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Activity Account	Bostali I Bon Swal Cirls Secon
xternal Support/Booster Organization	
isme of Fundraiser	Meet The Refuse
Nebsite (if applicable)	
ponsor	Chris Lung I Todd Mandreld / Jean ties
Date Submitted	
Purpose of fundraising activity:	
trype to be sold or items requested for de	oj:ation:
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Anticipated profit and plans for excess f	
Date(s) scheduled:	ENO
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	1-11-24
Sponsor	Date
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activity Account	Brown	
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Sponsor		
Date Submitted	massimustavias = = = = = = = = = = = = = = = = = = =	an versioner an university and design that the native annual account and having
Purpose of fundraising activity:		47
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Items to based or items requested t	or donation.	
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Beneficiary/sport of fundraising ac	tivity:	~
Anticipated profit and plans for exc	ess funds:	
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Date(s) scheduled:	and de d	10
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Name and the supervisors at activ	ity (chaperones, custodicas, etc.):	
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### School Activity Account External Support/Booster Organization Name of Fundraises Website (if applicable) Spensor Date Submitted Purpose of fundraising activity: Environa Reces to be rold or items requested for donation: Beschelary/sport of fundralsing activity: Anticipated profit and plans for excess funds: Date(s) scheduled: i-fadelt supervicors at activity (chaperones, costodizas, etc.): Not Approved Approved SBDM Council (If Council Policy) Date Board Approval Date (if applicable)

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School	ŢČms	
Activity Account	Basebell	g. g. ap. ar. conference(the label) of the frequency of the control of the contr
External Support/Booster Occupization	· · · · · · · · · · · · · · · · · · ·	gygggggggggggggggggggggggggggggggggggg
Name of Fundraiser	Chicken Buston Por	+ Set
Website (if applicable)		
Sponsor	Uns Lynn	
Date Submitted	7-11-74	
Purpose of fundraising activity:		•
Einsposent	and a set introduction	
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Items to be said as items supported for	danation	
Items to be sold or items requested for BBO Chickens	and Boston Busts	
Beneficiary/sport of fund raising activity	ty:	
		Charles and Ref. Commission
Anticipated profit and plans for excess	iunds:	-
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Date(s) scheduled:	<b>}</b>	
Names of edult supervisors at activity		•
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	and Domes	7-11-24 Date
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Principal	Q	Date
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School	TUMS	
Activity Account	Hoseball	
External Support/Booster Organization		
Name of Fundraiser	Family wheel was	
Website (if applicable)		
Sponsor	Chins Lune	
Date Submitted	7-11-24	
Equip.	ustion: -AMIL herf was	
Reneficiary/sport of fundralsing activity:	Brichall	
Anticipated profit and plans for excess fur	nds:	ŧ
Dato(a) scheduled:	aperones, custodians, etc.):	
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durke One: Approved	Not Approved	7/24/24
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External Support/Booster On enization		
Name of Fundroiser	Clothin 5 Je	
Nebsite (if applicable)	Company of the Control of the Contro	
Sponsor	Chris Lune	
Onte Submitted	7-11-24	
furpose of justicisting activity:		
Neme, to be sold or items requested for you.	tion:	
Beneficiary/sport of fundroising activity:		
Anticipated profit and plans for excess fund	ls:	
Deto(6) scheduled:	erryanse name a special of the ment asked may a special and and a	· · · · · · · · · · · · · · · · · · ·
Names of adold apervisors at activity (cha-		
Chris line		
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		FII-24
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Circle One: Approved	Not Approved	7/24/20
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School	1 77.ms	
Activity Account	dischall	
External Support/Booster Organization		
Name of Fundrainer	Family More	Might
Website (if zpplicable)		<i>H</i>
Sponsor		
Date Submitted		
Purpose of fundreising activity:		
Items to be sold or items requested for don		Skend
Beneficiary/sport of fundraising activities	Base bell	
Anticipated profit and plans for excess fun	ds:	
Date(s) scheduled: [[CVFr.ks.	· 144	
Names 1870; supervisors at activity (cho	perones, custodians, etc.):	*
		7-11-24 Pate
Principal Approved	Not Approved	7/24/14
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School	Bosch W	
Activity Account	100395:11	the state of the s
External Support/Booster Officersation		e made etalogue ny selectronic (selectronic de selectronic de sele
Name of Fundraiser	Fill the Homephile	
Website (if applicable)		unioni pro-
Speator	Chas Luna	
Date Submitted	7-11-24	4-4-4
Purpose of fundraising activity:	and a superior of the superior	
Items to be sold or items requested for don	formers property	e of apiece of Hamplade
Boneficiary/sport of fundraising activity:		•
Anticipated profit and plans for excess fur	ids:	POWER THE ST. THE WAS AN AREA OF THE ST. THE S
Dato(a) schoduled:	Hery 1th -75th	*
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SEDM Council (If Council Policy)	eff am i v	Date
		Board Approval Date (if applicable)
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Schoel	Jans	
Activity Account	Theebull	
External Support/Booster Organization		
Name of Fundraiser	Pensen Box	of Cart
Website (if applicable)		
Sponior	1	
Date Submitted	1	
Purpose of fundralsing activity:		
Items to be sold general requested for don	ation:	
Beneficiary/sport of fundroising activity:	mbay sa samahan ki ki pasaga gaya kanga ya kanga sa kanga ka	
Anticipated profit and plans for excess fur	ds:	
Date(c) scheduled:	or	1200
Names of their supervisors at activity (cha	aperones, custedians, etc.):	
	The state of the s	Phy Sy Date
Circle One: Approved	Not Approved	7/24/X1
SBDM Ceancil (If Council Policy)		Date
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5-Aul 7/31/24

School	Tems	
senvity Account	Buschall	
External Support/Booster Or, anization  Name of Fundraiser  Website (if applicable)	Spire Druge M	iddleSeA=1
Sponsor		The second secon
Date Submitted		
Purpose of fundraising activity:	stuff for 8th grow	de might
Items to be sold or items requises for done	tion: Star and Contestion St	had :
Beneficiary/sport of fundralsing activity:	Baschell	ta
Anticipated profit and plans for excess fund	18:	
Date(s) scheduled:	a And	
Names of a dult supervisors at activity (cha)	perones, custodiaes, etc.):	
Phris Luno		
3.00		7-11-24 Date
Circle one: Approved	Not Approved	7/a4/20
SBDM Council (If Council Policy)	the section of the section of the section of	Date
		Board Approval Date (if applicable)

4-Auc 7/31/24

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School	1/////	
Activity Account	Beschale	
External Support/Booster Organization		
Name of Fundraiser	Middle School one	shill Indiana
Website (if applicable)		
Spensor	Chris Luco	
Date Submitted	7-11-24	
Purpose of fundraising activity:		
Items to be said or items requested for don	nation:	
Beneficiary/sport of fundraising actives:	whall	
Anticipated profit and plans for excess fur	nds:	
Change 150 For each T	eam to enter tourno	ument
then we will have	a full Concession	THOU DE
Date(s) scheduled:		
Names of adult sepervisors at activity (ch	aperones, custodians, etc.).	*
ARIS Lune		
110		7-1/-2 Date
Circle Sinc: Approved	Not Approved	7/24/21
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Board Approval Date (if applicable)

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	7			
School	Todd County Midd	le School		
Activity Account	TCMS Volleyball			
External Support/Booster Organization	1			
Name of Fundraiser	Concession Stand			
Website (if applicable)				
Sponsor	TCMS Volleyball			
Date Submitted	7/21/24			
Purpose of fundraising activity:				
Raise money for the volleyball team to	get sport related equipment			
Items to be sold or items requested for	donation: Food/Drinks purch	nased from concessi	on stand during home	volleyball games
Beneficiary/sport of fundraising activi	ity: TCMS Volleyball			
Anticipated profit and plans for excess	funds:			
Money towards new equipment, appar	el, and shoes.			_
				e.
Date(s) scheduled: 8/1/24-10/1/24				
Names of adult supervisors at activity	(chaperones, custodians, etc.)	):		•
Robyn Henry / Nikki Andrews				<u> </u>
Robyn Henry Sponsor			7/21/24 Date	1956
Circle One: Approved	Not Approved		7/24/29 Date	
SBDM Council (If Council Policy)			Date	****
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		1129	1 - [	

Activity Account  External Support/Booster Organization Name of Fundraiser Bunt Cakes  Website (if applicable)  Sponsor TCMS Volleyball  Date Submitted 7/19/24  Purpose of fundraising activity: Raise money for the volleyball team to get sport related equipment  Hems to be sold or items requested for donation: Bunt Cakes  Beneficiary/sport of fundraising activity: TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  Principal  Not Approved  SBDM Council (If Council Policy)  Date  Board Approval	School	Todd County Middle School	
External Support/Booster Organization Name of Fundraiser  Website (if applicable)  Sponsor  TCMS Volleyball  Date Submitted  7/19/24  Purpose of fundraising activity:  Raise money for the volleyball team to get sport related equipment  Items to be sold or items requested for donation: Bunt Cakes  Beneficiary/sport of fundraising activity:  TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled:  8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry  Sponsor  Robyn One:  Approved  Not Approved  Date  SBDM Council (If Council Policy)  Date		TCMS Volleyball	
Name of Fundraiser  Website (if applicable)  Sponsor  TCMS Volleyball  Date Submitted  7/19/24  Purpose of fundraising activity:  Raise money for the volleyball team to get sport related equipment  Items to be sold or items requested for donation: Bunt Cakes  Beneficiary/sport of fundraising activity:  TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled:  8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  Not Approved  Not Approved  Date  SBDM Council (If Council Policy)  Date			
Website (if applicable)  Sponsor TCMS Volleyball  Date Submitted 7/19/24  Purpose of fundraising activity:  Raise money for the volleyball team to get sport related equipment  Items to be sold or items requested for donation: Bunt Cakes  Beneficiary/sport of fundraising activity: TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry Sponsor Date  SBDM Council (If Council Policy)  Date		Bunt Cakes	
Sponsor  TCMS Volleyball  7/19/24  Purpose of fundraising activity:  Raise money for the volleyball team to get sport related equipment  Items to be sold or items requested for donation: Bunt Cakes  Beneficiary/sport of fundraising activity:  TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled:  8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry  Sponsor  Approved  Not Approved  Not Approved  Date  SBDM Council (If Council Policy)  Date			
Date Submitted 7/19/24  Purpose of fundraising activity:  Raise money for the volleyball team to get sport related equipment  Items to be sold or items requested for donation: Bunt Cakes  Beneficiary/sport of fundraising activity: TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  Principal  Approved  Not Approved  Date  SBDM Council (If Council Policy)  Date		TCMS Volleyball	
Raise money for the volleyball team to get sport related equipment  Items to be sold or items requested for donation: Bunt Cakes  Beneficiary/sport of fundraising activity: TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  Not Approved  Principat  SBDM Council (If Council Policy)  Date	Date Submitted		
Raise money for the volleyball team to get sport related equipment  Items to be sold or items requested for donation: Bunt Cakes  Beneficiary/sport of fundraising activity: TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  Not Approved  Principat  SBDM Council (If Council Policy)  Date			
Items to be sold or items requested for donation: Bunt Cakes  Beneficiary/sport of fundraising activity: TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry Sponsor  Robyn Henry Sponsor  Robyn Henry Approved  Principal Section One: Approved  SBDM Council (If Council Policy)  Date	•	nort related equipment	•
Beneficiary/sport of fundraising activity: TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  T/19/24  Date  Sponsor  Not Approved  Not Approved  Date	Raise money for the voneyban team to get a	port related of dryment	
Beneficiary/sport of fundraising activity: TCMS Volleyball  Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  T/19/24  Date  Sponsor  Not Approved  Not Approved  Date	T	rian P. 10.1	
Anticipated profit and plans for excess funds:  Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry Sponsor  Robyn Henry Date  Oirofe One: Approved Not Approved  Date  SBDM Council (If Council Policy)  Date	Items to be sold or items requested for dona	ation: Bunt Cakes	
Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry / Sponsor  Robyn Henry / Not Approved  Date  SBDM Council (If Council Policy)  Date	Beneficiary/sport of fundraising activity:	TCMS Volleyball	
Money towards new equipment and camp.  Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry / Sponsor  Robyn Henry / Not Approved  Date  SBDM Council (If Council Policy)  Date			
Date(s) scheduled: 8/1/24-10/1/24  Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry Sponsor  Robyn Henry Date  Not Approved  Not Approved  Date  SBDM Council (If Council Policy)  Date	Anticipated profit and plans for excess fun	ds:	•
Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry Sponsor  Robyn Henry Date  Approved Not Approved  Principal Date  SBDM Council (If Council Policy)  Date	Money towards new equipment and camp.		
Names of adult supervisors at activity (chaperones, custodians, etc.):  Robyn Henry / Nikki Andrews  Robyn Henry Sponsor  Robyn Henry Date  Approved Not Approved  Principal Date  SBDM Council (If Council Policy)  Date	BANKS - 12-12-12-12-12-12-12-12-12-12-12-12-12-1		
Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  7/19/24  Sponsor Date  Circle One: Approved Not Approved  Principal Date  SBDM Council (If Council Policy)  Date	Date(s) scheduled: 8/1/24-10/1/24		
Robyn Henry / Nikki Andrews  Robyn Henry / Nikki Andrews  7/19/24  Sponsor Date  Circle One: Approved Not Approved  Principal Date  SBDM Council (If Council Policy)  Date	N		
Robyn Henry  Sponsor  Circle One:  Approved  Not Approved  Principal  Date  SBDM Council (If Council Policy)  Date	Names of adult supervisors at activity (cna	perones, custodians, etc.):	
Sponsor  Circle One:  Approved  Not Approved  Date  SBDM Council (If Council Policy)  Date	Robyn Henry / Nikki Andrews		
Sponsor  Circle One:  Approved  Not Approved  Date  SBDM Council (If Council Policy)  Date			
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Principal Date  SBDM Council (If Council Policy)  Date	Sponsor		Date
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1 3 7 7 7	4-	1 7/31/24	(if applicable)

