



**STILLWATER PUBLIC SCHOOLS**  
**STILLWATER BOARD OF EDUCATION**

**PREPARED BY:** Mrs. Kristie Newby, MBA, CFE, Chief Financial Officer  
**APPROVED BY:** Tyler Bridges, Superintendent  
**DATE:** September 9, 2025

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**AGENDA ITEM:**

Sanctioned Accounts for FY 2025-2026

**BOARD ACTION REQUESTED:**

Motion to Approve Annual Sanctioned Accounts for FY 2025-2026

**BACKGROUND INFORMATION:**

Sanctioned Accounts contribute to the funding and well-being of Stillwater Public Schools Booster Clubs by allowing them to use our organizations tax ID. The Boosters act on their own behalf by raising money via donations or sales. The Boosters will have their own bank account, separate from the Stillwater Public Schools account. They will purchase goods/services with their own funds. Goods and services purchased will be made in the best interest of the Stillwater Public Schools Booster Club that they represent. Sanctioned accounts are subject to audit.

**APPLICATION FOR SANCTIONING  
Due Annually on July 5**

This is a request for sanctioning by the applicant to the Stillwater Board of Education, pursuant to which the funds collected by the applicant are exempt from the statutory controls over school activity funds. All fields are required.

Date Submitted: 08/11/2025 Select One: Initial Application \_\_\_\_\_ Renewal X

Name of Sanctioned Organization: Skyline Elementary PTA

Official Mailing Address for the organization: 1402 E Sunrise Ave - Stillwater, OK 74075

Organization's Taxpayer I.D. Number: 73-1052994

**Organization President**

Name: Laura Rickman

Phone: 405.612.1535

Email: laura.rickman@landbplumbing.com

**Organization Treasurer**

Name: Sherri Buntin

Phone: 405.269.1956

Email: sherri.buntin@okstate.edu

Organization's Purpose, Goals, and the Benefit to District Students: To provide a forum for parents, teachers and administrators to make every child's potential a reality by engaging and empowering families to advocate for children.

Organizations's Website and/or Social Media Accounts: https://www.facebook.com/PTA.Skyline  
https://skylinecubspta.givebacks.com/directory

(All funds raised by the organization will be used to achieve the stated purpose and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.)

Applicant certifies that it does not and will not discriminate with respect to its benefits, membership, programs, operation, or organization on the basis of race, gender, age, religion, national origin, or disability.

Applicant acknowledges that the board of education has the discretion to sanction or decline the applicant, and the decision of the board of education is final and nonappealable. Applicant further acknowledges that (a) the board of education can, at any time, request the records maintained by the applicant, which the applicant will promptly make available, and (b) the board of education can, at any time it believes it is in the best interests of the school district to do so, withdraw sanctioning, and the decision of the board of education is final and nonappealable.

Applicant agrees that any legal or audit expenses incurred by Stillwater Public Schools related to the sanctioned organization will be billed to and paid for by the sanctioned organization.

Applicant also acknowledges, that if requested by the board of education the organization will be required to submit financial and supporting documentation for an agreed upon procedure review to be performed by the school district's external auditor. This information must be submitted by the deadline established at the time of the request.

APPLICATION FOR SANCTIONING (Cont.)

Instructions for Completing Application:

1. Read policies CFBB and CFBB-P and complete this application: the cash flow statement for the prior school year, the cash flow statement estimate for the future school year and the independent audit review certification. If necessary, use additional sheets of paper.
2. Attach twelve (12) months of bank statements and a reconciliation to the unaudited cash flow statement (bank statement credits and debits should match the cash flow summary collections and expenditures respectively, and be reconciled to the ending balance).
3. Attach proof of insurance for the corresponding year that covers funds from theft, embezzlement, or loss, general liability and accident medical coverage in case of injury, financial loss in the event of a claim, and officers liability from legal action.
4. Provide a copy of your organization's by-laws and/or constitution and a list of all officers.
5. Sign and date this application and have the school faculty sponsor review and sign (required).
6. Email or deliver the application and attachments to:

Chief Financial Officer  
 314 S. Lewis  
 Stillwater, OK 74074

7. Signing this form certifies that you agree to attend mandatory district training.

Laura Rickman - Skyline PTA President

Organization Representative/Office Name and Position (printed)

Laura Rickman  
 Signature

7/22/25  
 Date

Natalie Fluty - Skyline Elementary Principal

School Faculty Sponsor / Athletic Coach Name (printed)

Natalie Fluty  
 Signature

7/25/25  
 Date

**APPLICATION FOR SANCTIONING (Cont.)**

ORGANIZATION/ASSOCIATION  
 UNAUDITED CASH FLOW STATEMENT **FOR PRIOR SCHOOL YEAR (ACTUALS JULY 1 – JUNE 30)**

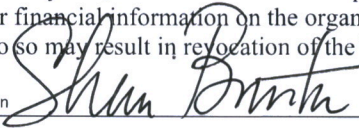
Name of Organization/Association: Skyline Elementary School PTA

FINANCIAL ACTIVITY FOR SCHOOL YEAR 2024-2025

Beginning Cash Balance, July 1, <u>2024</u>		<u>\$ 36,893.33</u>
Collections:		
Fundraiser, Merchandise Sales, Etc.	<u>\$ 29,945.31</u>	
Donations	<u>\$ 2,442.29</u>	
Parent/Student Contributions	<u>\$ 4,364.66</u>	
Other (list):		
Library	<u>\$ 6,013.31</u>	
Membership Dues	<u>\$ 860.00</u>	
Clubs + Interest	<u>\$ 3,334.53</u>	
Total Collections		<u>\$ 46,960.10</u>
Expenditures:		
Fundraising Expenses	<u>\$ 18,246.37</u>	
Other (list):		
Accounting/Bank Fees	<u>\$ 905.86</u>	
Events/Clubs	<u>\$ 15,836.13</u>	
Membership Dues	<u>\$ 395.50</u>	
Teacher Grants	<u>\$ 2,328.82</u>	
Library	<u>\$ 5,079.54</u>	
Facilities Improvements	<u>\$ 2,187.52</u>	
Josten, FY24 expense cleared on 07/01/2024	<u>\$ 1,729.10</u>	
Uncleared FY25 checks (see attached)	<u>\$ -175.36</u>	
Total Expenditures		<u>\$ 46,533.48</u>
Ending Cash Balance, June 30, <u>2025</u>		<u>\$ 37,319.95</u>

