

F-11



Diane Cappiello <dcappiello@twpunionschools.org>

December 2021 BOE Agenda Fundraiser Request for UHS Marching Band

1 message

Laura Finnerty <lfinnerty@twpunionschools.org>
To: Diane Cappiello <dcappiello@twpunionschools.org>
Cc: Michael Hamilton <mhamilton@twpunionschools.org>

Mon, Dec 6, 2021 at 12:37 PM

Good afternoon, Diane -

Can you please add the attached fundraiser request to the BOE board meeting agenda for December 2021 if it's not too late?

School/Club: UHS Marching Band
School Accounts #: 2033
Type of Fundraiser: Sponsor-a-Day Calendar
Date of Event/Sales: January 18, 2022 through February 14, 2022
Purpose of Fund Raiser: To raise funds to offset the cost of the Winter Percussion and Winter Guard programs

As always, your assistance is greatly appreciated.

Sincerely,

Laura Finnerty
Secretary and UHS SAA Bookkeeper
Union High School - Main Office
2350 North Third Street
Union, NJ 07083
(908) 851-6501

 **UHS Marching Band Sponsor-a-Day Calendar Fundraiser Request.pdf**
456K



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): MICHAEL HAMILTON Date: 12/6/2021

Club Name: MARCHING BAND

Acct. No.: 2033 Acct. Balance to Date: \$16,832.64

Type of Fund Raiser: SPONSOR - A - DAY CALENDAR

Purpose of Fund Raiser: TO RAISE FUNDS TO OFFSET THE COST OF THE WINTER PERCUSSION & WINTER GUARD PROGRAMS.

Start Date of Project: 1/18/2022 Completion Date of Project: 2/14/2022

Date of Sale(s): From 1/18/2022 To: 2/14/2022

Sale Area/Location: ONLINE

Sale will be monitored by: M HAMILTON, C ESCOBAR, S MYERS, P TANNER

*****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: \$ 0.00

Proposal Sale Price: \$ VARIOUS (\$1 - \$31)

Total Cost of all Products Not to Exceed: \$ 50

Minimum Total Profit Expected: \$ 1,000

Faculty Advisor Signature

Signature: [Signature] Date: 12/6/21

Vice Principal Signature

Signature: [Signature] Date: 12-6-21

School Treasure Signature

Signature: [Signature] Date: 12/6/21

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____

January 2022



**UNION HIGH SCHOOL
MARCHING FARMERS**

**UHS Marching Band
Winter Percussion/Winter Color Guard
Calendar Fundraiser**

HOW IT WORKS:

1. Pick a date to sponsor that has not been picked.
2. Donate that amount (ex. January 10 = \$10)

Please help me reach my goal of filling the entire calendar.

THANK YOU!!

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1
						8
						15
						22
2	3	4	5	6	7	
9	10	11	12	13	14	
16	17	18	19	20	21	
23	24	25	26	27	28	29
30	31					



Diane Cappiello <dcappiello@twpunionschools.org>

Decmeber 2021 BOE Agenda Fundraiser Requests for National Honor Society

1 message

Laura Finnerty <lfinnerty@twpunionschools.org>

Wed, Nov 17, 2021 at 11:28 AM

To: Diane Cappiello <dcappiello@twpunionschools.org>

Cc: Emily Gutierrez <egutierrez@twpunionschools.org>, Joseph Daly <jdaly@twpunionschools.org>

Good morning, Diane -

Can you please add the following fundraiser request to the December 2021 BOE Meeting Agenda?

School/Club: National Honor Society

School Accounts #: 2049

Type of Fundraiser: Famous Amos Cookie Sale

Date of Event/Sales: December 2021 through June 2022

Purpose of Fund Raiser: To raise money for NHS Senior scholarships, stoles and dues.

School/Club: National Honor Society

School Accounts #: 2049

Type of Fundraiser: T-shirt Fundraiser

Date of Event/Sales: December 2021 through January 2022

Purpose of Fund Raiser: To raise money for NHS Senior scholarships, stoles and dues.

As always, your assistance is greatly appreciated!

Sincerely,

Laura Finnerty
Secretary and UHS SAA Bookkeeper
Union High School - Main Office
2350 North Third Street
Union, NJ 07083
(908) 851-6501



UHS NHS Famous Amos Cookie Sale and T-shirt Fundraiser.pdf

829K



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Emily Gutierrez Date: 11/10

Club Name: National Honor Society

Acct. No.: 2049 Acct. Balance to Date: _____

Type of Fund Raiser: Famous Amos Cookie Sale

Purpose of Fund Raiser: To raise funds for the NHS scholarship, stores, and dues.

Start Date of Project: 12/15/21 Completion Date of Project: 6/1/22

Date of Sale(s): From 12/15/21, 1/7/22, 2/7/22, 3/7/22 To: 6/1/22

Sale Area/Location: UHS 1/7/22

Sale will be monitored by: Emily Gutierrez

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

Vendor Representative's Name: N/A

Vendor Business Name: N/A / Students are donating

Vendor Address: N/A

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ _____

Proposal Sale Price: \$ 1

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

Minimum Total Profit Expected: \$ 500

Faculty Advisor Signature

Signature: [Signature] Date: 11/10/21

Vice Principal Signature

Signature: [Signature] Date: 11/16/21

School Treasure Signature

Signature: Jaura Jerny Date: 11/10/21

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Emily Gutierrez Date: 11/10/21

Club Name: National Honor Society

Acct. No.: 2049 Acct. Balance to Date: _____

Type of Fund Raiser: # T-Shirt Fundraiser

Purpose of Fund Raiser: To raise funds for scholarship, states + dues.

