

**Central Community Unit School District 301
BOARD OF EDUCATION**

Date: August 18, 2025

Place: **Central 301 District Office**
275 South St
P.O. Box 396
Burlington, IL 60109

Time: **5:30 PM**

Agenda

The Board will hold a closed session meeting beginning at 5:30 p.m. The open meeting will be held in public beginning at 6:00 p.m. and streamed. Members of the public will be able to view the meeting on the 301 Board of Education YouTube Channel stream starting at 6:00 p.m. and the recording will be available on the 301 Board of Education YouTube Channel following the meeting.

1. Call Meeting to Order
 - A. Closed Session
Adjourn to Closed Session to Hear Information Regarding: The appointment, employment, resignation, compensation, discipline, performance, or dismissal of specific employees of the public body [5 ILCS 120/2(c)(1)].
 - B. Adjourn to Open Session
 - C. Roll Call
 - D. Pledge of Allegiance
 - E. Approval of Agenda
2. FY 26 Northern Kane Budget Hearing
 - A. Public Comment on FY26 Northern Kane Budget
 - B. Close Hearing
3. Public Open Forum
 - A. Recognition of Visitors
 - B. Public Comment
4. Action Items
 - A. Consent Agenda
 - 1) Meeting Minutes July 21, 2025 Regular Board Meeting 3
 - 2) Executive Session Minutes July 21, 2025
 - 3) Treasurer's Report 8
 - 4) Payment of Bills 16
 - 5) Payment of Bills - Northern Kane County Regional Vocational System 67
 - 6) Personnel Report 71
 - 7) Textbook Adoption for High School AP German Book 73
 - 8) Textbook Adoption for High School Physics Book 75
 - 9) MOU Between the Board of Education of Central Community Unit School District 301 and the Central Education Association, IEA - NEA 77
 - 10) MOU Between the Board of Education of Central Community Unit School District 301, Northern Kane Region 110 and Fox College, INC 78
 - 11) Annual Review of Hazardous Bus Routes 82
 - 12) Temporary Facility Annual Report 102
 - B. Approval of Burlington Central High School Graduation Event Agreement with NIU 119
 - C. Approval of Veterinary Affiliation Agreement 143
 - D. Resolution to Adopt Annual Budget and Appropriation Ordinance for Fiscal Year July 1, 2025, and ending June 30, 2026 316
5. Old Business (Action) 317
 - A. Approval of the FY26 Northern Kane Budget
6. Old Business (Discussion) 341
 - A. Facilities Update
 - B. CHS Parking
7. New Business (Discussion) 350
 - A. Extra Curricular and Co-Curricular Future Program¹

| | | |
|-----|---|-----|
| B. | Presentation of the Preliminary Budget for FY26 | 361 |
| 8. | Information Only | |
| A. | FOIA Reports | 420 |
| B. | Dates for Superintendent Search | 422 |
| 9. | Agenda Items for September 15, 2025, BOE Meeting | |
| 10. | Closed Session | |
| A. | Adjourn to Closed Session to Hear Information Regarding: <i>The appointment, employment, resignation, compensation, discipline, performance, or dismissal of specific employees of the public body [5 ILCS 120/2(c)(1)]. Collective negotiating matters between the public body and its employees or their representatives [5 ILCS 120/2(c)(2)]. Litigation, when an action against, affecting or on behalf of the particular public body has been filed and is pending before a court or administrative tribunal, or when the public body finds that an action is probable or imminent [5 ILCS 120/2(c)(11)].</i> | |
| B. | Adjourn to Open Session | |
| 11. | Open Session | |
| A. | Motion to Approve the Contract Between CEA and Central 301 Board of Education | |
| B. | Motion to Approve Salary Increases for Non - Union Employees, Employed Prior to July 1, 2025 | |
| C. | Appointment of Interim Superintendent | |
| 12. | Adjourn | |

**Central Community Unit School District 301
Board of Education Minutes DRAFT**

Where: Central CUSD #301 District Office
Date: July 21, 2025

Meeting: Regular
Time: 5:00 p.m. Closed
6:00 p.m. Regular

Board Members Present

| | |
|----------------|-------------------------|
| Andrew Dogan | Y |
| Jeff Gorman | Y |
| Chad Herst | Y |
| Scott Mrkvicka | N |
| Morgan Pappas | Y |
| Danielle Ward | Y Sworn in at 6:02 p.m. |
| Ryan Wasson | N |

BOE Meeting

1. Meeting Call to Order -Vice President Pappas called the meeting to order at 5:01 p.m.
 - 1.A Roll Call - Vice President Pappas called the meeting to order and roll call was taken. 5:02 p.m
 - 1.B Oath of Office - Oath of office was tabled and moved to after the Closed Session.
2. Closed Session - The Board adjourned to Closed Session for exceptions 2(c)1 at 5:05 p.m.

Motion by Gorman, second by Dogan, to adjourn to closed session at 5:05 p.m.

Voting Yes: Gorman, Herst, Pappas, Dogan
Voting No: None
Absent: Mrkvicka, Wasson

 2. B Open Session - The Board adjourned to open session at 5:54 p.m.

Motion by Gorman, second by Dogan, to adjourn to open session at 5:54 p.m. The motion passed by unanimous voice vote.
3. Meeting Call to Order - Vice President Pappas called the meeting to order at 6:02 p.m. and roll call was taken.

Roll was taken at 6:02

Present: Ward, Dogan, Gorman, Pappas, Herst
Absent: Mrkvicka, Wasson

3.A Approval of the Agenda - Motion made to approve the agenda as amended.

Motion by Herst, second by Dogan, to approve the agenda as amended. The motion passed by unanimous voice vote.

4. Pledge of Allegiance - Everyone joined in reciting the Pledge.

4.B Oath of Office - Danielle Ward took the Oath of Office and was seated with the Board.

5. Public Open Forum

5.A Recognition of Visitors – Vice President Pappas and Dr. Griff Powell welcomed visitors.

5.B Public Comments - Community members spoke of transparency in the hiring process, interest in adding a tennis team to the high school as well as a boys volleyball team. A member of the United States Tennis Association (USTA) shared information on grants and services available. Budget concerns were brought up as well as the hiring of a principal.

6. Special Presentations

6. A A financial Presentation was given by Business Manager Daina Pflug and the District Auditor, Cheryden Juergensen, gave a report on district finance and the future audit. The Auditor also let the Board know that they were always available for questions concerning the financial concerns of the district. The Board had no questions and the presentation ended.

7. Action Reports

7. A Consent Agenda – The Board approved the consent agenda items as amended

1. Minutes
2. Treasurers Report
3. Payment of Bills
4. Payment of Bills Northern Kane County Regional Vocational System.
5. NIA Executive Board Ballot
6. 2025-2026 Student Family Handbook.
7. Personnel Report
8. Approval of Check Signers for the CHS Imprest and Activity Accounts
9. Tentative FY26 Budget for Northern Kane
10. Textbook Adoption for High School AP German Book
11. Textbook Adoption for High School Physics Book

Motion by Herst second by Dogan, to approve the Consent Agenda.

Voting Yes: Ward, Dogan, Gorman, Herst, Pappas

Voting No: None

Absent: Mrkvicka, Wasson

- 7 .B Release of Executive Minutes - The Board approved the release of the May 13, 2025 Executive Session Minutes only on the advice of the district attorney.

Motion by Herst second by Dogan, to approve the release of Executive Session Minutes from May 13, 2025.

Voting Yes: Ward, Dogan, Gorman, Herst, Pappas

Voting No: None

Absent: Mrkvicka, Wasson

8. Intergovernmental Agreement by and between the Board of Education of Central Community Unit School District #301 County of Kane, and Kane County Sheriff's Office - The Board approved the agreement between Central District 301 and the Kane County Sheriff's office.

Motion by Gorman, second by Dogan, approve the intergovernmental Agreement between Central 301 and Kane County Sheriff's office.

Voting Yes: Gorman, Herst, Pappas, Dogan, Ward

Voting No: None

Absent: Mrkvicka, Wasson

9. Old Business (Discussion)

9. A Facilities Update -Dan Polowy, Facilities Director, provided an update on several key initiatives. He discussed current Capital Projects, including the HBT roof and the CT mobile units that arrived today. Dan also shared that staff members are working regular days this summer, supported by 18 student summer helpers. This additional help is a great benefit, allowing regular employees to take some time off during the summer months. We anticipate being fully prepared for the upcoming school year, as a full-time worker is managing a painting crew that has already completed work at HBT, is currently working on PV, and will finish up at PK. We have a few final aesthetic touches to complete, and then we'll be ready for the new school year.

In other news, Wald (our architect) and the grounds team recently gave approximately 15 members of the Kaneland School District a tour of our fieldhouse. Kaneland is in the process of building their own fieldhouse, and ours is considered state-of-the-art.

Regarding site improvements, CDGS presented a very expansive plan for LL, with a basic review fee estimated between five and seven thousand dollars. If the Board is interested in pursuing this, Dan can certainly look into it further.

Finally, our new athletic director, Mike Sitter, is actively working on updating facility agreements. This school year, we will be charging fees to our feeder groups, and we are in the process of finalizing that data. We hope to provide a more comprehensive update in August.

9. B Non - Union Compensation study - Dr. Powell shared that the initial quote for the study was cost-prohibitive, so he's exploring an alternative by seeking assistance from a graduate student at a local University.

10. New Business

- 10.A Capital Projects - Dan Polowy, Facilities Director, shared our 3-5 year Capital Projects plan, which Business Manager Daina Pflug also discussed. With the new Facilities Committee, which includes two board members, we're generating more ideas and moving forward efficiently.

Our project budgets are currently rough estimates since material, labor, and bid costs are still unknown. For capital projects, our top priorities are operational essentials: roofs, exterior work, mechanical systems, HVAC, electrical, and plumbing.

We're currently working on the HBT roof, which will be our last major roof project for roughly 10 years. While we have a couple of minor paving projects planned, all our major pavement is new.

On the immediate docket: LL HVAC. This is a priority project we need to evaluate, and it will likely cost around \$2 million to keep the system operational.

The high school track was last resurfaced 15 years ago and is now past its life expectancy. It's heavily used by both high school and middle school track teams, as well as for PE classes. We'll need to put this out for bid in August, but that doesn't commit us to spending the money yet. A future "Phase Two," looking towards 2029, would involve discussions about new bleachers, a press box, turf, and a ticket booth.

- 10.B Installation of Sink and Water Connections in the High School Addition-We installed the well in the new addition to supply water to the new washrooms. While the idea of using this area for CTE came up, it was never a viable option. Adding sinks for CTE would incur an astronomical cost, and water access isn't a prerequisite for every CTE space

11. Information Only

- 11.A FOIA Report- The FOIA report is included in the packet.

12. Adjourn to Closed Session

- 12.A The Board adjourned to Closed Session for exceptions *The appointment, employment, resignation, compensation, discipline, performance, or dismissal of specific employees of the public body [5 ILCS 120/2(c)(1)]. Collective negotiating matters between the public body and its employees or their representatives [5 ILCS 120/2(c)(2)]. Litigation, when an action against, affecting or on behalf of the particular public body has been filed and is pending before a court or administrative tribunal, or when the public body finds that an action is probable or imminent [5 ILCS 120/2(c)(11)].* at 7:19 p.m.

Motion by Gorman, second by Dogan, to adjourn to closed session at 7:19 p.m.

Voting Yes: Pappas, Dogan, Gorman, Herst, Ward

Voting No: None

Absent: Mrkvicka, Wasson

Adjourn to Open Session

- 12.B The Board adjourned to open session at 8:29

**Motion by Herst, second by Dogan to adjourn to Open Session at 8:29 p.m.
Passed by unanimous voice vote.**

13. Open Session

13.A Motion to Approve Salary Increase for Non-Union Employees, employed prior to July 1, 2025

Motion by Doga, second by Herst, to Approve Salary for all non-union employees.

Voting Yes: Dogan

Voting No: Pappas, Ward, Gorman, Herst

Absent: Mrkvicka, Wasson

13.B Agenda Items for August Board Meeting

Preliminary Budget for FY 2026

Approval of Northern Kane County Vocational Systems Budget 2025-2026

Approval of CEA Contract

Not Discussed

14.. Adjourn

Motion by Herst, second by Dogan to Adjourn and approved by unanimous voice vote at 8:35 p.m.

Board President

Board Secretary

Treasurer's Report

| July | 2025-2026 | | Central Cmty USD 301, IL | |
|--|----------------------|----------------------|--------------------------|----------------------|
| Account Description | Beginning Balance | Debit | Credit | Ending Balance |
| 10 - EDUCATIONAL FUND | | | | |
| IMPREST-DISTRICT | 2,708.42 | 5,000.00 | 4,299.48 | 3,408.94 |
| IMPREST-CHS | 2,578.85 | 0.00 | 0.00 | 2,578.85 |
| CHECKING-EDUCATION | 409,869.69 | 8,181,520.75 | 3,737,732.60 | 4,853,657.84 |
| CHECKING-PAYROLL | 1,742.27 | 2,816,676.16 | 2,816,812.78 | 1,605.65 |
| FLEX ACCOUNT | 13,567.24 | 12,559.42 | 12,939.84 | 13,186.82 |
| PETTY CASH | 1,380.00 | 0.00 | 0.00 | 1,380.00 |
| INVESTMENT-SWEEP | 25,123,195.67 | 884,631.82 | 7,459,062.03 | 18,548,765.46 |
| CHS ACTIVITY CHECKING | 456,790.58 | 17,762.75 | 29,401.43 | 445,151.90 |
| ELEM/MS ACTIVITY CHECKING | 44,927.53 | 0.00 | 0.00 | 44,927.53 |
| Totals for Fund: 10 - EDUCATIONAL FUND | 26,056,760.25 | 11,918,150.90 | 14,060,248.16 | 23,914,662.99 |
| 20 - OPERATIONS AND MAINTENANCE | | | | |
| CHECKING-O&M | 195,281.41 | 1,805,951.60 | 1,528,082.28 | 473,150.73 |
| CHECKING-PAYROLL | 1,537.70 | 214,390.27 | 214,515.75 | 1,412.22 |
| INVESTMENT-SWEEP | 5,617,353.31 | 183,027.27 | 1,800,000.00 | 4,000,380.58 |
| Totals for Fund: 20 - OPERATIONS AND MAINTENANCE | 5,814,172.42 | 2,203,369.14 | 3,542,598.03 | 4,474,943.53 |
| 30 - DEBT SERVICE, BOND & INTEREST | | | | |
| CHECKING-DEBT SERVICE | 7,912.04 | 34,900.14 | 950.00 | 41,862.18 |
| INVESTMENT-SWEEP | 6,334,997.08 | 193,793.67 | 0.00 | 6,528,790.75 |
| Totals for Fund: 30 - DEBT SERVICE, BOND & INTEREST | 6,342,909.12 | 228,693.81 | 950.00 | 6,570,652.93 |
| 40 - TRANSPORTATION FUND | | | | |
| CHECKING-TRANSPORTATION | 40,736.05 | 1,700,631.31 | 1,653,151.55 | 88,215.81 |
| CHECKING-PAYROLL | 1,383.22 | 229,996.06 | 229,834.10 | 1,545.18 |
| INVESTMENT-SWEEP | 8,225,856.42 | 85,692.17 | 1,700,000.00 | 6,611,548.59 |
| Totals for Fund: 40 - TRANSPORTATION FUND | 8,267,975.69 | 2,016,319.54 | 3,582,985.65 | 6,701,309.58 |
| 50 - IMRF/SOCIAL SECURITY | | | | |
| CHECKING-IMRF/SS | 2,376.18 | 275,307.80 | 243,534.85 | 34,149.13 |
| CHECKING-PAYROLL | 0.00 | 75,502.85 | 75,502.85 | 0.00 |
| INVESTMENT-SWEEP | 3,431,310.89 | 69,266.56 | 200,000.00 | 3,300,577.45 |
| Totals for Fund: 50 - IMRF/SOCIAL SECURITY | 3,433,687.07 | 420,077.21 | 519,037.70 | 3,334,726.58 |
| 60 - CAPITAL PROJECTS | | | | |
| CHECKING-CAPITAL PROJECT | 2,243,393.14 | 0.00 | 0.00 | 2,243,393.14 |
| INVESTMENT-SWEEP | 3,245,640.41 | 10,199.78 | 0.00 | 3,255,840.19 |

Treasurer's Report

| July | 2025-2026 | Central Cmty USD 301, IL | | |
|--|--------------------------|--------------------------|----------------------|-----------------------|
| Account Description | Beginning Balance | Debit | Credit | Ending Balance |
| 60 - CAPITAL PROJECTS | | | | |
| Totals for Fund: 60 - CAPITAL PROJECTS | 5,489,033.55 | 10,199.78 | 0.00 | 5,499,233.33 |
| 70 - WORKING CASH FUND | | | | |
| CHECKING-WORKING CASH | 512.70 | 0.00 | 0.00 | 512.70 |
| INVESTMENT-SWEEP | 3,249,744.44 | 12,206.81 | 0.00 | 3,261,951.25 |
| Totals for Fund: 70 - WORKING CASH FUND | 3,250,257.14 | 12,206.81 | 0.00 | 3,262,463.95 |
| 80 - TORT FUND | | | | |
| CHECKING-TORT | 16,399.96 | 280,000.00 | 228,878.24 | 67,521.72 |
| INVESTMENT-SWEEP | 443,349.52 | 19,527.57 | 280,000.00 | 182,877.09 |
| Totals for Fund: 80 - TORT FUND | 459,749.48 | 299,527.57 | 508,878.24 | 250,398.81 |
| | Beginning Balance | Debit | Credit | Ending Balance |
| Grand Totals: | 59,114,544.72 | 17,108,544.76 | 22,214,697.78 | 54,008,391.70 |

Impact Fee Analysis

| Date | City/Village | Amount | Houses | Transition Fees | Fund | YTD | YTD |
|-------------------|-----------------------------|----------------------------------|------------|---------------------|-------------------|------------|-----|
| FY26 | | (Capital Projects/Debt Svc fund) | | (Ed fund) | | | |
| 7/16/2025 | City of Elgin (June) | 34,900.14 | 6 | 0.00 | Debt Svc | 34,900.14 | 6 |
| Total FY26 | | \$ 34,900.14 | 6 | \$ - | | | |
| | <i>Budget FY26-Cap Proj</i> | | | | | | |
| | <i>Budget FY26-Debt Svc</i> | | | | | | |
| FY25 | | (Capital Projects/Debt Svc fund) | | (Ed fund) | | | |
| 7/17/2024 | City of Elgin (June) | 164,660.10 | 13 | 0.00 | Debt Svc | 164,660.10 | 13 |
| 8/28/2024 | City of Elgin (July) | 165,604.06 | 22 | 2,095.02 | Debt Svc | | |
| 10/8/2024 | City of Elgin (Aug) | 93,879.90 | 12 | 3,605.00 | Debt Svc | | |
| 10/22/2024 | City of Elgin (Sept) | 23,652.29 | 4 | 0.00 | Debt Svc | | |
| 11/21/2024 | City of Elgin (Oct) | 88,637.86 | 10 | 0.00 | Debt Svc/Cap Proj | | |
| 12/9/2024 | City of Elgin (Nov) | 76,224.49 | 8 | 0.00 | Capital Projects | | |
| 2/3/2025 | City of Elgin (Dec) | 35,632.56 | 5 | 0.00 | Capital Projects | | |
| 2/18/2025 | City of Elgin (Jan) | 51,293.99 | 9 | 0.00 | Capital Projects | | |
| 3/20/2025 | City of Elgin (Feb) | 76,470.91 | 9 | 0.00 | Capital Projects | | |
| 4/16/2025 | City of Elgin (Mar) | 43,456.93 | 7 | 0.00 | Capital Projects | | |
| 5/14/2025 | City of Elgin (Apr) | 74,032.01 | 14 | 0.00 | Capital Projects | | |
| 6/18/2025 | City of Elgin (May) | 40,102.53 | 5 | 0.00 | Capital Projects | | |
| Total FY25 | | \$ 933,647.63 | 118 | \$ 5,700.02 | | | |
| | <i>Budget FY25-Cap Proj</i> | 783,875.00 | | 50,000.00 | | | |
| | <i>Budget FY25-Debt Svc</i> | 516,125.00 | | | | | |
| FY24 | | (Capital Projects/Debt Svc fund) | | (Ed fund) | | | |
| 7/24/2023 | City of Elgin (June) | 176,832.85 | 23 | 10,815.00 | Debt Svc | 176,832.85 | 23 |
| 8/4/2023 | City of Elgin (July) | 180,868.94 | 20 | 0.00 | Debt Svc | | |
| 9/18/2023 | City of Elgin (Aug) | 138,819.68 | 15 | 0.00 | Debt Svc | | |
| 10/10/2023 | City of Elgin (Sept) | 77,817.32 | 11 | 0.00 | Debt Svc/Cap Proj | | |
| 11/10/2023 | City of Elgin (Oct) | 123,632.15 | 13 | 0.00 | Capital Projects | | |
| 12/12/2023 | City of Elgin (Nov) | 153,710.28 | 16 | 0.00 | Capital Projects | | |
| 1/10/2024 | City of Elgin (Dec) | 77,969.08 | 11 | 0.00 | Capital Projects | | |
| 2/13/2024 | City of Elgin (Jan) | 94,529.94 | 12 | 0.00 | Capital Projects | | |
| 3/19/2024 | City of Elgin (Feb) | 21,883.24 | 3 | 0.00 | Capital Projects | | |
| 4/11/2024 | City of Elgin (Mar) | 8,042.63 | 1 | 0.00 | Capital Projects | | |
| 5/14/2024 | City of Elgin (Apr) | 123,055.96 | 19 | 39,655.00 | Capital Projects | | |
| 6/20/2024 | City of Elgin (May) | 324,743.93 | 34 | 0.00 | Capital Projects | | |
| Total FY24 | | \$ 1,501,906.00 | 178 | \$ 50,470.00 | | | |
| | <i>Budget FY24-Cap Proj</i> | 486,350.00 | | 30,000.00 | | | |
| | <i>Budget FY24-Debt Svc</i> | 513,650.00 | | | | | |

MEMORANDUM

TO: Dr. Griff Powell, Dr. Kyle Schumacher, Co-Interim Superintendents,
Board of Education

FROM: Daina Pflug, Business Manager

DATE: August 18, 2025

RE: Board Financial Report

- The Revenue and Expenditure Summary Reports are included in the board packet. Revenues are currently at 1.95% compared to 3.09% a year ago. Expenditures are trending at 7.97% as compared to 9.41% a year ago.
- No impact fees or transition fees came in this month.
- The bills payable reports for both Central 301 and Northern Kane are typical for the month of August.
- Annual audits begin August 18, 2025 for both Central 301 and Northern Kane.

