

702

STILLWATER BOARD OF EDUCATION CFB-E1 Lincoln

ANNUAL ACTIVITY FUND PLANNING AND APPROVAL PACKAGE

Due April 30 each year or upon request of a new account

Reporting School Year: _____ 26-27 _____ Sponsor Name: __Carla Nelson

Name of Activity Fund: __Courtesy_____ Account No: __802_____

The Stillwater Board of Education believes that activity fund money generated through student fundraising during any year should be used to benefit the students involved in generating those funds. If applicable, please provide an explanation of a fund balance that exceeds \$1000 and 30% of projected revenue:

PACKET CONTENTS:

FORM	FOUND ON PAGE	INITIAL IF COMPLETE
APPROVAL OF ACCOUNT FORM	PAGE 2	
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ACTIVITY FUND FUNDRAISER REQUEST(S) (pg. 4)	PAGE 4	
REPORT ON PRIOR YEAR ACTIVITY FUND SUBACCOUNT BUDGET*	PAGE 2	

**This is the form found on page 2, but should be the plan submitted the prior year updated with last year's actual revenues, expenditures, and ending cash balance.*

RECEIVED APR 30 2026

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND REQUEST FOR ACCOUNT

DATE: 4/2/26 SITE: Lincoln Academy

ACCOUNT NAME: Courtesy

PURPOSE To fund gifts, food (non pd meetings) flowers, or other items approved by the Board

SOURCE(S) OF INCOME Private donations from individuals or companies with no dedicated use indicated

PLANNED EXPENSES Holiday party, food, and decor for staff, staff meals or snacks that are not for PD or meetings, gifts for staff, gifts for students, snacks/utensils/plates for teachers lounge, flowers and food for birth/death/illness/wedding/retirement/baby showers, and any other expenses listed on the AF packet approved by the Board.

SPONSOR NAME SIGNATURE Carla Nelson

Carla Nelson

PRINCIPAL/DIRECTOR SIGNATURE George Horton

George Horton

TO BE COMPLETED BY FINANCE DEPARTMENT

APPROVED BY: *Raulul Bogza* DATE: *5/4/26*

ACCOUNT NUMBER: *802*

BOARD OF EDUCATION APPROVAL DATE: _____

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND SUBACCOUNT BUDGET

Reporting School Year: 26-27 Sponsor Name: Carla Nelson Name of
Activity Fund: Courtsey Account No: 802

NEXT YEAR EST. ACTUALS*

1. ESTIMATED BEGINNING CASH BALANCE, JULY 1 \$ _____ \$ _____

2. SOURCE OF ALL REVENUES AND ESTIMATED AMOUNTS:

Private donations not for for a specific need or items \$ 250.00

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Revenues: \$ _____ \$ _____

3. TOTAL CASH BALANCE PLUS REVENUES (ADD 1 AND 2) \$ _____ \$ _____

4. EXPENDITURES AND ESTIMATED AMOUNTS:

Staff lounge supplies \$ 50.00

Food for staff not PD related \$ 150.00

Celebration for staff \$ 50.00

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Expenditures: \$ _____ \$ _____

5. ENDING CASH BALANCE, JUNE 30 (SUBTRACT 4 FROM 3) \$ _____ \$ _____

STILLWATER BOARD OF EDUCATION CFB-E1

ANNUAL ACTIVITY FUND PLANNING AND APPROVAL PACKAGE

Due April 30 each year or upon request of a new account

Reporting School Year: _____ 26-27 _____ Sponsor Name: __Carla Nelson

Name of Activity Fund: __Staff PD Food_____ Account No: __804_____

The Stillwater Board of Education believes that activity fund money generated through student fundraising during any year should be used to benefit the students involved in generating those funds. If applicable, please provide an explanation of a fund balance that exceeds \$1000 and 30% of projected revenue:

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RECEIVED APR 30 2026

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND REQUEST FOR ACCOUNT

DATE: 4/2/26 SITE: Lincoln Academy

ACCOUNT NAME: Staff PD Food

PURPOSE

SOURCE(S) OF INCOME School picture commissions, soda and vending commissions, PALS Allocation (elementary only), private donations from individuals or companies with no dedicated use indicated

PLANNED EXPENSES Staff food/meals/plates/utensils for staff PD events, training, meetings with principals or coaches, meetings or events hosting other school officials, staff or faculty meetings other expenses listed on the AF packet approved by the Board.

