



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): CARLOS Esquivel Date: 5/4/26
 Club Name: MARCHING BAND
 Acct. No.: 2033 Acct. Balance to Date: 10,000

Type of Fund Raiser: CAR WASH
 Purpose of Fund Raiser: FUNDS FOR 2026 Competitive Season

Start Date of Project: ~~7/11~~ 8/15 Completion Date of Project: 8/15
 Date of Sale(s).....From: ~~7/11~~ 8/15 To: 8/15

Sale Area/Location: Behind OLD BOARD OFFICE 2369 MORRIS
 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: State & Zip code: N/A
 Unit Cost of Product/Service: \$ 0
 Proposal Sale Price: \$ \$10 PER CAR
 Total Cost of all Products Not to Exceed: \$ 0
 Minimum Total Profit Expected: \$ 500

Faculty Advisor Signature	
Signature:	Date: <u>5/4/26</u>
Vice Principal Signature	
Signature:	Date: <u>5/4/26</u>
School Treasurer Signature	
Signature:	Date: <u>5/8/26</u>
Placed on BOE Meeting Agenda For	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____

[NAME OF SCHOOL] STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Julia Saladino Date: 5/7/26

Club Name: Key Club

Acct. No.: #46 Acct. Balance to Date: _____

Type of Fundraiser: Friendship bracelet making

Purpose of Fundraiser: raise funds for DECON

What are you selling? tickets to event

Start Date of Project: June 2026 Completion Date of Project: June 2026

Date of Sale(s): From May 2026 To: June 2026

Sale Area/Location: L105 before & after school

Sale will be monitored by: Julia Saladino

***** 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: Materials will \$ _____

Proposal Sale Price: be donatations \$ 5 ticket / \$7 at door

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

Minimum Total Profit Expected: \$ 250

Faculty Advisor Signature

Signature: [Signature] Date: 5/7/26

(Vice) Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

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