

**WOODFORD COUNTY BOARD OF EDUCATION  
AGENDA ITEM**

**ITEM #:** VII B **DATE:** May 13, 2024

**TOPIC/TITLE:** School Fundraiser Requests

**PRESENTER:** Danny Adkins

**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.

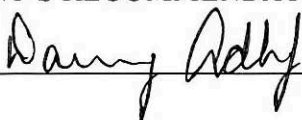
**SUMMARY OF MAJOR ELEMENTS:**

Attached Fundraisers: WCHS Boosters Cheer (Restaurant nights FY25); WCHS Boosters Cheer (Car washes for FY25); WCHS Boosters Cheer (Fill My Calendar for FY25); WCHS Boosters Cheer (Cheer Clinics for FY25); WCHS Volleyball (Dig Pink, service project); WCHS Volleyball (Serve-a-thon); WCMS (School Pictures, service project); WCMS Athletics (Concessions FY25)

**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:**  **Recommended**       **Not Recommended**

  
\_\_\_\_\_

**Request Form for School Fund-Raisers**

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School: Woodford County High School Boosters

Date: 5/1/2024

Person/Club/Organization: WCHS Cheer

Fund-Raiser Requested: Restaurant nights, one monthly throughout season

Is this a Service Project per Board Policy 09.33?  Yes  No

Product to be Sold: Restaurant nights, one monthly throughout season

Number of Students Participating: 48 WCHS Cheerleaders

Expected Beginning Date: 7/1/24 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: 6/30/2025

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ 3000.00	\$ _____
2. Expenses/Cost of Goods Sold:	\$ 0	\$ _____
3. Total Profit:	\$ 3,000 .00	\$ _____

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.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
Pay for supplies, travel, equipment, and entry fees, nationals	\$ 3,000.00	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

6. Sponsor's Signature: [Signature] Date: 4/23/24

7. As Principal, I  recommend  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: [Signature] Date 4-23-24

8. As Superintendent, I  recommend  do not recommend this project.

Superintendent's rationale for not recommending this request:

Superintendent's Signature: [Signature] Date 5-7-24

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

Date sent: \_\_\_\_\_ Signature of Superintendent: \_\_\_\_\_

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School: Woodford County High School Boosters

Date: 5/1/2024

Person/Club/Organization: WCHS Cheer

Fund-Raiser Requested: Car washes throughout season

Is this a Service Project per Board Policy 09.33?  Yes  No

Product to be Sold: car washes

Number of Students Participating: 48 WCHS Cheerleaders

Expected Beginning Date: 7/1/24 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: 6/30/2025

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ <u>4000.00</u>	\$ _____
2. Expenses/Cost of Goods Sold:	\$ <u>0</u>	\$ _____
3. Total Profit:	\$ <u>4,000 .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 this event are to be spent.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
Pay for supplies, travel, equipment, and entry fees, nationals	\$ <u>4,000.00</u>	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

6. Sponsor's Signature: [Signature] Date: 4/23/24

7. As Principal, I  recommend  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: [Signature] Date 4-30-24

8. As Superintendent, I  recommend  do not recommend this project.

Superintendent's rationale for not recommending this request:

Superintendent's Signature: [Signature] Date 5-7-24

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Date sent: \_\_\_\_\_ Signature of Superintendent: \_\_\_\_\_

Review/Revised:6/27/2016



**Request Form for School Fund-Raisers**

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School: Woodford County High School Boosters

Date: 5/1/2024

Person/Club/Organization: WCHS Cheer

Fund-Raiser Requested: Fill my calendar

Is this a Service Project per Board Policy 09.33?

Yes

No

Product to be Sold: Fill my calendar

Number of Students Participating: 48 WCHS Cheerleaders

Expected Beginning Date: 7/1/24 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: 6/30/2025

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ <u>6000.00</u>	\$ _____
2. Expenses/Cost of Goods Sold:	\$ <u>0</u>	\$ _____
3. Total Profit:	\$ <u>6,000 .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 this event are to be spent.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
Pay for supplies, travel, equipment, and entry fees, nationals	\$ <u>6,000.00</u>	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

6. Sponsor's Signature: Masha Richardson Date: 4/23/24

7. As Principal, I  recommend  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: \_\_\_\_\_ Date 4-30-24

8. As Superintendent, I  recommend  do not recommend this project.

Superintendent's rationale for not recommending this request:

Superintendent's Signature: Danny Adley Date 5-7-24

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Date sent: \_\_\_\_\_ Signature of Superintendent: \_\_\_\_\_

Review/Revised:6/27/2016

**Request Form for School Fund-Raisers**

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School: Woodford County High School Boosters

Date: 5/1/2024

Person/Club/Organization: WCHS Cheer

Fund-Raiser Requested: cheer clinics

Is this a Service Project per Board Policy 09.33?

Yes

No

Product to be Sold: cheer clinics

Number of Students Participating: 48 WCHS Cheerleaders

Expected Beginning Date: 7/1/24 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: 6/30/2025

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ <u>2,000.00</u>	\$ _____
2. Expenses/Cost of Goods Sold:	\$ <u>0</u>	\$ _____
3. Total Profit:	\$ <u>2,000 .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 this event are to be spent.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
Pay for supplies, travel, equipment, and entry fees, nationals	\$ <u>2,000.00</u>	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____

6. Sponsor's Signature: [Signature] Date: 4/23/24

7. As Principal, I  recommend  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: [Signature] Date 4-30-24

8. As Superintendent, I  recommend  do not recommend this project.

Superintendent's rationale for not recommending this request:

Superintendent's Signature: [Signature] Date 5-7-24

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Date sent: \_\_\_\_\_ Signature of Superintendent: \_\_\_\_\_

Review/Revised:6/27/2016



### Request Form for School Fund-Raisers

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School: **WCHS**

Date: **February 7, 2024**

Person/Club/Organization: **Volleyball team**

Fund-Raiser Requested: **Dig Pink**

Is this a Service Project per Board Policy 09.33?

Yes

No

Product to be Sold: **none – All proceeds from the October 3rd Lexington Catholic match will be donated to Woodford Relay for Life. Revenue sources include gate money, concession money, and t-shirt sales.**

Number of Students Participating: **approx. 35**

Expected Beginning Date: **October 10, 2024**

Expected Ending Date: **October 10, 2024**

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$1,000.00__	\$ _____
2. Expenses/Cost of Goods Sold:	\$0.00__	\$ _____
3. Total Profit:	\$1,000.00__	\$ _____
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

	<u>PROJECTED</u>	<u>ACTUAL</u>
Woodford Relay for Life Donation	\$1,000.00__	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

6. Sponsor's Signature: Meghan C. Bottom Date: 2-7-24

7. As Principal, I  recommend  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: [Signature] Date 4-19-24

8. As Superintendent, I  recommend  do not recommend this project.

Superintendent's rationale for not recommending this request:

Superintendent's Signature: [Signature] Date 5-7-24

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Date sent: \_\_\_\_\_ Signature of Superintendent: \_\_\_\_\_

**Request Form for School Fund-Raisers**

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School: **WCCHS**

Date: **February 7, 2024**

Person/Club/Organization: **Volleyball team**

Fund-Raiser Requested: **Serve-a-thon**

Is this a Service Project per Board Policy 09.33?  Yes  No

Product to be Sold: **none – Players will be asked to get 6 “sponsors” before the Serve-a-thon. On the day of the Serve-a-thon, each player will serve 25 times. For every serve the player gets in the court, she will earn a minimum dollar donation from each of her sponsors. Sponsors can also choose to sponsor an individual by pledging a particular amount of money for participation in the event regardless of how many serves the player gets in the court.**

Number of Students Participating: **approx. 35**

Expected Beginning Date: **August 26, 2024**

Expected Ending Date: **September 10, 2024**

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$4,000.00	\$ _____
2. Expenses/Cost of Goods Sold:	\$0.00	\$ _____
3. Total Profit:	\$4,000.00	\$ _____

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.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
<u>Team Building Activities</u>	\$1,000.00	\$ _____
<u>Team Celebrations (Senior Night, Banquet)</u>	\$1,000.00	\$ _____
<u>T-shirts</u>	\$1,000.00	\$ _____
<u>Equipment</u>	\$1,000.00	\$ _____

6. Sponsor’s Signature:     Meghan C. Bottom     Date:   2-7-24  

7. As Principal  recommend  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:     *[Signature]*     Date   4-19-24  

8. As Superintendent, I  recommend  do not recommend this project.

Superintendent’s rationale for not recommending this request:

Superintendent’s Signature:     *[Signature]*     Date \_\_\_\_\_

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Date sent: \_\_\_\_\_ Signature of Superintendent: \_\_\_\_\_



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School: WOODFORD CO MIDDLE SCHOOL

Date: 4/24/2024

Person/Club/Organization: SCHOOL PICTURES

Fund-Raiser Requested: SCHOOL PICTURES

Is this a Service Project per Board Policy 09.33?

Yes

No

Product to be Sold: SCHOOL PICTURES

Number of Students Participating: ALL STUDENTS

Expected Beginning Date: AUGUST 2024 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: SPRING 2025

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$3000	\$
2. Expenses/Cost of Goods Sold:	\$0	\$
3. Total Profit:	\$3000	\$

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.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
<u>ITEMS FOR SCHOOL ACTIVITIES</u>	\$3000	\$
	\$	\$
	\$	\$

6. Sponsor's Signature: Anna V. Simmeriel Date: 5/2/24

7. As Principal, I  recommend  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: [Signature] Date: 5/2/24

8. As Superintendent, I  recommend  do not recommend this project.

Superintendent's rationale for not recommending this request:

Superintendent's Signature: [Signature] Date: 5-7-24

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Date sent: \_\_\_\_\_ Signature of Superintendent: \_\_\_\_\_



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School: WOODFORD CO MIDDLE SCHOOL

Date: 4/24/2024

Person/Club/Organization: WCMS GENERAL ATHLETICS & ATHLETIC TEAMS

Fund-Raiser Requested: CONCESSIONS

Is this a Service Project per Board Policy 09.33?

Yes

No

Product to be Sold: CONCESSION FOOD AND DRINK

Number of Students Participating: 250

Expected Beginning Date: JULY 2024 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: JUNE 2025

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$26000	\$
2. Expenses/Cost of Goods Sold:	\$13000	\$
3. Total Profit:	\$13000	\$

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.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
<u>GEAR, EQUIPMENT, TRAVEL, BANQUET, AWARDS.</u>	\$13000	\$
<u>GAME OFFICIALS, SECURITY, FIELD MAINTENANCE</u>	\$	\$
	\$	\$

6. Sponsor's Signature: K. Brumshie Date: 5/2/24

7. As Principal, I  recommend  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: [Signature] Date 5/2/24

8. As Superintendent, I  recommend  do not recommend this project.

Superintendent's rationale for not recommending this request:

Superintendent's Signature: [Signature] Date 5-7-24

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Date sent: \_\_\_\_\_ Signature of Superintendent: \_\_\_\_\_

Review/Revised:6/27/2016