

EXHIBIT B-1

Student Organization Fund Approval for Expenditure in Excess of \$1,000.00

SCHOOL: Kawameeh

Date: 3/17/25

DEPARTMENT: Musical

Account: # 41

VENDOR: Circuit Lighting

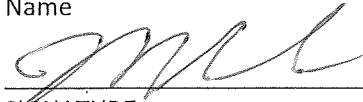
Amount: \$ 5600

PURPOSE OF EXPENDITURE [attach appropriate invoice(s)]: Lighting services  
for KMS musical, matilda jr.

In accordance with the Student Organization Fund – Policy and Procedure Manual, I request approval of the referenced expenditure in excess of \$1,000.

Jason Malanda

Name

  
SIGNATURE

\*\*\*\*\*

Per the Student Organization Funds – Policy and Procedural Manual, student bodies, only written approval of either/or the School Business Administrator/Board Secretary, may obligate themselves by contract for the purchase of goods and services greater than \$1,000.

I approve the purchase of goods/services per the attached.

\_\_\_\_\_  
Yolanda Koon  
School Business Administrator/Board Secretary

\_\_\_\_\_  
Date



299 Route 22 East, Suite 12  
 Green Brook, NJ 08812  
 (732) 968 9533  
[www.circuitlighting.com](http://www.circuitlighting.com)

**PROPOSAL - DATE: 3/16/2025**

Client: Kawameeh Middle School  
 490 David Terrace, Union, NJ 07083  
 Contact: Ms. Anna D'Achille  
 Phone, email: adachille@twpunionschools.org  
 Date of rental: 4/15 - 4/28  
 Show: Matilda Jr.  
 Description: Rental X. Sale \_\_\_\_ Service/Repair \_\_\_\_

QTY	EQUIPMENT	PRICE \$
	Complete lighting package	
16-20	LED lighting fixtures, control and rigging	
1	Labor and installation	
1	Programmer lighting operator 4/22, 24, 25, 26	
	Total Price	5,600
	CLIENT TO PROVIDE LIFT FOR INSTALLATION	

**PAYMENT TERMS: COD**

**PURCHASE ORDER REQUIRED: yes**

Proposal good for 90 days. **To place order, return signed proposal with complete billing instructions, and purchase order** to [rtillery@circuitlighting.com](mailto:rtillery@circuitlighting.com) or mail to address above.

*Prices and equipment subject to change depending on time / date of order and availability. Equipment on a first come first serve basis.*

Company / Organization & Name:

Signature:

Date:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

EXHIBIT B-1

Student Organization Fund Approval for Expenditure in Excess of \$1,000.00

SCHOOL: Kawameeh

Date: 3/17/25

DEPARTMENT: Musical

Account: 41

VENDOR: Tina's Productions

Amount: \$ 5200.00

PURPOSE OF EXPENDITURE [attach appropriate invoice(s)]: costume  
rentals for kms musical, matilda jr.

In accordance with the Student Organization Fund – Policy and Procedure Manual, I request approval of the referenced expenditure in excess of \$1,000.

Jason Malanda

Name



SIGNATURE

\*\*\*\*\*

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I approve the purchase of goods/services per the attached.

\_\_\_\_\_  
Yolanda Koon  
School Business Administrator/Board Secretary

\_\_\_\_\_  
Date

Tina's Productions, Inc.  
 603 Kresson Road  
 Unit #7  
 Cherry Hill, NJ 08034  
 Tel.: 856-528-5165  
 Fax: 856-528-5166

<b>Invoice</b>
<b>22250</b>

CUSTOMER ORDER NO.	DATE	PAGE
182	3/13/2025	1

<b>SOLD TO:</b>
Kawameeh Middle School 490 David Terrace Union, NJ 07083

<b>SHIP TO:</b>
Kawameeh Middle School 490 David Terrace Union, NJ 07083

PO NO.	TERMS	SALESPERSON	SHIP VIA	SHIP DATE	FOB
	Upon Receipt			3/13/2025	

ITEM	QUANTITY	UNIT	DESCRIPTION	TX	UNIT PRICE	AMOUNT
			Costume rentals for Matilda			
	52.00		assorted male and female uniforms		\$65.00	\$3,380.00
	16.00		assorted lead costumes		\$75.00	\$1,200.00
	1.00		delivery & pickup		\$550.00	\$550.00

<b>COMMENTS</b>
Federal ID# 22-3647780

<b>SUBTOTAL</b>	\$5,130.00
<b>FREIGHT</b>	\$0.00
<b>TAX</b>	\$0.00
<b>TOTAL AMOUNT</b>	\$5,130.00
<b>AMOUNT RECEIVED</b>	\$0.00
<b>BALANCE DUE</b>	\$5,130.00

EXHIBIT B-1

**Student Organization Fund Approval for Expenditure in Excess of \$1,000.00**

SCHOOL: Kawameeh

Date: 3/13/25

DEPARTMENT: 4th Grade

Account: #35

VENDOR: Turtle Back Zoo

Amount: \$3,000.00 not to exceed

PURPOSE OF EXPENDITURE [attach appropriate invoice(s)]: 4th grade  
field trip to Turtle Back Zoo.

In accordance with the Student Organization Fund – Policy and Procedure Manual, I request approval of the referenced expenditure in excess of \$1,000.

Jason Malanda  
Name

  
SIGNATURE

\*\*\*\*\*

Per the Student Organization Funds – Policy and Procedural Manual, student bodies, only written approval of either/or the School Business Administrator/Board Secretary, may obligate themselves by contract for the purchase of goods and services greater than \$1,000.

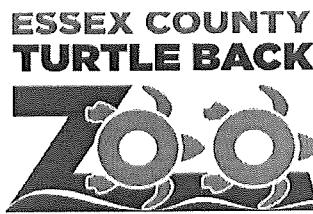
I approve the purchase of goods/services per the attached.

\_\_\_\_\_  
Yolanda Koon  
School Business Administrator/Board Secretary

\_\_\_\_\_  
Date



Joseph N. DiVincenzo, Jr  
Essex County Executive



560 Northfield Avenue  
West Orange, NJ 07052  
Phone: 973-731-5800 x221



Daniel K. Salvante  
Director

**INVOICE**

No: LR-5261

NAME TOWNSHIP UNION-KAWAMEEH

490 DAVID TERR.

INVOICE DATE: September 25, 2024

UNION, NJ 07083

PHONE 908-403-2252

*Revised 3/11/2025 10AM - RAIN DATE: 3/27/25*

THIS TICKETED ITEM IS INTENDED FOR USE ALL TOGETHER ON THE SAME DAY. NOT FOR INDIVIDUAL USE OR RESALE.

TRIP DATE		DESCRIPTION	PRICE	AMOUNT
3/20/2025	228	FIELD TRIP TO TURTLE BACK ZOO CHILDREN	\$10.00	\$2,280.00
	17	ADULTS	\$10.00	\$170.00
	245	SMRC ENHANCEMENT FUND *SEE FORM REGARDING SMRC*	\$2.00	\$490.00
		<i>Less deposit check #2198 recd 11/29/2025</i>		(\$180.00)
		<i>REMINDER: IF PURCHASE ORDER IS NOT RECEIVED</i>		
		<i>PRIOR TO YOUR DUE DATE YOU WILL BE REMOVED</i>		
		<i>FROM OUR SYSTEM.</i>		
		<i>PLEASE NOTE WE DO NOT ACCEPT PAYMENT OVER PHONE</i>		
		PLEASE MAKE PAYMENT TO COUNTY OF ESSEX AND MAIL TO:		
		TURTLE BACK ZOO		
		ATTN: GROUP SALES		
		560 NORTHFIELD AVENUE		
		WEST ORANGE, NJ 07052		
		THANK YOU.....		
		NO REFUNDS -- PASSES ONLY -- NO RESALE OR CASH VALUE -- VOID AFTER EXPIRATION DATE		
<b>PURCHASE ORDER DUE BEFORE:</b>			<b>October 23, 2024</b>	<b>\$2,760.00</b>

EXHIBIT B-1

**Student Organization Fund Approval for Expenditure in Excess of \$1,000.00**

SCHOOL : Kawameeh

Date: 3/10/25

DEPARTMENT: Music

Account: #17

VENDOR: EPN Travel Services

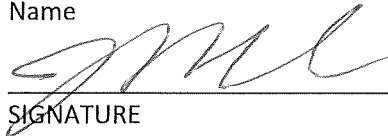
Amount: \$ 9000.00 not to exceed

PURPOSE OF EXPENDITURE [attach appropriate invoice(s)]: Student field trip to Music in the Parks competition.

In accordance with the Student Organization Fund – Policy and Procedure Manual, I request approval of the referenced expenditure in excess of \$1,000.

Jason Malanda

Name

  
SIGNATURE

\*\*\*\*\*

Per the Student Organization Funds – Policy and Procedural Manual, student bodies, only written approval of either/or the School Business Administrator/Board Secretary, may obligate themselves by contract for the purchase of goods and services greater than \$1,000.

I approve the purchase of goods/services per the attached.

\_\_\_\_\_  
Yolanda Koon  
School Business Administrator/Board Secretary

\_\_\_\_\_  
Date



Music in the Parks  
 1784 West Schuylkill Road  
 Douglassville, PA 19518

Jessica Cino  
 Kawameeh Middle School  
 490 David Terrace  
 Union, NJ 07083-7346

**Location:** Dorney Park

**Festival Date:** May 30, 2025

**Ticket Description**

Performer: Festival, One Day Park Admission and Food Stand Voucher  
 Non-Performer: Festival, One Day Park Admission and Food Stand Voucher

Qty	Price	Total
100	\$91.00	\$9100.00
10	\$56.00	\$560.00

**Total Ticket Value:** \$9660.00

**Discounts Applied**

3 Complimentary Director Tickets  
 4 Complimentary Chaperone Tickets

-\$168.00  
 -\$224.00

**Total Discounts:** -\$392.00

**Current Balance:** \$9268.00

**Payment Schedule**

Initial Payment Due: 3/1/2025  
 Balance Payment Due: 4/30/2025

\$300.00  
 \$8968.00

**Total Tickets (Including Free): 110**

<b>Current Amount Due:</b>	<b>\$300.00</b>
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All payments must be made in USD only.

We accept VISA, MasterCard, American Express, & Discover  
<https://www.festivalsedge.com/Reservation/MakePayment/88188>

Make checks payable to: EPN Travel Services, Inc.

**Return to:** Music in the Parks  
 Accounting Department  
 1784 West Schuylkill Road  
 Douglassville, PA 19518  
 Phone: 800-323-0974  
 Fax: 610-327-4786  
 Email: [accounting@festivalsofmusic.com](mailto:accounting@festivalsofmusic.com)




EXHIBIT B-1

**Student Organization Fund Approval for Expenditure in Excess of \$1,000.00**

SCHOOL: Kawameeh Date: 3/6/25  
DEPARTMENT: Art Account: #51  
VENDOR: Villani Bus Company Amount: \$1725.00  
PURPOSE OF EXPENDITURE [attach appropriate invoice(s)]: Art student  
field trip transportation.

In accordance with the Student Organization Fund – Policy and Procedure Manual, I request approval of the referenced expenditure in excess of \$1,000.

Jason Malanda  
Name

  
SIGNATURE

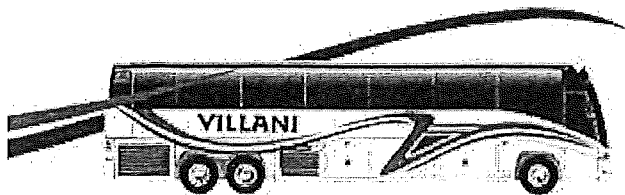
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I approve the purchase of goods/services per the attached.

\_\_\_\_\_  
Yolanda Koon  
School Business Administrator/Board Secretary

\_\_\_\_\_  
Date



**Villani Bus Company**

811 East Linden Avenue  
Linden, NJ 07036

Phone: 908-862-3333  
Fax: 908-474-8058  
Website: www.villanibus.com  
Email: villanibus@gmail.com

**Charter Confirmation**

Confirmed: 02/20/25  
Charter No. : 97236

**Jill Rible**  
**Kawameeh Middle School**  
**490 David Terrace**  
**Union, NJ 07083 USA**

Phone: 908-286-0251  
Fax: 908-687-5741  
Order Date 02/18/25  
SalesRep: Alicia H.

Thank you for selecting Villani Bus Company for your upcoming trip. We are committed to providing you with the very best service possible, and I am sure that you will be pleased with the quality of our equipment and drivers. This Confirmation serves as your contract for your transportation needs shown below. We must receive your deposit along with one signed and dated copy of this letter by the due date of the deposit shown below. Please review the following information to confirm our understanding of the services we will provide.

Group Name: **8th Grade Trip**  
Group Leader: **Jill Rible**  
Destination: **Hamilton Township, New Jersey**  
Leave Date: **Wednesday, April 2, 2025**  
Spot Time: **9:00 am**  
Leave Time: **9:15 am**  
Pickup Location: **Kawameeh Middle School  
490 David Terrace  
Union NJ**

# Coaches: **1**  
Equipment: **1-55 Motorcoach**  
Return Date: **Wednesday, April 2, 2025**  
Retn\Drop Time: **2:00 pm**  
Destination Details: **Grounds For Sculpture  
80 Sculptors Way  
Hamilton Township, New Jersey**

Description	# Coaches	Qty	Rate	Charge
Single Day Motorcoach Trip - Local Service	1	1.00	\$1,650.00	\$1,650.00
Operators Gratuity separate from rental rate quote	1	1.00	\$75.00	\$75.00
Group pays bus parking fees at all tour points.	1	1.00	\$0.00	\$0.00
UNSIGNED CONFIRMATION WILL VOID RESERVATION	1	1.00	\$0.00	\$0.00

Due Dates	Description	Amount	Date Received	Transport Charge:	\$1,725.00
03/04/25	Deposit	\$500.00		Amount Paid	\$0.00
03/19/25	Final Payment	\$1,225.00		Balance Due	\$1,725.00

**CANCELLATION POLICY:** A full refund when cancelled 30 days before Leave Date, less than 30 days to 48 hours \$500 fee per bus will be charged. Cancellation less than 48 hours before the Leave Date/Time will be full price.

If you have not already done so, please remember to send us an itinerary complete with addresses to insure the success of your trip. Please call me if you have any questions.

\_\_\_\_\_  
Charter Party Authorized Signature                      Date

Sincerely,  
Alicia H.

EXHIBIT B-1

Student Organization Fund Approval for Expenditure in Excess of \$1,000.00

SCHOOL: Kawameeh

Date: 3/10/25

DEPARTMENT: Admin

Account: #35

VENDOR: Union Twp Board of Ed.


Amount: \$ 1240.00

PURPOSE OF EXPENDITURE [attach appropriate invoice(s)]: Reimburse  
kms Transportation account for  
student field trip to Turtle Back Zoo.

In accordance with the Student Organization Fund – Policy and Procedure Manual, I request approval of the referenced expenditure in excess of \$1,000.

Jason Malanda

Name



SIGNATURE

\*\*\*\*\*

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\_\_\_\_\_  
Yolanda Koon  
School Business Administrator/Board Secretary

\_\_\_\_\_  
Date

**Township of Union Board of Education**

**FIELD TRIP APPROVAL REQUEST**

Pursuant to N.J.A.C. 6A:23A-5:8 Field Trips must be pre-approved by the Board and not solely for entertainment purposes.