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the 2024-2025 school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Sherri Buntin



Date: 08/11/2025

Title: Skyline PTA Treasurer

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

**APPLICATION FOR SANCTIONING (Cont.)**

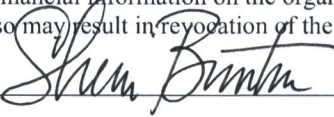
ORGANIZATION/ASSOCIATION  
 UNAUDITED CASH FLOW STATEMENT **FOR UPCOMING SCHOOL YEAR (JULY 1 – JUNE 30)**

Name of Organization/Association: Skyline Elementary School PTA

FINANCIAL ACTIVITY FOR SCHOOL YEAR 2025-2026

Beginning Cash Balance, July 1, <u>2025</u>		<u>\$ 37,319.95</u>
Collections:		
Fundraiser, Merchandise Sales, Etc.	<u>\$ 30,000.00</u>	
Donations	<u>\$ 1,500.00</u>	
Parent/Student Contributions	<u>\$ 4,500.00</u>	
Other (list):		
Clubs	<u>\$ 2,500.00</u>	
Interest	<u>\$ 144.00</u>	
Library	<u>\$ 6,000.00</u>	
Total Collections		<u>\$ 44,644.00</u>
Expenditures:		
Fundraising Expenses	<u>\$ 17,700.00</u>	
Other (list):		
Insurance/Acctg/Bank Fees	<u>\$ 900.00</u>	
Events	<u>\$ 13,500.00</u>	
Membership Dues	<u>\$ 400.00</u>	
Teacher Grants	<u>\$ 3,200.00</u>	
Clubs	<u>\$ 600.00</u>	
Facility Improvements	<u>\$ 2,000.00</u>	
Library	<u>\$ 6,000.00</u>	
	<u>\$</u>	
Total Expenditures		<u>\$ 44,300.00</u>
Ending Cash Balance, June 30, <u>2026</u>		<u>\$ 37,663.95</u>

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the 2025-2026 school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Sherri Buntin  Date: 08/11/2025

Title: Skyline Elementary School PTA Treasurer

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

APPLICATION FOR SANCTIONING (Cont.)

ORGANIZATION/ASSOCIATION  
INDEPENDENT REVIEW CERTIFICATION

This form certifies that an internal audit committee, that is comprised of individuals who are independent from the club officers, conducted an annual audit of the club's financial records for the year ended. A minimum of two individuals performed this audit. The audit committee should be familiar with board policies CFBB and CFBB-P and should consider recommended internal controls for sanctioned organizations.

At a minimum, an audit consists of reviewing 12 months of bank statements for the organization and confirming that they reconcile to the Unaudited Cash Flow Statement submitted as part of the annual application for sanctioning.

Signing this independent review certification also indicates that all expenditures followed the requirements in board policy CFBB with particular attention to the requirement that,

- All funds raised by the organization will be used to achieve the stated purposes and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.

To the best of their knowledge and belief, the internal audit committee of the above-named organization/association certifies that the financial activity of the organization for the 2024 - 2025 school year was in accordance with board policy, reconciles to the submitted unaudited cash flow statement, and all financial transaction were made in accordance with the organization's by-laws and procedures. (A minimum of two signatures required.)

Representative: [Signature] Date: 7-21-25

Representative: Rebecca Chetry Date: 7-21-25

Representative: Annie Ory Date: 7.21.25

Representative: Allison Hoopasser Date: 7-21-25

Representative: \_\_\_\_\_ Date: \_\_\_\_\_



MEMBER CERTIFICATE OF INSURANCE

11/01/2024

Thank you for purchasing your insurance from AIM. This is your Member Certificate and should be kept with your permanent records.

Named Insured Member (mailing address):

Skyline Elementary PTA
Sherri Buntin or Current Officer
1402 E Sunrise
Stillwater,OK 74075

Named Insured & Mailing Address

Education Support Purchasing Group
c/o AIM
P.O. Box 742946
Dallas, TX 75374-2946

Producer Name

AIM Association Insurance
Management, Inc.
P.O. Box 742946
Dallas, TX 75374-2946

Named Insured Member (physical address):

1402 E Sunrise
Stillwater,OK 74075

Insured #: OKPT19092

Table with 5 columns: Coverage, Policy #, Effective Dates, Deductible, Limits of Insurance. Rows include General Liability and Directors and Officers.

Retroactive Date:11/01/2024

Certificate Holder:

Proof of Insurance

This member certificate, together with the common policy conditions, coverage part(s), coverage form(s), and endorsements, if any complete the above numbered policy. Copies of the Master Policies are available upon request.

AUTHORIZED REPRESENTATIVE

Handwritten signature

**APPLICATION FOR SANCTIONING**  
**Due Annually on September 1**

This is a request for sanctioning by the applicant to the Stillwater Board of Education, pursuant to which the funds collected by the applicant are exempt from the statutory controls over school activity funds. All fields are required.

Date Submitted: 6/6/2025Select One: Initial Application \_\_\_\_\_ Renewal 

Name of Sanctioned Organization:

Stillwater Ag Booster Club

Official Mailing Address for the organization:

PO Box 241, Stillwater, OK. 74076Organization's Taxpayer I.D. Number: 84-1729796**Organization President****Organization Treasurer**Name: Mandy GrossName: Miriam McGaughPhone: 405-744-4063Phone: 405-833-7073Email: Mandy.gross@okstate.eduEmail: miriam.mcgauigh@okstate.edu

Organization's Purpose, Goals, and the Benefit to District Students: \_\_\_\_\_

Financially support and encourage Stillwater Public Schools' students engaged in Stillwaterpublic School's Agricultural Education and FFA and/or Payne County 4-H Club and activitiesOrganizations's Website and/or Social Media Accounts: Stillwater Ag Booster Club - Facebook, Instagramhttps://www.stillwateragboosters.com/

(All funds raised by the organization will be used to achieve the stated purpose and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.)

Applicant certifies that it does not and will not discriminate with respect to its benefits, membership, programs, operation, or organization on the basis of race, gender, age, religion, national origin, or disability.

