

# STUDENT ACTIVITIES FUNDRAISER PROPOSAL

		Applicant In	format	ion		
Faculty Member (s):	aniell or	newermann				Date: 4/13
Club Name: \\	youll					,
Acct. No.:	330		Ace	ct. Balance t	o Date:	
Type of Fund Raiser:	Socklu	sofor/ take	sole			
Purpose of Fund Rais	ser: MX	funds for	tur	Manond Sun	in high	mer league, etc
				14		·
Start Date of Project: Date of Sale(s): From Sale Area/Location: Sale will be monitore	Salva	10/18/23	(1	To		vod shoul year
********ATT	ACH PUBLICA	TION FROM V	ENDO	R OF ITEM	IS TO BE	SOLD*******
Vendor Representati	ve's Name:					
Vendor Business Na	me:					
Vendor Address:		•				
City:		State & Zip	code:			
Unit Cost of Product	/Service:	\$	6			(8)
Proposal Sale Price:		\$				
Total Cost of all Prod	ducts Not to Excee	ed: \$	5			
Minimum Total Profit	Expected:		5			
Signature:		Faculty Advis			Date:	9/14/23
Signature:		Vice Principa	al Sign	ature	Date:	9/14/23
Signature:	me 13	School Treasu	ure Sig	nature	Date:	9/14/23
	Pla	iced on BOE Me	eting A	l <mark>genda fo</mark> r:		
Month:	Year:	Approved:			Ву:	



## STUDENT ACTIVITIES FUNDRAISER PROPOSAL

	cant Information
Faculty Member (s): MINIETT SCHOOLING	$\alpha \alpha \beta \beta$
Club Name: Volleyoul	
Acct. No.: 33330	Acct. Balance to Date:
************	
Type of Fund Raiser: COMING SUR	
Purpose of Fund Raiser: TWIST PUNCS h	x tourraments summer league etc.
Date of Sale(s): From Sale Area/Location:	
B, 3 VENCIN	VKTA)
********ATTACH PUBLICATION FR	OM VENDOR OF ITEMS TO BE SOLD*********
Vendor Representative's Name:	
Vendor Business Name:	*
Vendor Address:	N.
City: State	e & Zip code:
Unit Cook of Dundwat/Samians	
Unit Cost of Product/Service: Proposal Sale Price:	\$
Total Cost of all Products Not to Exceed:	\$
Minimum Tofal Profit Expected:	\$
, station Experies.	¥
Signature: Faculty	Advisor Signature  Date:
Vice P	rincipal Signature
Signature:	Date: 9/14/23
Signature: School	Treasure Signature  Date: 9 14 23
Placed on BO	DE Meeting Agenda for:
Month: Year: Appr	YES NO By:



# STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Faculty Member (s):	Maniell Ene	Applicant Informum	nation	Date: 9-13
Club Name: Bou		•		
Acct. No.: 3	330	*	Acct. Balance	e to Date:
Type of Fund Raiser:	Shacks Juxet	a Jalle sa	e	
Purpose of Fund Rai	ser: Nise h	nds hr bur	naments,	senor night sugalies,
Start Date of Project:	9-1	Con	npletion Date o	of Project: end of school year
Date of Sale(s): From	1	111010		
Sale Area/Location:	Sinco	gyin, hall		0:
Sale will be monitore	ed by:	rencinan.		
	ACH PUBLICAT			MS TO BE SOLD*******
Vendor Representati	ve's Name:	ON I KOM VENE	JON OF THE	ING TO BE SOLD
			,	*
Vendor Business Na	me:			89
Vendor Address:				
City:	16.2	State & Zip cod	le:	
Unit Cook of Duoduot	/Camilan	•		
Unit Cost of Product Proposal Sale Price:		\$¢		
Total Cost of all Prod				
Minimum Total Profit		\$		
· ()		F	· · · · · · · · · · · · · · · · · · ·	
Signature: \X \X		Faculty Advisor S	signature	Date:
40/ M		\"		
Signature:		Vice Principal Si	gnature	Date: 9/17/23
oignature				Jane. Trifes
Signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		School Treasure S	Signature	Date: Gluda 2
Signature	MU DION	40		114165
344	Place	ed on BOE Meetin		r:
Month:	Year:	Approved:		Ву:
t .				



## STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Faculty Member (s):	Applicant Information	Date:_ <u>G</u> /17
Club Name: Bouling		1110
2000		ance to Date:
Type of Fund Raiser:	· · · · · · · · · · · · · · · · · · ·	**************************************
Purpose of Fund Raiser: (18)	tings for tamane	nts, senior night supplier,
Start Date of Project:	Completion D	ate of Project: (M) of Shall your
Date of Sale(s): From		
Sale Area/Location:	a gam on ine	To:/
Sale will be monitored by:	heurmann	
*********ATTACH PUBLICA		
Vendor Representative's Name:	TION FROM VENDOR OF	HEM2 TO BE 20LD
Vendor Business Name:		
Vendor Address:City:	State & Zip code:	
Unit Cost of Product/Service:	\$	
Proposal Sale Price:		
Total Cost of all Products Not to Excee	ed: \$	
Minimum Total Profit Expected:	\$	
Signature:	Faculty Advisor Signature	Date:
Signature.		Date.
Clanature	Vice Principal Signature	Date: 22 / 12 / 2
Signature:		Date: 9/14/23
	School Treasure Signature	
Signature:	ans	Date: 9114 23
Pla	ced on BOE Meeting Agend	a for:
Month: Year:	YES NO Approved:	Ву:



