



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Omar Wright Date: 6/17/2021

Club Name: Girls Basketball

Acct. No.: 3230 Acct. Balance to Date: 510.54

Type of Fund Raiser: Clothing ~~(Sports)~~

Purpose of Fund Raiser: raise money for senior night, end of the season dinner, camps & clothing.

Start Date of Project: 9/1/2021 Completion Date of Project: 6/1/2022

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

Sale Area/Location: _____

Sale will be monitored by: _____

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

Vendor Representative's Name: George Klien

Vendor Business Name: BSN

Vendor Address: 826 Montgomery St.

City: Bethlehem State & Zip code: PA

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: 6/17/21

School Treasure Signature

Signature: [Signature] Date: 6/16/21

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Omar Wright Date: 6/17/2021

Club Name: Girls Basketball

Acct. No.: 3230 Acct. Balance to Date: \$10.54

Type of Fund Raiser: online

Purpose of Fund Raiser: raise money for senior night, end of the season dinner, camps & clothing.

Start Date of Project: 9/1/2021 Completion Date of Project: 6/1/2022

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

Sale Area/Location: _____

Sale will be monitored by: _____

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

Vendor Representative's Name: Tim Schoenhaus (908) 256-2553

Vendor Business Name: SNAP

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: 6/17/21

School Treasure Signature

Signature: [Signature] Date: 6/16/21

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Omar Wright Date: 6/17/2021

Club Name: Girls Basketball

Acct. No.: 3230 Acct. Balance to Date: 510.54

Type of Fund Raiser: clothing

Purpose of Fund Raiser: for senior night, end of the year party, clothing & camps

Start Date of Project: 9/1/2021 Completion Date of Project: 6/1/2022

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

Sale Area/Location: _____

Sale will be monitored by: _____

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

Vendor Representative's Name: _____

Vendor Business Name: Kicks N Sticks

Vendor Address: 2933 Vauxhall Road

City: Vauxhall State & Zip code: NJ 07088

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: 6/17/21

School Treasure Signature

Signature: [Signature] Date: 6/17/21

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): D. ERDMAN Date: 5/27/21

Club Name: CROSS COUNTRY

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

Type of Fund Raiser: Team Store

Purpose of Fund Raiser: Raise \$, provide gear for supporters

Start Date of Project: 8/1/21 Completion Date of Project: 12/1/21

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

Sale Area/Location: _____

Sale will be monitored by: _____

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

Vendor Representative's Name: Coleen

Vendor Business Name: Ares Sportswear

Vendor Address: sales@areswear.com

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: Donald R. Erdman Date: 5/27/21

Vice Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: Debbie King Date: _____

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): DON ERDMAN Date: 5/27/21

Club Name: CROSS COUNTRY

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

Type of Fund Raiser: Chocolate Bar Sales

Purpose of Fund Raiser: Awards, Dinners, etc

Start Date of Project: 9/1/21 Completion Date of Project: 12/1/21

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

Sale Area/Location: Around school

Sale will be monitored by: D. Erdman

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

Vendor Representative's Name: EASY FUNDRAISING IDEA

Vendor Business Name: Theresa Davis

Vendor Address: P.O Box 191051

City: Atlanta State & Zip code: Ga 31119

Unit Cost of Product/Service: \$ (40) carriers - 10 cases 1.00/bar

Proposal Sale Price: \$ 2.00 ea

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

Minimum Total Profit Expected: \$ 1200.00

Faculty Advisor Signature

Signature: [Signature] Date: 5/27/21

Vice Principal Signature

Signature: [Signature] Date: _____

School Treasure Signature

Signature: [Signature] Date: _____

Placed on BOE Meeting Agenda for:

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

Township of Union Schools K-12



Diane Cappiello <dcappiello@twpunionschools.org>

July 2021 BOE Agenda Fundraiser Requests for UHS Marching Band and UHSPAC

1 message

Laura Finnerty <lfinnerty@twpunionschools.org>
 To: Diane Cappiello <dcappiello@twpunionschools.org>
 Cc: Michael Hamilton <mhamilton@twpunionschools.org>

Tue, Jun 22, 2021 at 10:27 AM

Good morning, Diane -

Can you please add the following fundraiser requests to the July 2021 BOE Meeting Agenda?