Applicant acknowledges that the board of education has the discretion to sanction or decline the applicant, and the decision of the board of education is final and nonappealable. Applicant further acknowledges that (a) the board of education can, at any time, request the records maintained by the applicant, which the applicant will promptly make available, and (b) the board of education can, at any time it believes it is in the best interests of the school district to do so, withdraw sanctioning, and the decision of the board of education is final and nonappealable.

Applicant also acknowledges, that if requested by the board of education the organization will be required to submit financial and supporting documentation for an agreed upon procedure review to be performed by the school district's external auditor. This information must be submitted by the deadline established at the time of the request.

APPLICATION FOR SANCTIONING (Cont.)

Instructions for Completing Application:

- ✓ 1. Read policies CFBB and CFBB-P and complete this application: the cash flow statement for the prior school year, the cash flow statement estimate for the future school year and the independent audit review certification. If necessary, use additional sheets of paper.
- ✓ 2. Attach twelve (12) months of bank statements and a reconciliation to the unaudited cash flow statement (bank statement credits and debits should match the cash flow summary collections and expenditures respectively, and be reconciled to the ending balance).
- ✓ 3. Sign and date this application and have the school faculty sponsor review and sign (required).
- ✓ 4. Provide a copy of your organization's by-laws and/or constitution and a list of all officers.
- 5. Email or deliver the application and attachments to:
 

Chief Financial Officer  
314 S. Lewis  
Stillwater, OK 74074
- 6. Signing this form certifies that you agree to attend mandatory district training

Miriam McGaugh - Treasurer

Organization Representative/Office Name and Position (printed)

*MMcG*  
 Signature

7/3/2025  
 Date

*Tanner Nipper*  
 School Faculty Sponsor / Athletic Coach Name (printed)

*Tanner Nipper*  
 Signature

8/19/25  
 Date

**APPLICATION FOR SANCTIONING (Cont.)**

ORGANIZATION/ASSOCIATION  
UNAUDITED CASH FLOW STATEMENT **FOR PRIOR SCHOOL YEAR (ACTUALS JULY 1 – JUNE 30)**

Name of Organization/Association: Stillwater Ag Booster Club

FINANCIAL ACTIVITY FOR SCHOOL YEAR 24-25

Beginning Cash Balance, July 1, 2024 \$ 70,977.71 ✓

Collections:

Fundraiser, Merchandise Sales, Etc.	\$ <u>47,818.00</u>
Donations	\$ <u>5,380.50</u>
Parent/Student Contributions	\$ <u>1,958.43</u>
Other (list):	
Interest Income	\$ <u>904.19</u>
Deposit to Savings from Checking	\$ <u>4,000.00</u>
	\$ _____

Total Collections \$ 60,061.12

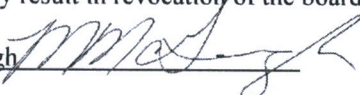
Expenditures:

Fundraising Expenses	\$ <u>7,908.66</u>
Other (list):	
General Expenses	\$ <u>5,115.35</u>
Local and County Show Expenses	\$ <u>7,698.92</u>
Program & Project Support fo SPS Students	\$ <u>66,733.47</u>
Scholarships	\$ <u>2,000.00</u>
	\$ _____
	\$ _____
	\$ _____
	\$ _____

Total Expenditures \$ 89,456.40 ✓

Ending Cash Balance, June 30, 2025 \$ 41,582.43 ✓

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the 24-25 school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Miriam McGaugh  Date: 7/3/2025

Title: Treasurer

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

APPLICATION FOR SANCTIONING (Cont.)

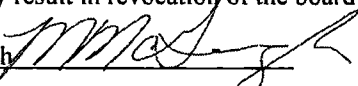
ORGANIZATION/ASSOCIATION  
UNAUDITED CASH FLOW STATEMENT FOR UPCOMING SCHOOL YEAR (JULY 1 – JUNE 30)

Name of Organization/Association: Stillwater Ag Booster Club

FINANCIAL ACTIVITY FOR SCHOOL YEAR 2025-2026

Beginning Cash Balance, July 1, <u>2025</u>		\$ 41,582.43
Collections:		
Fundraiser, Merchandise Sales, Etc.	\$ 35,500.00	
Donations	\$ 6,500.00	
Parent/Student Contributions	\$ 350.00	
Other (list):		
Interest Income	\$ 500.00	
	\$	
	\$	
	\$	
Total Collections		\$ 42,850.00
Expenditures:		
Fundraising Expenses	\$ 14,650.00	
Other (list):		
General	\$ 1,500.00	
Local & County Show	\$ 6,000.00	
Scholarships	\$ 2,000.00	
Program/ Project Support & Special Projects	\$ 44,900.00	
	\$	
	\$	
	\$	
	\$	
Total Expenditures		\$ 67,050.00
Ending Cash Balance, June 30, <u>2026</u>		\$ 17,382.43

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the 25-26 school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Miriam McGaugh  Date: 7/3/2025

Title: Treasurer

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION FOR SANCTIONING (Cont.)**

**ORGANIZATION/ASSOCIATION  
INDEPENDENT REVIEW CERTIFICATION**

This form certifies that an internal audit committee, that is comprised of individuals who are independent from the club officers, conducted an annual audit of the club's financial records for the year ended. A minimum of two individuals performed this audit. The audit committee should be familiar with board policies CFBB and CFBB-P and should consider recommended internal controls for sanctioned organizations.

At a minimum, an audit consists of reviewing 12 months of bank statements for the organization and confirming that they reconcile to the Unaudited Cash Flow Statement submitted as part of the annual application for sanctioning.

Signing this independent review certification also indicates that all expenditures followed the requirements in board policy CFBB with particular attention to the requirement that,

- All funds raised by the organization will be used to achieve the stated purposes and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.

To the best of their knowledge and belief, the internal audit committee of the above-named organization/association certifies that the financial activity of the organization for the \_\_\_\_\_ school year was in accordance with board policy, reconciles to the submitted unaudited cash flow statement, and all financial transaction were made in accordance with the organization's by-laws and procedures. (A minimum of two signatures required.)

Representative:  Date: 8-19-25

Representative:  Date: 8-19-2025

Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Representative: \_\_\_\_\_ Date: \_\_\_\_\_



**ASSOCIATION  
INSURANCE  
MANAGEMENT INC**

**MEMBER CERTIFICATE OF INSURANCE**

08/21/2025

Thank you for purchasing your Insurance from AIM. This is your Member Certificate and should be kept with your permanent records.