Faculty Member (s):	Date: 9 19 73
Acct. No.:	Acct. Balance to Date:
Type of Fund Raiser: Dress Down Purpose of Fund Raiser: Raise more for	end of the year events for the
Start Date of Project: 10\ 2023  Date of Sale(s)From:	
Sale Area/Location: UHS Sale will be monitored by:	
********ATTACH PUBLICATION FROM	/ENDOR 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 Adv	isor Signature
Signature: Hum Mulu	Date: 9   19   23
Principal/Vice P	rincipal Signature
Signature:	Date: 9/21/23
School Treas	surer Signature
Signature: MAR BARNO	Date: 9/20/23
Placed on BOE M	eeting Agenda For:
Month: Year: Approved:	YES NO By:



Faculty Member (s): McMahan	Date:9/1	2/23
Club Name:Softball	Acct. Balance to Date:	
Type of Fund Raiser: BSN Clothing Fund Purpose of Fund Raiser: Raise Movida (III)	and of the year even	Is for the
, ,		
Start Date of Project: 16\20\23 Date of Sale(s)From:		
Sale Area/Location: UHS Sale will be monitored by: MYMWHON		
*********ATTACH PUBLICATION FROM V	ENDOR OF ITEMS TO BE SOL	D*******
Vendor Representative's Name:		
Vendor Business Name:		
Vendor Address:		
City: State & Zip code:		
Unit Cost of Product/Service: \$		
Proposal Sale Price: \$		
Minimum Total Profit Expected: \$		
Faculty Advi	sor Signature	,
Signature: June MMM	Date: 9 10	7/73
Principal/Vice Pr	incipal Signature	,
Signature:	Date: 9/2	1/23
School Treas	urer Signature	•
Signature: () MAL BRANCE	Date: 9 20	. 23
Placed on BOE Me	eeting Agenda For:	
Month: Year: Approved:	YES NO By:	



Faculty Member (s): Wand Fine Chocoles	Date: 9/12/22
Club Name: Softbal I	Date: 172/23
Acct. No.: Acct. Balance to D	ate:
Type of Fund Raiser: Chacolate Selling (World's Purpose of Fund Raiser: Paise money by and of the	Finnest (hocolate) year events for the
Start Date of Project: 10/20/23 Completion Date Date of Sale(s)From:	
Sale Area/Location: UHS Sale will be monitored by: MM whom	
********ATTACH PUBLICATION FROM VENDOR OF ITE	MS TO BE SOLD********
Vendor Representative's Name:	
Vendor Business Name:	
Vendor Address:	
City: State & Zip code:	
Unit Cost of Product/Service: \$	
Proposal Sale Price: \$	
Minimum Total Profit Expected: \$	
Faculty Advisor Signature	
Signature: Hun Mulu	Date: 9   19   73
Principal/Vice Principal Signature	e
Signature:	Date: 9/21/23
School Treasurer Signature	
Signatu(e: MUBICIANTE	Date: 9/20/23
Placed on BOE Meeting Agenda F	or:
Month: Year: Approved: YES NO	Ву:



Faculty Member (s): PUPO ON	
301	Project: JUNO 1024
Sale will be monitored by: CINCI CINCIL	
**********ATTACH PUBLICATION FROM VENDOR OF ITEM	S 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	
Paculty Advisor Signature	
Signature:	Date: 9 2.1 23
Principal/Vice Principal Signature	1 1
Signature:	Date: 7/21/23
School Treasurer Signature	
Signature:	Date:
Placed on BOE Meeting Agenda For	
Month: Year: Approved: YES NO	Ву:



Faculty Member (s): Dallam Langley	Date: 92123		
Club Name: ( V L OXC) Y Q	Date. 1 (A) 125		
Acct. No.: Acct. Balance to Date:			
Type of Fund Raiser: 30K0 1010  Purpose of Fund Raiser: Chlly COMD SCHOOL  CVLOY CHOY, JEUNE COMOC	night, more		
Sale Area/Location:			
**************************************			
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	1		
Signature:	Date: 0 2 8 2 3		
Principal/Vice Principal Signature	, ,		
Signature:	Date: 9/2/23		
School Treasurer Signature			
Signature:	Date:		
Placed on BOE Meeting Agenda For	•		
Month: Year: Approved: YES NO	Ву:		



Faculty Member (s): Kaplan, McMohin, Menders Club Name: Senior Class	Date: 9/5/23
Acct. No.: 7227 Acct. Balance to Date	e:
Type of Fund Raiser: Senior T-Shirts + Parent T-Purpose of Fund Raiser: Senior Students can purchase of 2024, Students can also purchase for money for the senior elass	T-shirts for the class
Start Date of Project: 9 15 23 0 8 7 Completion Date of Date of Sale(s)From: 9 15 23 0 8 7 To: 6 8	Project: 6   18   24   24   24
Sale Area/Location:	
*********ATTACH PUBLICATION FROM VENDOR OF ITEM	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: \$	
Total Cost of all Products Not to Exceed: \$	
Minimum Total Profit Expected: \$	
	u .
Faculty Advisor Signature	•
Signature: July	Date: 9 13 23
Principal/Vice Principal Signature	, , ,
Signature: When Bussaru	Date: 9/15/23
School Treasurer Signature	,
Signature:	Date:
Placed on BOE Meeting Agenda For	
Month: Year: Approved: YES NO	Ву:



Faculty Member (s): Kaplan, McMahon, Menders	_Date: 9 <b>5</b> 23	
Club Name:		
Acct. No.:Acct. Bulance to Bula		
Type of Fund Raiser: Parking Spots Purpose of Fund Raiser: Students will get the opportun  Spot to Paint and have for the School year to Senior Class	ity to choose a parking or the	
Start Date of Project: 9 15 23 10 8 10 Completion Date of Date of Sale(s)From: 9 13 23 10 8 10 To: 11 1 2		
Sale Area/Location: Union HS student parking spo Sale will be monitored by: McMahon, Menders, Kaplan	+	
*********ATTACH PUBLICATION FROM VENDOR OF ITEM	S 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: Mulluh	Date: Q/13/23	
Principal/Vice Principal Signature	, ,	
Signature: Au Aua Bossau	Date: 9/05/23	
School Treasurer Signature	•	
Signature:	Date:	
Placed on BOE Meeting Agenda For		
Month: Year: Approved: YES NO	Ву:	



Faculty Member (s): Mega Kaplan, Shannon McMahon, m	ichele 915/23	
Club Name: Senror Ca		
Acct. No.: 222 Acct. Balance to Date:		
Type of Fund Raiser: Sncalsale  Purpose of Fund Raiser: To Talse money For the C  Sellinsnach	class of 2027 by	
Start Date of Project: 9 8 3 0 8 2 Completion Date of Date of Sale(s)From: 9 8 7 To: 6 1 8 7	f Project: 6/11/2	
Sale Area/Location:Sale will be monitored by:Sale will be monitored by:		
**********ATTACH PUBLICATION FROM VENDOR OF ITE	MS 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: 415/23	
Principal/Vice Principal Signature	ę.	
Signature: Outhor Bussard	Date: 91523	
School Treasurer Signature		
Signature:	Date:	
Placed on BOE Meeting Agenda Fo	or:	
Month: Year: Approved: YES NO	Ву:	



	Menjivar
Faculty Member (s): <u>Kaplan</u> , M Mohon, Menders, Bobertz,	Date:9 / 5 / 23
Club Name: Senior Class, Farmer Fam, Student Council	
Acct. No.: Acct. Balance to Date	<u></u>
Type of Fund Raiser: Hounted Hallways Purpose of Fund Raiser: Clubs and athletic programs	call participate in
an event at the high school where they	
hallways For Halloween to raise money f	or the Genior class,
Farner Fine, and Student Council	Project: 11   1   1   1
Start Date of Project: 9 18 23 0 18 23 Completion Date of Date of Sale(s)From: 10 128 23 To: 10 28 23	Project. 11   7   7   3
Sale Area/Location: Union HS	
Sale Area/Location: ()n10nx HS Sale will be monitored by: Kaplan, Myndhon, Menders, Bober	tz, Manjivar
******ATTACH PUBLICATION FROM VENDOR OF ITEM	
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: Mulhur	Date: 9/13/23
Principal/Vice Principal Signature	, ,
Signature: Outra Bussary	Date: 9/15/23
School Treasurer Signature	
Signature:	Date:
Placed on BOE Meeting Agenda For	
Month: Year: Approved: YES NO	Ву:



#### Applicant Information

Faculty Member	(s):	V.Menjivar/Dana	Bobertz/Megan K	Kaplan	Today's Date: <u>9/5/2023</u>
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Club Name: Student Council/ Farmer Fam/ Senior Class

Acct. No.: (All clubs participating)

Acct. Balance to Date:

Event Date: <u>10/30/23</u>

Type of Fund Raiser: Haunted Hallways

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

- All clubs participating will be in charge of paying for their own decorations and/or activities
- Entrance \$5.00/pp / 5 and under are free / Adults accompanying children are free

Start Date of Project: October 2023

Completion Date of Project: Date of Sale(s): From To: October 2023

Sale Area/Location: UHS

Sale will be monitored by: Victoria Menjivar/ Megan Kaplan and Dana Bobertz

\*\*\*\*\*\*\*\*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: \$5.00/entrance

Total Cost of all Products Not to Exceed:

Minimum Total Profit Expected: \$500.00

Faculty Advisor Signature

Signature: <u>Wictoria Mayiwar/Magan Kaplan/Dana Bobortza</u>

Date: 9/5/2023

Signature: Date: 914 23

Vice Principal Signature

School Treasure Signature

Signature: Date:

Placed on BOE Meeting Agenda for:

Month: Year: Approved: YES NO By:



#### Applicant Information

Faculty Member (s): V.Menjivar

Today's Date: 9/5/2023

Club Name: Student Council

Acct. No.: 2053

Acct. Balance to Date:

Event Date: <u>11/17/23</u>

Type of Fund Raiser: Harvest Dance

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

Entrance \$7/pp

Start Date of Project: November 2023

Completion Date of Project: Date of Sale(s): From To: November 17th 2023

Sale Area/Location: UHS Small Gym OR UHS Big 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: \$7.00/entrance

Total Cost of all Products Not to Exceed:

Minimum Total Profit Expected: \$800.00

Faculty Advisor Signature

Vice Principal Signature

Signature: Date: 114 23

Signature: Wictoria Monjivar

School Treasure Signature

Signature: Date:

Placed on BOE Meeting Agenda for:

Month:

Year:

Approved: YES NO

By:

Date: 9/5/2023



#### Applicant Information

Faculty Member (s): V.Menjivar	Today's Date: 9/5/2023	Club Name: Student Council
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Acct. No.: 2053

Acct. Balance to Date:

Event Date: 12/2023

Type of Fund Raiser: Holiday Grams

Purpose of Fund Raiser: To not only raise funds for Student Council and future events but to provide students with a safe enjoyable school event/activity.