SPONSOR NAME SIGNATURE Carla Nelson



PRINCIPAL/DIRECTOR SIGNATURE George Horton



TO BE COMPLETED BY FINANCE DEPARTMENT

APPROVED BY: Carolee Borna DATE: 5/4/26

ACCOUNT NUMBER: 504

BOARD OF EDUCATION APPROVAL DATE: _____

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND SUBACCOUNT BUDGET

Reporting School Year: 26-27 _____ Sponsor Name: Carla Nelson _____ Name of
Activity Fund: Staff food PD day _____ Account No: 804 _____

NEXT YEAR EST. ACTUALS*

1. ESTIMATED BEGINNING CASH BALANCE, JULY 1 \$ _____ \$ _____

2. SOURCE OF ALL REVENUES AND ESTIMATED AMOUNTS:

Transfer funds from 858 _____ \$ 300.00 _____

private donations _____ \$ 100.00 _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Revenues: \$ _____ \$ _____

3. TOTAL CASH BALANCE PLUS REVENUES (ADD 1 AND 2) \$ _____ \$ _____

4. EXPENDITURES AND ESTIMATED AMOUNTS:

_____ \$ _____

Food for PD or staff training days _____ \$ 300.00 _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Expenditures: \$ _____ \$ _____

5. ENDING CASH BALANCE, JUNE 30 (SUBTRACT 4 FROM 3) \$ _____ \$ _____

STILLWATER BOARD OF EDUCATION CFB-E1

ANNUAL ACTIVITY FUND PLANNING AND APPROVAL PACKAGE

Due April 30 each year or upon request of a new account

Reporting School Year: _____ 26-27 _____ Sponsor Name: __ Carla Nelson

Name of Activity Fund: _Special _____ Account No: __ 807 _____

The Stillwater Board of Education believes that activity fund money generated through student fundraising during any year should be used to benefit the students involved in generating those funds. If applicable, please provide an explanation of a fund balance that exceeds \$1000 and 30% of projected revenue:

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STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND REQUEST FOR ACCOUNT

DATE: 4/2/26 SITE: Lincoln Academy

ACCOUNT NAME: Special

PURPOSE To fund student expenses for clubs, field trips, meals on trips, classroom supplies and/or staff registration, per diem, travel or any other expenses listed on the AF packet approved by the Board.

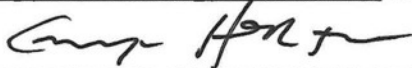
SOURCE(S) OF INCOME Cashbox return money, Soda and vending machine commissions, field trip dues or fees, ID or lanyard fees, Private donations from individuals or companies with no dedicated use indicated

PLANNED EXPENSES After school club expenses, cash box startup money, field trip expenses (bus reimbursement, entry fees, meals for students and accompanying sponsor), office and classroom supplies, decor, furniture, kitchen equipment, staff registration, staff per diem, staff hotels, ID's and Lanyards, rugs and any other expenses listed on the AF packet approved by the Board.

SPONSOR NAME SIGNATURE Carla Nelson



PRINCIPAL/DIRECTOR SIGNATURE George Horton



TO BE COMPLETED BY FINANCE DEPARTMENT

APPROVED BY: Carolee Bazz DATE: 5/4/26

ACCOUNT NUMBER: 807

BOARD OF EDUCATION APPROVAL DATE: _____

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND SUBACCOUNT BUDGET

Reporting School Year: 26-27 Sponsor Name: Carla Nelson

Name of Activity Fund: Special Account No: 807

NEXT YEAR EST. ACTUALS*

1. ESTIMATED BEGINNING CASH BALANCE, JULY 1 \$ _____ \$ _____

2. SOURCE OF ALL REVENUES AND ESTIMATED AMOUNTS:

Coke Commission \$ 125.00

Private donations not earmarked for specific \$ 300.00

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Revenues: \$ _____ \$ _____

3. TOTAL CASH BALANCE PLUS REVENUES (ADD 1 AND 2) \$ _____ \$ _____

4. EXPENDITURES AND ESTIMATED AMOUNTS:

Cash box \$ 100.00

Field Trip expenses, including food for trip \$ 250.00

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Expenditures: \$ _____ \$ _____

