

THE FACE OF THIS CHECK HAS A BLUE BACKGROUND AND MICROPRESSING IN THE BORDER. SEE BACK FOR ADDITIONAL SECURITY FEATURES

F-12

Lifetouch
Lifetouch National School Studios
11000 Viking Drive
Eden Prairie, MN 55344

RHOM

Wells Fargo Bank, N.A.
115 Hospital Drive
Van Wert, OH 45891
56-382/412

Date
11/15/2017

Number
3184305

\$660.40

Amount
\$ *****660.40

PAY EXACTLY **Six Hundred Sixty and 40/100 Dollars**

PAY
TO THE
ORDER
OF

FRANKLIN ELEMENTARY SCHOOL
ATTN: LATEE WALTON-MCCLEOD
1550 LINDY TER
UNION NJ 07083

[Signature]

⑈03184305⑈ ⑆041203824⑆ 9600017544⑈

F-11



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): James Masser Date: 2/5/18

Club Name: UHSPAC's Advanced Musical Theatre Class

Acct. No.: 01 Adv. Theatre Acct. Balance to Date: _____

Type of Fund Raiser: Bagging Event

Purpose of Fund Raiser: Raise money for our student-run production of Avenue Q: School Edition

Start Date of Project: 3-31-18 Completion Date of Project: 3-31-18

Date of Sale(s): From 3-31-18 To: 3-31-18

Sale Area/Location: Shoprite on Highway 22

Sale will be monitored by: Don & Nancy Erdman

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

Vendor Representative's Name: Maureen Smith

Vendor Business Name: Shoprite

Vendor Address: 2401D US Highway 22 W

City: Union State & Zip code: NJ, 07083

Unit Cost of Product/Service: \$ 0

Proposal Sale Price: \$ 0

Total Cost of all Products Not to Exceed: \$ 0

Minimum Total Profit Expected: \$ 900

Faculty Advisor Signature

Signature: _____ Date: 2/5/18

Vice Principal Signature

Signature: _____ Date: 2/7/18

School Treasure Signature

Signature: _____ Date: 2/7/18

Placed on BOE Meeting Agenda for:

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

Bagging for Charity Request Form

Village Super Market, Inc.



The bagging for charity program at Village Super Market, gives local non-profit, non-religious affiliates, organizations, and schools the opportunity to collect money while providing a service for our customers and our store.

Please make your request at least 1 month in advance. Only one Saturday and one Sunday slot available per month, slots are given out on a first come first serve basis. A store manager will contact you about availability within 1 week after request is submitted.

- ✓ Make sure you have at least 5 and no more than 10 representatives present at a time.
- ✓ All representatives must be 14 years of age or older – parents are unable to bag in place of their minor children.
- ✓ All representatives must be in matching and labeled shirts that identify the organization.
- ✓ Arrive 20 minutes prior to your scheduled start time so our front end manager can give your team a bagging orientation.
- ✓ Please bring a positive attitude with you that day! Remember, you will be the last people our customers see on their shopping trip. A smile and "thank you and have a nice day" go a long way.

Today's Date: 2/5/18

Name of Organization: UHSPAC's Advanced Musical Theatre Class

Please briefly describe your organization (include location):

Located at 2350 North 3rd Street, Union NJ 07083

We are a class of students who plan to do some kind of performing in college or as a career.

Contact person: Nicole Ribau

Contact email: nribau01@gmail.com

Contact phone: (908) 410-7576

Requested Dates (Saturdays and Sundays only): 3/31/18



We would like to share your upcoming bagging event with our shoppers! Does your organization have a Facebook page we could tag you in? If so, please list your Facebook page and organization website below.

UHSPAC.com

Facebook: UHSPAC



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): L. Grasso & L. Lembyk Date: 2/7/18

Club Name: Football & Boys Soccer

Acct. No.: 3240 & 3380 Acct. Balance to Date: *Football *1071.02

Type of Fund Raiser: Canning

Purpose of Fund Raiser: Support Teams for snacks after games practices

Start Date of Project: March 1 Completion Date of Project: June 25

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

Sale Area/Location: TBA

Sale will be monitored by: L. Grasso & Lester Lembyk

***** 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: 2/7/18

Vice Principal Signature

Signature: [Signature] Date: _____

School Treasure Signature

Signature: [Signature] Date: 2/7/18

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Cesar Vega Date: 2/7/18

Club Name: Volleyball - Boys Club

Acct. No.: 3335 Acct. Balance to Date: \$ 55.14

Type of Fund Raiser: snack sale

Purpose of Fund Raiser: To benefit Volleyball team

Start Date of Project: Feb thru June Completion Date of Project: end of year

Date of Sale(s): From Feb To: June

Sale Area/Location: small gym

Sale will be monitored by: C. Vega

***** 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: 2/7/18

Vice Principal Signature

Signature: [Signature] Date: 2/7/18

School Treasure Signature

Signature: [Signature] Date: _____

Placed on BOE Meeting Agenda for:

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