**Named Insured Member (mailing address):**

Stillwater Ag Boosters  
Miriam McGaugh or Current Officer  
PO Box 241  
Stillwater, OK 74076

**Named Insured & Mailing Address**

Education Support Purchasing Group  
c/o AIM  
P.O. Box 742946  
Dallas, TX 75374-2946

**Producer Name**

AIM Association Insurance  
Management, Inc.  
P.O. Box 742946  
Dallas, TX 75374-2946

**Named Insured Member (physical address):**

4409 S Brush Creek Rd  
Stillwater, OK 74074

**Insured #: OKBO19330**

Coverage	Policy #	Effective Dates	Deductible	Limits of Insurance	
General Liability Concert Specialty Insurance Company	GL2025AIM38010	08/21/25 - 08/21/26	\$0	Per Occurrence	\$1,000,000
		08/21/25 - 08/21/26		Damage to Rented Premises	\$50,000
		08/21/25 - 08/21/26		Extended Medical	\$5,000
		08/21/25 - 08/21/26		Personal & Advertising Injury	\$1,000,000
				General Aggregate	\$2,000,000
				Products - Comp/Ops	\$2,000,000
Fidelity Bond (Crime) Concert Specialty Insurance Company	CR2025AIM28007	08/21/25 - 08/21/26	\$250	Per Occurrence / Aggregate	\$10,000
Directors and Officers Concert Specialty Insurance Company	DO2025AIM31893	08/21/25 - 08/21/26	\$0	Per Occurrence / Aggregate	\$1,000,000

Retroactive Date:08/21/2025

**Certificate Holder:**

Proof of Insurance

This member certificate, together with the common policy conditions, coverage part(s), coverage form(s), and endorsements, if any complete the above numbered policy. Copies of the Master Policies are available upon request.

**AUTHORIZED REPRESENTATIVE**



Department of the Treasury  
Internal Revenue Service  
Tax Exempt and Government Entities  
P.O. Box 2508  
Cincinnati, OH 45201

STILLWATER AG BOOSTERS  
PO BOX 241  
STILLWATER, OK 74076-0241

Date:  
08/29/2024  
Employer ID number:  
84-1729796  
Person to contact:  
Name: Customer Service  
ID number: 31954  
Telephone: 877-829-5500  
Accounting period ending:  
June 30  
Public charity status:  
509(a)(2)  
Form 990 / 990-EZ / 990-N required:  
Yes  
Effective date of exemption:  
August 24, 2024  
Contribution deductibility:  
Yes  
Addendum applies:  
No  
DLN:  
26053639012164

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

Sincerely,

Stephen A. Martin  
Director, Exempt Organizations  
Rulings and Agreements

RECEIVED AUG 07 2025 APPLICATION FOR SANCTIONING  
Due Annually on July 5

This is a request for sanctioning by the applicant to the Stillwater Board of Education, pursuant to which the funds collected by the applicant are exempt from the statutory controls over school activity funds. All fields are required.

Date Submitted: 8/5/25 Select One: Initial Application \_\_\_\_\_ Renewal

Name of Sanctioned Organization: Sangre Ridge PTO

Official Mailing Address for the organization: 2500 S Sangre Rd. Stillwater OK

Organization's Taxpayer I.D. Number: 84-2412070 74074

Organization President

Organization Treasurer

Name: Heidi Walker

Name: Kaitlee Holmes

Phone: 405-747-5450

Phone: 580-307-4493

Email: heidi.k.walker@gmail.com

Email: kaitleeholmes23@yahoo.com

Organization's Purpose, Goals, and the Benefit to District Students: To provide support services for teachers, support staff, and parents of Sangre Ridge students.

Organizations's Website and/or Social Media Accounts: Sangre Ridge PTO Instagram and Facebook.

(All funds raised by the organization will be used to achieve the stated purpose and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.)

Applicant certifies that it does not and will not discriminate with respect to its benefits, membership, programs, operation, or organization on the basis of race, gender, age, religion, national origin, or disability.

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**APPLICATION FOR SANCTIONING (Cont.)**

Instructions for Completing Application:

1. Read policies CFBB and CFBB-P and complete this application: the cash flow statement for the prior school year, the cash flow statement estimate for the future school year and the independent audit review certification. If necessary, use additional sheets of paper.
2. Attach twelve (12) months of bank statements and a reconciliation to the unaudited cash flow statement (bank statement credits and debits should match the cash flow summary collections and expenditures respectively, and be reconciled to the ending balance).
3. Attach proof of insurance for the corresponding year that covers funds from theft, embezzlement, or loss, general liability and accident medical coverage in case of injury, financial loss in the event of a claim, and officers liability from legal action.
4. Provide a copy of your organization's by-laws and/or constitution and a list of all officers.
5. Sign and date this application and have the school faculty sponsor review and sign (required).
6. Email or deliver the application and attachments to:  
  
 Chief Financial Officer  
 314 S. Lewis  
 Stillwater, OK 74074
7. Signing this form certifies that you agree to attend mandatory district training.

Karlee Holmes Treasurer  
 Organization Representative/Office Name and Position (printed)

Karlee Holmes  
 Signature

8/5/25  
 Date

Carmy Poff Principal  
 School Faculty Sponsor / Athletic Coach Name (printed)

Cami Pitzkowsch  
 Signature

8-5-25  
 Date

RECEIVED VRS 8/5/25

**APPLICATION FOR SANCTIONING (Cont.)**

ORGANIZATION/ASSOCIATION  
 UNAUDITED CASH FLOW STATEMENT FOR PRIOR SCHOOL YEAR (ACTUALS JULY 1 – JUNE 30)

Name of Organization/Association: Sangre Ridge Elementary PTO

FINANCIAL ACTIVITY FOR SCHOOL YEAR 7/1/24 - 6/30/25

Beginning Cash Balance, July 1, 2024 \$ 66,173.24 ✓

Collections:

Fundraiser, Merchandise Sales, Etc.	\$ <u>61,436.64</u>
Donations	\$ _____
Parent/Student Contributions	\$ _____
Other (list):	
<u>membership</u>	\$ <u>2230</u>
<u>yearbook</u>	\$ <u>1670</u>
	\$ _____

Total Collections \$ 65,336.64

Expenditures:

Fundraising Expenses	\$ <u>2,620.06</u>
Other (list):	
<u>PTO operating costs</u>	\$ <u>2,449.00</u>
<u>Classroom needs / supplies</u>	\$ <u>20,454.72</u>
<u>Teacher appreciation</u>	\$ <u>5916.27</u>
<u>Furniture</u>	\$ <u>15,020.94</u>
<u>5th Grade</u>	\$ <u>3748.23</u>
	\$ _____
	\$ _____
	\$ _____

Total Expenditures \$ 50,209.22

Ending Cash Balance, June 30, 2025 \$ 81,300.66 ✓

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the 24-25 school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Kailee Holmes Date: 8/5/25

Title: Treasurer

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

APPLICATION FOR SANCTIONING (Cont.)