Central Community Unit School Dist. 301
Expenditure Summary by Fund Report
July 2025

| | 2024-25 Original Budget | % of Fund | July MTD | 2025-26 FYTD | Encumbered Amount | Budget Remaining | FYTD Percent |
|--|----------------------------|----------------|---------------------|---------------------|----------------------|-----------------------|-----------------|
| 10-Education | | | | | | | |
| 1000 Salaries | 35,112,927.00 | 44.04% | 2,811,443.85 | 2,811,443.85 | - | 32,301,483.15 | 8.01% |
| 2000 Benefits | 10,668,009.00 | 13.38% | 842,435.58 | 842,435.58 | 4,050.00 | 9,821,523.42 | 7.93% |
| 3000 Purchased Services | 3,459,123.00 | 4.34% | 282,718.05 | 282,718.05 | 284,790.29 | 2,891,614.66 | 16.41% |
| 4000 Supplies | 3,682,956.00 | 4.62% | 14,283.33 | 14,283.33 | 293,195.75 | 3,375,476.92 | 8.35% |
| 5000 Capital Outlay | 257,000.00 | 0.32% | (12,000.00) | (12,000.00) | 25,667.27 | 243,332.73 | 5.32% |
| 6000 Other/Dues/Fees | 25,227,019.00 | 31.64% | 38,738.11 | 38,738.11 | 2,980.08 | 25,185,300.81 | 0.17% |
| 7000 Non-Capital Equipment | 1,329,914.00 | 1.67% | 599.99 | 599.99 | 23,633.07 | 1,305,680.94 | 1.82% |
| Total Education Fund | 79,736,948.00 | 100.00% | 3,978,218.91 | 3,978,218.91 | 634,316.46 | 75,124,412.63 | 5.78% |
| 20-O&M | | | | | | | |
| 1000 Salaries | 2,331,123.00 | 15.79% | 213,040.27 | 213,040.27 | - | 2,118,082.73 | 9.14% |
| 2000 Benefits | 647,620.00 | 4.39% | 49,805.66 | 49,805.66 | - | 597,814.34 | 7.69% |
| 3000 Purchased Services | 1,267,300.00 | 8.58% | 31,963.89 | 31,963.89 | 142,241.45 | 1,093,094.66 | 13.75% |
| 4000 Supplies | 1,892,000.00 | 12.82% | 123,684.64 | 123,684.64 | 185,767.31 | 1,582,548.05 | 16.36% |
| 5000 Capital Outlay | 8,472,000.00 | 57.38% | 1,101,772.00 | 1,101,772.00 | 552,994.70 | 6,817,233.30 | 19.53% |
| 6000 Other/Dues/Fees | 53,800.00 | 0.36% | - | - | - | 53,800.00 | 0.00% |
| 7000 Non-Capital Equipment | 100,000.00 | 0.68% | 3,880.61 | 3,880.61 | 5,880.05 | 90,239.34 | 9.76% |
| Total O&M | 14,763,843.00 | 100.00% | 1,524,147.07 | 1,524,147.07 | 886,883.51 | 12,352,812.42 | 16.33% |
| 30-Debt Service | | | | | | | |
| 3000 Purchased Services | 2,000.00 | 0.02% | 950.00 | 950.00 | - | 1,050.00 | 47.50% |
| 6000 Other/Bonds | 9,407,326.00 | 99.98% | - | - | - | 9,407,326.00 | 0.00% |
| Total Debt Service | 9,409,326.00 | 100.00% | 950.00 | 950.00 | - | 9,408,376.00 | 0.01% |
| 40-Transportation | | | | | | | |
| 1000 Salaries | 2,611,185.00 | 40.31% | 229,572.65 | 229,572.65 | - | 2,381,612.35 | 8.79% |
| 2000 Benefits | 305,675.00 | 4.72% | 23,579.72 | 23,579.72 | - | 282,095.28 | 7.71% |
| 3000 Purchased Services | 2,880,200.00 | 44.47% | 1,394,057.19 | 1,394,057.19 | 649.11 | 1,485,493.70 | 48.42% |
| 4000 Supplies | 582,000.00 | 8.99% | 4,246.01 | 4,246.01 | 11,380.33 | 566,373.66 | 2.68% |
| 5000 Capital Outlay | 29,000.00 | 0.45% | - | - | - | 29,000.00 | 0.00% |
| 6000 Other/Dues/Fees | 63,500.00 | 0.98% | 177.50 | 177.50 | - | 63,322.50 | 0.28% |
| 7000 Non-Capital Equipment | 5,500.00 | 0.08% | - | - | - | 5,500.00 | 0.00% |
| Total Transportation | 6,477,060.00 | 100.00% | 1,651,633.07 | 1,651,633.07 | 12,029.44 | 4,813,397.49 | 25.69% |
| 50-IMRF/SS | | | | | | | |
| 2000 Benefits | 2,029,017.00 | 100.00% | 168,227.05 | 168,227.05 | - | 1,860,789.95 | 8.29% |
| Total IMRF/SS | 2,029,017.00 | 100.00% | 168,227.05 | 168,227.05 | - | 1,860,789.95 | 8.29% |
| 60-Capital Projects | | | | | | | |
| 5000 Capital Outlay | 875,000.00 | 100.00% | - | - | - | 875,000.00 | 0.00% |
| Total Capital Projects | 875,000.00 | 100.00% | - | - | - | 875,000.00 | 0.00% |
| 70-Working Cash | | | | | | | |
| 6000 Transfers | - | - | - | - | - | - | 0.00% |
| Total Working Cash | - | 0.00% | - | - | - | - | 0.00% |
| 80-Tort | | | | | | | |
| 3000 Purchased Services | 1,184,616.00 | 100.00% | 228,878.24 | 228,878.24 | 39,419.25 | 916,318.51 | 22.65% |
| Total Tort | 1,184,616.00 | 100.00% | 228,878.24 | 228,878.24 | 39,419.25 | 916,318.51 | 22.65% |
| Total Expenditures | 114,475,810.00 | | 7,552,054.34 | 7,552,054.34 | 1,572,648.66 | 105,351,107.00 | 7.97% |
| Expenditures Across All Funds | | | | | | | |
| 1000 Salaries | 40,055,235.00 | 34.99% | 3,254,056.77 | 3,254,056.77 | - | 36,801,178.23 | 8.12% |
| 2000 Benefits | 13,650,321.00 | 11.92% | 1,084,048.01 | 1,084,048.01 | 4,050.00 | 12,562,222.99 | 7.97% |
| 3000 Purchased Services | 8,793,239.00 | 7.68% | 1,938,567.37 | 1,938,567.37 | 467,100.10 | 6,387,571.53 | 27.36% |
| 4000 Supplies | 6,156,956.00 | 5.38% | 142,213.98 | 142,213.98 | 490,343.39 | 5,524,398.63 | 10.27% |
| 5000 Capital Outlay | 9,633,000.00 | 8.41% | 1,089,772.00 | 1,089,772.00 | 578,661.97 | 7,964,566.03 | 17.32% |
| 6000 Other/Dues/Fees/Bonds | 34,751,645.00 | 30.36% | 38,915.61 | 38,915.61 | 2,980.08 | 34,709,749.31 | 0.12% |
| 7000 Non-Capital Equipment | 1,435,414.00 | 1.25% | 4,480.60 | 4,480.60 | 29,513.12 | 1,401,420.28 | 2.37% |
| Total Expenditures Across all Funds | 114,475,810.00 | 100.00% | 7,552,054.34 | 7,552,054.34 | 1,572,648.66 | 105,351,107.00 | 7.97% |

Central Community Unit School Dist. 301
Revenue Summary Report
July 2025

| | 2024-25 Original Budget | % of Fund | July MTD | 2025-26 FYTD | Remaining Budget | FYTD Percent |
|--|----------------------------|----------------|---------------------|---------------------|-----------------------|-----------------|
| <u>10-Education Fund</u> | | | | | | |
| Total Local Revenue | 46,630,998.00 | 58.59% | 1,458,800.40 | 1,458,800.40 | 45,172,197.60 | 3.13% |
| Total State Revenue | 30,548,570.00 | 38.38% | 11,720.07 | 11,720.07 | 30,536,849.93 | 0.04% |
| Total Federal Revenue | 2,405,488.00 | 3.02% | 106,073.55 | 106,073.55 | 2,299,414.45 | 4.41% |
| Total Education Fund | 79,585,056.00 | 100.00% | 1,576,594.02 | 1,576,594.02 | 78,008,461.98 | 1.98% |
| <u>20-O&M Fund</u> | | | | | | |
| Total Local Revenue | 8,237,066.00 | 66.98% | 184,794.47 | 184,794.47 | 8,052,271.53 | 2.24% |
| Total State Revenue | 4,050,000.00 | 32.93% | - | - | 4,050,000.00 | 0.00% |
| Total Federal Revenue | 10,000.00 | 0.08% | - | - | 10,000.00 | 0.00% |
| Total O&M Fund | 12,297,066.00 | 100.00% | 184,794.47 | 184,794.47 | 12,112,271.53 | 1.50% |
| <u>30-Debt Service Fund</u> | | | | | | |
| Total Local Revenue | 9,858,328.00 | 100.00% | 228,693.81 | 228,693.81 | 9,629,634.19 | 2.32% |
| Total Debt Service Fund | 9,858,328.00 | 100.00% | 228,693.81 | 228,693.81 | 9,629,634.19 | 2.32% |
| <u>40-Transportation Fund</u> | | | | | | |
| Total Local Revenue | 3,284,676.00 | 52.75% | 85,692.17 | 85,692.17 | 3,198,983.83 | 2.61% |
| Total State Revenue | 2,941,840.00 | 47.25% | - | - | 2,941,840.00 | 0.00% |
| Total Transportation Fund | 6,226,516.00 | 100.00% | 85,692.17 | 85,692.17 | 6,140,823.83 | 1.38% |
| <u>50-IMRF/SS Fund</u> | | | | | | |
| Total Local Revenue | 2,045,760.00 | 100.00% | 69,266.56 | 69,266.56 | 1,976,493.44 | 3.39% |
| Total IMRF/SS Fund | 2,045,760.00 | 100.00% | 69,266.56 | 69,266.56 | 1,976,493.44 | 3.39% |
| <u>60-Capital Projects Fund</u> | | | | | | |
| Total Local Revenue | 875,875.00 | 100.00% | 10,199.78 | 10,199.78 | 865,675.22 | 1.16% |
| Total Capital Projects Fund | 875,875.00 | 100.00% | 10,199.78 | 10,199.78 | 865,675.22 | 1.16% |
| <u>70-Working Cash Fund</u> | | | | | | |
| Total Local Revenue | 175,356.00 | 100.00% | 12,206.81 | 12,206.81 | 163,149.19 | 6.96% |
| Total Working Cash Fund | 175,356.00 | 100.00% | 12,206.81 | 12,206.81 | 163,149.19 | 6.96% |
| <u>80-Tort Fund</u> | | | | | | |
| Total Local Revenue | 1,085,811.00 | 100.00% | 19,527.57 | 19,527.57 | 1,066,283.43 | 1.80% |
| Total Tort Fund | 1,085,811.00 | 100.00% | 19,527.57 | 19,527.57 | 1,066,283.43 | 1.80% |
| Revenue-All Funds | | | | | | |
| 1000 Total Local Revenue | 72,193,870.00 | 64.37% | 2,069,181.57 | 2,069,181.57 | 70,124,688.43 | 2.87% |
| 3000 Total State Revenue | 37,540,410.00 | 33.47% | 11,720.07 | 11,720.07 | 37,528,689.93 | 0.03% |
| 4000 Total Federal Revenue | 2,415,488.00 | 2.15% | 106,073.55 | 106,073.55 | 2,309,414.45 | 4.39% |
| Total Revenue-All Funds | 112,149,768.00 | 100.00% | 2,186,975.19 | 2,186,975.19 | 109,962,792.81 | 1.95% |

Central Community Unit School Dist. 301
Revenue Detail Report
July 2025

| Account Number | Description | 2024-25 | July | 2025-26 | Remaining Budget | FYTD |
|------------------------------|-----------------------------------|----------------------|---------------------|---------------------|----------------------|--------------|
| | | Original Budget | MTD | FYTD | | Percent |
| 10R000 1110 0000 | TAXES | 34,978,785.00 | 661,879.71 | 661,879.71 | 34,316,905.29 | 1.89% |
| 10R000 1140 0000 | SPECIAL ED TAXES | 7,668,763.00 | 143,799.75 | 143,799.75 | 7,524,963.25 | 1.88% |
| 10R001 1510 0000 | INTEREST | 528,000.00 | 78,952.36 | 78,952.36 | 449,047.64 | 14.95% |
| 10R002 1611 0000 | LUNCH, STUDENTS | 1,190,000.00 | 2,627.35 | 2,627.35 | 1,187,372.65 | 0.22% |
| 10R002 1620 0000 | LUNCH, ADULTS | 2,450.00 | - | - | 2,450.00 | 0.00% |
| 10R000 1711 0000 | ATHLETIC ADMISSION | 45,000.00 | - | - | 45,000.00 | 0.00% |
| 10R000 1720 0000 | ATHLETIC PART FEE | 154,000.00 | 80.00 | 80.00 | 153,920.00 | 0.05% |
| 10R002 1720 0000 | OTHER FEES | 264,000.00 | 3,798.00 | 3,798.00 | 260,202.00 | 1.44% |
| 10R000 1799 0000 | ACTIVITY ACCOUNTS REVENUE | 677,000.00 | 17,762.75 | 17,762.75 | 659,237.25 | 2.62% |
| 10R000 1811 0000 | TEXTBOOK INCOME | 615,000.00 | 164,552.08 | 164,552.08 | 450,447.92 | 26.76% |
| 10R000 1830 0000 | TECHNOLOGY FEES | 225,000.00 | 84,532.50 | 84,532.50 | 140,467.50 | 37.57% |
| 10R000 1930 0000 | TRANSITION FEES | 50,000.00 | - | - | 50,000.00 | 0.00% |
| 10R000 1950 0000 | REFUND OF PRIOR YEAR EXPEND | 100,000.00 | 259,300.47 | 259,300.47 | (159,300.47) | 259.30% |
| 10R000 1970 0000 | DRIVERS ED B-T-W | 20,000.00 | 750.00 | 750.00 | 19,250.00 | 3.75% |
| 10R002 1991 0000 | CAREER PATHWAYS | 63,000.00 | 37,500.00 | 37,500.00 | 25,500.00 | 59.52% |
| 10R000 1999 0000 | OTHER LOCAL REVENUES | 50,000.00 | 3,265.43 | 3,265.43 | 46,734.57 | 6.53% |
| Total Local Revenue | | 46,630,998.00 | 1,458,800.40 | 1,458,800.40 | 45,172,197.60 | 3.13% |
| 10R000 3001 0000 | EVIDENCE-BASE FUNDING | 10,765,688.00 | - | - | 10,765,688.00 | 0.00% |
| 10R001 3001 0000 | EVIDENCE-BASE FUNDING-MV COOP | 50,000.00 | - | - | 50,000.00 | 0.00% |
| 10R002 3001 0000 | EVIDENCE BASED FUNDING-ALOP | 67,000.00 | 10,676.51 | 10,676.51 | 56,323.49 | 15.94% |
| 10R000 3100 0000 | SPECIAL ED - PRIVATE FACILITY | 1,000,000.00 | - | - | 1,000,000.00 | 0.00% |
| 10R000 3120 0000 | SPECIAL ED - ORPHANAGE | 32,396.00 | - | - | 32,396.00 | 0.00% |
| 10R000 3220 0000 | CAREER & TECHNICAL EDUCATION | 146,162.00 | - | - | 146,162.00 | 0.00% |
| 10R000 3235 0000 | CTE AGRICULTURE EDUCATION | 3,869.00 | 700.00 | 700.00 | 3,169.00 | 18.09% |
| 10R002 3235 0000 | CTE FFA 3 CIRCLES GRANT | 32,245.00 | - | - | 32,245.00 | 0.00% |
| 10R000 3360 0000 | STATE FREE LUNCH & BREAKFAST | 4,000.00 | 343.56 | 343.56 | 3,656.44 | 8.59% |
| 10R000 3370 0000 | DRIVER ED | 37,200.00 | - | - | 37,200.00 | 0.00% |
| 10R000 3998 0000 | TRS-ON BEHALF PAYMENTS | 18,306,000.00 | - | - | 18,306,000.00 | 0.00% |
| 10R000 3999 0000 | OTHER STATE REVENUE | 100,000.00 | - | - | 100,000.00 | 0.00% |
| 10R001 3999 0000 | LIBRARY GRANT | 4,010.00 | - | - | 4,010.00 | 0.00% |
| Total State Revenue | | 30,548,570.00 | 11,720.07 | 11,720.07 | 30,536,849.93 | 0.04% |
| 10R000 4210 0000 | NAT'L SCHOOL LUNCH PROGRAM | 535,000.00 | - | - | 535,000.00 | 0.00% |
| 10R000 4300 0000 | TITLE I LOW INCOME | 164,626.00 | - | - | 164,626.00 | 0.00% |
| 10R000 4400 0000 | TITLE IV-A SSAE GRANT | 11,256.00 | - | - | 11,256.00 | 0.00% |
| 10R000 4600 0000 | IDEA PRESCHOOL | 8,425.00 | - | - | 8,425.00 | 0.00% |
| 10R000 4620 0000 | IDEA FLOW THROUGH | 853,974.00 | - | - | 853,974.00 | 0.00% |
| 10R000 4625 0000 | IDEA FLOW THROUGH ROOM & BOARD | 500,000.00 | 26,338.20 | 26,338.20 | 473,661.80 | 5.27% |
| 10R000 4745 0000 | CARL PERKINS | 20,408.00 | - | - | 20,408.00 | 0.00% |
| 10R000 4905 0000 | TITLE III IEP GRANT | 11,900.00 | - | - | 11,900.00 | 0.00% |
| 10R000 4909 0000 | TITLE III ELL-TBE/TPI LIPLEPS | 48,510.00 | - | - | 48,510.00 | 0.00% |
| 10R000 4932 0000 | TITLE II-TEACHER QUALITY | 45,389.00 | - | - | 45,389.00 | 0.00% |
| 10R000 4991 0000 | MEDICAID MATCHING-ADMIN OUTREACH | 65,000.00 | - | - | 65,000.00 | 0.00% |
| 10R000 4992 0000 | MEDICAID MATCHING-FEE FOR SVC | 141,000.00 | 79,735.35 | 79,735.35 | 61,264.65 | 56.55% |
| Total Federal Revenue | | 2,405,488.00 | 106,073.55 | 106,073.55 | 2,299,414.45 | 4.41% |
| Total Education Fund | | 79,585,056.00 | 1,576,594.02 | 1,576,594.02 | 78,008,461.98 | 1.98% |
| 20R000 1111 0000 | TAXES | 7,780,951.00 | 142,976.10 | 142,976.10 | 7,637,974.90 | 1.84% |
| 20R000 1230 0000 | CORP PERSONAL PROPERTY TAX | 130,465.00 | 15,905.37 | 15,905.37 | 114,559.63 | 12.19% |
| 20R001 1510 0000 | INTEREST | 184,650.00 | 24,145.80 | 24,145.80 | 160,504.20 | 13.08% |
| 20R001 1720 0000 | PARKING FEES | 30,000.00 | 100.00 | 100.00 | 29,900.00 | 0.33% |
| 20R000 1910 0000 | RENTALS | 85,000.00 | 1,425.00 | 1,425.00 | 83,575.00 | 1.68% |
| 20R000 1950 0000 | REFUND OF PRIOR YEAR EXPENDITURES | 6,000.00 | - | - | 6,000.00 | 0.00% |
| 20R000 1999 0000 | OTHER REVENUE | 20,000.00 | 242.20 | 242.20 | 19,757.80 | 1.21% |
| Total Local Revenue | | 8,237,066.00 | 184,794.47 | 184,794.47 | 8,052,271.53 | 2.24% |
| 20R000 3001 0000 | EVIDENCE-BASE FUNDING | 4,000,000.00 | - | - | 4,000,000.00 | 0.00% |
| 20R000 3925 0000 | SCHOOL MAINTENANCE GRANT | 50,000.00 | - | - | 50,000.00 | 0.00% |
| Total State Revenue | | 4,050,000.00 | - | - | 4,050,000.00 | 0.00% |
| 20R000 4999 0000 | OTHER FEDERAL REVENUE | 10,000.00 | - | - | 10,000.00 | 0.00% |
| Total Federal Revenue | | 10,000.00 | - | - | 10,000.00 | 0.00% |
| Total O&M Fund | | 12,297,066.00 | 184,794.47 | 184,794.47 | 12,112,271.53 | 1.50% |

