



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Robert Thompson Date: 1/18/24

Club Name: Baseball

Acct. No.: 3350 Acct. Balance to Date: _____

Type of Fund Raiser: Online Clothing Sale

Purpose of Fund Raiser: to raise money to purchase extra clothing for players

Start Date of Project: 2/21/24 Completion Date of Project: 6/18/24

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

Sale Area/Location: _____

Sale will be monitored by: _____

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

Vendor Representative's Name: BSN Sports

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: 1/18/2024

Vice Principal Signature

Signature: [Signature] Date: 1/18/24

School Treasure Signature

Signature: [Signature] Date: 1/18/2024

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Lou Clemente Date: 1/18/24

Club Name: Baseball

Acct. No.: 3350 Acct. Balance to Date: _____

Type of Fund Raiser: Leading Edge Fundraising

Purpose of Fund Raiser: Raise money for end of year baseball events / senior night necessities

Start Date of Project: 3/6/24 Completion Date of Project: 5/21/24

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

Sale Area/Location: _____

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: Lou Clemente Date: 1/18/2024

Vice Principal Signature

Signature: [Signature] Date: 1/18/24

School Treasure Signature

Signature: AMM BRANCO Date: 1/18/2024

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Lou Clemente Date: 1/18/24

Club Name: Baseball

Acct. No.: 3350 Acct. Balance to Date: _____

Type of Fund Raiser: Online Blast Fundraiser

Purpose of Fund Raiser: Raise money for the baseball team to attend clinics and end of year celebrations/award dinner.

Start Date of Project: 3/01/24 Completion Date of Project: 6/18/24

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

Sale Area/Location: _____

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: Louis Clemente Date: 1/18/2024

Vice Principal Signature

Signature: [Signature] Date: 1/18/24

School Treasure Signature

Signature: [Signature] Date: 1/18/2024

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Tony Stewart Date: 1/18/23

Club Name: Winter/Spring track

Acct. No.: 3270 Acct. Balance to Date: _____

Type of Fund Raiser: Leading edge go fund me

Purpose of Fund Raiser: Nationals Track meet support, End of year party, End of Hoop year awards + banquet and apparel.

Start Date of Project: 2-21-24 Completion Date of Project: June 2024

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

Sale Area/Location: _____

Sale will be monitored by: Myself and Leading edge (Tony Stewart)

***** 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: Tony Stewart Date: 1/18/23

Vice Principal Signature

Signature: _____ Date: 1/18/23

School Treasure Signature

Signature: Anne Branes Date: 1/24/24

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Antonia Peralta Date: 1/2/24 Club Name: Nat Spanish Honor Society

Acct. No.: 2032

Acct. Balance to Date: \$909.23

Type of Fund Raiser: Food Drive

Purpose of Fund Raiser: Collect canned food for food drive.

Start Date of Project: April 2024 / Completion Date of Project: April 2024

Date of Sale(s): From: April 2024 To: April 2024

Sale Area/Location: UHS (Sale will be monitored by: Antonia Peralta)

*****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:

Antonia Peralta

Date: 1/2/24

Vice Principal Signature

Signature:

[Handwritten Signature]

Date: 1/2/24

School Treasure Signature

Signature:

[Handwritten Signature]

Date: 1/2/24

Placed on BOE Meeting Agenda for:

Month: Year: Approved:	YES NO	By:
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UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Antonia Peralta Date: 1/2/24 Club Name: Nat Spanish Honor Society

Acct. No.: 2032 Acct. Balance to Date: \$909.23

Type of Fund Raiser: Latin Dance Night

Purpose of Fund Raiser: Latin dance class night to raise funds for the Society.