5. ENDING CASH BALANCE, JUNE 30 (SUBTRACT 4 FROM 3) \$ _____ \$ _____

STILLWATER BOARD OF EDUCATION CFB-E1

ANNUAL ACTIVITY FUND PLANNING AND APPROVAL PACKAGE

Due April 30 each year or upon request of a new account

Reporting School Year: _____ 26-27 _____ Sponsor Name: __ Carla Nelson

Name of Activity Fund: __ GLML _____ Account No: __ 832 _____

The Stillwater Board of Education believes that activity fund money generated through student fundraising during any year should be used to benefit the students involved in generating those funds. If applicable, please provide an explanation of a fund balance that exceeds \$1000 and 30% of projected revenue:

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STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND REQUEST FOR ACCOUNT

DATE: 4/2/26 SITE: Lincoln Academy

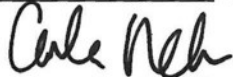
ACCOUNT NAME: GLML

PURPOSE

SOURCE(S) OF INCOME Private donations from individuals or companies with no dedicated use indicated

PLANNED EXPENSES Books, media, fixtures, art, decor, repairs, lighting, technology and any other expenses listed on the AF packet approved by the Board to be used in the Grady Lambert Memorial Library

SPONSOR NAME SIGNATURE Carla Nelson



PRINCIPAL/DIRECTOR SIGNATURE George Horton



TO BE COMPLETED BY FINANCE DEPARTMENT

APPROVED BY:  DATE: 5/4/20

ACCOUNT NUMBER: 832

BOARD OF EDUCATION APPROVAL DATE: _____

STILLWATER BOARD OF EDUCATION CFB-E1

Lincoln

ANNUAL ACTIVITY FUND PLANNING AND APPROVAL PACKAGE

Due April 30 each year or upon request of a new account

Reporting School Year: _____ 26-27 _____ Sponsor Name: __Carla Nelson

Name of Activity Fund: __Grant_____ Account No: __850_____

The Stillwater Board of Education believes that activity fund money generated through student fundraising during any year should be used to benefit the students involved in generating those funds. If applicable, please provide an explanation of a fund balance that exceeds \$1000 and 30% of projected revenue:

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STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND REQUEST FOR ACCOUNT

DATE: 4/2/26 SITE: Lincoln Academy

ACCOUNT NAME: Grant

PURPOSE To use funds obtained from Grants that staff receives

SOURCE(S) OF INCOME Monies awarded from organizations other than SPEF

PLANNED EXPENSES Items approved from Grant specifications and any other expenses listed on the AF packet approved by the Board.

SPONSOR NAME SIGNATURE Carla Nelson



PRINCIPAL/DIRECTOR SIGNATURE George Horton



TO BE COMPLETED BY FINANCE DEPARTMENT

APPROVED BY: Carlyle Borman DATE: 5/5/26

ACCOUNT NUMBER: 850

BOARD OF EDUCATION APPROVAL DATE: _____

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND SUBACCOUNT BUDGET

Reporting School Year: 26-27 _____ Sponsor Name: Carla Nelson _____
Name of Activity Fund: Grant _____ Account No: 850 _____

NEXT YEAR EST. ACTUALS*

1. ESTIMATED BEGINNING CASH BALANCE, JULY 1	\$ _____	\$ _____
2. SOURCE OF ALL REVENUES AND ESTIMATED AMOUNTS:		
_____ NA _____	\$ _____	
_____	\$ _____	
Total Revenues:	\$ _____	\$ _____
3. TOTAL CASH BALANCE PLUS REVENUES (ADD 1 AND 2)	\$ _____	\$ _____
4. EXPENDITURES AND ESTIMATED AMOUNTS:		
_____	\$ _____	
Guitar Club Grant supplies _____	\$ 496.25	
Capital Tour Grant _____	\$ 47.73	
TSET Bike Grant supplies _____	\$ 125.9	
_____	\$ _____	
_____	\$ _____	
_____	\$ _____	
Total Expenditures:	\$ _____	\$ _____
5. ENDING CASH BALANCE, JUNE 30 (SUBTRACT 4 FROM 3)	\$ _____	\$ _____

STILLWATER BOARD OF EDUCATION CFB-E1

AF 850 / GRANTS

3 messages

Boggs, Rachel <rboggs@stillwaterschools.com>

Tue, May 5, 2026 at 7:45 AM

To: Carla Nelson <cnelson@stillwaterschools.com>, George Horton <ghorton@stillwaterschools.com>

Good afternoon,

I received Activity Fund packet 850 for GRANTS and, upon review, noticed that no planned revenue or amounts are listed. I would like to confirm that this is intentional before submitting it to the Board.