ORGANIZATION/ASSOCIATION  
UNAUDITED CASH FLOW STATEMENT FOR UPCOMING SCHOOL YEAR (JULY 1 - JUNE 30)

Name of Organization/Association: Sangre Ridge Elementary PTO

FINANCIAL ACTIVITY FOR SCHOOL YEAR 25-26

Beginning Cash Balance, July 1, 2025 \$ 81,300.66 ✓

Collections:

Fundraiser, Merchandise Sales, Etc.	\$ <u>57,715</u>
Donations	\$ _____
Parent/Student Contributions	\$ _____
Other (list):	
<u>membership</u>	\$ <u>2230</u>
<u>yearbook</u>	\$ <u>1670</u>
_____	\$ _____

Total Collections \$ 61,615

Expenditures:

Fundraising Expenses (new playground)	\$ <u>75,000</u>
Other (list):	
<u>PTO operating costs</u>	\$ <u>2,500</u>
<u>classroom needs/supplies</u>	\$ <u>26,000</u>
<u>Teacher appreciation</u>	\$ <u>6,000</u>
<u>5th grade</u>	\$ <u>3500</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Expenditures \$ 107,000

Ending Cash Balance, June 30, 2026 \$ 35,915.66

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the 25-26 school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Kailee Holmes Date: 8/5/25

Title: Treasurer

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION FOR SANCTIONING (Cont.)**

**ORGANIZATION/ASSOCIATION  
INDEPENDENT REVIEW CERTIFICATION**

This form certifies that an internal audit committee, that is comprised of individuals who are independent from the club officers, conducted an annual audit of the club's financial records for the year ended. A minimum of two individuals performed this audit. The audit committee should be familiar with board policies CFBB and CFBB-P and should consider recommended internal controls for sanctioned organizations.

At a minimum, an audit consists of reviewing 12 months of bank statements for the organization and confirming that they reconcile to the Unaudited Cash Flow Statement submitted as part of the annual application for sanctioning.

Signing this independent review certification also indicates that all expenditures followed the requirements in board policy CFBB with particular attention to the requirement that,

- All funds raised by the organization will be used to achieve the stated purposes and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.

To the best of their knowledge and belief, the internal audit committee of the above-named organization/association certifies that the financial activity of the organization for the \_\_\_\_\_ school year was in accordance with board policy, reconciles to the submitted unaudited cash flow statement, and all financial transaction were made in accordance with the organization's by-laws and procedures. (A minimum of two signatures required.)

Representative: <u>Kaine Helms</u>	Date: <u>8/5/25</u>
Representative: <u>Heidi Wiles</u>	Date: <u>8-5-25</u>
Representative: <u>Caplatz</u>	Date: <u>8-5-25</u>
Representative: _____	Date: _____
Representative: _____	Date: _____



**MEMBER CERTIFICATE OF INSURANCE**

02/27/2025

Thank you for purchasing your insurance from AIM. This is your Member Certificate and should be kept with your permanent records.

**Named Insured Member (mailing address):**

Sangre Ridge PTO  
 Heidi Warren or Current Officer  
 2500 S Sangre Rd  
 Stillwater, OK 74074

**Named Insured & Mailing Address**

Education Support Purchasing Group  
 c/o AIM  
 P.O. Box 742946  
 Dallas, TX 75374-2946

**Producer Name**

AIM Association Insurance  
 Management, Inc.  
 P.O. Box 742946  
 Dallas, TX 75374-2946

**Named Insured Member (physical address):**

2500 S Sangre Rd  
 Stillwater, OK 74074

**Insured #:** OKPO19941

Coverage	Policy #	Effective Dates	Deductible	Limits of Insurance	
General Liability Concert Specialty Insurance Company	GL2025AIM28130	02/27/25 - 02/27/26	\$0	Per Occurrence	\$1,000,000
		02/27/25 - 02/27/26		Damage to Rented Premises	\$50,000
		02/27/25 - 02/27/26		Extended Medical	\$5,000
		02/27/25 - 02/27/26		Personal & Advertising Injury General Aggregate	\$1,000,000 \$2,000,000
Fidelity Bond (Crime) Concert Specialty Insurance Company	CR2025AIM21325	02/27/25 - 02/27/26	\$250	Products - Comp/Ops	\$2,000,000
				Per Occurrence / Aggregate	\$10,000
Property (Business Personal) Concert Specialty Insurance Company	IM2025AIM04316	02/27/25 - 02/27/26	\$250	Per Occurrence / Aggregate	\$10,000
Directors and Officers Concert Specialty Insurance Company	DO2025AIM23885	02/27/25 - 02/27/26	\$0	Per Occurrence / Aggregate	\$1,000,000

Retroactive Date: 02/27/2024

**Certificate Holder:**

Proof of Insurance

This member certificate, together with the common policy conditions, coverage part(s), coverage form(s), and endorsements, if any complete the above numbered policy. Copies of the Master Policies are available upon request.

**AUTHORIZED REPRESENTATIVE**

RECEIVED AUG 07 2025

APPLICATION FOR SANCTIONING
Due Annually on July 5

This is a request for sanctioning by the applicant to the Stillwater Board of Education, pursuant to which the funds collected by the applicant are exempt from the statutory controls over school activity funds. All fields are required.

Date Submitted: 8/6/25 Select One: Initial Application Renewal [checked]

Name of Sanctioned Organization: STILLWATER SISTER SCHOOL EXCHANGE BOOSTER

Official Mailing Address for the organization: 3231 S. PIONEER ST. STILLWATER, OK.

