

RECEIVED
10/6/23

HANNAH CALDWELL ELEMENTARY SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): AnneMarie Caldarola Date: 10/5/23

Club Name: Art

Acct. No.: 2022 Acct. Balance to Date: \$1628.68

Type of Fund Raiser: Artome Art Show

Purpose of Fund Raiser: The Ultimate Art Show Experience. This show (fundraiser) is a way to advocate for the Arts at HCS. It provides a fabulous combination of celebrating creative expression, stimulating imagination & creative thinking/self esteem

Start Date of Project: 5/14/24 Completion Date of Project: 5/21/24

Date of Sale(s): From 5/14/24 To: _____

Sale Area/Location: Hannah Caldwell Gymnasium

Sale will be monitored by: AnneMarie Caldarola & PTA

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

Vendor Representative's Name: Artome - Rep is Denieen Wolber

Vendor Business Name: Artome

Vendor Address: 1225 Old Alpharetta Rd. Ste #290

City: Alpharetta GA State & Zip code: 30005

Unit Cost of Product/Service: \$ _____

Proposal Sale Price: \$ 27.00

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

Minimum Total Profit Expected: \$ \$ 27.00

Faculty Advisor Signature

Signature: AnneMarie Caldarola Date: 10/5/23

Principal Signature

Signature: Ma G Date: 10/5/23

School Treasure Signature

Signature: Cheryl Costello Date: 10/5/23

Placed on BOE Meeting Agenda for:

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

RE 10/6/23

WASHINGTON ELEMENTARY SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): KIM MARANO Date: 10/6/23

Club Name: GUIDANCE Counselor / PBSIS Incentive Program

Acct. No.: 2005 Acct. Balance to Date: _____

Type of Fund Raiser: PRETZEL SALE

Purpose of Fund Raiser: Behavior modification - Washington wages incentive for students - to purchase prizes.

Start Date of Project: 10/6/23 Completion Date of Project: 6/30/24

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

Sale Area/Location: WES

Sale will be monitored by: Kim Marano

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

Vendor Representative's Name: NOVE

Vendor Business Name: Philly Pretzel Factory

Vendor Address: 295 SOUTH AVE EAST

City: WESTFIELD State & Zip code: NJ 07083

Unit Cost of Product/Service: \$.55

Proposal Sale Price: \$ 2.00

Total Cost of all Products Not to Exceed: \$ 3000.00

Minimum Total Profit Expected: \$ 7000.00

Faculty Advisor Signature

Signature: Kim Marano Date: 10/6/23

(Vice) Principal Signature

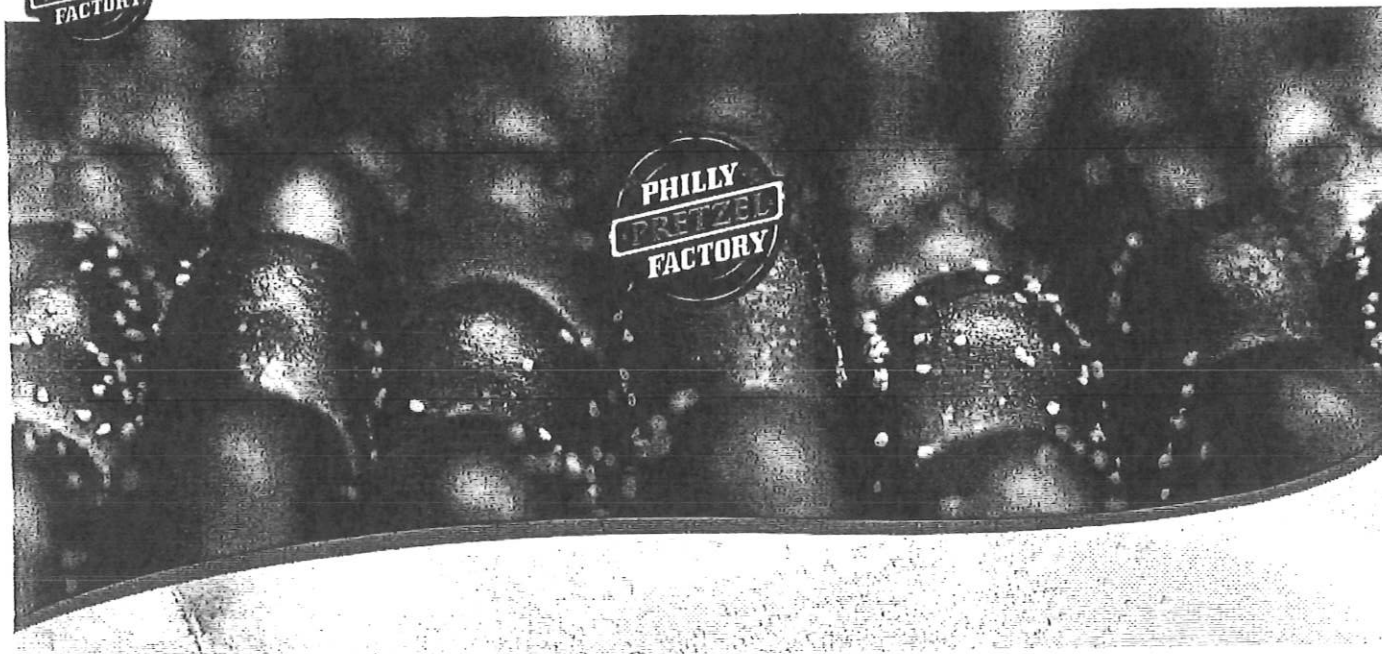
Signature: _____ Date: 10/6/2023

School Treasure Signature

Signature: Mary [unclear] Date: 10/6/23

Placed on BOE Meeting Agenda for:

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



WHERE BETTER GETS MADE.

Being "Better" sounds easier than it is. It takes dedication. Risk-taking. A refusal to compromise your principles. And yeah, sometimes that means keeping things simple. From our shape to our recipe, wholesome is how we do things better, every time. It's not just about what goes into our pretzels. It's about how you feel when you eat one...or four! It's in the memories you make at tailgates, birthday parties, and movie nights – and the happiness you feel when you take the first bite.

Better is how we measure ourselves. At Philly Pretzel Factory, we dedicate every day to the craft, the creation, and the experience of better.