If submitted as is, the account would be active, but may prompt questions from our Board members if they are curious about the revenue. Please let me know if you would like me to proceed with submission in its current form, or if you prefer to provide an updated revenue/expense page with detailed breakdowns.

Thank you.

This email is not monitored after 5pm, weekends, or holidays.



RACHEL BOGGS
ACTIVITY FUNDS CLERK
314 S LEWIS ST
STILLWATER, OK. 74074
405-533-6300
stillwaterschools.com

Nelson, Carla <cnelson@stillwaterschools.com>
To: "Boggs, Rachel" <rboggs@stillwaterschools.com>
Cc: George Horton <ghorton@stillwaterschools.com>

Tue, May 5, 2026 at 7:52 AM

We do not plan on putting any more funds into that account so please proceed with the packet being submitted to the board.

Carla

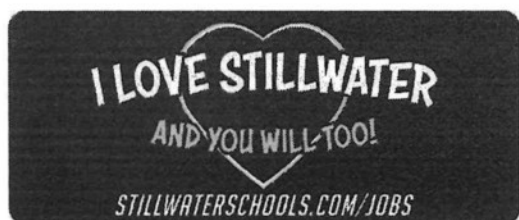
[Quoted text hidden]

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Carla Nelson
Principal's Secretary
Stillwater Lincoln Academy

215 E. 12th Ave
Stillwater, Oklahoma 74074
405-533-6331
Stillwaterschools.com



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Boggs, Rachel <rboggs@stillwaterschools.com>
To: "Nelson, Carla" <cnelson@stillwaterschools.com>
Cc: George Horton <ghorton@stillwaterschools.com>

Tue, May 5, 2026 at 8:24 AM

Great, thank you for letting me know!

This email is not monitored after 5pm, weekends, or holidays.

STILLWATER BOARD OF EDUCATION CFB-E1

ANNUAL ACTIVITY FUND PLANNING AND APPROVAL PACKAGE

Due April 30 each year or upon request of a new account

Reporting School Year: _____26-27_____ Sponsor Name: __Carla Nelson

Name of Activity Fund: _Friends of LA_____ Account No: ___858_____

The Stillwater Board of Education believes that activity fund money generated through student fundraising during any year should be used to benefit the students involved in generating those funds. If applicable, please provide an explanation of a fund balance that exceeds \$1000 and 30% of projected revenue:

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RECEIVED APR 30 2026

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND REQUEST FOR ACCOUNT

DATE: 4/2/26 SITE: Lincoln Academy

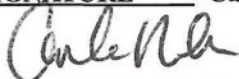
ACCOUNT NAME: FOL

PURPOSE To help pay for caps/gowns, t-shirts, pancakes and pajamas, supplies for art, shop, music, garden and clubs sponsored by LA during the school day.

SOURCE(S) OF INCOME Community donations specified reason or donations made for an unspecified reason. Restaurant nights. Fundraisers approved by Board-see attached documentation.

PLANNED EXPENSES Lincoln Clubs, t-shirts, pancakes and pajamas, field trips, and any other expenses listed on the AF packet approved by the Board.

