School	TCMS			MAZE TERRETERINA MAZE TERRETERINA DE LA CONTROL DE LA CONT
Activity Account	Dance Team	HAR SHOULD HAVE SHOW	NIPAMBARKA MINISTRATA	
External Support/Booster Organization		<u> </u>		
Name of Fundraiser	Rebel T-Shirts	SIE/ASSAMANTA IVA		
Sponsor	Katherine Power Cole			SIN STATES OF THE STATES OF TH
Date Submitted		WINE THE PROPERTY OF THE PROPE	NAME OF TAXABLE PARTY.	NII-074097333
Purpose of fundraising activity: Uniforms, Dance wear, Shoes, Competition	(What will the funds be used for? Fees, Competition Hotel Rooms, and/or			
Items to be sold: Logo T-Shirts				
Beneficiary of fundraising activity: All Dancers	(Who will receive the benefit of th	e funds)		
Date(s) scheduled: August-November  Names of adult supervisors at activity (chap	erones, custodians, etc.):			
Athletic Fundraiser		Yes		No X
If yes, sport involved: Corresponding sport participating in fundra	aiser?	Yes		No X
Coaches Signature (corresponding sport)			Da	te
Circle One: Approved Principal	Not Approved		Date ————————————————————————————————————	5/24/16 te
SBDM Council (1) Council Policy)		MANAGED 1	Da	
Superintendent		200000000	Da	te

Ross III III II				CONTRACTOR OF THE PROPERTY OF
School	TCMS			
Activity Account	Dance Team			
External Support/Booster Organization		WHILM SINH SHAN IN CANAHASINI TANAHASINI TAN		
Name of Fundraiser	Smencils	M-2-7/10-2/M-2-7/10-2/M-2-7/10-2/M-2-7/10-2/M-2-7/10-2/M-2-7/10-2/M-2-7/10-2/M-2-7/10-2/M-2-7/10-2/M-2-7/10-2	Name of the last o	
Sponsor	Katherine Power Cole			V
Date Submitted				остинения при
Purpose of fundraising activity: Uniforms, Dance wear, Shoes, Competition	(What will the funds be used for? Fees, Competition Hotel Rooms, and/o			
Items to be sold: Scented Pencils				
Beneficiary of fundraising activity: All Dancers	(Who will receive the benefit of t	he funds)		
Date(s) scheduled: August-November				
Names of adult supervisors at activity (chap	erones, custodians, etc.):			
Athletic Fundraiser		Yes		No X
If yes, sport involved:				-
Corresponding sport participating in fundra	aiser?	Yes		No X
Coaches Signature (corresponding sport)	W. C.	NATURE NA	Dat	
Circle One: Approved	Not Approved		Date	120116
Principal			W.	
Thy				
SBDM Council (If Council Policy)			Da	te
Superintendent			Da	te

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School	TCMS			
Activity Account	Dance Team			
External Support/Booster Organization	MANANA DA MANANA ANA ANA ANA ANA ANA ANA ANA ANA	A SAMO SAMO SAMO SAMO SAMO SAMO SAMO SAM	Was control of the co	
Name of Fundraiser	Donation Letters			
Sponsor	Katherine Power Cole		- Karanina na papa	
Date Submitted			WATER OF A STATE OF THE STATE OF	
Purpose of fundraising activity: Uniforms, Dance wear, Shoes, Competition	(What will the funds be used for? Fees, Competition Hotel Rooms, and/o	_		
Items to be sold: Letters sent to businesses and individuals to	sponsor a dancer for the season.			
Beneficiary of fundraising activity: All Dancers	(Who will receive the benefit of the	he funds)		
Date(s) scheduled: June-August  Names of adult supervisors at activity (chap	erones, custodians, etc.):			
Athletic Fundraiser		Yes		No X
If yes, sport involved: Corresponding sport participating in fundra	aiser?	Yes		No X
Coaches Signature (corresponding sport)		200milion-2004444	Da	t o
Coacies Signature (corresponding sport)			174	
Circle One: Approved	Not Approved			124/16
Principal			Da	te 5/24/10
SBDM Council (If Council Policy)			Da	**************************************
Superintendent		***************************************	Da	te

School	TCMS	SERVICE SERVIC	THE CONTRACTOR OF THE CONTRACT	
Activity Account	Dance Team			
External Support/Booster Organization				
Name of Fundraiser	Trenton Yard Sale/Guthrie	Heritage Days		
Sponsor	Katherine Power Cole			
Date Submitted		MINISTER STATEMENT OF STATEMENT	opalija i karalika valskog ravodinska	
Purpose of fundraising activity: Uniforms, Dance wear, Shoes, Competition	(What will the funds be used for Fees, Competition Hotel Rooms, and/			
Items to be sold: Collecting donations for face painting at the	Trenton Yard Sale and Guthrie Her	itage Days Eve	nts.	
Beneficiary of fundraising activity: All Dancers	(Who will receive the benefit of t	he funds)	таналары метинована	
Date(s) scheduled: June-July  Names of adult supervisors at activity (chap	erones, custodians, etc.):			
	Nacional Company of the Company of t		**************************************	
		temakori menekotadakoriakakokoriaki okiantan kataka	ottalmondilattistallististask	
Athletic Fundraiser		**************************************		BI. V
Athletic Fundraiser If yes, sport involved:		Yes		No X
Corresponding sport participating in fundra	aiser?	Yes		No X
Coaches Signature (corresponding sport)			Da	te
Circle One: Approved	Not Approved	20155	<b>D</b> 4	2011 CONTROL OF THE PROPERTY O
26			Date	-/2111.
Principal		O-Contraction (Contraction (Con	ر. Do	te
rrincipal			Da	ıc
28				-/24/16 te 5/24/16
SBDM Council (If Council Policy)  Date				
Sizili Council (il Cyunen i Oney)			<b>1</b> /4	<del></del>
Superintendent			Da	te

