



BROKEN ARROW PUBLIC SCHOOLS APPLICATION FOR SANCTIONING

This is a request for sanctioning by the Applicant to the Board of Education of the Broken Arrow Public Schools pursuant to which the funds collected by the Applicant are exempt from the statutory controls over school activity funds. The Applicant is a student achievement program or a parent-teacher association or organization.

Name of Applicant Group: Arrowhead Elementary PTA

Applicant's Address: 915 W. Norman St., Broken Arrow, OK 74012

Applicant's Taxpayer I.D. No.: 23-7121780

Applicant's Representative from whom additional information may be obtained:

April Kunkel

Applicant's Telephone Number: (510) 823-5100

President

Name: April Kunkel

Address: 2827 N. Hickory Ct.
Broken Arrow, OK 74012

Phone: (510) 823-5100

Email: ahemenez@yahoo.com

Treasurer

Name: Jenny Frohlich

Address: 2412 W. College St.
Broken Arrow, OK 74012

Phone: (918) 704-6629

Email: jenheck@cox.net

Has the organization provided any payments to district employees during the past 12 months? ___ Yes No

Have you attached copies of your most recent tax filings & 1099s? Yes ___ No

We agree, if sanctioned, as per Board Policy #6205, to follow proper bookkeeping procedures, and to ensure the safeguarding of all assets. We, the officers, also agree to annually issue by January 15 all appropriate IRS tax forms including 1099s and W-2s filed with the IRS and the Oklahoma Tax Commission, and to provide copies to the Chief Financial Officer at the same time. We, the officers, agree the organization will not hire or pay employees of Broken Arrow Public Schools. We understand the district prohibits booster club/PTAs from hiring district employees. Applicants certify that the organization does not and will not discriminate with respect to benefits, membership, programs, operation or organization on the basis of race, gender, age, religion, national origin, or disability. We certify that the "Treasurer" is not an employee of Broken Arrow Public Schools, in any capacity.



Attach the most recent financial audit report, if any, for the Applicant issued by an independent accounting firm.

Applicant acknowledges that the Board of Education has the discretion to sanction or decline to sanction the Applicant, and the decision of the Board of Education is final and non-appealable. Applicant further acknowledges that (a) the Board of Education may, at any time, request the records maintained by the Applicant, which records Applicant will promptly make available, and (b) the Board of Education may, at any time it believes it is in the best interest of the School District to do so, withdraw sanctioning, and the decision of the Board of Education is final and non-appealable.

Applicant also acknowledges that, in order for the School District to consider whether to maintain the sanctioning action of Applicant, Applicant shall provide to the Board of Education, upon request, on an annual basis, by August 1 of each year, the audit report, if any, for Applicant's recently ended fiscal year, prepared by an independent accounting firm.

Instructions to Applicant:

1. Complete this application. Please print or type.
2. Attach Applicant's most recent financial audit report, if any.
3. Sign and date this application.
4. Deliver this application to:

Natalie Eneff, Chief Financial Officer
Marsha Janey, Administrative Assistant to CFO
701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

April Kunkel

(Print Name of Representative of Applicant)

April Kunkel

Signature of Representative

9/6/2022

(Date)

Please submit application to CFO by the October 15th deadline.



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Name of Applicant Group: Aspen Creek Elementary

Applicant's Address: 2800 W Florence St. BA.

Applicant's Taxpayer I.D. No.: 900993544

Applicant's Representative from whom additional information may be obtained:

Tiffany Crone

Applicant's Telephone Number: 918 361 4782

President

Treasurer

Name: Tiffany Crone

Name: Angela Kelley

Address: 2421 W. Van Buren Ct.

Address: 2311 W. Wasco Ct.

BA, OK 74011

BA, OK 74011

Phone: 918 361 4782

Phone: 918 809 9633

Email: tiffanycroneeco@msd.net

Email: Angie.Kelley1@gmail.com

Has the organization provided any payments to district employees during the past 12 months? ___ Yes No

Have you attached copies of your most recent tax filings & 1099s? Yes ___ No

We agree, if sanctioned, as per Board Policy #6205, to follow proper bookkeeping procedures, and to ensure the safeguarding of all assets. We, the officers, also agree to annually issue by January 15 all appropriate IRS tax forms including 1099s and W-2s filed with the IRS and the Oklahoma Tax Commission, and to provide copies to the Chief Financial Officer at the same time. We, the officers, agree the organization will not hire or pay employees of Broken Arrow Public Schools. We understand the district prohibits booster club/PTAs from hiring district employees. Applicants certify that the organization does not and will not discriminate with respect to benefits, membership, programs, operation or organization on the basis of race, gender, age, religion, national origin, or disability. We certify that the "Treasurer" is not an employee of Broken Arrow Public Schools, in any capacity.



