



# STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Danielle Scheuermann Date: 9/13

Club Name: Volleyball

Acct. No.: 3330 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: snack / water / bake sales

Purpose of Fund Raiser: raise funds for tournaments, summer league, etc. Senior night supplies

Start Date of Project: 9-1 Completion Date of Project: end of school year

Date of Sale(s): From 10/18/23 To: \_\_\_\_\_

Sale Area/Location: school, gym, halls

Sale will be monitored by: D. Scheuermann, C. Baker, B. Darling

\*\*\*\*\* 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: 9/14/23

## Vice Principal Signature

Signature: [Signature] Date: 9/14/23

## School Treasure Signature

Signature: [Signature] Date: 9/14/23

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Daniella Scheuermann Date: 9/13

Club Name: Volleyball

Acct. No.: 3330 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Clothing sale

Purpose of Fund Raiser: raise funds for tournaments summer league etc.  
senior night supplies

Start Date of Project: 9-1 Completion Date of Project: end of school year

Date of Sale(s): From 10/18/23 To: \_\_\_\_\_

Sale Area/Location: online

Sale will be monitored by: D. Scheuermann

\*\*\*\*\* 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: \_\_\_\_\_

### Vice Principal Signature

Signature: [Signature] Date: 9/14/23

### School Treasure Signature

Signature: [Signature] Date: 9/14/23

### Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Danielle Scheuermann Date: 9-13

Club Name: Bowling

Acct. No.: 3330 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: snacks/water/raffle sale

Purpose of Fund Raiser: raise funds for tournaments, senior night supplies, etc.

Start Date of Project: 9-1 Completion Date of Project: end of school year

Date of Sale(s): From 10/18/23 To: \_\_\_\_\_

Sale Area/Location: school gym, halls

Sale will be monitored by: D. Scheuermann

\*\*\*\*\* 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: \_\_\_\_\_

### Vice Principal Signature

Signature: [Signature] Date: 9/17/23

### School Treasure Signature

Signature: [Signature] Date: 9/14/23

### Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Danielle Schewemann Date: 9/13

Club Name: Bowling

Acct. No.: 3330 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: clothing sale

Purpose of Fund Raiser: raise funds for tournaments, senior night supplies, etc.

Start Date of Project: 9/1 Completion Date of Project: end of school year

Date of Sale(s): From 10/18/23 To: \_\_\_\_\_

Sale Area/Location: school gym, online

Sale will be monitored by: D. Schewemann

\*\*\*\*\*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: \_\_\_\_\_

### Vice Principal Signature

Signature: [Signature] Date: 9/14/23

### School Treasure Signature

Signature: [Signature] Date: 9/14/23

### Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): McMahon Date: 9/19/23  
 Club Name: Softball  
 Acct. No.: \_\_\_\_\_ Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Dress Down  
 Purpose of Fund Raiser: Raise money for end of the year events for the softball team

Start Date of Project: 10/2023 Completion Date of Project: 6/2024  
 Date of Sale(s).....From: \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: VHS  
 Sale will be monitored by: McMahon

\*\*\*\*\*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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>Steve McMeden</u>	Date: <u>9/19/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/21/23</u>
<b>School Treasurer Signature</b>	
Signature: <u>Anne Branco</u>	Date: <u>9/20/23</u>
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): McMahon Date: 9/12/23  
 Club Name: Softball  
 Acct. No.: \_\_\_\_\_ Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: BSN Clothing Fundraiser  
 Purpose of Fund Raiser: Raise money for end of the year events for the softball program

Start Date of Project: 10/20/23 Completion Date of Project: June 2024  
 Date of Sale(s).....From: \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS  
 Sale will be monitored by: McMahon

\*\*\*\*\*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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/19/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/21/23</u>
<b>School Treasurer Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/20/23</u>
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): McMahon World's Finest Chocolate Date: 9/12/23  
 Club Name: Softball  
 Acct. No.: \_\_\_\_\_ Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Chocolate Selling (World's Finest Chocolate)  
 Purpose of Fund Raiser: Raise money for end of the year events for the softball program