School/Club: UHS Marching Band
School Accounts #: 2033
Type of Fundraiser: Sponsor a Day Calendar Fundraiser
Date of Event/Sales: August 1-31, 2021
Purpose of Fund Raiser: To raise funds to offset the cost associated with the UHS Marching Band.

School/Club: UHSPAC Spring Trip/UHS Marching Band
School Accounts #: 2045/2033
Type of Fundraiser: Gertrude Hawk Holiday 2021 Boutique
Date of Event/Sales: October 27, 2021 through November 17, 2021
Purpose of Fund Raiser: To raise funds to offset the cost of the 2022 UHSPAC Spring Trip.

School/Club: UHSPAC Spring Trip/UHS Marching Band
School Accounts #: 2045/2033
Type of Fundraiser: Popcorn Sale
Date of Event/Sales: January 12, 2022 through January 28, 2022
Purpose of Fund Raiser: To raise funds to offset the cost of the 2022 UHSPAC Spring Trip.

School/Club: UHS Marching Band
School Accounts #: 2033
Type of Fundraiser: Car Wash
Date of Event/Sales: April 24, 2022
Purpose of Fund Raiser: To raise funds for the UHS Marching Band.

School/Club: UHS Marching Band
School Accounts #: 2033
Type of Fundraiser: Car Wash
Date of Event/Sales: May 22, 2022
Purpose of Fund Raiser: To raise funds for the UHS Marching Band. These funds will be used to offset all costs associated with the Marching Band.

School/Club: UHS Marching Band
School Accounts #: 2033
Type of Fundraiser: Car Wash
Date of Event/Sales: July 17, 2022
Purpose of Fund Raiser: To offset costs associated with the UHS Marching Band.

School/Club: UHS Marching Band
School Accounts #: 2033
Type of Fundraiser: Car Wash
Date of Event/Sales: August 14, 2022
Purpose of Fund Raiser: To offset costs associated with the UHS Marching Band

As always, your assistance is greatly appreciated!



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): MICHAEL HAMILTON Date: 6/4/2021

Club Name: MARCHING BAND

Acct. No.: 2033 Acct. Balance to Date: \$12260.83

Type of Fund Raiser: SPONSOR-A-DAY CALENDAR

Purpose of Fund Raiser: TO RAISE FUNDS TO OFFSET THE COST ASSOCIATED WITH THE UHS MARCHING BAND

Start Date of Project: 8/1/2021 Completion Date of Project: 8/31/2021

Date of Sale(s): From M/F To: N/A

Sale Area/Location: ONLINE

Sale will be monitored by: M HAMILTON, C ESQUIVEL, S MYERS

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

Vendor Representative's Name: _____

Vendor Business Name: N/A

Vendor Address: _____
City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ 0
 Proposal Sale Price: \$ VARIES (\$1 - \$31)
 Total Cost of all Products Not to Exceed: \$ 50
 Minimum Total Profit Expected: \$ 1000

Faculty Advisor Signature

Signature: [Signature] Date: 6/4/2021

Vice Principal Signature

Signature: _____ Date: _____

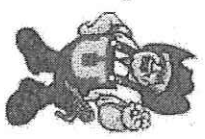
School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

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

**UNION HIGH SCHOOL
MARCHING FARMERS**



August 2021

**UHS Marching Band
Calendar Fundraiser**

HOW IT WORKS:

1. Pick a date to sponsor that has not been picked.
2. Donate that amount (ex. August 10 = \$10)

Please help me reach my goal of filling the entire calendar.

THANK YOU!!

