K1/1



	Appl	leantlinformation	
Faculty Member (s): Kohn	; Meixner, Musarra, P. Fos	ter, J. Mincolelli, C. Baker, M. Ingrassia	Date: 10/14/22
Club Name: Play Unified			
Acct. No.:		Acct. Balance to Date:	·
Type of Fund Raiser: <u>Sel</u>	ling snacks		
Purpose of Fund Raiser:	To raise money to give str	udents the opportunity to participate in inc	clusive sports/activities, to engage
		g opportunities, to help build an inclusive	
Start Date of Project:	11-16-2022	Completion Date of Projec	.f. 6-20-22
Date of Sale(s): From	11-16-22	To: 6-20	-22
Sale Area/Location:	G116, G123, B104,	G115 I	
Sale will be monitored by:	Kohn, Meixner, Musa	arra, P. Foster, J. Mincolelli, C. Baker, M. I	Ingrassia
Vendor Address:			
Oity.	Sta	ite & Zip code.	
Unit Cost of Product/Serv	ice:	\$ prices vary per product	
Proposal Sale Price:			
Total Cost of all Products			
Minimum Total Profit Exp	ected:	\$_varies \$150	The state of the s
Signature:	Feaul	ly Advisor Signature	Date: 10 17 72
Signature: Ottobe	OBOMOT	Phidpal Signature	Date: 10/17/2023
Signature:	ure Dilles	Il Theasure Signature SOF Meeting Agendation:	Date: 10 17122-
Month:Ye		YES NO By:_	



	Applicant Information
Faculty Member (s): Kohn, Meixner, Musarra, F	P. Foster, J. Mincolelli, C. Baker, M. Ingrassia Date: 10/14/22
Club Name: Club T.E.S.S.L.O	
Acct. No.:	Acct. Balance to Date:
Type of Fund Raiser: Seasonal/home decora	tions and personalized gift items
Purpose of Fund Raiser: To raise money to g	ive students the opportunity to participate in inclusive sports/activities, to engage
students in social le them build meaning	earning opportunities, to help build an inclusive environment and to help ful, true friendships
Start Date of Project: 11-16-2022	Completion Date of Project: 6-20-22
Date of Sale(s): From 11-16-22	To: 6-20-22
Sale Area/Location: G116, G123, E	3104, G115 and via email
Sale will be monitored by: Kohn, Meixner,	Musarra, P. Foster, J. Mincolelli, C. Baker, M. Ingrassia
*********ATTACH PURLICATIO	N FROM VENDOR OF ITEMS TO BE SOLD********
Vendor Representative's Name:	THOM VENDOR OF THEMS TO BE GOLD
Vendor Business Name:	
Vendor Address:	
City:	State & Zip code:
Unit Cost of Product/Service:	\$ \$5-9
Proposal Sale Price:	\$ 10-15
Total Cost of all Products Not to Exceed:	\$ 400
Minimum Total Profit Expected:	\$ varies \$150
Signature:	Date:
Signature: QUALOS BY	Date: 10/17/2020
Signature: Jawa SiM	hool Treasure Signature Date: 10 17/3-1
Placed	om BOE Meeting Agendation:
Month: Year:	YES NO Approved: By:



Applicant Information

Faculty Member (s): MARJORIE HARGICANE Date: 10 (0 00
Club Name: UHS STEP TEAM Acct. No.: Acct. Balance to Date: # O
Type of Fund Raiser: DORLE GOOD PODCORN Purpose of Fund Raiser: Traise popey for team uniforms, Shirts, & other expenses.
Start Date of Project: 2 15 2003 Completion Date of Project: 2 19 2003 Date of Sale(s)From: 2 15 23 @ 12 PM To: 2 19 23 @ 12 PM
Sale Area/Location: VIRTUAL Sale will be monitored by: ADVISOR & DOUBLE GOOD COVIDANY

Vendor Representative's Name: Vendor Business Name: DOUBLE GOOD 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: \$ 50 90 0 10 10 10 10 10 10 10 10 10 10 10 10
Faculty Advisor Signature
Signature: Date: 18/6/22
Signature: Date: 10 7 22
School Treasurer Signature
Signature: Jama Di Meso Date: 10/12/22
Placed on BOE Meeting Agenda For:
Month: Year: Approved: YES NO By:

Double Good

placed. Each of our unique ultra-premium flavors is handcrafted in small batches We don't pop a kernel until an order is and made to order so that you always receive the freshest popcorn with the perfect crunch.

'Of all the popcorn we tried, Double Good's In Queso Fire was a nearunanimous favorite."

- Food & Wine

"Delicious popcorn ...too good!"

Rachael Ray

"Your popcorn is AAA+. From an expert."

Warren Buffet

"The most awesome snack we've ever

- The Chicago Tribune

Featured On:









Butter Believe It!