OUR HISTORY: PHILLY BORN AND BREAD

Our founder, Dan DiZio, grew up eating pretzels. He started selling soft pretzels in his neighborhood at age eleven, becoming a child entrepreneur with a sales team of kids from all around the town. He missed pretzels when he went away to school, so after graduation Dan partnered with his college buddy Len Lehman to found the original Philly Pretzel Factory location in the Mayfair section of Philadelphia. Dan and Len were inspired by their love for pretzels and experiences with the original Philly-based pretzel bakeries, so it was no surprise that their own pretzels were delicious! They held a deep respect for those founding fathers whose wholesale bakeries in the warehouses in and around Philadelphia fed the locals at all times of days. So opening their first Philly Pretzel Factory as an actual storefront instead of in an industrial space was an experiment, a kind of "why not try this," between



0:00 / 0:53

HOW WE DO IT: FACTORY FRESH

Sounds like an oxymoron, right? Wrong. All of our pretzels are hand-twisted and baked fresh using proprietary equipment and an ingredients list that's short and sweet. Flour, water, yeast, and a pinch of salt are all you knead for a fresh, no mess snack. Simple makes them better! Because our pretzels are so deliciously simple, we leave it up to you to customize with dips and mustards. You'll also find our pretzels wrapped around specialties like cheesesteaks and hot dogs. Find a new favorite every time!





START AN ORDER

FIND A STORE

VIEW THE MENU

MAKE THE DOUGH WHEN YOU OWN A PHILLY PRETZEL FACTORY

Interested in opening a Philly Pretzel Factory of your own? We can't wait to meet you! We're softies after all. Find out more or contact us and we'll make sure you have all the information you knead.

OWN A FRANCHISE



SO THE TWIST

Join our e-mailing list and be first in line to get promotions and news from Philly Pretzel Factory. (And yes, we're kidding, we're all here for the free pretzels.)

First Name	Last Name	Email Address	SUBSCRIBE
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MENU

- [Menu](#)
- [Nutritional](#)
- [Gift Card Balance](#)
- [Merchandise](#)

LEGAL

- [Privacy Policy](#)
- [General Contest Rules](#)

LOCATIONS

- [Store Locator](#)

ABOUT

- [About](#)
- [Careers](#)
- [FAQs](#)
- [Own A Franchise](#)
- [Franchisee Login](#)

CONTACT

[Contact Philly Pretzel Factory](#)

[Philly Pretzel Factory HQ](#)
 1525 Ford Road
 Bensalem, PA 19020
 (215) 338-4606
info@spfsinc.com



WASHINGTON ELEMENTARY SCHOOL

STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Washington School

Applicant Information

Faculty Member (s): Kim Marano Date: 10/18/23

Club Name: School Counselor

Acct. No.: 2005 Acct. Balance to Date: \$ 4852.60

Type of Fund Raiser: Heavenly Hats

Purpose of Fund Raiser: to raise money for "Heavenly Hats" project - buys hats for children with cancer.

Start Date of Project: Dec. 1, 2023 Completion Date of Project: Dec. 7, 2023

Date of Sale(s): From Dec. 1, 2023 To: Dec. 7, 2023

Sale Area/Location: WES

Sale will be monitored by: Kim Marano

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

Vendor Representative's Name: See Attached

Vendor Business Name: _____

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ 1.00

Proposal Sale Price: \$ 1.00

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

Minimum Total Profit Expected: \$ —

Faculty Advisor Signature

Signature: Kim Marano Date: 10/19/23

Vice Principal Signature

Signature: _____ Date: 10/23/27

School Treasure Signature

Signature: Mary Winters Date: 10/19/23

Placed on BOE Meeting Agenda for:

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

☎ **Phone:** 920-362-2668 (tel:9203622668)

📍 **Address:** 2325 Pamperin Rd. Suite 3 - Green Bay, WI 54313
(<https://goo.gl/maps/m6rxT9YLDizGDidc8>)

[Heavenly Hats](#)

[About Us](#) ▼

[Testimonials](#)

[News And Events](#)

[Hat Parade](#) ▼

[Contact Us](#)



Request A Hat Package

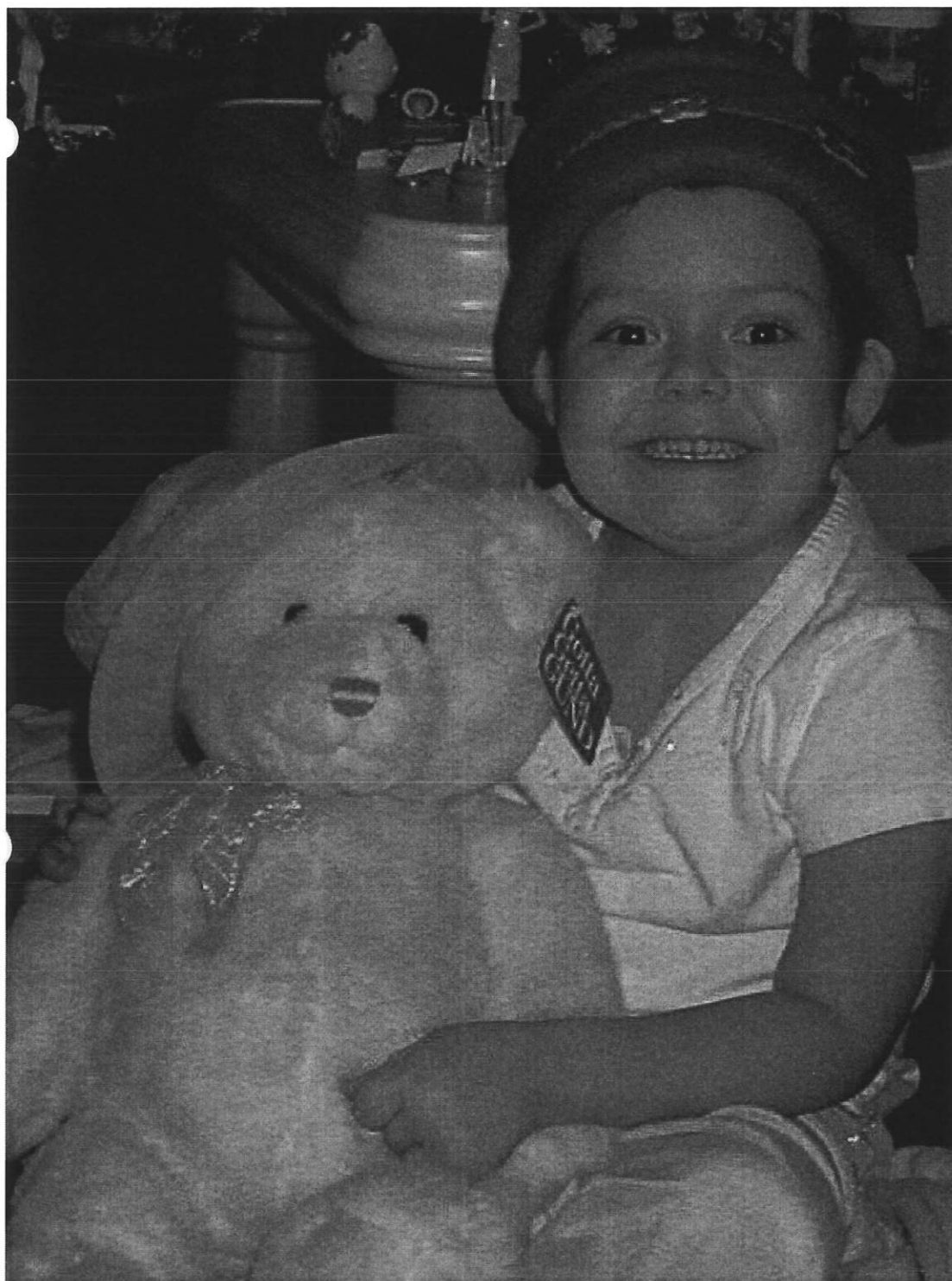
FILL OUT THE FORM (/REQUEST-A-HAT-PACKAGE/)