Central Community Unit School Dist. 301
Revenue Detail Report
July 2025

| Account Number | Description | 2024-25 Original Budget | July MTD | 2025-26 FYTD | Remaining Budget | FYTD Percent |
|------------------------------------|--------------------------------|----------------------------|---------------------|---------------------|-----------------------|-----------------|
| 30R000 1112 0000 | TAXES | 9,235,403.00 | 173,885.26 | 173,885.26 | 9,061,517.74 | 1.88% |
| 30R001 1510 0000 | INTEREST | 106,800.00 | 19,908.41 | 19,908.41 | 86,891.59 | 18.64% |
| 30R000 1930 0000 | IMPACT FEES | 516,125.00 | 34,900.14 | 34,900.14 | 481,224.86 | 6.76% |
| Total Local Revenue | | 9,858,328.00 | 228,693.81 | 228,693.81 | 9,629,634.19 | 2.32% |
| Total Debt Service Fund | | 9,858,328.00 | 228,693.81 | 228,693.81 | 9,629,634.19 | 2.32% |
| 40R000 1113 0000 | TAXES | 3,102,526.00 | 59,841.53 | 59,841.53 | 3,042,684.47 | 1.93% |
| 40R000 1415 0000 | FIELD TRIP FEES | 7,000.00 | - | - | 7,000.00 | 0.00% |
| 40R001 1510 0000 | INTEREST | 152,150.00 | 25,850.64 | 25,850.64 | 126,299.36 | 16.99% |
| 40R000 1950 0000 | PRIOR YEAR REFUND | 5,000.00 | - | - | 5,000.00 | 0.00% |
| 40R000 1999 0000 | OTHER REVENUE | 18,000.00 | - | - | 18,000.00 | 0.00% |
| Total Local Revenue | | 3,284,676.00 | 85,692.17 | 85,692.17 | 3,198,983.83 | 2.61% |
| 40R000 3500 0000 | STATE AID, REGULAR | 1,652,509.00 | - | - | 1,652,509.00 | 0.00% |
| 40R000 3510 0000 | STATE AID, SPECIAL ED | 1,289,331.00 | - | - | 1,289,331.00 | 0.00% |
| Total State Revenue | | 2,941,840.00 | - | - | 2,941,840.00 | 0.00% |
| Total Transportation Fund | | 6,226,516.00 | 85,692.17 | 85,692.17 | 6,140,823.83 | 1.38% |
| 50R000 1114 0000 | IMRF TAXES | 940,130.00 | 18,042.63 | 18,042.63 | 922,087.37 | 1.92% |
| 50R000 1151 0000 | SOC SEC/MEDICARE TAXES | 940,130.00 | 18,042.63 | 18,042.63 | 922,087.37 | 1.92% |
| 50R000 1230 0000 | CORP PERSONAL PROPERTY TAX | 72,000.00 | 15,905.38 | 15,905.38 | 56,094.62 | 22.09% |
| 50R001 1510 0000 | INTEREST | 93,500.00 | 17,275.92 | 17,275.92 | 76,224.08 | 18.48% |
| Total Local Revenue | | 2,045,760.00 | 69,266.56 | 69,266.56 | 1,976,493.44 | 3.39% |
| Total IMRF/SS Fund | | 2,045,760.00 | 69,266.56 | 69,266.56 | 1,976,493.44 | 3.39% |
| 60R001 1510 0000 | INTEREST | 92,000.00 | 10,199.78 | 10,199.78 | 81,800.22 | 11.09% |
| 60R000 1930 0000 | IMPACT FEES | 783,875.00 | - | - | 783,875.00 | 0.00% |
| Total Local Revenue | | 875,875.00 | 10,199.78 | 10,199.78 | 865,675.22 | 1.16% |
| Total Capital Projects Fund | | 875,875.00 | 10,199.78 | 10,199.78 | 865,675.22 | 1.16% |
| 70R000 1115 0000 | TAXES | 105,291.00 | 1,994.14 | 1,994.14 | 103,296.86 | 1.89% |
| 70R001 1510 0000 | INTEREST | 70,065.00 | 10,212.67 | 10,212.67 | 59,852.33 | 14.58% |
| Total Local Revenue | | 175,356.00 | 12,206.81 | 12,206.81 | 163,149.19 | 6.96% |
| Total Working Cash Fund | | 175,356.00 | 12,206.81 | 12,206.81 | 163,149.19 | 6.96% |
| 80R000 1120 0000 | TAXES | 1,046,811.00 | 18,134.29 | 18,134.29 | 1,028,676.71 | 1.73% |
| 80R001 1510 0000 | INTEREST | 19,000.00 | 1,393.28 | 1,393.28 | 17,606.72 | 7.33% |
| 80R000 1999 0000 | REFUND PRIOR YEAR EXPENDITURES | 20,000.00 | - | - | 20,000.00 | 0.00% |
| Total Local Revenue | | 1,085,811.00 | 19,527.57 | 19,527.57 | 1,066,283.43 | 1.80% |
| Total Tort Fund | | 1,085,811.00 | 19,527.57 | 19,527.57 | 1,066,283.43 | 1.80% |
| Revenue-All Funds | | | | | | |
| 1000 | Total Local Revenue | 72,193,870.00 | 2,069,181.57 | 2,069,181.57 | 70,124,688.43 | 2.87% |
| 3000 | Total State Revenue | 37,540,410.00 | 11,720.07 | 11,720.07 | 37,528,689.93 | 0.03% |
| 4000 | Total Federal Revenue | 2,415,488.00 | 106,073.55 | 106,073.55 | 2,309,414.45 | 4.39% |
| Total Revenue-All Funds | | 112,149,768.00 | 2,186,975.19 | 2,186,975.19 | 109,962,792.81 | 1.95% |

Bills Payable-DO Imprest

07/01/2025 - 07/31/2025

| Vendor Name | | Check Amount |
|---------------------------|---|-----------------------------------|
| CHIPOTLE MEXICAN GRILL, | | 973.90 |
| Invoice Number | Invoice Description | Account Number |
| Aug 18 | HBT Back to school lunch 8/18/25 | |
| | | 10 E 004 2410 4100 00 000000 0000 |
| | | 973.90 |
| IMAGE AWARDS & ENGRAVING, | | 16.00 |
| Invoice Number | Invoice Description | Account Number |
| 39353 | Name plate for new board member Danielle Ward | |
| | | 10 E 001 2310 4100 00 000000 0000 |
| | | 16.00 |
| MACIANOS, | | 172.22 |
| Invoice Number | Invoice Description | Account Number |
| Aug 14 | HBT Lunch for staff 8/14/25 | |
| | | 10 E 004 2410 4100 00 000000 0000 |
| | | 172.22 |
| MACIANOS, | | 759.50 |
| Invoice Number | Invoice Description | Account Number |
| Aug 18 | PV Staff luncheon August 18th | |
| | | 10 E 008 2410 4100 00 000000 0000 |
| | | 16 759.50 |
| MCALISTER'S DELI, | | 909.10 |
| Invoice Number | Invoice Description | Account Number |
| Aug 19a | HBT Back to school lunch 8/19/25 | |
| | | 10 E 004 2410 4100 00 000000 0000 |
| | | 909.10 |
| PANERA BREAD, | | 254.76 |
| Invoice Number | Invoice Description | Account Number |
| Aug 14 | Mentor Protege Luncheon with Admin. August 14 | |
| | | 10 E 008 2410 4100 00 000000 0000 |
| | | 254.76 |
| SAMMY'S MEXICAN GRILL, | | 1,214.00 |
| Invoice Number | Invoice Description | Account Number |
| Aug 19 | PV Luncheon for Staff on August 19th | |
| | | 10 E 008 2410 4100 00 000000 0000 |
| | | 1,214.00 |

Bills Payable-DO Imprest

Central Cmty USD 301, IL

| Fund | Total |
|-----------------------|-----------------|
| 10 - EDUCATIONAL FUND | 4,299.48 |
| | 4,299.48 |

