

Davis Joint Unified School District
SCHOOL-CONNECTED ORGANIZATION AUTHORIZATION FORM

Organization Name: Willet Elementary School PTA
Name of the School(s): Willet Elementary School

As parents, guardians, and/or community members within the Davis Joint Unified School District, we hereby request:

- ☐ approval for formation as a school-connected organization
☒ annual renewal of authorization as a school-connected organization

Tax ID #: 68-0291264 Is your organization a 501(c)(3)? Yes
Name of bank where the organization's account will be located First Northern Savings

Please attach a copy of the bylaws under which the organization operates.

Purposes of the organization are (specifically, what program or student groups will be supported):
We are a parent-teacher organization focused on promoting a healthy and connected school community.

Note: School-connected organizations are organized and operate independent of DJUSD. Accordingly, DJUSD is not responsible for and assumes no liability for the programs, fundraising or other activities of any school-connected organization. Announcements of events and related parent/guardian permission slips shall clearly indicate that the activity or event is sponsored by the school-connected and not by the school or district.

We have read applicable DJUSD Board policies and administrative regulations for forming and conducting this organization and agree to abide by them. Specifically, we agree:

- our fundraising activities shall not conflict with law, Board policies, administrative regulations, or any rules of the sponsoring school;
- our organization will not discriminate in making grants to students on the basis of their family's membership in or funding to the organization, or the family's fundraising or time put into organization sponsored activities;
- to maintain a record of funds collected and expended; and
- to grant the district the right to audit the organization's financial records when the activities of the organization appear to conflict with law, Board policy, administrative regulations or rules of the school.

President's name - printed Joe DiNunzio Signature [Signature] Date 10/6/15

E-mail address - printed joe@dinunzio.com Telephone number 818-521-5300

Vice president's name - printed Christina Yeung Signature (not required) [Signature] Date 10/8/15

E-mail address - printed Christinayeung@juno.com Telephone number (530)979-0097

Treasurer's name - printed Tracy Dunne, CPA Signature [Signature] Date 10/8/15

E-mail address - printed Tracy@TracyDunneCPA.com Telephone number 530-758-2730

Coach or lead teacher name (if applicable) - printed N/A Signature _____ Date _____

E-mail address - printed _____ Telephone number _____

I support this request for authorization. Heidi Perry Date 10/8/15
Principal's signature _____

Date Approved by the Board of Education _____