Start Date of Project: March 2024 / Completion Date of Project: March 2024

Date of Sale(s): From To: March 2024

Sale Area/Location: UHS (Sale will be monitored by: Antonia Peralta)

*****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:\$5.00

Total Cost of all Products Not to Exceed: \$ 500.00

Minimum Total Profit Expected: \$ 50.00

Faculty Advisor Signature

Signature:

Antonia Peralta

Date: 1/2/24

Vice Principal Signature

Signature:

W. [Signature]

Date: 1/2/24

School Treasure Signature

Signature:

[Signature]

Date: 1/2/24

Placed on BOE Meeting Agenda for:

Month: Year: Approved:	YES NO
	By:



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Antonia Peralta Date: 1/2/24 Club Name: Nat Spanish Honor Society

Acct. No.: 2032 Acct. Balance to Date: \$909.23

Type of Fund Raiser: Tshirt/Sweatshirt sale

Purpose of Fund Raiser: Sell tshirt/sweatshirts to raise funds for the Society within the society.

Start Date of Project: February 2024 / Completion Date of Project: February 2024

Date of Sale(s): From February 2024 To: February 2024

Sale Area/Location: UHS (Sale will be monitored by: Antonia Peralta)

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

Vendor Representative's Name:

Vendor Business Name: AATSP

Vendor Address: <https://aatsp-store.com/>

City: State & Zip code:

Unit Cost of Product/Service: \$35.00- sweatshirt, \$14.50- tshirt

Proposal Sale Price: \$37.00- sweatshirt, \$20.00- tshirt

Total Cost of all Products Not to Exceed: \$ 500.00

Minimum Total Profit Expected: \$ 50.00

Faculty Advisor Signature

Signature:

Antonia Peralta

Date: 1/2/24

Vice Principal Signature

Signature:

[Handwritten Signature]

Date: 1/2/24

School Treasure Signature

Signature:

[Handwritten Signature]

Date: 1/2/24

Placed on BOE Meeting Agenda for:

Month: Year: Approved:	YES NO
	By:



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Antonia Peralta Date: 1/2/24 Club Name: Nat Spanish Honor Society

Acct. No.: 2032 Acct. Balance to Date: \$909.23

Type of Fund Raiser: Inductions

Purpose of Fund Raiser: To induct students

Start Date of Project: May 2024 / Completion Date of Project: May 2024

Date of Sale(s): From May 2024 To: May 2024

Sale Area/Location: UHS

*****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:

Antonia Peralta

Date: 1/2/24

Vice Principal Signature

Signature:

[Handwritten Signature]

Date: 1/2/24

School Treasure Signature

Signature:

[Handwritten Signature]

Date: 1/2/24

Placed on BOE Meeting Agenda for:

Month: Year: Approved:	YES NO
	By:



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Dana Meixner Date: 1/3/24
 Club Name: Environment / Ecology Club
 Acct. No.: _____ Acct. Balance to Date: _____

Type of Fund Raiser: Buy a day Calendar fundraiser
 Purpose of Fund Raiser: To provide supplies to assist with recycling / club activities

Start Date of Project: January 2024 - June Completion Date of Project: June 2024
 Date of Sale(s).....From: Jan. & June 2024 To: _____

Sale Area/Location: Union HS & parents / friends.
 Sale will be monitored by: D. Meixner

***** 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>1/3/24</u>
Principal/Vice Principal Signature	
Signature: <u>[Signature]</u>	Date: <u>1/4/24</u>
School Treasurer Signature	
Signature: _____	Date: _____
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Dayana Langley Date: 1/2/24
 Club Name: Cheerleading
 Acct. No.: _____ Acct. Balance to Date: _____

Type of Fund Raiser: Blast Athletics
 Purpose of Fund Raiser: Cheer gear, new uniforms, end of the year celebration, cheer camp, cheer stunt clinic, competition fees

Start Date of Project: 1/8/24 Completion Date of Project: 6/19/24
 Date of Sale(s).....From: 1/8/24 To: 6/19/24

Sale Area/Location: _____
 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: <u>[Signature]</u>	Date: <u>1/2/24</u>
Principal/Vice Principal Signature	
Signature: <u>[Signature]</u>	Date: <u>1/8/24</u>
School Treasurer Signature	
Signature: <u>[Signature]</u>	Date: <u>1/8/24</u>
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____	Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO
By: _____	