Bills Payable-CHS Imprest

07/01/2025 - 07/31/2025

Vendor Name

Check Amount

This section returned no records

Bills Payable-Central 301

07/22/2025 - 08/18/2025

| Vendor Name | | | | | Check Amount |
|---------------------------------------|-----------------------------------|--------------|----------------|-----------------------------------|--------------|
| 1ST AYD CORPORATION, | | | | | 419.15 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| PSI801525 | Cleaning Supplies | 07/23/2025 | 419.15 | | |
| | | | | 40 E 001 2550 4100 00 000000 0000 | 419.15 |
| A DISCOUNT T, | | | | | 17,124.50 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 20255218 | PE Uniforms | 07/21/2025 | 3,780.00 | | |
| | | | | 10 E 002 1130 4900 00 000000 0000 | 3,780.00 |
| 20255244 | Student T-Shirts and Shorts | 07/21/2025 | 9,978.00 | | |
| | | | | 10 E 011 1120 4900 00 000000 0000 | 9,978.00 |
| 20255245 | PE Uniforms | 07/21/2025 | 2,259.50 | | |
| | | | | 10 E 003 1120 4900 00 000000 0000 | 2,259.50 |
| 20255246 | Student Shorts | 07/21/2025 | 1,107.00 | | |
| | | | | 10 E 011 1120 4900 00 000000 0000 | 1,107.00 |
| ADVOCATE SHERMAN OCCUPATIONAL HEALTH, | | | | | 250.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 19864226 | Consortium Charge | 06/15/2025 | 250.00 | | |
| | | | | 40 E 001 2550 3190 00 000000 0000 | 250.00 |
| AGILEBITS INC, | | | | | 536.96 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| INV_CAN66863 | 1Password Business Annual Renewal | 07/17/2025 | 536.96 | | |
| | | | | 10 E 001 2660 3160 00 000000 0000 | 536.96 |
| AHW LLC, | | | | | 801.01 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 12158743 | Grounds Supplies | 06/17/2025 | 295.68 | | |
| | | | | 20 E 001 2540 4120 00 000000 0000 | 295.68 |
| 12166701 | Grounds Supplies | 06/27/2025 | 88.32 | | |
| | | | | 20 E 001 2540 4120 00 000000 0000 | 88.32 |
| 12179796 | Grounds Supplies | 07/21/2025 | 10.33 | | |
| | | | | 20 E 001 2540 4120 00 000000 0000 | 10.33 |
| 12187167 | Grounds Supplies | 07/31/2025 | 200.40 | | |
| | | | | 20 E 001 2540 4120 00 000000 0000 | 200.40 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--------------------------------|---|--------------|----------------|-----------------------------------|--------------|
| AHW LLC, | | | | | 801.01 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 12187775 | Grounds Supplies | 08/01/2025 | 206.28 | 20 E 001 2540 4120 00 000000 0000 | 206.28 |
| AIDEX CORPORATION, | | | | | 78,450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| A-25285 | Six Axis Mechanical Robots and Carts | 07/22/2025 | 78,450.00 | 10 E 002 1130 5400 00 322000 0000 | 78,450.00 |
| ALLEGIANT TECHNOLOGY, | | | | | 47.64 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 200012613 | Fax Services July | 06/30/2025 | 47.64 | 10 E 001 2410 3250 00 000000 0000 | 47.64 |
| ALPERIN, KEVIN | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Tuition 06-25 | Tuition Reimbursement EDU 6110 | 06/24/2025 | 450.00 | 10 E 002 1130 2300 00 000000 0000 | 450.00 |
| AMAZON CAPITAL SERVICES, INC., | | | | | 12,513.44 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 117F-XJD7-JTVV | Office Supplies | 07/15/2025 | 257.61 | 10 E 002 2410 4100 00 000000 0000 | 257.61 |
| 11XP-PYYG-TJXV | Disruption Activity, Conference Room , and Staff Supplies | 07/16/2025 | 611.72 | 10 E 004 2410 4100 00 000000 0000 | 611.72 |
| 13KF-YTPC-63CH | PV Title IV STEAM Items | 07/29/2025 | 786.16 | 10 E 001 1100 4100 00 440000 0000 | 786.16 |
| 147M-1RRQ-CMKW | HBT Title IV STEAM Items | 07/28/2025 | 682.62 | 10 E 001 1100 4100 00 440000 0000 | 682.62 |
| 14J7-FV74-FHH1 | Calculator | 07/15/2025 | 5.43 | 40 E 001 2550 4110 00 000000 0000 | 5.43 |
| 14RH-3J4N-NVJM | Ag Supplies | 07/18/2025 | 631.32 | 10 E 002 1400 4100 00 000000 0000 | 631.32 |
| 14WK-Y7TQ-TR7J | Nurse Supplies | 07/19/2025 | 691.34 | 10 E 002 1130 4250 00 000000 0000 | 691.34 |
| 17RX-NXC3-F93P | CT Title IV STEAM Items | 07/30/2025 | 670.00 | 10 E 001 1100 4100 00 440000 0000 | 670.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------------------|--------------------------------|--------------|----------------|-----------------------------------|--------------|
| AMAZON CAPITAL SERVICES, INC, | | | | | 12,513.44 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 19DY-L6J4-LLDR | Office Supplies | 06/09/2025 | 95.21 | 10 E 001 2520 4100 00 000000 0000 | 95.21 |
| 1C4R-WNQF-7MD6 | Office Supplies | 07/17/2025 | 13.45 | 10 E 003 2410 4100 00 000000 0000 | 13.45 |
| 1CHQ-9QLQ-CV6P | Vacuum for CHS Ag Program | 06/30/2025 | 129.99 | 10 E 002 1130 4100 00 323500 0000 | 129.99 |
| 1CV4-43XT-TKNP | Office Supplies | 06/13/2025 | 24.97 | 10 E 001 2520 4100 00 000000 0000 | 24.97 |
| 1DKV-DP7W-YF31 | Nurse Supplies | 07/19/2025 | 13.47 | 10 E 002 1130 4250 00 000000 0000 | 13.47 |
| 1F1C-99WQ-4X36 | Aluminum Parking Signs | 07/24/2025 | 22.78 | 40 E 001 2550 4100 00 000000 0000 | 22.78 |
| 1F43-DFMT-W4F1 | Office Supplies | 06/29/2025 | 77.89 | 10 E 001 2520 4100 00 000000 0000 | 77.89 |
| 1FH6-XK3K-DFG4 | Science Supplies | 07/17/2025 | 387.02 | 10 E 002 1130 4100 00 000000 0000 | 22 |
| 1FH6-XK3K-NX4G | Kitchen Supplies | 07/18/2025 | 817.71 | 10 E 001 2560 4100 00 000000 0000 | 71.89 |
| | | | | 10 E 002 2560 4900 00 000000 0000 | 226.98 |
| | | | | 10 E 003 2560 4900 00 000000 0000 | 60.73 |
| | | | | 10 E 004 2560 4900 00 000000 0000 | 133.08 |
| | | | | 10 E 005 2560 4900 00 000000 0000 | 38.45 |
| | | | | 10 E 008 2560 4900 00 000000 0000 | 97.23 |
| | | | | 10 E 010 2560 4900 00 000000 0000 | 129.63 |
| | | | | 10 E 011 2560 4900 00 000000 0000 | 59.72 |
| 1FWK-1QXQ-YX19 | Shop Supplies | 07/23/2025 | 96.55 | 40 E 001 2550 4100 00 000000 0000 | 96.55 |
| 1G3H-FDG9-4LKJ | Tech Supplies | 04/29/2025 | 173.99 | 10 E 001 2660 4100 00 000000 0000 | 173.99 |
| 1GQX-6GYX-7TXR | Ag Supplies | 07/21/2025 | 107.12 | 10 E 002 1400 4100 00 000000 0000 | 107.12 |
| 1HWR-VJQ3-FCTV | Beginning of the Year Supplies | 07/19/2025 | 1,117.18 | 10 E 004 1110 4100 00 000000 0000 | 1,117.18 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------------------|--|--------------|----------------|--|--------------|
| AMAZON CAPITAL SERVICES, INC, | | | | | 12,513.44 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 1JK1-KXT7-TN94 | FY25 IC Supplies | 06/06/2025 | 59.98 | | |
| | | | | <i>10 E 002 2212 4100 00 000000 0000</i> | 59.98 |
| 1JLR-1VJH-FKXJ | Vet Tech Supplies | 07/21/2025 | 35.91 | | |
| | | | | <i>10 E 002 1400 4100 00 000000 0000</i> | 35.91 |
| 1JPL-16XC-94LR | Safety Bags and Bulletin Board Supplies | 07/28/2025 | 125.61 | | |
| | | | | <i>10 E 004 2410 4100 00 000000 0000</i> | 125.61 |
| 1L46-FYXG-HFK4 | LL Title IV STEAM Items | 07/30/2025 | 632.03 | | |
| | | | | <i>10 E 001 1100 4100 00 440000 0000</i> | 632.03 |
| 1LDR-CHC3-RGF4 | Painting Art Supplies | 07/15/2025 | 75.18 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 75.18 |
| 1MHJ-VH6J-HJY3 | Label Maker Refills | 07/30/2025 | 21.65 | | |
| | | | | <i>40 E 001 2550 4110 00 000000 0000</i> | 21.65 |
| 1MWQ-G7MD-WJTN | Tech Supplies | 06/10/2025 | 229.98 | | |
| | | | | <i>10 E 001 2660 4100 00 000000 0000</i> | 229.98 |
| 1NMM-KCD9-34YG | Maintenance Supplies Credit, Apply to Inv 1MWQ-G7MD-TCJQ | 06/25/2025 | -359.82 | | 23 |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | -359.82 |
| 1NXP-K7XD-FPMX | Tech Supply Credit, Apply to Inv 1XFF-XCG1-D6FV | 05/15/2025 | -445.00 | | |
| | | | | <i>10 E 001 2660 4100 00 000000 0000</i> | -445.00 |
| 1QVL-LQPM-4JLK | Science Supplies | 07/29/2025 | 71.83 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 71.83 |
| 1RCW-RH4Q-TGGD | Tech Supplies | 06/06/2025 | 17.98 | | |
| | | | | <i>10 E 001 2660 4100 00 000000 0000</i> | 17.98 |
| 1RJ4-4FTD-DKPG | Science Supplies | 07/19/2025 | 878.47 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 878.47 |
| 1RWK-W3RV-14GX | Beginning of the Year Supplies | 07/27/2025 | 204.95 | | |
| | | | | <i>10 E 004 1110 4100 00 000000 0000</i> | 204.95 |
| 1RXK-DWNV-GRHY | Science Supplies | 08/04/2025 | 388.99 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 388.99 |
| 1T16-GTK7-9RGH | B&G Office & Maintenance Supplies | 07/14/2025 | 585.32 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 585.32 |
| 1TCD-X49V-D397 | Intro Art Supplies | 07/17/2025 | 843.91 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 843.91 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------------------|---|--------------|----------------|-----------------------------------|--------------|
| AMAZON CAPITAL SERVICES, INC, | | | | | 12,513.44 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 1TGP-GRYW-XK31 | Coyote Culture Set Up Decor | 06/17/2025 | 758.03 | 10 E 008 2410 4100 00 000000 0000 | 758.03 |
| 1VD7-CKMX-VR4P | Principal Office Supplies | 06/28/2025 | 528.60 | 10 E 011 2410 4100 00 000000 0000 | 528.60 |
| 1VHQ-QT9P-RFGP | Science Supplies | 07/15/2025 | 75.72 | 10 E 002 1130 4100 00 000000 0000 | 75.72 |
| 1VLC-3H66-1C4K | Tech Supplies | 05/23/2025 | 89.00 | 10 E 001 2660 4100 00 000000 0000 | 89.00 |
| 1WHM-LFJY-THHK | Maintenance Supplies | 07/15/2025 | 89.32 | 20 E 001 2540 4110 00 000000 0000 | 89.32 |
| 1WXH-QJRG-J61Y | Principal Supplies | 07/30/2025 | 97.50 | 10 E 011 2410 4100 00 000000 0000 | 97.50 |
| 1WYT-QHVJ-WYJP | Batteries | 05/23/2025 | 13.89 | 40 E 001 2550 4100 00 000000 0000 | 13.89 |
| 1X4C-1MN4-LW1Q | Heavy Duty Garage Hooks | 07/17/2025 | 35.97 | 40 E 001 2550 4100 00 000000 0000 | 24 35.97 |
| 1X4G-4P1G-KM7G | CT Title IV STEAM Items | 07/30/2025 | 16.40 | 10 E 001 1100 4100 00 440000 0000 | 16.40 |
| 1X6C-11H7-NH3T | Maintenance Supplies | 07/22/2025 | 56.00 | 20 E 001 2540 4110 00 000000 0000 | 56.00 |
| 1XGD-WNFM-FC93 | Ag Supplies Credit, Apply to Inv 1GQX-6GYX-7TXR | 07/21/2025 | -59.94 | 10 E 002 1400 4100 00 000000 0000 | -59.94 |
| 1XX4-63CC-DLCJ | Kitchen Supplies | 07/17/2025 | 32.45 | 10 E 002 2560 4900 00 000000 0000 | 12.98 |
| | | | | 10 E 003 2560 4900 00 000000 0000 | 12.98 |
| | | | | 10 E 008 2560 4900 00 000000 0000 | 6.49 |
| APPLE INC, | | | | | 15,263.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| MB83108402 | iPads for Tech | 07/08/2025 | 12,960.00 | 10 E 001 2660 4100 00 000000 0000 | 12,960.00 |
| MB87403408 | Title III iPads | 08/02/2025 | 2,303.00 | 10 E 001 1800 4100 00 490500 0000 | 2,303.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------------------|---|--------------|----------------|--|--------------|
| ARBITERSPORTS LLC, | | | | | 3,015.25 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| INV71479 | CHS Athletics Activity Scheduler and Registration Subscription | 07/02/2025 | 3,015.25 | | |
| | | | | <i>10 E 002 1500 3190 00 000000 0000</i> | 3,015.25 |
| ARIES BUILDING SYSTEMS, LLC, | | | | | 255,174.43 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 425660 | Mobile Classroom Unit Installment Payment CT | 07/22/2025 | 255,174.43 | | |
| | | | | <i>20 E 001 2540 5410 00 000000 0000</i> | 255,174.43 |
| ASCD, | | | | | 119.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 1814046 | Digital and Print Renewal K. Paulus | 08/08/2025 | 119.00 | | |
| | | | | <i>10 E 001 2212 6400 00 000000 0000</i> | 119.00 |
| BALDING, MAXWELL | | | | | 40.60 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Feb 28A | West Suburb. World Lang. Conf. Mileage Reimbursement 2/28/25 | 02/28/2025 | 40.60 | | |
| | | | | <i>10 E 002 2210 6400 00 000000 0000</i> | 25 40.60 |
| BARNES, CORY | | | | | 1,350.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Tuition 05-25 | Tuition Reimbursement EDU 6770, 6640 | 05/29/2025 | 900.00 | | |
| | | | | <i>10 E 002 1130 2300 00 000000 0000</i> | 900.00 |
| Tuition 06-25 | Tuition Reimbursement EDU 6556 | 07/21/2025 | 450.00 | | |
| | | | | <i>10 E 002 1130 2300 00 000000 0000</i> | 450.00 |
| BATTERIES PLUS, | | | | | 1,335.20 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| P83648117 | Maintenance Supplies | 06/30/2025 | 1,335.20 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 1,335.20 |
| BEAN'S FARM LANDSCAPE SUPPLY, | | | | | 337.50 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 220000018804 | Grounds Supplies | 08/04/2025 | 112.50 | | |
| | | | | <i>20 E 001 2540 4120 00 000000 0000</i> | 112.50 |
| 220000018805 | Grounds Supplies | 08/04/2025 | 112.50 | | |
| | | | | <i>20 E 001 2540 4120 00 000000 0000</i> | 112.50 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------------------|---------------------------------------|--------------|----------------|-----------------------------------|--------------|
| BEAN'S FARM LANDSCAPE SUPPLY, | | | | | 337.50 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 220000018810 | Grounds Supplies | 08/04/2025 | 112.50 | 20 E 001 2540 4120 00 000000 0000 | 112.50 |
| BELVIDERE HIGH SCHOOL, | | | | | 435.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Aug 15 | CHS Girls Varsity Golf Invite 8/15/25 | 08/15/2025 | 435.00 | 10 E 002 1500 6400 00 000000 0000 | 435.00 |
| BILLY'S CUSTOM FLOORING, | | | | | 800.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 1149 | Exterior Stair Repair CHS | 06/25/2025 | 800.00 | 20 E 001 2540 3230 00 000000 0000 | 800.00 |
| BLICK ART MATERIALS, | | | | | 14,571.91 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 5827154 | Digital Art Supplies | 07/19/2025 | 877.61 | 10 E 002 1130 4100 00 000000 0000 | 877.61 |
| 5828979 | Sculpture Art Supplies | 07/19/2025 | 992.66 | 10 E 002 1130 4100 00 000000 0000 | 992.66 |
| 5833434 | Painting Art Supplies | 07/21/2025 | 331.44 | 10 E 002 1130 4100 00 000000 0000 | 331.44 |
| 5840291 | Studio Art Supplies | 07/21/2025 | 1,541.64 | 10 E 002 1130 4100 00 000000 0000 | 1,541.64 |
| 5842361 | Drawing Art Supplies | 07/22/2025 | 1,518.28 | 10 E 002 1130 4100 00 000000 0000 | 1,518.28 |
| 5854100 | AP Art Supplies | 07/23/2025 | 3,841.88 | 10 E 002 1130 4100 00 000000 0000 | 3,841.88 |
| 5855586 | Intro Art Supplies | 07/23/2025 | 2,535.55 | 10 E 002 1130 4100 00 000000 0000 | 2,535.55 |
| 5860848 | Art Supplies | 07/24/2025 | 2,932.85 | 10 E 002 1130 4100 00 000000 0000 | 2,932.85 |
| BLUE CROSS BLUE SHIELD, | | | | | 11,586.35 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Dental 07-25 | Dental Claims | 07/31/2025 | 11,586.35 | 10 E 002 1130 2230 00 000000 0000 | 14,044.17 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--|---|--------------|----------------|-----------------------------------|--------------|
| BLUE CROSS BLUE SHIELD, | | | | | 11,586.35 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| | | | | 20 E 001 2540 2230 00 000000 0000 | -1,875.87 |
| | | | | 40 E 001 2550 2230 00 000000 0000 | -581.95 |
| BOB JASS CHEVROLET INC, | | | | | 4,342.07 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 509104 | Tires, Balance Rims and Alignment Bus 105 | 07/11/2025 | 4,342.07 | | |
| | | | | 40 E 001 2550 4130 00 000000 0000 | 4,342.07 |
| BOOKMAN, DANIEL | | | | | 237.98 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 13 | Travel Expense Reimbursement | 07/13/2025 | 64.83 | | |
| | | | | 40 E 001 2550 3320 00 000000 0000 | 64.83 |
| Jul 14 | Travel Expense Reimbursements | 07/14/2025 | 173.15 | | |
| | | | | 40 E 001 2550 3320 00 000000 0000 | 173.15 |
| BRS USA INDUSTRIES ELEVATOR INSPECTION SERVICES, | | | | | 175.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 2116 | Elevator Inspection Services CHS | 04/21/2025 | 175.00 | | 27 |
| | | | | 20 E 001 2540 3100 00 000000 0000 | 175.00 |
| BSN SPORTS INC, | | | | | 42,170.49 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 930024063 | CMS Athletics Equipment | 06/16/2025 | 5,770.88 | | |
| | | | | 10 E 003 1500 4100 00 000000 0000 | 5,770.88 |
| 930135335 | CHS Boys Basketball Uniforms | 07/01/2025 | 7,311.64 | | |
| | | | | 10 E 002 1500 4110 00 000000 0000 | 7,311.64 |
| 930295692 | CHS Football Field Sideline Protectors | 07/21/2025 | 10,005.84 | | |
| | | | | 10 E 002 1500 7100 00 000000 0000 | 10,005.84 |
| 930327668 | CHS Athletic Equipment and Supplies | 07/24/2025 | 15,820.13 | | |
| | | | | 10 E 002 1500 4100 00 000000 0000 | 13,330.13 |
| | | | | 10 E 002 1500 7100 00 000000 0000 | 2,490.00 |
| 930402325 | 2025 - 2026 B&G Uniform Order | 07/31/2025 | 1,999.00 | | |
| | | | | 20 E 002 2540 4110 00 000000 0000 | 1,999.00 |
| 930418811 | 2025 - 2026 B&G Uniform Order | 08/01/2025 | 1,263.00 | | |
| | | | | 20 E 002 2540 4110 00 000000 0000 | 1,263.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-----------------------------------|---|--------------|----------------|-----------------------------------|--------------|
| BUSTOS, JENNIFER | | | | | 40.60 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Feb 28A | West Suburb. World Lang. Conf. Mileage Reimbursement 2/28/25 | 02/28/2025 | 40.60 | | |
| | | | | 10 E 002 2210 6400 00 000000 0000 | 40.60 |
| CAMELOT THERAPEUTIC SCHOOLS, LLC, | | | | | 14,090.01 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| INV224342 | June Tuition and Aides | 06/25/2025 | 2,561.82 | | |
| | | | | 10 E 001 1912 6700 00 000000 0000 | 2,561.82 |
| INV225533 | June Tuition and Aides | 07/09/2025 | 11,528.19 | | |
| | | | | 10 E 001 1912 6700 00 000000 0000 | 11,528.19 |
| CARDIO PARTNERS INC, | | | | | 233.06 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 600100117 | ZM Batteries AED Plus | 07/17/2025 | 99.53 | | |
| | | | | 10 E 005 1110 4250 00 000000 0000 | 99.53 |
| 600101416 | ZM-Electrodes Pediatric Padz II HBT | 07/18/2025 | 133.53 | | |
| | | | | 10 E 004 1110 4250 00 000000 0000 | 133.53 |
| CARDMEMBER SERVICE, | | | | | 5,645.24 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 7577 08-25 | B. Tobin Technology Expenses | 08/06/2025 | 5,630.29 | | |
| | | | | 10 E 001 2660 3160 00 000000 0000 | 3,113.10 |
| | | | | 10 E 001 2660 4100 00 000000 0000 | 2,517.19 |
| 7577 08-25a | Administrative Expenses | 08/06/2025 | 14.95 | | |
| | | | | 10 E 001 2520 3100 00 000000 0000 | 14.95 |
| CARPENTER, DANIEL | | | | | 45.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 10 | Reimbursement for Diabetes Education Course | 07/10/2025 | 45.00 | | |
| | | | | 10 E 002 2210 6400 00 000000 0000 | 45.00 |
| CDI CORP, | | | | | 18.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 291440 | CHS Records Board "2025" Stickers | 08/05/2025 | 18.00 | | |
| | | | | 10 E 002 1500 4100 00 000000 0000 | 18.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--------------------------|--|--------------|----------------|-----------------------------------|--------------|
| CINTAS CORPORATION #355, | | | | | 24.58 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 4236469513 | Service Mats | 07/10/2025 | 24.58 | 40 E 001 2550 3700 00 000000 0000 | 24.58 |
| CITY OF ELGIN, | | | | | 1,586.88 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 330845-39520 06-25 | Water Service PKMS | 07/10/2025 | 1,586.88 | 20 E 001 2540 3700 00 000000 0000 | 1,586.88 |
| CITY OF ELGIN, | | | | | 1,199.87 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 330845-42337 06-25 | Water Service CT | 07/10/2025 | 1,199.87 | 20 E 001 2540 3700 00 000000 0000 | 1,199.87 |
| CITY OF ELGIN, | | | | | 209.76 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 582415-33254 06-25 | Water Service PKMS Meter | 07/10/2025 | 209.76 | 20 E 001 2540 3700 00 000000 0000 | 209.76 |
| CLASSLINK, INC, | | | | | 21,037.40 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| INV20972 | Annual License 7.1.25 - 6.30.26 | 07/01/2025 | 21,037.40 | 10 E 001 2660 3160 00 000000 0000 | 21,037.40 |
| COMMITTEE FOR CHILDREN, | | | | | 9,003.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 2055522 | FY25 Second Step Elementary Classroom Kits + Principal Toolkit HBT | 07/28/2025 | 3,001.00 | 10 E 001 2220 4100 00 440000 0000 | 3,001.00 |
| 2055525 | FY25 Second Step Elementary Classroom Kits + Principal Toolkit CT | 07/28/2025 | 3,001.00 | 10 E 001 2220 4100 00 440000 0000 | 3,001.00 |
| 2055534 | FY25 Second Step Elementary Classroom Kits + Principal Toolkit LL | 07/28/2025 | 3,001.00 | 10 E 001 2220 4100 00 440000 0000 | 3,001.00 |
| COMMONWEALTH EDISON, | | | | | 78,571.94 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 2759477000 05-25 | Electric Service LL | 05/29/2025 | 1,855.38 | 20 E 005 2540 4660 00 000000 0000 | 1,855.38 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------------|-------------------------|--------------|----------------|--|--------------|
| COMMONWEALTH EDISON, | | | | | 78,571.94 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 2759477000 06-25 | Electric Service LL | 06/27/2025 | 1,519.06 | | |
| | | | | <i>20 E 005 2540 4660 00 000000 0000</i> | 1,519.06 |
| 2929742000 05-25 | Electric Service HBT | 06/09/2025 | 4,134.55 | | |
| | | | | <i>20 E 004 2540 4660 00 000000 0000</i> | 4,134.55 |
| 2929742000 06-25 | Electric Service HBT | 07/09/2025 | 4,267.29 | | |
| | | | | <i>20 E 004 2540 4660 00 000000 0000</i> | 4,267.29 |
| 6431674000 05-25 | Electric Service CT | 06/13/2025 | 4,371.93 | | |
| | | | | <i>20 E 010 2540 4660 00 000000 0000</i> | 4,371.93 |
| 6431674000 06-25 | Electric Service CT | 07/15/2025 | 4,427.42 | | |
| | | | | <i>20 E 010 2540 4660 00 000000 0000</i> | 4,427.42 |
| 6745199000 05-25 | Electric Service CHS | 06/09/2025 | 13,845.88 | | |
| | | | | <i>20 E 002 2540 4660 00 000000 0000</i> | 13,845.88 |
| 6745199000 06-25 | Electric Service CHS | 07/09/2025 | 17,106.61 | | |
| | | | | <i>20 E 002 2540 4660 00 000000 0000</i> | 17,106.61 |
| 7994612000 05-25 | Electric Service DO | 06/10/2025 | 522.26 | | |
| | | | | <i>20 E 001 2540 4660 00 000000 0000</i> | 30 |
| | | | | | 522.26 |
| 7994612000 06-25 | Electric Service DO | 07/10/2025 | 737.18 | | |
| | | | | <i>20 E 001 2540 4660 00 000000 0000</i> | 737.18 |
| 825642000 05-25 | Electric Service CMS | 06/09/2025 | 3,568.90 | | |
| | | | | <i>20 E 003 2540 4660 00 000000 0000</i> | 3,568.90 |
| 825642000 06-25 | Electric Service CMS | 07/09/2025 | 3,515.68 | | |
| | | | | <i>20 E 003 2540 4660 00 000000 0000</i> | 3,515.68 |
| 876029000 05-25 | Electric Service PKMS | 05/27/2025 | 8,449.46 | | |
| | | | | <i>20 E 011 2540 4660 00 000000 0000</i> | 8,449.46 |
| 876029000 06-25 | Electric Service PKMS | 06/25/2025 | 6,587.24 | | |
| | | | | <i>20 E 011 2540 4660 00 000000 0000</i> | 6,587.24 |
| 9353281222 06-25 | Electric Service PV | 06/26/2025 | 3,663.10 | | |
| | | | | <i>20 E 008 2540 4660 00 000000 0000</i> | 3,663.10 |
| COMMUNITY THERAPY CORP, | | | | | 632.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 2419 | Speech Therapy Services | 07/01/2025 | 632.00 | | |
| | | | | <i>10 E 001 2150 3140 00 000000 0000</i> | 632.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|---------------------------------|---|--------------|----------------|-----------------------------------|--------------|
| COMMUNITY UNIT SCHOOL DIST 300, | | | | | 48,000.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul FY25 | 2024-2025 School Year Regional Pathway Tuition | 07/10/2025 | 48,000.00 | 10 E 002 1400 3160 00 000000 0000 | 48,000.00 |
| COMPOSANO, LINDSAY | | | | | 46.48 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Feb 28A | Phil Lawler DuPage Conf. Mileage Reimbursement 2/28/25 | 02/28/2025 | 46.48 | 10 E 002 2210 6400 00 000000 0000 | 46.48 |
| CONTINENTAL RESOURCES, INC, | | | | | 88,500.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 91178686 | Darktrace Subscription 7.1.25 - 6.30.28 | 06/20/2025 | 88,500.00 | 10 E 001 2660 3160 00 000000 0000 | 88,500.00 |
| CONTRACT PAPER GROUP, INC, | | | | | 46,053.15 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 43009601601 | Copy Paper | 07/25/2025 | 5,854.00 | 10 E 004 1110 4160 00 000000 0000 | 5,854.00 |
| 43009601701 | Copy Paper | 07/23/2025 | 5,809.30 | 10 E 004 1110 4160 00 000000 0000 | 5,809.30 |
| 43009602201 | Copy Paper | 07/14/2025 | 4,410.25 | 10 E 002 1130 4160 00 000000 0000 | 4,410.25 |
| 43009602301 | Copy Paper | 07/23/2025 | 5,854.00 | 10 E 002 1130 4160 00 000000 0000 | 5,854.00 |
| 43009602401 | Copy Paper | 07/25/2025 | 5,854.00 | 10 E 002 1130 4160 00 000000 0000 | 5,854.00 |
| 43009602501 | Copy Paper | 07/14/2025 | 4,921.50 | 10 E 001 2520 4100 00 000000 0000 | 4,921.50 |
| 43009602601 | Copy Paper | 07/16/2025 | 5,081.52 | 10 E 011 1120 4160 00 000000 0000 | 5,081.52 |
| 43009602701 | Copy Paper | 07/14/2025 | 3,818.67 | 10 E 003 1120 4160 00 000000 0000 | 3,818.67 |
| 43009602801 | Copy Paper | 07/14/2025 | 4,449.91 | 10 E 005 1110 4160 00 000000 0000 | 4,449.91 |