Dripping in brown sugar, caramel

and snuggles.

Caramel-Diem

Ready for an episode of salted, creamy crunch?



Holla-Peño

A blaze of spicy perfection with a kick that won't quit.



This creamy cheddar, garlic, onion and jalapeño recipe is built for the bold.

In Queso Fire



My Main Cheese

Little Kettle That Could

Lightly sweet, a little salty,

perfectly crisp.



Drenched in a gooey, velvety blanket of cheesy goodness.





Cracked black pepper and sea

Sergeant Salt & Pepper

Zesty, creamy white cheddar with White Cheddar Go Getter clouds of hot-popped corn.



6-Bag Set

A combination of the following flavors: In Queso Fire, Little Kettle that Could, Butter Believe It1, Caramel-Diem,







A combination of the following flavors: Butter Believe Itl, Caramel-Diem, and

My Main Cheese, and White Cheddar Go Getter.



		Applicant Ir	nformati	on	
Faculty Member (s):		McMohon			Date: 9 16/22
Club Name: UHS	Softball				
Acct. No.:					nce to Date:
Type of Fund Raiser:	Chocolate	Bar Fu	ndraiser		
1.00					and end of the season activity
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitored by:	UF	15			te of Project: 6 30 73
		9			TEMS TO BE SOLD********
Vendor Representative's					
Vendor Business Name:					
Vendor Address:					
City:		State & Zi	p code:		
Unit Cost of Product/Serv	rice:		\$		
Proposal Sale Price:					
Total Cost of all Products	Not to Exceed:				
Minimum Total Profit Exp	ected:		\$		
Signature:	how the	aculty Advis	sor Sigr	nature	Date: 10/18/62
Signature:		Vice Princip	al Sign	ature	Date: 12/13/23
Signature:	re Brat	School Treas A O O ad on BOE M	eeting <i>A</i>	\genda	Date: 10 18 30
Month: Ye	ar:	Approved	YES :	NO	Ву:



Marie Septiment And Automatic Septiment	Applicant	HUI (O) HII EI	((O))		
Faculty Member (s): Shannon	memahon				Date: 9 16 22
Club Name: UHS SoFHbo	41				
Acct. No.:					
Type of Fund Raiser: UHS So	ffball 60	a/			
Purpose of Fund Raiser: <u> </u>	noney for the	progran	n and e	end of the	season activities
Date of Sale(s): From				10:	6/30/23
Sale will be monitored by:	Sha	nnun 1	MyMah	Ŋ	
*******ATTACH PUBLIC	ATION FROM	VENDO	R OF IT	EMS TO BI	E 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 Exce	eed:				
Minimum Total Profit Expected:		\$			
Signature:	Faculty Ad	visor Sig	nature	Date	10/18/72
	Vice Princ	ipal Sigr	nature		1.100
Signature:	6			Date	10/18/22
Signature:	School Tre	asure Sig	gnature	Date	: 018199
P	laced on BOE			for:	
Month: Year:	Approve	YES ed:	NO	Ву:	



		Alabinesintimonis				
Faculty Member (s):	Shannon	rychranon			Date:_	9/14/22
Club Name:	HS Softball					
Acct. No.:		A	cct. Balance to	Date:		
Type of Fund Raiser:	Chip	otle	**********			*********
Purpose of Fund Raiser						
Start Date of Project:	1116	Comp	letion Date of	Project: 6	30/2	73
Date of Sale(s): From		·	To:			
Sale Area/Location:	- Ch	porce				
Sale will be monitored b	y: <u>Sh</u>	annon McM	ahon			
*********ATTAC						
Vandar Panragantatival	Name	IN FROM VENDO	JR OF ITEM	10 BE 3	OLD	
Vendor Representative's	s Name.					
Vendor Business Name:						
Vendor Address: City:		State & Zip code:				
Oity.		_ otate a zip coae.	-			
Unit Cost of Product/Se	rvice:	\$				
Proposal Sale Price:		\$				
Total Cost of all Produc	ts Not to Exceed:					
Minimum Total Profit Ex	rpected:	\$				
Signature:	Jun Mi	aculty Advisor Sig	gnature	Date:	10//	8/22
		/ice Principal Sig	nature		,	11
Signature:				Date:/	0/1	8/22
Signature:	uno Bra	chool Treasure Sign	gnature	Date:(olis	(22
	Placed	on BOE Meeting				
Month: Y	'ear:	Approved:	NO	Ву:		