Start Date of Project: 10/20/23 Completion Date of Project: June 2024  
 Date of Sale(s).....From: \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS  
 Sale will be monitored by: McMahon

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>Steve McMahon</u>	Date: <u>9/19/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/21/23</u>
<b>School Treasurer Signature</b>	
Signature: <u>AmeBiano</u>	Date: <u>9/20/23</u>
<b>Placed on BOE Meeting Agenda For:</b>	
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: 9/21/23  
 Club Name: Cheerleading  
 Acct. No.: \_\_\_\_\_ Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Snack Sale  
 Purpose of Fund Raiser: Cheer camp senior night, make cheer gear, shirt clinic

Start Date of Project: Oct. 2023 Completion Date of Project: June 2024  
 Date of Sale(s).....From: Oct. 2nd 2023 To: June 18, 2024

Sale Area/Location: Union high school  
 Sale will be monitored by: Dayana Langley

\*\*\*\*\*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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/28/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/21/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____





# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Daniela Langley Date: 9/21/23  
 Club Name: Cheerleading  
 Acct. No.: \_\_\_\_\_ Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Bake Sale  
 Purpose of Fund Raiser: Cheer camp, senior night, more cheer gear, first clinic

Start Date of Project: Sept. 2023 Completion Date of Project: June 2024  
 Date of Sale(s).....From: Sept 29, 2023 To: June 13, 2024  
Oct 18

Sale Area/Location: Union high school  
 Sale will be monitored by: Daniela Langley

\*\*\*\*\*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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/28/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/21/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Kaplan, McMahon, Menders Date: 9/5/23  
 Club Name: Senior Class  
 Acct. No.: 2227 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Senior T-shirts + Parent T-shirts  
 Purpose of Fund Raiser: Senior Students can purchase T-shirts for the class of 2024. Students can also purchase for their parents. to raise money for the senior class

Start Date of Project: 9/15/23 10.18.23 Completion Date of Project: 6/18/24  
 Date of Sale(s).....From: 9/15/23 10.18.23 To: 6/18/24

Sale Area/Location: Union HS  
 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/13/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/15/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Kaplan, McMahon, Menders Date: 9/8/23  
 Club Name: Senior Class  
 Acct. No.: 2227 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Parking Spots  
 Purpose of Fund Raiser: Students will get the opportunity to choose a parking spot to paint and have for the school year to raise funds for the Senior Class

Start Date of Project: 9/15/23 10/18/23 Completion Date of Project: 11/1/23  
 Date of Sale(s).....From: 9/13/23 10/18/23 To: 11/1/23

Sale Area/Location: Union HS student parking spot  
 Sale will be monitored by: McMahon, Menders, Kaplan

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/13/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/05/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Megan Kaplan, Shannon McMahon, Michele Mendez Date: 9/15/23  
 Club Name: Senior Class  
 Acct. No.: 2227 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: snacksale  
 Purpose of Fund Raiser: To raise money for the class of 2024 by selling snacks

Start Date of Project: 9/15/23 10/18/23 Completion Date of Project: 6/15/24  
 Date of Sale(s).....From: 9/15/23 10/18/23 To: 6/18/24

Sale Area/Location: \_\_\_\_\_  
 Sale will be monitored by: Senior Advisors

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature:	Date: <u>9/15/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature:	Date: <u>9/15/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Kaplan, McMahon, Menders, Bobertz, Menjivar Date: 9/5/23  
 Club Name: Senior Class, Farmer Fam, Student Council  
 Acct. No.: \_\_\_\_\_ Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Haunted Hallways  
 Purpose of Fund Raiser: Clubs and athletic programs will participate in an event at the high school where they will decorate classrooms/hallways for Halloween to raise money for the senior class, Farmer Fam, and Student Council  
 Start Date of Project: 9/15/23 10.18.23 Completion Date of Project: 11/1/23  
 Date of Sale(s).....From: 10/28/23 To: 10/28/23