Bills Payable-Central 301

| Vendor Name | | | | | | Check Amount |
|---------------------------------|--|--------------|----------------|-----------------------------------|-----------|--------------|
| CORE ACADEMY, | | | | | | 2,647.80 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| SESINV-050244 | June Tuition | 06/30/2025 | 2,647.80 | | | |
| | | | | 10 E 001 1912 6700 00 000000 0000 | 2,647.80 | |
| COVE SCHOOL, INC, | | | | | | 3,850.75 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| SD301-25SS | June-July Tuition | 07/23/2025 | 3,850.75 | | | |
| | | | | 10 E 001 1912 6700 00 000000 0000 | 3,850.75 | |
| CPI, | | | | | | 1,033.80 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| NAIN-183049 | License Order for CPI | 08/04/2025 | 1,033.80 | | | |
| | | | | 10 E 001 2210 3100 00 462000 0000 | 1,033.80 | |
| CRYSTAL LAKE SOUTH HIGH SCHOOL, | | | | | | 375.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Aug 21 | CHS Boys Varsity Golf Tournament 8/21/25 | 08/21/2025 | 25.00 | | | |
| | | | | 10 E 002 1500 6400 00 000000 0000 | 25.00 | |
| Sep 13 | CHS Boys JV Golf Tournament 9/13/25 | 09/13/2025 | 350.00 | | 32 | |
| | | | | 10 E 002 1500 6400 00 000000 0000 | 350.00 | |
| CURRICULUM ASSOCIATES LLC, | | | | | | 18,294.40 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| 10012605 | Ellevation Subscription FY26 | 07/22/2025 | 18,294.40 | | | |
| | | | | 10 E 001 1800 4100 00 000000 0000 | 18,294.40 | |
| DATAMATION IMAGING SERVICES, | | | | | | 1,762.80 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| AUG-85397 | July Imaging Services | 08/01/2025 | 902.85 | | | |
| | | | | 10 E 001 2660 3160 00 000000 0000 | 176.40 | |
| | | | | 10 E 001 2660 3160 00 462000 0000 | 726.45 | |
| JUL-85227 | June Imaging Services | 07/01/2025 | 859.95 | | | |
| | | | | 10 E 001 2660 3160 00 000000 0000 | 176.40 | |
| | | | | 10 E 001 2660 3160 00 462000 0000 | 683.55 | |
| DEKALB HIGH SCHOOL, | | | | | | 550.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Aug 25 2025 | CHS Boys Varsity Golf Cup 8/25/25 | 08/25/2025 | 250.00 | | | |
| | | | | 10 E 002 1500 6400 00 000000 0000 | 250.00 | |