JEFFERSON SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Faculty Member (s): Fatima DeCor-	Date: 10/17/23
club Name: Jefferson School PB	515
Acct. No.: 502766	Acct. Balance to Date:
Type of Fund Raiser: You've Been M	anked
Purpose of Fund Raiser: To raise fund all students are able to pur Nickels	s for our PBSIS prizes which chase with Blue Knight
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitored by: Tahma DeCarl	To: 11/23/32
************ATTACH PUBLICATION FROM Vendor Representative's Name: Vendor Business Name:	VENDOR OF ITEMS TO BE SOLD********
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:	\$ 0.00 \$ 1.00 \$ 0.00 \$ 200.00
	lvisor Signature
Signature: (Vice) Printing Signature: (Vice) Printing Signature:	Date: 10/17/22 ncipal Signature Date: 10/17/22
Signature:	easure Signature Date:
Placed on BOE Month: Year: Approx	Meeting Agenda for: YES NO red: □ □ By:



Faculty Member (s):	Applicant Info	rmation	Date:	OHULAA
Club Name: MAC TRAM			Date.	chalas
0.0				
Acct. No.: (2000)		Acct. Balance to	Date:	
Type of Fund Raiser:	Gertrude Han	ok Fundro	~ C ~ ~	
Purpose of Fund Raiser:	lise money for a	empention	and Dance	costume
Start Date of Project:	04 14 2022	ompletion Date of F	Project: UMP No A	193
Date of Sale(s): From	01 14,2022 101 High Jahat 1 Cary		JONE 16 9033	<u> </u>
**************************************		IDOR OF ITEMS	S TO BE SOLD**	*******
Vendor Business Name: 1914 Vendor Address: 90 VCO City: 1000000000000000000000000000000000000	tine Park State & Zip co	DdtPA18	512	
Unit Cost of Product/Service:	\$			
Proposal Sale Price:	\$			
Total Cost of all Products Not to E	xceed: \$			
Minimum Total Profit Expected:	\$			
Signature:	Faculty Advisor	Signature	Date:	2
Signature:	Vice Principal S	ignature	Date: (*)/(°(/)	22
Signature: Jaura S	School Treasure		Date:	12->-
Month: Year:	Placed on BOE Meetil YE Approved:	S NO	By:	





	ant Information
Faculty Member (s): Chris Boniface	Date: 10/13/22
Acct. No.: 2020	Acct. Balance to Date: <u>\$ 40</u>
Type of Fund Raiser: Wacky Hat	Wednesday
Purpose of Fund Raiser: To raise ymay	ncy for ski club trips.
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitored by: 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22 1/16/22	Completion Date of Project: 11/16/22 To: 11/16/22 Entrance of School 3 Sk; Club Cabinet
Vendor Representative's Name: Vendor Business Name:	
Unit Cost of Product/Service: Proposal Sale Price: Total Cost of all Products Not to Exceed: Minimum Total Profit Expected:	\$ 0 \$ 1 Students \$ 3 Teachers \$ 0 \$
Signature: Avoit Borland	Principal Signature Principal Signature
Signature: School Signature:	Date: (0/25/22 Treasure Signature Date: しょう シュー
Cond project of the second second	OE Meeting Agenda for: YES NO proved: By:



	Applicant Information
Faculty Member (s):	niface Date: 10/19/22
Club Name: SKi Club	
Acct. No.: 2020	Acct. Balance to Date: \$40
Type of Fund Raiser:	Hawk Chocolate Bar Fundraisor
Purpose of Fund Raiser: To ra Itiddan Vallay SICi	ise money for transportation to Resort.
Date of Sale(s): From	Completion Date of Project: December Letters To: 12/20/22 Prion High School & Town Boniface 3 SKi Club Cabinet
***********ATTACH PUBLICA Vendor Representative's Name:	TION FROM VENDOR OF ITEMS TO BE SOLD*********
Vendor Business Name: 601	trude Hawk
Vendor Address: 901 Keys	
Unit Cost of Product/Service: Proposal Sale Price: Total Cost of all Products Not to Exceeding Minimum Total Profit Expected:	\$ 48 Per 130 x \$ 96 Por 130 x \$ 2400 \$ 2400
Signature:	Faculty Advisor Signature Date: 10/24/22
Signature:	Vice Principal Signature Date: 10/25/22
Signature:	School Treasure Signature Date: 10/25/25
Pl	aced on BOE Meeting Agenda for:
Month: Year:	YES NO Approved:



	Information
Faculty Member (s): Chris Bon Yace	Date: 0/14/22
Club Name: SKi Club	
Acct. No.: 2020	Acct. Balance to Date:
Type of Fund Raiser: Taki/chiPS	Sale
Purpose of Fund Raiser: To raise to Hidden Valley Sti Res	monoy for transportation
Sale Area/Location: Throughout Sale will be monitored by: M. Bonis	Completion Date of Project: 1/15/23 To: 1/15/23 Union High school Cace \$ 5Ki (lub (abinat
	VENDOR OF ITEMS TO BE SOLD********
Vendor Representative's Name:	VENDOR OF ITEMS TO BE GOLD
Vendor Business Name:	
Vendor Address: State &	Zip code:
Unit Cost of Product/Service: Proposal Sale Price: Total Cost of all Products Not to Exceed: Minimum Total Profit Expected:	\$\$ \$\$ \$
Signature: With Bentlew	visor Signature Date: 10/24/27
Signature:	Date: 0/25/22
Signature: awa Si Mass	asure Signature Date: 10/25/22
Placed on BOE	Meeting Agenda for:
Month: Year: Approve	YES NO ed: By:

Faculty Member (s): A. D'A(M) (7) - C(V) 0 Date: 10/25/2	3
Paculty Monibol (s). 1. Diamin of the control of th	
Club Name: MUSIC DEPARTMENT	-
Acct. No.: Acct. Balance to Date: 8781. CC	_
Type of Fund Raiser: ASNIGY Facms - Cheesteake Cookies, Pils	" (
Purpose of Fund Ralser: To raise finds for annual Music Ocpaning to porrey park for competition	1C14
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitored by: Start Date of Project: 12/30/22 To: 12/30/22 To: 12/30/22 To: 12/30/22 To: 12/30/22 To: 12/30/22 Suppose A-Diamonifies	
***********ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD************************************	MI
Vendor Business Name: ASNEY Fams, Inc.	
Vendor Address: 220 West PKWU #1+2. City: 10mpton Plans State & Zip code: 10 07449	-
Unit Cost of Product/Service: Proposal Sale Price: Total Cost of all Products Not to Exceed: Minimum Total Profit Expected: \$ Based on Salts (individual) \$ Minimum Total Profit Expected:	- - -
Signature: Omno to Uttibully Advisor Signature Date: 0/25//.2	<u>高</u>
Signature:	a
School Treasure/Signature Date: Date:	

Faculty Member (s): 111 Rible Date: 10 30 30
Club Name: Art Club
Acct, No.: 51 Acct, Balance to Date: \$1093.00
Type of Fund Raiser: Bake Sales (Weekly).
Purpose of Fund Ralser: Raise money to cover cost of Art Show & take art club members on field trip.
Start Date of Project: Date of Sale(s): From Sale Area/Location: Completion Date of Project: (0/20/23 To: (0/20/23
Sale will be monitored by: ********************************* Vendor Representative's Name: Vendor Business Name: Name
Vendor Address: NA State & Zip code: NA
Unit Cost of Product/Service: Proposal Sale Price: Total Cost of all Products Not to Exceed: Minimum Total Profit Expected: \$ DONCTIONS from Club members \$ 1-2.00 per 11tem \$ 50.00
Signature; Date: 10 20 22
Signature; Principal Signature Date: 10/20/22
School Treasure/Signature Date:
Placed on EQE Weeting Agentia for: Yes NO

Applicant Information
Faculty Member (8): 40006 LOTE 0 Date: 10 11133
Club Name: MUSICOL PROJUCTION
Acct. No.: 4 Acct, Balance to Date: 54, 422.22
Type of Fund Ralser: T-Shirt Sale
Purpose of Fund Ralser: TO MISE PUNCS FOR Spring musical.
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitored by: Start Date of Project: 41123 Completion Date of Project: 41123 To: 41123 Example to the sale of Project: 41123 To: 41123

Vendor Business Name: CYCCTICOS by SAHM
Vendor Address: 30 34 OKDET PKUN State & Zip code: WI 07039
Init Cost of Product/Service: Proposal Sale Price: Initial Cost of all Products Not to Exceed: Initial Cost of all Profit Expected: 10.06 15.06
ignature: Date:
Ignature: Date:
Ignature: Date: Date:
Riacetion EOSIMesting/Acendro for Yes No South: Year: Approved: □ □ By:

一次を持ちまして、大大田子 一丁

Faculty Member (s):	Applicant Miormation Date: 10	117/2
Club Name: MUSICAL		+
Acct. No.: 4)	Acct, Balance to Date: \$ 4,422	-66
Two of Fund Pology OCC	**************************************	********
Type of Fund Ralser:	3	
Purpose of Fund Raiser:	aise Funds for spring musical.	
	11/22/22 2 10 21 12 14/12)
Start Date of Project: Date of Sale(s): From	11 23 22 Completion Date of Project: 4 1 23 1 1 23 24 23	\$
Sale Area/Location:	Kallameen	
Sale will be monitored by:	Yvonne Lorenzo	
TANKARARARARARARARARARARARARARARARARARARA	JBLICATION FROM VENDOR OF ITEMS TO BE SOLD******	****
Vendor Representative's Nam		
Vendor Business Name: N	IA	
Vendor Address: NA	State & Zip code: NA	
	£ 0 00	
Unit Cost of Product/Service: Proposal Sale Price:	\$ 15.00 - \$150,00	
Total Cost of all Products Not		
Minimum Total Profit Expecte	\$ 1500,00	
Signalure;	Faculty Advisor Signature Date:	
Signature:	Principal Signature Date:	
Signature;	Signob Treasure Signature Date: Date:	
	Rlaced on EQE Weeling Agenda for	
BASINETING TOOM ROBERS TO WITH A STRUCTURE WATER	YES NO Approved: By:	

