

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

FORM 5010

School Year 2016-17
 Name of Organization PAINTED SKY PTO School PAINTED SKY
 Related Student Organization or Club _____ Taxpayer I.D. _____

OFFICERS:

Name: LOUISA RANDALL
Office Held: President
Address: 12828 N YELLOW ORCHID DR
OV AZ 85755
E-mail: paintedskypto@gmail.com
Phone(s): 520-820-1774
Date taking office: 5-19-16
Name: Christine Fimbres
Office Held: SECRETARY
Address: 12800 N. Bandanna Way
Phone(s): 520-390-5724
Date taking office: 5/19/16

Name: Kristine Hoey
Office Held: Treasurer
Address: 302 W. Vistoso Highlands Dr.
Oro Valley, AZ 85755
E-mail: hoeycpa@gmail.com
Phone(s): 520-404-0117
Date taking office: 5/19/2016
Name: Christina Smith
Office Held: V.P.
Address: 12132 N. Makayla Canyon Ln
Oro Valley, AZ 85755
Phone(s): 520-906-8686
Date taking office: 5/19/16

FOR ADDITIONAL OFFICERS, PLEASE ADD A SEPARATE, ATTACHED SHEET.

- Formal Non-Profit** Please Attach:
- 1) Articles of Incorporation (*first year only*)
 - 2) I.R.S. Determination Letter (*first year only*)
 - 3) Annual budget, goals and objectives
 - 4) Current operating by-laws
 - 5) Last fiscal year AZ Corporation Commission Annual Report
 - 6) Last fiscal year I.R.S. Form 990 Annual Report
 - 7) Most recent treasurers financial report
 - 8) Most recent bank statement

- Informal Non-Profit** Please 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 disbursements? Yes No By-laws reviewed annually? Yes No

Member meetings held how often? MONTHLY Executive meetings held how often? MONTHLY

As officers, we hereby agree to abide the By-Laws of our organization, attend annual district-provided Parent Support Group training, and follow the district's Guidelines For Operation And Financial Responsibility while we strive to improve our children's educational opportunities where support is needed.

Louisa Randall 07-27-16
 Signature Date
Christine Fimbres 7-27-16
 Signature Date

Kristine Hoey 7/27/2016
 Signature Date
Christina Smith 7/27/16
 Signature Date

Site Administrator's Approval: _____
 Signature Date

For district use: Finance Department recommendation: approved
 Governing Board Agenda date: 9/6/16

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

School Year 2016-2017

Name of Organization Music Boosters

School La Cima

Related Student Organization or Club _____

Taxpayer I.D. 27-3613559

OFFICERS:

Name: Chris Easterling

Name: Christina Hernandez

Office Held: President

Office Held: Treasurer

Address: 5960 N Escondido Ln
Tucson, AZ 85704

Address: 2411 W. Dracle Jaynes Station

E-mail: 5ofusinaz@g.com

E-mail: pungie loves 3rd@gmail.com

Phone(s): (520) 820 - 0158

Phone(s): 520-891-7784

Date taking office: 8/2016

Date taking office: 8/2016

Name: Grace Ravicchio

Name: Shantel Lozano

Office Held: Secretary

Office Held: VP

Address: 600 W. Pelaar Drive
Tucson AZ 85705

Address: 102 W. Roger Rd. #1306

Phone(s): 520-975-4807

Phone(s): (520) 809 1076

Date taking office: 8/2016

Date taking office: 8/2016

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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? monthly

As officers, we hereby agree to abide the By-Laws of our organization, attend annual district-provided Parent Support Group training, and follow the district's Guidelines For Operation And Financial Responsibility while we strive to improve our children's educational opportunities where support is needed.

[Signature] 8/16/2016
Signature Date

[Signature] 8-16-16
Signature Date

[Signature] 8/16/16
Signature Date

[Signature] 8/16/16
Signature Date

Site Administrator's Approval: [Signature] 8/16/16
Signature Date

For district use: Finance Department recommendation: 9th approval
Governing Board Agenda date: 9/6/16

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

School Year 2016-2017

Name of Organization IRHS Theater Booster Club School IRHS

Related Student Organization or Club Drama, Musical & Tech Clubs Taxpayer I.D. 27-5066396

OFFICERS:

Name: Stacey Pincus
Office Held: President
Address: 1985 W. Desert Highlands Dr.
Oro Valley, AZ 85737
E-mail: staceypincus75@gmail.com
Phone(s): 908-303-3197
Date taking office: 5/8/2016

Name: Dan Fapp
Office Held: Treasurer
Address: 11557 N. Verch Way
Oro Valley, AZ 85737
E-mail: dlfapp@yahoo.com
Phone(s): 797-3665 (h); 531-1060 (o)
Date taking office: 7/10/2015

Name: Christine Fapp
Office Held: Co-President
Address: 11557 N Verch Way
Oro Valley, AZ 85737
Phone(s): 797-3665 (h); 390-3151 (m)
Date taking office: 5/9/2013

Name: Lynda Jackson
Office Held: Secretary
Address: 9881 Rabwa Place
Oro Valley, AZ 85742
Phone(s): 971-1148
Date taking office: 5/8/2016

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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? Monthly

As officers, we hereby agree to abide the By-Laws of our organization, attend annual district-provided Parent Support Group training, and follow the district's Guidelines For Operation And Financial Responsibility while we strive to improve our children's educational opportunities where support is needed.