The Heavenly Hats Foundation™ collects and distributes brand new hats of all kinds to those heroes of all ages who lose their hair due to the treatment of cancer or the many other medical conditions which may cause hair loss. The Heavenly Hats Foundation™ was founded by Anthony Leanna of Green Bay, WI when he was only 10 years old. Heavenly Hats is an official 501(c)3 organization and will provide our letter of acceptance from the IRS if requested.

Since it's beginnings in 2001, Heavenly Hats™ has distributed more than 4,500,000 brand-new hats to individuals and hospitals. We want to help every patient who is in need of head wear for warmth, comfort, courage and strength.

It's our hope and prayer that one day a cure for cancer and the many other illnesses that affect our family and friends will be found and eventually no one will be in need of a Heavenly Hat™, but until then we'll keep sending these special hats (*and smiles*) to our Hat Heroes. Thank you to all of our donors without you, we would not be able to continue on with our mission.



One of our very special Hat Hero's Kami Bug.



Hat Parade

Please help us to make our “Hat Parade” a huge success and help all of our “Hat Heroes” in need. The cost of shipping our new hats to the patients and hospitals is huge.

[Learn More](#)

(/hat-parade/)



Hat Package Request

We are asking hospitals and hospital staff to ask their patients who are in need of new head wear to fill out our “Hat Request Form”. Thank you for your help!

[Learn More](#)

(/request-a-hat-package/)

HELP SUPPORT THE HEAVENLY HATS FOUNDATION™

Be a part of one of National Hat Parades. Please visit our “Hat Parade” page and find out how your
♥ school, business, church or organization can hold a fun hat parade and help our foundation. **See**

the Hat Parade Information Page (<https://heavenlyhats.org/hat-parade/>) for more.

- ♥ Have your church or organization collect monetary donations for Heavenly Hats or we can always use brand new stuffed animals and toys for the children's boxes.
- ♥ Theme your Bat/Bar Mitzvah for Heavenly Hats and collect brand new hats and collect monetary donations at your special event.
- ♥ Make a monetary donation using our PayPal option or Fundly.com donation link on any of our pages or you can send your donation directly to:
- ♥ Have your club, school, business, church, temple or organization hold a fundraising event in your community to help support Heavenly Hats.



Heavenly Hats has earned its gold seal of approval from this country's leading charity navigator Guidestar.

A special thank you to **Ace Manufacturing** (<http://ami-mfg.com/>) of Green Bay who has been generous enough to donate office and storage space and to **Green Bay Packaging** (<http://www.gbp.com/>) of Green Bay, WI who has also kindly

donated Heavenly Hats™ warehouse space for our out of season hats and has donated custom boxes to ship the hats. Thank you both very much without the generosity of these businesses we would not be able to continue on with our mission to help all of the cancer patients in need.

Invite your local schools, businesses or local organizations to help our foundation by holding a ***Hat Parade*** (/hat-parade/). Please join us and help us help those in need!

HEAVENLY HATS FOUNDATION™

ATTENTION: DeeAnn Paschke

2325 Pamperin Rd. Suite 3

Green Bay, WI 54313

If you are donating hats please send them to:

660 N. Northview Rd.

Green Bay, WI 54311

QUICK LINKS

Heavenly Hats (<https://heavenlyhats.org/>)

About Us (<https://heavenlyhats.org/about-us/>)

About Us (<https://heavenlyhats.org/about-us/>)

History (<https://heavenlyhats.org/about-us/history/>)

Help Support (<https://heavenlyhats.org/about-us/help-support/>)

Hat Angels Donors (<https://heavenlyhats.org/about-us/hat-angels-donors/>)

Testimonials (<https://heavenlyhats.org/testimonials/>)

News And Events (<https://heavenlyhats.org/news-and-events/>)

Hat Parade (<https://heavenlyhats.org/hat-parade/>)

Hat Parade (<https://heavenlyhats.org/hat-parade/>)

Hat Heros (<https://heavenlyhats.org/hat-parade/hat-heros/>)

Request a Hat Package (<https://heavenlyhats.org/hat-parade/hat-package/>)

Contact Us (<https://heavenlyhats.org/contact-us/>)

OUR FACEBOOK



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Cassiano Dos Santos Date: 9/28/23

Club Name: Union Girls Soccer

Acct. No.: 3290 Acct. Balance to Date: _____

Type of Fund Raiser: Snacks

Purpose of Fund Raiser: Team Awards and Food

Start Date of Project: 11/1/23 Completion Date of Project: 6/1/24

Date of Sale(s): From 11/1/23 To: 6/1/24

Sale Area/Location: School

Sale will be monitored by: Cassiano Dos Santos

***** 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: 9/28/23

Vice Principal Signature

Signature: _____ Date: 9/28/23

School Treasure Signature

Signature: Ernie Brown Date: 9/29/23

Placed on BOE Meeting Agenda for:

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



STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Omar Wright Date: 10/2/23

Club Name: Girls Basketball

Acct. No.: 3220 Acct. Balance to Date: _____

Type of Fund Raiser: Online Blast Fundraiser

Purpose of Fund Raiser: To purchase addition equipment + and team activities

Start Date of Project: 11/15/23 Completion Date of Project: 6/30/24

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: _____

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: 10/2/23

Vice Principal Signature

Signature: [Signature] Date: 10/2/23

School Treasure Signature

Signature: [Signature] Date: 10/2/23

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: 10/17/23
 Club Name: Softball
 Acct. No.: 3340 Acct. Balance to Date: _____

Type of Fund Raiser: Leading Edge Fundraising
 Purpose of Fund Raiser: Raise money for end of the year softball events / Senior Night necessities

Start Date of Project: 3/01/24 Completion Date of Project: 5/29/24
 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: \$ _____