- The holiday grams will be hand crafted with items purchased from Party City/Oriental Trading
- Holiday Grams will be sold at \$2.00/each

Start Date of Project: November 2023

Completion Date of Project: Date of Sale(s): From To: 12/22/2023

Sale Area/Location: UHS

Sale will be monitored by: Victoria Menjivar (Student Council Advisor)

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

Vendor Representative's Name:

Vendor Business Name: Expected Vendor/s: Party City/Oriental Trading

Vendor Address:

City: State & Zip code:

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

Proposal Sale Price: \$2.00/each

Total Cost of all Products Not to Exceed: ≈> \$1,000

Minimum Total Profit Expected: ≈\$300.00

Faculty Advisor Signature

Signature: *Wictoria Menjivar* 

Date: <u>9/5/2023</u>

Signature: Date: 4142

School Treasure Signature

Vice Principal Signature

Signature: Date:

Placed on BOE Meeting Agenda for:

Month: Year: Approved: YES NO By:



Applicant Information  Faculty Member (s): V.Menjivar/Megan Kaplan Today's Date: 9/5/2023			
Club Name: Student Council/ Senior Class			
Acct. No.: (All clubs participating)  Acct. Balance to Date: Event Date: 1/2	4		
Type of Fund Raiser: <u>Fashion Show</u>			
Purpose of Fund Raiser: To provide students and the community with a safe enjoyable school	ol event/activity.		
- All clubs participating will be in charge of paying for their own decorations and/or active	<u>vities</u>		
- Entrance \$5.00			
Start Date of Project: November 2023 Completion Date of Project: Date of Sale(s): From To: January 2024 Sale Area/Location: UHS			
Sale will be monitored by: Victoria Menjivar/ Megan Kaplan/ Michele Menders/Shannon McMahon ************************************			
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: \$5.00/entrance			
Total Cost of all Products Not to Exceed:			
Minimum Total Profit Expected: over \$1,000			
Faculty Advisor Signature Signature: O)ictoria O Monjiwar / O Megan (Kaplan) Date	e: <u>9/5/2023</u>		
Signature: Date: Vice Principal Signature			
School Treasure Signature Signature: Date:			

Placed on BOE Meeting Agenda for:

Month: Year: Approved: YES NO By:



#### Applicant Information

Faculty Member (s): V.Menjivar	Today's Date: 9/5/2023	Club Name: Student Council
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Acct. No.: 2053

Acct. Balance to Date:

Event Date: 12/22/2023

Type of Fund Raiser: Door Decorating Contest

Purpose of Fund Raiser: To provide students with a safe enjoyable school event/activity which promotes SEL

Winners will get a pizza party

Start Date of Project: November/December 2023

Completion Date of Project: Date of Sale(s): From To: 12/22/2023

Sale Area/Location: UHS

Sale will be monitored by: Victoria Menjivar (Student Council Advisor)

\*\*\*\*\*\*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:** 

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

Minimum Total Profit Expected: No profit

Faculty Advisor Signature

Signature: Wictoria Monjivar

Date: 9/5/2023

Signature: Date:

Vice Principal Signature

Signature: Date:

School Treasure Signature

Placed on BOE Meeting Agenda for:

Month:

Year:

Approved: YES NO

By:

DATE: 12/2023

I. This will authorize the Treasurer of the UNION HIGH SCHOOL STUDENT ACTIVITIES ACCOUNT

Pay ABOUT \$500.00 to the order of (Johnny Napkins-Union)

Charge to CLUB ACCOUNT: Student Council Acct.No. 2053

Purpose: Door Decorating Contest Prize

Student Council		<u>Wictoria Megjivar</u>		
Club Name		Club Advisor Sign		
II. Account Balance:	Commont	_ Verified By:		
	Principal – Signature		Date:	1
IV. Date Paid:Processed By:				



#### Applicant Information

Faculty Member (s): V.Menjivar	Today's Date: <u>9/5/2023</u>	Club Name: Student Council
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Acct. No.: 2053

Acct. Balance to Date:

Event Date: 02/2024

Type of Fund Raiser: Valentine's Day Grams

Purpose of Fund Raiser: To not only raise funds for Student Council and future events but to provide students with a safe enjoyable school event/activity.

- <u>The V-Day grams will be hand crafted with items purchased from Party City and amazon and/or the purchase of carnations from a local Union TWP Vendor</u>
- V-Day Grams/Carnations will cost \$3,00/each

Start Date of Project: January 2024

Completion Date of Project: Date of Sale(s): From To: 02/14/2024

Sale Area/Location: UHS

Sale will be monitored by: Victoria Menjivar (Student Council Advisor)

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

Vendor Representative's Name:

Vendor Business Name: Expected Vendor/s: Local Union TWP Vendor

Vendor Address:

City: State & Zip code:

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

Proposal Sale Price: \$3.00/each

Total Cost of all Products Not to Exceed: ≈>\$1,500.00

Minimum Total Profit Expected: No profit

Faculty Advisor Signature

Signature: O)ictaria Moyjivar

Date: 9/5/2023

Signature: Date:

Vice Principal Signature

2' - I - - D - I - -

School Treasure Signature

Signature: Date:

Placed on BOE Meeting Agenda for:

Month: Year: Approved: YES NO By:



#### Applicant Information

F <mark>aculty Member (s):</mark> V.Menjivar	Today's Date: <u>9/5/2023</u>	Club Name: Student Council
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Acct. No.: 2053

Acct. Balance to Date:

Event Date: March 2024

Type of Fund Raiser: March Madness

Purpose of Fund Raiser: To not only raise funds for Student Council and future events but to provide students with a safe enjoyable school event/activity.

