# WOODFORD COUNTY BOARD OF EDUCATION <br> AGENDA ITEM 

ITEM \#: IX B DATE: January 13, 2020
TOPIC/TITLE: School Fundraiser Requests
PRESENTER: Scott Hawkins

## ORIGIN:

TOPIC PRESENTED FOR INFORMATION ONLY (No board action required.) ACTION REQUESTED AT THIS MEETING ITEM IS ON THE CONSENT AGENDA FOR APPROVAL ACTION REQUESTED AT FUTURE MEETING:
(DATE) BOARD REVIEW REQUIRED BY

STATE OR FEDERAL LAW OR REGULATION BOARD OF EDUCATION POLICY OTHER:

## PREVIOUS REVIEW, DISCUSSION OR ACTION:



NO PREVIOUS BOARD REVIEW, DISCUSSION OR ACTION
PREVIOUS REVIEW OR ACTION
$\square \quad$ DATE:

## BACKGROUND INFORMATION:

As per Board policy all fundraisers must be approved by the Board of Education prior to the beginning of each fundraiser.

## SUMMARY OF MAJOR ELEMENTS:

Attached Fundraisers: Northside (Pennies for Patients, service project); WCMS Band (Moore \& Moore); WCMS Student Council (8th Grade Prom, service project); WCHS NHS/Beta (Dance Gold, service project); WCHS ESPORTS (LAN/Video Games party).

IMPACT ON RESOURCES: None.
TIMETABLE FOR FURTHER REVIEW OR ACTION: Final report on each fundraiser due to Board of Education within 30 days of the fundraiser ending date.

## SUPERINTENDENT'S RECOMMENDATION: G-Recommended

- Not Recommended



# WOODFORD COUNTY BOARD OF EDUCATION AGENDA ITEM 

ITEM \#: IX B DATE: January 10,2020
TOPIC/TITLE: School Fundraiser Requests
PRESENTER: Jimmy Brehm
ORIGIN:
TOPIC PRESENTED FOR INFORMATION ONLY (No board action required.)
ACTION REQUESTED AT THIS MEETING
ITEM IS ON THE CONSENT AGENDA FOR APPROVAL
ACTION REQUESTED AT FUTURE MEETING: (DATE)
BOARD REVIEW REQUIRED BYSTATE OR FEDERAL LAW OR REGULATION
$\boxtimes \quad$ BOARD OF EDUCATION POLICY
OTHER:

## PREVIOUS REVIEW, DISCUSSION OR ACTION:

## $\square$ NO PREVIOUS BOARD REVIEW, DISCUSSION OR ACTION

PREVIOUS REVIEW OR ACTIONDATE:ACTION:

## BACKGROUND INFORMATION:

As per Board policy all fundraisers must be approved by the Board of Education prior to the beginning of each fundraiser.

## SUMMARY OF MAJOR ELEMENTS:

Request Board approval for Northside Elementary Pennies for Patients to raise money for the Leukemia \& Lymphoma Society (Service Project)

IMPACT ON RESOURCES: None
TIMETABLE FOR FURTHER REVIEW OR ACTION: Final report on each fundraiser due to Board of Education within 30 days of the fundraiser ending date.


## Request Form for School Fund-Raisers

All requests for fund-raising activities may be submitted to the Board at any time during the school year. Requests will be submitted on this form along with a current financial report. At the conclusion of the fundraising activity, a copy of the original request shall be resubmitted within thirty (30) days. The final submission should include the actual sales, expenditures, profits, and use of the funds for the activity. Please note that this form must be TYPED, except for signatures, and have a budget attached.

School: Northside Elementary
Date: 1/9/2020
Person/Club/Organization: Ryan Asher
Fund-Raiser Requested: Pennies for Patients
Is this a Service Project per Board Policy 09.33? X Yes $\square$ No
Product to be Sold: N/A - We will be conducting a change drive to collect money to donate to The Leukemia \& Lymphoma Society.

