

New Caney ISD

Fundraiser Registration Packet

Fundraiser: A fundraiser is an activity used to assist schools or organizations with the raising of funds by the sale of items.

Demographics of the District: New Caney Independent School District is located approximately 30 miles north of Houston, TX on US Highway 59/Interstate 69. The district has experienced rapid growth over the past several years and is currently one of the fastest growing districts in the Houston area. The district currently has the following campuses:

- 3 High Schools
- 1 Early College High School
- 4 Middle Schools
- 11 Elementary Campuses

Required Documents: Fundraiser packets submitted to the District shall include:

1. The Fundraiser Permit Application (pages 2 and 3)
2. The additional forms in this packet
3. Brochures or documents outlining your product

Review Process: The NCISD Purchasing Department shall evaluate all fundraiser packets. All documents from this packet must be completed and included in your returned registration packet. District personnel shall review the packet to ensure that it meets the requirements of the district for a fundraiser activity. If requirements are met the district will notify you of your approval. At that time you may contact our campuses to discuss your fundraiser activity. It is the decision of the campus or department as to what fundraiser company that is used.

Gifts and Contributions: No personal gifts (of any kind) from the Company (or the Company's Representative) shall be promised to or given to any member of NCISD at any time prior to, during, or after the award period of this solicitation or campus fundraiser activity. Failure to adhere to this statement may result in the termination of the contract and the Company may be removed from the Approved Vendor's list for a period of five (5) years.

General Terms and Conditions can be viewed by going to www.newcaneyisd.org (select Departments and go to Purchasing). Submission of a fundraiser registration packet signifies the company's acceptance of the New Caney ISD General Terms and Conditions.

Return Packets To:

**Attn: Purchasing Dept.
New Caney ISD
21580 Loop 494
New Caney, TX 77357**

FUNDRAISER PERMIT APPLICATION

The following information must be provided for an application to be reviewed by the NCISD Purchasing Department. Incomplete applications will be returned to the applicant.

Firm Name:

Address: (Street, City, State & Zip)

Sales Representative Name:

Phone Number:

Cell:

Fax:

Email Address:

Company Website:

The following information shall provide the District a basic understanding of the product or service being offered. All information must be completed for the application to be considered.

1. Basic description of company and the types of products or services offered. (Attach copies of product descriptions, promotional literature, sales instructions, etc.):

2. The range of unit cost and suggested retail prices of the products or services.

3. Anticipated profit percentage for the product or services.

4. How is the product or service marketed?

Permit Application (cont.)

5. Product of service guarantee.

6. Support services provided by the fundraising sales representative above.

7. Can unsold merchandise be returned to the company and credit issued? ☐ Yes ☐ No

8. If yes, will it be full credit? ☐ Yes ☐ No

9. If no, what percentage will be credited? _____ %

10. Check the appropriate school level(s) for the product or service.

☐ Elementary ☐ Middle School ☐ High School ☐ All Levels

I, as a representative of the company listed above, have reviewed and understand the requirements for the Fundraiser Permit Application listed above and the RFP terms and conditions and will conduct my business with the District in accordance with the requirements as stated.

Signature

Date

References

Please provide a list of five (5) references. Texas School Districts that you have preformed similar services are preferred. References will include contact name and telephone number. Proposals submitted without five references may be disqualified from consideration.

1. School _____ Phone Number (____)_____

Contact Name _____ Title _____

2. School _____ Phone Number (____)_____

Contact Name _____ Title _____

3. School _____ Phone Number (____)_____

Contact Name _____ Title _____

4. School _____ Phone Number (____)_____

Contact Name _____ Title _____

5. School _____ Phone Number (____)_____

Contact Name _____ Title _____

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2 Business name/disregarded entity name, if different from above	
	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ► _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
	5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6 City, state, and ZIP code	
	7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-				-	
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ►	Date ►
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

Conflict of Interest Disclosure

The following is issued in accordance with State Law and NCISD Board Policy BBFA (LEGAL). Failure to make disclosure shall be grounds for termination of any contract entered into with said vendor or bidder.

1. The undersigned states that he/she nor the company listed herein has never had nor currently has a business relationship with a Board Member, member of the Administration, or a member of the Staff at New Caney Independent School District, regardless of the nature or amount.

Signed: _____ Printed Name: _____

OR

2. The undersigned states that he/she and/or the company listed herein has had or does currently have a business relationship with a Board Member, member of the Administration, or a member of the Staff at New Caney Independent School District, regardless of the nature or amount.

