



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: Lynn Wood Elementary

Applicant's Address: 1600 W Quincy St

Applicant's Taxpayer I.D. No.: 731077029

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

Tiffany Giles

Applicant's Telephone Number: 918-259-4430

President

Name: Tiffany Giles

Address: 1701 S. Gum Ave

BA, OK 74012

Phone: 918-720-8582

Email: tiffany.elove@gmail.com

Treasurer

Name: ~~Tiffany Giles~~ Kristi Krehr

Address: 1005 W Pittsburg Pl

BA, OK 74012

Phone: 918-340-3488

Email: kristi.k713@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.



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

Tiffany Giles
(Print Name of Representative of Applicant)

9/3/24
(Date)

Jill May
Signature of Representative

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



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Name of Applicant Group: Dakcrest

Applicant's Address: 405 E Richmond St Broken Arrow OK 74012

Applicant's Taxpayer I.D. No.: 237121261

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

Caitlin Espinoza

Applicant's Telephone Number: 918-550-9377

President
Name: Caitlin Espinoza
Address: 1504 Maple Ave
Broken Arrow, OK 74012
Phone: 918 550-9377
Email: Caitlin.khalsa@gmail.com

Treasurer
Name: Ross Summers
Address: 11703 South 101st
East Ave Broken Arrow
Phone: 918-207-9952
Email: rsummers@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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Marsha Janey, Administrative Assistant to CFO
701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

Caitlin Espinoza
(Print Name of Representative of Applicant)

Caitlin Espinoza
Signature of Representative

9/3/24
(Date)

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Name of Applicant Group: Rhoades Elementary PTA

Applicant's Address: 320 E Midway Broken Arrow OK 74014

Applicant's Taxpayer I.D. No.: 237115278

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

Amanda Clanton

Applicant's Telephone Number: 405779 0305

President

Name: Amanda Clanton

Address: 1208 S 35th St

Broken Arrow OK 74014

Phone: 4057790305

Email: adclanton@yahoo.com

Treasurer

Name: Amy Grammer

Address: 310 S 8th St

Broken Arrow OK 74012

Phone: 918695 3858

Email: agrammer86@yahoo.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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Marsha Janey, Administrative Assistant to CFO
701 S. Main Street
Broken Arrow, OK 74012
918-259-5769

Amanda Clanton
(Print Name of Representative of Applicant)

9-3-24
(Date)

A Clanton
Signature of Representative

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Name of Applicant Group: Rosewood PTA

Applicant's Address: 4300 E. Gery St., Broken Arrow, OK 74014

Applicant's Taxpayer I.D. No.: 852459721

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

Adrien Francis

Applicant's Telephone Number: 918-760-2131

President

Name: Adrien Francis

Address: 21562 E. 103rd St.

Broken Arrow, OK 74014

Phone: 918-760-2131

Email: ostatefrancisfam@gmail.com

Treasurer

Name: Megan Rudolph

Address: 23095 E. 106th St. S.

Broken Arrow, OK 74014

Phone: 859-412-7270

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

Adrien Francis
(Print Name of Representative of Applicant)

Adrien Francis
Signature of Representative

9/3/24
(Date)

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Name of Applicant Group: Spring Creek Elementary PTA

Applicant's Address: 6801 S Third St BA OK 74011

Applicant's Taxpayer I.D. No.: 73-1322211

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

Heather Bryson

Applicant's Telephone Number: 918-859-4277

President
Name: Heather Bryson

Address: 301 W Raleigh Pl
Broken Arrow OK 74011

Phone: 918-859-4277

Email: hkbryson@gmail.com

Treasurer
Name: Shelly Hicks

Address: 6305 S Birch Ave
Broken Arrow OK 74011

Phone: 918-900-1169

Email: shelly8302@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

Heather Bryson
(Print Name of Representative of Applicant)

9-3-24
(Date)

Heather Bryson
Signature of Representative

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Name of Applicant Group: Timber Ridge PTA

Applicant's Address: 3500 E kenosha Broken Arrow, OK 74014

Applicant's Taxpayer I.D. No.: 82-210085166

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

Jennifer valentine

Applicant's Telephone Number: 405-496-1612

President

Treasurer

Name: Jennifer valentine

Name: Sara Whitman

Address: 22651 E 78th

Address: ~~22651 E 78th~~

57 Broken Arrow OK 74014

~~57 Broken Arrow~~ 10912 S 232nd E. Ave

Phone: (405) 496-1612

Phone: 918-902-1114

Email: Jennh33@gmail.com

Email: Sawhitman87@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

Jennifer Valentine
(Print Name of Representative of Applicant)

9/3/2024
(Date)


Signature of Representative

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Name of Applicant Group: Vandever PTA

Applicant's Address: 2200 S. Lions Ave Broken Arrow, OK 74014

Applicant's Taxpayer I.D. No.: 731014867

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

Vanessa Opitz

Applicant's Telephone Number: 918-855-5382

President
Name: Vanessa Opitz

Address: 6203 S. 22nd E. Pl.
Broken Arrow, OK 74014

Phone: 918-855-5382

Email: Vanessaopitz05@gmail.com

Treasurer
Name: Brianna Simmons

Address: 505 W. Ithica St.
Broken Arrow, OK 74012

Phone: 918-861-3263

Email: navyboyd@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

Vanessa Opitz
(Print Name of Representative of Applicant)

[Signature]
Signature of Representative

9/3/24
(Date)

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Name of Applicant Group: Wolf Creek Elementary PTA

Applicant's Address: 3000 W New Orleans

Applicant's Taxpayer I.D. No.: 731383832

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

Tomi West

Applicant's Telephone Number: 918-260-9667

President
Name: Tomi West

Address: 4145 S Dogwood Ave
Broken Arrow OK 74011

Phone: 918-260-9667

Email: tomi.west@netmail.com

Treasurer
Name: Tori Daye

Address: 2305 W. Atlanta St
Broken Arrow OK 74012

Phone: 215-767-5253

Email: just.tori.or.vikki@gmail.com

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

Tomi West
(Print Name of Representative of Applicant)

09-03-24
(Date)

Tomi West
Signature of Representative

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