Number of Students Participating: 340
Expected Beginning Date: $2 / 12 / 20 \quad$ (Beginning date cannot be prior to the Board Meeting.)
Expected Ending Date: 2/12/20

PROJECTED

1. Gross Sales:
2. Expenses/Cost of Goods Sold:
3. Total Profit:

| $\$$ | $\mathrm{~N} / \mathrm{A}$ |
| :--- | :--- |
| $\$$ | $\mathrm{~N} / \mathrm{A}$ |
| $\$$ | $\mathrm{~N} / \mathrm{A}$ |

ACTUAL
4. Please attach a copy of your organization's budget for this academic year.
5. Please specify below how the funds raised by this event are to be spent.

| ITEMS TO BE PURCHASED FROM PROFIT |  | PROJECTED |  |
| :--- | :--- | :--- | :--- |
| All donations collected will be donated to The Leukemia \& |  | $\$ 250$ | $\$$ |
| Lymphoma Society | $\$$ | $\$$ |  |

6. Sponsor's Signature: Date: $\qquad$
7. As Principal, I recommend $\square$ do not recommend this project.

Form is typed Budget report is attached
Dates are not prior to Board Meeting.
Principal's rationale for not recommending this request:

Principal's Signature:

8. As Superintendent, I $\square$ recommend $\square$ do not recommend this project.

Superintendent's rationale for not recommending this request:


Superintendent's Signature: $\qquad$ Date
A copy of this form was sent to the County Clerk as a notice for subscription sales.
Date sent: $\qquad$ Signature of Superintendent: $\qquad$

Dear Sir or Madam,

On behalf of The Leukemia \& Lymphoma Society (LLS), I would like to thank you for participating in the 2019-20 Pennies for Patients program. LLS was founded 70 years ago, by a family for families. Since then, we've invested more than $\$ 1.3$ billion in blood cancer research, helped spark the immunotherapy revolution and become the leading source of free blood cancer information, education and support services. This lifesaving progress would not be possible without the tireless efforts of volunteers like you: our partners in the quest to find cancer cures.

Thanks to cherished volunteers like you, LLS has been able to achieve a lot over the past seven decades, but there is more work to be done to develop cures and improve care for our children. We're disrupting the status quo with our bold vision for young patients - to not only survive their cancer, but to thrive in their lives after treatment. With the partnership of your school, classrooms, homes and communities, we are taking on children's cancer from every direction possible.

The overwhelming majority of administrators, teachers and parents believe that Social \& Emotional Learning (SEL) is just as important as academic learning. This year, Pennies for Patients is proud to have incorporated key tenants of the SEL framework into our fundraising program and our STEM+ curriculum.

Our goal is to provide your school with a meaningful, turnkey program that promotes a healthy foundation for student learning, both in the classroom and in life.

Our Pennies for Patients team looks forward to working with you, and is available to assist you through every step of your program. For additional guidance on how to run a successful Pennies for Patients program, please refer to the Volunteer Guide, enclosed in this package. From all of us here at the Leukemia \& Lymphoma Society, thank you for your dedication, your support and your belief in our mission to find cures.

Best Wishes,

## Katie Warreusford

Vice President, Pennies for Patients

## National Office

Please mail this report, with your donation(s), to:
The Leukemia \& Lymphoma Society Kentucky \& Southern Indiana Chapter Pennies for Patients Staff Partner
301 East Main Street, Suite 100, Louisville KY 40202

School Name: $\qquad$
Coordinator Name: $\qquad$
Secondary Coordinator: $\qquad$
Principal Name: $\qquad$
Mailing Address: $\qquad$
City: $\qquad$ State: $\qquad$ Zip: $\qquad$ Phone: $\qquad$
E-mail 1 : $\qquad$ E-mail 2 : $\qquad$
\# of students enrolled at your school: $\qquad$ \# of classrooms at your school: $\qquad$
\# of students participating: $\qquad$ \# of classrooms participating:

Would you like to register for next year's program? (We will contact you in the fall to reconfirm details)
$\square$ YES! We will participate $\qquad$ (Enter dates \& fundraising goal, if known)