Bills Payable-Central 301

| Vendor Name | | | | | | Check Amount |
|--|---|--------------|----------------|-----------------------------------|----------|--------------|
| DEKALB HIGH SCHOOL, | | | | | | 550.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Sep 27 | CHS Boys JV Golf Invite 9/27/25 | 09/27/2025 | 300.00 | | | |
| | | | | 10 E 002 1500 6400 00 000000 0000 | 300.00 | |
| DEMCO, | | | | | | 1,334.66 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| 7658301 | Education Media Bookcases | 06/11/2025 | 1,334.66 | | | |
| | | | | 10 E 011 2220 4100 00 000000 0000 | 1,334.66 | |
| DICKERSON, MICHAEL | | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Tuition 06-25 | Tuition Reimbursement EDU 6556 | 07/08/2025 | 450.00 | | | |
| | | | | 10 E 004 1110 2300 00 000000 0000 | 450.00 | |
| DNM SEALCOATING INC, | | | | | | 7,690.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| 22321 | Parking Lot Sealcoating CHS | 07/23/2025 | 7,690.00 | | | |
| | | | | 20 E 001 2540 3230 00 000000 0000 | 7,690.00 | |
| DRAMATIC PUBLISHING COMPANY, | | | | | | 547.05 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| IN187195 | Fall Play Royalties | 07/01/2025 | 547.05 | | | |
| | | | | 10 E 002 1130 3190 00 000000 0000 | 547.05 | |
| DRUMMOND, KARI | | | | | | 33.05 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Lunch Refund FY25 | Food Service Refund CHS | 07/13/2025 | 33.05 | | | |
| | | | | 10 R 002 1611 0000 00 000000 0000 | 33.05 | |
| DUNDEE-CROWN HIGH SCHOOL, | | | | | | 300.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Sep 27 | CHS Sophomore Volleyball Invite 9/27/25 | 09/27/2025 | 300.00 | | | |
| | | | | 10 E 002 1500 6400 00 000000 0000 | 300.00 | |
| DUPAGE FEDERATION ON HUMAN, SERVICES REFORM, | | | | | | 198.23 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| 11796 | Interpreting Services | 06/30/2025 | 198.23 | | | |
| | | | | 10 E 001 1800 3190 00 000000 0000 | 198.23 | |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|---------------------------------|---|--------------|----------------|--|-------------------|
| ECCEZION, LTD, | | | | | 675.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 481128 | Prep and Attend 7/21 Board Meeting Virtually per Superintendent Request | 07/25/2025 | 675.00 | | |
| | | | | <i>10 E 001 2310 3170 00 000000 0000</i> | 675.00 |
| ECOWATER/DEKALB BOTTLED WATER, | | | | | 73.77 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 10025 07-25 | CHS Athletics Office Water | 07/05/2025 | 73.77 | | |
| | | | | <i>10 E 002 1500 4900 00 000000 0000</i> | 73.77 |
| ELAN CORPORATE PAYMENT SYSTEMS, | | | | | 8,175.29 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 5013 08-25 | Athletics, Accounts Payable, Activity Expenses | 08/06/2025 | 8,175.29 | | |
| | | | | <i>10 E 001 2310 4100 00 000000 0000</i> | 307.00 |
| | | | | <i>10 E 001 2310 6400 00 000000 0000</i> | 3,173.80 |
| | | | | <i>10 E 001 2320 4100 00 000000 0000</i> | 996.42 |
| | | | | <i>10 E 001 2520 4100 00 000000 0000</i> | 33.99 |
| | | | | <i>10 E 001 2630 4100 00 000000 0000</i> | 340.00 |
| | | | | <i>10 E 002 2560 4900 00 000000 0000</i> | 1,718.53 |
| | | | | <i>10 E 004 2560 4900 00 000000 0000</i> | 17.27 |
| | | | | <i>10 E 008 2560 4900 00 000000 0000</i> | 22.97 |
| | | | | <i>10 E 010 2560 4900 00 000000 0000</i> | 8.58 |
| | | | | <i>40 E 001 2550 3700 00 000000 0000</i> | 1,740.74 |
| | | | | <i>40 E 001 2550 4100 00 000000 0000</i> | 71.99 |
| | | | | <i>40 E 001 2550 6400 00 000000 0000</i> | 50.00 |
| ENGIE POWER & GAS LLC, | | | | | 5,441.97 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| SIN8125132 | Gas Service CMS | 07/22/2025 | 708.62 | | |
| | | | | <i>20 E 003 2540 4650 00 000000 0000</i> | 708.62 |
| SIN8125219 | Gas Service DO | 07/22/2025 | 28.24 | | |
| | | | | <i>20 E 001 2540 4650 00 000000 0000</i> | 28.24 |
| SIN8125359 | Gas Service PKMS | 07/22/2025 | 1,274.87 | | |
| | | | | <i>20 E 011 2540 4650 00 000000 0000</i> | 1,274.87 |
| SIN8125632 | Gas Service PV | 07/22/2025 | 600.36 | | |
| | | | | <i>20 E 008 2540 4650 00 000000 0000</i> | 600.36 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|------------------------------|-------------------------------------|--------------|----------------|-----------------------------------|--------------|
| ENGIE POWER & GAS LLC, | | | | | 5,441.97 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| SIN8125685 | Gas Service CHS | 07/22/2025 | 2,007.68 | | |
| | | | | 20 E 002 2540 4650 00 000000 0000 | 2,007.68 |
| SIN8125830 | Gas Service CT | 07/22/2025 | 524.59 | | |
| | | | | 20 E 010 2540 4650 00 000000 0000 | 524.59 |
| SIN8125969 | Gas Service LL | 07/22/2025 | 39.50 | | |
| | | | | 20 E 005 2540 4650 00 000000 0000 | 39.50 |
| SIN8126023 | Gas Service HBT | 07/22/2025 | 258.11 | | |
| | | | | 20 E 004 2540 4650 00 000000 0000 | 258.11 |
| FEECE OIL COMPANY, | | | | | 12,587.92 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 4185386 | Fuel, Drivers Ed Fuel May-June 2025 | 07/01/2025 | 3,618.49 | | |
| | | | | 10 E 002 1730 4100 00 000000 0000 | 448.59 |
| | | | | 40 E 001 2550 4640 00 000000 0000 | 3,169.90 |
| 4186668 | Fuel | 07/05/2025 | 5,467.62 | | |
| | | | | 40 E 001 2550 4640 00 000000 0000 | 5,467.62 |
| 4188838 | Fuel | 07/14/2025 | 3,501.81 | | |
| | | | | 40 E 001 2550 4640 00 000000 0000 | 3,501.81 |
| FIRST SECURITY SYSTEMS, INC, | | | | | 5,660.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 3403153 | Intercom Installation CT Mobile | 07/16/2025 | 4,800.00 | | |
| | | | | 20 E 001 2540 5400 00 000000 0000 | 4,800.00 |
| S97209 | Intercom Repair PV | 06/25/2025 | 430.00 | | |
| | | | | 20 E 001 2540 3230 00 000000 0000 | 430.00 |
| S97270 | Intercom Repair CT | 06/25/2025 | 430.00 | | |
| | | | | 20 E 001 2540 3230 00 000000 0000 | 430.00 |
| FLINN SCIENTIFIC, INC, | | | | | 1,863.66 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 3155420 | Science Supplies | 07/16/2025 | 490.22 | | |
| | | | | 10 E 002 1130 4100 00 000000 0000 | 490.22 |
| 3155537 | Science Supplies | 07/16/2025 | 905.64 | | |
| | | | | 10 E 002 1130 4100 00 000000 0000 | 905.64 |
| 3155667 | Science Supplies | 07/16/2025 | 467.80 | | |
| | | | | 10 E 002 1130 4100 00 000000 0000 | 467.80 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--------------------------------|---|--------------|----------------|-----------------------------------|--------------|
| FOLLETT CONTENT SOLUTIONS LLC, | | | | | 160.92 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 593335F | FY25 Library Grant Books | 07/22/2025 | 160.92 | 10 E 002 2220 4300 00 399900 0000 | 160.92 |
| FOUR POINT O, INC, | | | | | 12,500.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 13940 | New Roller Shades Install & Delivery HBT PV | 07/16/2025 | 12,500.00 | 20 E 001 2540 4110 00 000000 0000 | 12,500.00 |
| FOX TECH TRANSITION PROGRAM, | | | | | 20,886.72 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| SESINV-050416 | June Tuition | 06/30/2025 | 6,527.10 | 10 E 001 1912 6700 00 000000 0000 | 6,527.10 |
| SESINV-051024 | July Tuition | 07/31/2025 | 14,359.62 | 10 E 001 1912 6700 00 000000 0000 | 14,359.62 |
| FOX VALLEY FIRE & SAFETY CO, | | | | | 21,279.33 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| IN00769572 | Fire Alarm System Service LL | 05/01/2025 | 533.00 | 20 E 001 2540 3100 00 000000 0000 | 36 533.00 |
| IN00781744 | Fire Extinguisher Service HBT | 06/26/2025 | 140.60 | 20 E 001 2540 3100 00 000000 0000 | 140.60 |
| IN00781745 | Fire Extinguisher Service LL | 06/26/2025 | 54.60 | 20 E 001 2540 3100 00 000000 0000 | 54.60 |
| IN00781747 | Fire Extinguisher Service CMS | 06/26/2025 | 335.30 | 20 E 001 2540 3100 00 000000 0000 | 335.30 |
| IN00781748 | Ansul System Service HBT | 06/26/2025 | 94.75 | 20 E 001 2540 3100 00 000000 0000 | 94.75 |
| IN00781749 | Fire Extinguisher Service PV | 06/26/2025 | 75.60 | 20 E 001 2540 3100 00 000000 0000 | 75.60 |
| IN00781750 | Fire Extinguisher Service PKMS | 06/26/2025 | 4,295.00 | 20 E 001 2540 3100 00 000000 0000 | 4,295.00 |
| IN00781752 | Ansul System Service CMS | 06/26/2025 | 167.25 | 20 E 001 2540 3100 00 000000 0000 | 167.25 |
| IN00781753 | Ansul System Service LL | 06/26/2025 | 142.49 | 20 E 001 2540 3100 00 000000 0000 | 142.49 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|------------------------------|--|--------------|----------------|-----------------------------------|--------------|
| FOX VALLEY FIRE & SAFETY CO, | | | | | 21,279.33 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| IN00781755 | Fire Extinguisher Service CHS | 06/26/2025 | 1,977.30 | 20 E 001 2540 3100 00 000000 0000 | 1,977.30 |
| IN00781756 | Fire Extinguisher Service DO | 06/26/2025 | 406.90 | 20 E 001 2540 3100 00 000000 0000 | 406.90 |
| IN00781757 | Fire Extinguisher Service Transportation | 06/26/2025 | 278.70 | 20 E 001 2540 3100 00 000000 0000 | 278.70 |
| IN00781758 | Fire Extinguisher Service CT | 06/26/2025 | 1,326.65 | 20 E 001 2540 3100 00 000000 0000 | 1,326.65 |
| IN00781759 | Ansul System Service CT | 06/26/2025 | 223.70 | 20 E 001 2540 3100 00 000000 0000 | 223.70 |
| IN00781760 | Ansul System Service PKMS | 06/26/2025 | 191.50 | 20 E 001 2540 3100 00 000000 0000 | 191.50 |
| IN00781762 | Ansul System Service PV | 06/26/2025 | 149.00 | 20 E 001 2540 3100 00 000000 0000 | 149.00 |
| IN00782480 | Ansul Tank System Repair CHS | 06/30/2025 | 255.50 | 20 E 001 2540 3230 00 000000 0000 | 37 255.50 |
| IN00783266 | Annual BluePoint Monitoring CHS | 07/02/2025 | 400.00 | 20 E 001 2540 3100 00 000000 0000 | 400.00 |
| IN00787658 | Annual Fire Alarm System Inspection CHS | 07/14/2025 | 2,035.00 | 20 E 001 2540 3100 00 000000 0000 | 2,035.00 |
| IN00787679 | Annual Fire Alarm System Inspection DO | 07/14/2025 | 380.00 | 20 E 001 2540 3100 00 000000 0000 | 380.00 |
| IN00787683 | Annual Fire Alarm System Inspection PV | 07/14/2025 | 763.00 | 20 E 001 2540 3100 00 000000 0000 | 763.00 |
| IN00788059 | Annual Fire Alarm System Inspection CT | 07/15/2025 | 1,403.00 | 20 E 001 2540 3100 00 000000 0000 | 1,403.00 |
| IN00788060 | Annual Fire Alarm System Inspection HBT | 07/15/2025 | 550.00 | 20 E 001 2540 3100 00 000000 0000 | 550.00 |
| IN00788062 | Annual Fire Alarm System Inspection LL | 07/15/2025 | 383.99 | 20 E 001 2540 3100 00 000000 0000 | 383.99 |
| IN00788064 | Annual Fire Alarm System Inspection PKMS | 07/15/2025 | 2,468.00 | 20 E 001 2540 3100 00 000000 0000 | 2,468.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|------------------------------|--|--------------|----------------|-----------------------------------|--------------|
| FOX VALLEY FIRE & SAFETY CO, | | | | | 21,279.33 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| IN00788675 | Annual Fire Alarm System Inspection CMS | 07/21/2025 | 750.00 | 20 E 001 2540 3100 00 000000 0000 | 750.00 |
| IN00790137 | Fire Alarm System Service CHS | 07/28/2025 | 1,498.50 | 20 E 001 2540 3100 00 000000 0000 | 1,498.50 |
| FRANKLIN, KEITH | | | | | 285.03 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 25 | GCN Training & Meeting Reimbursement | 07/25/2025 | 150.80 | 20 E 001 2540 4110 00 000000 0000 | 150.80 |
| Jul 31 2025 | CHS Custodial Staff Lunch Reimbursement | 07/31/2025 | 134.23 | 20 E 001 2540 4110 00 000000 0000 | 134.23 |
| GECAN, MICHAEL | | | | | 46.48 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Feb 28A | PE4Life DuPage Conf. Mileage Reimbursement 2/28/25 | 02/28/2025 | 46.48 | 10 E 002 2210 6400 00 000000 0000 | 46.48 |
| GENEVA HIGH SCHOOL, | | | | | 559.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Sep 2 | CHS Boys Varsity Golf Invite 9/2/25 | 09/02/2025 | 275.00 | 10 E 002 1500 6400 00 000000 0000 | 275.00 |
| Sep 2A | CHS Girls Varsity Golf Invite 9/2/25 | 09/02/2025 | 275.00 | 10 E 002 1500 6400 00 000000 0000 | 275.00 |
| GENSERVE, LLC, | | | | | 5,037.52 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 539493-IN | Generator Preventative Maintenance CT | 07/23/2025 | 530.00 | 20 E 001 2540 3100 00 000000 0000 | 530.00 |
| 539496-IN | Generator Preventative Maintenance PKMS | 07/23/2025 | 530.00 | 20 E 001 2540 3100 00 000000 0000 | 530.00 |
| 539498-IN | Generator Preventative Maintenance CHS | 07/23/2025 | 555.00 | 20 E 001 2540 3100 00 000000 0000 | 555.00 |
| 539502-IN | Generator Preventative Maintenance CHS | 07/23/2025 | 555.00 | 20 E 001 2540 3100 00 000000 0000 | 555.00 |
| 539511-IN | Generator Preventative Maintenance PV | 07/23/2025 | 555.00 | 20 E 001 2540 3100 00 000000 0000 | 555.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--------------------------------|---|--------------|----------------|-----------------------------------|--------------|
| GENSERVE, LLC, | | | | | 5,037.52 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 539514-IN | Generator Preventative Maintenance B&G/Transp | 07/23/2025 | 555.00 | 20 E 001 2540 3100 00 000000 0000 | 555.00 |
| 539516-IN | Generator Preventative Maintenance HBT | 07/23/2025 | 555.00 | 20 E 001 2540 3100 00 000000 0000 | 555.00 |
| 539518-IN | Generator Preventative Maintenance LL | 07/23/2025 | 555.00 | 20 E 001 2540 3100 00 000000 0000 | 555.00 |
| 539520-IN | Generator Maintenance CHS | 07/23/2025 | 647.52 | 20 E 001 2540 3100 00 000000 0000 | 647.52 |
| GLENBARD TOWNSHIP HIGH SCHOOL, | | | | | 475.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Sep 6 | CHS Girls Golf Invite 9/6/25 | 09/06/2025 | 475.00 | 10 E 002 1500 6400 00 000000 0000 | 475.00 |
| GORDON FLESCH COMPANY INC, | | | | | 22,170.76 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| I01023942 | Copier Lease Charges | 05/27/2025 | 4,631.45 | 10 E 001 2410 3250 00 000000 0000 | 39 |
| IN15182859 | Black and Color Copies | 06/01/2025 | 10,168.96 | 10 E 001 2410 3250 00 000000 0000 | 4,631.45 |
| IN15184640 | PaperCut Subscription | 06/03/2025 | 3,466.66 | 10 E 001 2410 3250 00 000000 0000 | 10,168.96 |
| IN15201028 | Black and Color Copies | 06/15/2025 | 704.08 | 10 E 001 2410 3250 00 000000 0000 | 3,466.66 |
| IN15201029 | Black and White Copies | 06/15/2025 | 1,006.38 | 10 E 001 2410 3250 00 000000 0000 | 704.08 |
| IN15201030 | Black and Color Copies | 06/15/2025 | 2,193.23 | 10 E 001 2410 3250 00 000000 0000 | 1,006.38 |
| GORDON FOOD SERVICE INC, | | | | | 944.25 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 9022473749 | Food | 05/14/2025 | 828.46 | 10 E 003 2560 4100 00 000000 0000 | 828.46 |
| 9022473751 | Supplies | 05/14/2025 | 115.79 | 10 E 003 2560 4900 00 000000 0000 | 115.79 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--------------------------------|---|--------------|----------------|-----------------------------------|--------------|
| GRAINGER, | | | | | 2,831.82 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 9556212273 | Maintenance Supplies | 06/27/2025 | 54.84 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 54.84 |
| 9562060435 | Maintenance Supplies | 07/03/2025 | 155.63 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 155.63 |
| 9569272751 | Maintenance Supplies | 07/11/2025 | 61.80 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 61.80 |
| 9569894760 | Maintenance Supplies | 07/11/2025 | 31.50 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 31.50 |
| 9575915252 | Maintenance Supplies Credit | 07/17/2025 | -155.63 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | -155.63 |
| 9588835604 | Maintenance Supplies | 07/29/2025 | 2,351.70 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 2,351.70 |
| 9592578836 | Maintenance Supplies | 07/31/2025 | 331.98 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 331.98 |
| GRAYSLAKE CENTRAL HIGH SCHOOL, | | | | | 240.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Aug 16 | CHS Boys JV Golf Invite 8/16/25 | 08/16/2025 | 240.00 | | |
| | | | | 10 E 002 1500 6400 00 000000 0000 | 240.00 |
| GREEN CLOSET CREATIVE, | | | | | 600.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 2880 | Monthly Website Management | 06/01/2025 | 300.00 | | |
| | | | | 10 E 001 2660 3190 00 000000 0000 | 300.00 |
| 2960 | Website Monthly Management | 07/01/2025 | 300.00 | | |
| | | | | 10 E 001 2660 3190 00 000000 0000 | 300.00 |
| GROOT INC, WASTE MGMT CO, | | | | | 3,318.16 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 14750450T107 | June Refuse & Recycle | 07/01/2025 | 3,318.16 | | |
| | | | | 20 E 001 2540 3210 00 000000 0000 | 3,318.16 |
| HAMADEH, RANIA | | | | | 45.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 9 | Reimbursement for Diabetes Education Course | 07/09/2025 | 45.00 | | |
| | | | | 10 E 003 2410 6400 00 000000 0000 | 45.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--------------------------------|--|--------------|----------------|-----------------------------------|--------------|
| HANNEMANN, SHANNON | | | | | 30.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| CDL 02-25 | CDL License Renewal Reimbursement | 02/16/2025 | 30.00 | 40 E 001 2550 6400 00 000000 0000 | 30.00 |
| HARLEM HIGH SCHOOL, | | | | | 500.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Sep 6 | CHS Boys and Girls Cross Country Invite 9/6/25 | 09/06/2025 | 500.00 | 10 E 002 1500 6400 00 000000 0000 | 500.00 |
| HAUG, MATTHEW | | | | | 74.79 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 1 | Breakfast for Interviews 7/1 & 7/2 | 07/01/2025 | 74.79 | 10 E 001 2520 4100 00 000000 0000 | 74.79 |
| HEARTLAND SCHOOL SOLUTIONS, | | | | | 749.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 3170089 | Mosaic Start of Year Service | 07/24/2025 | 749.00 | 10 E 001 2560 3190 00 000000 0000 | 749.00 |
| HERFF JONES, INC, | | | | | 21.88 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 1283051 | Diplomas | 07/14/2025 | 21.88 | 10 E 002 2410 4100 00 000000 0000 | 21.88 |
| HINCKLEY SPRING WATER COMPANY, | | | | | 315.36 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 14870571 072625 | B&G Bottled Water | 07/26/2025 | 234.83 | 20 E 001 2540 3700 00 000000 0000 | 234.83 |
| 2448865 071925 | Water Filtration System | 07/19/2025 | 80.53 | 40 E 001 2550 3700 00 000000 0000 | 80.53 |
| HOME DEPOT PRO, | | | | | 7,872.52 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 868834276 | Custodial Supplies | 06/10/2025 | 581.50 | 20 E 001 2540 4110 00 000000 0000 | 581.50 |
| 869049791 | Custodial Supplies | 06/11/2025 | 750.18 | 20 E 001 2540 7100 00 000000 0000 | 750.18 |
| 869049809 | Custodial Supplies | 06/11/2025 | 243.15 | 20 E 001 2540 4100 00 000000 0000 | 243.15 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-----------------|--------------------|--------------|----------------|--|--------------|
| HOME DEPOT PRO, | | | | | 7,872.52 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 869263319 | Custodial Supplies | 06/12/2025 | 1,078.27 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 1,078.27 |
| 869263327 | Custodial Supplies | 06/12/2025 | 722.27 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 722.27 |
| 869470104 | Custodial Supplies | 06/13/2025 | 354.00 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 354.00 |
| 870727286 | Custodial Supplies | 06/23/2025 | 399.50 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 399.50 |
| 870727294 | Custodial Supplies | 06/23/2025 | 138.35 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 138.35 |
| 870949120 | Custodial Supplies | 06/24/2025 | 34.38 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 34.38 |
| 872016019 | Custodial Supplies | 07/01/2025 | 1,030.16 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 1,030.16 |
| 872256318 | Custodial Supplies | 07/02/2025 | 43.40 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 42 |
| | | | | | 43.40 |
| 872474234 | Custodial Supplies | 07/03/2025 | 214.04 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 214.04 |
| 872953328 | Custodial Supplies | 07/08/2025 | 50.10 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 50.10 |
| 873643878 | Custodial Supplies | 07/11/2025 | 115.90 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 115.90 |
| 873643886 | Custodial Supplies | 07/11/2025 | 469.05 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 469.05 |
| 873870745 | Custodial Supplies | 07/14/2025 | 274.10 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 274.10 |
| 874105406 | Custodial Supplies | 07/15/2025 | 206.24 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 206.24 |
| 874154023 | Custodial Supplies | 07/16/2025 | 598.41 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 598.41 |
| 874387590 | Custodial Supplies | 07/17/2025 | 464.16 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 464.16 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|----------------------------------|---|--------------|----------------|-----------------------------------|--------------|
| HOME DEPOT PRO, | | | | | 7,872.52 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 874558661 | Custodial Supplies | 07/17/2025 | 105.36 | 20 E 001 2540 4100 00 000000 0000 | 105.36 |
| HONONEGAH HIGH SCHOOL, | | | | | 525.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Sep 26 | CHS JV Boys Soccer Indian Cup 9/26/25 | 09/26/2025 | 525.00 | 10 E 002 1500 6400 00 000000 0000 | 525.00 |
| HUNTLEY FORD, | | | | | 909.97 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 288549 | Grounds Vehicle Repairs | 07/17/2025 | 909.97 | 20 E 002 2540 3230 00 000000 0000 | 909.97 |
| ILLINOIS PRINCIPALS ASSOCIATION, | | | | | 2,442.75 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 485679 | IPA Membership M. Palcer | 07/17/2025 | 449.00 | 10 E 003 2410 6400 00 000000 0000 | 449.00 |
| 485680 | IPA Membership R. Hamadeh | 07/17/2025 | 403.75 | 10 E 003 2410 6400 00 000000 0000 | 43 403.75 |
| 488171 | IPA and NASSP Membership Renewal D. Carpenter | 08/07/2025 | 692.00 | 10 E 002 2210 6400 00 000000 0000 | 692.00 |
| 488174 | IPA Membership Renewal A. Meier | 08/07/2025 | 449.00 | 10 E 002 2210 6400 00 000000 0000 | 449.00 |
| 488175 | IPA Membership Renewal E. Pereda | 08/07/2025 | 449.00 | 10 E 002 2210 6400 00 000000 0000 | 449.00 |
| IMPACT APPLICATIONS INC, | | | | | 1,075.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 20251481 | CHS Athletics 2025-26 ImPact Subscription | 07/11/2025 | 1,075.00 | 10 E 002 1500 3190 00 000000 0000 | 1,075.00 |
| INTEGRATED SYSTEMS CORPORATION, | | | | | 9,720.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 747857 | Hosting for Skyward Student 7/25 - 6/26 | 06/14/2025 | 9,720.00 | 10 E 001 2660 3160 00 000000 0000 | 9,720.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--|---|--------------|----------------|--|--------------|
| IWM CORPORATION, | | | | | 3,675.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 27797 | 2025-2026 District Water Treatment Contract | 07/01/2025 | 3,675.00 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 3,675.00 |
| JACK, BRYAN | | | | | 10.45 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Lunch Refund FY25 | Food Service Refund CHS | 07/15/2025 | 10.45 | | |
| | | | | <i>10 R 002 1611 0000 00 000000 0000</i> | 10.45 |
| JUST KABOBS, | | | | | 690.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Aug 18 2025 | Teacher Institute Day Lunch 8/18/25 | 08/18/2025 | 690.00 | | |
| | | | | <i>10 E 003 2410 4100 00 000000 0000</i> | 690.00 |
| KANE COUNTY REGIONAL OFFICE OF ED #31, | | | | | 1,900.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 2002600007 | AA#2001 Teacher Evaluation Training K. Paulus | 07/22/2025 | 400.00 | | |
| | | | | <i>10 E 001 2212 6400 00 000000 0000</i> | 400.00 |
| 8002600007 | June Fingerprinting | 07/08/2025 | 680.00 | | 44 |
| | | | | <i>10 E 001 2520 3100 00 000000 0000</i> | 680.00 |
| 8002600026 | July Fingerprinting | 08/01/2025 | 820.00 | | |
| | | | | <i>10 E 001 2520 3100 00 000000 0000</i> | 820.00 |
| KANELAND COMM SCHOOL DIST 302, | | | | | 300.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Sep 20 | CHS Boys and Girls Cross Country Invite 9/20/25 | 09/20/2025 | 300.00 | | |
| | | | | <i>10 E 002 1500 6400 00 000000 0000</i> | 300.00 |
| KARAMITSOS, ALYSSA | | | | | 46.48 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Feb 28A | Phil Lawler DuPage Conf. Mileage Reimbursement 2/28/25 | 02/28/2025 | 46.48 | | |
| | | | | <i>10 E 002 2210 6400 00 000000 0000</i> | 46.48 |
| KARLOSKI, MELISSA | | | | | 12.85 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Lunch Refund FY25 | Food Service Refund CHS | 07/14/2025 | 12.85 | | |
| | | | | <i>10 R 002 1611 0000 00 000000 0000</i> | 12.85 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-----------------------|---|--------------|----------------|-----------------------------------|--------------|
| KOTULA, LAUREN | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Tuition 06-25 | Tuition Reimbursement EDU 6110 | 07/14/2025 | 450.00 | 10 E 008 1110 2300 00 000000 0000 | 450.00 |
| LA GAMBINA, BRITTANY | | | | | 900.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Tuition 06-25 | Tuition Reimbursement EDU 6640, 6556 | 07/14/2025 | 900.00 | 10 E 011 1120 2300 00 000000 0000 | 900.00 |
| LARSON & DARBY GROUP, | | | | | 12,984.51 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 45678 | Architect Services CT Mobile Classrooms | 06/03/2025 | 787.35 | 20 E 001 2540 3100 00 000000 0000 | 787.35 |
| 45679 | Architect Services HBT Roof Replacement | 06/03/2025 | 8,207.75 | 20 E 004 2540 5400 00 000000 0000 | 8,207.75 |
| 45775 | Architect Services CT Mobile Classrooms | 07/07/2025 | 2,184.00 | 20 E 001 2540 3100 00 000000 0000 | 2,184.00 |
| 45776 | Architect Services HBT Roof Replacement | 07/07/2025 | 1,805.41 | 20 E 004 2540 5400 00 000000 0000 | 1,805.41 |
| LESK, JAMIE | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Tuition 06-25 | Tuition Reimbursement EDU 6110 | 07/22/2025 | 450.00 | 10 E 008 1110 2300 00 000000 0000 | 450.00 |
| LRP PUBLICATIONS, | | | | | 1,958.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 30109231 | License Renewal | 04/01/2025 | 1,958.00 | 10 E 001 2210 3100 00 462000 0000 | 1,958.00 |
| LU, YAN | | | | | 29.10 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Lunch Refund FY25 | Food Service Refund CHS | 07/13/2025 | 29.10 | 10 R 002 1611 0000 00 000000 0000 | 29.10 |
| MACIANOS, | | | | | 485.97 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Aug 19 | Institute Day Lunch 8/19/25 | 08/19/2025 | 485.97 | 10 E 003 2410 4100 00 000000 0000 | 485.97 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|---------------------------------|--------------------------------|--------------|----------------|-----------------------------------|--------------|
| MALCOR ROOFING OF ILLINOIS INC, | | | | | 4,585.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 5017 | Roof Repair CT | 06/27/2025 | 775.00 | | |
| | | | | 20 E 001 2540 3230 00 000000 0000 | 775.00 |
| 5034 | Roof Repair CT | 07/24/2025 | 3,810.00 | | |
| | | | | 20 E 001 2540 3230 00 000000 0000 | 3,810.00 |
| MARBERRY CLEANERS, | | | | | 1,537.12 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| F2E2AC3C | CHS Band Uniform Cleaning | 06/26/2025 | 1,537.12 | | |
| | | | | 10 E 002 1500 3230 00 000000 0000 | 1,537.12 |
| MARCINIEC, MEGAN | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Tuition 06-25 | Tuition Reimbursement EDU 6110 | 06/25/2025 | 450.00 | | |
| | | | | 10 E 002 1130 2300 00 000000 0000 | 450.00 |
| MARLOVITS, MICHELLE | | | | | 79.70 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 2025 | July Mileage Reimbursement | 08/05/2025 | 79.70 | | 46 |
| | | | | 10 E 001 1205 3320 00 000000 0000 | 79.70 |
| MCMMASTER-CARR SUPPLY CO, | | | | | 35.23 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 48781705 | Maintenance Supplies | 07/15/2025 | 35.23 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 35.23 |
| MENARDS, ELGIN | | | | | 8,322.42 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 6269 | Maintenance Supplies | 06/24/2025 | 408.21 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 408.21 |
| 6321 | Maintenance Supplies | 06/25/2025 | 260.15 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 260.15 |
| 6443 | Maintenance Supplies | 06/27/2025 | 84.04 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 84.04 |
| 6612 | DO Break Room Cabinets | 06/30/2025 | 4,854.97 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 4,854.97 |
| 7034 | Maintenance Supplies | 07/07/2025 | 294.63 | | |
| | | | | 20 E 001 2540 4110 00 000000 0000 | 294.63 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|----------------|-----------------------------|--------------|----------------|-----------------------------------|--------------|
| MENARDS, ELGIN | | | | | 8,322.42 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 7107 | Maintenance Supplies | 07/08/2025 | 359.20 | 20 E 001 2540 4110 00 000000 0000 | 359.20 |
| 7227 | Maintenance Supplies | 07/10/2025 | 79.15 | 20 E 001 2540 4110 00 000000 0000 | 79.15 |
| 7497 | Maintenance Supplies | 07/14/2025 | 133.31 | 20 E 001 2540 4110 00 000000 0000 | 133.31 |
| 7545 | Maintenance Supplies | 07/15/2025 | 80.21 | 20 E 001 2540 4110 00 000000 0000 | 80.21 |
| 7557 | Maintenance Supplies | 07/15/2025 | 97.68 | 20 E 001 2540 4110 00 000000 0000 | 97.68 |
| 7583 | Utility Hangers | 07/15/2025 | 8.91 | 40 E 001 2550 4100 00 000000 0000 | 8.91 |
| 7632 | Maintenance Supplies | 07/16/2025 | 76.33 | 20 E 001 2540 4110 00 000000 0000 | 76.33 |
| 7668 | Maintenance Supplies Credit | 07/16/2025 | -8.91 | 20 E 001 2540 4110 00 000000 0000 | 47 -8.91 |
| 7715 | Shop Supplies | 07/17/2025 | 40.80 | 40 E 001 2550 4100 00 000000 0000 | 40.80 |
| 7978 | Maintenance Supplies | 07/21/2025 | 284.66 | 20 E 001 2540 4110 00 000000 0000 | 284.66 |
| 7981 | Washers | 07/21/2025 | 15.63 | 40 E 001 2550 4100 00 000000 0000 | 15.63 |
| 8103 | Maintenance Supplies | 07/23/2025 | 16.01 | 20 E 001 2540 4110 00 000000 0000 | 16.01 |
| 8115 | Maintenance Supplies | 07/23/2025 | 199.02 | 20 E 001 2540 4110 00 000000 0000 | 199.02 |
| 8120 | Maintenance Supplies | 07/23/2025 | 686.37 | 20 E 001 2540 4110 00 000000 0000 | 686.37 |
| 8136 | Shop Supplies | 07/23/2025 | 67.87 | 40 E 001 2550 4100 00 000000 0000 | 67.87 |
| 8595 | Tie Downs | 07/30/2025 | 27.99 | 40 E 001 2550 4100 00 000000 0000 | 27.99 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-----------------------|--|--------------|----------------|--|--------------|
| MENARDS, ELGIN | | | | | 8,322.42 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 8650 | Maintenance Supplies | 07/31/2025 | 103.11 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 103.11 |
| 8711 | Maintenance Supplies | 08/01/2025 | 7.43 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 7.43 |
| 8911 | Maintenance Supplies | 08/04/2025 | 145.65 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 145.65 |
| MENTA ACADEMY DEKALB, | | | | | 8,564.76 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| SESINV-050252 | June Tuition | 06/30/2025 | 5,324.04 | | |
| | | | | <i>10 E 001 1912 6700 00 000000 0000</i> | 5,324.04 |
| SESINV-050654 | July Tuition | 07/21/2025 | 3,240.72 | | |
| | | | | <i>10 E 001 1912 6700 00 000000 0000</i> | 3,240.72 |
| MOLLY HAWKINS, | | | | | 569.11 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 71298 | Art Supplies | 07/21/2025 | 569.11 | | 48 |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 569.11 |
| NASCO EDUCATION, | | | | | 927.40 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 837719 | Drawing Art Supplies | 07/22/2025 | 223.20 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 223.20 |
| 838546 | Ceramics Art Supplies | 07/23/2025 | 195.11 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 195.11 |
| 838573 | Painting Art Supplies | 07/23/2025 | 429.89 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 429.89 |
| 840012 | Painting Art Supplies | 07/25/2025 | 79.20 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 79.20 |
| NELSON, KYLE | | | | | 46.48 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Feb 28A | PE4Life DuPage Conf. Mileage Reimbursement 2/28/25 | 02/28/2025 | 46.48 | | |
| | | | | <i>10 E 002 2210 6400 00 000000 0000</i> | 46.48 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|------------------------------------|-----------------------------------|--------------|----------------|-----------------------------------|--------------|
| NICOR GAS, | | | | | 5,225.08 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 1617810005 06-25 | Gas Service Transportation | 06/27/2025 | 174.94 | | |
| | | | | 40 E 001 2550 4650 00 000000 0000 | 174.94 |
| 25108036754 06-25 | Gas Service CT | 07/01/2025 | 737.72 | | |
| | | | | 20 E 010 2540 4650 00 000000 0000 | 737.72 |
| 34854410007 07-25 | Gas Service CMS | 07/01/2025 | 556.79 | | |
| | | | | 20 E 003 2540 4650 00 000000 0000 | 556.79 |
| 50818310000 07-25 | Gas Service CHS | 07/01/2025 | 1,296.58 | | |
| | | | | 20 E 002 2540 4650 00 000000 0000 | 1,296.58 |
| 60695549521 07-25 | Gas Service PKMS | 07/01/2025 | 1,052.83 | | |
| | | | | 20 E 011 2540 4650 00 000000 0000 | 1,052.83 |
| 71598710003 07-25 | Gas Service LL | 07/01/2025 | 243.96 | | |
| | | | | 20 E 005 2540 4650 00 000000 0000 | 243.96 |
| 81115810004 07-25 | Gas Service DO | 07/01/2025 | 223.69 | | |
| | | | | 20 E 001 2540 4650 00 000000 0000 | 223.69 |
| 85998710006 07-25 | Gas Service PV | 07/01/2025 | 546.80 | | 49 |
| | | | | 20 E 008 2540 4650 00 000000 0000 | 546.80 |
| 96617810005 07-25 | Gas Service HBT | 07/01/2025 | 391.77 | | |
| | | | | 20 E 004 2540 4650 00 000000 0000 | 391.77 |
| NIHIP, | | | | | 703,668.28 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Aug 2054 Final | Medical Claims | 07/29/2025 | 14,694.29 | | |
| | | | | 10 E 001 2320 2250 00 000000 0000 | 56.94 |
| | | | | 10 E 002 1130 2210 00 000000 0000 | 26.46 |
| | | | | 10 E 002 1130 2220 00 000000 0000 | 10,340.56 |
| | | | | 20 E 001 2540 2210 00 000000 0000 | 6.08 |
| | | | | 20 E 001 2540 2220 00 000000 0000 | 4,264.25 |
| NORTHWESTERN ILLINOIS ASSOCIATION, | | | | | 169,728.75 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 260012 | FY26 Contractual Services Fees Q1 | 08/01/2025 | 169,728.75 | | |
| | | | | 10 E 001 4120 3190 00 000000 0000 | 169,728.75 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--------------------------------|---|--------------|----------------|-----------------------------------|--------------|
| OIL EQUIPMENT CO INC, | | | | | 1,745.42 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 364791-IN | Replace Gas Nozzle | 06/20/2025 | 1,226.13 | | |
| | | | | 40 E 001 2550 4100 00 000000 0000 | 1,226.13 |
| 364827-IN | Diesel Nozzle Replaced | 06/20/2025 | 519.29 | | |
| | | | | 40 E 001 2550 4100 00 000000 0000 | 519.29 |
| OTTAWA TOWNSHIP HIGH SCHOOL, | | | | | 225.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Sep 15 | CHS Boys Golf Invite 9/15/25 | 09/15/2025 | 225.00 | | |
| | | | | 10 E 002 1500 6400 00 000000 0000 | 225.00 |
| PACE ANALYTICAL SERVICES, LLC, | | | | | 1,688.10 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 257217150 | Water Testing Results LL | 06/20/2025 | 300.00 | | |
| | | | | 20 E 001 2540 3100 00 000000 0000 | 300.00 |
| 257217364 | Water Testing Results PV | 06/24/2025 | 122.00 | | |
| | | | | 20 E 001 2540 3100 00 000000 0000 | 122.00 |
| 257217413 | Water Testing Results CHS | 06/24/2025 | 311.00 | | 50 |
| | | | | 20 E 001 2540 3100 00 000000 0000 | 311.00 |
| 257217597 | Water Analysis Results CMS | 06/26/2025 | 311.00 | | |
| | | | | 20 E 001 2540 3100 00 000000 0000 | 311.00 |
| 257217598 | Water Analysis Results LL | 06/26/2025 | 311.00 | | |
| | | | | 20 E 001 2540 3100 00 000000 0000 | 311.00 |
| 257220245 | Water Sample Analysis CMS | 07/18/2025 | 333.10 | | |
| | | | | 20 E 001 2540 3100 00 000000 0000 | 333.10 |
| PAKK ELECTRIC, INC, | | | | | 9,080.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 1329 | Power Outage Repair PV | 06/10/2025 | 1,190.00 | | |
| | | | | 20 E 001 2540 3100 00 000000 0000 | 1,190.00 |
| 1349 | Replaced Lighting Contactors PKMS | 07/20/2025 | 7,890.00 | | |
| | | | | 20 E 001 2540 3230 00 000000 0000 | 7,890.00 |
| PALCER, MATTHEW | | | | | 147.58 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 29 | Reimbursement for Social Services Meeting Lunch | 07/29/2025 | 147.58 | | |
| | | | | 10 E 003 2410 4100 00 000000 0000 | 147.58 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|---------------------------------|--|--------------|----------------|-----------------------------------|----------------|
| PAROLA, SCOTT | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Tuition 06-25 | Tuition Reimbursement EDU 6556 | 06/27/2025 | 450.00 | 10 E 003 1120 2300 00 000000 0000 | 450.00 |
| PEACOCK THERAPEUTIC SCHOOL LLC, | | | | | 10,939.20 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 1BeMo-072025 | July Tuition | 07/23/2025 | 5,469.60 | 10 E 001 1912 6700 00 000000 0000 | 5,469.60 |
| 6BeMo-062025 | June-July Tuition | 07/02/2025 | 5,469.60 | 10 E 001 1912 6700 00 000000 0000 | 5,469.60 |
| PEERBOOM, JASON | | | | | 107.20 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Uniform FY26 | 2025-2026 Uniform Reimbursement | 07/30/2025 | 107.20 | 20 E 002 2540 4110 00 000000 0000 | 107.20 |
| PEERLESS NETWORK, INC., | | | | | 1,273.54 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 77338 | Phones 6.15.25 - 7.14.25 | 06/15/2025 | 1,273.54 | 20 E 001 2540 3400 00 000000 0000 | 51 1,273.54 |
| PEPSI COLA GEN BOT INC, | | | | | 349.35 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 27330001 | DO Pepsi Products | 07/22/2025 | 349.35 | 10 E 001 2520 4100 00 000000 0000 | 349.35 |
| PERFORMANCE HEALTH SUPPLY LLC, | | | | | 4,563.08 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| IN98966809 | CHS Athletic Trainer Supplies 2025-2026 | 07/18/2025 | 4,363.18 | 10 E 002 1500 4100 00 000000 0000 | 4,363.18 |
| IN98971162 | CHS Athletic Trainer Supplies 2025-2026 | 07/21/2025 | 199.90 | 10 E 002 1500 4100 00 000000 0000 | 199.90 |
| PERKINS, JESSICA | | | | | 15,706.50 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Oct 2023-Jul 2025 | Reimbursement for Travel and Accommodations 10/2023 - 7/2025 | 07/04/2025 | 15,706.50 | 10 E 001 2550 3320 00 462000 0000 | 15,706.50 |