Organization's Taxpayer I.D. Number: 33-4221215 74074

Organization President Name: ANGELA GAMBIE Phone: 405-269-2820

Organization Treasurer Name: Christine Murthy Phone: 412-309-1929

Email: agamble@stillwater.medical.org Email: christinemurthy@gmail.com

Organization's Purpose, Goals, and the Benefit to District Students: TO ASSIST AND SUPPORT THE STILLWATER SISTER SCHOOL EXCHANGE PROGRAM WITH ACTIVITIES, FUNDRAISING AND FINANCIAL SUPPORT

Organizations's Website and/or Social Media Accounts:

(All funds raised by the organization will be used to achieve the stated purpose and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.)

Applicant certifies that it does not and will not discriminate with respect to its benefits, membership, programs, operation, or organization on the basis of race, gender, age, religion, national origin, or disability.

Applicant acknowledges that the board of education has the discretion to sanction or decline the applicant, and the decision of the board of education is final and nonappealable. Applicant further acknowledges that (a) the board of education can, at any time, request the records maintained by the applicant, which the applicant will promptly make available, and (b) the board of education can, at any time it believes it is in the best interests of the school district to do so, withdraw sanctioning, and the decision of the board of education is final and nonappealable.

Applicant agrees that any legal or audit expenses incurred by Stillwater Public Schools related to the sanctioned organization will be billed to and paid for by the sanctioned organization.

Applicant also acknowledges, that if requested by the board of education the organization will be required to submit financial and supporting documentation for an agreed upon procedure review to be performed by the school district's external auditor. This information must be submitted by the deadline established at the time of the request.

APPLICATION FOR SANCTIONING (Cont.)

Instructions for Completing Application:

1. Read policies CFBB and CFBB-P and complete this application: the cash flow statement for the prior school year, the cash flow statement estimate for the future school year and the independent audit review certification. If necessary, use additional sheets of paper.
2. Attach twelve (12) months of bank statements and a reconciliation to the unaudited cash flow statement (bank statement credits and debits should match the cash flow summary collections and expenditures respectively, and be reconciled to the ending balance).
3. Attach proof of insurance for the corresponding year that covers funds from theft, embezzlement, or loss, general liability and accident medical coverage in case of injury, financial loss in the event of a claim, and officers liability from legal action.
4. Provide a copy of your organization's by-laws and/or constitution and a list of all officers.
5. Sign and date this application and have the school faculty sponsor review and sign (required).
6. Email or deliver the application and attachments to:  
  
Chief Financial Officer  
314 S. Lewis  
Stillwater, OK 74074
7. Signing this form certifies that you agree to attend mandatory district training.

PRESIDENT / ANGELA GAMBIE  
 Organization Representative/Office Name and Position (printed)

Angela Gambie  
 Signature

\_\_\_\_\_  
 Date

JAKE EHRLICH  
 School Faculty Sponsor / Athletic Coach Name (printed)

[Signature]  
 Signature

8/6/25  
 Date

APPLICATION FOR SANCTIONING (Cont.)

ORGANIZATION/ASSOCIATION  
UNAUDITED CASH FLOW STATEMENT FOR PRIOR SCHOOL YEAR (ACTUALS JULY 1 - JUNE 30)

Name of Organization/Association: STILLWATER SISTER SCHOOLS EXCHANGE BOOSTER

FINANCIAL ACTIVITY FOR SCHOOL YEAR 24-25

Beginning Cash Balance, July 1, 2025 (ESTABLISHED IN APRIL 25) \$ 50.00 ✓

Collections:

Fundraiser, Merchandise Sales, Etc.	\$ <u>6,690.00</u>
Donations	\$ _____
Parent/Student Contributions	\$ _____
Other (list):	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Collections \$ 6,740.00

Expenditures:

Fundraising Expenses	\$ _____
Other (list):	\$ _____
<u>SERVICE CHARGES (BANK)</u>	\$ <u>15.00</u>
<u>IRS FORM 1023-EZ</u>	\$ <u>275.00</u>
_____	\$ <u>115.00</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Expenditures \$ 405.20

Ending Cash Balance, June 30, 2025 \$ 6,334.80 ✓

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the \_\_\_\_\_ school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Angela Gamble Date: \_\_\_\_\_

Title: \_\_\_\_\_

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

APPLICATION FOR SANCTIONING (Cont.)

ORGANIZATION/ASSOCIATION  
UNAUDITED CASH FLOW STATEMENT FOR UPCOMING SCHOOL YEAR (JULY 1 - JUNE 30)

Name of Organization/Association: STILLWATER SISTER SCHOOLS EXCHANGE BOOSTER

FINANCIAL ACTIVITY FOR SCHOOL YEAR 25-26

Beginning Cash Balance, July 1, 2025 \$ 6,334.80

Collections:

Fundraiser, Merchandise Sales, Etc.	\$ <u>7,482.00</u>
Donations	\$ <u>3,500.00</u>
Parent/Student Contributions	\$ _____
Other (list):	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

Total Collections \$ 10,982.00

Expenditures:

Fundraising Expenses	\$ _____
Other (list):	
<u>BANK SERVICE CHARGES</u>	\$ <u>60.00</u>
<u>FLIGHTS (REMAINING BALANCE)</u>	\$ <u>5,303.73</u>
<u>HOTELS</u>	\$ <u>2,227.31</u>
<u>CELL PHONE USAGE-INTERNATIONAL</u>	\$ <u>360.00</u>
<u>FOOD</u>	\$ <u>500.00</u>
<u>INSURANCE - BOOSTER CLUB</u>	\$ <u>195.00</u>
<u>GIFTS FOR KAMEOKA</u>	\$ <u>4,000.00</u>
<u>MISC.</u>	\$ <u>1,000.00</u>

Total Expenditures \$ 13,646.04

Ending Cash Balance, June 30, 2026 \$ 3,670.76

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the \_\_\_\_\_ school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Angela Yarnale Date: \_\_\_\_\_

Title: \_\_\_\_\_

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

APPLICATION FOR SANCTIONING (Cont.)

ORGANIZATION/ASSOCIATION  
INDEPENDENT REVIEW CERTIFICATION

This form certifies that an internal audit committee, that is comprised of individuals who are independent from the club officers, conducted an annual audit of the club's financial records for the year ended. A minimum of two individuals performed this audit. The audit committee should be familiar with board policies CFBB and CFBB-P and should consider recommended internal controls for sanctioned organizations.