CHECKS (Made payable to The Leukemia \& Lymphoma Society)
Number of checks
Total amount (\$) of checks
District is sending a check

## COINSTAR

Number of Coinstar receipts
Total amount of Coinstar receipts

## BANK PARTNER

Total number of Bank deposit slips
Total amount of Bank deposit slips
\$ $\qquad$
$\qquad$
\$ $\qquad$
$\qquad$
\$

## MONEY ORDERS

Number of money orders
Total amount of money orders
\$

MATCHING GIFTS: All matching gift paperwork must be verified by LLS
Total number of Matching Gifts
Total amount of Matching Gifts

## ONLINE DONATIONS

Total amount
TOTAL ENCLOSED OR REPORTED
\$
\$ $\qquad$
$\qquad$

PRIZES SELECTION: (See Prizes page for more information)

## CLASSROOM PENNANTS

\# of Classrooms raising \$300 or more!
Gold Pennant $\qquad$
\# of Classrooms raising \$200 to \$299

## Silver Pennant

$\qquad$
\# of Classrooms raising \$100 to \$199
Bronze Pennant $\qquad$ -

## TOP CLASSROOM CELEBRATION

If your school raised $\$ 750$ or more, please select only one option below:
$\square$ Yes, we would like to receive the top classroom celebration.
$\square$ No, thanks. Our school would like to donate the cost of our party to The Leukemia \& Lymphoma Society.

## GIFT CARDS

Please refer to pg. 5 of your Volunteer Guide for details on the gift card qualifications.
$\square$ Yes! Our school qualified for a gift card. Please send it to us.
$\square$ We would like to donate the gift card amount to The Leukemia \& Lymphoma Society.

FOR 202005

|  | $\begin{aligned} & \text { ORIGINAL } \\ & \text { APPROP } \end{aligned}$ | REVISED <br> BUDGET | YTD ACTUAL | MTD ACTUAL | ENCUMBRANCES | $\begin{aligned} & \text { AVAILABLE } \\ & \text { BUDGET } \end{aligned}$ | $\begin{array}{r} \text { PCT } \\ \text { USED } \end{array}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 21 DISTRICT ACTIVITY FUND |  |  |  |  |  |  |  |
| 120210 NS DISTRICT ACTIVITY REVENUE |  |  |  |  |  |  |  |
| 7800 GENERAL ACTIVITY ACCOUNT-DAF | -17,235 | -18,322 | -4,409.04 | -1,296.71 | . 00 | -13,912.98 | 24.1\% |
| TOTAL NS DISTRICT ACTIVITY REVENU | -17,235 | -18,322 | -4,409.04 | -1,296.71 | . 00 | -13,912.98 | 24.1\% |
| 1202818 DAF INSTRUCTION |  |  |  |  |  |  |  |
| 7800 GENERAL ACTIVITY ACCOUNT-DAF | 15,485 | 16,072 | 1,615.79 | 80.31 | 321.47 | 14,134.76 | $12.1 \%$ |
| TOTAL DAF INSTRUCTION | 15,485 | 16,072 | 1,615.79 | 80.31 | 321.47 | 14,134.76 | $12.1 \%$ |
| 1202819 DAF STUDENT TRANSPORTATION |  |  |  |  |  |  |  |
| 7800 GENERAL ACTIVITY ACCOUNT-DAF | 1,750 | 2,250 | 821.76 | . 00 | . 00 | 1,428.24 | 36.5\% |
| TOTAL DAF STUDENT TRANSPORTATION | 1,750 | 2,250 | 821.76 | . 00 | . 00 | 1,428.24 | $36.5 \%$ |
| TOTAL DISTRICT ACTIVITY FUND | 0 | 0 | -1,971.49 | -1,216.40 | 321.47 | 1,650.02 | 100.0\% |
| TOTAL REVENUES TOTAL EXPENSES | $\begin{array}{r} -17,235 \\ 17,235 \end{array}$ | $\begin{array}{r} -18,322 \\ 18,322 \end{array}$ | $\begin{array}{r} -4,409.04 \\ 2,437.55 \end{array}$ | $\begin{array}{r} -1,296.71 \\ 80.31 \end{array}$ | $\begin{array}{r} .00 \\ 321.47 \end{array}$ | $\begin{array}{r} -13,912.98 \\ 15,563.00 \end{array}$ |  |
| GRAND TOTAL | 0 | 0 | -1,971.49 | -1,216.40 | 321.47 | 1,650.02 | 100.0\% |