Sale Area/Location: Union HS  
 Sale will be monitored by: Kaplan, McMahon, Menders, Bobertz, Menjivar

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/13/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/15/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): V.Menjivar/Dana Bobertz/Megan Kaplan Today's Date: 9/5/2023

Club Name: Student Council/ Farmer Fam/ Senior Class

Acct. No.: (All clubs participating)

Acct. Balance to Date:

Event Date: 10/30/23

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: Victoria Menjivar/Megan Kaplan/Dana Bobertz

Date: 9/5/2023

Signature: Date: 9/14/23

## Vice Principal Signature

## School Treasure Signature

Signature: Date:

## 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): V.Menjivar

Today's Date: 9/5/2023

Club Name: Student Council

Acct. No.: 2053

Acct. Balance to Date:

Event Date: 11/17/23

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**

Signature: Victoria Menjivar

Date: 9/5/2023

**Vice Principal Signature**

Signature: [Handwritten Signature]

Date: 9/14/23

**School Treasure Signature**

Signature: Date:

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

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: Victoria Menjivar

Date: 9/5/2023

Signature: Date:

[Handwritten Signature]  
9/14/23

**Vice Principal Signature**

**School Treasure Signature**

Signature: Date:

**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): 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: 1/24

Type of Fund Raiser: Fashion Show

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

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

\*\*\*\*\*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: over \$1,000

### Faculty Advisor Signature

Signature: Victoria Menjivar/Megan Kaplan

Date: 9/5/2023

### Vice Principal Signature

Signature: Date:

[Handwritten Signature]  
9/14/23

### School Treasure Signature

Signature: Date:

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

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: Victoria Menjivar

Date: 9/5/2023

**Vice Principal Signature**

Signature: [Handwritten Signature]  
Date: 9/14/23

**School Treasure Signature**

Signature: Date:

**Placed on BOE Meeting Agenda for:**

Month:	Year:	Approved: YES NO	By:
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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

*Victoria Mejivar*

Club Name

Club Advisor Signature

=====

II. Account Balance: \_\_\_\_\_ Verified By: \_\_\_\_\_

Date: \_\_\_\_\_ Comment: \_\_\_\_\_

III. Approved: \_\_\_\_\_ Date: \_\_\_\_\_

Principal – Signature

=====

IV. Date Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Acct. No. \_\_\_\_\_

Processed By: \_\_\_\_\_

\_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## 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: 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.

- 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

- 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: Victoria Menjivar

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:
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# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## 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: 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.

- Decorations will be purchased from party city/amazon and snacks will be purchased as well from Piryllis Distributors

- Shirts will be purchased from C&R Graphics

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

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: Piryllis/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: Victoria Menjivar

Date: 9/5/2023

Vice Principal Signature

Signature: Date:

[Handwritten Signature]  
9/14/23

School Treasure Signature

Signature: Date:

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): 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.

- Decorations will be purchased from party city/amazon and snacks will be purchased as well from Piryllis in order to sell at the event.

- Shirts will be purchased for players from C&R Graphics. There will be a \$20.00 per shirt charge. Entrance 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/ Piryllis/Party City

Vendor Address:

City: State & Zip code:

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**

Signature: Victoria Menjivar

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:



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Osei-Tutu Date: 21 Sep 2023  
 Club Name: ROOTS: BLACK EXCELLENCE CLUB  
 Acct. No.: \_\_\_\_\_ Acct. Balance to Date: 4,033.28

Type of Fund Raiser: Bake Sale  
 Purpose of Fund Raiser: Raise funds + raise awareness of club

Start Date of Project: 0.01.2023 Completion Date of Project: Dec 31 2023  
 Date of Sale(s).....From: TBD To: \_\_\_\_\_

Sale Area/Location: Main lobby by cafeteria Auditorium  
 Sale will be monitored by: Kwaku Osei-Tutu

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>Kwaku Osei-Tutu</u>	Date: <u>22 Sep 2023</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/22/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____





# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Osei-Tutu Date: 22 Sep 2023  
 Club Name: ROOTS: BLACK EXCELLENCE CLUB  
 Acct. No.: \_\_\_\_\_ Acct. Balance to Date: 1,033.28

Type of Fund Raiser: Pretzel Sale  
 Purpose of Fund Raiser: To raise funds and swimmers for the club and revenue for later events.