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): MICHAEL HAMILTON Date: 6/21/2021

Club Name: UHS PAC SPRING TRIP / UHS MARCHING BAND

Acct. No.: 2045/2033 Acct. Balance to Date: \$2096.37

Type of Fund Raiser: GERTRUDE HAWK HOLIDAY 2021 BROCHURE

Purpose of Fund Raiser: TO RAISE FUNDS TO OFFSET THE COST OF THE 2022 UHS PAC SPRING TRIP

Start Date of Project: 10/27/2021 Completion Date of Project: 11/12/2021

Date of Sale(s): From 10/27/2021 To: 11/12/2021

Sale Area/Location: ONLINE & IN PERSON SALES / OUTSIDE OF SCHOOL

Sale will be monitored by: M. HAMILTON

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

Vendor Representative's Name: SHARON UKL

Vendor Business Name: GERTRUDE HAWK CHOCOLATES

Vendor Address: 901 KEYSTONE PARK

City: DENVER State & Zip code: CO 80512

Unit Cost of Product/Service: \$ SEE ATTACHED

Proposal Sale Price: \$ SEE ATTACHED

Total Cost of all Products Not to Exceed: \$ SEE ATTACHED

Minimum Total Profit Expected: \$2,000-

Faculty Advisor Signature

Signature: [Signature] Date: 6/21/2021

Vice Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

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

Holiday

2021

Gertrude Hawk.
CHOCOLATES



FUNDRAISING



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): MICHAEL HAMILTON Date: 6/21/22

Club Name: UHSPAC SPRING TRIP / UHS MARCHING BAND

Acct. No.: 2045 / 2033 Acct. Balance to Date: \$2096.37

Type of Fund Raiser: POPCORN SALE

Purpose of Fund Raiser: TO RAISE FUNDS TO OFFSET THE COST OF THE 2022 UHSPAC SPRING TRIP