** END OF REPORT - Generated by Jessica Carmickle **

# WOODFORD COUNTY BOARD OF EDUCATION <br> AGENDA ITEM 

ITEM \#: IX B DATE: January 2, 2020
TOPIC/TITLE: School Fundraiser Requests
PRESENTER: Jimmy Brehm

## ORIGIN:

TOPIC PRESENTED FOR INFORMATION ONLY (No board action required.)
ACTION REQUESTED AT THIS MEETING
ITEM IS ON THE CONSENT AGENDA FOR APPROVAL
ACTION REQUESTED AT FUTURE MEETING: (DATE)
BOARD REVIEW REQUIRED BY


STATE OR FEDERAL LAW OR REGULATION BOARD OF EDUCATION POLICY OTHER:

## PREVIOUS REVIEW, DISCUSSION OR ACTION:

## NO PREVIOUS BOARD REVIEW, DISCUSSION OR ACTION

PREVIOUS REVIEW OR ACTION


DATE:
ACTION:

## BACKGROUND INFORMATION:

As per Board policy all fundraisers must be approved by the Board of Education prior to the beginning of each fundraiser.
SUMMARY OF MAJOR ELEMENTS:
Request Board approval for WCMS Band to sell items (Moore \& Moore Fundraising) with all profits to be used for transportation, instruments, shirts \& pizza.

IMPACT ON RESOURCES: None
TIMETABLE FOR FURTHER REVIEW OR ACTION: Final report on each fundraiser due to Board of Education within 30 days of the fundraiser ending date.


## Request Form for School Fund-Raisers

All requests for fund-raising activities may be submitted to the Board at any time during the school year. Requests will be submitted on this form along with a current financial report. At the conclusion of the fundraising activity, a copy of the original request shall be re-submitted within thirty (30) days. The final submission should include the actual sales, expenditures, profits, and use of the funds for the activity. Please note that this form must be TYPED, except for signatures, and have a budget attached.

School: Woodford County Middle School
Date: 11/22/19
Person/Club/Organization: Band
Fund-Raiser Requested: Moore \& Moore Fundraising
Is this a Service Project per Board Policy 09.33?
$\square$ Yes
区 No

Product to be Sold: Cheese, sausage, cookie dough
Number of Students Participating: 150
Expected Beginning Date: $2 / 12 / 20 \quad$ (Beginning date cannot be prior to the Board Meeting.)
Expected Ending Date: 2/26/20

| 1. Gross Sales: | PROJECTED | ACTUAL |
| :--- | :--- | :--- |
| 2. Expenses/Cost of Goods Sold: | $\$ 18,000$ | $\$$ |
| 3. Total Profit: | $\$ 10,000$ | $\$ \$$ |

4. Please attach a copy of your organization's budget for this academic year.
5. Please specify below how the funds raised by this event are to be spent.

| ITEMS TO BE PURCHASED FROM PROFIT |  | PROJECTED |  |
| :--- | :--- | :--- | :--- |
| Bus transportation |  | $\$ 2,000$ | $\$$ |
| Instruments | $\$ 5,000$ | $\$$ |  |
| T-shirt and pizza party |  | $\$ 1,000$ | $\$$ |

6. Sponsor's signature: Aery Date:

$$
12 / 3 / 19
$$

7. As Principal, I recommend $\square$ d root recommend this project.
$\square$ Form is typed Budget report is attached
$\square$ Dates are not prior to Board Meeting.
Principal's ratjerrate for notrecommending this request:

8. As Superintendent

Superintendent's rationale for not recommending this request:

Superintendent's Signature:


Principal's Signature: $\square$ do not recommend this project.