Start Date of Project: Dec 8 2023 Completion Date of Project: Dec 8 2023  
 Date of Sale(s).....From: Dec 8, 2023 To: Dec 8, 2023

Sale Area/Location: Main lobby by auditorium  
 Sale will be monitored by: Kwaku Osei-Tutu

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>Kwaku Osei-Tutu</u>	Date: <u>22 Sep 2023</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/22/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): J. Daly & J. Paleczny Date: 9/22/2023  
 Club Name: National Honor Society  
 Acct. No.: 2049 Acct. Balance to Date: \$1,238.49

Type of Fund Raiser: Bake Sale  
 Purpose of Fund Raiser: Funds for NHS Graduation & Production Materials

Start Date of Project: 11/2 Completion Date of Project: 11/3  
 Date of Sale(s).....From: 11/2 To: 11/3

Sale Area/Location: Outside Cafeteria B After School  
 Sale will be monitored by: J. Daly & J. Paleczny

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>Joe Daly</u>	Date: <u>9/22/2023</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/22/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): J. Daly & J. Paleczny Date: 9/22/2023  
 Club Name: National Honor Society  
 Acct. No.: 2049 Acct. Balance to Date: \$1,238.48

Type of Fund Raiser: Pink Ribbon Sale  
 Purpose of Fund Raiser: Raise money for Susan G. Komen Foundation for Breast Cancer Research

Start Date of Project: 10/23/23 Completion Date of Project: 10/27/23  
 Date of Sale(s).....From: ↓ To: ↓

Sale Area/Location: C121 & A113A  
 Sale will be monitored by: J. Daly & J. Paleczny

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>Joe Daly</u>	Date: <u>9/22/2023</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>9/22/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): Ashley Carr Date: 9/22/23

Club Name: Dance Team

Acct. No.: 2083 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: PT OF GOLD CANDY GRAM

Purpose of Fund Raiser: COSTUMES, COMPETITION, UHS DANCE GEAR

Start Date of Project: 3-1-24 Completion Date of Project: 3-29-24

Date of Sale(s): From 3-1-24 To: 3-29-24

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: [Signature] Date: 9/22/23

### Vice Principal Signature

Signature: [Signature] Date: 9/22/23

### School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### 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: 9/21/23

Club Name: Dance Team

Acct. No.: 2083 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Eye eye socks

Purpose of Fund Raiser: Transportation, competition, costumes, field trips

Start Date of Project: 10/9/23 Completion Date of Project: 12/1/23

Date of Sale(s): From 10/9/23 To: 12/1/23

Sale Area/Location: Union High School

Sale will be monitored by: Ashley B 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: \$ \_\_\_\_\_

Signature: [Signature] Faculty Advisor Signature Date: 9/21/23

Signature: [Signature] Vice Principal Signature Date: 9/22/23

Signature: \_\_\_\_\_ School Treasure Signature Date: \_\_\_\_\_

### Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_

# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): Catherine Martins/Anna D'Achille Date: 9/8/23

Club Name: Esports Club

Acct. No.: (Not assigned yet) Acct. Balance to Date: \$0.00

Type of Fund Raiser: Double Good Popcorn

Purpose of Fund Raiser: Cover Entrance Fee for Garden State Esports \$500 in order to compete.