Start Date of Project: 1/12/2022 Completion Date of Project: 1/28/2022

Date of Sale(s): From 1/12/2022 To: 1/28/2022

Sale Area/Location: IN PERSON - ONLINE SALES / OUTSIDE OF SCHOOL

Sale will be monitored by: M. HAMILTON

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

Vendor Representative's Name: SONJA HERNANDEZ

Vendor Business Name: THE GOODIES FACTORY

Vendor Address: 1038 S. WASHINGTON AVE

City: HOLLAND State & Zip code: MI 49423

Unit Cost of Product/Service: \$ SEE ATTACHED

Proposal Sale Price: \$ SEE ATTACHED

Total Cost of all Products Not to Exceed: \$ SEE ATTACHED

Minimum Total Profit Expected: \$ 2000 -

Faculty Advisor Signature

Signature: [Signature] Date: 6/21/2021

Vice Principal Signature

Signature: _____ Date: _____

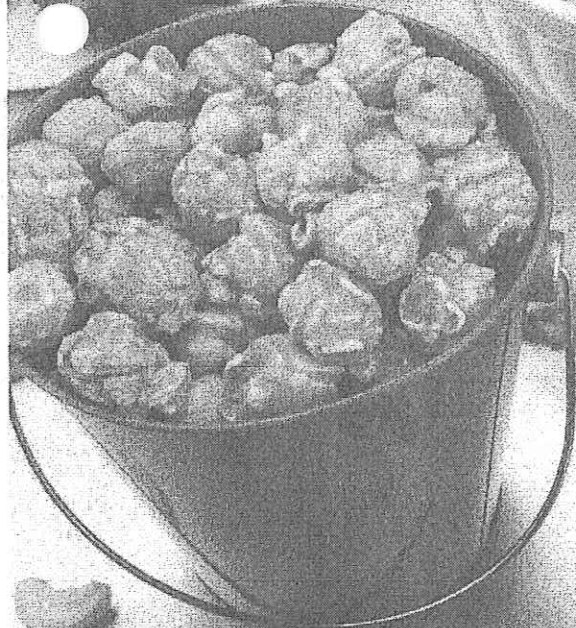
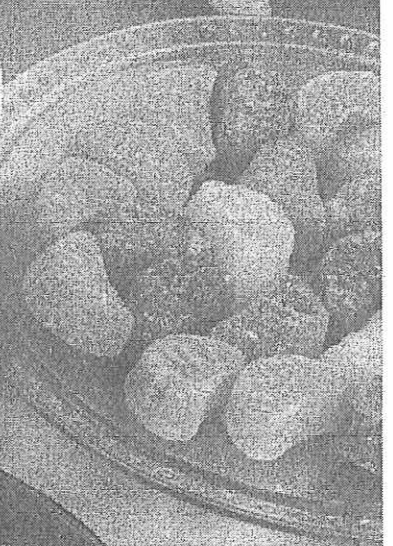
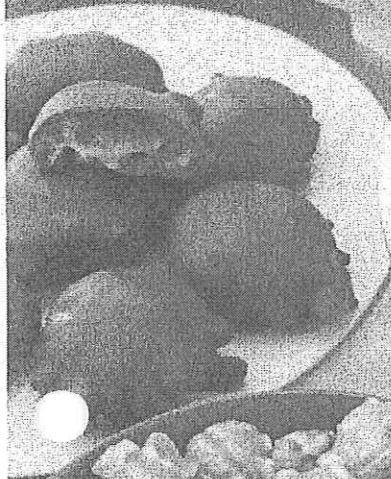
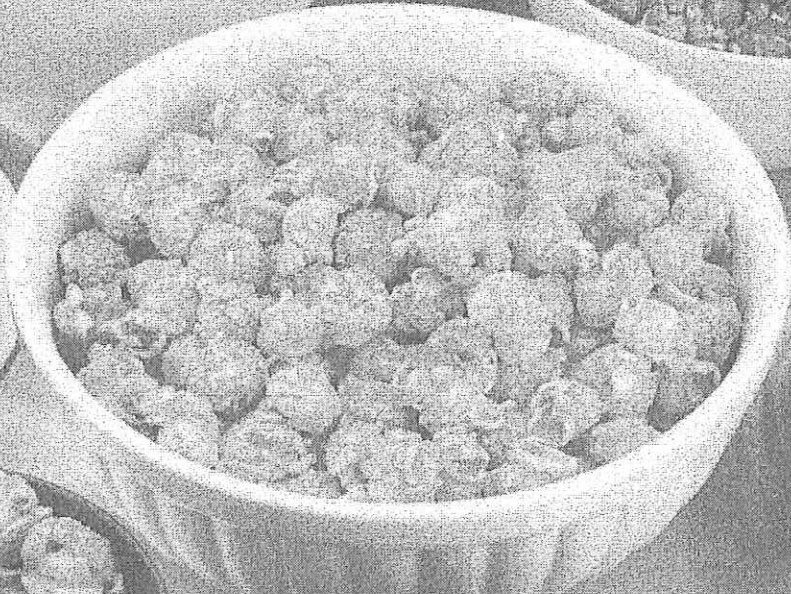
School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

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

IT'S POPPIN' TIME





UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): MICHAEL HAMILTON Date: 6/4/2021

Club Name: MARCHING BAND

Acct. No.: 2033 Acct. Balance to Date: 112260.83

Type of Fund Raiser: CAR WASH

Purpose of Fund Raiser: TO RAISE FUNDS FOR THE UHS MARCHING BAND

Start Date of Project: 4/24/2022 Completion Date of Project: 4/24/2022

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

Sale Area/Location: BEHIND BOB BUIKMAN

Sale will be monitored by: MICHAEL HAMILTON, CARLOS ESQUIVEL, STEPHEN MYERS

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

Vendor Representative's Name: _____

Vendor Business Name: N/A

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ 0

Proposal Sale Price: \$ 10

Total Cost of all Products Not to Exceed: \$ 100

Minimum Total Profit Expected: \$ 500

Faculty Advisor Signature

Signature: [Signature] Date: 6/4/2021

Vice Principal Signature

Signature: _____ Date: _____

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): MICHAEL HAMILTON Date: 6/4/2021

Club Name: MARCHING BAND

Acct. No.: 2033 Acct. Balance to Date: \$12,260.83

Type of Fund Raiser: CAR WASH

Purpose of Fund Raiser: TO RAISE FUNDS FOR THE UHS MARCHING BAND. THESE FUNDS WILL BE USED TO OFFSET ALL COSTS ASSOCIATED WITH THE MARCHING BAND