Faculty Advisor Signature	
Signature: <u>Shawn McMahon</u>	Date: <u>10/17/23</u>
Principal/Vice Principal Signature	
Signature: <u>[Signature]</u>	Date: <u>10/17/23</u>
School Treasurer Signature	
Signature: <u>Anne Brando</u>	Date: <u>10/17/23</u>
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

RECEIVED
10/14/23

Applicant Information

Faculty Member (s): Julia Saladino Date: 9/20/23
 Club Name: Key Club
 Acct. No.: 46 Acct. Balance to Date: N/A

Type of Fund Raiser: Gertrude Hawk
 Purpose of Fund Raiser: Raise money for key club expenses
such as DECON

Start Date of Project: 10/10/23 Completion Date of Project: 12/21/23
 Date of Sale(s).....From: _____ To: _____

Sale Area/Location: UHS
 Sale will be monitored by: Julia Saladino

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

Vendor Representative's Name: Sharon Uhl
 Vendor Business Name: Gertrude Hawk
 Vendor Address: _____
 City: State & Zip code: _____
 Unit Cost of Product/Service: \$ varies
 Proposal Sale Price: \$ varies
 Total Cost of all Products Not to Exceed: \$ _____
 Minimum Total Profit Expected: \$ 400

Faculty Advisor Signature	
Signature: <u>[Signature]</u>	Date: <u>9/20/23</u>
Principal/Vice Principal Signature	
Signature: <u>[Signature]</u>	Date: <u>10/16/23</u>
School Treasurer Signature	
Signature: _____	Date: _____
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____ Approved: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

RECEIVED
10/10/23

Applicant Information

Faculty Member (s): Julia Saladino Date: 9/20/23
 Club Name: Key Club
 Acct. No.: 46 Acct. Balance to Date: NA

Type of Fund Raiser: Bagel Stick Sale
 Purpose of Fund Raiser: Raise money for Key Club expenses such as DECON

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

Sale Area/Location: L105, before or after school
 Sale will be monitored by: Julia Saladino

*****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: State & Zip code: N/A
 Unit Cost of Product/Service: \$ N/A
 Proposal Sale Price: \$ N/A
 Total Cost of all Products Not to Exceed: \$ N/A
 Minimum Total Profit Expected: \$ N/A

Faculty Advisor Signature	
Signature: <u>Julia Saladino</u>	Date: <u>9/20/23</u>
Principal/Vice Principal Signature	
Signature: <u>Michael Bessard</u>	Date: <u>10/10/23</u>
School Treasurer Signature	
Signature: _____	Date: _____
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



I HIGH SCHOOL

STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Sara Matos Date: 10/24/2023

Club Name: FBLA

Acct. No.: Not Sure Acct. Balance to Date: Not Sure

Type of Fund Raiser: Krispy Kreme

Purpose of Fund Raiser: To raise money for yearly dues (\$17 per member), to help fund potential trips to state competitions and nationals

Start Date of Project: 11/22/2023 Completion Date of Project: End of Year

Date of Sale(s).....From: 11/22/2023 To: End of Year

Sale Area/Location: D229 and independent sales for students

Sale will be monitored by: Mrs. Matos

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

Vendor Representative's Name: Krispy Kreme

Vendor Business Name: _____

Vendor Address: _____

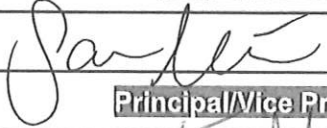
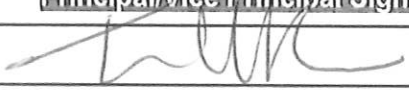
City: State & Zip code: _____

Unit Cost of Product/Service: \$7.00

Proposal Sale Price: \$14.00

Total Cost of all Products Not to Exceed: \$ Products are purchased after receiving money from buyers

Minimum Total Profit Expected: \$2,000

Faculty Advisor Signature	
Signature: Sara Matos 	Date: 10/24/2023
Principal/Vice Principal Signature	
Signature: 	Date: <u>10/24/23</u>
School Treasurer Signature	
Signature: _____	Date: _____
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____ Approved: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): JADA MYERKO Date: 10/25/23

Club Name: PROM

Acct. No.: 2012 Acct. Balance to Date: _____

Type of Fund Raiser: Step Challenge

Purpose of Fund Raiser: RAISE MONEY FOR PROM

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

Date of Sale(s): From BOE APPROVAL To: END OF SCHOOL YEAR

Sale Area/Location: UHS

Sale will be monitored by: Myerko

***** 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: 10/26/23

Vice Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: [Signature] Date: 10/25/23

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: 10/26/23

Club Name: PROM

Acct. No.: 2012 Acct. Balance to Date: _____

Type of Fund Raiser: FOOD EATING CONTEST

Purpose of Fund Raiser: RAISE MONEY FOR PROM

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

Date of Sale(s): From BOE Approval To: END OF SCHOOL

Sale Area/Location: LHS

Sale will be monitored by: 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: \$ _____

Faculty Advisor Signature

Signature: [Signature] Date: 10/26/23

Vice Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: [Signature] Date: 10/25/23

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 NYARRO Date: 10/26/23

Club Name: PROM

Acct. No.: 2012 Acct. Balance to Date: _____

Type of Fund Raiser: Canvas raffle

Purpose of Fund Raiser: RAISE MONEY FOR PROM

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

Date of Sale(s): From BOE APPROVAL To: END OF SCHOOL YEAR

Sale Area/Location: UHS

Sale will be monitored by: NYARRO

***** 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: 10/26/23

Vice Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: [Signature] Date: 10/26/23

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: 10/26/23

Club Name: PROM

Acct. No.: 2012 Acct. Balance to Date: _____

Type of Fund Raiser: COLDSTONE CREAMERY

Purpose of Fund Raiser: RAISE MONEY FOR PROM

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

Date of Sale(s): From BOE APPROVAL To: END OF SCHOOL YEAR

Sale Area/Location: UHS

Sale will be monitored by: 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: \$ _____

Faculty Advisor Signature

Signature: [Signature] Date: 10/26/23

Vice Principal Signature

Signature: _____ Date: _____

School Treasure Signature

Signature: [Signature] Date: 10/25/23

Placed on BOE Meeting Agenda for:

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



UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Megan Kaplan, Shannon McMahon, Michele Mendro Date: 10/27/23
↳ Dominick Gargemi

Club Name: Class of 2024 + Yearbook

Acct. No.: 2227 Acct. Balance to Date: _____

Type of Fund Raiser: Senior Superlative Award Night

Purpose of Fund Raiser: To have a night honoring the senior superlative nominees. To raise money for the Senior Class & the yearbook

Start Date of Project: Feb 2024 Completion Date of Project: Feb 2024

Date of Sale(s): From Feb 2024 To: Feb 2024

Sale Area/Location: Auditorium

Sale will be monitored by: 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: \$ _____

Faculty Advisor Signature

Signature: [Signature] Date: 10/27/23

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): Megan Kaplan, Shannon McMahon & Michele Mendez Date: 10/27/23

Club Name: Senior Class @ class of 2024

Acct. No.: 2227 Acct. Balance to Date: _____

Type of Fund Raiser: Mr. VHS

Purpose of Fund Raiser: To raise money for senior activities.

