ITEM #: IX B **DATE:** January 13, 2020

TOPIC/TITLE: School Fundraiser Requests

PRESENTER: Scott Hawkins

ORIGIN:

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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 FEDER	AL LAW OR	REGULATION
· · · · · · · · · · · · · · · · · · ·			

BOARD OF EDUCATION POLICY

OTHER:

PREVIOUS REVIEW, DISCUSSION OR ACTION:

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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:

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.

SUPERINTENDENT'S RECOMMENDATION: E-Recommended	Not Recommended
po for	

ITEM #: IX B DATE: January 10, 2020

TOPIC/TITLE: School Fundraiser Requests

PRESENTER: Jimmy Brehm

ORIGIN:

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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

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

IMPACT ON RESOURCES: None

SUPERINTENDENT'S RECOMMENDATION:	Not Recommended
A both 1 .	

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 fund-raising 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: Northside Elementary

Person/Club/Organization: Ryan Asher

Fund-Raiser Requested: Pennies for Patients

Is this a Service Project per Board Policy 09.33? X Yes

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 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: 2/12/20

JAN 1 0 2020

Page 1 of 1

	PROJECTED	<u>ACTUAL</u>
1. Gross Sales:	\$N/A	\$
2. Expenses/Cost of Goods Sold:	<u>\$N/A</u>	\$
3. Total Profit:	<u>\$N/A</u>	\$
	•	

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
All donations collected will be donated to The Leukemia &	\$ 250	\$
Lymphoma Society	\$	\$
	\$	\$

Date:

6. Sponsor's Signature:	Jank	len	

7. As Principal, I \square 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: $\boxed{K_{ym}}$ Date $\boxed{1/10/2020}$ 8. As Superintendent, I \square recommend \square do not recommend this project.	mel
Superintendent's rationale for not recommending this request:	A
Superintendent's Signature: 11620 A copy of this form was sent to the County Clerk as a notice for subscription sales.	-
Date sent: Signature of Superintendent:	
Review/Revised:6/27	7/2016

Date: 1/9/2020

D No

1/10/2020



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 3 International Drive Suite 200 Rye Brook, NY 10573 www.LLS.org





WRAP-UP REPORT

Please mail this report, with your donation(s), to: **CHAPTER DEADLINE: MAY 15, 2020** The Leukemia & Lymphoma Society Kentucky & Southern Indiana Chapter Pennies for Patients Staff Partner 301 East Main Street, Suite 100, Louisville KY 40202 **SS70** School Name: ____ Coordinator Name: Secondary Coordinator: Principal Name: Mailing Address: _____ ______State: ______Zip:______Phone: ______ City: ____ _____ E-mail 2: _____ E-mail 1: # of students enrolled at your school: ______ # of classrooms at your school: ______ ______ # of classrooms participating: _ # of students participating: ____ Would you like to register for next year's program? (We will contact you in the fall to reconfirm details) _____ (Enter dates & fundraising goal, if known) YES! We will participate _____ MONEY ORDERS **CHECKS** (Made payable to The Leukemia & Lymphoma Society) Number of money orders Number of checks Total amount of money orders Total amount (\$) of checks MATCHING GIFTS: All matching gift paperwork \$ District is sending a check must be verified by LLS Total number of Matching Gifts COINSTAR Number of Coinstar receipts Total amount of Matching Gifts Total amount of Coinstar receipts **ONLINE DONATIONS** \$ Total amount **BANK PARTNER** Total number of Bank deposit slips **TOTAL ENCLOSED** \$_ OR REPORTED Total amount of Bank deposit slips **PRIZES SELECTION:** (See Prizes page for more information)

CLASSROOM PENNANTS

TOP CLASSROOM CELEBRATION

If your school raised \$750 or more, please select only one option below:

- □ Yes, we would like to receive the top classroom celebration.
- 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.

- Section 2012 Yes! Our school qualified for a gift card. Please send it to us.
- We would like to donate the gift card amount to The Leukemia & Lymphoma Society.

of Classrooms raising \$300 or more!

Gold Pennant _____

of Classrooms raising \$200 to \$299

Silver Pennant

of Classrooms raising \$100 to \$199

Bronze Pennant ____

National Partner Join our squad ጵ PenniesForPatients.org



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	PFORD COUNTY PUE -TO-DATE BUDGET						P 1 glytdbud
FOR 2020 05							
	ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT USED
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	J -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		-18,322 18,322	-4,409.04 2,437.55	-1,296.71 80.31	.00 321.47	-13,912.98 15,563.00	
GRAND TOTAL	0	0	-1,971.49	-1,216.40	321.47	1,650.02	100.0%

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

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 APPE	ROVAL
ACTION REQUESTED AT FUTURE MEETING:	(DATE)
BOARD REVIEW REQUIRED BY	

	X

STATE OR FEDERAL LAW OR REGULATION

BOARD OF EDUCATION POLICY

OTHER:

PREVIOUS REVIEW, DISCUSSION OR ACTION:

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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

SUPERINTENDENT'S RECOMMENDATION: Recommended	Not Recommended
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mone	

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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 fund-raising 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	Da	ate: 11/22/19	
Person/Club/Organization: Band			
Fund-Raiser Requested: Moore & Moore Fundraising			
Is this a Service Project per Board Policy 09.33?	🗆 Yes 🛛 🕱 No		
Product to be Sold: Cheese, sausage, cookie dough			
Number of Students Participating: 150			
Expected Beginning Date: 2/12/20 (Begin	nning date cannot be prior to th	e Board Meeting.)	
Expected Ending Date: 2/26/20			
	PROJECTED	ACTUAL	
1. Gross Sales:	\$_18,000	\$	
2. Expenses/Cost of Goods Sold:	<u>\$_10,000</u>	\$	
3. Total Profit:	<u>\$_8,000</u>	\$	
4. Please attach a copy of your organization's budget for	this academic year.		
5. Please specify below how the funds raised by this ever	nt are to be spent.		
ITEMS TO BE PURCHASED FROM PROFIT	PROJECTED	ACTUAL	
Bus transportation	\$2,000	\$	
Instruments	\$5,000	\$	
T-shirt and pizza party	\$1,000	\$	
6. Sponsor's Signature:	Date: 12/3/19		
7. As Principal, I 🛛 recommend 🗆 do not recommend th	is project.		
Form is typed Budget report is atta	ached		
Dates are not prior to Board Meeting.			
Prindipal's rationale for not recommending this request:			
Division (17)	Date (2-	3-19 1	
Principal's Signature:	Dute		
8. As Superintenden, $1/2$ recommend \Box do not recommend this project.			
Superintendent's rationale for not recommending this rec	luest:	1	
A for the it		u la n	
Superintendent's Signature: 1 Att h		6/20	
A copy of this form was sent to the County Clerk as a no	tice for subscription sales.		
Date sent: Signature of Superintender	nt:		
	Reviev	w/Revised:6/27/2016	

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01/14/2020 09:41 9696asmi

WOODFORD COUNTY PUBLIC SCHOOLS YEAR-TO-DATE BUDGET REPORT

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FOR 2020 06

ACCOUNTS FOR: 085 WOODFORD COUNTY MIDDLE SCHOOL	ORIGINAL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT USED
7207S BAND-SAF					100 100		
085250 0999C 7207S COMMITTED BEG BA 085250 1740 7207S STUDENT FEES 085250 1790 7207S OTHER STUDENT ACT 0852519 0895 7207S OTHER STUDENT TR 0852535 0671 7207S ITEMS FOR RESALE 0852535 0673 7207S STUDENT REGISTRA 0852535 0674 7207S AWARDS 0852535 0675 7207S ORGANIZTN SUPPLI 0852535 0695 7207S OTHER STUDENT TR		$\begin{array}{c} -2,133 \\ 0 \\ -12,000 \\ 5,000 \\ 500 \\ 3,500 \\ 800 \\ 2,000 \\ 2,333 \end{array}$	-2,133.14 -35.00 -62.00 .00 .00 .00 .00 .00	.00 .00 .00 .00 .00 .00 .00 .00 .00	.00 .00 567.30 .00 .00 .00 .00	.00 35.00 -11,938.00 4,432.70 500.00 3,500.00 800.00 2,000.00 2,333.14	100.0% 100.0% .5%* 11.3% .0% .0% .0% .0%
TOTAL BAND-SAF	0	0	-2,230.14 -2,230.14	.00	567.30 567.30	1,662.84	100.0%
TOTAL WOODFORD COUNTY MIDDLE SCHO TOTAL REVENUES TOTAL EXPENSES	0 0	-14,133 14,133	-2,230.14 -2,230.14 .00	.00	.00 567.30	-11,903.00 13,565.84	100.0%

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

TOPIC/TITLE: School Fundraiser Requests

PRESENTER: Jimmy Brehm

ORIGIN:

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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:

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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 Student Council to sell tickets for the 8th grade Prom with all profits to be used for decorations and materials for the next year.

IMPACT ON RESOURCES: None

SUPERINTENDENT'S RECOMMENDATION: Recommended	Not Recommended
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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 fund-raising 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	D	ate: 11/25/2019
Person/Club/Organization: Rachel Smith		
Fund-Raiser Requested: 8th Grade Prom	. /	
Is this a Service Project per Board Policy 09.33?	Yes	No
Product to be Sold: Tickets	· · ·	
Number of Students Participating: 250		
Expected Beginning Date: May 8th, 2020	(Beginning date cannot be p	prior to the Board Meeting.)
Expected Ending Date: May 8th, 2020		2.1
	PROJECT	ED ACTUAL
1. Gross Sales:	<u>\$750</u>	\$
2. Expenses/Cost of Goods Sold:	<u>\$500</u>	\$
3. Total Profit:	<u>\$250</u>	\$
4. Please attach a copy of your organization's budg	et for this academic year.	
5. Please specify below how the funds raised by \underline{thi}	s event are to be spent.	
ITEMS TO BE PURCHASED FROM PROFIT	PROJECT	ED <u>ACTUAL</u>
Decorations for the following year	\$250	<u>\$</u>
· .	\$	\$
	\$	<u> </u>
6. Sponsor's Signature:	Date: 11 25	[19]
7. As Principal, I 🗹 recommend 🗆 do not recomme	end this project.	
Form is typed Budget report	is attached	
\square Dates are not prior to Board Meeting.		
Principal's rationale for not recommending this req	uest:	
Principal's Signature: Uhink	Date	11- 86-19
8. As Superintendent, I) recommend 🗆 do not rec		
Superintendent's rationale for not recommending th		kin
	1	T
Superintendent's Signature: 1 bit Had		Date 116 20
A copy of this form was sent to the County Clerk a		
Date sent: Signature of Superin	tendent:	
		Review/Revised:6/27/2016
		6 Secure New P Secure 6 VP Grant Real
		DEC - 3 2019

	WOODFORD COUNTY PUE YEAR-TO-DATE BUDGET						P 1 glytdbud
FOR 2020 05					JOURNAL DETAIL	2020 1 TO	2020 1
ACCOUNTS FOR: 085 WOODFORD COUNTY MIDDLE SC	ORIGINAL HOOL APPROP	REVISED BUDGET	YTD ACTUAL	MTD ACTUAL	ENCUMBRANCES	AVAILABLE BUDGET	PCT USED
7575 STUDENT LEADERSHIP-DAF							
085210 WCMS DISTRICT ACTIVITY REVE 0852818 DAF INSTRUCTION	NU -3,431 3,431	-4,586 4,586	-3,586.44 .00	1,180.00	.00	-1,000.00 4,586.44	78.2% .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%
TOTAL REVE TOTAL EXPE		-4,586 4,586	-3,586.44 .00	1,180.00 .00	.00	-1,000.00 4,586.44	

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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 MEETINGITEM IS ON THE CONSENT AGENDA FOR APPROVALACTION REQUESTED AT FUTURE MEETING:(DATE)BOARD REVIEW REQUIRED BY

F

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

PREVIOUS REVIEW, DISCUSSION OR ACTION:

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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 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

SUPERINTENDENT'S RECOMMENDATION: 🖙 Recommended	Not Recommended
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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 fund-raising 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			h
Fund-Raiser Requested: Dance Gold	Society and IV		,
Is this a Service Project per Board Policy 09.33?	Yes	□ No	
Product to be Sold:	103		
Number of Students Participating: 80			
Expected Beginning Date: February 22, 2020			
Expected Ending Date: February 29. 2020	DDO		
1 Crease Salary		JECTED	ACTUAL
1. Gross Sales:	<u>\$</u> ;	5500	\$
2. Expenses/Cost of Goods Sold:	<u>\$</u>	500	\$
3. Total Profit:		5000	φ
4. Please attach a copy of your organization's budget for the			
5. Please specify below how the funds raised by <u>this event</u>	-		
ITEMS TO BE PURCHASED FROM PROFIT		JECTED	ACTUAL
Donation to the UK Pediatric Cancer Center	\$ 500	0	<u>\$</u>
	<u> </u>		<u>\$</u>
	\$	1141-02	
6. Sponsor's Signature	Date:	18/202	<u>.0</u>
7. As Principal, I \bigwedge recommend \Box do not recommend this			
Form is typed D Budget report is attack	hed		
Dates are not prior to Board Meeting.			
Principal's rationale for not recommending this request:			
Principal's Signature:	D	ate 1/8/2	70 0
8. As Superintendent, I 🗹 recommend 🗆 do not recommer			
Superintendent's rationale for not recommending this requ			and
Superintendent's rationale for not recommending this requi	est.		P
Summing and Simon A State 14 1		Date 1/16/	20
Superintendent's Signature: <u>9 pro pro-</u>	C 1		10
A copy of this form was sent to the County Clerk as a notic	ce for subscript	ion sales.	
Date sent: Signature of Superintendent:			
		Review/Re	vised 6/27/2016
		LAN	1 0 2020
		JAN	1 0 2020
		VV	CPS