- <u>Decorations will be purchased from party city/amazon and snacks will be purchased as well from Pirylis Distributors</u>

- Shirts will be purchased from C&R Graphics

- <u>Students will pay \$20.00 fee to play and will receive a shirt/ Entrance fee to the game \$1.00 with student ID</u>

Start Date of Project: February 2024

Completion Date of Project: Date of Sale(s): From To: March 2024 (Tentative Date)

Sale Area/Location: UHS Big Gymnasium

Sale will be monitored by: Victoria Menjivar (Student Council Advisor)

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

Vendor Representative's Name:

Vendor Business Name: Expected Vendor/s: Pirylis/Party City/Amazon

Vendor Address:

City: State & Zip code:

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

Proposal Sale Price: Snacks are usually sold at \$1.00/\$2.00 each

Total Cost of all Products Not to Exceed: ≈\$1,500

Minimum Total Profit Expected: ≈\$100.00

Faculty Advisor Signature

Signature: <u>Widaria Mayiwar</u>

Date: 9/5/2023

Signature: Date:

Vice Principal Signature

School Treasure Signature

Signature: Date:

Placed on BOE Meeting Agenda for:

Month: Year: Approved: YES NO By:



#### Applicant Information

Faculty Member (s): V.Menjivar Today's Date: 9/5/2023 Club Name: Student Council

Acct. No.: 2053 Acct. Balance to Date: Event Date: May 2024

Type of Fund Raiser: PowderPuff Football Game

Purpose of Fund Raiser: To not only raise funds for Student Council and future events but to provide students with a safe enjoyable school event/activity.

- <u>Decorations will be purchased from party city/amazon and snacks will be purchased as well from Pirylis in</u> order to sell at the event.
- <u>Shirts will be purchased for players from C&R Graphics. There will be a \$20.00 per shirt charge. Entrance</u> fee to game will be \$5.00/pp

- DJ may be booked if necessary

Start Date of Project: March 2024

Completion Date of Project: Date of Sale(s): From To: May 2024 (Tentative Date)

Sale Area/Location: UHS Football Field

Sale will be monitored by: Victoria Menjivar (Student Council Advisor)

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

Vendor Representative's Name:

Vendor Business Name: Expected Vendor/s: C&R Graphics/Amazon/ Pirylis/Party City

Vendor Address:

City: State & Zip code:

Signature: Wictoria Menjiwar

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

Proposal Sale Price: Shirts are sold at \$20.00; Snacks are usually sold at \$1.00/\$2.00 each

Total Cost of all Products Not to Exceed: ≈> \$1500.00

Minimum Total Profit Expected: ≈\$500.00

Faculty Advisor Signature

Date: 9/5/2023

Vice Principal Signature

School Treasure Signature

Signature: Date:

Signature: Date:

Placed on BOE Meeting Agenda for:

Month:	Year:	Approved: YES NO	Ву:	



Faculty Member (s): 05E1 - Tuto	Date: 215cp 2023
Club Name: POSTS DIONE SECRETARIO CLUB	,
Acct. No.: Acct. Balance to Da	ate: 1,033.28
Type of Fund Raiser: B a KE Sale_	
Purpose of Fund Raiser: RAISE Kinds + Raise Awarenes S	ricled
Start Date of Project: Completion Date of Date of Sale(s)From: To: To:	of Project: Des 302023
Sale Areall ocation: Mana lubby by confederat And Local	im.
Sale Area/Location: Main lophy by entering Auditorial Sale will be monitored by: Kuaku Ose, Tutu	,,,
*********ATTACH PUBLICATION FROM VENDOR OF ITE	MS 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: Mayla OTIL	Date: 22 Sep 2023
Principal/Vice Principal Signature	
Signature:	Date: 9 22 23
School Treasurer Signature	
Signature:	Date:
Placed on BOE Meeting Agenda Fo	or:
Month: Year: Approved: YES NO	Ву:



Faculty Member (s): 0 SEI - Tutu	Date: 22542023
Club Name: POOTS: BLACKEXCELLENCE CLUB	
Acct. No.: Acct. Balance to	Date: 1,033,28
Type of Fund Raiser: Pretzel Sale	
Purpose of Fund Raiser: To raise finds and swamers for later events.	ruchb and revenue for
Start Date of Project: Dec 8 2023 Completion Date of Sale(s)From: Dec 8, 2023 To: Dec 8	e of Project: De (8 2023 7, 2023
Sale Area/Location: Main lobby by auditorium Sale will be monitored by: Kwaku Osei-Tutu	
***********ATTACH PUBLICATION FROM VENDOR OF IT	ΓEMS 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: Kusk v OTIL	Date: 22 Sep 2023
Principal/Vice Principal Signate	1 1
Signature:	Date: 9 22 23
School Treasurer Signature	/ /
Signature:	Date:
Placed on BOE Meeting Agenda	For:
Month: Year: Approved: YES NO	Ву:



Applicant Information	1 \
Faculty Member (s): 3 - Call Cany Club Name: Society Acct. No.: Acct. Balance to Date:	41 222 11
Type of Fund Raiser:  Purpose of Fund Raiser:  OCULA ON MASS. Cit.	Braduations
Start Date of Project: 119 Completion Date of P Date of Sale(s)From: 117 To: 117  Sale Area/Location: Outside Cafeting	Project: 113
Sale will be monitored by:	C2n4
*********ATTACH PUBLICATION FROM VENDOR OF ITEMS	S TO BE SOLD*******
Vendor Representative's 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: 7 22202
Principal/Vice Principal Signature	1
Signature:	Date: 9 22 23
School Treasurer Signature	
Signature:	Date:
Placed on BOE Meeting Agenda For	
Month: Year: Approved: YES NO	Ву:



Faculty Member (s): J. Day A. J. RaleCany Date: 922 2023  Club Name: Dations Tonor Society  Acct. No.: 2049 Acct. Balance to Date: 1, 238, 49
Type of Fund Raiser: Kink Kinkon Salt  Purpose of Fund Raiser: Kara monky for Susan 6 Konen  FOUNDER TON SON MEETS CANCER BESEARCH
Start Date of Project: Completion Date of Project: Date of Sale(s)From: To:  Sale Area/Location: Sale will be monitored by: Completion Date of Project: Da
**********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: 9 22 202
Principal/Vice Principal Signature
Signature: Date: 9 7223
School Treasurer Signature
Signature: Date:
Placed on BOE Meeting Agenda For:
Month: Year: Approved: YES NO By:



	Applicant Information	
Faculty Member (s): ASMEY (	CVVV	Date: 9 22 23
Club Name: DANCE TEAM		· · · · · · · · · · · · · · · · · · ·
Acct. No.: <u>QOSS</u>	Acct. Balance	e to Date:
Type of Fund Raiser:	GOID CANDY Gram	
Purpose of Fund Raiser:	nes, competition. Utis	Dance Gear
Start Date of Project:  Date of Sale(s): From  Sale Area/Location:  Sale will be monitored by:	on then sence	of Project: 3-29-24 o: 3-29-24
********ATTACH PUBLICA	TION FROM VENDOR OF ITE	MS TO BE SOLD*******
Vendor Representative's Name: NAME  Vendor Business Name: NAME  Vendor Address: NAME  City: NAME		
Unit Cost of Product/Service: Proposal Sale Price:	\$	
Total Cost of all Products Not to Excee		
Minimum Total Profit Expected:	\$	
Signature:	Faculty Advisor Signature Vice Principal Signature	Date: 9 20 03  Date: 9 72/2/3
Signature:	School Treasure Signature	Date:
Pla	ced on BOE Meeting Agenda fo	r:
Month: Year:	YES NO Approved:	Ву:



Faculty Member (s):	Applicant Information  Date: C 2 2			
Club Name: DONCE TEC	M			
Acct. No.: <u>3083</u>	Acct. Balance to Date:			
Type of Fund Raiser:	× • • • • • • • • • • • • • • • • • • •			
Purpose of Fund Raiser: TYCMS	portation, competition, costumes, field			
Start Date of Project:  Date of Sale(s): From Sale Area/Location: Sale will be monitored by:	Completion Date of Project: 121123 To: 121123 Cy B CUM			
********************************** Vendor Representative's Name:				
Vendor Business Name: 1				
Vendor Address: MM	State & Zip code:			
Unit Cost of Product/Service: Proposal Sale Price:	\$ \$			
Total Cost of all Products Not to Excee				
Minimum Total Profit Expected:	\$			
Signature:	Faculty Advisor Signature  Date:			
Signature:	Vice Principal Signature  Date:			
Signature:	School Treasure Signature  Date:			
Pla	ced on BOE Meeting Agenda for:			
Month: Year:	Approved:   By:			

#### KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES **FUNDRAISER PROPOSAL**

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL
Faculty Member (8): Catherine Martins Arma D'Achille Date: 918/23
Club Name: Esports Club
Acct. No.: (NOT OSSIGNED YET) Acct. Balance to Date: \$0.06
Type of Fund Raiser: Double Good Papcorn
Purpose of Fund Ralsor: Cover Entrance Fee for Garden State, Esports \$500 in order to compete.
Start Date of Project:  Date of Sale(s): From  Sale Area/Location:  Sale will be monitored by:  Club Advisors  *********ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD*********  Vendor Representative's Name:  Start Date of Project:  10 20 23  To:  To:  Vendor Business Name:  10 20 23  To:  Vendor Business Name:  10 20 23  To:  Vendor Popcorn
Vendor Address; 16W030 83rd St  City: Burr Ridge. State & Zip code: TI 100527
Juit Cost of Product/Service:  Proposal Sale Price:  Solar Cost of all Products Not to Exceed:  Minimum Total Profit Expected:  \$ \$500
Facilly Action Signature Date: 9/8/23
Ignature;
Stahop Treasure Signature:  Date:
Paged on EOE Weeting/Agenda on  YES NO  Jonth; Year: Approved:   By:

# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Faculty Momber (8): Catherine Maytins Anna D'Achille Date: 918/23
Club Name: Esports Club
Acct, No.: (NOT OSSIGNED YET) Acct, Balance to Date: \$0.00
Type of Fund Ralser: T-Shirt Sale
Purpose of Fund Ralser: Funds for the club to help towards equipment and apparel as well as a trip.
Start Date of Project:  Date of Sale(s): From  Sale Area/Location:  Club Advisors  Completion Date of Project:  May 34  To: Spring Season  Shop  Club Advisors
Vendor Business Name: TBD
Vendor Address; NA State & Zip code; NA
Init Cost of Product/Service:  Proposal Sale Price:  State of Product/Service:  State of Product/Servi
Signature: (10thers) Marting Date: 9/4/33
Principal Signature Date: 9/18/28
Sqnox Vicasile Signature  Date: Date:
Placed on EVE Westing/Agentics on  YES NO  Jonth; Year: Approved:   By:

# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

The water with the water was

Applicant information
Faculty Member (8): Catherine Martins Anna D'Achille Date: 918/23
Club Name: Esports Club
Acct. No.: (NOt assigned 4et) Acct, Balance to Date: \$0.00
Type of Fund Raiser: Bake Sale
Purpose of Fund Ralser: Funds for the club to help towards equipment and apparel as well as a trip.
Start Date of Project:  Date of Sale(s): From  November 15th And Jo: April 17th  Sale Area/Location:  Main Lobby C KMS  Sale will be monitored by:  Club Advisors
**************************************
Vendor Address; N/A State & Zip code; N/A
Init Cost of Product/Service:  Proposal Sale Price:  Solution of all Products Not to Exceed:  Solution of all Profit Expected:  Solution of all Profit Expected:
ignalure: / atheris martins Dale: 9/8/23
Principal Signature   Date: 7/3/23
Ignature:
Recection EVE Weating Agendation  YES NO  Onth: Year: Approved:   By:



Faculty Member (s): TADA LUTARICO Club Name:	Date: d/26/27	
Acct No:		
Acct. No.: 2012 Acct. Balance	•	
Type of Fund Raiser: APPAREL SALE Purpose of Fund Raiser: TUPALIE MWI	ES FORPROM	
Start Date of Project: Completion   Date of Sale(s)From: To:		
Sale Area/Location: UHS Sale will be monitored by: TADA WARKO		
******ATTACH PUBLICATION FROM VENDOR OF		
Vendor Representative's Name:		
Vendor Business Name:		
Vendor Address:		
City: State & Zip code:		
Unit Cost of Product/Service: \$		
Proposal Sale Price: \$		
Total Cook of all Burdents Notes Towns		
Minimum Total Profit Expected: \$		
Faculty Advisor Signatur	re	
Signature:	Date: 9/26/20	
Principal/Vice Principal Sign	ature	
Signature:	Date: 92623	
School Treasurer Signatu	re	
Signature:	Date:	
Placed on BOE Meeting Agenda For:		
Month: Year: Approved: YES NO	Ву:	



Faculty Member (s): TOA LYARKO	Date: 0/26/23	
Club Name: PROM Acct, Balance to D		
Type of Fund Raiser: CAUDY GRACE Purpose of Fund Raiser: TO FAISE HOVEY F	TOR PRUM	
Start Date of Project:		
Sale Area/Location: UHS Sale will be monitored by: JADA HARKO		
*********ATTACH PUBLICATION FROM VENDOR OF ITE		
Vendor Representative's Name:		
Vendor Business Name:		
Vendor Address:		
City: State & Zip code:		
7.10 1 f HP 1 1 H 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Minimum Total Profit Expected: \$		
Faculty Advisor Signature		
Signature:	Date: A/26 /.2	
Principal/Vice Principal Signatur	e	
Signature:	Date: 9/26/23	
School Treasurer Signature	'	
Signature:	Date:	
Placed on BOE Meeting Agenda For:		
Month: Year: Approved: YES NO	Ву:	



Applicant Informati	on
Faculty Member (s):	126 Date: C/26/
Club Name: PROM	, ,
Acct. No.: 2012 Acc	t. Balance to Date:
	.,
Type of Fund Raiser: 500A (MAC)	FINE
Purpose of Fund Raiser: TO RAISE M	INEY FOR AROM
Start Date of Project: OC+ aba? Comple	tion Date of Project: $JUNE202$
Date of Sale(s): From	То:
Sale Area/Location:	1410123
Sale will be monitored by:	AKKO
*********ATTACH PUBLICATION FROM VENDOR	
Vendor Representative's Name:	
venuoi Representative s raine.	
Vendor Business Name:	
Vandar Addrass:	
Vendor Address: State & Zip code:	
Minimum Total Profit Expected: \$	
Signature: Faculty Advisor Sign	Date: 9/06/03
Vice Principal Signa	
Signature:	Date: 1/24/25
School Treasure Sign	nature
Signature:	Date:
Placed on BOE Meeting A	
Month: Year: Approved: ☐	NO □ By:
Month: Year: Approved:	



Faculty Member (s):	APA U	THEE	O	Date:	120122
Club Name:	M				· ,
Acct. No.: 201	3	Ac	ct. Balance to Dat	e:	
Type of Fund Raiser:	PIE	ATEA	EHER		
Purpose of Fund Raiser:					PROM
Start Date of Project: Date of Sale(s): From		-			
Sale Area/Location: Sale will be monitored by:	1404 h	mark	9	***************************************	
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:	Sta	ate & Zip code:			
Unit Cost of Product/Service	:	\$			
Proposal Sale Price:		\$			
Total Cost of all Products No		\$			
Minimum Total Profit Expect					
Signature:	Facult	y Advisor Sig	nature	Date:	193
Signature:	M	Principal Sign		Date: 4/2(4	123
Signature:	Schoo	l Treasure Sig	jnature	Date:	经负款的证明格式
A Commence of the Commence of	Placed on I	BOE Meeting		NY PENNETHER	<b>多数数数</b>
Month: Year:	Ap	pproved:	NO □ By	:	



Faculty Member (s): JADA CHARO	D-4- (0 () (-1)
Club Name: PROM	
Acct. No.: 2012 Acct. Balance to Dat	te:
Type of Fund Raiser:SNACK SACE	
Purpose of Fund Raiser: TOPAISE MONEY F	OR PROM
Start Date of Project: OCHOO3 Completion Date of Project	
Sale Area/Location:	
******ATTACH PUBLICATION FROM VENDOR OF ITEMS T	O BE SOLD*******
Vendor Representative's Name:	
Vendor Business Name:	
Vendor Address:	
City: State & Zip code:	
Unit Cost of Product/Service: \$	
The state of the s	
Minimum Total Profit Expected:	
Faculty Advisor Signature	AND THE STATE OF T
Signature:	Date: 0/26/23
Signature: Vice Principal Signature	Date: 9724/23
Signature:	Date:
Placed on BOE Meeting Agenda for:	的的技术。这是特别是
Month: Year: Approved: ☐ ☐ By	/:



Faculty Member (s):	Applicant Information	Date: 0(86)
Club Name: PROM		
Acct. No.: 2013		e to Date:
Type of Fund Raiser:	4KE SALE	
	PAISE MONEY	PER PROM
	+2023 Completion Date	
Date of Sale(s): From Sale Area/Location:	45	· o:
Sale will be monitored by:	ADA MARICO	
**************************************	ATION FROM VENDOR OF ITE	EMS TO BE SOLD********
Vendor Business Name:		
Vendor Address:City:	State & Zip code:	
Unit Cost of Product/Service:		
Proposal Sale Price:		
Total Cost of all Products Not to Exc		
Minimum Total Profit Expected:	\$	
Signature:	Faculty Advisor Signature	Date: <u>A/26/33</u>
Signature:	Vice Principal Signature	Date: 474/23
Signature:	School Treasure Signature	Date:
	Placed on BOE Meeting Agenda fo	or:
Month: Year:	YES NO Approved:	Ву:



Faculty Member (s): JAVA CACO Date: 9/26/2
Club Name: PRJM
Acct. No.: Acct. Balance to Date:
Type of Fund Raiser:
Purpose of Fund Raiser: TO RADE MONEY FOR PROM
Start Date of Project: OC+2023 Completion Date of Project: TWE 2000 ( Date of Sale(s): From To:
Sale Area/Location:
Sale will be monitored by: JADA UARKS
*********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: \$
Signature: Date: 4/26/33
Signature:  Date: 12(1)23
Signature: Date:
Placed on BOE Meeting Agenda for:
YES NO     Month: Year: Approved: □ □ By:



Faculty Member (s): SANA LYAP KO	Date: 9/26/27				
2.10	Acct. Balance to Date:				
Type of Fund Raiser:					
Start Date of Project:	Date of Project: <u>JUE</u> 202				
Sale Area/Location: UHF Sale will be monitored by: Japa WHRKX					
******ATTACH PUBLICATION FROM VENDOR OF					
Vendor Representative's Name:					
Vendor Business Name:					
Vendor Address:					
City: State & Zip code:					
T/10 / 7 WE 1 / W/2 E					
Minimum Total Profit Expected: \$					
Faculty Advisor Signature	e				
Signature:	Date: 9/26/27				
Principal/Vice Principal Signa	ature				
Signature:	Date: 9/24/23				
School Treasurer Signatur	re /				
Signature:	Date:				
Placed on BOE Meeting Agend	la For:				
Month: Year: Approved: YES NO	Ву:				



		licant Informat	ion		
Faculty Member (s): Kohr	ı, Meixner, Musarra			Date: 9-24-23	
Club Name: Club T.E.S.S.L	.O and Play Unified				
2066		7.2		\$4760.63	
Acct. No.: 2066		Ac	Acct. Balance to Date:		
	jns/Decor				
Type of Fund Raiser: Sign	ins/Decoi				
Purpose of Fund Raiser:	rpose of Fund Raiser: Play Unified and Club T.E.S.S.L.O give students with and without disabilities the opportunity to part				
	in inclusive sports/activiti true friendships	ies to help build an i	nclusive environment ar	nd to help build meaningful ,	
Start Date of Project:	10-22-23	Complet	ion Date of Project:	6-16-24	
Date of Sale(s): From	10-22-23		To: <u>6-16-24</u>		
Sale Area/Location:	UHS				
Sale will be monitored by	: Kohn, Meixner, Mus	агга			
Vendor Representative's  Vendor Business Name:  Vendor Address:					
014					
			-		
Unit Cost of Product/Serv	ice:	\$			
Proposal Sale Price:		\$			
Total Cost of all Products		\$			
Minimum Total Profit Exp	ected:	\$			
	Facult	ty Advisor Sign	nature		
Signature:	04		Da	ate: 0 20 23	
\	Vice	Principal Signa	ature	112010.9	
Signature:			Da	ate: 121/23	
Signature:	Schoo	I Treasure Sig		ato:	
oignature.				ate:	
	Placed on I	BOE Meeting A	A Property of the Control of the Con		
Month: Ye	ar: Ap	YES oproved:	NO ☐ By:		



		pplicant Information		
Faculty Member (s): Kohr	ı, Meixner, Musarra		Date: 9-24-23	
Club Name: Club T.E.S.S.L	.O and Play Unified			
Acct. No.: 2066		Acct. Balance	\$4760.63	
Type of Fund Raiser: Sp	irit Wear			
Purpose of Fund Raiser:	of Fund Raiser: Play Unified and Club T.E.S.S.L.O give students with and without disabilities the opportunity to par			
	in inclusive sports/act true friendships	ivities to help build an inclusive en	vironment and to help build meaningful ,	
Start Date of Project:	10-22-23	Completion Date o	f Project: 6-16-24	
Date of Sale(s): From	10-22-23		o: 6-16-24	
Sale Area/Location:	District Wid		01 <u>01021</u>	
Sale will be monitored by	: Kohn, Meixner, M	Musarra		
***************	A DUBLICATION	EDOM VENDOD OF ITE	EMS TO BE SOLD********	
		PROW VENDOR OF THE		
Vendor Address:				
O14		State & Zip code:		
Unit Cost of Product/Serv				
Proposal Sale Price:	100.			
Total Cost of all Products	Not to Exceed:	•		
Minimum Total Profit Exp	ected:	\$		
	Fac	ulty Advisor Signature		
Signature:	407		Date: () 2(0/23)	
	Vio	ce Principal Signature		
Signature:	11112		Date: 010 1 03	
	Sch	ool Treasure Signature	-11104	
Signature:		9	Date:	
	Placed o	n BOE Meeting Agenda fo	or:	
Month: Ye	ar:	YES NO Approved:	Ву:	