A copy of this form was sent to the County Clerk as a notice for subscription sales.
Date sent: $\qquad$ Signature of Superintendent: $\qquad$


## 696 asmi

FOR 202006

| ACCOUNTS FOR: |  |
| :--- | :--- |
| 085 | WOODFORD COUNTY MIDDLE SCHOOL |

ORIGINAL REVISED APPROP

REVISED BUDGET

YTD ACTUAL
ITD ACTUA
ENCUMBRANCES

AVAILABLE BUDGET

PCT USED

7207 S BAND-SAF

| 085250 0999C 7207 S COMMITTED BEG BA | 0 | -2,133 | -2,133.14 | . 00 | . 00 | . 00 | 100.0\% |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 085250174072075 STUDENT FEES | 0 | 0 | -35.00 | . 00 | . 00 | 35.00 | 100.0\% |
| $0852501790 \quad 7207 S$ OTHER STUDENT ACT | 0 | -12,000 | -62.00 | . 00 | . 00 | -11,938.00 | . $5 \%$ * |
| 085251908957207 S OTHER STUDENT TR | 0 | 5,000 | . 00 | . 00 | 567.30 | 4,432.70 | $11.3 \%$ |
| 08525350671 7207S ITEMS FOR RESALE | 0 | 500 | . 00 | . 00 | . 00 | 500.00 | . $0 \%$ |
| 08525350673 7207S STUDENT REGISTRA | 0 | 3,500 | . 00 | . 00 | . 00 | 3,500.00 | . $0 \%$ |
| 0852535067472075 AWARDS | 0 | 800 | . 00 | . 00 | . 00 | 800.00 | . $0 \%$ |
| 0852535067572075 ORGANIZTN SUPPLI | 0 | 2,000 | . 00 | . 00 | . 00 | 2,000.00 | . $0 \%$ |
| 0852535089572075 OTHER STUDENT TR | 0 | 2,333 | . 00 | . 00 | . 00 | 2,333.14 | . 0 |
| TOTAL BAND-SAF | 0 | 0 | -2,230.14 | . 00 | 567.30 | 1,662.84 | 100.0\% |
| TOTAL WOODFORD COUNTY MIDDLE SCHO | 0 | 0 | -2,230.14 | . 00 | 567.30 | 1,662.84 | 100.0\% |
| TOTAL REVENUES | 0 0 | $-14,133$ 14,133 | $-2,230.14$ .00 | .00 .00 | .00 567.30 | $\begin{array}{r} -11,903.00 \\ 13,565.84 \end{array}$ |  |

# WOODFORD COUNTY BOARD OF EDUCATION <br> AGENDA ITEM 

ITEM \#: IX B DATE: January 2, 2020

TOPIC/TITLE: School Fundraiser Requests

PRESENTER: Jimmy Brehm

## ORIGIN:

TOPIC PRESENTED FOR INFORMATION ONLY (No board action required.)
ACTION REQUESTED AT THIS MEETING
ITEM IS ON THE CONSENT AGENDA FOR APPROVAL ACTION REQUESTED AT FUTURE MEETING:
(DATE)
BOARD REVIEW REQUIRED BY

| $\square$ | STATE OR FEDERAL LAW OR REGULATION |
| :--- | :--- |
| $\boxtimes$ | BOARD OF EDUCATION POLICY |
| $\square$ | OTHER: |

## PREVIOUS REVIEW, DISCUSSION OR ACTION:

NO PREVIOUS BOARD REVIEW, DISCUSSION OR ACTION
PREVIOUS REVIEW OR ACTION
$\square$ DATE:
$\square$ ACTION:

## BACKGROUND INFORMATION:

As per Board policy all fundraisers must be approved by the Board of Education prior to the beginning of each fundraiser.
SUMMARY OF MAJOR ELEMENTS:

Request Board approval for WCMS Student Council to sell tickets for the $8^{\text {th }}$ grade Prom with all profits to be used for decorations and materials for the next year.

