

**WOODFORD COUNTY BOARD OF EDUCATION
AGENDA ITEM**

ITEM #: VII B DATE: May 18, 2026

TOPIC/TITLE: School Fundraiser Requests

PRESENTER: Dr. Lori Jones

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 Orchestra (car washes);
WCHS Orchestra (Community Pops Performance)
SHA (Kroger Community Rewards)
SHA (Student Supply Drive)
Southside Elem PTO (Teacher Appreciation)
Southside Elem PTO (Round-Up Rodeo)
Southside Elem PTO (Spirit Wear)
WCMS TSA (T-shirt Sponsorships)
Elementaries (Local Business Sponsorships)
WCHS Boys Lacrosse (Calendar Fundraiser)

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

Lori Jones

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: 4-17-26

Person/Club/Organization: Woodford County High School Orchestra

Fund-Raiser Requested: June Car Wash Series

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

Product to be Sold: Student made goods and services

Number of Students: 42

Expected Beginning Date: June 1st, 2026 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: June 20th, 2026

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ 2100	\$ _____
2. Expenses/Cost of Goods Sold:	\$ 75	\$ _____
3. Total Profit:	\$ 2025	\$ _____

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>ACTUALS</u>
<u>All proceeds will go towards the cost of Orchestra Disney Trip</u>	\$ 2025	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

6. Sponsor's Signature: Zoey Harrison Date: 4/17/26

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 4-10-26

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: Joni Jones Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

WOODFORD COUNTY PUBLIC SCHOOLS



MTD

PROJECT NUMBER: 7585S		ORCHESTRA-SAF THROUGH EOY 2026				
STATE CODE:		THROUGH EOY 2026				
CFDA NUMBER:						
GRANT AMOUNT:						
DESCRIPTION	ENCUMBRANCE	* * * * * REVISED BUDGET	* * * * * EXPENDITURES YEAR TO DATE	* * * * * PROJECT TO DATE	* * * * * AVAILABLE BUDGET	
7585S ORCHESTRA-SAF						
084250 WCHS SCH ACT REVENUE						
0999	BEG BALANCE CARRY FORWARD	.00	-2,124.02	-2,171.82	-2,171.82	47.80
1740	STUDENT FEES	.00	-4,000.00	-564.99	-564.99	-3,435.01
1790	OTHER STUDENT ACTIVITY INCOME	.00	.00	-60.00	-60.00	60.00
TOTAL WCHS SCH ACT REVENUE		.00	-6,124.02	-2,796.81	-2,796.81	-3,327.21
0842535 CO-CURRIC & EXTRA CURRIC SAF						
0673	STUDENT REGISTRATIONS	.00	4,000.00	.00	.00	4,000.00
0675	ORGANIZTN SUPPLIES (ACTIVITY)	.00	.00	.00	.00	.00
0895	OTHER STUDENT TRAVEL	900.00	2,124.02	221.04	221.04	1,002.98
TOTAL CO-CURRIC & EXTRA CURRIC SAF		900.00	6,124.02	221.04	221.04	5,002.98
TOTAL ORCHESTRA-SAF		900.00	.00	-2,575.77	-2,575.77	1,675.77
TOTAL REVENUES		.00	-6,124.02	-2,796.81	-2,796.81	-3,327.21
TOTAL EXPENSES		900.00	6,124.02	221.04	221.04	5,002.98
GRAND TOTALS		900.00	.00	-2,575.77	-2,575.77	1,675.77

AUTHORIZED SIGNATURE: _____

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 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: 4-17-26

Person/Club/Organization: Woodford County High School Orchestra

Fund-Raiser Requested: Community Pops Performance with Instrument Petting Zoo

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

Product to be Sold: Student made goods and services

Number of Students: 42

Expected Beginning Date: June 1st, 2026 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: June 20th, 2026

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ <u>500</u>	\$ _____
2. Expenses/Cost of Goods Sold:	\$ <u>0</u>	\$ _____
3. Total Profit:	\$ <u>500</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>ACTUALS</u>
<u>All proceeds will go towards the cost of Orchestra Disney Trip</u>	\$ <u>500</u>	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

6. Sponsor's Signature: Zoey Harrison Date: 4/17/26

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 5-7-26

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: Joni Jones Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

WOODFORD COUNTY PUBLIC SCHOOLS



MTD

PROJECT NUMBER: 75855		ORCHESTRA-SAF THROUGH EOY 2026				
STATE CODE:		THROUGH EOY 2026				
CFDA NUMBER:						
GRANT AMOUNT:						
DESCRIPTION	ENCUMBRANCE	REVISED BUDGET	EXPENDITURES YEAR TO DATE	EXPENDITURES PROJECT TO DATE	AVAILABLE BUDGET	
75855 ORCHESTRA-SAF						
084250 WCHS SCH ACT REVENUE						
0999	BEG BALANCE CARRY FORWARD	.00	-2,124.02	-2,171.82	-2,171.82	47.80
1740	STUDENT FEES	.00	-4,000.00	-564.99	-564.99	-3,435.01
1790	OTHER STUDENT ACTIVITY INCOME	.00	.00	-60.00	-60.00	60.00
TOTAL WCHS SCH ACT REVENUE		.00	-6,124.02	-2,796.81	-2,796.81	-3,327.21
0842535 CO-CURRIC & EXTRA CURRIC SAF						
0673	STUDENT REGISTRATIONS	.00	4,000.00	.00	.00	4,000.00
0675	ORGANIZTN SUPPLIES (ACTIVITY)	.00	.00	.00	.00	.00
0895	OTHER STUDENT TRAVEL	900.00	2,124.02	221.04	221.04	1,002.98
TOTAL CO-CURRIC & EXTRA CURRIC SAF		900.00	6,124.02	221.04	221.04	5,002.98
TOTAL ORCHESTRA-SAF		900.00	.00	-2,575.77	-2,575.77	1,675.77
TOTAL REVENUES		.00	-6,124.02	-2,796.81	-2,796.81	-3,327.21
TOTAL EXPENSES		900.00	6,124.02	221.04	221.04	5,002.98
GRAND TOTALS		900.00	.00	-2,575.77	-2,575.77	1,675.77

AUTHORIZED SIGNATURE: _____

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 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, expenditure, 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: Safe Harbor Academy Date:4-30-26

Person/Club/Organization: SHA Kroger Community Rewards

Fund-Raiser Requested: SHA Kroger Community Rewards

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

Product to be Sold: Kroger gives a percentage back of purchases.

Number of Students Participating: None

Expected Beginning Date: 7-1-2026 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: 6-30-2027

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ <u>500</u>	\$ _____
2. Expenses/Cost of Goods Sold:	\$ _____	\$ _____
3. Total Profit:	\$ 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.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
Student Rewards, School Supplies, Incentives	\$ <u>500</u>	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

6. Sponsor's Signature: Logan Culbertson Date: 4-30-26

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: Logan Culbertson Date 4-30-26

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: Joni Jones Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

Review/Revised:6/27/2016

WOODFORD COUNTY PUBLIC SCHOOLS



SHA

PROJECT NUMBER: 7800		GENERAL ACTIVITY ACCOUNT-DAF					
STATE CODE:		THROUGH MAR 2026					
CFDA NUMBER:		THROUGH MAR 2026					
GRANT AMOUNT:		THROUGH MAR 2026					
DESCRIPTION	ENCUMBRANCE	REVISED BUDGET	QUARTER TO DATE	EXPENDITURES YEAR TO DATE	EXPENDITURES PROJECT TO DATE	AVAILABLE BUDGET	
7800 GENERAL ACTIVITY ACCOUNT-DAF							
0616	FOOD NON INSTR NON FOOD SVC	.00	500.00	153.05	157.96	157.96	342.04
0675	ORGANIZTN SUPPLIES (ACTIVITY)	.00	767.23	317.29	317.29	317.29	449.94
0999	BEG BALANCE CARRY FORWARD	.00	-167.23	.00	-282.51	-282.51	115.28
1510	INTEREST ON INVESTMENTS	.00	.00	-1.53	-9.52	-9.52	9.52
1790	OTHER STUDENT ACTIVITY INCOME	.00	-100.00	.00	-84.65	-84.65	-15.35
1920	CONTRIBUTIONS/DONATIONS	.00	-1,000.00	-50.23	-50.23	-50.23	-949.77
TOTAL GENERAL ACTIVITY ACCOUNT-DAF		.00	.00	418.58	48.34	48.34	-48.34
TOTAL REVENUES		.00	-1,267.23	-51.76	-426.91	-426.91	-840.32
TOTAL EXPENSES		.00	1,267.23	470.34	475.25	475.25	791.98
GRAND TOTALS		.00	.00	418.58	48.34	48.34	-48.34

AUTHORIZED SIGNATURE: _____

DATE: _____

SHA

REPORT OPTIONS

Sequence	Field #	Total	Page Break
Sequence 1	12	Y	N
Sequence 2	11	Y	N
Sequence 3	00	N	N
Sequence 4	00	N	N

Report title:
SHA

Print totals only: Y
Include Encumbrances: Y
Multiyear view: Life-to-date
Suppress zero balance accts: Y

File output: N
Year/Period: 2026/09
Print revenue as credit: Y
(F)ull or (S)hort desc: F
Print full GL account: N
Double space: N
Summ objs to position: 4
Roll to major project? N
Print amounts on separate line: N
Print journal detail: N
Year/period: 2026/07
to
Year/period: 2026/09
sort by JE # or PO #: P
Detail format option: 1

** END OF REPORT - Generated by Anita Mize **

Request Form for School Fund-Raisers

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School: Safe Harbor Academy Date:4-30-26

Person/Club/Organization: SHA Student Supply Drive 26-27

Fund-Raiser Requested: School Supplies: Notebooks, Pens, Pencils, Tissues, Clorox Wipes

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

Product to be Sold: Supplies donated

Number of Students Participating: None

Expected Beginning Date: 7-1-2026 (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: 09-01-2026

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ <u>500</u>	\$ _____
2. Expenses/Cost of Goods Sold:	\$ _____	\$ _____
3. Total Profit:	\$ 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.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
Student Rewards, School Supplies, Incentives	\$ <u>500</u>	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

6. Sponsor's Signature: Logan Culbertson Date: 4-30-26

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: Logan Culbertson Date 4-30-26

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: Yon Jones Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

Review/Revised:6/27/2016

WOODFORD COUNTY PUBLIC SCHOOLS



SHA

PROJECT NUMBER: 7800		GENERAL ACTIVITY ACCOUNT-DAF					
STATE CODE:		THROUGH MAR 2026					
CFDA NUMBER:		THROUGH MAR 2026					
GRANT AMOUNT:		THROUGH MAR 2026					
DESCRIPTION	ENCUMBRANCE	REVISED BUDGET	* * * * * QUARTER TO DATE	* * * * * YEAR TO DATE	* * * * * PROJECT TO DATE	* * * * * AVAILABLE BUDGET	
7800 GENERAL ACTIVITY ACCOUNT-DAF							
0616	FOOD NON INSTR NON FOOD SVC	.00	500.00	153.05	157.96	157.96	342.04
0675	ORGANIZTN SUPPLIES (ACTIVITY)	.00	767.23	317.29	317.29	317.29	449.94
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1510	INTEREST ON INVESTMENTS	.00	.00	-1.53	-9.52	-9.52	9.52
1790	OTHER STUDENT ACTIVITY INCOME	.00	-100.00	.00	-84.65	-84.65	-15.35
1920	CONTRIBUTIONS/DONATIONS	.00	-1,000.00	-50.23	-50.23	-50.23	-949.77
TOTAL GENERAL ACTIVITY ACCOUNT-DAF		.00	.00	418.58	48.34	48.34	-48.34
TOTAL REVENUES		.00	-1,267.23	-51.76	-426.91	-426.91	-840.32
TOTAL EXPENSES		.00	1,267.23	470.34	475.25	475.25	791.98
GRAND TOTALS		.00	.00	418.58	48.34	48.34	-48.34

AUTHORIZED SIGNATURE: _____

DATE: _____

SHA

REPORT OPTIONS

Sequence	Field #	Total	Page Break
Sequence 1	12	Y	N
Sequence 2	11	Y	N
Sequence 3	00	N	N
Sequence 4	00	N	N

Report title:
SHA

Print totals only: Y
Include Encumbrances: Y
Multiyear view: Life-to-date
Suppress zero balance accts: Y

File output: N
Year/Period: 2026/09
Print revenue as credit: Y
(F)ull or (S)hort desc: F
Print full GL account: N
Double space: N
Summ objs to position: 4
Roll to major project? N
Print amounts on separate line: N
Print journal detail: N
Year/period: 2026/07
to
Year/period: 2026/09
Sort by JE # or PO #: P
Detail format option: 1

** END OF REPORT - Generated by Anita Mize **

Request Form for School Fund-Raisers

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School: **Southside Elementary**

Date: 4/30/26

Person/Club/Organization: **PTO**

Fund-Raiser Requested: **Teacher Appreciation**

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

Product to be Sold: **Donations (Food, supplies, decorations, monetary donations) for Potlucks, teacher treats/supplies, other such events**

Number of Students Participating: PreK-5 (Whole school)

Expected Beginning Date: **Aug. 13, 2026** (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: **May 28, 2027**

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	_____ \$4000.00	_____
2. Expenses/Cost of Goods Sold:	_____ \$4000.00	_____
3. Total Profit:	_____ \$0 _____	_____
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

All items and donations will be used for teacher appreciation potlucks (in-kind) or treats.

6. Sponsor's Signature: Amy Nickerson Date: 4/30/26

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 _____

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: Yon Jones Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

Southside Elementary PTO		
2026-2027 Budget		
	Fall Fundraising Drive	\$ 20,000.00
	Spirit Wear Fundraiser	\$ 2,000.00
	Other	\$ 4,500.00
	Total Receipts	\$ 26,500.00
	School Orientation	\$ 1,500.00
	5K Color Run	\$ 500.00
	Rodeo Roundup Event	\$ 2,500.00
	Career Day	\$ 1,000.00
	Arts Day	\$ 1,000.00
	State Testing Event	\$ 500.00
	Field Day	\$ 1,000.00
	End of School Activities	\$ 1,500.00
	Project Based Learning Support	\$ 2,000.00
	Academic Enrichment	\$ 6,000.00
	Other School Support	\$ 6,000.00
	Teacher Support	\$ 2,000.00
	Fundraising Expenses	\$ 500.00
	Insurance / Other Operating Expenses	\$ 500.00
	Total Expenses	\$ 26,500.00
	Net	\$ -

Categories may change at any time to better support our school, staff, and students.

Request Form for School Fund-Raisers

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School: **Southside Elementary**

Date: 4/30/26

Person/Club/Organization: **PTO**

Fund-Raiser Requested: **Round-Up Rodeo**

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

Product to be Sold: **Pledges**

Number of Students Participating: **Approximately 600 (Whole school)**

Expected Beginning Date: **Aug. 13, 2026** (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: **Oct. 23, 2026**

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	<u>\$20,000.00</u>	_____
2. Expenses/Cost of Goods Sold:	<u>\$2,000.00</u>	_____
3. Total Profit:	<u>\$18,000.00</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>
Student incentives, career day, arts day, house rallies, academic enrichment, PBL support, playground accessories, teacher appreciation, Veterans Day Assembly	<u>\$18,000.00</u>	_____

6. Sponsor's Signature: Amy Nickerson Date: 4/30/26

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 _____

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: Yon Jones Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

Southside Elementary PTO**2026-2027 Budget**

	Fall Fundraising Drive	\$ 20,000.00
	Spirit Wear Fundraiser	\$ 2,000.00
	Other	\$ 4,500.00
	Total Receipts	\$ 26,500.00
	School Orientation	\$ 1,500.00
	5K Color Run	\$ 500.00
	Rodeo Roundup Event	\$ 2,500.00
	Career Day	\$ 1,000.00
	Arts Day	\$ 1,000.00
	State Testing Event	\$ 500.00
	Field Day	\$ 1,000.00
	End of School Activities	\$ 1,500.00
	Project Based Learning Support	\$ 2,000.00
	Academic Enrichment	\$ 6,000.00
	Other School Support	\$ 6,000.00
	Teacher Support	\$ 2,000.00
	Fundraising Expenses	\$ 500.00
	Insurance / Other Operating Expenses	\$ 500.00
	Total Expenses	\$ 26,500.00
	Net	\$ -

Categories may change at any time to better support our school, staff, and students.

Request Form for School Fund-Raisers

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School: **Southside Elementary**

Date: 4/30/26

Person/Club/Organization: **PTO**

Fund-Raiser Requested: **Southside Spirit Wear**

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

Product to be Sold: **Shirts and spirit wear**

Number of Students Participating: **Approximately 600 (Whole school)**

Expected Beginning Date: **Aug. 13, 2026** (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: **May 28, 2027**

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	_____ \$2500.00	_____
2. Expenses/Cost of Goods Sold:	_____ \$2000.00	_____
3. Total Profit:	_____ \$500.00	_____

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>
Student incentives, teacher appreciation, school enhancements	_____ \$500.00	_____

6. Sponsor's Signature: Amy Nickerson Date: 4/30/26

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 _____

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: Joni Jones Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

Southside Elementary PTO		
2026-2027 Budget		
	Fall Fundraising Drive	\$ 20,000.00
	Spirit Wear Fundraiser	\$ 2,000.00
	Other	\$ 4,500.00
	Total Receipts	\$ 26,500.00
	School Orientation	\$ 1,500.00
	5K Color Run	\$ 500.00
	Rodeo Roundup Event	\$ 2,500.00
	Career Day	\$ 1,000.00
	Arts Day	\$ 1,000.00
	State Testing Event	\$ 500.00
	Field Day	\$ 1,000.00
	End of School Activities	\$ 1,500.00
	Project Based Learning Support	\$ 2,000.00
	Academic Enrichment	\$ 6,000.00
	Other School Support	\$ 6,000.00
	Teacher Support	\$ 2,000.00
	Fundraising Expenses	\$ 500.00
	Insurance / Other Operating Expenses	\$ 500.00
	Total Expenses	\$ 26,500.00
	Net	\$ -

Categories may change at any time to better support our school, staff, and students.

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 Public School Central Office**

Date: 9/12/25

Person/Club/Organization: **Erica Snow/WCMS TSA**

Fund-Raiser Requested: T-shirt Sponsorships

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

Product to be Sold: **No**

Number of Students Participating: **10**

Expected Beginning Date: **5/20/26** (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: **6/15/26**

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ <u>1500</u>	\$ _____
2. Expenses/Cost of Goods Sold:	\$ <u>0</u>	\$ _____
3. Total Profit:	\$ <u>1500</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.

This funding is meant to support the Middle School and High School TSA Nationals Trip. In order to minimize cost, the groups are traveling together and the HS TSA is managing the funding so funds raised will go into the HS TSA Account.

<u>ITEMS TO BE PURCHASED FROM PROFIT</u>	<u>PROJECTED</u>	<u>ACTUAL</u>
<u>All items will be donated.</u>	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

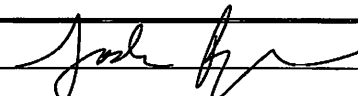
6. Sponsor's Signature: _____  _____ Date: 5/4/26

7. As Principal, I recommend do not recommend this project.

Form is typed Budget report is attached

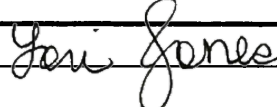
Dates are not prior to Board Meeting.

Principal's rationale for not recommending this request:

Principal's Signature: _____  _____ Date _____

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: _____  _____ Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

Review/Revised:6/27/2016

WOODFORD COUNTY PUBLIC SCHOOLS



WCMS TSA

PROJECT NUMBER: 7282S		TSA-SAF THROUGH MAR 2026					
STATE CODE:		THROUGH MAR 2026					
CFDA NUMBER:		THROUGH MAR 2026					
GRANT AMOUNT:		THROUGH MAR 2026					
DESCRIPTION	ENCUMBRANCE	REVISED BUDGET	* * * * * QUARTER TO DATE	* * * * * YEAR TO DATE	* * * * * EXPENDITURES PROJECT TO DATE	* * * * * AVAILABLE BUDGET	
7282S TSA-SAF							
0616	FOOD NON INSTR NON FOOD SVC	.00	100.00	.00	.00	.00	100.00
0671	ITEMS FOR RESALE	.00	200.00	.00	.00	.00	200.00
0673	STUDENT REGISTRATIONS	.00	140.00	.00	.00	.00	140.00
0675	ORGANIZTN SUPPLIES (ACTIVITY)	.00	200.00	.00	.00	.00	200.00
0999	BEG BALANCE CARRY FORWARD	.00	-140.00	.00	-140.00	-140.00	.00
1790	OTHER STUDENT ACTIVITY INCOME	.00	-500.00	.00	.00	.00	-500.00
5210	FUND TRANSFER	.00	.00	.00	140.00	140.00	-140.00
TOTAL TSA-SAF		.00	.00	.00	.00	.00	.00
TOTAL REVENUES		.00	-640.00	.00	.00	.00	-640.00
TOTAL EXPENSES		.00	640.00	.00	.00	.00	640.00
GRAND TOTALS		.00	.00	.00	.00	.00	.00

AUTHORIZED SIGNATURE: _____

DATE: _____

WCMS TSA

REPORT OPTIONS

	Field #	Total	Page Break
Sequence 1	12	Y	N
Sequence 2	11	Y	N
Sequence 3	00	N	N
Sequence 4	00	N	N

Report title:
WCMS TSA

Print totals only: Y
Include Encumbrances: Y
Multiyear view: Life-to-date
Suppress zero balance accts: Y

File output: N
Year/Period: 2026/09
Print revenue as credit: Y
(F)ull or (S)hort desc: F
Print full GL account: N
Double space: N
Summ objs to position: 4
Roll to major project? N
Print amounts on separate line: N
Print journal detail: N
Year/period: 2026/07
to
Year/period: 2026/09
Sort by JE # or PO #: P
Detail format option: 1

** END OF REPORT - Generated by Anita Mize **

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: **Sponsorship from Local Businesses** Date: 4/27/26
Person/Club/Organization: **Josh Rayburn, Erica Snow on behalf of Elementary Schools**
Fund-Raiser Requested: **Improving Central Office**

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

Product to be Sold: **No**

Number of Students Participating: **0**

Expected Beginning Date: **6/1/2026** (Beginning date cannot be prior to the Board Meeting.)

Expected Ending Date: **ongoing**

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	\$ _____	\$ _____
2. Expenses/Cost of Goods Sold:	\$ _____	\$ _____
3. Total Profit:	\$ <u>3000</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>
Filament and Consumables for 3D printing Carts at Elementary Schools	\$3000	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

6. Sponsor's Signature: _____ Date: _____

7. As Principal, I recommend do not recommend this project.

- Form is typed Budget report is attached
- Dates are not prior to the Board Meeting.

Principal's rationale for not recommending this request:

Principal's Signature: *Josh Rayburn* Date _____

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: *Yon Jones* Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

WOODFORD COUNTY PUBLIC SCHOOLS



MTD

PROJECT NUMBER: 9170 DISTRICT TECHNOLOGY
 STATE CODE: THROUGH MAR 2026
 CFDA NUMBER: DIRECTOR OF TECHNOLOGY
 GRANT AMOUNT: THROUGH MAR 2026

DESCRIPTION	ENCUMBRANCE	REVISED BUDGET	QUARTER TO DATE	YEAR TO DATE	PROJECT TO DATE	AVAILABLE BUDGET
9170 DISTRICT TECHNOLOGY						
0131 CLASSIFIED ADDITIONAL COMPENST	.00	3,313.49	.00	.00	.00	3,313.49
0150 CLASSIFIED SUBSTITUTE SALARY	.00	1,000.00	.00	.00	.00	1,000.00
0221 EMPLOYER FICA CONTRIBUTION	.00	428.55	.00	.00	.00	428.55
0222 EMPLOYER MEDICARE CONTRIBUTION	.00	111.55	.00	.00	.00	111.55
0253 KSBA UNEMPLOYMENT INSURANCE	.00	33.14	.00	.00	.00	33.14
0260 WORKMENS COMPENSATION	.00	16.56	.00	.00	.00	16.56
0338 REGISTRATION FEES	.00	17,500.00	470.00	1,466.00	1,466.00	16,034.00
0352 OTHER TECHNICAL SERVICES	.00	5,000.00	.00	.00	.00	5,000.00
0432 TECH-RELATED REPS & MAINT	3,075.00	5,000.00	-2,055.05	780.00	780.00	1,145.00
0433 EQUIPMENT REPAIR & MAINT	.00	1,000.00	.00	75.00	75.00	925.00
0434 BUILDING REPAIRS & MAINT	500.00	2,000.00	.00	.00	.00	1,500.00
0444 COPIER RENTAL	1,574.00	1,500.00	468.02	1,421.50	1,421.50	-1,495.50
0532 TELEPHONE	.00	1,000.00	.00	.00	.00	1,000.00
0533 ON-LINE NETWORK SERVICES	12,851.20	25,610.80	2,973.36	5,487.56	5,487.56	7,272.04
0534 CELL PHONE SERVICES	1,153.74	1,000.00	320.53	1,009.44	1,009.44	-1,163.18
0580 TRAVEL	9,725.79	13,100.00	1,709.59	6,269.58	6,269.58	-2,895.37
0610 GENERAL SUPPLIES	.00	6,000.00	.00	1,610.74	1,610.74	4,389.26
0616 FOOD NON INSTR NON FOOD SVC	4,478.20	1,500.00	.00	419.18	419.18	-3,397.38
0643 SUPPLEMENTARY BKS/STUDY GUIDES	.00	.00	.00	4,178.12	4,178.12	-4,178.12
0650 SUPPLIES-TECHNOLOGY RELATED	1,002.48	88,621.18	344.18	43,233.61	43,233.61	44,385.09
0651 SUPPLIES-TECH DEVICES	.00	52,000.00	89.44	4,319.41	4,319.41	47,680.59
0653 SOFTWARE-TECHNOLOGY RELATED	34,106.14	99,000.00	-3,265.44	207,902.46	207,902.46	-143,008.60
0673 STUDENT REGISTRATIONS	.00	.00	420.00	420.00	420.00	-420.00
0697 OTHER SUPPLIES & MATERIALS	1,768.43	26,000.00	152.00	2,151.52	2,151.52	22,080.05
0734 TECH-RELATED HARDWARE	.00	10,000.00	.00	.00	.00	10,000.00
0810 DUES & FEES	.00	1,000.00	300.00	300.00	300.00	700.00
0894 INSTRUCTIONAL FIELD TRIPS	252.30	.00	.00	20.00	20.00	-272.30
TOTAL DISTRICT TECHNOLOGY	70,487.28	361,735.27	1,926.63	281,064.12	281,064.12	10,183.87
TOTAL EXPENSES	70,487.28	361,735.27	1,926.63	281,064.12	281,064.12	10,183.87
GRAND TOTALS	70,487.28	361,735.27	1,926.63	281,064.12	281,064.12	10,183.87

AUTHORIZED SIGNATURE: _____

DATE: _____

MTD

REPORT OPTIONS

	Field #	Total	Page Break
Sequence 1	12	Y	N
Sequence 2	11	Y	N
Sequence 3	00	N	N
Sequence 4	00	N	N

Report title:
MTD

Print totals only: Y
Include Encumbrances: Y
Multiyear view: Life-to-date
Suppress zero balance accts: Y

File output: N
Year/Period: 2026/09
Print revenue as credit: Y
(F)ull or (S)hort desc: F
Print full GL account: N
Double space: N
Summ objs to position: 4
Roll to major project? N
Print amounts on separate line: N
Print journal detail: N
Year/period: 2026/07
to
Year/period: 2026/09
Sort by JE # or PO #: P
Detail format option: 1

** END OF REPORT - Generated by Anita Mize **

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 Co High School Date: 5/6/2026

Person/Club/Organization: WCHS Boys Lacrosse

Fund-Raiser Requested: Calendar Fundraiser

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

Product to be Sold: No

Number of Students Participating: 37

Expected Beginning Date: 5/19/2026

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

Expected Ending Date: 5/19/2026

	<u>PROJECTED</u>	<u>ACTUAL</u>
1. Gross Sales:	<u>\$5,000.00</u>	\$ _____
2. Expenses/Cost of Goods Sold:	<u>\$0.00</u>	\$ _____
3. Total Profit:	<u>\$5000.00</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>
<u>Equipment, Awards, Banquet,</u>	<u>\$5000.00</u>	\$ _____
<u>Officials</u>	\$ _____	\$ _____
	\$ _____	\$ _____

6. Sponsor's Signature: Ted Wilson Date: 5/6/2026

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 5-7-26

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

Superintendent's rationale for not recommending this request:

Superintendent's Signature: Geri Jones Date 5/13/26

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

Date sent: _____ Signature of Superintendent: _____

WOODFORD COUNTY PUBLIC SCHOOLS



MTD

PROJECT NUMBER: 74945		LACROSSE BOYS-SAF				
STATE CODE:		THROUGH EOY 2026				
CFDA NUMBER:		THROUGH EOY 2026				
GRANT AMOUNT:		THROUGH EOY 2026				
DESCRIPTION	ENCUMBRANCE	REVISED BUDGET	YEAR TO DATE	EXPENDITURES PROJECT TO DATE	AVAILABLE BUDGET	
74945 LACROSSE BOYS-SAF						
084250 WCHS SCH ACT REVENUE						
0999	BEG BALANCE CARRY FORWARD	.00	-20,782.34	-28,793.72	-28,793.72	8,011.38
1710	ADMISSIONS/GATE RECTS	.00	-6,475.00	-1,955.00	-1,955.00	-4,520.00
1740	STUDENT FEES	.00	.00	-7,000.00	-7,000.00	7,000.00
1790	OTHER STUDENT ACTIVITY INCOME	.00	-5,000.00	-3.91	-3.91	-4,996.09
1920	CONTRIBUTIONS/DONATIONS	.00	-1,000.00	.00	.00	-1,000.00
TOTAL WCHS SCH ACT REVENUE		.00	-33,257.34	-37,752.63	-37,752.63	4,495.29
0842525 SAF SPONSORED ATHLETICS						
0140	CLASSIFIED OVERTIME SALARY	.00	.00	21.00	21.00	-21.00
0221	EMPLOYER FICA CONTRIBUTION	.00	.00	1.29	1.29	-1.29
0222	EMPLOYER MEDICARE CONTRIBUTION	.00	.00	.30	.30	-.30
0260	WORKMENS COMPENSATION	.00	.00	.03	.03	-.03
0616	FOOD NON INSTR NON FOOD SVC	.00	1,000.00	.00	.00	1,000.00
0650	SUPPLIES-TECHNOLOGY RELATED	.00	.00	.00	.00	.00
0672	PERSONAL SVC (ACTIVITY FND)	.00	2,610.00	3,000.00	3,000.00	-390.00
0673	STUDENT REGISTRATIONS	.00	.00	.00	.00	.00
0674	AWARDS	750.00	550.00	.00	.00	-200.00
0675	ORGANIZTN SUPPLIES (ACTIVITY)	.00	17,724.59	6,048.30	6,048.30	11,676.29
0694	EQUIPMENT SUPPLIES	339.98	.00	.00	.00	-339.98
0810	DUES & FEES	.00	.00	750.00	750.00	-750.00
0893	UNIFORMS	.00	8,372.75	3,361.80	3,361.80	5,010.95
0895	OTHER STUDENT TRAVEL	.00	3,000.00	2,085.25	2,085.25	914.75
TOTAL SAF SPONSORED ATHLETICS		1,089.98	33,257.34	15,267.97	15,267.97	16,899.39
TOTAL LACROSSE BOYS-SAF		1,089.98	.00	-22,484.66	-22,484.66	21,394.68
TOTAL REVENUES		.00	-33,257.34	-37,752.63	-37,752.63	4,495.29
TOTAL EXPENSES		1,089.98	33,257.34	15,267.97	15,267.97	16,899.39
GRAND TOTALS		1,089.98	.00	-22,484.66	-22,484.66	21,394.68

AUTHORIZED SIGNATURE: _____

DATE: _____