AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| Name of Organization Keeling | | | |
|------------------------------------|---|---|----------------|
| | PTO · | School Keeling | |
| Belated Student Organization or C | lub | Taxpayer I.D. 46-092 | 20153 |
| OFFICERS: | f | | ÷ |
| Name: Savanna Garner | | | |
| Office Held: President | C | Office Held: Treasurer | 4 |
| Address: | A | Address: | |
| ∤ , | | | |
| | | E-mail: | |
| | P | Phone(s): | |
| Date taking office: 9/11/17 | | Date taking office: 9/11/17 | |
| | | Name: Brittany Murphy | |
| Office Held: Vice President | C | Office Held: Secretary | |
| | | Address: | |
| | | | |
| Phone(s): | P | Phone(s): | |
| Date taking office: 9/11/17 | D | Date taking office: 9/11/17 | |
| C Informal Non-Profit Please A | 6) Last fiscal year I.R.S 7) Most recent treasure 8) Most recent bank sta Attach: 1) Annual budget, goals 2) Current operating by | ls and objectives y-laws Corporation Commission Annual Rep S. Form 990 Annual Report ers financial report atement s and objectives y-laws | oort |
| | • | ers financial report | |
| Are two signatures required on dis | 4) Most recent bank sta | atement | . (€)Yes (_)No |
| Are two signatures required on dis | 4) Most recent bank sta bursements? • Yes • No | atement | · (© Yes (No |

For district use:

Finance Department recommendation: approva

Governing Board Agenda date:

rolalia

AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| School/Year 2017-2018 Name/of Organization Nash PTO | School Nash Elementary | |
|--|--|-------|
| Name of Organization Nash PTO Related Student Organization or Club | | |
| OFFICERS: | 1 axpayor 1.D. 47-1300709 | _ |
| Name: Jodi Touchton | Name: | |
| Office Held: President | Office Held: Treasurer | |
| Address: | | |
| 3. | | |
| E-mail: | F-mail: | |
| Phone(s): | Phone(s): | |
| Date taking office: 8/1/17 | | |
| Name: | Nama | |
| Office Held: | | |
| Address: | | |
| | | |
| Phone(s): | Phone(s): | |
| Date taking office: | | |
| 3) Annual budge 4) Current operat 5) Last fiscal yea 6) Last fiscal yea 7) Most recent tre 8) Most recent ba Informal Non-Profit Please Attach: 1) Annual budget, 2) Current operat 3) Most recent tre 4) Most recent ba | ear AZ Corporation Commission Annual Report ear I.R.S. Form 990 Annual Report reasurers financial report eank statement t, goals and objectives eting by-laws reasurers financial report | |
| Are two signatures required on disbursements? Yes Member meetings held how often? every other mont | (4,125 (| Vo |
| As officers, we hereby agree to abide the By-Laws of our or training, and follow the district's Guidelines For Operation children's educational opportunities where support is needed for the following the following forms of the base of the By-Laws of our or training and training and the By-Laws of our or training and follow the By-Laws of our or training and follow the district's Guidelines For Operation children's educational opportunities where support is needed. | rganization, attend annual district-provided Parent Support G n And Financial Responsibility while we strive to improve our led. | iroup |
| Signature Date | Signature Date | |
| Signature Site Administrator's Approval: Signature Date Signature | Signature Date 9/13/17 Date | |
| For district use: Finance Department recommende Governing Board Agenda date: | dation: approva) | |

AME HITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| School year 2017-2018 | |
|---|---|
| Name of Organ zation CDO Boys Basketball Bo | Poster School GDo |
| Related Student Organization or Club | School CDO |
| TO LOCALITY | Taxpayer I.D. 81-1087242 |
| Name: Jim Deputy | Name: Sundee Hawkins |
| Office Held: President | Office Held: Treasurer |
| Address: | Address |
| · · · · · · · · · · · · · · · · · · · | 1.1441.055. |
| E-mail: | E-mail: |
| Prione(s): | |
| Date taking office: 10/2016 | Date taking office: 9/2015 |
| THEOT HAIRS | |
| Office Held; Vice President | |
| Address: | Address |
| | |
| Prione(s): | Phone(s): |
| Date taking office: 10/2016 | Date taking office: 10/2017 |
| FOR ADDITIONAL OFFICERS, PLEASE ADD A S | |
| 3) Annual b 4) Current c 5) Last fisca 6) Last fisca 7) Most rece | of Incorporation (first year only) etermination Letter (first year only) endget, goals and objectives experating by-laws al year AZ Corporation Commission Annual Report al year I.R.S. Form 990 Annual Report ent treasurers financial report ent bank statement |
| 3) Most reco | adget, goals and objectives perating by-laws ent treasurers financial report ent bank statement |
| Are two signatures required on disbursements? | Yes (No By-laws reviewed annually? • • Yes (No |
| Member meetings held how often? | Executive meetings held how often? 2+1mes/year |
| | nur organization, attend annual district-provided Parent Support Group ration And Financial Responsibility while we strive to improve our needed. Signature Date Date |
| For district use: Finance Department recom | mendation: Approve) |