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School	TCMS			
Activity Account	Dance Team			
External Support/Booster Organization				
Name of Fundraiser	Football Concession Stand			
Sponsor	Katherine Power Cole			
Date Submitted				MINIMATARA SERVESTA DE LA TRANSPORTA DE
Purpose of fundraising activity: Uniforms, Dance wear, Shoes, Competition	(What will the funds be used for Fees, Competition Hotel Rooms, and	_		
Items to be sold: Concession stand food, snacks, & drinks for	· TCMS football games.			***
Beneficiary of fundraising activity: All Dancers	(Who will receive the benefit of t	he funds)		
		TO THE RESIDENCE OF THE PERSON	olikola kuuta olem kuunna ka kataan ka ka	
Names of adult supervisors at activity (chap	perones, custodians, etc.):			
Athletic Fundraiser		Yes		No X
If yes, sport involved:				ŧ
Corresponding sport participating in fundr	aiser?	Yes		No X
Coaches Signature (corresponding sport)		00000000000000000000000000000000000000	Da	te
Circle One: Approved	Not Approved			
26			Date	124116
Principal			Da	te
72				te 124/14
SBDM Council (If Council Policy)  Da		,		
Service (1 Service 1 one)			24	
Superintendent		<del></del>	Da	te

	попрости в при	THE RESIDENCE OF THE PROPERTY		
School	TCMS		*************************	
Activity Account	Dance Team		***	
External Support/Booster Organization	ALIMATINI AND AL		MANAGAMIZAT MANAGAMAN	THE CHAIRMAN AND THE METERS OF THE PROPERTY OF
Name of Fundraiser	Rebel Tumblers			
Sponsor	Katherine Power Cole			
Date Submitted		redna e directa e directa e directa e directa e di directa e di directa e di directa di directa di directa di d	was a substant of the substant	XX30527-244X-1-1044
Purpose of fundraising activity: Uniforms, Dance wear, Shoes, Competition 1	(What will the funds be used for Fees, Competition Hotel Rooms, and			
Items to be sold: Logo Tumblers				
Beneficiary of fundraising activity: All Dancers	(Who will receive the benefit of	the funds)		uneanusuneseunus vuonnuunesus seesenaa
Date(s) scheduled: August-November  Names of adult supervisors at activity (chap	erones, custodians, etc.):			
Athletic Fundraiser		Yes		No X
If yes, sport involved:  Corresponding sport participating in fundra	aiser?	Yes		No X
Coaches Signature (corresponding sport)			Da	te
Circle One: Approved	Not Approved		Date	120116
Principal			Da	124/16 te
SBDM Council (If Council Policy)	upuninin sii ee eniis — saeee eeee koosii ka miinin in ee ee ee ee ee ee	32-20-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	<u>S</u> Da	te
Superintendent		22000000000000000000000000000000000000	Da	te

School	TCMS			
Activity Account	Dance Team			A CONTRACTOR OF THE CONTRACTOR
External Support/Booster Organization			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Name of Fundraiser	Bike Night Donations		***************************************	· · · · · · · · · · · · · · · · · · ·
Sponsor	Katherine Power Cole			\$34465 <del>-</del>
Date Submitted			ANNUAL PRINCIPLE AND	ПРИМИНИМИНИМИНИ В В В В В В В В В В В В В В В В В В
Purpose of fundraising activity: Uniforms, Dance wear, Shoes, Competition F	(What will the funds be used for? ees, Competition Hotel Rooms, and/o			
Items to be sold: Collecting donations at Elkton's Bike Night			ACCUMANCE AND AC	AGGENTANISM ON THE STATE OF THE
Beneficiary of fundraising activity: All Dancers	(Who will receive the benefit of the	ne funds)		
Date(s) scheduled: August-November  Names of adult supervisors at activity (chape	erones, custodians, etc.):			
Athletic Fundraiser		Yes		No X
If yes, sport involved: Corresponding sport participating in fundra	iser?	Yes		No X
Coaches Signature (corresponding sport)			Dat	e
Circle One: Approved	Not Approved		Date	-124.14
Principal		5/24/14 Date 5/24/14		
SBDM Council (If Council Policy)		***************************************	S Dat	
Superintendent			Dat	te