	Applican (III omatio)
Faculty Member (8): 4UCOO	R 10,150 Date: 10,17,33
Club Name: MUSICAL	Production
Acct. No.: 4	Acct, Balance to Date: \$4,422.22
Type of Fund Ralser: Plan	4 COSTUDOS
Purpose of Fund Ralser: 10 STUCKENT COSTUM	Collect money to cover costs of
Start Date of Project: Date of Sale(s); From Sale Area/Location:	1 23 22 Gompletlon Date of Project: 4 1 23 1 23 22 To: 4 1 23 200000 1 0 00077
Sale will be monitored by: ***********************************	
City: NA	State & Zip code: NA
Init Cost of Product/Service; Proposal Sale Price; Total Cost of all Products Not to E Ninimum Total Profit Expected;	\$ 40.00 \$ 40.00 \$ 5.500.00
Signature;	Faculty Advisor Signature Date:
Signature:	() Principal Signature Date:
Ignature:	School Treasure Signature Date:
A STATE OF THE PARTY OF THE PAR	Placed on BOE Meeting/Agenda for: YES NO _
lonth: Year:	Approved: By:

the western that is weather than

Faculty Member (s):	nikilitometto))
Club Name: MUSICAL Production)
Acct. No.: 4	Acct, Balance to Date: \$4,433.23
Type of Fund Ralser: DVD SOLES	
Purpose of Fund Raiser: 10 COVER COS	ts of DVD copies for
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitored by:	Completion Date of Project: 5 1 23 To: 5
**************************************	VENDOR OF ITEMS TO BE SOLD**********
City: State &	Zip code:
Jnit Cost of Product/Service; Proposal Sale Price; Fotal Cost of all Products Not to Exceed; Minimum Total Profit Expected;	\$ 5.00 per student \$ 5.00 \$ 5.00 \$ 50.00
Faculty Atl	visor Signature Date:
Signature: Prince	ipal Signature Date:
Schop Treasure:	osure Signature Date: 0 1 3 3
Rlaced on BOE	SOCIETY AND ACTION OF THE PROPERTY OF THE PROP
Nonth: Year: Approve	YES NO d:

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			Applicant	Mome	(lon)			
Faculty Mon	nber (s):(inne Lo	renzo				Date: 10	2/11/59
Club Name:	Musical	Produ	choo		····			
Acct. No.:	41			. Ac	cf. Balance	to Date:	,4,423	1.22
Type of Fund	d Ralser:	1855 I	2020	(77	11. KL	ns st	aff).	
Purpose of F	und Ralser: 🎵	o rais	e fin	as_	for s	pring	MUS	ical.
Start Date of Date of Sale(Sale Area <i>l</i> Lo	s): From	NOTION	S TBD ameen		tion Date o	3/3	30/23	9 3
Sale will be n	nonItored by:	JUGGE	re lo	renz	DIAN	ISSA D	Delillo	
Vendor Repr	***ATTACH P esentative's Nam	ne:	N FROM V	ENDO	OF ITE	VIS TO BE	SOLD***	*******
Vendor Busli	ness Name:	40						
Vendor Addro	AIA :aas		_ State & Zip	code	NIA			
Jnit Cost of F	Product/Service:		\$	5.0	56			
Proposal Sale			\$	5.0				
	all Products Not al Profit Expecte		\$		5,00			
Signalure; _		Fa	cully Advis	or Sign	aliire	Date		
Signature;	phi	SAME OF	Principa	l Signa	line is a	Date:		
Signalure; _(Mysz	\$10	iop Treasi	ie Sign	alure	Date:	101111 ₀	
lonth:	Year:	Placed	on E(OEIVE Approved:	YES I	le)ickviori vo □	By:		
					-	-		

THE WAR STATE OF THE STATE OF T

Faculty Member (8): VOODE LOCED ZO	Morme(ion Date: 1011 22
Club Name: Musical Production	
Acct. No.:	Acct, Balance to Date: 54,423,33
Type of Fund Ralser: Bake Sales (DOUTPM)
Purpose of Fund Ralser: To MISE Funds	for spring musical.
Start Date of Project: 11 23 22	Completion Date of Project: 4 1 33
Date of Sale(s): From Sale Area/Location:	main 10001
Sale will be monitored by:	nzo I prama club students