Start Date of Project: April 2024 Completion Date of Project: April 2024

Date of Sale(s): From April 4 2024 To: TBD

Sale Area/Location: The auditorium

Sale will be monitored by: Senior advisor

***** 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: 10/27/23

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): Megan Kaplan, Shannon McMahon, Michele Mendez Date: 10/27

Club Name: Senior Class - Class of 2024

Acct. No.: 2227 Acct. Balance to Date: _____

.....
Type of Fund Raiser: Winter Wonderland

Purpose of Fund Raiser: To have a night of winter activities such as gingerbread housemaking, cornhole + other activities to raise money for the senior class

Start Date of Project: December 7 Completion Date of Project: December 7

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

Sale Area/Location: _____

Sale will be monitored by: The 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: \$ _____

Faculty Advisor Signature

Signature: [Signature] Date: 10/27/23

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): Megan Kaplan, Shannon McMahon, Michele Marto Date: 10/27/23

Club Name: Class of 2024

Acct. No.: 2227 Acct. Balance to Date: _____

Type of Fund Raiser: Dine to Donate

Purpose of Fund Raiser: Various dines to donate throughout the year to raise money for senior activities

Start Date of Project: 11/20 Completion Date of Project: TBD

Date of Sale(s): From 11/20 To: TBD

Sale Area/Location: _____

Sale will be monitored by: The senior class 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: \$ _____

Faculty Advisor Signature

Signature: [Signature] Date: 10/27/23

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): Kaplan, McMahon, Menden Date: 10/27/23

Club Name: Senior Class Class of 2024

Acct. No.: 2227 Acct. Balance to Date: _____

Type of Fund Raiser: Fashion Show

Purpose of Fund Raiser: To raise money for senior activities

Start Date of Project: January 2024 Completion Date of Project: January 2024

Date of Sale(s): From 1/2/24 To: TBD

Sale Area/Location: The auditorium

Sale will be monitored by: ✓ The Senior Advisor

***** 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: 10/27/23

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): Kaplan, menders, memahon Date: 10/27/23

Club Name: Class of 2024 - Senior Class

Acct. No.: 2227 Acct. Balance to Date: _____

Type of Fund Raiser: Penny War

Purpose of Fund Raiser: To raise money for senior activities

Start Date of Project: to Feb 2024 Completion Date of Project: Feb 2024

Date of Sale(s): From Feb 2024 To: Feb 2024

Sale Area/Location: JHS

Sale will be monitored by: 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: \$ _____

Faculty Advisor Signature

Signature: [Signature] Date: 10/27/23

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): Omar Wright Date: 10/30/23

Club Name: Girls Basketball

Acct. No.: 3320 Acct. Balance to Date: _____

Type of Fund Raiser: Cookie/Candy Sale

Purpose of Fund Raiser: to raise fund for clinics photos and equipment for the girls

Start Date of Project: 11/20/23 Completion Date of Project: 6/20/24

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: _____

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: 10/30/23

Vice Principal Signature

Signature: [Signature] Date: 10/30/23

School Treasure Signature

Signature: [Signature] Date: 10/30/23

Placed on BOE Meeting Agenda for:

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



Burnet Middle School STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Gina Calderone-McDowell Date: 10/18/23

Club Name: 8th Grade Activities

Acct. No.: 2020 Acct. Balance to Date: _____

Type of Fund Raiser: sell pretzels, candy grams

Purpose of Fund Raiser: 8th grade activities throughout the year.

Start Date of Project: 10/2023 Completion Date of Project: 06/2024

Date of Sale(s): From 11/2023 To: 06/2024

Sale Area/Location: _____

Sale will be monitored by: G. Calderone-McDowell

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

Vendor Representative's Name: _____

Vendor Business Name: Castle Fundraising & Donations

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ _____

Proposal Sale Price: \$ 7.00 each

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

Minimum Total Profit Expected: \$ 4500.00

Faculty Advisor Signature

Signature: [Signature] Date: 10/20/23

Vice Principal Signature

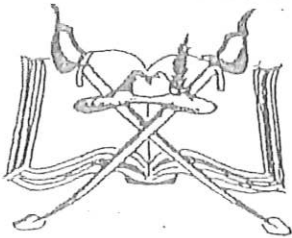
Signature: [Signature] Date: 10/25/23

School Treasure Signature

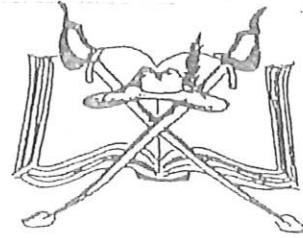
Signature: [Signature] Date: 10/30/23

Placed on BOE Meeting Agenda for:

Month: _____	Year: _____	Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____
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**BURNET MIDDLE SCHOOL
STUDENT ACTIVITIES
FUNDRAISER PROPOSAL**



Applicant Information

Faculty Member (s): T. Singletary Date: 10/20/23

Club Name: Chorus

Acct. No.: 2006 Acct. Balance to Date: _____

Type of Fund Raiser: Savearound Coupon Fundraiser

Purpose of Fund Raiser: To raise money for the music dept and eventually replace auditorium piano.

Start Date of Project: 11/1/23 Completion Date of Project: _____

Date of Sale(s): From 11/1/23 To: 6/15/24

Sale Area/Location: Student Home, Auditorium during concert.

Sale will be monitored by: T. Singletary

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

Vendor Representative's Name: Anna Acquisto

Vendor Business Name: Save Around

Vendor Address: PO Box 2399

City: Binghamton State & Zip code: NY 13902

Unit Cost of Product/Service: \$ 12.50 per coupon Book

Proposal Sale Price: \$ 25

Total Cost of all Products Not to Exceed: \$ 2,500

Minimum Total Profit Expected: \$ 1,250

Faculty/Advisor Signature

Signature: [Signature] Date: 10/20/23

Vice Principal Signature

Signature: [Signature] Date: 10/22/23

School Treasure Signature

Signature: [Signature] Date: 10/30/23

Placed on BOE Meeting Agenda for

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



Dear Parents Friends, Family, & Students,

We are excited to offer our families and friends the opportunity to purchase the 2023 Coupon Books. The book includes a free Savings App with thousands of additional local and national coupons! Everyone can save a lot of money and help us raise funds for our Music Department.

