

**BROKEN ARROW PUBLIC SCHOOLS**  
*Educating Today*  *Leading Tomorrow*

Contract Committee Review Request  
**MUST BE COMPLETED IN FULL**

Date: 9/15/2022

Contract/Agreement Vendor:

Name of Vendor & Contact Person

Vendor Email Address

Describe Contract (Technology, program, consultant-prof Development, etc.)

Please use Summary below to fully explain the contract purchase, any titles, and details for the Board of Education to review.

Reason/Audience to benefit

BOE Date Amount of agreement

Person Submitting Contract/Agreement for Review:

**PLEASE SEND THROUGH APPROPRIATE APPROVAL ROUTING BEFORE SENDING TO BOARD CLERK**

Principal &/or Director or Administrator:

Does this Contract/Agreement utilize technology? YES/NO  NO

If yes, Technology Admin:

Leadership Team Member:

Funding Source:

Fund/Project OCAS Coding

**Consent**

**Action**

**Summary** This area must be complete with full explanation of contract

*The Contract/Agreement should be received at least 2 weeks prior to a Board Meeting to ensure placement on the Agenda. The Contract Committee meets most Tuesdays at 8:00a.m. All Contracts/Agreements, regardless the amount, must be first approved by the Contract Committee and then presented to the Board of Education for approval and signature. The item will be placed on Electronic School Board for the board agenda by Janet Brown. By following this process, the liability of entering into an agreement is placed with the district rather than an individual.*

## MEMORANDUM

To: Board of Education

From: Michelle Stoermer

Date: 9/20/2022

Re: World's Famous Chocolates

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### **SUBJECT**

Discussion, motion and vote on to approve or disapprove a NEW contract between World's Famous Chocolates and Broken Arrow Public Schools for Expanding Your Horizons Club

### **ENCLOSURES/ATTACHMENTS**

Contract agreement

### **SUMMARY**

The cost of the chocolate services are quoted at \$1870 and will be paid from Activity Fund 892  
The dates of services will be 10/15/22 to 12/15/22. The vendor will provide the chocolates.

### **FUNDING**

892 general activity fund

### **RECOMMENDATION**

Approve



**Organization and Contact Information**

Organization Name: <b>Broken Arrow Travel Club</b>	
Street Address: 1901 E Albany St	
City/State/Zip: <b>Broken Arrow, Oklahoma 74012</b>	
Organizational Email: <b>mstoermer@baschools.org</b>	
Shipping Address	<input checked="" type="checkbox"/> Same as above <input type="checkbox"/> Ship to:
Organization Type	<input type="checkbox"/> Charter School <input type="checkbox"/> Middle School <input type="checkbox"/> High School <input type="checkbox"/> Music/Sport <input type="checkbox"/> Private School <input type="checkbox"/> PTO <input type="checkbox"/> PTA <input type="checkbox"/> Other
Contact Name	<b>Michelle Stoermer</b>
Contact Title	<b>Teacher</b>
Contact Email	<b>mstoermer@baschools.org</b>
Contact Phone	Organization #: <b>918-259-4700</b> Cell #:
Tax Exempt Status	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Resale	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Form attached <small>Tax will be charged on invoice if exemption form or resale certificate is not provided when the order is placed.</small>
Purchase Order	<input type="checkbox"/> Not Required <input type="checkbox"/> Required. My PO# is:
Existing Customer	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Order and Dates**

Dates	Start:	End:	Delivery: 9-16-22
	Assembly Date:	Assembly Time(s):	
Product(s)	Item #: <b>5609WFC</b>	Qty/Price:50	Total: \$1750
	Item #:	Qty/Price:	Total:
	Item #:	Qty/Price:	Total:
	Freight Surcharge		\$120
	<b>Estimated Invoice</b>		<b>Total: \$1870</b>
Prize Cases	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> N/A	# Of Prize Cases: <b>3</b>	
	<input checked="" type="checkbox"/> Delivered with WFC main order <input type="checkbox"/> Prize Cases from ISR inventory <small>Prize cases based on account using an approved prize program and the total number of cases sold. Prize cases will be delivered with your initial order, however, they will not be charged on the invoice.</small>		


**Program Details**

Selling organization agrees to pay for prizes using the funds generated from the prize chocolate.

Prize Level	Prize Description

**Return Policy**      Returns will be accepted with unopened, undamaged cases within 30 days. Return fees may apply. Prize chocolate will be prorated back at the same rate it was received. Contact your ISR for more information or to start your return.

**Authorization**

Signature	Signature WFC Independent Sales Representative 
Printed Name/Date	Printed Name/Date <b>Andy Gustin 9-7-22</b>
<small>All invoices are due 30 days after delivery. A 1.5% per month interest charge will be applied to all accounts past 30 days. Buyer acknowledges that he/she has received and read a copy of "World's Finest<sup>®</sup> Chocolate - Terms and Conditions of Sale," and agrees that this order form includes the additional terms and conditions described therein.</small>	ISR Phone#: <b>405-623-7295</b>
	ISR Email: <b>agustin2516@yahoo.com</b>