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Marsha Janey, Administrative Assistant to CFO
701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

Tiffany Croe
(Print Name of Representative of Applicant)

9/16/22
(Date)

[Signature]
Signature of Representative

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Name of Applicant Group: Country Lane Intermediate PTA

Applicant's Address: 251 E ~~Omaha~~ Omaha

Applicant's Taxpayer I.D. No.: 300544578

Applicant's Representative from whom additional information may be obtained:

Katy Anderson

Applicant's Telephone Number: 254-813-8480

President

Name: Katy Anderson

Address: 16402 E 50th Pl

Tulsa, OK 74131

Phone: 254-813-8480

Email: Katyandersona17@gmail.com

Treasurer

Name: Amanda Hunt

Address: 4609 S 173rd E AVE

Tulsa, OK 74131

Phone: 972-824-6548

Email: Amandahunt912@gmail.com

Has the organization provided any payments to district employees during the past 12 months? ___ Yes No

Have you attached copies of your most recent tax filings & 1099s? Yes ___ No

We agree, if sanctioned, as per Board Policy #6205, to follow proper bookkeeping procedures, and to ensure the safeguarding of all assets. We, the officers, also agree to annually issue by January 15 all appropriate IRS tax forms including 1099s and W-2s filed with the IRS and the Oklahoma Tax Commission, and to provide copies to the Chief Financial Officer at the same time. We, the officers, agree the organization will not hire or pay employees of Broken Arrow Public Schools. We understand the district prohibits booster club/PTAs from hiring district employees. Applicants certify that the organization does not and will not discriminate with respect to benefits, membership, programs, operation or organization on the basis of race, gender, age, religion, national origin, or disability. We certify that the "Treasurer" is not an employee of Broken Arrow Public Schools, in any capacity.



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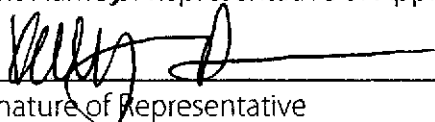
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Natalie Eneff, Chief Financial Officer
Marsha Janey, Administrative Assistant to CFO
701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

Katy Anderson
(Print Name of Representative of Applicant)


Signature of Representative

9/6/2022
(Date)

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Name of Applicant Group: Country Lane Primary PTA

Applicant's Address: 301 E Omaha BA, OK 74012

Applicant's Taxpayer I.D. No.: 731425747

Applicant's Representative from whom additional information may be obtained:

Katy Anderson

Applicant's Telephone Number: 254-813-8482

President
Name: Katy Anderson

Address: 16402 E 50th Pl
Tulsa, OK 74134

Phone: 254-813-8482

Email: Katyanderson917@gmail.com

Treasurer
Name: Molly Hemm

Address: 11208 W Lincoln Pl
Broken Arrow, OK 74012

Phone: 918-706-6165

Email: mollyhemm@gmail.com

Has the organization provided any payments to district employees during the past 12 months? ___ Yes No

Have you attached copies of your most recent tax filings & 1099s? Yes ___ No

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701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

Katy Anderson
(Print Name of Representative of Applicant)

[Signature]
Signature of Representative

9/16/2022
(Date)

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Name of Applicant Group: Creekwood PTA

Applicant's Address: 1301 E. Albany St., Broken Arrow, OK 74012

Applicant's Taxpayer I.D. No.: 35 2475669

Applicant's Representative from whom additional information may be obtained:

Linda C. Miller

Applicant's Telephone Number: 918 520 8124

President

Name: Linda Miller

Address: 1628 E. Fargo St.

Broken Arrow, OK 74012

Phone: 918-520-8124

Email: Linda.c.miller@gmail.com

Treasurer

Name: Bill Kaiser

Address: 2109 N 28th St.

Broken Arrow, OK 74014

Phone: 918-500-1590

Email: WilliamKaiser710@gmail.com

Has the organization provided any payments to district employees during the past 12 months? ___ Yes No

Have you attached copies of your most recent tax filings & 1099s? ___ Yes No

We agree, if sanctioned, as per Board Policy #6205, to follow proper bookkeeping procedures, and to ensure the safeguarding of all assets. We, the officers, also agree to annually issue by January 15 all appropriate IRS tax forms including 1099s and W-2s filed with the IRS and the Oklahoma Tax Commission, and to provide copies to the Chief Financial Officer at the same time. We, the officers, agree the organization will not hire or pay employees of Broken Arrow Public Schools. We understand the district prohibits booster club/PTAs from hiring district employees. Applicants certify that the organization does not and will not discriminate with respect to benefits, membership, programs, operation or organization on the basis of race, gender, age, religion, national origin, or disability. We certify that the "Treasurer" is not an employee of Broken Arrow Public Schools, in any capacity.