Start Date of Project: 10/16/23 Completion Date of Project: 10/20/23

Date of Sale(s): From ↓ To: ↓

Sale Area/Location: Online Shop

Sale will be monitored by: Club Advisors

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

Vendor Representative's Name: Garden State Esports

Vendor Business Name: Double Good Popcorn

Vendor Address: 16W030 83rd St

City: Burr Ridge State & Zip code: IL 60527

Unit Cost of Product/Service: \$ Varied

Proposal Sale Price: \$ Varied

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

Minimum Total Profit Expected: \$ \$500

**Faculty/Advisor Signature**

Signature: Catherine Martins Date: 9/8/23

**Principal Signature**

Signature: [Signature] Date: 9/13/23

**School Treasure Signature**

Signature: [Signature] Date: 9/13/23

**Placed on BOE Meeting Agenda for:**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_

# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member(s): Catherine Martins / Anna D'Achille Date: 9/8/23

Club Name: Esports Club

Acct. No.: (Not assigned yet) Acct. Balance to Date: \$0.00

Type of Fund Raiser: T-shirt Sale

Purpose of Fund Raiser: Funds for the club to help towards equipment and apparel as well as a trip.

Start Date of Project: October 23 Completion Date of Project: May 24

Date of Sale(s): From Fall Season To: Spring Season

Sale Area/Location: Online Shop

Sale will be monitored by: Club Advisors

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

Vendor Representative's Name: N/A

Vendor Business Name: TBD

Vendor Address: N/A

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

Unit Cost of Product/Service: \$ TBD

Proposal Sale Price: \$ \$20 for Tees \$25 for long Sleeve

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

Minimum Total Profit Expected: \$ N/A

**Faculty/Advisor Signature**

Signature: Catherine Martins Date: 9/14/23

**Principal Signature**

Signature: [Signature] Date: 9/13/23

**School Treasure Signature**

Signature: Alyssa Melillo Date: 9/13/23

**Placed on BOE Meeting Agenda for**

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_

# KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

**Applicant Information**

Faculty Member (s): Catherine Martins / Anna D'achille Date: 9/8/23

Club Name: Esports Club

Acct. No.: (Not assigned yet) Acct. Balance to Date: \$0.00

Type of Fund Raiser: Bake Sale

Purpose of Fund Raiser: Funds for the club to help towards equipment and apparel as well as a trip.

Start Date of Project: October 23 Completion Date of Project: May 24

Date of Sale(s): From November 15th and to April 17th

Sale Area/Location: Main Lobby @ KMS

Sale will be monitored by: Club Advisors

\*\*\*\*\* 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: \$ Varied

Proposal Sale Price: \$ \$1.00 for all Goods

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

Minimum Total Profit Expected: \$ N/A

**Faculty/Advisor Signature**

Signature: Catherine Martins Date: 9/8/23

**Principal Signature**

Signature: [Signature] Date: 9/13/23

**School Treasure Signature**

Signature: [Signature] Date: 9/13/23

**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 MYRKO Date: 9/26/23  
 Club Name: PROM  
 Acct. No.: 242 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: APPAREL SALE  
 Purpose of Fund Raiser: TO RAISE MONEY FOR PROM

Start Date of Project: OCT 2023 Completion Date of Project: JUNE 2024  
 Date of Sale(s).....From: \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS  
 Sale will be monitored by: JADA MYRKO

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature:	Date: <u>9/26/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature:	Date: <u>9/26/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

### Applicant Information

Faculty Member (s): JADA MARKO Date: 9/26/23  
 Club Name: PROM  
 Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_


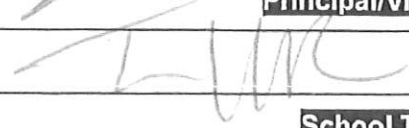
Type of Fund Raiser: CANDY GRAM  
 Purpose of Fund Raiser: TO RAISE MONEY FOR PROM

Start Date of Project: OCT 2023 Completion Date of Project: JUNE 2024  
 Date of Sale(s).....From: \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS  
 Sale will be monitored by: JADA MARKO

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: 	Date: <u>9/26/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature: 	Date: <u>9/26/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): JADA MYATKO Date: 9/26/23