SPONSOR NAME SIGNATURE Carla Nelson



PRINCIPAL/DIRECTOR SIGNATURE George Horton



TO BE COMPLETED BY FINANCE DEPARTMENT

APPROVED BY: Rachel Boyer DATE: 5/4/20

ACCOUNT NUMBER: 858

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND SUBACCOUNT BUDGET

Reporting School Year: 26-27 _____ Sponsor Name: Carla Nelson _____

Name of Activity Fund: Friends of LA _____ Account No: 858 _____

NEXT YEAR EST. ACTUALS*

1. ESTIMATED BEGINNING CASH BALANCE, JULY 1 \$ _____ \$ _____

2. SOURCE OF ALL REVENUES AND ESTIMATED AMOUNTS:

Dine Nights _____ \$ 900.00 _____

Monetary Donations _____ \$ 10,000.00 _____

Cap & Gown payments from students _____ \$ 300.00 _____

Approved Fundraisers revenue _____ \$ 1650.00 _____

_____ \$ _____

_____ \$ _____

Total Revenues: \$ _____ \$ _____

3. TOTAL CASH BALANCE PLUS REVENUES (ADD 1 AND 2) \$ _____ \$ _____

4. EXPENDITURES AND ESTIMATED AMOUNTS:

T-shirts for staff and students _____ \$ 2,500.00 _____

Awards/Food for students and I Love LA t-shirts _____ \$ 750.00 _____

Shop club/class supplies &/or field trips or certifications \$ 11,000.00 _____

Music Club supplies and/or field trips _____ \$ 500.00 _____

Art Club supplies and/or field trips _____ \$ 500.00 _____

Field trips, caps/gowns & other board approved expenses. \$ 1500.00 _____

Total Expenditures: \$ _____ \$ _____

5. ENDING CASH BALANCE, JUNE 30 (SUBTRACT 4 FROM 3) \$ _____ \$ _____

STILLWATER BOARD OF EDUCATION CFB-E1

FUNDRAISER REQUEST Submit one copy per fundraiser (Due April 30 and November 30)

Reporting School Year: 26-27 Sponsor Name: Dustin Bunch

Name of Activity Fund: Garden Club Plant/Pumpkin Sales-Fall 26 & Spring 27 **Account No:** 858

DESCRIPTION OF FUNDRAISER (INCLUDING ITEMS TO BE SOLD AND HOW): Garden Club students and sponsors will sale plants, pumpkins, flowers and/or gourds to raise money for Garden Club supplies, field trips and any other board approved activities or expenditures.

PURPOSE OF RAISING FUNDS: Garden Club students and sponsors will sell plants, pumpkins, flowers and/or gourds to raise money for Garden Club supplies, field trips and any other board approved activities or expenditures.

FUNDRAISER DATES: START Fall 9/1/26; Spring 2/1/27 **END** Fall 11/30/26 ;Spring 5/15/27

ACCOUNT OF MONEY TO BE RAISED:

EST. INC. \$500.00 - EST. EXP. \$150.00 = EST. PROFIT 350.00


SPONSOR SIGNATURE

ATHLETIC DIRECTOR AUTHORIZATION(athletic fundraiser)


PRINCIPAL AUTHORIZATION

BOARD OF EDUCATION APPROVAL DATE

FUNDRAISER CLOSEOUT

START DATE: _____ END DATE: _____

FUNDRAISER PROFIT

ACT. INC. _____ - ACT. EXP. _____ = ACT. PROFIT _____ (Reconciles to Deposits) (Reconciles to fundraiser related POs) (Net Increase to acct. due to fundraiser)

RECEIPT BOOK #: _____ TO _____

SIGNATURE FINANCIAL SECRETARY SIGNATURE

SPONSOR

STILLWATER BOARD OF EDUCATION CFB-E1 FUNDRAISER REQUEST

Submit one copy per fundraiser (Due April 30 and November 30)

Reporting School Year: 26-27 Sponsor Name: Kris Fowler

Name of Activity Fund: Valentine's Day Fundraiser for Humane Society and Dogs of LA **Account No:** 858

DESCRIPTION OF FUNDRAISER (INCLUDING ITEMS TO BE SOLD AND HOW): Items sold are food, drinks, apparel items, valentine theme decorations or novelties or any items approved by the Board to be sold at school for a fundraiser.