At a minimum, an audit consists of reviewing 12 months of bank statements for the organization and confirming that they reconcile to the Unaudited Cash Flow Statement submitted as part of the annual application for sanctioning.

Signing this independent review certification also indicates that all expenditures followed the requirements in board policy CFBB with particular attention to the requirement that,

- All funds raised by the organization will be used to achieve the stated purposes and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.

To the best of their knowledge and belief, the internal audit committee of the above-named organization/association certifies that the financial activity of the organization for the \_\_\_\_\_ school year was in accordance with board policy, reconciles to the submitted unaudited cash flow statement, and all financial transaction were made in accordance with the organization's by-laws and procedures. (A minimum of two signatures required.)

Representative: Sarah Rector

Date: 8/15/25

Representative: J. M. Kelly

Date: 8/19/25

Representative: \_\_\_\_\_

Date: \_\_\_\_\_

Representative: \_\_\_\_\_

Date: \_\_\_\_\_

Representative: \_\_\_\_\_

Date: \_\_\_\_\_

RECEIVED  
AUG 21 2025

BY: \_\_\_\_\_



**MEMBER CERTIFICATE OF INSURANCE**

08/08/2025

Thank you for purchasing your insurance from AIM. This is your Member Certificate and should be kept with your permanent records.

**Named Insured Member (mailing address):**

Stillwater Sister Schools Exchange Booster  
 Jake Ehrlich or Current Officer  
 3231 S. PIONEER ST  
 Stillwater, OK 74074

**Named Insured & Mailing Address**

Education Support Purchasing Group  
 c/o AIM  
 P.O. Box 742946  
 Dallas, TX 75374-2946

**Producer Name**

AIM Association Insurance  
 Management, Inc.  
 P.O. Box 742946  
 Dallas, TX 75374-2946

**Named Insured Member (physical address):**

3231 S. PIONEER ST  
 Stillwater, OK 74074

Insured #: OKBO19267

Coverage	Policy #	Effective Dates	Deductible	Limits of Insurance	
General Liability Concert Specialty Insurance Company	GL2025AIM36706	08/09/25 - 08/09/26	\$0	Per Occurrence	\$1,000,000
		08/09/25 - 08/09/26		Damage to rented premises	\$50,000
		08/09/25 - 08/09/26		Extended Medical	\$5,000
		08/09/25 - 08/09/26		Personal & Advertising Injury	\$1,000,000
		08/09/25 - 08/09/26		General Aggregate	\$2,000,000
				Products - Comp/Ops	\$2,000,000

**Certificate Holder:**  
 Proof of Insurance

This member certificate, together with the common policy conditions, coverage part(s), coverage form(s), and endorsements, if any complete the above numbered policy. Copies of the Master Policies are available upon request.

AUTHORIZED REPRESENTATIVE

**APPLICATION FOR SANCTIONING  
Due Annually on July 5**

This is a request for sanctioning by the applicant to the Stillwater Board of Education, pursuant to which the funds collected by the applicant are exempt from the statutory controls over school activity funds. All fields are required.

Date Submitted: \_\_\_\_\_ Select One: Initial Application \_\_\_\_\_ Renewal  X

Name of Sanctioned Organization:  Stillwater Pioneer Band Boosters

Official Mailing Address for the organization:  1224 N Husband St., Stillwater, OK 74045

Organization's Taxpayer I.D. Number:  27-1199428

**Organization President**

**Organization Treasurer**

Name:  Kerry McNickle

Name:  Candace Thrasher

Phone:  405-880-2897

Phone:  405-326-8777

Email:  kerry.mcnicke@yahoo.com

Email:  cmthrasher1@gmail.com

Organization's Purpose, Goals, and the Benefit to District Students:  To aid in providing funds for expenses not usually met by the BOE by organizing and administering fundraisers and fundraising activities. To assist financially and logistically to optimize the experience of the students and staff in the Stillwater Pioneer Band Program. To aid the Band Directors in the pursuit of their vision for the future of the Stillwater Pioneer Band Program.

Organizations's Website and/or Social Media Accounts:  stillwaterbands.org

Facebook:  @stwbands  Instagram:  @stwbands

(All funds raised by the organization will be used to achieve the stated purpose and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.)

Applicant certifies that it does not and will not discriminate with respect to its benefits, membership, programs, operation, or organization on the basis of race, gender, age, religion, national origin, or disability.

Applicant acknowledges that the board of education has the discretion to sanction or decline the applicant, and the decision of the board of education is final and nonappealable. Applicant further acknowledges that (a) the board of education can, at any time, request the records maintained by the applicant, which the applicant will promptly make available, and (b) the board of education can, at any time it believes it is in the best interests of the school district to do so, withdraw sanctioning, and the decision of the board of education is final and nonappealable.

Applicant agrees that any legal or audit expenses incurred by Stillwater Public Schools related to the sanctioned organization will be billed to and paid for by the sanctioned organization.

Applicant also acknowledges, that if requested by the board of education the organization will be required to submit financial and supporting documentation for an agreed upon procedure review to be performed by the school district's external auditor. This information must be submitted by the deadline established at the time of the request.

APPLICATION FOR SANCTIONING (Cont.)

Instructions for Completing Application:

1. Read policies CFBB and CFBB-P and complete this application: the cash flow statement for the prior school year, the cash flow statement estimate for the future school year and the independent audit review certification. If necessary, use additional sheets of paper.
2. Attach twelve (12) months of bank statements and a reconciliation to the unaudited cash flow statement (bank statement credits and debits should match the cash flow summary collections and expenditures respectively, and be reconciled to the ending balance).
3. Attach proof of insurance for the corresponding year that covers funds from theft, embezzlement, or loss, general liability and accident medical coverage in case of injury, financial loss in the event of a claim, and officers liability from legal action.
4. Provide a copy of your organization's by-laws and/or constitution and a list of all officers.
5. Sign and date this application and have the school faculty sponsor review and sign (required).
6. Email or deliver the application and attachments to:

Chief Financial Officer  
 314 S. Lewis  
 Stillwater, OK 74074

7. Signing this form certifies that you agree to attend mandatory district training.

Candace Thrasher, Treasurer

Organization Representative/Office Name and Position (printed)



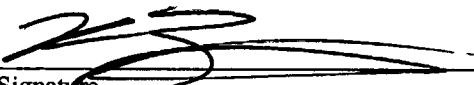
Signature

07-03-2025

Date

Kevin Zamborsky

School Faculty Sponsor / Athletic Coach Name (printed)



