

PARENT/DISTRICT-SUPPORT ORGANIZATIONS
SUMMARY SHEET
SCHOOL YEAR 2016-2017

All organizations desiring to become a support group must **COMPLETELY AND ACCURATELY** fill out the following form and obtain annual approval of the Board of Education at its September meeting.

District support organizations are defined as any independent non-profit entity, group, or organization formed for the support of School District programs.

1. Name of Organization _____

2. Employer identification number used on bank accounts: __ - _____ Section 501(c)(3) Organization? ___Yes ___No

3. Authorized signor(s) on bank accounts _____
Dual signatures required? ___Yes ___No

4. Goals and objectives of the organization _____

5. List officers and/or leaders of the organization:

<u>Name/Title</u>	<u>Address</u>	<u>Cell No.</u>	<u>Email Address</u>

When is your leadership elected or appointed _____

6. When does your organization meet (please list specific dates, times, locations) _____

7. Finances (attach itemized budget)

Estimated Annual Revenue (16-17) _____ Actual Annual Revenue (15-16) _____

Estimated Annual Expenditures (16-17) _____ Actual Annual Expenditures (15-16) _____

Are your financial records audited on a regular basis _____

When were your records last audited _____

Who performed the audit _____

Please list proposed fundraisers and the approximate time they are to be held (complete *Fundraising Activities Request Form* for approval for each fundraiser)

Example: Magazine Sale – Fall of 2016 _____

8. Please list coaches that you are requesting to be funded by your organization:

<u>Position</u>	<u>Name</u> (if known)	<u>Salary to Coach</u>	<u>Payroll Related</u> <u>Taxes @16 %</u>	<u>Total Amount to be</u> <u>Reimbursed to the Board</u>
(Example:) Asst. Cross Country (CHS)	John Doe	\$500.00	\$80	\$580