IMPACT ON RESOURCES: None
TIMETABLE FOR FURTHER REVIEW OR ACTION: Final report on each fundraiser due to Board of Education within 30 days of the fundraiser ending date.


## Request Form for School Fund-Raisers

All requests for fund-raising activities may be submitted to the Board at any time during the school year. Requests will be submitted on this form along with a current financial report. At the conclusion of the fundraising activity, a copy of the original request shall be re-submitted within thirty (30) days. The final submission should include the actual sales, expenditures, profits, and use of the funds for the activity. Please note that this form must be TYPED, except for signatures, and have a budget attached.

School: Woodford County Middle School
Date: 11/25/2019
Person/Club/Organization: Rachel Smith
Fund-Raiser Requested: $8^{\text {th }}$ Grade Prom
Is this a Service Project per Board Policy 09.33?


圆 No
Product to be Sold: Tickets
Number of Students Participating: 250
Expected Beginning Date: May $8^{\text {th }}, 2020$
(Beginning date cannot be prior to the Board Meeting.)
Expected Ending Date: May 8 ${ }^{\text {th }}, 2020$

| 1. Gross Sales: | $\underline{\text { PROJECTED }}$ | $\underline{\text { ACTUAL }}$ |
| :--- | :--- | :--- |
| 2. Expenses/Cost of Goods Sold: | $\underline{\$ 750}$ | $\$$ |
| 3. Total Profit: | $\underline{\$ 500}$ | $\$$ |

4. Please attach a copy of your organization's budget for this academic year.
5. Please specify below how the funds raised by this event are to be spent.

| ITEMS TO BE PURCHASED FROM PROFIT |  | PROJECTED |  |
| :--- | :--- | :--- | :--- |
| Decorations for the following year | $\$ 250$ | $\$$ |  |

## 7. As Principal, I $\square$ recommend $\square$ do not recommend this project. $\square$ Form is typed Budget report is attached $\downarrow$ Dates are not prior to Board Meeting.

Principal's rationale for not recommending this request:
Principal's Signature: $\quad \because \quad$ Date $11-1 / 2$
8. As Superintendent, I/ recommend $\square$ do not recommend this project.

Superintendent's rationale for not recommending this request:

Superintendent's Signature:

$\square$

A copy of this form was sent to the County Clerk as a notice for subscription sales.


Date sent: $\qquad$ Signature of Superintendent: $\qquad$


| FOR 202005 |  |  |  | JOURNAL DETAIL 2020 1 TO 2020 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ACCOUNTS FOR: 085 WOODFORD COUNTY MIDDLE SCHOOL | ORIGINAL <br> APPROP | REVISED <br> BUDGET | YTD ACTUAL | MTD ACTUAL | ENCUMBRANCES | AVAILABLE BUDGET | $\begin{array}{r} \text { PCT } \\ \text { USED } \end{array}$ |
| 7575 STUDENT LEADERSHIP-DAF |  |  |  |  |  |  |  |
| 085210 WCMS DISTRICT ACTIVITY REVENU | -3,431 | -4,586 | -3,586.44 | 1,180.00 | . 00 | $-1,000.00$ | $78.2 \%$ |
| 0852818 DAF INSTRUCTION | 3,431 | 4,586 | . 00 | . 00 | . 00 | 4,586.44 | . $0 \%$ |
| TOTAL STUDENT LEADERSHIP-DAF | 0 | 0 | -3,586.44 | 1,180.00 | . 00 | 3,586.44 | 100.0\% |
| TOTAL WOODFORD COUNTY MIDDLE SCHO | 0 | 0 | -3,586.44 | 1,180.00 | . 00 | 3,586.44 | 100.0\% |
| TOTAI REVENUES TOTAL EXPENSES | $\begin{array}{r} -3,431 \\ 3,431 \end{array}$ | $\begin{array}{r} -4,586 \\ 4,586 \end{array}$ | $\begin{array}{r} -3,586.44 \\ .00 \end{array}$ | $1,180.00$ .00 | .00 .00 | $-1,000.00$ |  |