For every 5 books you sell, you get 1 book FREE!

EASY WAYS TO SELL AND PURCHASE BOOKS...FREE SHIPPING!

ORDER/SELL BOOKS ONLINE with a CREDIT/DEBIT card:

- Go to **SAPayNow.com/263624**
 - Select "Have my book" to pay with a credit/debit card for the book sent home
 - Select "add another book" to order additional books
 - SaveAround will ship orders directly to you and your supporters if you select "Ship book(s) - FREE SHIPPING"
 - Seller will deliver your order to you at the end of our sale if you select "I have my book/Seller will deliver at end of sale"

- Post, email, and text our **SAPayNow.com/263624** link to family, friends and coworkers so they can purchase books! They will enjoy saving money and supporting our group too!

ORDER/SELL BOOKS with CASH, BANK CHECK, OR MONEY ORDER:

- Please complete all customers' order information and your Seller's information on the order form (found inside back cover of book).
- Please no personal checks.
- Safely Return the completed order form with payment to your group leader.
- **Pay for and keep the book sent home. Your additional orders paid for, will be sent home at the end of our sale.**

If you did not sell or purchase books:

1. Please return the book sent home. We need the unsold books to fill orders.
2. Our group will be charged if the book is not returned.

If you have any questions, please contact **Mr. Terron Singletary** at **tsingletary@twpunionschools.org**

JEFFERSON SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Fatima DeCorte Date: 11/17/23

Club Name: PBSIS

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

Type of Fund Raiser: PBSIS rewards

Purpose of Fund Raiser: raise funds for PBSIS rewards

Start Date of Project: 11/13/23 Completion Date of Project: 11/17/23

Date of Sale(s): From 11/13/23 To: 11/17/23

Sale Area/Location: _____

Sale will be monitored by: F. DeCorte

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

Vendor Representative's Name: none

Vendor Business Name: none

Vendor Address: none

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ 0.00

Proposal Sale Price: \$ 1.00

Total Cost of all Products Not to Exceed: \$ 0.00

Minimum Total Profit Expected: \$ 100.00

Faculty Advisor Signature

Signature: [Signature] Date: 10/20/23

(Vice) Principal Signature

Signature: [Signature] Date: 10/27/23

School Treasure Signature

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: Nicole Kelly Date: 10/13/2023
 Club Name: Kawameeh Middle School Student Council

Account #: 19 Acct. Balance to Date: \$413.61

Type of Fundraiser(s): (via student donations) - Bake Sale (could include donated baked goods, bagels, pretzels, other food items).

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023 Completion Date of Project: June 2024
 Date of Sales: Weekly from December 2023 To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
 Sales will be monitored by: Nicole Kelly, Advisor

*****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: \$n/a
 Proposal Sale Price: \$1.00 - \$2.00
 Total Cost of all Products Not to Exceed: \$100
 Minimum Total Profit Expected: \$25.00

FACULTY ADVISOR SIGNATURE	
Signature: <i>Nicole Kelly</i>	Date: 10/16/23
PRINCIPAL'S SIGNATURE	
Signature: <i>Gwonne Lorenzo</i>	Date: 10/13/23
SCHOOL TREASURE SIGNATURE	
Signature: <i>A Powers</i>	Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month: Year: Approved: YES NO By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly
Club Name: Kawameeh Middle School Student Council

Date: 10/13/2023

Account #: 19 Acct. Balance to Date: \$413.61

Type of Fundraiser(s): (via student donations) - Turkey Trot/Cupid Shuffle/Color Run/RockPaperScissors Day - could involve sponsoring runners, jar donations, costumes with teacher/staff participation. These are all the same fundraiser (but seasonal with different titles). Students would buy feathers/hearts and the teacher/staff member with the most collected must complete a run/dance.

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023 Completion Date of Project: June 2024
Date of Sales: Weekly from December 2023 To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
Sales will be monitored by: Nicole Kelly, Advisor

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

Vendor representative's Name:

Vendor Business Name: Dollar Tree

Vendor Address:
City: Union, NJ

State & Zip Code:

Unit Cost of Product/Service:	\$
Proposal Sale Price:	\$1.00-\$2.00
Total Cost of all Products Not to Exceed:	\$100
Minimum Total Profit Expected:	\$25

FACULTY ADVISOR SIGNATURE	
Signature: <i>Nicole Kelly</i>	Date: 10/16/23
PRINCIPAL'S SIGNATURE	
Signature: <i>Wonne Jones</i>	Date: 10/13/23
SCHOOL TREASURE SIGNATURE	
Signature: <i>A Powers</i>	Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month: Year: Approved: YES NO By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly
Club Name: Kawameeh Middle School Student Council

Date: 10/13/2023

Account #: 19

Acct. Balance to Date: \$413.61

Type of Fundraiser(s): (via student donations) - Penny Wars/Guessing Game Jars. Students will donate money to various jars/jugs and it will be counted at the end. Classes with the most money will win a prize.

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023

Completion Date of Project: June 2024

Date of Sales: Weekly from December 2023

To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
Sales will be monitored by: Nicole Kelly, Advisor

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

Vendor representative's Name:

Vendor Business Name: Dollar Tree

Vendor Address:

City: Union, NJ

State & Zip Code:

Unit Cost of Product/Service:

\$

Proposal Sale Price:

\$0

Total Cost of all Products Not to Exceed:

\$25 (jars)

Minimum Total Profit Expected:

\$25

FACULTY ADVISOR SIGNATURE

Signature: *Nicole Kelly*

Date: 10/13/23

PRINCIPAL'S SIGNATURE

Signature: *Yvonne Lorenzo*

Date: 10/13/23

SCHOOL TREASURE SIGNATURE

Signature: *A Powers*

Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month:

Year:

Approved: YES NO

By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly
Club Name: Kawameeh Middle School Student Council

Date: 10/13/2023

Account #: 19

Acct. Balance to Date: \$413.61

Type of Fundraiser(s): (via student donations) - Pajama Days/Spirit Week Special Days.
Students will pay cash to wear certain themed apparel to school on certain days.

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023
Date of Sales: Weekly from December 2023

Completion Date of Project: June 2024
To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
Sales will be monitored by: Nicole Kelly, Advisor

****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:

\$1.00-\$2.00

Total Cost of all Products Not to Exceed:

\$0

Minimum Total Profit Expected:

\$25

FACULTY ADVISOR SIGNATURE

Signature:

Nicole Kelly

Date:

10/16/23

PRINCIPAL'S SIGNATURE

Signature:

Wonne Jones

Date:

10/13/23

SCHOOL TREASURE SIGNATURE

Signature:

A Powers

Date:

10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month:

Year:

Approved: YES NO

By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly Date: 10/13/2023
 Club Name: Kawameeh Middle School Student Council

Account #: 19 Acct. Balance to Date: \$ 413.61

Type of Fundraiser(s): (via student donations) - Pasta Night/Karaoke Night. Entry fees will be collected.