PURPOSE OF RAISING FUNDS: To donate funds to local humane society and Dogs of LA program

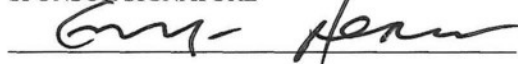
FUNDRAISER DATES: START Jan 15th, 2027 END Feb 15, 2027 **ACCOUNT OF MONEY TO BE RAISED:**

EST. INC. \$200.00 - EST. EXP. 0 = EST. PROFIT \$200.00



SPONSOR SIGNATURE

ATHLETIC DIRECTOR AUTHORIZATION(athletic fundraiser)



PRINCIPAL AUTHORIZATION

BOARD OF EDUCATION APPROVAL DATE

FUNDRAISER CLOSEOUT

START DATE: _____ END DATE: _____

FUNDRAISER PROFIT

ACT. INC. _____ - ACT. EXP. _____ = ACT. PROFIT _____ (Reconciles to Deposits) (Reconciles to fundraiser related POs) (Net Increase to acct. due to fundraiser)

RECEIPT BOOK #: _____ TO _____

SIGNATURE FINANCIAL SECRETARY SIGNATURE SPONSOR

STILLWATER BOARD OF EDUCATION CFB-E1 FUNDRAISER REQUEST

Submit one copy per fundraiser (Due April 30 and November 30)

Reporting School Year: 26-27 Sponsor Name: Kris Fowler

Name of Activity Fund: Student Artwork Sale Account No: 858

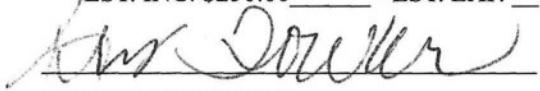
DESCRIPTION OF FUNDRAISER (INCLUDING ITEMS TO BE SOLD AND HOW): : Art club Art projects made by students to raise funds for Art supplies, field trips and transportation.

PURPOSE OF RAISING FUNDS: Art club Art projects made by students to raise funds for Art supplies, field trips and transportation.

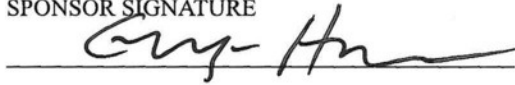
FUNDRAISER DATES: START 12/1/26; 5/1/27 END 12/19/26; 5/19/27

ACCOUNT OF MONEY TO BE RAISED:

EST. INC. \$250.00 - EST. EXP. 0 = EST. PROFIT \$250.00



SPONSOR SIGNATURE



PRINCIPAL AUTHORIZATION

ATHLETIC DIRECTOR AUTHORIZATION(athletic fundraiser)

BOARD OF EDUCATION APPROVAL DATE

FUNDRAISER CLOSEOUT

START DATE: _____ END DATE: _____

FUNDRAISER PROFIT

ACT. INC. _____ - ACT. EXP. _____ = ACT. PROFIT _____ (Reconciles to Deposits) (Reconciles to fundraiser related POs) (Net Increase to acct. due to fundraiser)

RECEIPT BOOK #: _____ TO _____

SIGNATURE FINANCIAL SECRETARY SIGNATURE

SPONSOR

STILLWATER BOARD OF EDUCATION CFB-E1 FUNDRAISER REQUEST

Submit one copy per fundraiser (Due April 30 and November 30)

Reporting School Year: 26-27 Sponsor Name: George Horton

Name of Activity Fund: Shop Class Project Sales Account No: 858

DESCRIPTION OF FUNDRAISER (INCLUDING ITEMS TO BE SOLD AND HOW): Shop class projects made by students to raise funds for shop supplies.

PURPOSE OF RAISING FUNDS: Shop class projects made by students to raise funds for shop supplies, field trips and transportation.

FUNDRAISER DATES: START 12/1/26; 5/1/27 END 12/19/26; 5/18/27

ACCOUNT OF MONEY TO BE RAISED:

EST. INC. \$ 1,000.00 - EST. EXP. \$ 300.00 = EST. PROFIT \$ 700.00



SPONSOR SIGNATURE

ATHLETIC DIRECTOR AUTHORIZATION(athletic fundraiser)



PRINCIPAL AUTHORIZATION

BOARD OF EDUCATION APPROVAL DATE

FUNDRAISER CLOSEOUT

START DATE: _____ END DATE: _____

FUNDRAISER PROFIT

ACT. INC. _____ - ACT. EXP. _____ = ACT. PROFIT _____ (Reconciles to Deposits) (Reconciles to fundraiser related POs) (Net Increase to acct. due to fundraiser)

RECEIPT BOOK #: _____ TO _____

SIGNATURE FINANCIAL SECRETARY SIGNATURE SPONSOR

STILLWATER BOARD OF EDUCATION CFB-E1 FUNDRAISER REQUEST

Submit one copy per fundraiser (Due April 30 and November 30)

Reporting School Year: 26-27 Sponsor Name: Carla Nelson

Name of Activity Fund: Friends of LA Apparel Shop Account No: 858

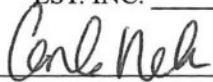
DESCRIPTION OF FUNDRAISER (INCLUDING ITEMS TO BE SOLD AND HOW):

Lincoln Academy clothing apparel to be sold for purchase through local Board approved vendors for students, staff, parents and public.