# WOODFORD COUNTY BOARD OF EDUCATION AGENDA ITEM 

ITEM \#: IX B DATE: January 10, 2020
TOPIC/TITLE: School Fundraiser Requests
PRESENTER: Jimmy Brehm

## ORIGIN:

TOPIC PRESENTED FOR INFORMATION ONLY (No board action required.)
ACTION REQUESTED AT THIS MEETING
ITEM IS ON THE CONSENT AGENDA FOR APPROVAL
ACTION REQUESTED AT FUTURE MEETING: (DATE)
BOARD REVIEW REQUIRED BY

## PREVIOUS REVIEW, DISCUSSION OR ACTION:

NO PREVIOUS BOARD REVIEW, DISCUSSION OR ACTION
PREVIOUS REVIEW OR ACTION


## BACKGROUND INFORMATION:

As per Board policy all fundraisers must be approved by the Board of Education prior to the beginning of each fundraiser.

## SUMMARY OF MAJOR ELEMENTS:

Request Board approval for WCHS NHS/Beta to host Dance Gold with all profits to be donated to the UK Dance Blue organization for pediatric cancer research.

IMPACT ON RESOURCES: None
TIMETABLE FOR FURTHER REVIEW OR ACTION: Final report on each fundraiser due to Board of Education within 30 days of the fundraiser ending date.

## Request Form for School Fund-Raisers

All requests for fund-raising activities may be submitted to the Board at any time during the school year. Requests will be submitted on this form along with a current financial report. At the conclusion of the fundraising activity, a copy of the original request shall be re-submitted within thirty (30) days. The final submission should include the actual sales, expenditures, profits, and use of the funds for the activity. Please note that this form must be TYPED, except for signatures, and have a budget attached.
School: Woodford County High School Date: 1/8/2020
Person/Club/Organization: Amber Sergent/National Honor Society and National BETA Club
Fund-Raiser Requested: Dance Gold
Is this a Service Project per Board Policy 09.33?
$\underline{Y e s}$
$\square$ No
Product to be Sold:
Number of Students Participating: 80
Expected Beginning Date: February 22, 2020
Expected Ending Date: February 29. 2020

1. Gross Sales:
2. Expenses/Cost of Goods Sold:
3. Total Profit:

PROJECTED
\$ 5500
$\$ \quad 500$
$\$ \quad 5000$

ACTUAL
\$
\$
$\qquad$
4. Please attach a copy of your organization's budget for this academic year.
5. Please specify below how the funds raised by this event are to be spent.

ITEMS TO BE PURCHASED FROM PROFIT
PROJECTED ACTUAL

Donation to the UK Pediatric Cancer Center $\$ 5000$ \$
\$
\$


Form is typed 娔 Budget report is attached
\&Dates are not prior to Board Meeting.
Principal's rationale for not recommending this request:

Principal's Signature:

8. As Superintendent, I recommend $\square$ do not recommend this project.

Superintendent's rationale for not recommending this request:

Superintendent's Signature:


A copy of this form was sent to the County Clerk as a notice for subscription sales.
Date sent: $\qquad$ Signature of Superintendent: $\qquad$