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Patricia Bridges Date: 1/8/2024
 Club Name: Seekers Club
 Acct. No.: _____ Acct. Balance to Date: _____

Type of Fund Raiser: Candy grams
 Purpose of Fund Raiser: To raise money for a club trip in the Spring to Sight + Sound

Start Date of Project: February 1 Completion Date of Project: February 29
 Date of Sale(s).....From: February 14 To: February 21

Sale Area/Location: Front Lobby + Rock Entrance
 Sale will be monitored by: P. Bridges

***** 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>1/8/24</u>
Principal/Vice Principal Signature	
Signature: <u>[Signature]</u>	Date: <u>1/8/24</u>
School Treasurer Signature	
Signature: <u>[Signature]</u>	Date: <u>1/3/24</u>
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): EDWARD BOFFA Date: 1-26-2024
 Club Name: INTERACT CLUB
 Acct. No.: _____ Acct. Balance to Date: _____

Type of Fund Raiser: CANDY SALE (GERTRUDE HAWK)
 Purpose of Fund Raiser: TO RAISE FUNDS TO SUPPORT BOTH LOCAL AND INTERNATIONAL PROJECTS/CHARITIES REQUIREMENT FOR INTERACT CLUBS BY ROTARY INTERNATIONAL

Start Date of Project: 3-1-2024 Completion Date of Project: 5-30-2024
 Date of Sale(s).....From: 3-1-2024 To: 5-30-2024

Sale Area/Location: BEFORE AND AFTER SCHOOL, OFF PREMISES
 Sale will be monitored by: EDWARD BOFFA

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

Vendor Representative's Name: N/A
 Vendor Business Name: GERTRUDE HAWK CHOCOLATES
 Vendor Address: 9 KEYSSTONE PARK
 City: State & Zip code: DUNMORE PA 18512
 Unit Cost of Product/Service: \$ 1.00
 Proposal Sale Price: \$ 2.00
 Total Cost of all Products Not to Exceed: \$ _____
 Minimum Total Profit Expected: \$ 50% OF PROCEEDS WITH A 750.00 GOAL

Faculty Advisor Signature	
Signature: <u>Edward Boffa</u>	Date: <u>1/26/2024</u>
Principal/Vice Principal Signature	
Signature: <u>Willis</u>	Date: <u>1/26/24</u>
School Treasurer Signature	
Signature: <u>[Signature]</u>	Date: <u>1/26/24</u>
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____

JEFFERSON SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Fatima DeCorte Date: 1/18/23

Club Name: PBSIS

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

Type of Fund Raiser: PBSIS rewards

Purpose of Fund Raiser: raise funds for PBSIS rewards - sell Valentine's treats during lunch

Start Date of Project: 2/14/24 Completion Date of Project: 2/16/24

Date of Sale(s): From 2/14/24 To: 2/16/24

Sale Area/Location: Cafeteria

Sale will be monitored by: F. DeCorte

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

Vendor Representative's Name: Amazon

Vendor Business Name: Amazon

Vendor Address: NYC

City: NYC State & Zip code: NYC

Unit Cost of Product/Service: \$ 0.50

Proposal Sale Price: \$ 1.00

Total Cost of all Products Not to Exceed: \$ 135.12

Minimum Total Profit Expected: \$ 120.00

Faculty Advisor Signature

Signature: [Signature] Date: 1/18/24

(Vice) Principal Signature

Signature: [Signature] Date: 1/22/24

School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

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

WASHINGTON ELEMENTARY SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

RECEIVED
1/8/2024

Applicant Information

Faculty Member (s): Michael Riley, Jen CRANE Date: 1-5-24

Club Name: WES Student Council

Acct. No.: 2004 Acct. Balance to Date: \$2943.00

Type of Fund Raiser: Student Art contest

Purpose of Fund Raiser: To raise money for charity - philanthropic causes

Start Date of Project: 4-1-24 Completion Date of Project: 6-1-24

Date of Sale(s): From 4-1-24 To: 6-1-24

Sale Area/Location: WES

Sale will be monitored by: Michael Riley, Jen Crane

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

Vendor Representative's Name: NA

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 Riley Date: 1-5-24

(Vice) Principal Signature

Signature: _____ Date: 1-5-24

School Treasure Signature

Signature: Mary Richards Date: 1-5-24

Placed on BOE Meeting Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Anna D'Achille Date: 1/26/24

Club Name: Musical Production

Acct. No.: 41 Acct. Balance to Date: \$ 4547.54

Type of Fund Raiser: Bake Sales (weekly)

Purpose of Fund Raiser: To raise funds for spring musical.