Governing Board Agenda date:

10/3/17

AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| N- 164/2017-2018 | | TO VERNING BOARD APPROVAL | |
|--|---|---|----------------------------------|
| Name of Organization CDO E | Baseball Booston | TROVAL | , |
| organization | O# (VI | School CDO | |
| OFFICERS: | | School CDO Taxpayer I.D. 52-755176 | |
| Name: Thomas Marti | nez | 7 7 1151 32 - 755176 | 54 |
| Office Held: President | | Name: Ana Romero | |
| Address: | | Office Held: Treasurer | |
| | | Address: | |
| E-mail; | | | |
| Phone(s): | | E-mail: | |
| Date taking office: 6/1/2017 Name: Kenny Garcia | | Phone(s): | |
| Name: Kenny Garcia | | Date taking office: 6/1/2017 | |
| Office Held: Vice President | | Name: Dawnell T | |
| Audress: | | Name: Dawnell Juergensen Office Held: Secretary | |
| | | Address: | |
| Phone(s). | | | |
| Date taking office: 6/1/2017 | | Phone(s): | |
| | | Date taking off | |
| FOR ADDITIONAL OFFICE | RS, PLEADL ALL | Date taking office: 6/1/2017 | |
| Informal Non-Profit Plea | 7) Most recent t 8) Most recent t se Attach: 1) Annual budge 2) Current opera | et, goals and objectives | |
| | 4) Most recent b | pank statement | |
| Are two signatures required on | disbursements? | No By-laws reviewed annually? | OVer ON- |
| Member meetings held how oft | ten? As Needed | | ©Yes () No Welded |
| As officers, we hereby agree to training, and follow the district children's educational opportu | 's Guiaeiines For Operatio | organization, attend annual district-provided Pare n And Financial Responsibility while we strive to ded. | ent Support Group improve our |
| Signature Signature | 8/14/17 Date 8/14/12 | Signature Ou | 8/14/17 8/14/17 |
| At 1 | Buch Buch ure | Signature 9/1/17 Date | Date |
| For district use: Fina | nce Department recommend | dation: approved | |
| Gove | erning Board Agenda date: | 10010 | |
| 3070 | .0 w 125011414 Hale, | 1 (019/11) | Revised 5-3-06 |

AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| Schoo Year 7017-2018 | |
|---|--|
| Name of Organization IRHS Men's Soccer PAC | School IRHS |
| Related Stydent Organization or Club | Taxpayer I.D. 45-5447248 |
| OFFICERS: | 1 |
| Name: Maria Dylla | Name: Rosemarie Howard |
| Office Held: President | Office Held: Treasurer |
| Address: | Address: |
| t. | |
| E-mail: | E-mail: |
| Phone(s): | Phone(s): |
| Date taking office: 1/31/17 | Date taking office: 1/31/17 |
| Name: Rosemary Hoover | Name: Tori McCoy |
| Office Held: Vice President | Office Held: Secretary |
| Address: | Address: |
| | |
| Phone(s): | Phone(s): |
| Date taking office: 2/1/16 | Date taking office: 12/9/16 |
| 4) Current operation 5) Last fiscal year 6) Last fiscal year | AZ Corporation Commission Annual Report I.R.S. Form 990 Annual Report asurers financial report |
| Informal Non-Profit Please Attach: 1) Annual budget, 2) Current operation 3) Most recent tree 4) Most recent bar | ng by-laws asurers financial report |
| Are two signatures required on disbursements? Yes | No By-laws reviewed annually? • Yes • No |
| Member meetings held how often? monthly | Executive meetings held how often?quarterly |
| As officers, we hereby agree to abide the By-Laws of our org training, and follow the district's Guidelines For Operation children's educational opportunities where support is needed by the body of | |
| For district use: Finance Department recommends | ation: an armed |

Governing Board Agenda date:

10/3/19

AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| Name of Organia : | BOARD APPROVAL |
|--|---|
| Name of Organization Amphi Ba | Seball Booster Club |
| Related Student Organization or Cl | |
| N/ | Taxpayer I.D. 80-0947599 |
| occ state of the s | |
| Address: | Name: Patti Giffney |
| 441033. | Office Held: Treasurer |
| E-mail: | Address: |
| Phone(s): | |
| | E-mail: |
| Date taking office: 8/1/17 Name: Mark Dia | Phone(s): |
| Mulk Pliarim | Date taking office: 8/1/17 |
| Office Held: Vice President Address: | Name: Steve Giffney |
| | Office Held: Secretary |
| Phone(s): | Address: |
| | Phone(s): |
| Date taking office: 8/1/17 | |
| | Date taking office: 8/1/17 S, PLEASE ADD A SEPANAL, 120-1 |
| C Informal Non-Profit Pleas | 6) Last fiscal year I.R.S. Form 990 Annual Report 7) Most recent treasurers financial report 8) Most recent bank statement e Attach: 1) Annual budget, goals and objectives 2) Current operating by-laws 3) Most recent treasurers financial report 4) Most recent bank statement |
| Are two signatures required on | lisbursements? |
| Member meetings held how often | • |
| As officers, we hereby agree to | abide the By-Laws of our organization, attend annual district-provided Parent Support Group is Guidelines For Operation And Financial Responsibility while we serve to improve our injes where support is/needed, Date Signature Date Date Date |
| the many control of the second | |
| For district use: Fina | rning Board Agenda date: 10/3/1/) |
| Gove | rning Board Agenda date: 10/3/17 |
| | Revised 5-3-06 |

AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| Name of Organization Canyon Del Oro | |
|--|---|
| | Project Graduatian |
| Related Student Organization or Club | |
| OFFICERS: | Taxpayer I.D. 26-24703775 |
| Name: Susan Leader | NI |
| Office Held: President | Name: |
| Address: | Office Held: Treasurer |
| | |
| E-mail: | |
| Phone(s): | |
| Date taking office: 7/1/2016 Name: Larry Atkingon | Phone(s): |
| Name: Larry Atkinson Office Held Event Chair | Date taking office: |
| Office Held: Event Chair - Operation | |
| Address | |
| 7 tuui css, | |
| Phone(s): | |
| Date taking office: 7/1/2017 | 1 none(s), |
| 7.77.2027 | Date taking office: 8/1/2012 |
| FOR ADDITIONAL OFFICEROS, | |
| 5 | Current operating by-laws Last fiscal year AZ Cornoration Commission Annual Report |
| *6 7 |) Last fiscal year AZ Corporation Commission Annual Report) Last fiscal year I.R.S. Form 990 Annual Report) Most recent treasurers financial report) Most recent bank statement |
| Informal Non-Profit Please Attach: 13 |) Last fiscal year AZ Corporation Commission Annual Report) Last fiscal year I.R.S. Form 990 Annual Report) Most recent treasurers financial report) Most recent bank statement |
| Informal Non-Profit Please Attach: 13 | Last fiscal year AZ Corporation Commission Annual Report Last fiscal year I.R.S. Form 990 Annual Report Most recent treasurers financial report Most recent bank statement Annual budget, goals and objectives Current operating by-laws Most recent treasurers financial report Most recent bank statement |
| C Informal Non-Profit Please Attach: 1) 2 3 4 | Last fiscal year AZ Corporation Commission Annual Report Last fiscal year I.R.S. Form 990 Annual Report Most recent treasurers financial report Most recent bank statement Annual budget, goals and objectives Current operating by-laws Most recent treasurers financial report Most recent bank statement mts? |

Finance Department recommendation: approvat

Governing Board Agenda date:

10/3/17

AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| School Year 2017-2018 | |
|--|--|
| Name of Organization La Cima PTO | School La Cima Middle School |
| Related Student Organization or Club | Taxpayer I.D. 75-3072661 |
| OFFICERS: | i |
| Name: Sharon Silver | Name: |
| Office Held: President | Office Held: Treasurer |
| Address: | Address: |
| <u></u> | |
| E-mail: | E-mail; |
| Phone(s): | Phone(s): |
| Date taking office: 8/28/2017 | Date taking office: |
| Name: | |
| Office Held: | Office Held: |
| Address: | |
| | |
| Phone(s): | |
| Date taking office: | Date taking office: |
| 8) Informal Non-Profit Please Attach: 1) A 2) 6 3) 1 4) 1 | fost recent treasurers financial report fost recent bank statement mual budget, goals and objectives furrent operating by-laws fost recent treasurers financial report fost recent bank statement Original Properties Or |
| Are two signatures required on disputsements | Executive meetings held how often? Monthly |
| As officers, we hereby agree to abide the By- training, and follow the district's Guidelines children's educational opportunities where st | aws of our organization, attend annual district-provided Parent Support Group For Operation And Financial Responsibility while we strive to improve our |
| O' | ate Signature Date |
| Signature | 9-13-17 |
| Site Administrator's Approval: | Date |
| | |
| For district use: Finance Departme | nt recommendation: approve) |
| Governing Board | 1 - 10 1 - |
| ···· 9 | Neytod 2 2 500 |

AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| Name of Organization IRHS Theater Booster Clu | |
|---|--|
| | School IRHS |
| Related Student Organization or Club | Taxpayer I.D. 27-5066396 |
| OFFICERS: | |
| Name: Stacy Pincus | Name: Dan Fapp |
| Office Held: President | Office Held: Treasurer |
| Address: | Address: |
| · . | |
| E-mail; | E-mail: |
| Phone(s): | Phone(s): |
| Date taking office: 7/10/2016 | Date taking office: 7/10/2015 |
| Name: Christine Fapp | Name: Lynda Jackson |
| Office Held: Co-President | |
| Address: | Δ ddress: |
| | |
| Phone(s): | Phone(s): |
| Date taking office: 5/9/2013 | Date taking office: 7/10/2016 |
| 4) Current ope 5) Last fiscal 6) Last fiscal 7) Most recen | lget, goals and objectives erating by-laws year AZ Corporation Commission Annual Report year I.R.S. Form 990 Annual Report t treasurers financial report |
| O Informal Non-Profit Please Attach: 1) Annual bud 2) Current ope 3) Most recen | erating by-laws t treasurers financial report |
| O Informal Non-Profit Please Attach: 1) Annual bud 2) Current ope 3) Most recen | get, goals and objectives erating by-laws It treasurers financial report It bank statement |
| O Informal Non-Profit Please Attach: 1) Annual bud 2) Current ope 3) Most recen | get, goals and objectives erating by-laws at treasurers financial report at bank statement es No By-laws reviewed annually? Yes No |
| O Informal Non-Profit Please Attach: 1) Annual budg 2) Current ope 3) Most recen 4) Most recen Are two signatures required on disbursements? Member meetings held how often? Monthly | get, goals and objectives erating by-laws It treasurers financial report It bank statement |

For district use:

Revised 5-3-06

ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| School Year 2017-2018 Name of Organization IRHS Wrestling Boosters | School Ironwood Ridge HS |
|---|---|
| Related Student Organization or Club IRHS Wrestling | |
| OFFICERS: | |
| Name: Erica Rokop | Name: Wendy Reisinger |
| Office Held: President | Office Held: Treasurer |
| Address: | Address: |
| 4. | |
| E-mail: | E-mail: |
| Phone(s): | Phone(s): |
| Date taking office: 4-11-17 | Date taking office: 4-11-17 |
| Name: Kaya Merz | Name: Denise Garibay |
| Office Held: Vice President | Office Held: Secretary |
| Address: | |
| Phone/s): | |
| Phone(s): | Data taking office: 8-27-17 |
| Date taking office: 4-11-17 | Date taking office: 8-27-17 |
| 3) Annual budget, go 4) Current operating 5) Last fiscal year A | , by-laws Z Corporation Commission Annual Report R.S. Form 990 Annual Report urers financial report |
| C Informal Non-Profit Please Attach: 1) Annual budget, gos 2) Current operating 3) Most recent trease 4) Most recent bank | by-laws irers financial report |
| Are two signatures required on disbursements? @Yes C Member meetings held how often? | No By-laws reviewed annually? |
| As officers, we hereby agree to abide the By-Laws of our organ training, and follow the district's Guidelines For Operation An children's educational opportunities where support is needed. Signature Date 12.1.1.7 | |
| Signature Site Administrator's Approvat: Signature: Signature: | Signature Date Date |
| For district use: Finance Department recommendation Governing Board Asenda date: | on: approal |

Revised 5-3-06

AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

| School Year 2017-2018 | TOR GOVERNING BOARD APPROVAL |
|---|---|
| Name of Organization Lulu Walker PTO | |
| Dolate LOUIN | School Lulu Walker Elementary |
| OFFICERS: | Taxpayer I.D. 86-0462868 |
| Name: Melissa Donahue | |
| Office Held: President | YOIIIII |
| Address: | Office Held: Treasurer |
| F-mail: | |
| D-man. | |
| i none(s). | |
| Date taking office: 7-24-17 Name: | : |
| | Date taking office: 7-24-17 |
| Office Held: | |
| Address: | Office Held: |
| Phone(s): | |
| none(s); | |
| Date taking office: | |
| FOR ADDITIONAL OFFICERS, PLEASE ADD A S | |
| 5) Last fisca 6) Last fisca 7) Most rec 8) Most rec 8) Most rec 2) Current of 3) Most rece 4) Most rece 4) | operating by-laws ent treasurers financial report ent bank statement |
| Are two signatures required on disbursements? Member meetings held how often? | Yes O No By-laws reviewed annually? • Yes O No Executive meetings held how often? |
| As officers, we hereby agree to abide the By-Laws of of training, and follow the district's Guidelines For Oper children's educational opportunities where support is Signature Signature Signature Signature Signature Signature Signature | our organization, attend annual district-provided Parent Support Group ration And Financial Responsibility while we strive to improve our needed. Signature Signature Date Date |
| For district use: Finance Department recomm Governing Board Agenda d | |