Signature

07-03-2025

Date

**APPLICATION FOR SANCTIONING (Cont.)**

ORGANIZATION/ASSOCIATION  
 UNAUDITED CASH FLOW STATEMENT **FOR PRIOR SCHOOL YEAR (ACTUALS JULY 1 – JUNE 30)**

Name of Organization/Association: Stillwater Pioneer Band Boosters

FINANCIAL ACTIVITY FOR SCHOOL YEAR 2024-2025

Beginning Cash Balance, July 1, 2024 \$ 50,505.77 ✓

Collections:

Fundraiser, Merchandise Sales, Etc.	\$ <u>40,242.70</u>
Donations	\$ <u>1,890.00</u>
Parent/Student Contributions	\$ <u>86,483.83</u>
Other (list):	
Operational	\$ <u>31,991.05</u>
Grants	\$ <u>27,000.00</u>
Events	\$ <u>39,320.80</u>

Total Collections \$ 226,928.38

Expenditures:

Fundraising Expenses	\$ <u>2,636.86</u>
Other (list):	
Instructional	\$ <u>29,487.11</u>
Operational	\$ <u>31,556.75</u>
Uniforms & Supplies	\$ <u>33,634.58</u>
Equipment	\$ <u>29,673.15</u>
Events	\$ <u>90,675.66</u>
Scholarships	\$ <u>1,250.00</u>
Transportation	\$ <u>2,890.89</u>
	\$ _____

Total Expenditures \$ 221,805.00

Ending Cash Balance, June 30, 2025 \$ 55,629.15 ✓

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the 2024-2025 school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Candace Thrasher Date: 07-03-2025

Title: Treasurer

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION FOR SANCTIONING (Cont.)**

ORGANIZATION/ASSOCIATION  
 UNAUDITED CASH FLOW STATEMENT **FOR UPCOMING SCHOOL YEAR (JULY 1 – JUNE 30)**

Name of Organization/Association: Stillwater Pioneer Band Boosters

FINANCIAL ACTIVITY FOR SCHOOL YEAR 2025-2026

Beginning Cash Balance, July 1, <u>2025</u>		\$ 55,629.15
Collections:		
Fundraiser, Merchandise Sales, Etc.	\$ 35,000	
Donations	\$ 1,500	
Parent/Student Contributions	\$ 85,000	
Other (list):		
Operational	\$ 30,000	
Events	\$ 35,000	
Grants	\$ 5,000	
Total Collections		\$ 191,500
Expenditures:		
Fundraising Expenses	\$ 2,500	
Other (list):		
Instructional	\$ 30,000	
Operational	\$ 30,000	
Uniforms	\$ 35,000	
Equipment	\$ 10,000	
Events	\$ 90,000	
Scholarships	\$ 1,500	
Transportation	\$ 3,000	
Total Expenditures		\$ 202,000
Ending Cash Balance, June 30, <u>2026</u>		\$ 45,129.15

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the 2025-2026 school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: Candace Thrasher

Date: 07-03-2025

Title: Treasurer

Received and reviewed by Chief Financial Officer:

Name/Title: \_\_\_\_\_

Date: \_\_\_\_\_

APPLICATION FOR SANCTIONING (Cont.)

ORGANIZATION/ASSOCIATION  
INDEPENDENT REVIEW CERTIFICATION

This form certifies that an internal audit committee, that is comprised of individuals who are independent from the club officers, conducted an annual audit of the club's financial records for the year ended. A minimum of two individuals performed this audit. The audit committee should be familiar with board policies CFBB and CFBB-P and should consider recommended internal controls for sanctioned organizations.

At a minimum, an audit consists of reviewing 12 months of bank statements for the organization and confirming that they reconcile to the Unaudited Cash Flow Statement submitted as part of the annual application for sanctioning.

Signing this independent review certification also indicates that all expenditures followed the requirements in board policy CFBB with particular attention to the requirement that,

- All funds raised by the organization will be used to achieve the stated purposes and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.

To the best of their knowledge and belief, the internal audit committee of the above-named organization/association certifies that the financial activity of the organization for the 2024-2025 school year was in accordance with board policy, reconciles to the submitted unaudited cash flow statement, and all financial transaction were made in accordance with the organization's by-laws and procedures. (A minimum of two signatures required.)

Representative: Jandy Crocker

Date: 7/4/25

Representative: Courtney Savage

Date: 7/4/25

Representative: \_\_\_\_\_

Date: \_\_\_\_\_

Representative: \_\_\_\_\_

Date: \_\_\_\_\_

Representative: \_\_\_\_\_

Date: \_\_\_\_\_



**ASSOCIATION  
INSURANCE  
MANAGEMENT INC**

**MEMBER CERTIFICATE OF INSURANCE**

06/19/2025

Thank you for purchasing your Insurance from AIM. This is your Member Certificate and should be kept with your permanent records.

**Named Insured Member (mailing address):**

Stillwater Band Boosters  
Kerry McNickle or Current Officer  
1224 N. Husband Street  
Stillwater, OK 74074

**Named Insured & Mailing Address**

Education Support Purchasing Group  
c/o AIM  
P.O. Box 742946  
Dallas, TX 75374-2946

**Producer Name**

AIM Association Insurance  
Management, Inc.  
P.O. Box 742946  
Dallas, TX 75374-2946

**Named Insured Member (physical address):**

1224 N. Husband Street  
Stillwater, OK 74074

Insured #: OKBO19157

Coverage	Policy #	Effective Dates	Deductible	Limits of Insurance	
General Liability Concert Specialty Insurance Company	GL2025AIM33303	06/19/25 - 06/19/26	\$0	Per Occurrence	\$1,000,000
		06/19/25 - 06/19/26		Damage to Rented Premises	\$50,000
		06/19/25 - 06/19/26		Extended Medical	\$5,000
		06/19/25 - 06/19/26		Personal & Advertising Injury	\$1,000,000
		06/19/25 - 06/19/26		General Aggregate	\$2,000,000
				Products - Comp/Ops	\$2,000,000

**Certificate Holder:**  
Proof of Insurance

This member certificate, together with the common policy conditions, coverage part(s), coverage form(s), and endorsements, if any complete the above numbered policy. Copies of the Master Policies are available upon request.

AUTHORIZED REPRESENTATIVE