Vendor Address: NA State & Zix	code: NIII
Unit Cost of Product/Service: Proposal Sale Price: Total Cost of all Products Not to Exceed: Minimum Total Profit Expected:	Donnted 1-2 per item NIA 50,00
Faculty Advis	on Signature Date:
Signature: Arincipa	l Signature Date:
Seliool (casi	re/Signature Date:
Receipen EQEMe	Aling/Agendaviore Yes NO D D By:

The product of the product of the

Faculty Member (s): WOODE LOCATO Date: 10					
Club Name: MUDICA) PRODUCTION	11-11-00				
Acct. No.: 41 Acct. Balance to Date: 54,43	4.33				
Type of Fund Ralser: Canay Isaac (Monthly) .					
Purpose of Fund Ralser: TO MISC PLINGS FOR Spring MUSICO	<u> </u>				
	·				
Start Date of Project: 11332 Completion Date of Project: 413	5				
Date of Sale(s): From 11/23/22 To: 4/1/23					
Sale Area/Location: Yavanceh Main Jobby					
Sale will be monitored by: 4000 LOTENZO					
**************************************	******				
Vendor Representative's Name: NAA					
Vendor Business Name: (OS+(O					
Vendor Address: 1055 Hudson street					
City: UNION State & Zip code: NJ 07083					
Init Cost of Product/Service: \$Q(\)\(\sigma\)\(\sigma\)					
Proposal Sale Price: \$ 1 - 2 per Hem					
Total Cost of all Products Not to Exceed: \$ 200,000					
Minimum Total Profit Expected: \$ 100.00					
Faculty Advisor Signature Date:					
Signature: Date:					
School Treasure Signature Date: 1					
Rlaced on BOE Meeting Agendator:					
lonth;Year; Арргоved; □ □ Ву:					

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Faculty Member (s): 1000 De 1000 Date:	66 [1] 01
Club Name: Musical Production	
Acct, No.: 41 Acct, Balance to Date: \$4,43	FF.64
Type of Fund Ralser: Chipothe	
Purpose of Fund Ralser: Raise Funds Roc spring Musical. Parties of Funds from sales on a specific night hour time range of to kawamech.	Dt-TBD
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitored by: Date TBD Completion Date of Project: Date Specific (late TBD) To: NIA ONE (ChipO+R) (Address WIOW)	TBD light ook
**************************************	******
Vendor Address: 101 US-22 Olty: Spangfield State & Zip code: NJ 67651	
Init Cost of Product/Service: \$ 0.00 Proposal Sale Price: \$ VATIOUS - Chipothe men	u
ofal Cost of all Products Not to Exceed: \$ 0.00	
Ignature:Date:	
Ignature:	
School Treasure Signature Date: D	
Recedion EQE Meeting/Agentiasfort YES NO Onth: Year: Approved: By:	

Faculty Member (s): NICOLC DIXOD Date: 10 28 2-
Club Name: Nature Helpers
Acct, No.: #12 Acct, Balance to Date: \$0.00
Type of Fund Ralser: BOY & Soules (Monthly)
Purpose of Fund Ralser: Monies collected will be used to airchase alub items such as soil, pots, bird.
Start Date of Project: 112322 Completion Date of Project: 102022
Date of Sale(s): From Sale Area/Location: KMS Main 1066
Sale will be monitored by:
************************* Vendor Representative's Name:
Unit Cost of Product/Service: \$ 0000 to the Cost
Proposal Sale Price: \$ 1-2.55 PR 1+2.75 Total Cost of all Products Not to Exceed: \$ N/A
Minimum Total Profit Expected: \$30.00
Faculty Akty sor Signature Date:
Signature: Date: (2/25/22-
Signature: Date: D
Riaced on EQE Weeling Age ida for
Month; Year; Approved: D By:



	Appl	icant Information			
Faculty Member (s):	Melissa Hannon			Date:_	10/25/22
Club Name: UHSPAC					
Acct. No.:		Acct. B	alance to Date:		
Type of Fund Raiser:	Concessions for Hig	h School Musical			
Purpose of Fund Raiser of High School Mus	: Sell snacks, drinks sical. Funds will help	, candy grams, ar pay for productio	nd flower grams on costs.	during	performances
Start Date of Project:	9/20/2022	Completion)22
Date of Sale(s): From	12/9/2022		To: 12/11/20	22	
Sale Area/Location:	Lobby				
Sale will be monitored by	y: <u>Melissa Hann</u>	on/Bridget Sloan	/Parent Voluntee	rs	
	CH PUBLICATION F			SOLD	******
Vendor Business Name	Pirylis Distributo	rs			
Vendor Address: 22	1 Sussex Ave				
City: Newark		nte & Zip code: N	J, 07103		
Unit Cost of Product/Se	ervice:	\$ <u>various</u> \$ 1-5	- approx \$1 - \$10		
Proposal Sale Price: Total Cost of all Produc	to Not to Evened	\$ 1000			
Minimum Total Profit E		\$ 2000			
Signature:	•	y Advisor Signatu	lie Date:	10/25	5/2022
Signature:	Vice	Principal Signatur	(e) Date:	10/2	422
Signature:	7.11	l Treasure Signati	urie Date:	10	27/22
	Placed on I	BOE Meeting Age			
Month:	Year:Ap	YES NO proved:	Ву:		