Start Date of Project: 5/22/2022 Completion Date of Project: 5/22/2022

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

Sale Area/Location: Behind B-E Building

Sale will be monitored by: M. HAMILTON, C. ESQUIVEL, S. MYER

*****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: \$ 0

Proposal Sale Price: \$ 10

Total Cost of all Products Not to Exceed: \$ 100

Minimum Total Profit Expected: \$ 500

Faculty Advisor Signature

Signature: [Signature] Date: 6/4/2021

Vice Principal Signature

Signature: _____ Date: _____

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): MICHAEL HAMILTON Date: 6/4/2021

Club Name: MARCHING BAND

Acct. No.: 2033 Acct. Balance to Date: \$12260.83

Type of Fund Raiser: CAR WASH

Purpose of Fund Raiser: TO OFFSET COSTS ASSOCIATED WITH THE UHS MARCHING BAND

Start Date of Project: 7/17/2022 Completion Date of Project: 7/17/2022

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

Sale Area/Location: BEHIND BOE BUILDING

Sale will be monitored by: M HAMILTON, C ESQUIVEL, S MYERS

***** 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: \$ 0

Proposal Sale Price: \$ 10

Total Cost of all Products Not to Exceed: \$ 160

Minimum Total Profit Expected: \$ 560

Faculty Advisor Signature

Signature: [Signature] Date: 6/4/2021

Vice Principal Signature

Signature: _____ Date: _____

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): MICHAEL HAMILTON Date: 6/4/2021

Club Name: MARCHING BAND

Acct. No.: 2033 Acct. Balance to Date: \$12,260.83

Type of Fund Raiser: CAR WASH

Purpose of Fund Raiser: TO OFFSET COSTS ASSOCIATED WITH THE UHS MARCHING BAND

Start Date of Project: 8/14/2022 Completion Date of Project: 8/14/2022

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

Sale Area/Location: BREWED BOB BUILDING

Sale will be monitored by: M HAMILTON, C ESCOBAR, S MYERS

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

Vendor Representative's Name: _____

Vendor Business Name: M/A

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ 0

Proposal Sale Price: \$ 10

Total Cost of all Products Not to Exceed: \$ 100

Minimum Total Profit Expected: \$ 500

Faculty Advisor Signature

Signature: [Signature] Date: 6/4/2021

Vice Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Cassiano Dos Santos Date: 6/27/21

Club Name: Girls Soccer

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

Type of Fund Raiser: Clothing

Purpose of Fund Raiser: Equipment, clothing, Senior Night gifts

Start Date of Project: 9/1/21 Completion Date of Project: 9/15/21

Date of Sale(s): From 9/1/21 To: 9/15/21

Sale Area/Location: _____

Sale will be monitored by: Coach Dos Santos

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

Vendor Representative's Name: Rick

Vendor Business Name: R+D Promotions

Vendor Address: 164 Van Liew Ave

City: Milktown State & Zip code: N.J 08850

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: 6/28/21

Vice Principal Signature

Signature: [Signature] Date: 6/28/21

School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Lester Lembryk Date: 6/27/21

Club Name: Boys Soccer

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

Type of Fund Raiser: Clothing

Purpose of Fund Raiser: Equipment, Clothing, Senior Gifts, End of the year party

Start Date of Project: 9/1/21 Completion Date of Project: 9/15/21

Date of Sale(s): From 9/1/21 To: 9/15/21

Sale Area/Location: _____

Sale will be monitored by: Lester Lembryk

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

Vendor Representative's Name: Rick

Vendor Business Name: A & D Promotions

Vendor Address: 164 Van Liew Ad.

City: Milltown State & Zip code: N.J 08850

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: 6/28/21

Vice Principal Signature

Signature: [Signature] Date: 6/28/21

School Treasure Signature

Signature: _____ Date: _____

Placed on BOE Meeting Agenda for:

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