Signed: _____ Printed Name: _____

3. If you answered "**YES**" to (2), has that relationship been disclosed in writing as required by Board Policies BBFA (LEGAL) and BBFA (EXHIBIT)? ☐ Yes ☐ No

4. If you answered "**NO**" to (3), please complete the Form CIQ on the next page.

New Caney ISD

Conflict of Interest Questionnaire

Instructions

New Caney ISD is required to comply with Texas Local Government Code Chapter 176, Disclosure of Certain Relationships with Local Government Officers. House Bill 23 significantly changed Chapter 176 as well as the required disclosure and the corresponding form. As of September 1, 2015, any vendor who does business with NCISD or who seeks to do business with NCISD must complete the new Conflict of Interest Questionnaire (CIQ) whether or not a conflict of interest exist. A conflict exists in the following situations:

1. If the vendor has an employment or other business relationship with a local government officer of NCISD or a family member of the officer, as described by section 176.003(a)(2)(A) of the Texas Local Government Code; or
2. If the vendor has given a local government officer of NCISD, or a family member of the officer, one or more gifts with the aggregate value of \$100, excluding any gift accepted by the officer or a family member of the officer if the gift is: (a) a political contribution as defined by Title 15 of the Election Code; or (b) a gift of food accepted as a guest; or
3. If the vendor has a family relationship with a local government officer of NCISD.

Definitions:

- **Vendor**: a person or company that enters or seeks to enter into a contract with NCISD for the sale of goods or services.
- **Business Relationship**: a connection between two or more parties based on commercial activity of one of the parties. The term does not include a connection based on: (A) a transaction that is subject to rate or fee regulation by a federal, state, or local governmental entity or an agency of a federal, state, or local governmental entity; (B) a transaction conducted at a price and subject to terms available to the public; or (C) a purchase or lease of goods or services from a person that is chartered by a state or federal agency and that is subject to regular examination by, and reporting to, that agency. *Texas Local Government Code 176.001(3).*
- **Family Relationship**: a relationship between a person and another person within the third degree by consanguinity or the second degree by affinity, as those terms are defined by Subchapter B, Chapter 573, Government Code. *Texas Local Government Code 176.001(2-a).*
- **Local Government Officer**: (A) a member of the NCISD Board of Trustees; (B) a superintendent, director, administrator, or other person designated as an executive officer; (C) an agent of NCISD who exercises discretion in the planning, recommending, selecting, or contracting of a vendor.

If no conflict of interest exist: You must fill out Box 1 and type "N/A" in Box 3 of the CIQ form, sign and date the form.

In the event of a change in circumstances, an updated CIQ must be filed within seven (7) business days after the vendor becomes aware that a conflict of interest exists.

CONFLICT OF INTEREST QUESTIONNAIRE

FORM CIQ

For vendor doing business with local governmental entity

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of vendor who has a business relationship with local governmental entity.

2 ☐ Check this box if you are filing an update to a previously filed questionnaire.

(The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 Name of local government officer about whom the information in this section is being disclosed.

Name of Officer

This section (item 3 including subparts A, B, C, & D) must be completed for each officer with whom the vendor has an employment or other business relationship as defined by Section 176.001(1-a), Local Government Code. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer named in this section receiving or likely to receive taxable income, other than investment income, from the vendor?

☐ Yes

☐ No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer named in this section AND the taxable income is not received from the local governmental entity?

☐ Yes

☐ No

C. Is the filer of this questionnaire employed by a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more?

☐ Yes

☐ No

D. Describe each employment or business and family relationship with the local government officer named in this section.

4

Signature of vendor doing business with the governmental entity

Date

This form must be notarized

New Caney Independent School District

VENDOR ACCEPTANCE FORM

I affirm, to the best of my knowledge, this proposal has been arrived at independently and is submitted without collusion with anyone to obtain information that would in any way limit competition in the award of this proposal.

I affirm that, to the best of my knowledge the company I represent meets Equal Employment Opportunity Commission standards and American Disability Act standards in employment practices.

I affirm, to the best of my knowledge, that the District has been notified in writing of any owner or operator of my business who has a felony conviction.

NAME OF COMPANY (Please Type)

MAILING ADDRESS	CITY	STATE	ZIP
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CONTACT E-MAIL ADDRESS

PHYSICAL ADDRESS	CITY	STATE	ZIP
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PREPARED BY (Please Type) TITLE

TELEPHONE NUMBER FAX NUMBER DATE

SIGNATURE

SUBSCRIBED AND SWORN to before me on this _____ day of _____

Notary Public

Print Name

My Commission Expires: _____

Deviation/Compliance Signature Form

Company Name

Address

City

State

Phone Number

Fax Number

If the undersigned Fundraiser Company intends to deviate from the General Terms and Conditions or Specifications listed in this proposal invitation, all such deviations must be listed on this page, with complete and detailed conditions and information included or attached. The program will consider any deviations in its proposal award decisions, and the program reserves the right to accept or reject any proposal based upon any deviations indicated below or in any attachments or inclusions.

In the absence of any deviation entry on this form, the proposer assures the program of their full compliance with the General Terms and Conditions, items Specifications, and all other information contained in this proposal invitation.

☐ No Deviations

☐ Yes Deviations

List any deviations your company is submitting below:

Signature of Authorized Representative

Date