Stacey Pincus 8/3/16
Signature Date

Dan Fapp 8/3/16
Signature Date

[Signature] 8-3-16
Signature Date

Lynda Jackson 8/17/16
Signature Date

Site Administrator's Approval: [Signature]
Signature

[Signature] 8/19/16
Signature Date

For district use: Finance Department recommendation: approval
Governing Board Agenda date: 9/16/16

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

School Year 2016-2017 School Canyon del Oro
Name of Organization Girls Soccer Booster Club Taxpayer I.D. 47-5362780
Related Student Organization or Club _____

OFFICERS:

| | |
|--|---------------------------------------|
| Name: <u>Anita Cole</u> | Name: <u>Dean Elledge</u> |
| Office Held: <u>President</u> | Office Held: <u>Treasurer</u> |
| Address: <u>975 W Silver Spring Pl</u> | Address: <u>918 Calle Catavinos</u> |
| <u>Oro Valley, AZ 85745</u> | <u>Tucson, AZ 85704</u> |
| E-mail: <u>anitasole24@gmail.com</u> | E-mail: <u>carvno@dakotacom.net</u> |
| Phone(s): <u>520.990.0603</u> | Phone(s): <u>520.591.0263</u> |
| Date taking office: <u>11/9/2015</u> | Date taking office: <u>11/10/2015</u> |
| Name: <u>Loreki Barrett</u> | Name: <u>Lisa Matulewic</u> |
| Office Held: <u>Vice-President</u> | Office Held: <u>Secretary</u> |
| Address: <u>9164 N Placita San Angel</u> | Address: <u>6960 N Montecatina Dr</u> |
| <u>Tucson, AZ 85742</u> | <u>Tucson, AZ 85704</u> |
| Phone(s): <u>520.235.3369</u> | Phone(s): <u>520.275-5132</u> |
| Date taking office: <u>11/9/2015</u> | Date taking office: <u>11/9/2015</u> |

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Are two signatures required on disbursements? Yes No By-laws reviewed annually? Yes No
 Member meetings held how often? 2x per school year Executive meetings held how often? 2x per school year

As officers, we hereby agree to abide the By-Laws of our organization, attend annual district-provided Parent Support Group training, and follow the district's Guidelines For Operation And Financial Responsibility while we strive to improve our children's educational opportunities where support is needed.

| | | | |
|---|----------------|-----------------------|----------------|
| <u>Anita Cole</u> | <u>8/16/16</u> | <u>Dean Elledge</u> | <u>8/16/16</u> |
| Signature | Date | Signature | Date |
| <u>Loreki Barrett</u> | <u>8/16/16</u> | <u>Lisa Matulewic</u> | <u>8/16/16</u> |
| Signature | Date | Signature | Date |
| Site Administrator's Approval: <u>Paul D...</u> | <u>8/20/16</u> | | |
| Signature | Date | | |

For district use: Finance Department recommendation: approved
 Governing Board Agenda date: 9/6/16

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

School Year 2016-2017
Name of Organization CDO Parent Org School CDO
Related Student Organization or Club _____ Taxpayer I.D. 86-0763723

OFFICERS:
Name: Elizabeth Burnett
Office Held: President
Address: 7440 N Cmode Maximilian Tucson AZ 85704
E-mail: burnetts5@msn.com
Phone(s): 520 873-7889
Date taking office: July 1, 2016
Name: Nora Fritz
Office Held: Vice President
Address: 9925 N Calle Solano Tucson AZ 85737
Phone(s): 401-4636
Date taking office: July 1, 2016

Name: Susana Valenzuela
Office Held: Treasurer
Address: 1318 W Hopbush Way Tucson AZ 85704
E-mail: Svalenzuela@mydentaltplan.net
Phone(s): 520 850 3019
Date taking office: July 1, 2016
Name: Heidi Garrett
Office Held: Secretary
Address: 8977 N Upper Bluffs Dr Tucson, AZ 85742
Phone(s): 360 9336
Date taking office: July 1, 2016

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Are two signatures required on disbursements? Yes No By-laws reviewed annually? Yes No
Member meetings held how often? quarterly Executive meetings held how often? as needed

As officers, we hereby agree to abide the By-Laws of our organization, attend annual district-provided Parent Support Group training, and follow the district's Guidelines For Operation And Financial Responsibility while we strive to improve our children's educational opportunities where support is needed.

Elizabeth Burnett 8/15/16
Signature Date
Nora Fritz 8/17/16
Signature Date
Site Administrator's Approval: Paul Durkin
Signature

Susana Valenzuela 8-17-16
Signature Date
Heidi Garrett 8/17/16
Signature Date
Susana Valenzuela 8/17/16
Signature Date

For district use: Finance Department recommendation: approval
Governing Board Agenda date: 8/16/16