Start Date of Project: 12/15/21 Completion Date of Project: 1/7/22

Date of Sale(s): From 12/15/21 To: 1/7/22

Sale Area/Location: Union High School

Sale will be monitored by: Emily Gutierrez

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

Vendor Representative's Name: Custom Ink

Vendor Business Name: Custom Ink

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ 15

Proposal Sale Price: \$ 20-25

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

Minimum Total Profit Expected: \$ _____

Faculty Advisor Signature

Signature: [Signature] Date: 11/10/21

Vice Principal Signature

Signature: [Signature] Date: 11/10/21

School Treasure Signature

Signature: [Signature] Date: 11/10/21

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____



Diane Cappiello <dcappiello@twpunionschools.org>

December 2021 BOE Agenda Fundraiser Request for National Honor Society

1 message

Laura Finnerty <lfinnerty@twpunionschools.org>

Mon, Nov 22, 2021 at 8:20 AM

To: Diane Cappiello <dcappiello@twpunionschools.org>

Cc: Emily Gutierrez <egutierrez@twpunionschools.org>, Joseph Daly <jdaly@twpunionschools.org>

Good morning, Diane -

Can you please add the following fundraiser requests to the December 2021 BOE Meeting Agenda?

School/Club: National Honor Society

School Accounts #: 2049

Type of Fundraiser: Welch's Fruit Snack Fundraiser

Date of Event/Sales: December 16, 2021 through January 8, 2022

Purpose of Fund Raiser: To raise money for NHS Club and activities.

School/Club: National Honor Society

School Accounts #: 2049

Type of Fundraiser: Food/Can Drive

Date of Event/Sales: December 16, 2021 through April 1, 2022

Purpose of Fund Raiser: To collect food to donate to local food banks.

As always, your assistance is greatly appreciated!

Sincerely,

Laura Finnerty
Secretary and UHS SAA Bookkeeper
Union High School - Main Office
2350 North Third Street
Union, NJ 07083
(908) 851-6501

 **NHS Fundraiser Requests for Dec 21 BOE Meeting.pdf**
541K



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Emily Gutierrez Date: 11/19/21

Club Name: National Honor Society

Acct. No.: 2049 Acct. Balance to Date: _____

Type of Fund Raiser: Welches Fruit Snacks

Purpose of Fund Raiser: To raise money for the club

Start Date of Project: 12/16 Completion Date of Project: 1/8/22

Date of Sale(s): From 12/16 To: 1/5/22

Sale Area/Location: UHS

Sale will be monitored by: Ms. Gutierrez

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

Vendor Representative's Name: N/A - Already have

Vendor Business Name: N/A - Already have

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: 11/19/21

Vice Principal Signature

Signature: [Signature] Date: 11/19/21

School Treasure Signature

Signature: [Signature] Date: 11/22/21

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Emily Gutierrez Date: 11/19/21

Club Name: National Honor Society

Acct. No.: 2049 Acct. Balance to Date: _____

Type of Fund Raiser: Food/Can Drive

Purpose of Fund Raiser: Raise food to donate to local food bank

Start Date of Project: 12/16/21 Completion Date of Project: 4/1/22
Date of Sale(s): From TBD To: _____

Sale Area/Location: UHS/Alto

Sale will be monitored by: Ms. Gutierrez

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

Vendor Representative's Name: _____

Vendor Business Name: N/A

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: 11/19/21

Vice Principal Signature

Signature: [Signature] Date: 11/19/21

School Treasure Signature

Signature: [Signature] Date: 11/22/21

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____



Washington Elementary School

STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): J. Crane, C. Ferretti, M. Riley Date: _____

Club Name: 4th Grade Student Council

Acct. No.: _____ Acct. Balance to Date: _____

Type of Fund Raiser: Please see attached

Purpose of Fund Raiser: Purchase equipment for an area of the playground where students can sit during recess. This area will be utilized for SEL.

Start Date of Project: Jan. 2022 Completion Date of Project: June 2022

Date of Sale(s): From Jan. 2022 To: June 2022

Sale Area/Location: School wide

Sale will be monitored by: J. Crane C. Ferretti M. Riley

***** 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: Cynthia K. Feretti Date: 1/23/21

Vice Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____

Monthly- School store. Students will buy various items at different prices.

February- Valentine Telegrams

March- Month-long Read-a-Thon

April- Buds to Blooms each grade level will build a different color flower. Petals will contain messages of kindness. Each petal will cost \$1.00

May- Fun Run - students will participate in a fun- run to raise money for the playground. The cost per student is \$10.00.



[SCHOOL NAME] STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Patricia Bridges Date: 12/1/21

Club Name: _____

Acct. No.: _____ Acct. Balance to Date: _____

Type of Fund Raiser: Dress-Down Fundraiser for Needy Family

Purpose of Fund Raiser: The Darkwah Family sustained the loss of their home & belongings to a devastating home fire prior to Thanksgiving. Donations of \$5 or more will be suggested

Start Date of Project: 12/10 OR 12/17 Completion Date of Project: 12/10 OR 12/17

Date of Sale(s): From _____ To: _____

Sale Area/Location: _____

Sale will be monitored by: UHS Community

***** 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: 12/1/21

Vice Principal Signature

Signature: [Signature] Date: 12/1/21

School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

Month: _____ Year: _____ Approved: YES NO By: _____