

F-11

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Karen Gold Date: 1/25/23

Club Name: Spanish Club

Acct. No.: TBD Acct. Balance to Date: TBD

Type of Fund Raiser: "Salsa class"

Purpose of Fund Raiser: spanish club students will host salsa lessons for anyone interested. Tickets for admission will be sold.

Start Date of Project: 4/4/23 Completion Date of Project: 4/4/23

Date of Sale(s): From 3/21/23 To: 4/4/23

Sale Area/Location: Kms / front door (day of event)

Sale will be monitored by: Karen Gold

******* 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: \$ 0.00

Proposal Sale Price: \$ 3-5.00 per ticket

Total Cost of all Products Not to Exceed: \$ 0.00

Minimum Total Profit Expected: \$ 30.00

Faculty Advisor Signature

Signature: [Signature] Date: 1/25/2023

Principal Signature

Signature: [Signature] Date: 1/31/23

School Treasure Signature

Signature: [Signature] Date: 1/21/23

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Ashley B. Carr Date: 2/13/23

Club Name: Dance

Acct. No.: 2083 Acct. Balance to Date: _____

Type of Fund Raiser: Pot of Gold

Purpose of Fund Raiser: The purpose of this fundraiser is to raise funds for future costumes and potential performance opportunity.

Start Date of Project: 3/1/23 Completion Date of Project: 3/30/23

Date of Sale(s): From 3/1/23 To: 3/30/23

Sale Area/Location: Union High School

Sale will be monitored by: Ashley Carr

*****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: \$ _____

Proposal Sale Price: \$ _____

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

Minimum Total Profit Expected: \$ _____

Faculty Advisor Signature

Signature: Ashley B. Carr Date: 2/13/23

Vice Principal Signature

Signature: Small Date: 2/15/23

School Treasure Signature

Signature: Jane D. Beso Date: 2/23/23

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 Bobertz Date: February 22, 2023

Club Name: UMatter

Acct. No.: 2005

Acct. Balance to Date: \$356.44

Type of Fund Raiser: Clothing Drive/Thrift Shop

Purpose of Fund Raiser: to raise funds for future UMatter community building projects

Start Date of Project: March 1, 2023 Completion Date of Project: April 29, 2023

Date of Sale(s): From April 29, 2023 To: April 29, 2023

Sale Area/Location: UHS Small Gym

Sale will be monitored by: Dana Bobertz

***** 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: *Dana Bobertz* Date: February 22, 2023

Vice Principal Signature

Signature: *Dr. Donovan Smalls* Date: February 23, 2023

School Treasure Signature

Signature: *Jawa Dimes* Date: 2/23/23

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Kaplan, McMahon, Menders Date: 2/24/23

Club Name: Senior Class

Acct. No.: 2227 Acct. Balance to Date: _____

Type of Fund Raiser: Crock Jibbitz

Purpose of Fund Raiser: Raise money for Senior Class events

Start Date of Project: 3/20/23 Completion Date of Project: 6/20/23

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

Sale Area/Location: UHS

Sale will be monitored by: Kaplan, McMahon, Menders

*****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: 2/24/23

Vice Principal Signature

Signature: [Signature] Date: 2/24/23

School Treasure Signature

Signature: [Signature] Date: 2/24/23

Placed on BOE Meeting Agenda for:

Month: _____	Year: _____	Approved:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	By: _____
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UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Kaplan, McMahon, Menders Date: 2/24/23

