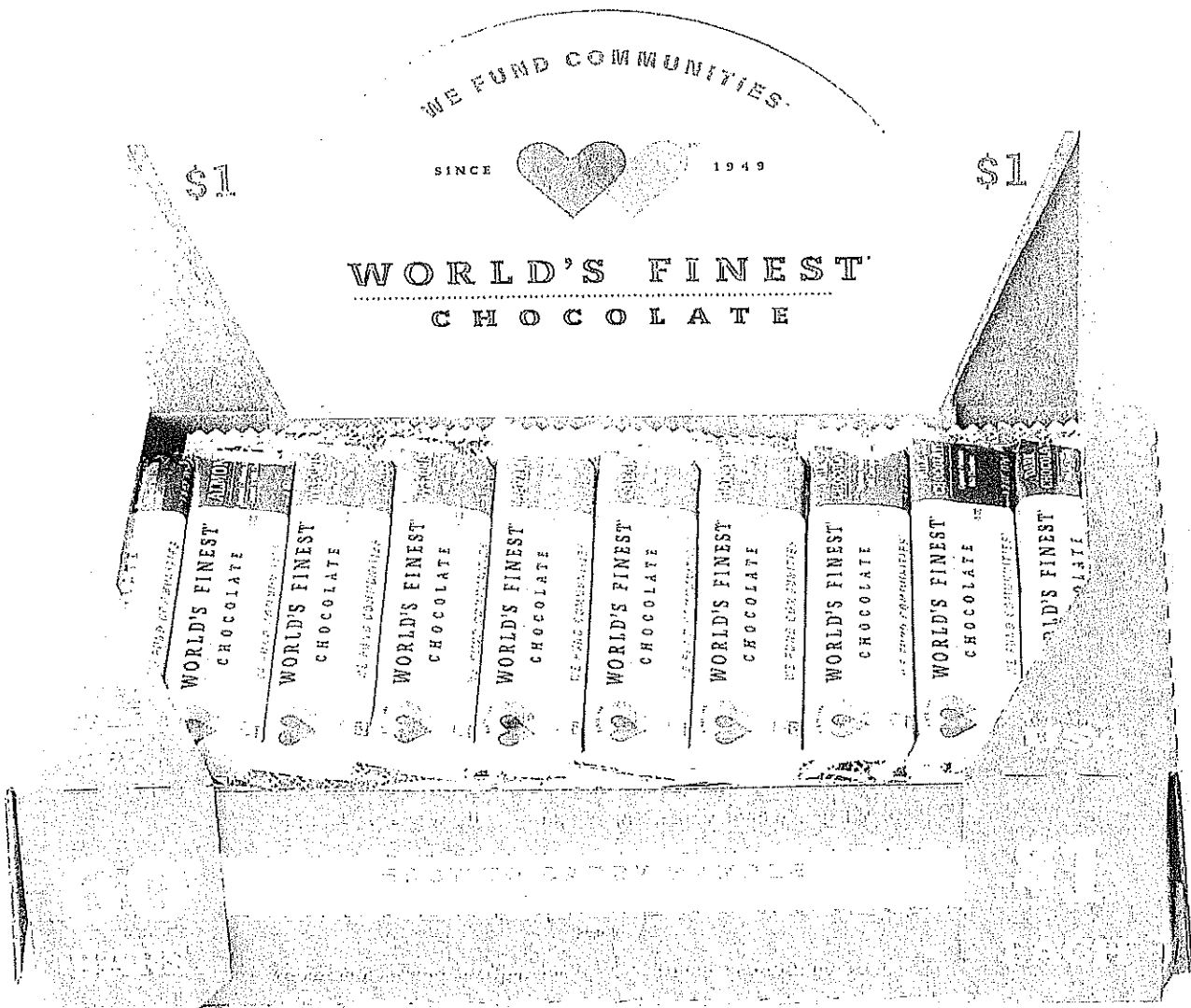
SINCE



1949

\$1

WORLD'S FINEST®  
CHOCOLATE



Earn the most money in the least amount of time!

WE FUND COMMUNITIES™



**WORLD'S FINEST<sup>®</sup>**  
**CHOCOLATE**  
 WE FUND COMMUNITIES<sup>™</sup>

Since 1949, we have helped groups like yours reach their goals.



**\$1 — 60 Bar Variety Pack**

**INCLUDES:**

- 18 Caramel Bars
- 12 Almond Bars
- 12 W.F. Crisp<sup>®</sup> Bars
- 12 Milk Chocolate Bars
- 6 Dark Chocolate Bars

Call your local WFC Rep at 1.800.WFC.FUND.  
 Or visit [WorldsFinestChocolate.com](http://WorldsFinestChocolate.com).



**Raise More!**  
 \*Excludes freight cost and applicable taxes. Minimum order, terms and conditions apply



With over \$4 billion raised, our product speaks for itself.



Most fundraisers wrap up in just 2 weeks.

8 case minimum order.  
 Configurations may vary by geography.





# UNION HIGH SCHOOL STUDENT ACTIVITIES FUND RAISER PROPOSAL

### Applicant Information

Faculty Member (s): Morelli Date: 12-4

Club Name: Intercultural Student Organization

Acct. No.: 7 Acct. Balance to Date: \$ 11612.09

Type of Fund Raiser: Cultural Food Sale / Bake Sale (store bought only)

Purpose of Fund Raiser: To raise money for senior scholarship awards and field trips.

Start Date of Project: \_\_\_\_\_ Completion Date of Project: \_\_\_\_\_  
 Date of Sale(s): From JAN. 7 @ 2:35pm. To: JAN. 7 @ 3:30pm.  
 Sale Area/Location: Front (Main) Entrance  
 Sale will be monitored by: \_\_\_\_\_

### \*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_  
 Vendor Business Name: \_\_\_\_\_  
 Vendor Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_  
 Unit Cost of Product/Service: \$ \_\_\_\_\_  
 Proposal Sale Price: \$ \_\_\_\_\_  
 Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_  
 Minimum Total Profit Expected: \$ \_\_\_\_\_

### Faculty Advisor Signature

Signature: J. Morelli Date: 12-4

### Vice Principal Signature

Signature: Kym Ostry Date: 12-4-18

### School Treasure Signature

Signature: [Signature] Date: 12-4-18

### Placed on BOE Meeting Agenda for:

Month: Dec Year: 2018 Approved: YES  NO  By: \_\_\_\_\_