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01/08/2020 13:46 9696cpat P 1 glytdbud

FOR 2	020 07					JOURNAL DETAIL	2020 1 TO	2020 12
ACCOUNT: 21	S FOR: DISTRICT ACTIVITY FUND	ORIGINAL APPROP	TRANFRS/ ADJSTMTS	REVISED BUDGET	YTD ACTUAL	ENC/REQ	AVAILABLE BUDGET	PCT USED
7411 BE	TA CLUB/NHS-DAF	0	0	0	-3,016.98	.00	3,016.98	100.0%
TO	TAL DISTRICT ACTIVITY FUND	0	0	0	-3,016.98	.00	3,016.98	100.0%
	TOTAL REVENUES TOTAL EXPENSES	-7,294 7,294	-2,455 2,455	-9,749 9,749	-5,053.86 2,036.88	- 00 - 00	-4,695.00 7,711.98	

ITEM #: IX B DATE: January 10, 2020

TOPIC/TITLE: School Fundraiser Requests

PRESENTER: Jimmy Brehm

ORIGIN:

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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

\boxtimes

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

PREVIOUS REVIEW, DISCUSSION OR ACTION:

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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 WCHS ESPORTS to host a LAN Party (video games) & concessions with profits going to equipment.

IMPACT ON RESOURCES: None

SUPERINTENDENT'S RECOMMENDATION	ON: Recommended	Not Recommended
	to the	

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 fund-raising 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.

 \Box Yes

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?

Product to be Sold: \$7 Admission to Play

Number of Students Participating: 30

Expected Beginning Date: 01-31-2020

Expected Ending Date: 01-31-2020

(Beginning date cannot be prior to the Board Meeting.)

X No

	PROJECTED	ACTUAL
1. Gross Sales:	<u>\$300.00</u>	\$
2. Expenses/Cost of Goods Sold:	<u>\$50.00</u>	\$
3. Total Profit:	<u>\$250.00_</u>	\$

4. Please attach a copy of your organization's budget for this academic year.

5. Please specify below how the funds raised by <u>this event</u> are to be spent.

ITEMS TO BE PURCHASED FROM PROFIT	PROJECTED	ACTUAL
Equipment	\$ 250.00	\$
	\$	\$
	\$	\$

6. Sponsor's Signature: _

Date: 01/02/2020

7	1/15	Spencer	onuno
7. As Principal,	12 recommend	not recommend	this project

Form is typed Budget report is attached

Dates are not prior to Board Meeting.

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Principal's rationale for not recommending this request:

	A		
Principal's Signature:	AF-	Date 1-6-2020	2
8. As Superintendent,	🛙 🖻 recommend 🗖 do not recommend this projec	t.	And
Superintendent's ration	nale for not recommending this request:		K
			1
Superintendent's Signa	iture: 1/ Sto fm	Date 1 16 20	
A copy of this form wa	s sent to the County Clerk as a notice for subscri	ption sales.	
Date sent:	Signature of Superintendent:		
		Review/Revised	:6/27/2016
		RECE	IVED
		JAN - 8	REC'D 2020

WOODFORD COUNTY BOARD OF EDUCATION

01/02/2020 14:12	WOODFORD COUNTY PUBLIC SCHOOLS
9696cpat	ESPORTS

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FOR 2020 07					JOURNAL DETAIL	2020 1 TO	2020 12
ACCOUNTS FOR: 25 SCHOOL ACTIVITY FUND	ORIGINAL APPROP	TRANFRS/ ADJSTMTS	REVISED BUDGET	YTD ACTUAL	ENC/REQ	AVAILABLE BUDGET	PCT USED
7436S E-SPORTS-SAF	0	0	0	-1,995.00	1,920.00	75.00	100.0%
TOTAL SCHOOL ACTIVITY FUND	0	0	0	-1,995.00	1,920.00	75.00	100.0%
TOTAL REVENUES TOTAL EXPENSES	0 0	-6,900 6,900	-6,900 6,900	-1,995.00 .00	.00 1,920.00	-4,905.00 4,980.00	