Page 1 of 1

## 01/08/2020 13:46

WOODFORD COUNTY PUBLIC SCHOOLS NHS / BETA

| FOR 202007 |  |  |  |  | JOURNAL | DETAIL | 20201 TO | 202012 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ACCOUNTS FOR: <br> 21 DISTRICT ACTIVITY FUND | ORIGINAL APPROP | TRANFRS/ ADJSTMTS | $\begin{gathered} \text { REVISED } \\ \text { BUDGET } \end{gathered}$ | YTD ACTUAL | ENC/REQ |  | AVAILABLE BUDGET | $\begin{array}{r} \text { PCT } \\ \text { USED } \end{array}$ |
| 7411 BETA CLUB/NHS-DAF | 0 | 0 | 0 | -3,016.98 |  | . 00 | 3,016.98 | 100.0\% |
| TOTAL DISTRICT ACTIVITY FUND | 0 | 0 | 0 | -3,016.98 |  | . 00 | 3,016.98 | 100.0\% |
| TOTAL REVENUES TOTAL EXPENSES | $\begin{array}{r} -7,294 \\ 7,294 \end{array}$ | $\begin{array}{r} -2,455 \\ 2,455 \end{array}$ | $\begin{array}{r} 9,749 \\ 9,749 \end{array}$ | $\begin{array}{r} -5,053.86 \\ 2,036.88 \end{array}$ |  | $\begin{aligned} & .00 \\ & .00 \end{aligned}$ | $\begin{array}{r} -4,695.00 \\ 7,711.98 \end{array}$ |  |

# WOODFORD COUNTY BOARD OF EDUCATION <br> AGENDA ITEM 

ITEM \#: IX B DATE: January 10, 2020
TOPIC/TITLE: School Fundraiser Requests
PRESENTER: Jimmy Brehm

## ORIGIN:

TOPIC PRESENTED FOR INFORMATION ONLY (No board action required.)ACTION REQUESTED AT THIS MEETING
ITEM IS ON THE CONSENT AGENDA FOR APPROVAL
ACTION REQUESTED AT FUTURE MEETING: (DATE)
BOARD REVIEW REQUIRED BY

BOARD OF EDUCATION POLICY
OTHER:

## PREVIOUS REVIEW, DISCUSSION OR ACTION:

NO PREVIOUS BOARD REVIEW, DISCUSSION OR ACTION
PREVIOUS REVIEW OR ACTION
$\square \quad$ DATE:
$\square$
ACTION:

## BACKGROUND INFORMATION:

As per Board policy all fundraisers must be approved by the Board of Education prior to the beginning of each fundraiser.
SUMMARY OF MAJOR ELEMENTS:
Request Board approval for WCHS ESPORTS to host a LAN Party (video games) \& concessions with profits going to equipment.

IMPACT ON RESOURCES: None
TIMETABLE FOR FURTHER REVIEW OR ACTION: Final report on each fundraiser due to Board of Education within 30 days of the fundraiser ending date.


## Request Form for School Fund-Raisers

All requests for fund-raising activities may be submitted to the Board at any time during the school year. Requests will be submitted on this form along with a current financial report. At the conclusion of the fundraising activity, a copy of the original request shall be resubmitted within thirty (30) days. The final submission should include the actual sales, expenditures, profits, and use of the funds for the activity. Please note that this form must be TYPED, except for signatures, and have a budget attached.
School: WCHS
Date: 01/02/2020
Person/Club/Organization: ESPORTS
Fund-Raiser Requested: LAN PARTY (Video Gaming Room Set Up) + Concessions
Is this a Service Project per Board Policy 09.33?Yes X No

Product to be Sold: $\$ 7$ Admission to Play
Number of Students Participating: 30
Expected Beginning Date: 01-31-2020 (Beginning date cannot be prior to the Board Meeting.)
Expected Ending Date: 01-31-2020

| PROJECTED |  |  |
| :--- | ---: | :--- |
| $\$$ | 300.00 | ACTUAL |
| $\$$ | $\$$ |  |
| $\$$ | $\mathbf{5 0 . 0 0}$ | $\$$ |
| $\$$ | $\mathbf{2 5 0 . 0 0}$ | $\$$ |

4. Please attach a copy of your organization's budget for this academic year.
5. Please specify below how the funds raised by this event are to be spent.


Principal's rationale for not recommending this request:

Principal's Signature:
 Date 1-6-2020
8. As Superintendent, I recomm\&nd do not recommend this project.

Superintendent's rationale for not recommending this request:


Superintendent's Signature:


A copy of this form was sent to the County Clerk as a notice for subscription sales.
Date sent: $\qquad$ Signature of Superintendent: $\qquad$