School	Todd County Middle School	
Activity Account	PBIS	
External Support/Booster Organization		
Name of Fundraiser	Back to School Dance	
Website (if applicable)	DROK to Donoth Dallot	
	TCMS PBIS	
Sponsor	7/22/24	
Date Submitted		vanda
Purpose of fundraising activity:	Fundraising for student rev	wards
N		
Items to be sold or items requested for dona	tion: Digital photos from 360 ph	oto booth, Concessions
Beneficiary/sport of fundraising activity:	TCMS students	
Anticipated profit and plans for excess fund	is: \$1,000.00	
Date(s) scheduled:	SERE ()	1 22211
	Cugu	4, 2029
Names of adult supervisors at activity (chap	perones, custodians, etc.):	TCMS Admin and staff
Kimberly Davis		
Sponsor		Date
Shonzoi		27414
Circle One: Approved	Not Approved	
Tout the of		7/22/24
Principal		Date
SBDM Council (If Council Policy)		Date
	A ( 71	Beard Approval Date (if applicable)

School	Todd County Middle School
Activity Account	Band
External Support/Booster Organization	
Name of Fundraiser	Fanatics Clothing
Website (if applicable)	Tanada cionna
Sponsor	Dipasquale
Date Submitted	7/22/24
Purpose of fundraising activity:	Band instruments, music, supplies, fees and trips
Items to be sold or items requested for donation	on: Clothing
Beneficiary/sport of fundraising activity:	Band
Anticipated profit and plans for excess funds:	
Date(s) scheduled:	August/September
Names of adult supervisors at activity (chaper	rones, custodians, etc.): Dipasquale
Dipasquale Sponsor	7/22/24 Date
Circle One: Approved	Not Approved  7/24/24  Date
SBDM Council (If Council Policy)	Date
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School	Todd County Middle School
Activity Account	Band
External Support/Booster Organization	
Name of Fundraiser	10 for 10
Website (if applicable)	
Sponsor	Dipasquale
Date Submitted	7/22/24
Purpose of fundraising activity:	Fundraising for student trips and operating equipment
Items to be sold or items requested for donatio	n: Donation List
Beneficiary/sport of fundraising activity:	Band
Anticipated profit and plans for excess funds:	\$1,000.00
Date(s) scheduled:	January
Names of adult supervisors at activity (chaper	ones, custodians, etc.): Dipasquale
ther Dipasquale Sponsor	7/22/24 Date
Circle One. Approved Printipal	Not Approved  7/24/21  Date
SBDM Council (If Council Policy)	Date
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School	Todd County Middle School	
Activity Account	Band	
External Support/Booster Organization		
Name of Fundraiser	Crush	
Website (if applicable)		
Sponsor	Dipasquale	
Date Submitted	7/22/24	
Purpose of fundraising activity:	Music, Instruments, Repair, Trips	
Items to be sold or items requested for donation	n: Crush	
Beneficiary/sport of fundraising activity:	TCMS band students	
Anticipated profit and plans for excess funds:		
Date(s) scheduled:	February	
Names of adult supervisors at activity (chapero	ones, custodians, etc.): Dipa	squale
ther Dipasquale		7/22/24
Sponsor		Date
Circle One. Approved Pryncipal.	Not Approved	7/24/21 Date
SBDM Council (If Council Policy)		Date
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School	TODD COUNTY MIDDLE SCHOOL	
Activity Account	CHEERLEADING	
External Support/Booster Organization		
Name of Fundraiser	Basketball Concessions	
Website (if applicable)		
Sponsor	APRIL GRIFFIN	
Date Submitted	7/24/2024	
Fundraising Activity:		
The purpose of this fundraiser is to raise funds f	or cheer items such as Camps, uniforms, clot	hings, signs, etc
Items to be sold or items requested for donation: food items such as hotdogs, sandwhiches, chips, o		
Beneficiary/sport of fundraising activity: The cheerleading team.		
Anticipated profit and plans for excess funds:		_
\$3,000.00		•
Excess funds will be saved in the cheer account t	or future expenses.	
Date(s) scheduled: Oct 2024-Feb 2025		
Names of adult supervisors at activity (chaperor	ues, custodians, etc.):	•
April Griffin, Brittany Prather		
april Jayon		7/24/24 Date
Cirole One: Approved Principal	Not Approved	7/24/24 Date
SBDM Council (If Council Policy)		Date
Septial Council for Countil 1 Oney)		2010
4	1 7/31/24	Board Approval Date (if applicable)

School	Todd County Middle Scl	hool
Activity Account	Band	
External Support/Booster Organization		
Name of Fundraiser	Century Resources	
Website (if applicable)		
Sponsor	Dipasquate	
Date Submitted	7/22/24	
Purpose of fundraising activity:	Music, Instruments, Rej	pair, Trips
Items to be sold or items requested for donation	on: Catalogue	
Beneficiary/sport of fundraising activity:	TCMS band students	
Anticipated profit and plans for excess funds:		
Date(s) scheduled:	October-November	
Names of adult supervisors at activity (chaper	rones, custodians, etc.):	Dipasquale
ther Dipasquale Sponsor		7/22/24 Date
Principal.  Approved	Not Approved	7/24/6 Date
SBDM Council (If Council Policy)	$\wedge$ $^{\prime}$	Date  Board Approval  (if applicable