Applicant Information	
Faculty Member (s): Jaclyn francy	Date: 10/25/22
Club Name: UHS Hackurs	
Acct. No.: 2235 Acct. Balance	to Date:
Type of Fund Raiser: CASHL FUNDVAISER	
Purpose of Fund Raiser: <u>Raise funds for UHS Har</u>	ckathon
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitored by: Dell all all all all all all all all all	FProject: April 2023 D: April 2022
**************************************	MS TO BE SOLD*******
Vendor Business Name: Castle Fundraiser	
Vendor Address: 3 COSS St. City: Yellort State & Zip code: N5 O	7735
Proposal Sale Price: Total Cost of all Products Not to Exceed: \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Case
Minimum Total Profit Expected: \$\partial \qquad \qqq \qq \q	Pata: 1/128/22
Signature: Vice Principal Signature Signature:	Date: 10/28/22 Date: 40/28/22
Signature: Signature Signature	Date: 10/2/22
Placed on BOE Meeting Agenda for YES NO	
Month: Year: Approved:	Ву:



	t Information
Faculty Member (s): Jackyn Franky	Date: (1)/∂8/∂2
Club Name: UHS HACKEYS	
Acct. No.: 2235	Acct. Balance to Date:
Type of Fund Raiser: WONO'S FINIST Cho	scolates
Purpose of Fund Raiser: Naise Funds &	or UHS Hadars
Start Date of Project: Dec 2022 Date of Sale(s): From Sale Area/Location: Sale will be monitored by: Dec 2022 UHS - Studing	Completion Date of Project: April 2023 To: April 2023 Salts
**************************************	vendor of ITEMS to be sold******** undraiser
Vendor Business Name: Adam Kaplan	
Vendor Address: 3 Cass St.	Zip code: NJ 07-083
Unit Cost of Product/Service:	\$ 144
Proposal Sale Price:	\$ 1
Total Cost of all Products Not to Exceed: Minimum Total Profit Expected:	\$ 900 \$ 480
Signature: 1000 From From	visor Signature Date: 10/28/d2
Signature: Vice Princ	ipal Signature Date: 10/28/2/2
Signature: Signature:	asure Signature Date: 10/38/
Placed on BOE	Meeting Agenda for:
Month: Year: Approve	YES NO ed:



Faculty Member (s): _	Jackyn Fra	Applicant Inform	nation	Date: 10/28/22
Club Name:	45 Hackers	J		
Acct. No.:	2235		Acct. Balanc	ce to Date:
Type of Fund Raiser:	Bake Sale			
Purpose of Fund Rais	er: To raise fundraisers	funds to	buy n	naterials for
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitored	Dec 2 UHS r	OZZ con OZZ vyoun Lobbi Praney	}	of Project: <u>Dec 2022</u> To: <u>Dec 2022</u>
		N FROM VEND	OR OF IT	EMS TO BE SOLD*******
Vendor Representativ	e's Name:			
Vendor Business Nan	ne:			
Vendor Address:				
City:		_ State & Zip cod	e:	
Unit Cost of Product/S Proposal Sale Price: Total Cost of all Produ Minimum Total Profit	ucts Not to Exceed:			
Signature: 1000	m tramey			Date: 10/28/2/2
Signature:	halls			Date: <u>(d/28/22</u>
Signature:	Jama Dil	hool Treasure S		Date: (0)38)3-
Month:	Year:	YES Approved:		Ву:



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Faculty Member	er (s): ()mar	Applicantin	normation		Date: 11-1- 2000
	Di li	1/	17	1 /1 //	
Club Name:	CITIS 1	Grsity	195K	e+b9/1	
Acct. No.:	3320		Acct. Bala	ance to Date:	
**********		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Type of Fund F	Raiser:	andy S	19/8		
Purpose of Fun	nd Raiser: SC	immer le	egue L	Jame Fr	May, Fall leagu
_ Chile (gorponent				
	2				
C44 D-4 4 D		12/2022	0		1/2/2000
Start Date of P Date of Sale(s)		17/2022	Completion D	ate of Project: To:	1/21/2023
Sale Area/Loca		116002	Union		121/2023
Sale will be monitored by: \[\begin{align*} \text{OGCh} & \text{GY is here} \\ \text{OGCh} & \text{GY is here} \\ \text{In the monitored by:} \end{align*}					
******	*ATTACH PUBLICAT	ION FROM V	ENDOR OF	ITEMS TO BE	SOLD*******
Vendor Repres	sentative's Name:				
Vendor Busine	ess Name:				
Vendor Addres	ss:				
City:			code:		
Unit Cost of P	roduct/Service:		:		
Proposal Sale			,		
	all Products Not to Exceed	:	6		
Minimum Tota	l Profit Expected:	5	5		
		Faculty Advis	or Signature	MARK TO THE SAME	
Signature:	(Wright	r abanty Advis	or orginature	Date	11/1/2022
No.		Vice Princip	al Signature		Park Carry March 1992
Signature:	1:02			Dates	11/1/2-1
		School Treas	ure Signature		
Signature:	ince Bra	V5		Date	11/1/22
	Plac	ed on BOE Me	eting Agend	a for:	
Month:	Year:	Approved:	YES NO	By:	
	0				



		Information		
Faculty Member (s):	Melissa Hannon		Date: 10/31/22	
Club Name: UHSPAC				
Acct. No.: 2077		Acct. Balance to Da	ate:	
Type of Fund Raiser: _		****************	***************************************	
Purpose of Fund Raiser	Raise funds for UHSPAC	productions		
Start Date of Project:	9/20/2022	Completion Date of Pro	iect: 12/11/2022	
Date of Sale(s): From	12/15/2022		2/15/2022	
Sale Area/Location:	Lobby			
Sale will be monitored b				
***********	H PUBLICATION FROM	VENDOD OF ITEMS	TO DE COL D*********	
	s Name:		TO BE SOLD	
Vendor Business Name:				
0''	State & Z	ip code:		
Unit Cost of Product/Se	rvice:	\$ NA		
Proposal Sale Price:		¢ 5		
Total Cost of all Produc	ts Not to Exceed:	s NA		
Minimum Total Profit Ex	pected:	\$ 300		
A PART OF THE PART	Faculty Adv	isor Signature		
Signature:	Melisaa Har		Date: 10/31/2022	
建位 200 3 4 2 5 6	Vice Princi	pal Signature		
Signature:	timalls to		Date: 11/1/22	
Signature:	School Trea	sure Signature	Date: WUD	
	0.00		Dailo. 11 1 1 2 2	
	Placed on BOE N	leeting Agenda for: YES NO		
Month:Y	ear: Approved		y:	



Applicant Information

Faculty Member (s): Tatiana A Ocasio and T Damo Date:10/31/22 Club Name: National Art Honor Society Acct. No.: 2030 Acct. Balance to Date:1,007.37			
Type of Fund Raiser: Holiday Ornament Sale Purpose of Fund Raiser: Senior Scholarship fund Start Date of Project: November 28, 2022 Completion Date of Project: Dec 22, 2022 Date of Sale(s)From: December 1st, 2022 To: December 20th, 2022			
Sale Area/Location: D210 UHS Sale will be monitored by: Tatiana A Ocasio and T Damo			
********ATTACH PUBLICATION FROM VENDOR OF ITEN	IS 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: \$			
Minimum Total Profit Expected: \$200.00			
Faculty Advisor Signature			
Signature:	Date: 10-31-2022		
Vice Principal Signature			
Signature:	Date: - - 2 2		
School Treasurer Signature			
Signature: Jawa Di Yeso	Date: 11 11 22		
Placed on BOE Meeting Agenda For:			
Month: Year: Approved: YES NO	Ву:		



Applicant Information

Faculty Member (s): V.Menjivar

Today's Date: 10/27/2022

Club Name: Student Council

Acct. No.: 2053

Acct. Balance to Date:

Event Date: 11/18/22

Type of Fund Raiser: Harvest Dance

Purpose of Fund Raiser: To provide students and the community with a safe enjoyable school event/activity.

Entrance \$5/pp

Start Date of Project: November 2022

Completion Date of Project: Date of Sale(s): From To: November 18th 2022

Sale Area/Location: UHS Small Gym

Sale will be monitored by: Victoria Menjivar

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

Vendor Representative's Name:

Vendor Business Name: Expected Vendor/s:

Vendor Address:

City: State & Zip code:

Unit Cost of Product/Service: Expected Unit cost of Product/Service:

Proposal Sale Price: \$2.00/entrance

Total Cost of all Products Not to Exceed:

Minimum Total Profit Expected: over \$1,000

Faculty Advisor Signature

Signature: Oictoria Meyjivar

Date: 10/27/2022

Signature: Date:

Vice Principal Signature パロンン

School Treasure Signature

Signature: Date:

Placed on BOE Meeting Agenda for:

Month:

Year:

Approved: YES NO

By: