



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Kohn, Kohn's paras Date: 5/30/25  
Club Name: Not for a club- For the self contained/WBL program at UHS  
Acct. No.: \_\_\_\_\_ Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Donors choose  
Purpose of Fund Raiser: \_\_\_\_\_  
To fundraise for items needed for our programs

Start Date of Project: 9/1/25 Completion Date of Project: August 2026  
Date of Sale(s).....From: \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: online  
Sale will be monitored by: Kohn, Kohn's paras

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_  
Vendor Business Name: \_\_\_\_\_  
Vendor Address: \_\_\_\_\_  
City: State & Zip code: \_\_\_\_\_  
Unit Cost of Product/Service: \$ \_\_\_\_\_  
Proposal Sale Price: \$ \_\_\_\_\_  
Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_  
Minimum Total Profit Expected: \$ \_\_\_\_\_

Faculty Advisor Signature	
Signature: <u>[Signature]</u>	Date: <u>5-30-25</u>
Principal/Vice Principal Signature	
Signature: <u>[Signature]</u>	Date: <u>6-8-23</u>
School Treasurer Signature	
Signature: <u>[Signature]</u>	Date: <u>6/9/25</u>
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): JADA MARKS Date: 6/13/25  
Club Name: PROM  
Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: soda machine  
Purpose of Fund Raiser: to raise money for prom

Start Date of Project: Sept 2025 Completion Date of Project: June 2026  
Date of Sale(s).....From: \_\_\_\_\_ To: \_\_\_\_\_

Sale Area/Location: UHS  
Sale will be monitored by: Marks

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

Faculty Advisor Signature	
Signature: <u>[Signature]</u>	Date: <u>6/13/25</u>
Vice Principal Signature	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
School Treasurer Signature	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
Placed on BOE Meeting Agenda For	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Jada Nyarko Date: 6/13/25  
Club Name: PROM  
Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: staff merch  
Purpose of Fund Raiser: To raise money for prom

Start Date of Project: Sept 2025 Completion Date of Project: June 2026  
Date of Sale(s).....From: Sept 2025 To: June 2026

Sale Area/Location: UHS  
Sale will be monitored by: Myarico

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_



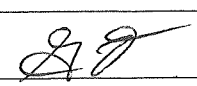
City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

Faculty Advisor Signature	
Signature: 	Date: <u>6/13/25</u>
Vice Principal Signature	
Signature: 	Date: <u>6/17/25</u>
School Treasurer Signature	
Signature: 	Date: <u>6/19/25</u>
Placed on BOE Meeting Agenda For	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Jada Myarko Date: 6/13/25  
Club Name: PROM  
Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Step challenge  
Purpose of Fund Raiser: to raise money for prom

Start Date of Project: Sept 2025 Completion Date of Project: June 2026  
Date of Sale(s).....From: Sept 2025 To: June 2026

Sale Area/Location: UHS  
Sale will be monitored by: Myarko

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

Faculty Advisor Signature	
Signature: <u>[Signature]</u>	Date: <u>6/13/25</u>
Vice Principal Signature	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
School Treasurer Signature	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
Placed on BOE Meeting Agenda For	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): JADA NYARKO Date: 6/13/25  
Club Name: PROM  
Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

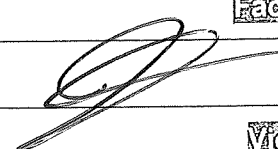
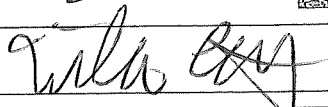

Type of Fund Raiser: snack sale  
Purpose of Fund Raiser: to raise money for prom

Start Date of Project: Sept 2025 Completion Date of Project: June 2026  
Date of Sale(s).....From: Sept 2025 To: June 2026

Sale Area/Location: UHS  
Sale will be monitored by: Nyarko

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_  
Vendor Business Name: \_\_\_\_\_  
Vendor Address: \_\_\_\_\_  
City: State & Zip code: \_\_\_\_\_  
Unit Cost of Product/Service: \$ \_\_\_\_\_  
Proposal Sale Price: \$ \_\_\_\_\_  
Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_  
Minimum Total Profit Expected: \$ \_\_\_\_\_

Faculty Advisor Signature	
Signature: 	Date: <u>6/13/25</u>
Vice Principal Signature	
Signature: 	Date: <u>6/17/25</u>
School Treasurer Signature	
Signature: 	Date: <u>6/17/25</u>
Placed on BOE Meeting Agenda For	
Month: _____ Year: _____ Approved: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/16/2025

Club Name: JUNIOR CLASS

Acct. No.: 2527 Acct. Balance to Date: \$0.00

Type of Fund Raiser: SNACK SALE

Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026

Date of Sale(s): From FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL / C-117 / A-109

Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 06/17/2025

## Vice Principal Signature

Signature: [Signature] Date: 6/17/25

## School Treasure Signature

Signature: [Signature] Date: 6/17/25

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES ☐ NO ☐ By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/16/2025

Club Name: JUNIOR CLASS

Acct. No.: 2527 Acct. Balance to Date: \$ 0.00

Type of Fund Raiser: BAKE SALE

Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026

Date of Sale(s): From FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL

Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 06/17/2025

## Vice Principal Signature

Signature: [Signature] Date: 6/17/25

## School Treasure Signature

Signature: [Signature] Date: 6/17/25

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES ☐ NO ☐ By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/16/2025

Club Name: JUNIOR CLASS

Acct. No.: 2527

Acct. Balance to Date: \$0.00

Type of Fund Raiser: CLASS OF 2027 MERCHANDISE

Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026

Date of Sale(s): From FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL

Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 06/17/2025

## Vice Principal Signature

Signature: [Signature] Date: 6/17/25

## School Treasure Signature

Signature: [Signature] Date: 6/17/25

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES ☐ NO ☐ By: \_\_\_\_\_





# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/16/2025

Club Name: JUNIOR CLASS

Acct. No.: 2527 Acct. Balance to Date: \$0.00

Type of Fund Raiser: JUNIOR CLASS DANCE

Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026

Date of Sale(s): From FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL

Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 06/17/2025

## Vice Principal Signature

Signature: [Signature] Date: 6/17/25

## School Treasure Signature

Signature: [Signature] Date: 6/17/25

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES ☐ NO ☐ By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/16/2025

Club Name: JUNIOR CLASS

Acct. No.: 2527 Acct. Balance to Date: \$0.00

Type of Fund Raiser: CAR WASH

Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026

Date of Sale(s): From FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL

Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 06/17/2025

## Vice Principal Signature

Signature: [Signature] Date: 6/17/25

## School Treasure Signature

Signature: [Signature] Date: 6/17/25

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES ☐ NO ☐ By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/16/2025

Club Name: JUNIOR CLASS

Acct. No.: 2527 Acct. Balance to Date: \$10.00

Type of Fund Raiser: CULTURAL NIGHT

Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026

Date of Sale(s): From FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL

Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 06/17/2025

## Vice Principal Signature

Signature: [Signature] Date: 6/17/25

## School Treasure Signature

Signature: [Signature] Date: 6/17/25

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES ☐ NO ☐ By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/16/2025

Club Name: JUNIOR CLASS

Acct. No.: 2527 Acct. Balance to Date: \$0.00

Type of Fund Raiser: CANDY GRAMS

Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026

Date of Sale(s): From FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL

Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: \_\_\_\_\_ State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature] Date: 06/17/2025

## Vice Principal Signature

Signature: [Signature] Date: 6/17/25

## School Treasure Signature

Signature: [Signature] Date: 6/17/25

## Placed on BOE Meeting Agenda for:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: YES ☐ NO ☐ By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Eric Tripp & Jada Nyarko Date: 06/17/2025  
Club Name: Junior Class  
Acct. No.: 2527 Acct. Balance to Date: \$0.00  
Type of Fund Raiser: DODGEBALL TOURNAMENT  
Purpose of Fund Raiser: Raise money for the Class of 2027  
Start Date of Project: SEPT 2025 Completion Date of Project: June 2026  
Date of Sale(s).....From: First Day of School To: Last Day of School  
Sale Area/Location: Union High School  
Sale will be monitored by: Eric Tripp & Jada Nyarko

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_  
Vendor Business Name: \_\_\_\_\_  
Vendor Address: \_\_\_\_\_  
City: State & Zip code: \_\_\_\_\_  
Unit Cost of Product/Service: \$ \_\_\_\_\_  
Proposal Sale Price: \$ \_\_\_\_\_  
Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_  
Minimum Total Profit Expected: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>06/17/2025</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
<b>School Treasurer Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Eric Tripp & Jada Nyarko

Date: 06/17/2025

Club Name: Junior Class

Acct. No.: 2527 Acct. Balance to Date: \$0.00

Type of Fund Raiser: CARNIVAL + DUNK TANK

Purpose of Fund Raiser: Raise money for the Class of 2027

Start Date of Project: SEPT 2025 Completion Date of Project: June 2026

Date of Sale(s).....From: First Day of School To: Last Day of School

Sale Area/Location: Union High School

Sale will be monitored by: Eric Tripp & Jada Nyarko

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: [Signature]

Date: 06/17/2025

## Principal/Vice Principal Signature

Signature: [Signature]

Date: 6/17/25

## School Treasurer Signature

Signature: [Signature]

Date: 6/17/25

## Placed on BOE Meeting Agenda For:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: ☐ YES ☐ NO

By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Eric Tripp & Jada Nyarko

Date: 06/17/2025

Club Name: Junior Class

Acct. No.: 2527 Acct. Balance to Date: \$0.00

Type of Fund Raiser: VIDEO GAME TOURNAMENT

Purpose of Fund Raiser: Raise money for the Class of 2027

Start Date of Project: SEPT 2025 Completion Date of Project: June 2026

Date of Sale(s).....From: First Day of School To: Last Day of School

Sale Area/Location: Union High School

Sale will be monitored by: Eric Tripp & Jada Nyarko

\*\*\*\*\*ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD\*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

## Faculty Advisor Signature

Signature: \_\_\_\_\_

Date: 06/17/2025

## Principal/Vice Principal Signature

Signature: Altha Bassant

Date: 6/17/25

## School Treasurer Signature

Signature: LCJ

Date: 6/17/25

## Placed on BOE Meeting Agenda For:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: ☐ YES ☐ NO

By: \_\_\_\_\_



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): Eric Tripp & Jada Nyarko

Date: 06/17/2025

Club Name: Junior Class

Acct. No.: 2527

Acct. Balance to Date: \$0.00

Type of Fund Raiser: TAPE - A - TEACHER

Purpose of Fund Raiser: Raise money for the Class of 2027

Start Date of Project: SEPT 2025 Completion Date of Project: June 2026

Date of Sale(s).....From: First Day of School To: Last Day of School

Sale Area/Location: Union High School

Sale will be monitored by: Eric Tripp & Jada Nyarko

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \_\_\_\_\_

\$

Proposal Sale Price: \_\_\_\_\_

\$

Total Cost of all Products Not to Exceed: \_\_\_\_\_

\$

Minimum Total Profit Expected: \_\_\_\_\_

\$

### Faculty Advisor Signature

Signature: \_\_\_\_\_

Date: 06/17/2025

### Principal/Vice Principal Signature

Signature: \_\_\_\_\_

Date: 6/17/25

### School Treasurer Signature

Signature: \_\_\_\_\_

Date: 6/17/25

### Placed on BOE Meeting Agenda For:

Month: \_\_\_\_\_ Year: \_\_\_\_\_ Approved: ☐ YES ☐ NO

By: \_\_\_\_\_





# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/17/2025  
Club Name: JUNIOR CLASS  
Acct. No.: 2527 Acct. Balance to Date: \$ 0.00

Type of Fund Raiser: SCAVENGER HUNT  
Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026  
Date of Sale(s).....From: FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL  
Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>06/17/2025</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
<b>School Treasurer Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/17/2025  
Club Name: JUNIOR CLASS  
Acct. No.: 2527 Acct. Balance to Date: \$0.00

Type of Fund Raiser: DINE TO DONATE  
Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026  
Date of Sale(s).....From: FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL  
Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>06/17/2025</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature] Bessard</u>	Date: <u>6/17/25</u>
<b>School Treasurer Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): ERIC TRIPP + JADA NYARKO Date: 06/17/2025  
Club Name: JUNIOR CLASS  
Acct. No.: 2527 Acct. Balance to Date: \$0.00

Type of Fund Raiser: BADMINTON TOURNAMENT  
Purpose of Fund Raiser: RAISE MONEY FOR CLASS OF 2027

Start Date of Project: SEPT 2025 Completion Date of Project: JUNE 2026  
Date of Sale(s).....From: FIRST DAY OF SCHOOL To: LAST DAY OF SCHOOL

Sale Area/Location: UNION HIGH SCHOOL  
Sale will be monitored by: ERIC TRIPP + JADA NYARKO

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ \_\_\_\_\_

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ \_\_\_\_\_

<b>Faculty Advisor Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>06/17/2025</u>
<b>Principal/Vice Principal Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
<b>School Treasurer Signature</b>	
Signature: <u>[Signature]</u>	Date: <u>6/17/25</u>
<b>Placed on BOE Meeting Agenda For:</b>	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): J. Daly, S. Daly, M. Munders Date: 6/18/2025  
Club Name: Class of 2026  
Acct. No.: 2228 or 2526 Acct. Balance to Date: \_\_\_\_\_

Type of Fund Raiser: Senior Parking Spot Painting/Decorating  
Purpose of Fund Raiser: Raise funds for the class of 2026

Start Date of Project: 9/1/2025 Completion Date of Project: 11/3/2025  
Date of Sale(s).....From: 9/1/2025 To: 11/3/2025

Sale Area/Location: Pay Schools  
Sale will be monitored by: Senior Class Advisors

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_

Vendor Business Name: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

City: State & Zip code: \_\_\_\_\_

Unit Cost of Product/Service: \$ \_\_\_\_\_

Proposal Sale Price: \$ 25 per Parking Space

Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_

Minimum Total Profit Expected: \$ 1,250.00

Faculty Advisor Signature	
Signature: <u>Joe Daly</u>	Date: <u>6/18/2025</u>
Vice Principal Signature	
Signature: <u>Will Cox</u>	Date: <u>6/25/25</u>
School Treasurer Signature	
Signature: <u>[Signature]</u>	Date: <u>6/25/25</u>
Placed on BOE Meeting/Agenda For	
Month: _____ Year: _____ Approved: <input type="checkbox"/> YES <input type="checkbox"/> NO	By: _____



# UNION HIGH SCHOOL STUDENT ACTIVITIES FUNDRAISER PROPOSAL

## Applicant Information

Faculty Member (s): JADA MARIKO Date: 6/16/25  
Club Name: PROM  
Acct. No.: 2012 Acct. Balance to Date: \_\_\_\_\_

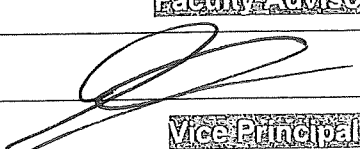

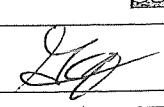
Type of Fund Raiser: Staff dress down month  
Purpose of Fund Raiser: to raise money for prom

Start Date of Project: Sept 2025 Completion Date of Project: June 2026  
Date of Sale(s).....From: Sept 2025 To: June 2026

Sale Area/Location: UHS  
Sale will be monitored by: Lyarico

\*\*\*\*\* ATTACH PUBLICATION FROM VENDOR OF ITEMS TO BE SOLD \*\*\*\*\*

Vendor Representative's Name: \_\_\_\_\_  
Vendor Business Name: \_\_\_\_\_  
Vendor Address: \_\_\_\_\_  
City: State & Zip code: \_\_\_\_\_  
Unit Cost of Product/Service: \$ \_\_\_\_\_  
Proposal Sale Price: \$ \_\_\_\_\_  
Total Cost of all Products Not to Exceed: \$ \_\_\_\_\_  
Minimum Total Profit Expected: \$ \_\_\_\_\_

Faculty/Advisor Signature	
Signature: 	Date: <u>6/16/25</u>
Vice Principal Signature	
Signature: 	Date: <u>6/17/25</u>
School Treasurer Signature	
Signature: 	Date: <u>6/10/25</u>
Placed on BOE Meeting Agenda For:	
Month: _____ Year: _____ Approved: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	By: _____