Bills Payable-Central 301

| Vendor Name | | | | | | Check Amount |
|-------------------------------------|---|--------------|----------------|-----------------------------------|-----------|--------------|
| PERRY WEATHER, INC, | | | | | | 3,399.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| 10238 | CHS Athletics Outdoor Weather Warning System | 08/26/2025 | 3,399.00 | 10 E 002 1500 3190 00 000000 0000 | 3,399.00 | |
| PEST CONTROL CONSULTANTS, | | | | | | 10,320.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| 771034 | Pest Control Consultants Service Contract | 07/01/2025 | 10,320.00 | 20 E 001 2540 3100 00 000000 0000 | 10,320.00 | |
| PIEHL, ALEX | | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Tuition 06-25 | Tuition Reimbursement EDU 6556 | 07/10/2025 | 450.00 | 10 E 002 1130 2300 00 000000 0000 | 450.00 | |
| PIONEER MANUFACTURING CO/ATHLETICS, | | | | | | 5,553.89 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| INV257637 | Grounds Supplies | 07/22/2025 | 5,553.89 | 20 E 001 2540 4120 00 000000 0000 | 5,553.89 | |
| POLOWY, DANIEL | | | | | | 529.93 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Jul 24 | GCN Training & Meeting Reimbursement | 07/24/2025 | 120.02 | 20 E 001 2540 4110 00 000000 0000 | 120.02 | |
| Jul 25 | GCN Training & Meeting Luncheon Reimbursement | 07/25/2025 | 401.91 | 20 E 001 2540 4110 00 000000 0000 | 401.91 | |
| PORTO, BRETT | | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Tuition 06-25 | Tuition Reimbursement EDU 6556 | 06/30/2025 | 450.00 | 10 E 008 1110 2300 00 000000 0000 | 450.00 | |
| PORTO, PAMELA | | | | | | 20.40 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| Aug 7 2025 | Postage Reimbursement | 08/07/2025 | 20.40 | 40 E 001 2550 4110 00 000000 0000 | 20.40 | |
| PRINT LOOP, | | | | | | 2,093.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount | |
| 2025-398 | Food Service Uniform T-Shirts | 07/23/2025 | 945.00 | 10 E 002 2560 4110 00 000000 0000 | 280.00 | |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------|---------------------------|--------------|----------------|-----------------------------------|--------------|
| PRINT LOOP, | | | | | 2,093.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| | | | | 10 E 003 2560 4110 00 000000 0000 | 112.00 |
| | | | | 10 E 004 2560 4110 00 000000 0000 | 112.00 |
| | | | | 10 E 005 2560 4110 00 000000 0000 | 49.00 |
| | | | | 10 E 008 2560 4110 00 000000 0000 | 112.00 |
| | | | | 10 E 010 2560 4110 00 000000 0000 | 112.00 |
| | | | | 10 E 011 2560 4110 00 000000 0000 | 168.00 |
| 2025-410 | PK Football Logo T-Shirts | 08/06/2025 | 1,148.00 | | |
| | | | | 10 E 011 2410 3900 00 000000 0000 | 1,148.00 |
| QUINLAN & FABISH, | | | | | 6,838.37 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 16651796 | Musical Instrument Repair | 06/18/2025 | 105.50 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 105.50 |
| 16651828 | Musical Instrument Repair | 06/18/2025 | 97.00 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 97.00 |
| 16651842 | Musical Instrument Repair | 06/30/2025 | 336.00 | | 53 |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 336.00 |
| 16651897 | Musical Instrument Repair | 06/24/2025 | 87.00 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 87.00 |
| 16651905 | Musical Instrument Repair | 06/25/2025 | 108.00 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 108.00 |
| 16651925 | Musical Instrument Repair | 07/09/2025 | 144.76 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 144.76 |
| 16652011 | Musical Instrument Repair | 07/17/2025 | 132.00 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 132.00 |
| 16652027 | Musical Instrument Repair | 06/18/2025 | 142.50 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 142.50 |
| 16652291 | Musical Instrument Repair | 06/27/2025 | 97.00 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 97.00 |
| 16652307 | Musical Instrument Repair | 06/18/2025 | 103.00 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 103.00 |
| 16652320 | Musical Instrument Repair | 06/19/2025 | 103.00 | | |
| | | | | 10 E 002 1130 3230 00 000000 0000 | 103.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------|---------------------------|--------------|----------------|-----------------------------------|--------------|
| QUINLAN & FABISH, | | | | | 6,838.37 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 16652337 | Musical Instrument Repair | 06/18/2025 | 103.00 | 10 E 002 1130 3230 00 000000 0000 | 103.00 |
| 16652354 | Musical Instrument Repair | 06/18/2025 | 118.00 | 10 E 002 1130 3230 00 000000 0000 | 118.00 |
| 16652392 | Musical Instrument Repair | 07/14/2025 | 126.00 | 10 E 002 1130 3230 00 000000 0000 | 126.00 |
| 16652472 | Musical Instrument Repair | 07/02/2025 | 157.00 | 10 E 002 1130 3230 00 000000 0000 | 157.00 |
| 16652597 | Musical Instrument Repair | 07/07/2025 | 157.00 | 10 E 002 1130 3230 00 000000 0000 | 157.00 |
| 16652615 | Musical Instrument Repair | 06/30/2025 | 172.00 | 10 E 002 1130 3230 00 000000 0000 | 172.00 |
| 16652644 | Musical Instrument Repair | 07/08/2025 | 157.00 | 10 E 002 1130 3230 00 000000 0000 | 157.00 |
| 16652678 | Musical Instrument Repair | 07/02/2025 | 157.00 | 10 E 002 1130 3230 00 000000 0000 | 54 157.00 |
| 16652943 | Musical Instrument Repair | 07/18/2025 | 152.00 | 10 E 011 1120 3230 00 000000 0000 | 152.00 |
| 16652945 | Musical Instrument Repair | 07/18/2025 | 165.14 | 10 E 011 1120 3230 00 000000 0000 | 165.14 |
| 16652948 | Musical Instrument Repair | 07/18/2025 | 62.00 | 10 E 011 1120 3230 00 000000 0000 | 62.00 |
| 16652949 | Musical Instrument Repair | 07/18/2025 | 88.00 | 10 E 011 1120 3230 00 000000 0000 | 88.00 |
| 16652950 | Musical Instrument Repair | 07/18/2025 | 104.00 | 10 E 011 1120 3230 00 000000 0000 | 104.00 |
| 16652951 | Musical Instrument Repair | 07/18/2025 | 113.00 | 10 E 011 1120 3230 00 000000 0000 | 113.00 |
| 16652952 | Musical Instrument Repair | 07/18/2025 | 149.50 | 10 E 011 1120 3230 00 000000 0000 | 149.50 |
| 16665602 | Musical Instrument Repair | 07/14/2025 | 287.00 | 10 E 002 1130 3230 00 000000 0000 | 287.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------|---------------------------------------|--------------|----------------|--|--------------|
| QUINLAN & FABISH, | | | | | 6,838.37 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 16665612 | Musical Instrument Repair | 06/30/2025 | 105.50 | | |
| | | | | <i>10 E 002 1130 3230 00 000000 0000</i> | 105.50 |
| 16665622 | Musical Instrument Repair | 07/07/2025 | 287.00 | | |
| | | | | <i>10 E 002 1130 3230 00 000000 0000</i> | 287.00 |
| 16665640 | Musical Instrument Repair | 06/26/2025 | 111.00 | | |
| | | | | <i>10 E 002 1130 3230 00 000000 0000</i> | 111.00 |
| 16665692 | Musical Instrument Repair | 07/01/2025 | 138.76 | | |
| | | | | <i>10 E 002 1130 3230 00 000000 0000</i> | 138.76 |
| 16665709 | Musical Instrument Repair | 06/26/2025 | 97.00 | | |
| | | | | <i>10 E 002 1130 3230 00 000000 0000</i> | 97.00 |
| 16665778 | Band Instrument Repair | 07/09/2025 | 125.00 | | |
| | | | | <i>10 E 003 1120 3230 00 000000 0000</i> | 125.00 |
| 16665874 | Band Instrument Repair | 06/30/2025 | 170.24 | | |
| | | | | <i>10 E 003 1120 3230 00 000000 0000</i> | 170.24 |
| 16665901 | Band Instrument Repair | 06/17/2025 | 97.00 | | |
| | | | | <i>10 E 003 1120 3230 00 000000 0000</i> | 55 |
| | | | | | 97.00 |
| 16665931 | Band Instrument Repair | 07/14/2025 | 82.00 | | |
| | | | | <i>10 E 003 1120 3230 00 000000 0000</i> | 82.00 |
| 16665950 | Band Instrument Repair | 06/18/2025 | 62.00 | | |
| | | | | <i>10 E 003 1120 3230 00 000000 0000</i> | 62.00 |
| 16665962 | Band Instrument Repair | 06/18/2025 | 67.00 | | |
| | | | | <i>10 E 003 1120 3230 00 000000 0000</i> | 67.00 |
| 16665994 | Band Instrument Repair | 07/02/2025 | 124.05 | | |
| | | | | <i>10 E 003 1120 3230 00 000000 0000</i> | 124.05 |
| 16666008 | Band Instrument Repair | 06/17/2025 | 118.00 | | |
| | | | | <i>10 E 003 1120 3230 00 000000 0000</i> | 118.00 |
| 16666092 | Band Instrument Repair | 06/17/2025 | 97.00 | | |
| | | | | <i>10 E 003 1120 3230 00 000000 0000</i> | 97.00 |
| 16776859 | Marching Band Drum Sticks and Mallets | 07/17/2025 | 1,433.42 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 1,433.42 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--|--|--------------|----------------|--|--------------|
| RALPH HELM INC, | | | | | 508.99 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 4110 | Grounds Supplies | 06/26/2025 | 164.78 | | |
| | | | | <i>20 E 001 2540 4120 00 000000 0000</i> | 164.78 |
| 4543 | Grounds Supplies | 07/01/2025 | 95.95 | | |
| | | | | <i>20 E 001 2540 4120 00 000000 0000</i> | 95.95 |
| 4594 | Grounds Supplies | 07/02/2025 | 8.99 | | |
| | | | | <i>20 E 001 2540 4120 00 000000 0000</i> | 8.99 |
| 4858 | Grounds Supplies | 07/07/2025 | 73.46 | | |
| | | | | <i>20 E 001 2540 4120 00 000000 0000</i> | 73.46 |
| 5198 | Grounds Supplies | 07/11/2025 | 145.92 | | |
| | | | | <i>20 E 001 2540 4120 00 000000 0000</i> | 145.92 |
| 5390 | Grounds Supplies | 07/14/2025 | 19.89 | | |
| | | | | <i>20 E 001 2540 4120 00 000000 0000</i> | 19.89 |
| RAY SCHRIEBER DISPOSAL CO, | | | | | 430.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 932 | Waste Pick-Up PKMS | 07/25/2025 | 430.00 | | 56 |
| | | | | <i>20 E 001 2540 3210 00 000000 0000</i> | 430.00 |
| REVTRAK, | | | | | 4,221.54 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Fees 07-25 | Jul credit card fees | 07/31/2025 | 4,221.54 | | |
| | | | | <i>10 E 001 2520 3100 00 000000 0000</i> | 4,221.54 |
| RICHMOND BURTON COMMUNITY SCHOOL DIST 157, | | | | | 675.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Sep 13 | CHS JV Volleyball Spikefest 9/13/25 | 09/13/2025 | 325.00 | | |
| | | | | <i>10 E 002 1500 6400 00 000000 0000</i> | 325.00 |
| Sep 27 | CHS Varsity Volleyball Invite 9/27/25 | 09/27/2025 | 350.00 | | |
| | | | | <i>10 E 002 1500 6400 00 000000 0000</i> | 350.00 |
| RIDDELL ALL AMERICAN SPORTS CORP, | | | | | 13,412.92 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 60538175 | CHS Speed Flex Helmets and Shoulder Pads | 07/01/2025 | 5,491.20 | | |
| | | | | <i>10 E 002 1500 4100 00 000000 0000</i> | 5,491.20 |
| 60539044 | CMS Athletics Helmet Reconditioning | 06/17/2025 | 5,827.75 | | |
| | | | | <i>10 E 003 1500 4100 00 000000 0000</i> | 5,827.75 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|---|---|--------------|----------------|--|--------------|
| RIDDELL ALL AMERICAN SPORTS CORP, | | | | | 13,412.92 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 952335048 | PKMS Athletics Helmet Reconditioning | 06/13/2025 | 2,093.97 | | |
| | | | | <i>10 E 011 1500 4100 00 000000 0000</i> | 2,093.97 |
| RINDHAGE, RICHARD | | | | | 99.61 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Aug 8 | Driver Training Refreshment Reimbursement | 08/08/2025 | 38.40 | | |
| | | | | <i>40 E 001 2550 4900 00 000000 0000</i> | 38.40 |
| Jul 17 | Reimbursement for Posts for PK Bus Signs | 07/17/2025 | 11.21 | | |
| | | | | <i>40 E 001 2550 4100 00 000000 0000</i> | 11.21 |
| Jun 15 | Reimbursement for "Buddy" The Bus Driver Winner | 06/15/2025 | 50.00 | | |
| | | | | <i>40 E 001 2550 4100 00 000000 0000</i> | 50.00 |
| ROCHESTER 100 INC, | | | | | 2,804.50 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| INV101243 | Student Supplies | 07/15/2025 | 990.00 | | |
| | | | | <i>10 E 011 1120 4900 00 000000 0000</i> | 990.00 |
| WEBINV0018292 | Nicky's Folders 2025-2026 | 06/12/2025 | 1,814.50 | | 57 |
| | | | | <i>10 E 008 1110 4100 00 000000 0000</i> | 1,814.50 |
| ROLLING MEADOWS HIGH SCHOOL, | | | | | 340.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Sep 27 | CHS Girls V Golf Invite 9/27/25 | 09/27/2025 | 340.00 | | |
| | | | | <i>10 E 002 1500 6400 00 000000 0000</i> | 340.00 |
| ROUTE 47 TRANSPORTATION SERVICES, INC., | | | | | 11,750.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 2025 | Private Transportation | 07/31/2025 | 1,650.00 | | |
| | | | | <i>40 E 001 2550 3310 00 000000 0000</i> | 1,650.00 |
| Jul 2025A | Private Transportation | 07/31/2025 | 4,500.00 | | |
| | | | | <i>40 E 001 2550 3310 00 000000 0000</i> | 4,500.00 |
| Jul 2025B | Private Transportation | 07/31/2025 | 5,600.00 | | |
| | | | | <i>40 E 001 2550 3310 00 000000 0000</i> | 5,600.00 |
| RT REPAIR, | | | | | 340.75 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 19123 | Grounds Vehicle Repair | 07/18/2025 | 340.75 | | |
| | | | | <i>20 E 002 2540 3230 00 000000 0000</i> | 340.75 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|---------------------------------|--|--------------|----------------|-----------------------------------|--------------|
| RUSSO POWER EQUIPMENT, | | | | | 110.94 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| SPI21167847 | Grounds Supplies | 06/30/2025 | 110.94 | 20 E 001 2540 4120 00 000000 0000 | 110.94 |
| SAMMY'S MEXICAN GRILL, | | | | | 480.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Aug 19 2025 | LL Staff Luncheon 8/19/25 | 08/19/2025 | 480.00 | 10 E 005 2410 4100 00 000000 0000 | 480.00 |
| SANTANDER LEASING LLC, | | | | | 674,663.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 16273371 | Bus Leases | 06/02/2025 | 674,663.00 | 40 E 001 2550 3250 00 000000 0000 | 674,663.00 |
| SCHINDLER ELEVATOR CORPORATION, | | | | | 665.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 7100602191 | 3rd Party Witness for Elevator Inspection CT | 05/01/2025 | 665.00 | 20 E 001 2540 3100 00 000000 0000 | 665.00 |
| SCHMITT, ADAM | | | | | 66.48 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Feb 28 | Prof Dev PE4Life Dupage County 2/28/25 | 02/28/2025 | 66.48 | 10 E 002 2210 6400 00 000000 0000 | 66.48 |
| SCHOOL HEALTH CORPORATION, | | | | | 1,465.59 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| cinv000267291 | MAICO MA 27 Calibration | 07/24/2025 | 210.00 | 10 E 003 1120 4250 00 000000 0000 | 35.00 |
| | | | | 10 E 004 1110 4250 00 000000 0000 | 35.00 |
| | | | | 10 E 005 1110 4250 00 000000 0000 | 35.00 |
| | | | | 10 E 008 1110 4250 00 000000 0000 | 35.00 |
| | | | | 10 E 010 1110 4250 00 000000 0000 | 35.00 |
| | | | | 10 E 011 1120 4250 00 000000 0000 | 35.00 |
| CINV000267388 | MAICO MA 27 Rubber Foot Replacement | 07/24/2025 | 1.39 | 10 E 004 1110 4250 00 000000 0000 | 1.39 |
| CINV000270305 | New CHS School Health Audio Unit | 07/28/2025 | 1,254.20 | 10 E 002 2130 7100 00 000000 0000 | 1,254.20 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|------------------------|--|--------------|----------------|-----------------------------------|--------------|
| SCHOOL LIFE, | | | | | 40.70 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 200101708 | Kindergarten First Ridership Tokens | 07/29/2025 | 40.70 | 40 E 001 2550 4100 00 000000 0000 | 40.70 |
| SCHOOLBELLS LTD, | | | | | 294.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 1954 | Private Transportation | 07/12/2025 | 294.00 | 40 E 001 2550 3310 00 000000 0000 | 294.00 |
| SEAL OF ILLINOIS, | | | | | 15,040.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 13414 | June Tuition | 06/30/2025 | 7,520.00 | 10 E 001 1912 6700 00 000000 0000 | 7,520.00 |
| 13472 | July Tuition | 07/17/2025 | 7,520.00 | 10 E 001 1912 6700 00 000000 0000 | 7,520.00 |
| SERVICE CONCEPTS, INC, | | | | | 91,459.06 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 34799 | Backflow Prevention HBT | 06/25/2025 | 125.00 | 20 E 001 2540 3100 00 000000 0000 | 59 |
| 34800 | Backflow Prevention CMS | 06/25/2025 | 250.00 | 20 E 001 2540 3100 00 000000 0000 | 125.00 |
| 34801 | Backflow Prevention CHS | 06/25/2025 | 625.00 | 20 E 001 2540 3100 00 000000 0000 | 250.00 |
| 34802 | Maintenance Supplies | 06/25/2025 | 513.48 | 20 E 001 2540 4110 00 000000 0000 | 625.00 |
| 34803 | Maintenance Supplies | 06/25/2025 | 465.01 | 20 E 001 2540 4110 00 000000 0000 | 513.48 |
| 34804A | Maintenance Repairs CT PV CHS | 06/25/2025 | 0.00 | 20 E 001 2540 3100 00 000000 0000 | 465.01 |
| 34810 | 2025-2026 Maintenance Contract Quarterly Billing | 06/26/2025 | 64,800.00 | 20 E 001 2540 3100 00 000000 0000 | 0.00 |
| 34811 | 2025-2026 Plumbing Contract Quarterly Billing | 06/26/2025 | 9,000.00 | 20 E 001 2540 3100 00 000000 0000 | 64,800.00 |
| 34852 | Maintenance Supplies | 07/02/2025 | 2,798.48 | 20 E 001 2540 4110 00 000000 0000 | 9,000.00 |
| | | | | 20 E 001 2540 7100 00 000000 0000 | 1,227.20 |
| | | | | | 1,571.28 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|-------------------------|--------------------------------------|--------------|----------------|--|--------------|
| SERVICE CONCEPTS, INC, | | | | | 91,459.06 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 34853 | Maintenance Supplies | 07/02/2025 | 3,192.75 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 3,192.75 |
| 34854 | Maintenance Supplies | 07/02/2025 | 0.00 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 0.00 |
| 34889 | Maintenance Supplies | 07/14/2025 | 160.91 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 160.91 |
| 34890 | Maintenance Supplies | 07/14/2025 | 222.50 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 222.50 |
| 34891 | Maintenance Supplies | 07/14/2025 | 133.50 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 133.50 |
| 34919 | Maintenance Supplies | 07/18/2025 | 385.00 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 385.00 |
| 34920 | Maintenance Supplies | 07/18/2025 | 1,025.08 | | |
| | | | | <i>20 E 001 2540 7100 00 000000 0000</i> | 1,025.08 |
| 34921 | Maintenance Supplies | 07/18/2025 | 97.38 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 60 |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 97.38 |
| 34922 | Kitchen Repairs | 07/18/2025 | 0.00 | | |
| | | | | <i>10 E 008 2560 3230 00 000000 0000</i> | 0.00 |
| 34953 | Kitchen Repairs | 07/24/2025 | 2,680.25 | | |
| | | | | <i>10 E 011 2560 3230 00 000000 0000</i> | 943.85 |
| | | | | <i>10 E 011 2560 7100 00 000000 0000</i> | 1,736.40 |
| 34954 | Maintenance Supplies | 07/24/2025 | 4,984.72 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 4,984.72 |
| 34955 | Maintenance Supplies | 07/24/2025 | 0.00 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 0.00 |
| SERVICE SANITATION INC, | | | | | 6,286.89 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 9137139 | Basic Port O Let for CT Construction | 07/16/2025 | 82.49 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 82.49 |
| 9144524 | Service of Port O Lets CHS | 07/18/2025 | 1,045.50 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 1,045.50 |
| 9144525 | Service of Mobile Classrooms CT | 07/18/2025 | 1,436.40 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 1,436.40 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|------------------------------|----------------------------------|--------------|----------------|--|--------------|
| SERVICE SANITATION INC, | | | | | 6,286.89 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 9144526 | Service of Mobile Classrooms HBT | 07/18/2025 | 1,436.40 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 1,436.40 |
| 9144527 | Service of Mobile Classrooms PV | 07/18/2025 | 1,436.40 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 1,436.40 |
| 9144528 | Service of Mobile Classrooms LL | 07/18/2025 | 718.20 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 718.20 |
| 9144529 | Service of Port O Let CT | 07/18/2025 | 131.50 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 131.50 |
| SHANLEY, COURTNEY | | | | | 42.45 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Lunch Refund FY25 | Food Service Refund CHS | 07/16/2025 | 42.45 | | |
| | | | | <i>10 R 002 1611 0000 00 000000 0000</i> | 42.45 |
| SHERWIN-WILLIAMS CO, | | | | | 10,398.80 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 3399-9 | Maintenance Supplies | 06/23/2025 | 2,022.71 | | 61 |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 2,022.71 |
| 3528-3 | Maintenance Supplies | 06/27/2025 | 7,548.20 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 7,548.20 |
| 3857-6 | Maintenance Supplies | 07/07/2025 | 146.90 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 146.90 |
| 6990-4 | Credit for Taxes on Inv 3399-9 | 06/23/2025 | -141.12 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | -141.12 |
| 7020-9 | Maintenance Supplies | 06/24/2025 | 773.00 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 773.00 |
| 9176-6 | Maintenance Supplies | 07/07/2025 | 49.11 | | |
| | | | | <i>20 E 001 2540 4110 00 000000 0000</i> | 49.11 |
| SHRUB OAK INTERNATIONAL LLC, | | | | | 52,321.67 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| T6R4X7A4B2296 | July Tuition | 08/01/2025 | 52,321.67 | | |
| | | | | <i>10 E 001 1912 6700 00 000000 0000</i> | 52,321.67 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|------------------------|---|--------------|----------------|-----------------------------------|--------------|
| SITTER, MICHAEL | | | | | 45.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 14 | Reimbursement for Diabetes Education Course | 07/14/2025 | 45.00 | 10 E 002 1500 3190 00 000000 0000 | 45.00 |
| SJURSETH, JOEL | | | | | 51.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Jul 21 | Travel Expense Reimbursement | 07/21/2025 | 16.28 | 10 E 001 2550 3320 00 430000 0000 | 16.28 |
| Jul 22 | Travel Expense Reimbursement | 07/22/2025 | 19.53 | 10 E 001 2550 3320 00 430000 0000 | 19.53 |
| Jul 23 | Travel Expense Reimbursement | 07/23/2025 | 15.19 | 10 E 001 2550 3320 00 430000 0000 | 15.19 |
| SMARTESTENERGY US LLC, | | | | | 55,131.11 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| SME761431 | Electric Service PKMS | 06/27/2025 | 10,788.63 | 20 E 011 2540 4660 00 000000 0000 | 10,788.63 |
| SME761432 | Electric Service PV | 06/27/2025 | 4,345.67 | 20 E 008 2540 4660 00 000000 0000 | 4,345.67 |
| SME761433 | Electric Service PV | 06/27/2025 | 24.67 | 20 E 008 2540 4660 00 000000 0000 | 24.67 |
| SME762399 | Electric Service LL | 06/30/2025 | 1,279.01 | 20 E 005 2540 4660 00 000000 0000 | 1,279.01 |
| SME762400 | Electric Service LL | 06/30/2025 | 9.86 | 20 E 005 2540 4660 00 000000 0000 | 9.86 |
| SME771967 | Electric Service CHS | 07/10/2025 | 23,643.13 | 20 E 002 2540 4660 00 000000 0000 | 23,643.13 |
| SME771968 | Electric Service HBT | 07/10/2025 | 5,372.90 | 20 E 004 2540 4660 00 000000 0000 | 5,372.90 |
| SME771969 | Electric Service CMS | 07/10/2025 | 3,779.40 | 20 E 003 2540 4660 00 000000 0000 | 3,779.40 |
| SME773415 | Electric Service DO | 07/11/2025 | 740.20 | 20 E 001 2540 4660 00 000000 0000 | 740.20 |
| SME780252 | Electric Service CT | 07/18/2025 | 5,147.64 | 20 E 010 2540 4660 00 000000 0000 | 5,147.64 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|--|--------------------------------|--------------|----------------|--|--------------|
| SONITROL CHICAGOLAND WEST, SECURITAS TECH, | | | | | 3,768.74 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 260264 | Security Services DO | 07/01/2025 | 661.53 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 661.53 |
| 260265 | Security Services HBT | 07/01/2025 | 674.13 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 674.13 |
| Rev Credit 07-24 | Reversal of Credit 07-24 | 06/30/2025 | 2,433.08 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 2,433.08 |
| SPARE WHEELS TRANSPORTATION COMPANY, INC, | | | | | 11,582.03 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 2025-335 | Private Transportation | 07/31/2025 | 11,582.03 | | |
| | | | | <i>40 E 001 2550 3310 00 000000 0000</i> | 11,582.03 |
| STALKER SPORTS FLOOR, | | | | | 6,275.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 9810 | Refinish Gym Floor LL | 07/08/2025 | 2,125.00 | | |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 2,125.00 |
| 9825 | Refinish Gym Floor CMS | 07/11/2025 | 4,150.00 | | 63 |
| | | | | <i>20 E 001 2540 3100 00 000000 0000</i> | 4,150.00 |
| SUCCESS BY DESIGN INC, | | | | | 1,959.14 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 200176 | Student Supplies | 07/28/2025 | 1,959.14 | | |
| | | | | <i>10 E 011 1120 4900 00 000000 0000</i> | 1,959.14 |
| SUMMIT SCHOOL, INC, | | | | | 15,457.92 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 36673 | June Tuition | 06/30/2025 | 15,457.92 | | |
| | | | | <i>10 E 001 1912 6700 00 000000 0000</i> | 15,457.92 |
| TALAGA, MARGARET | | | | | 20.15 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Lunch Refund FY25 | Food Service Refund CHS | 07/11/2025 | 20.15 | | |
| | | | | <i>10 R 002 1611 0000 00 000000 0000</i> | 20.15 |
| TAUER, GINA | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Tuition 06-25 | Tuition Reimbursement EDU 6110 | 06/25/2025 | 450.00 | | |
| | | | | <i>10 E 002 1130 2300 00 000000 0000</i> | 450.00 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|---------------------------------|---|--------------|----------------|--|--------------|
| TAYLOR STREET PIZZERIA INC, | | | | | 451.68 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Aug 18 | LL Staff Luncheon 8/18/25 | 08/18/2025 | 451.68 | | |
| | | | | <i>10 E 005 2410 4100 00 000000 0000</i> | 451.68 |
| TESTA PRODUCE, | | | | | 88.50 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 5859610 | Fresh Produce | 01/15/2025 | 88.50 | | |
| | | | | <i>10 E 005 2560 4100 00 000000 0000</i> | 88.50 |
| THE SCOPE SHOPPE, | | | | | 1,795.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 20959 | Microscope Repairs | 07/29/2025 | 1,795.00 | | |
| | | | | <i>10 E 002 1130 3230 00 000000 0000</i> | 1,795.00 |
| ULINE, | | | | | 77.01 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 195357761 | Intro Art Supplies | 07/15/2025 | 77.01 | | |
| | | | | <i>10 E 002 1130 4100 00 000000 0000</i> | 77.01 |
| UNCHARTED LEARNING NFP, | | | | | 13,400.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 25260166 | ACCEratoredu, INCubatoredu, MobileMakersedu Annual Subscriptions | 07/01/2025 | 13,400.00 | | |
| | | | | <i>10 E 002 1130 3100 00 322000 0000</i> | 5,900.00 |
| | | | | <i>10 E 002 1130 3100 00 474500 0000</i> | 7,500.00 |
| UNIQUE PRODUCTS & SERVICE CORP, | | | | | 2,931.30 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 483804 | Custodial Supplies | 06/13/2025 | 977.10 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 977.10 |
| 483804-1 | Custodial Supplies | 06/18/2025 | 1,954.20 | | |
| | | | | <i>20 E 001 2540 4100 00 000000 0000</i> | 1,954.20 |
| UNITED STATES AWARDS, INC, | | | | | 2,182.84 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| INV02546 | CHS Athletics Chenille Letters and Pins | 07/09/2025 | 2,182.84 | | |
| | | | | <i>10 E 002 1500 4100 00 000000 0000</i> | 2,182.84 |

