

F-140



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

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Applicant Information

Faculty Member (s): Heather Dube Date: 5/10/20

Club Name: Gymnastic

Acct. No.: 2150 Acct. Balance to Date: 12000

Type of Fund Raiser: _____

Purpose of Fund Raiser: raise funds for cancer society thru
gymnastics club
selling T-shirts

Start Date of Project: August 31 Completion Date of Project: Dec 1, 2020

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

Sale Area/Location: Heather Dube at High school

Sale will be monitored by: _____

ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD

Vendor Representative's Name: Kicks n Sticks

Vendor Business Name: Kicks n sticks

Vendor Address: Vaughall Rd

City: Sanibel/Mania State & Zip code: _____

Unit Cost of Product/Service: \$ 7.99

Proposal Sale Price: \$ _____

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

Minimum Total Profit Expected: \$ _____

Faculty Advisor Signature

Signature: H Dube Date: 5/10/20

Vice Principal Signature

Signature: [Signature] Date: 5/10/20

School Treasure Signature

Signature: [Signature] Date: 5/10/20

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): C. Vega Date: 5/13/20

Club Name: Volleyball - Girls

Acct. No.: * 3330 Acct. Balance to Date: * 49

Type of Fund Raiser: snack sales

Purpose of Fund Raiser: girls volleyball acct for senior gifts,
team snacks camp for entire team

Start Date of Project: August 31, 2020 Completion Date of Project: Nov 30, 2020

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

Sale Area/Location: high school

Sale will be monitored by: C. Vega

ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD

Vendor Representative's Name: Old Fashioned Candy

Vendor Business Name: "

Vendor Address: same as last year

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ * 1.00 per item

Proposal Sale Price: \$ _____

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

Minimum Total Profit Expected: \$ _____

Faculty Advisor Signature

Signature: C. Vega Date: 5/10/20

Vice Principal Signature

Signature: [Signature] Date: 5/10/20

School Treasure Signature

Signature: [Signature] Date: 5/10/20

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Low, Deena Date: 5/18/20

Club Name: Football Club

Acct. No.: 2470 Acct. Balance to Date: 1000.00

Type of Fund Raiser: cookie dough sales

Purpose of Fund Raiser: online orders for cookie dough items sold

Start Date of Project: 5/12/2020 Completion Date of Project: 12/31/20

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

Sale Area/Location: High school, online

Sale will be monitored by: _____

ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD

Vendor Representative's Name: Cherrydale Farms

Vendor Business Name: _____

Vendor Address: online

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ varies

Proposal Sale Price: \$ _____

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

Minimum Total Profit Expected: \$ _____

Faculty Advisor Signature

Signature: Low Deena Date: 5/20/20

Vic. Principal Signature

Signature: Dee Horta Date: 5/21/20

School Treasure Signature

Signature: Dee Horta Date: 5/21/20

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Law Grasso Date: 5/14/20

Club Name: Football Club

Acct. No.: 3240 Acct. Balance to Date: 1000.00

Type of Fund Raiser: BSJ

Purpose of Fund Raiser: charging apparel for parents played to purchase online items

Start Date of Project: August 15, 2020 Completion Date of Project: 12/31/20

Date of Sale(s): From online To: High School

Sale Area/Location: online

Sale will be monitored by: Law Grasso

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

Vendor Representative's Name: BSJ

Vendor Business Name: ''

Vendor Address: online

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ varies

Proposal Sale Price: \$ _____

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

Minimum Total Profit Expected: \$ _____

Signature: [Signature] Faculty Advisor Signature Date: 5/14/20

Signature: [Signature] Vice Principal Signature Date: 5/14/20

Signature: [Signature] School Treasure Signature Date: 5/14/20

Placed on BOE Meeting Agenda for: _____

Approved: YES NO By: _____



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information
Faculty Member (s): Lexie Leabryk Date: 5/13/20

Club Name: Boys Soccer

Acct. No.: * 3380 Acct. Balance to Date: 400.00

Type of Fund Raiser: selling water, snacks etc

Purpose of Fund Raiser: Be able to feed team snacks, end of year party, senior gifts, Junior class scholarship

Start Date of Project: August 13, 2020 Completion Date of Project: this season 12/1/20

Date of Sale(s): From 11 To: 11

Sale Area/Location: high school

Sale will be monitored by: Lexie Leabryk

ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD

Vendor Representative's Name: Shopsite, Costco, Perched Snacks etc.

