



Meeting Minutes and Budget

Albert Lea Area Schools 241

Date: 9/10/25 Name of Activity: Orchestra Account

Advisor: Rebekah Crissinger

Members Present: Jacob, Joel, Trese, Alexis, Eh Snow, Rosu
Mariam, Nancy, Paw

Members Absent:

Budget (revenues should equal expenditures)

| Revenues (add up total) | |
|--------------------------|------------------------|
| - Waffle Breakfast | 100.- |
| - Pancake Breakfast | 150.- |
| - Wreath | 800.- 10000 |
| - Butterbraid | 1200 300 |
| - Trip payments | 12,000 |
| Total: 17,850 | |

| Expenditures (add up total) | |
|-----------------------------|-----------------------------|
| - Wreath | 500.- |
| - Butterbraid | 900.- |
| - Trip payment | 15,900 15,600 |
| Total: 17,000 | |

No contact shall be made or authorized, required payments under the contract must be made by the district following normal district processes. Student activity accounts cannot advertise, solicit and award bids. Proceeds of the revenue from vending contracts must not be deposited in any student activity account.

Approval of the budget

Yes No _____

Other items discussed:

Minutes Approved (print):

Rebekah Crissinger
Advisor

Student Rep

Minutes Approved (sign):

Advisor

Student Rep



Activity Purpose Summary

Albert Lea Area Schools 241

Date: 9/10/25 Name of Activity: Orchestra Account

Purpose of Activity: To enrich students experience

Grade(s) of students who will benefits from Activity:

Student activities are in nature by the students and for the students. The Advisor role is limited to advising only. The students should be making the decision regarding the allocation of the funds.

I, Rebekah Crissinger (advisor) have read and understand the attached rules and policies. I acknowledge my responsibilities for assuring proper procedures are followed.

| | | |
|---------------------------|-------------------------------|----------------|
| <u>Rebekah Crissinger</u> | <u>Rebekah Lyn Crissinger</u> | <u>9/10/25</u> |
| Advisor's Name (printed) | Advisor's Signature | Date |

| | | |
|-------------------------------------|--------------------------------|---------------|
| _____ Principal's name (printed) | _____ Principal's Signature | _____ Date |
|-------------------------------------|--------------------------------|---------------|

Upon termination of the above named activity, any unobligated funds that remain in the account will be transferred to: General Fund

| | | |
|---------------------------|-------------------------------|----------------|
| <u>Rebekah Crissinger</u> | <u>Rebekah Lyn Crissinger</u> | <u>9/10/25</u> |
| Advisor's Name (printed) | Advisor's Signature | Date |

| | | |
|------------------------------|-------------------------|----------------|
| <u>Trey</u> | <u>Trey</u> | <u>9/11/25</u> |
| Student Rep's name (printed) | Student Rep's Signature | Date |

| | | |
|-------------------------------------|--------------------------------|---------------|
| _____ Principal's name (printed) | _____ Principal's Signature | _____ Date |
|-------------------------------------|--------------------------------|---------------|



Anticipated Fundraisers

Albert Lea Area Schools 241

Date: 9/10/25 Name of Activity: Orchestra Account

| Description of Fundraiser | Purpose of Fundraiser | Approximate Date(s) | Sales Tax? (Yes or No) | Contract involved? (Yes or No) |
|---------------------------|----------------------------|---------------------|------------------------|--------------------------------|
| 'Waffle' Breakfast | Raise funds for orchestra. | 8/31 | No | No |
| Pancake Breakfast | | Sept & Oct | No | No |
| Wreath | | Oct | No | No |
| Butter Braids | | Sept | No | |
| | | | | |
| | | | | |