PURPOSE OF RAISING FUNDS: For student caps & gowns, field trips, rewards, meals, transportation costs, supplies for Lincoln Club, school t-shirts and any other approved board expenditures.

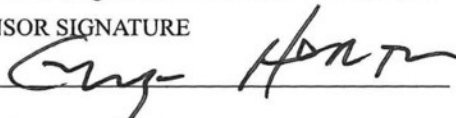
FUNDRAISER DATES: START 8/1/26; 10/15/26; 2/15/27 **END:** 8/31/26, 11/15/26, 3/31/27 **ACCOUNT OF MONEY TO BE RAISED:**

EST. INC. \$150.00 - EST. EXP. 0 = EST. PROFIT \$150.00



SPONSOR SIGNATURE

ATHLETIC DIRECTOR AUTHORIZATION(athletic fundraiser)



PRINCIPAL AUTHORIZATION

BOARD OF EDUCATION APPROVAL DATE

FUNDRAISER CLOSEOUT

START DATE: _____ END DATE: _____

FUNDRAISER PROFIT

ACT. INC. _____ - ACT. EXP. _____ = ACT. PROFIT _____ (Reconciles to Deposits) (Reconciles to fundraiser related POs) (Net Increase to acct. due to fundraiser)

RECEIPT BOOK #: _____ TO _____

SIGNATURE FINANCIAL SECRETARY SIGNATURE SPONSOR

STILLWATER BOARD OF EDUCATION CFB-E1 FUNDRAISER REQUEST

Submit one copy per fundraiser (Due April 30 and November 30)

Reporting School Year: 26-27 Sponsor Name: Carla Nelson

Name of Activity Fund: Dine Nights for Friends of LA Account No: 858

DESCRIPTION OF FUNDRAISER (INCLUDING ITEMS TO BE SOLD AND HOW): Restaurant Dine Nights- Local restaurants give a portion of their ticket sales one night a month to Friends of LA

PURPOSE OF RAISING FUNDS: For student caps & gowns, field trips, rewards, meals, transportation costs, supplies for Lincoln Club, school t-shirts and any other approved board expenditures.

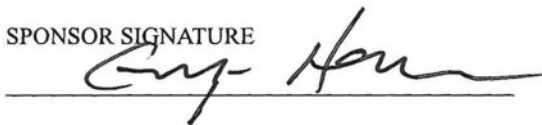
FUNDRAISER DATES: START 9/1-30/26; 10/1-31/26; 11/1-30/26; 12/1-31/26; 1/1-31/27; 2/1-28/27; 3/1-31/27; 4/1-30/27: **END** 9/1-30/26; 10/1-31/26; 11/1-30/26; 12/1-31/26; 1/1-31/27; 2/1-28/27; 3/1-31/27; 4/1-30/27

ACCOUNT OF MONEY TO BE RAISED:

EST. INC. \$800.00 - EST. EXP. \$0 = EST. PROFIT \$800.00



SPONSOR SIGNATURE



ATHLETIC DIRECTOR AUTHORIZATION(athletic fundraiser)

PRINCIPAL AUTHORIZATION

BOARD OF EDUCATION APPROVAL DATE

FUNDRAISER CLOSEOUT

START DATE: _____ END DATE: _____

FUNDRAISER PROFIT

ACT. INC. _____ - ACT. EXP. _____ = ACT. PROFIT _____ (Reconciles to Deposits) (Reconciles to fundraiser related POs) (Net Increase to acct. due to fundraiser)

RECEIPT BOOK #: _____ TO _____

SIGNATURE FINANCIAL SECRETARY SIGNATURE SPONSOR

Lincoln

STILLWATER BOARD OF EDUCATION CFB-E1

ANNUAL ACTIVITY FUND PLANNING AND APPROVAL PACKAGE

Due April 30 each year or upon request of a new account

Reporting School Year: 26-27 Sponsor Name: Carla Nelson

Name of Activity Fund: SPEF Account No: 839

The Stillwater Board of Education believes that activity fund money generated through student fundraising during any year should be used to benefit the students involved in generating those funds. If applicable, please provide an explanation of a fund balance that exceeds \$1000 and 30% of projected revenue:

PACKET CONTENTS:

FORM	FOUND ON PAGE	INITIAL IF COMPLETE
APPROVAL OF ACCOUNT FORM	PAGE 2	
ACTIVITY FUND SUBACCOUNT BUDGET	PAGE 3	
ACTIVITY FUND FUNDRAISER REQUEST(S) (pg. 4)	PAGE 4	
REPORT ON PRIOR YEAR ACTIVITY FUND SUBACCOUNT BUDGET*	PAGE 2	

**This is the form found on page 2, but should be the plan submitted the prior year updated with last year's actual revenues, expenditures, and ending cash balance.*

RECEIVED APR 30 2026

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND REQUEST FOR ACCOUNT

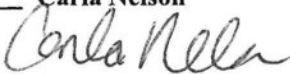
DATE: 4/2/26 SITE: Lincoln Academy

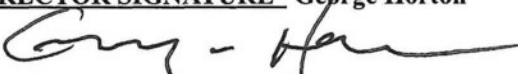
ACCOUNT NAME: SPEF

PURPOSE

SOURCE(S) OF INCOME Grants awarded to Lincoln and Lincoln Staff from SPEF

PLANNED EXPENSES Items approved by SPEF and any other expenses listed on the AF packet approved by the Board.

SPONSOR NAME SIGNATURE Carla Nelson


PRINCIPAL/DIRECTOR SIGNATURE George Horton


TO BE COMPLETED BY FINANCE DEPARTMENT

APPROVED BY:  DATE: 5/14/26

ACCOUNT NUMBER: 839

BOARD OF EDUCATION APPROVAL DATE: _____

STILLWATER BOARD OF EDUCATION CFB-E1

ACTIVITY FUND SUBACCOUNT BUDGET

Reporting School Year: 26-27 Sponsor Name: Carla Nelson Name
of Activity Fund: SPEF Account No: 839

NEXT YEAR EST. ACTUALS*

1. ESTIMATED BEGINNING CASH BALANCE, JULY 1 \$ _____ \$ _____

2. SOURCE OF ALL REVENUES AND ESTIMATED AMOUNTS:

_____ \$ _____
_____ SPEF Grants awarded to teachers _____ \$ 3500.00
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Total Revenues: \$ _____ \$ _____

3. TOTAL CASH BALANCE PLUS REVENUES (ADD 1 AND 2) \$ _____ \$ _____

4. EXPENDITURES AND ESTIMATED AMOUNTS:

_____ \$ _____
_____ SPEF Grant awarded items _____ \$ 3500.00
_____ \$ _____
_____ \$ _____
_____ \$ _____
_____ \$ _____

Total Expenditures: \$ _____ \$ _____

5. ENDING CASH BALANCE, JUNE 30 (SUBTRACT 4 FROM 3) \$ _____ \$ _____

STILLWATER BOARD OF EDUCATION CFB-E1

FUNDRAISER REQUEST

Submit one copy per fundraiser (Due April 30 and November 30)

Reporting School Year: _____ Sponsor Name: _____

Name of Activity Fund: _____ Account No: _____

DESCRIPTION OF FUNDRAISER (INCLUDING ITEMS TO BE SOLD AND HOW):

PURPOSE OF RAISING FUNDS:

FUNDRAISER DATES: START _____ END _____ **ACCOUNT**
OF MONEY TO BE RAISED:

EST. INC. _____ - EST. EXP. _____ = EST. PROFIT _____

SIGNATURE ATHLETIC DIRECTOR AUTHORIZATION (applicable only if athletic fundraiser) SPONSOR

AUTHORIZATION BOARD OF EDUCATION APPROVAL DATE PRINCIPAL

FUNDRAISER CLOSEOUT

START DATE: _____ END DATE: _____

FUNDRAISER PROFIT

ACT. INC. _____ - ACT. EXP. _____ = ACT. PROFIT _____ (Reconciles to Deposits) (Reconciles to fundraiser related POs) (Net Increase to acct. due to fundraiser)

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