Club Name: PROM

Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: SODA MACHINE

Purpose of Fund Raiser: TO RAISE MONEY FOR PROM

Start Date of Project: OCT 2023 Completion Date of Project: JUNE 2024

Date of Sale(s): From \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS

Sale will be monitored by: JADA MYATKO

\*\*\*\*\* 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: 9/26/23

## Vice Principal Signature

Signature: \_\_\_\_\_ Date: 9/26/23

## School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## 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: 9/20/23

Club Name: PROM

Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: PIE A TEACHER

Purpose of Fund Raiser: TO RAISE MONEY FOR PROM

Start Date of Project: OCT 2023 Completion Date of Project: JUNE 2024

Date of Sale(s): From \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS

Sale will be monitored by: JADA 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: \_\_\_\_\_ Date: 9/26/23

### Vice Principal Signature

Signature: \_\_\_\_\_ Date: 9/26/23

### School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### 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 DYKERO Date: 9/26/23

Club Name: PROM

Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: SNACK SALE

Purpose of Fund Raiser: TO RAISE MONEY FOR PROM

Start Date of Project: OCT 2023 Completion Date of Project: JUNE 2024

Date of Sale(s): From \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS

Sale will be monitored by: JADA Marks

\*\*\*\*\*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: 9/26/23

### Vice Principal Signature

Signature: [Signature] Date: 9/26/23

### School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### 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 MARIKO Date: 9/26/23

Club Name: PROM

Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: BAKE SALE

Purpose of Fund Raiser: TO RAISE MONEY FOR PROM

Start Date of Project: OCT 2023 Completion Date of Project: JUNE 2024

Date of Sale(s): From \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS

Sale will be monitored by: JADA MARIKO

\*\*\*\*\* 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: 9/26/23

### Vice Principal Signature

Signature: [Signature] Date: 9/26/23

### School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### 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: 9/26/23

Club Name: PROM

Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: DRESS DOWN

Purpose of Fund Raiser: TO RAISE MONEY FOR PROM

Start Date of Project: OCT 2023 Completion Date of Project: JUNE 2024

Date of Sale(s): From \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS

Sale will be monitored by: JADA 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: \_\_\_\_\_ Date: 9/26/23

### Vice Principal Signature

Signature: \_\_\_\_\_ Date: 9/26/23

### School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### 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 MARIKO Date: 9/26/23  
 Club Name: DRAM  
 Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: LAWN SIGNS  
 Purpose of Fund Raiser: TO RAISE MONEY FOR DRAM

Start Date of Project: OCT 2023 Completion Date of Project: JUNE 2024  
 Date of Sale(s).....From: \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS  
 Sale will be monitored by: JADA MARIKO

\*\*\*\*\* 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: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature:	Date: <u>9/26/23</u>
<b>Principal/Vice Principal Signature</b>	
Signature:	Date: <u>9/26/23</u>
<b>School Treasurer Signature</b>	
Signature: _____	Date: _____
<b>Placed on BOE Meeting Agenda For:</b>	
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: 9-24-23

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

Acct. No.: 2066 Acct. Balance to Date: \$4760.63

Type of Fund Raiser: Signs/Decor

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: 10-22-23 Completion Date of Project: 6-16-24

Date of Sale(s): From 10-22-23 To: 6-16-24

Sale Area/Location: UHS

Sale will be monitored by: Kohn, Meixner, 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: [Signature] Date: 9/26/23

## Vice Principal Signature

Signature: [Signature] Date: 9/26/23

## School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Kohn, Meixner, Musarra Date: 9-24-23

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

Acct. No.: 2066 Acct. Balance to Date: \$4760.63

Type of Fund Raiser: Spirit Wear

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: 10-22-23 Completion Date of Project: 6-16-24

Date of Sale(s): From 10-22-23 To: 6-16-24

Sale Area/Location: District Wide

Sale will be monitored by: Kohn, Meixner, 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: [Signature] Date: 9/26/23

### Vice Principal Signature

Signature: [Signature] Date: 9/26/23

### School Treasure Signature

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES  NO  By: \_\_\_\_\_