Club Name: Senior Class

Acct. No.: 2227 Acct. Balance to Date: _____

Type of Fund Raiser: Pie Day

Purpose of Fund Raiser: Raise money for Senior Events

Start Date of Project: 3/20/23 Completion Date of Project: 6/20/23

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

Sale Area/Location: UHS

Sale will be monitored by: Kaplan, McMahon, Menders

*****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: 2/24/23

Vice Principal Signature

Signature: [Signature] Date: 2/24/23

School Treasure Signature

Signature: [Signature] Date: 2/24/23

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Wyorko Date: 2/24/23

Club Name: Prom

Acct. No.: 2012 Acct. Balance to Date: _____

Type of Fund Raiser: Apparel

Purpose of Fund Raiser: Raise money for Prom

Start Date of Project: 3/20/23 Completion Date of Project: 6/20/23

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

Sale Area/Location: BSN

Sale will be monitored by: Wyorko

*****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: 2/24/23

Vice Principal Signature

Signature: [Signature] Date: 2/24/23

School Treasure Signature

Signature: [Signature] Date: 2/24/23

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Nyarko Date: 2/24/23

Club Name: Prom

Acct. No.: 2012 Acct. Balance to Date: _____

Type of Fund Raiser: April Showers bring May Flowers

Purpose of Fund Raiser: Raise money for Prom

Start Date of Project: 3/20/23 Completion Date of Project: 6/20/23

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

Sale Area/Location: UHS

Sale will be monitored by: Nyarko

*****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: 2/24/23

Vice Principal Signature

Signature: [Signature] Date: 2-24-23

School Treasure Signature

Signature: Jawa D. [Signature] Date: 2/24/23

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Jada Nyarko Date: 2/23

Club Name: Prom

Acct. No.: 2012 Acct. Balance to Date: _____

Type of Fund Raiser: Dressdownday

Purpose of Fund Raiser: Raise money for Senior Prom

Start Date of Project: 3/1/23 Completion Date of Project: 6/20/23

Date of Sale(s).....From: 3/1/23 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:	Date: <u>2/24/23</u>
Principal/Vice Principal Signature	
Signature:	Date: <u>2/24/23</u>
School Treasurer Signature	
Signature: <u>Jawa Sides</u>	Date: <u>2/24/23</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): Kohn, Meixner, Musarra Date: 2-24-23

Club Name: Club T.E.S.S.L.O and Play Unified

Acct. No.: 2066 Acct. Balance to Date: _____

Type of Fund Raiser: SONJ Lincoln Tunnel School Challenge 5K

Purpose of Fund Raiser: Play Unified and Club T.E.S.S.L.O give students with and without disabilities the opportunity to participate in inclusive sports/activities to help build an inclusive environment and to help build meaningful, true friendships

Start Date of Project: 3-15-23 Completion Date of Project: 5-15-23

Date of Sale(s): From 3-15-23 To: 5-15-23

Sale Area/Location: G116, G123, district wide

Sale will be monitored by: Kohn, Meixner, Baker, Musarra

***** 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: [Handwritten Signature] Date: 2/24/23

Vice Principal Signature

Signature: [Handwritten Signature] Date: 2-24-23

School Treasure Signature

Signature: [Handwritten Signature] Date: 2/27/23

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information
Faculty Member (s): ERIC TRIPP Date: 02/27/2023

Club Name: FRESHMAN CLASS

Acct. No.: 2230 Acct. Balance to Date: \$592.96

Type of Fund Raiser: SNACK SALE

Purpose of Fund Raiser: RAISE MONEY FOR FRESHMAN CLASS, PROVIDE STUDENTS WITH SNACK ALTERNATIVES NOT AVAILABLE TO THEM THROUGHOUT THE DAY. OR AFTER SCHOOL

Start Date of Project: 03/2023 Completion Date of Project: END OF SCHOOL YEAR

Date of Sale(s): From BOE APPROVAL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL / ROOM C-117

Sale will be monitored by: ERIC TRIPP (HISTORY TEACHER / CLUBS ADVISOR)

*****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: 02/27/2023

Vice Principal Signature

Signature: [Signature] Date: 2/27/2023

School Treasure Signature

Signature: Jane Ariso Date: _____

Placed on BOE Meeting Agenda for:

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



Burnet Middle School STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): S. Paterno Date: 2/23/23

Club Name: 8th Gr. Dance/Picnic Comm

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

Type of Fund Raiser: Choc-covered Pretzels / Fruit Snack Sale

Purpose of Fund Raiser: Raise funds for end of year 8th gr. activities

Start Date of Project: 3/15/23 Completion Date of Project: 4/20/23

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

Sale Area/Location: BMS

Sale will be monitored by: S. Paterno / J. Carvalho

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

Vendor Representative's Name: Karen Susino

Vendor Business Name: Kastle Fundraising

Vendor Address: 3 Cass Street, Suite 5

City: Keyport State & Zip code: NJ 07735

Unit Cost of Product/Service: \$ #144.00/case x 10

Proposal Sale Price: \$ 1 for #2 or 2 for #3

Total Cost of all Products Not to Exceed: \$ 1450.00

Minimum Total Profit Expected: \$ 600.00

Faculty Advisor Signature

Signature: _____ Date: 2/28/23

Vice Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: _____ Date: 2/23/23

Placed on BOE Meeting Agenda for:

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