Vendor Business Name: "

Vendor Address: Union - store

City: Union State & Zip code: US 07083

Unit Cost of Product/Service: \$ * 1.00 per for sale

Proposal Sale Price: \$ "

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

Minimum Total Profit Expected: \$ "

Faculty Advisor Signature

Signature: Lexie Leabryk Date: 5/13/20

Vice Principal Signature

Signature: [Signature] Date: 5/13/20

School Treasure Signature

Signature: [Signature] Date: 5/13/20

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Union High School Board of Education

Applicant Information

Faculty Member (s): Cassman, D. Williams Date: 5/12/20
 Club Name: Girls Soccer
 Acct. No.: 3300 Acct. Balance to Date: 200.00
 Type of Fund Raiser: R.A.B. Promotions
 Purpose of Fund Raiser: cleaning sales, girls soccer apparel

Start Date of Project: August 7, 2020 Completion Date of Project: Dec 2, 2020
 Date of Sale(s): From _____ To _____
 Sale Area/Location: High School
 Sale will be monitored by: Cassman, D. Williams

ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD

Vendor Representative's Name: R.A.B. Promotions
 Vendor Business Name: _____
 Vendor Address: Cranford State & Zip code: NS
 City: _____
 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: 5/12/20
 Signature: [Signature] Vice Principal Signature Date: 5/12/20
 Signature: [Signature] School Treasure Signature Date: 5/12/20

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Faculty Member (s): Don Erdman Applicant Information Date: 5/15/20

Club Name: Cross Country

Acct. No.: 3360 Acct. Balance to Date: *120.00

Type of Fund Raiser: Cougar books

Purpose of Fund Raiser: Raise funds to benefit cross country team - food items, snacks, end of year awards etc.

Start Date of Project: Sept 1, 2020 Completion Date of Project: 01/15/2020

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

Sale Area/Location: high school

Sale will be monitored by: Don Erdman

ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD

Vendor Representative's Name: Don Erdman Support A Circle

Vendor Business Name: _____

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ Books 20.00 per Book

Proposal Sale Price: \$ _____

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

Minimum Total Profit Expected: \$ _____

Faculty Advisor Signature

Signature: Don Erdman Date: 5/12/20

Vice Principal Signature

Signature: [Signature] Date: 5/12/20

School Treasure Signature

Signature: [Signature] Date: 5/20/20

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Don Edman Date: 5/24/20

Club Name: Cross Country

Acct. No.: 3360 Acct. Balance to Date: \$ 180.00

Type of Fund Raiser: water, snack sales

Purpose of Fund Raiser: items to benefit entire team
Can receive gifts sold at meets, etc.

Start Date of Project: Sept 1, 2020 Completion Date of Project: Dec 3, 2020

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

Sale Area/Location: at high school

Sale will be monitored by: Don Edman

ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD

Vendor Representative's Name: Don Edman

Vendor Business Name: Shrink Shop/Shop

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service:	\$ <u>1.00 per item</u>
Proposal Sale Price:	\$ _____
Total Cost of all Products Not to Exceed:	\$ _____
Minimum Total Profit Expected:	\$ _____

Faculty Advisor Signature

Signature: [Signature] Date: 5/12/20

Vice Principal Signature

Signature: [Signature] Date: 5/12/20

School Treasurer Signature

Signature: [Signature] Date: 5/12/20

Placed on BCE Meeting Agenda for:

Approved: YES NO

Month: _____ Year: _____ By: _____