Start Date of Project: 2/21/24 Completion Date of Project: 3/26/24

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

Sale Area/Location: KMS main lobby

Sale will be monitored by: Anna D'Achille

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

Vendor Representative's Name: N/A

Vendor Business Name: N/A - Items donated by musical

Vendor Address: production members

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

Unit Cost of Product/Service: \$ 0.00

Proposal Sale Price: \$ 1-2.00 per item

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

Minimum Total Profit Expected: \$ 50.00

Faculty Advisor Signature

Signature: Anna D'Achille Date: 1/30/24

Principal Signature

Signature: [Signature] Date: 1/30/24

School Treasure Signature

Signature: [Signature] Date: 1/26/24

Placed on BOE Meeting Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant's Information

Faculty Member (s): Anna O'Achille Date: 1/26/24

Club Name: Musical Production

Acct. No.: 41 Acct. Balance to Date: \$4547.54

Type of Fund Raiser: Play costumes

Purpose of Fund Raiser: To collect money from cast members to cover cost of student play costumes for spring musical

Start Date of Project: 2/21/24 Completion Date of Project: 3/16/24

Date of Sale(s): From 2/21/24 To: 3/16/24

Sale Area/Location: Auditorium

Sale will be monitored by: Anna O'Achille

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

Vendor Representative's Name: N/A

Vendor Business Name: N/A

Vendor Address: N/A

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

Unit Cost of Product/Service: \$ 5-75 per student

Proposal Sale Price: \$ N/A

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

Minimum Total Profit Expected: \$ 400

Faculty Advisor Signature

Signature: [Signature] Date: 1/30/24

Principal Signature

Signature: [Signature] Date: 1/30/24

School Treasure Signature

Signature: [Signature] Date: 1/26/24

Placed on BOE Meeting/Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Anna D'Achille Date: 1/26/24

Club Name: Musical Production

Acct. No.: 41 Acct. Balance to Date: \$4547.54

Type of Fund Raiser: Program Ad sales

Purpose of Fund Raiser: to raise funds for spring musical

Start Date of Project: 2/21/24 Completion Date of Project: 3/16/24

Date of Sale(s): From 2/21/24 To: 3/16/24

Sale Area/Location: Google Form

Sale will be monitored by: Anna D'Achille

*****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: \$ 15. - 150.00 per Ad

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

Minimum Total Profit Expected: \$ 500.00

Faculty Advisor Signature

Signature: Anna D'Achille Date: 1/30/24

Principal Signature

Signature: [Signature] Date: 1/30/24

School Treasure Signature

Signature: [Signature] Date: 1/26/24

Placed on BOE Meeting Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant's Information

Faculty Member (s): Anna D'Achille Date: 1/26/24

Club Name: musical production

Acct. No.: 41 Acct. Balance to Date: \$4547.54

Type of Fund Raiser: Dress Down Days (KMS staff)

Purpose of Fund Raiser: To raise funds for spring musical

Start Date of Project: 2/21/24 Completion Date of Project: 3/16/24

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

Sale Area/Location: N/A

Sale will be monitored by: N/A

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

Vendor Representative's Name: N/A

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: \$ 5

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

Minimum Total Profit Expected: \$ 50.00

Faculty Advisor Signature

Signature: Anna Williams Date: 1/30/24

Principal Signature

Signature: [Signature] Date: 1/20/24

School Treasure Signature

Signature: [Signature] Date: 1/26/24

Placed on BOE Meeting Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Anna D'Achille Date: 1/26/24

