Resolution

A.C.A. § 6-24-101 et seq.

WHEREAS the Fort Smith School District Board of Education met in regular session on the date of September 22, 2025. The meeting was open to the public and was conducted in the usual meeting place, the Service Center Auditorium, 3205 Jenny Lind Road, Fort Smith, Arkansas; and					
WHEREASmembers were present, constituting a quoru	um for the conduct of legal business; and				
WHEREAS the Board of Education received recommendations from the Administration of the District to approve any contracts (or other transactions) with the entities shown on the ccompanying Contract Disclosure Forms; and					
WHEREAS a disclosure of the relationship between said entity and the listed employee of the Fort Smith School District as shown on each Contract Disclosure Form was presented as required by A.C.A. § 6-24-101 et seq that are relevant to the contracts; and					
WHEREAS specific facts for the contracts were presented as shown on the accompanying Contract Disclosure Forms; and					
WHEREAS the unusual circumstances necessitating approval of the contracts was considered as set forth on said Contract Disclosure Forms; and					
WHEREAS the Board of Education considers the contracts to be in the best interest of the School District and appropriate for the normal conduct of necessary business.					
NOW THEREFORE BE IT RESOLVED: That the Board of Education after serious consideration moves to approve contracts as listed on the accompanying Contract Disclosure Forms and further set forth any restrictions and/or limitations as noted; and					
BE IT FURTHER RESOLVED: That the Board directs that the period of the contract shall commence upon the date of approval including any prior year contracts.					
Adopted this the 22nd day of September, 2025					
	Superintendent of Schools				
President, Board of Education	Secretary, Board of Education				

Attachment Revision Date 7/2014

Contract Disclosure Form

Name of Public Educational Entity:	Fort Smith School District				
Name of Person Disclosing Transaction:	Dan	Dana Hotho			
Business Name of Entity:	LRB Sports Media	LRB Sports Media dba Fearless Fridays			
I am a (an) Board Member	Administrator	Employee			
Mailing Address:	Home Telephone: Work Telerhone:				
Nature of transaction subject to disclosure and ap	oproval:				
The District desires to work with this local	retail ver when they ar	re priced competitively.			
Estimated dollar of transactions with public educational sy for entire school year: Sinon Sinon					
Check here if Emergency Transaction as defined by A.C.A. § 6-24-101(9). Please attach any other additional information or documents you believe are necessary for a full, complete and accurate disclosure of the facts and circumstances of the transactions. Employee Signature Date					
For Office Use Only					
Date completed form received by district:	Telephone Number:	479-785-2501			
School Official's Signature	Fax Number:	479-784-8108			
Local Board Action:	Approved	Disapproved			
Date Presented to Board:					
Required to be presented to the Commissioner of written approval (resolution attached)? Date Certified to ADE:	Yes	ation for No			
Date Commissioner's Written Approval received	by district:				
Effective Date:					

Contract Disclosure Form

Name of Public Educational Entity:	Fort Smith School District				
Name of Person Disclosing Transaction:	Stac	y Sangster			
Business Name of Entity:	Xtre	eme Diesel			
I am a (an) Board Member	Administrator	Employee			
Mailing Address:	Home Telephone: Work Telephone:	479-785-2501			
Nature of transaction subject to disclosure and ap	proval:				
The District desires to work with this local	retail vendor when they a	re priced competitively.			
The District desires to work with this local retail vendor when they are priced competitively. Estimated dollar of transactions with public educational entity for entire school year: State of transactions with public educational entity for entire school year: State of transactions with public educational entity for entire school year: State of transaction interest in the transaction. A household member has a financial interest in the transaction. Nature of financial interest: Employee is an Administrator whose son is the owner of the business. Single source provider. As needed, goods or services will be purchased on quote/bid for lowest price. X As needed, equal opportunity for local retail vendors to provide goods or services. Check here if Emergency Transaction as defined by A.C.A. § 6-24-101(9).					
Please attach any other additional information or complete and accurate disclosure of the facts and Employee Signature	circumstances of the tran				
For Office Use Only					
Date completed form received by district:					
	Telephone Number:	479-785-2501			
School Official's Signature	Fax Number:	479-784-8108			
Local Board Action:	Approved	Disapproved			
Date Presented to Board:	-				
Required to be presented to the Commissioner of written approval (resolution attached)?	f the Department of Educa Yes [ation for No			
Date Commissioner's Written Approval received Effective Date:	by district:				

Contract Disclosure Form

Name of Public Educat	ional Entity:	Fort Smith	Fort Smith School District		
Name of Person Disclo	sing Transaction:	Carler	Carlena Weakley		
Business Name of Entit	:у:	Alliso	Allison Sales Co.		
I am a (an)	Board Member	K Administrator	Employee		
Mailing Address:		Home Telephone: Work Telephone:			
Nature of transaction s	subject to disclosure and a	pproval:			
The District desir	es to work with this local	retail vendor when they a	re priced competitively.		
Estimated dollar of transactions with public educational entity for entire school year: < \$10,000 Check One: I have a financial interest in the transaction. A household member has a financial interest in the transaction. X A family member has a financial interest in the transaction.					
Nature of financial inte					
Employee is an A	dministrator whose husb	and is the owner of the bu	siness.		
Justification for Approval: Single source provider. As needed, goods or services will be purchased on quote/bid for lowest price. X heeded, equal opportunity for local retail vendors to provide goods or services. Check here if Emergency Transaction as defined by A.C.A. § 6-24-101(9).					
Please attach any other additional information or documents you believe are necessary for a full, complete and accurate disclosure of the facts and circumstances of the transactions. $9/9/25$					
Employee Signature			Date / /		
For Office Use Only					
Date completed form	received by district:				
		Telephone Number:	479-785-2501		
School Official's Signat	:ure	Fax Number:	479-784-8108		
Local Board Action:	L	Approved	Disapproved		
Date Presented to Board:					
•	r-	of the Department of Educ			
• • •	resolution attached)?	Yes	No		
Date Certified to ADE:		l b., diatoist.			
Date Commissioner's \ Effective Date:	Written Approval received	i by district:			
Eliective Date:					