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023 Completion Date of Project: June 2024
 Date of Sales: Weekly from December 2023 To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
 Sales will be monitored by: Nicole Kelly, Advisor

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

Vendor representative's Name:

Vendor Business Name: ShopRite Union

Vendor Address:

City: Union, NJ State & Zip Code:

Unit Cost of Product/Service:	\$100 (to supplement donations)
Proposal Sale Price:	\$2.00-\$5.00
Total Cost of all Products Not to Exceed:	\$100
Minimum Total Profit Expected:	\$25

FACULTY ADVISOR SIGNATURE

Signature: *Nicole Kelly* Date: 10/16/23

PRINCIPAL'S SIGNATURE

Signature: *Gionne Jorenzo* Date: 10/13/23

SCHOOL TREASURE SIGNATURE

Signature: *A Powers* Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month: Year: Approved: YES NO By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly
Club Name: Kawameeh Middle School Student Council

Date: 10/13/2023

Account #: 19

Acct. Balance to Date: \$413.61

Type of Fundraiser(s): (via student donations) - Car Wash. Student Council members will wash cars for cash per car.

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023
Date of Sales: Weekly December 2023

Completion Date of Project: June 2024
To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
Sales will be monitored by: Nicole Kelly, Advisor

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

Vendor representative's Name:

Vendor Business Name: Walmart

Vendor Address: Union, NJ

City:

State & Zip Code:

Unit Cost of Product/Service:

\$100

Proposal Sale Price:

\$5.00-\$10.00 per car

Total Cost of all Products Not to Exceed:

\$100

Minimum Total Profit Expected:

\$25

FACULTY ADVISOR SIGNATURE

Signature: *Nicole Kelly*

Date: 10/16/23

PRINCIPAL'S SIGNATURE

Signature: *Wanda Jones*

Date: 10/13/23

SCHOOL TREASURE SIGNATURE

Signature: *Atwers*

Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month:

Year:

Approved: YES NO

By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly Date: 10/13/2023
 Club Name: Kawameeh Middle School Student Council

Account #: 19 Acct. Balance to Date: \$413.61.

Type of Fundraiser(s): (via student donations) - Talent Show/Dance-A-Thon.
 Students/Attendees will pay cash for an entry fee.

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023 Completion Date of Project: June 2024
 Date of Sales: Weekly from December 2023 To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office, Auditorium, Gym
 Sales will be monitored by: Nicole Kelly, Advisor

****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: \$1.00-\$2.00
 Total Cost of all Products Not to Exceed: \$100
 Minimum Total Profit Expected: \$25

FACULTY ADVISOR SIGNATURE

Signature: *Nicole Kelly* Date: 10/16/23

PRINCIPAL'S SIGNATURE

Signature: *Gwonne Jones* Date: 10/13/23

SCHOOL TREASURE SIGNATURE

Signature: *A Powers* Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly
Club Name: Kawameeh Middle School Student Council

Date: 10/13/2023

Account #: 19 Acct. Balance to Date: \$413.61.

Type of Fundraiser(s): (via student donations) - Photo Backdrop Pics/Photo Scavenger Hunt.
Students will pay cash for seasonal pictures or pay an entry fee for

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023 Completion Date of Project: June 2024
Date of Sales: Weekly from December 2023 To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office, Auditorium, Gym
Sales will be monitored by: Nicole Kelly, Advisor

****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: \$2.00-\$5.00
Total Cost of all Products Not to Exceed: \$100
Minimum Total Profit Expected: \$25

_____ FACULTY ADVISOR SIGNATURE _____

Signature: *Nicole Kelly* Date: 10/10/23

_____ PRINCIPAL'S SIGNATURE _____

Signature: *Yvonne Lorenz* Date: 10/13/23

_____ SCHOOL TREASURE SIGNATURE _____

Signature: *A Powers* Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month: Year: Approved: YES NO By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly Date: 10/13/2023
 Club Name: Kawameeh Middle School Student Council

Account #: 19 Acct. Balance to Date: \$413.61.

Type of Fundraiser(s): (via student donations) - Sponsorships/Donations (Hearts for...)

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: November 2023 Completion Date of Project: June 2024
 Date of Sales: Weekly from November 2023 To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
 Sales will be monitored by: Nicole Kelly, Advisor

 *****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: Nicole Kelly Date: 10/16/23

PRINCIPAL'S SIGNATURE

Signature: Wonne Jensen Date: 10/13/23

SCHOOL TREASURER SIGNATURE

Signature: Alwers Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month: Year: Approved: YES NO By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly Date: 10/13/2023
 Club Name: Kawameeh Middle School Student Council

Account #: 19 Acct. Balance to Date: \$413.01

Type of Fundraiser(s): (via student donations) - GRAMS (Holiday, Candy, Birthday). Similar fundraising activity (named differently depending on season).

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023 Completion Date of Project: June 2024
 Date of Sales: Weekly from December 2023 To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
 Sales will be monitored by: Nicole Kelly, Advisor

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

Vendor representative's Name:

Vendor Business Name: Dollar Tree/Amazon/Christmas Tree Shop

Vendor Address:

City: Union, NJ

State & Zip Code:

Unit Cost of Product/Service:	\$
Proposal Sale Price:	\$1.00-\$2.00
Total Cost of all Products Not to Exceed:	\$100
Minimum Total Profit Expected:	\$25

FACULTY ADVISOR SIGNATURE

Signature: *Nicole Kelly* Date: 10/16/23

PRINCIPAL'S SIGNATURE

Signature: *Gronne Jorezo* Date: 10/13/23

SCHOOL TREASURE SIGNATURE

Signature: *A Powers* Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly
Club Name: Kawameeh Middle School Student Council

Date: 10/13/2023

Account #: 19

Acct. Balance to Date: \$413.61

Type of Fundraiser(s): Movie Night. Students/Attendees will pay an entry fee. Snacks will be sold outside the auditorium.