**ALL REQUESTS MUST BE RECEIVED IN THE TRANSPORTATION OFFICE NO LATER THAN 12 NOON ON THE TRANSPORTATION AGENDA DEADLINE DATE**

Application Date: 10/23/24  
 School Kawameeh Middle School Grade 6  
 Teacher(s) Name Cathy Jakositz  
 Date of Trip 3/20/25 (Rain Date - 3/27/25)  
 Destination Turtle Back Zoo  
 Address 5600 Northfield Ave West Orange, NJ 07052  
 Purpose of Trip see attached sheet  
 Departure time (No earlier than 9:15am) 9:15am Pick up location Front of KMS  
 Return time (Must be back by 1:40pm) 1:40<sup>pm</sup> (pick up at zoo - 1:10 pm)  
 # of Passengers 259 # of Wheelchairs \_\_\_\_\_ (Bus capacity = 54 Van capacity = 16)  
 Transportation Funding Source (Systems 3000 Budget Acct.#) 11-000-270-512-01-09 extr: 7537

**TOTAL ESTIMATED COST TO BE COMPLETED BY REQUESTOR**

**\*\*Please compute in-house transportation costs as follows: \$55.00 per hour weekdays, \$90.00 per hour after 4pm and on weekends multiplied by the number of vehicles needed. MINIMUM of 2 hours. Additional 1/2 hour will be added on for travel time to and from the school. \*\***

**\*\*\*Failure to complete this form in its ENTIRETY will result in denial\*\*\***

<input checked="" type="checkbox"/> I am requesting <b>IN HOUSE</b> transportation	<input type="checkbox"/> I will be using an <b>OUTSIDE</b> contractor (include confirmation with request)
1. In house bus cost = <u>\$1237.50</u>	1. Contractor bus cost = _____
2. Entrance fee = <u>\$3886.50</u>	2. Entrance fee = _____
3. Total (add 1 & 2) = <u>\$5124.00</u>	3. Total (add 1 & 2) = _____
4. District bus cost = <u>\$0.00</u>	4. District bus cost = _____
5. Student bus cost = <u>\$1237.50</u>	5. Student bus cost = _____
6. District cost fees = <u>\$0.00</u>	6. District cost fees = _____
7. Student cost fees = <u>\$3886.50</u>	7. Student cost fees = _____
Line 3 should EQUAL the TOTAL of lines 4+5+6+7	Line 3 should EQUAL the TOTAL of lines 4+5+6+7

Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Principal Signature [Signature] Date 10/25/24

	Approved	Denied	Reason	Date
School Business Admin.				
Transportation				

11/19/24 approved in Nov

EXHIBIT B-1

**Student Organization Fund Approval for Expenditure in Excess of \$1,000.00**

SCHOOL: Kawameeh

Date: 3/27/25

DEPARTMENT: World Language

Account: # 23

VENDOR: Mambo

Amount: \$ 1300.00 not to exceed

PURPOSE OF EXPENDITURE [attach appropriate invoice(s)]: field trip for  
Spanish students to Mambo  
Cuban restaurant

In accordance with the Student Organization Fund – Policy and Procedure Manual, I request approval of the referenced expenditure in excess of \$1,000.

Jason Malanda  
Name

  
SIGNATURE

\*\*\*\*\*

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I approve the purchase of goods/services per the attached.

\_\_\_\_\_  
Yolanda Koon  
School Business Administrator/Board Secretary

\_\_\_\_\_  
Date

# Mambo

Cuban Restaurant & Lounge

2185 RT 22 WEST  
UNION, NJ 07083

CUSTOMERS NAME

DATE

40	ADULTS	@	25.95	\$	1,038.00
	PREMIUM BAR	@	40	\$	-
	KIDS -10	@	14.95	\$	-
0	EXTRA		20	\$	-
0	TAXES	@	6.625%		
	GRATUITY	@	18%	\$	186.84
0	NAPKINS	@	0	\$	-
0	TABLE COVERS	@	0	\$	-
	<b>TOTAL</b>			\$	<b>1,224.84</b>
	DEPOSIT				
	BALANCE			\$	1,224.84
	CASH			P	
	CREDIT CARD			\$	1,261.59