Club Name: Musical Production

Acct. No.: 41 Acct. Balance to Date: \$ 4547.54

Type of Fund Raiser: T-Shirt sale

Purpose of Fund Raiser: To raise funds for Spring musical

Start Date of Project: 2/21/24 Completion Date of Project: 3/16/24

Date of Sale(s): From 2/21/24 To: 3/16/24

Sale Area/Location: various - form to be filled out

Sale will be monitored by: Anna D'Achille

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

Vendor Representative's Name: Creations By SAHM - Jess (MO)

Vendor Business Name: Creations By SAHM

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ 10

Proposal Sale Price: \$ 20 per t-shirt

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

Minimum Total Profit Expected: \$ 100.00

Faculty Advisor Signature

Signature: Anna D'Achille Date: 1/30/24

Principal Signature

Signature: [Signature] Date: 1/30/24

School Treasure Signature

Signature: [Signature] Date: 1/26/24

Placed on BOE Meeting/Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Diana Fasano & Madeline Yatsko Date: 1/29/24

Club Name: National Junior Honor Society

Acct. No.: 18 Acct. Balance to Date: \$917.02

Type of Fund Raiser: 3v3 Basketball Tournament/March Madness

Purpose of Fund Raiser: For NJHS and Friends of Rachel Club to raise money for a charity selected by the student body

Start Date of Project: 3/11/24 Completion Date of Project: 3/15/24

Date of Sale(s): From 3/11/24 To: 3/15/24

Sale Area/Location: N/A

Sale will be monitored by: Madeline Yatsko

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

Vendor Representative's Name: N/A

Vendor Business Name: N/A

Vendor Address: N/A

City: N/A State & Zip code: MA

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

Proposal Sale Price: \$ 3 to enter tournament per team

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

Minimum Total Profit Expected: \$ 50.00

Faculty Advisor Signature

Signature: Madeline Yatsko Date: 1/29/24

Principal Signature

Signature: [Signature] Date: 1/31/24

School Treasure Signature

Signature: [Signature] Date: 1/29/24

Placed on BOE Meeting Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Diana Fusano & Madeline Yatsko Date: 1/29/24

Club Name: National Jr Honor Society

Acct. No.: 18 Acct. Balance to Date: \$917.02

Type of Fund Raiser: Penny Wars / March Madness

Purpose of Fund Raiser: for NJHS and Friends of Rachel Club to raise money for a charity selected by the student body.

Start Date of Project: 3/4/24 Completion Date of Project: 3/8/24

Date of Sale(s): From 3/4/24 To: 3/8/24

Sale Area/Location: _____

Sale will be monitored by: _____

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

Vendor Representative's Name: N/A

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: \$ N/A

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

Minimum Total Profit Expected: \$ 50.00

Faculty Advisor Signature

Signature: Madeline Yatsko Date: 1/29/24

Principal Signature

Signature: [Signature] Date: 4/24/24

School Treasure Signature

Signature: [Signature] Date: 1/29/24

Placed on BOE Meeting Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Diana Fasano & Madeline Yatsko Date: 1/29/24

Club Name: National Junior Honor Society

Acct. No.: 18 Acct. Balance to Date: \$917.02

Type of Fund Raiser: Volleyball Tournament / March Madness

Purpose of Fund Raiser: For NJHS and Friends of Bechel Club to raise money for a charity selected by student body.

Start Date of Project: 3/18/24 Completion Date of Project: 3/22/24

Date of Sale(s): From 3/18/24 To: 3/22/24

Sale Area/Location: n/a

Sale will be monitored by: Madeline Yatsko

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

Vendor Representative's Name: N/A

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: \$ 4 to enter tournament per team

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

Minimum Total Profit Expected: \$ 50.00

Faculty Advisor Signature

Signature: Madeline Yatsko Date: 1/29/24

Principal Signature

Signature: [Signature] Date: 1/29/24

School Treasure Signature

Signature: [Signature] Date: 1/29/24

Placed on BOE Meeting/Agenda for:

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