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023

Completion Date of Project: June 2024

Date of Sales: Weekly from December 2023

To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
Sales will be monitored by: Nicole Kelly, Advisor

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

Vendor representative's Name:

Vendor Business Name: Dollar Tree/Amazon/Christmas Tree Shop

Vendor Address:

City: Union, NJ

State & Zip Code:

Unit Cost of Product/Service:

\$

Proposal Sale Price:

\$1.00-\$2.00

Total Cost of all Products Not to Exceed:

\$100

Minimum Total Profit Expected:

\$25

FACULTY ADVISOR SIGNATURE

Signature: *Nicole Kelly*

Date: 10/16/23

PRINCIPAL'S SIGNATURE

Signature: *Yvonne Jozzo*

Date: 10/13/23

SCHOOL TREASURE SIGNATURE

Signature: *A Powers*

Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month:

Year:

Approved: YES NO

By:

**KAWAMEEH MIDDLE SCHOOL
STUDENT ACTIVITIES
FUNDRAISER PROPOSAL**

APPLICANT INFORMATION

Faculty Member: Nicole Kelly
Club Name: Kawameeh Middle School Student Council

Date: 10/13/2023

Account #: 19 Acct. Balance to Date: \$413.61

Type of Fundraiser(s): Pretzel/Hot Chocolate Sale. Students will sell after school.

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023

Completion Date of Project: June 2024

Date of Sales: Weekly from December 2023

To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
Sales will be monitored by: Nicole Kelly, Advisor

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

Vendor representative's Name:

Vendor Business Name: Philly Pretzel Factory, ShopRite

Vendor Address:

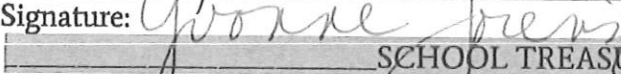
City: State & Zip Code:

Unit Cost of Product/Service: \$100
Proposal Sale Price: \$1.00 - \$2.00
Total Cost of all Products Not to Exceed: \$100
Minimum Total Profit Expected: \$25.00

FACULTY ADVISOR SIGNATURE

Signature:  Date: 10/16/23

PRINCIPAL'S SIGNATURE

Signature:  Date: 10/13/23

SCHOOL TREASURE SIGNATURE

Signature:  Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month: Year: Approved: YES NO By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

APPLICANT INFORMATION

Faculty Member: Nicole Kelly Date: 10/13/2023
 Club Name: Kawameeh Middle School Student Council

Account #: 19 Acct. Balance to Date: \$413.61

Type of Fundraiser(s): Faculty/Staff Rooftop Sleepover. Jars will be placed in the cafeteria and whichever teacher team raises the most money will sleep on the KMS roof.

Purpose of Fundraiser: Money raised will be used to support future Student Council Events, Student Council Apparel, and the 8th Grade Dance

Start Date of Project: December 2023 Completion Date of Project: June 2024
 Date of Sales: Once between Dec-June To: June 2024

Sale Area/Location: KMS Homerooms, Main Lobby, Cafeteria, Main Office
 Sales will be monitored by: Nicole Kelly, Advisor

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

Vendor representative's Name:
 Vendor Business Name: DollarTree, Costco, Shoprite
 Vendor Address:
 City: State & Zip Code:
 Unit Cost of Product/Service: \$100
 Proposal Sale Price: \$1.00 - \$2.00
 Total Cost of all Products Not to Exceed: \$100
 Minimum Total Profit Expected: \$25.00

FACULTY ADVISOR SIGNATURE

Signature: *Nicole Kelly* Date: 10/16/23

PRINCIPAL'S SIGNATURE

Signature: *[Signature]* Date: 10/18/23

SCHOOL TREASURE SIGNATURE

Signature: *A Powers* Date: 10/16/23

PLACED ON BOE MEETING AGENDA FOR

Month: Year: Approved: YES NO By:

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Jessica Cino, Anna D'Achille Date: 10/10/23

Club Name: Music Department

Acct. No.: 17 Acct. Balance to Date: \$ 781.00

Type of Fund Raiser: Candy/Soda sales (monthly)

Purpose of Fund Raiser: Candy/Soda sales in KMS front lobby to raise funds for Darney Park trip (music in the parks)

Start Date of Project: November 2023 Completion Date of Project: May 2024

Date of Sale(s): From November 2023 To: May 2024

Sale Area/Location: KMS front lobby

Sale will be monitored by: Jessica Cino/Anna D'Achille

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

Vendor Representative's Name: N/A

Vendor Business Name: Costco

Vendor Address: 1055 Hudson Street

City: Union State & Zip code: NJ 07083

Unit Cost of Product/Service: \$ various

Proposal Sale Price: \$ 1-2.00 per item

Total Cost of all Products Not to Exceed: \$ 100.00

Minimum Total Profit Expected: \$ 50.00

Faculty Advisor Signature

Signature: [Signature] Date: 10/26/23

Principal Signature

Signature: [Signature] Date: 10/17/23

School Treasure Signature

Signature: [Signature] Date: 10/10/23

Placed on BOE Meeting Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Jessica Cino, Anna D'Achille Date: 10/10/23

Club Name: music Department

Acct. No.: 17 Acct. Balance to Date: \$781.00

Type of Fund Raiser: Bake sales (monthly)

Purpose of Fund Raiser: Bake sale in KMS front lobby to raise funds for Dorsey Park trip (music in the Parks)

Start Date of Project: November 2023 Completion Date of Project: May 2024

Date of Sale(s): From November 2023 To: May 2024

Sale Area/Location: Front lobby

Sale will be monitored by: Jessica Cino / Anna D'Achille

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

Vendor Representative's Name: N/A

Vendor Business Name: N/A

Vendor Address: MA

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

Unit Cost of Product/Service: \$ Items donated/made by students

Proposal Sale Price: \$ 1.2 per item

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

Minimum Total Profit Expected: \$ 50.00

Faculty Advisor Signature

Signature: [Signature] Date: 10/10/23

Principal Signature

Signature: [Signature] Date: 10/17/23

School Treasure Signature

Signature: [Signature] Date: 10/10/23

Placed on BOE Meeting Agenda for:

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

KAWAMEEH MIDDLE SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

Applicant Information

Faculty Member (s): Gold, K Date: 9/29/23

Club Name: Spanish

Acct. No.: 23 Acct. Balance to Date: \$0.52

Type of Fund Raiser: Bake Sale

Purpose of Fund Raiser: To offset cost of trips

Start Date of Project: 10/23 Completion Date of Project: 5/24

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

Sale Area/Location: main lobby

Sale will be monitored by: Gold

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

Vendor Representative's Name: Donated items

Vendor Business Name: _____

Vendor Address: _____

City: _____ State & Zip code: _____

Unit Cost of Product/Service: \$ Donated

Proposal Sale Price: \$ 1-2 each

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

Minimum Total Profit Expected: \$ \$100

Faculty Advisor Signature

Signature: [Signature] Date: 9/27/23

Principal Signature

Signature: [Signature] Date: 9/29/23

School Treasure Signature

Signature: [Signature] Date: 9/27/23

Placed on BOE Meeting Agenda for:

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