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701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

Linda C. Miller
(Print Name of Representative of Applicant)

09-06-2022
(Date)

[Signature]
Signature of Representative

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Name of Applicant Group: Highland Park Elem PTA

Applicant's Address: 7200 E. Quincy Pl. BA, OK 74014

Applicant's Taxpayer I.D. No.: 352445771

Applicant's Representative from whom additional information may be obtained:

Applicant's Telephone Number: 806-773-2336

President

Name: Amy Diaz

Address: 7200 E. Quincy Pl
BA OK 74014

Phone: 806-773-2336

Email: diaz.amy04@gmail.com

Treasurer

Name: Nikki Birdwell

Address: 7200 E. Quincy Pl.
BA, OK 74014

Phone: 918-346-2514

Email: _____

Has the organization provided any payments to district employees during the past 12 months? ___ Yes No

Have you attached copies of your most recent tax filings & 1099s? Yes ___ No

We agree, if sanctioned, as per Board Policy #6205, to follow proper bookkeeping procedures, and to ensure the safeguarding of all assets. We, the officers, also agree to annually issue by January 15 all appropriate IRS tax forms including 1099s and W-2s filed with the IRS and the Oklahoma Tax Commission, and to provide copies to the Chief Financial Officer at the same time. We, the officers, agree the organization will not hire or pay employees of Broken Arrow Public Schools. We understand the district prohibits booster club/PTAs from hiring district employees. Applicants certify that the organization does not and will not discriminate with respect to benefits, membership, programs, operation or organization on the basis of race, gender, age, religion, national origin, or disability. We certify that the "Treasurer" is not an employee of Broken Arrow Public Schools, in any capacity.



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Marsha Janey, Administrative Assistant to CFO
701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

Amy Ditz
(Print Name of Representative of Applicant)

9/16/22
(Date)

Cheryl Ditz
Signature of Representative

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Name of Applicant Group: Leisure Park Elementary PTA

Applicant's Address: 4300 S. Juniper Pl. Broken Arrow, OK 74011

Applicant's Taxpayer I.D. No.: 73-1361816

Applicant's Representative from whom additional information may be obtained:

Teah Washington

Applicant's Telephone Number: 918.403.8014

President

Treasurer

Name: TEAH Washington

Name: Jennifee Chappell

Address: 4008 S. Lions Ave

Address: 5400 S. Poplar Ave

BROKEN ARROW, OK 74011

BROKEN ARROW, OK 74011

Phone: 918.403.8014

Phone: 918.381.5383

Email: tjwashington@live.com

Email: wjchappell@gmail.com

Has the organization provided any payments to district employees during the past 12 months? ___ Yes X No

Have you attached copies of your most recent tax filings & 1099s? X Yes ___ No

We agree, if sanctioned, as per Board Policy #6205, to follow proper bookkeeping procedures, and to ensure the safeguarding of all assets. We, the officers, also agree to annually issue by January 15 all appropriate IRS tax forms including 1099s and W-2s filed with the IRS and the Oklahoma Tax Commission, and to provide copies to the Chief Financial Officer at the same time. We, the officers, agree the organization will not hire or pay employees of Broken Arrow Public Schools. We understand the district prohibits booster club/PTAs from hiring district employees. Applicants certify that the organization does not and will not discriminate with respect to benefits, membership, programs, operation or organization on the basis of race, gender, age, religion, national origin, or disability. We certify that the "Treasurer" is not an employee of Broken Arrow Public Schools, in any capacity.



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Marsha Janey, Administrative Assistant to CFO
701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

Teah Washington
(Print Name of Representative of Applicant)

Teah Washington
Signature of Representative

8-29-2022
(Date)

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Name of Applicant Group: Liberty Elementary

Applicant's Address: 4300 S 209th E Ave Broken Arrow OK 74014

Applicant's Taxpayer I.D. No.: 260079815

Applicant's Representative from whom additional information may be obtained:

Sarah Snodgrass

Applicant's Telephone Number: 918-606-1279

President

Name: Sarah Snodgrass

Address: 20425 E. 47th St S

Broken Arrow OK 74014

Phone: 918-606-1279

Email: sasnod@gmail.com

Treasurer

Name: Emily Mastropietro

Address: 4908 N 24th St

Broken Arrow OK 74014

Phone: 918-521-6107

Email: Emily.m1@cox.net

Has the organization provided any payments to district employees during the past 12 months? ___ Yes No

Have you attached copies of your most recent tax filings & 1099s? Yes ___ No

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701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

Sarah Snodgrass
(Print Name of Representative of Applicant)

9/06/2022
(Date)

[Signature]
Signature of Representative

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