Bills Payable-Central 301

| Vendor Name | | | | | Check Amount |
|---------------------------------|--------------------------------|--------------|----------------|-----------------------------------|--------------|
| US BANK EQUIPMENT FINANCE, INC, | | | | | 2,262.76 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 557640026 | Copy Lease | 06/10/2025 | 2,262.76 | 10 E 001 2410 3250 00 000000 0000 | 2,262.76 |
| VERIZON WIRELESS SERVICES LLC, | | | | | 979.10 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 6118654800 | B&G Cell Phone and MiFi | 07/15/2025 | 979.10 | 20 E 001 2540 3400 00 000000 0000 | 979.10 |
| WAMI SWAG VENTURES INC, | | | | | 7,122.50 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 4222 | 2025-2026 Product Set-Up Fee | 07/14/2025 | 90.00 | 20 E 002 2540 4110 00 000000 0000 | 90.00 |
| 4223 | 2025-2026 B&G Uniform Order | 07/14/2025 | 3,139.45 | 20 E 002 2540 4110 00 000000 0000 | 3,139.45 |
| 4237 | B&G Uniform Order | 07/21/2025 | 1,918.70 | 20 E 002 2540 4110 00 000000 0000 | 1,918.70 |
| 4250 | Uniform Order | 07/28/2025 | 520.50 | 20 E 002 2540 4110 00 000000 0000 | 65 520.50 |
| 4280 | B & G Uniform Order | 08/05/2025 | 1,453.85 | 20 E 002 2540 4110 00 000000 0000 | 1,453.85 |
| WESTRA, NANCY | | | | | 95.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Lunch Refund FY25 | Food Service Refund CHS | 07/15/2025 | 95.00 | 10 R 002 1611 0000 00 000000 0000 | 95.00 |
| WILLIAMS SCOTSMAN, | | | | | 98.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| 9024271055 | Storage Container Rental CHS | 07/31/2025 | 98.00 | 20 E 001 2540 3100 00 000000 0000 | 98.00 |
| ZIPOY, HANNAH | | | | | 450.00 |
| Invoice Number | Description | Invoice Date | Invoice Amount | Account | Amount |
| Tuition 06-25 | Tuition Reimbursement EDU 6110 | 07/07/2025 | 450.00 | 10 E 004 1110 2300 00 000000 0000 | 450.00 |

Bills Payable-Central 301

Central Cmty USD 301, IL

| Fund | Total |
|---------------------------------|---------------------|
| 10 - EDUCATIONAL FUND | 909,133.09 |
| 20 - OPERATIONS AND MAINTENANCE | 666,141.71 |
| 40 - TRANSPORTATION FUND | 719,531.99 |
| | 2,294,806.79 |

Bills Payable-Northern Kane

07/22/2025 - 08/18/2025

| Vendor Name | | | Check Amount |
|---------------------------------|---|-----------------------------------|--------------|
| CENTRAL COMMUNITY USD 301, | | | 60,751.85 |
| Invoice Number | Invoice Description | Account Number | Amount |
| Jun FY25 CTE | FY25 CTE June | | |
| | | 97 E 110 4140 6400 03 322000 0025 | 57,342.36 |
| Jun FY25 Perkins | FY25 Perkins June | | |
| | | 97 E 110 4140 6400 03 474500 0025 | 4,505.49 |
| May FY25 Perkins | FY25 Perkins May | | |
| | | 97 E 110 4140 6400 03 474500 0025 | -1,096.00 |
| COMMUNITY UNIT SCHOOL DIST 300, | | | 140,338.00 |
| Invoice Number | Invoice Description | Account Number | Amount |
| Jul FY25 CTE | FY25 CTE July | | |
| | | 97 E 110 4140 6400 02 322000 0025 | 140,125.00 |
| Jul FY25 Perkins | FY25 Perkins July | | |
| | | 97 E 110 4140 6400 02 474500 0025 | 213.00 |
| COMMUNITY UNIT SCHOOL DIST 303, | | | 5,222.08 |
| Invoice Number | Invoice Description | Account Number | Amount |
| Jul FY25 CTE | FY25 CTE July | | |
| | | 97 E 110 4140 6400 04 322000 0025 | 5,222.08 |
| PADDOCK PUBLICATIONS, INC, | | | 59.80 |
| Invoice Number | Invoice Description | Account Number | Amount |
| 343483 | Legal Ad for Budget Hearing | | |
| | | 97 E 110 2330 3100 00 322000 0026 | 59.80 |
| STIRN, TODD | | | 251.30 |
| Invoice Number | Invoice Description | Account Number | Amount |
| Jul 2025 | July Mileage Reimbursement | | |
| | | 97 E 110 2120 3100 00 322000 0026 | 45.50 |
| Jun 2025 | June Mileage Reimbursement | | |
| | | 97 E 110 1100 3100 00 000000 0025 | 20.30 |
| | | 97 E 110 2120 3100 00 322000 0025 | 185.50 |
| STROH, TERRY | | | 896.56 |
| Invoice Number | Invoice Description | Account Number | Amount |
| Jul 28 | Reimbursement for Back to School Retreat July 28-29 | | |
| | | 97 E 110 2210 3100 00 322000 0026 | 896.56 |

Bills Payable-Northern Kane

Central Cmty USD 301, IL

| Fund | Total |
|-----------------------------------|-------------------|
| 97 - NORTHERN KANE REG VOC SYSTEM | 207,519.59 |
| | 207,519.59 |

Treasurer's Report-Northern Kane

| July | 2025-2026 | Central Cmty USD 301, IL | | |
|---|-------------------|--------------------------|-------------------|-------------------|
| Account Description | Beginning Balance | Deposits | Withdrawals | Ending Balance |
| 97 - NORTHERN KANE REG VOC SYSTEM | | | | |
| NORTHERN KANE CHECKING | 853,472.69 | 4,850.00 | 258,974.92 | 599,347.77 |
| Totals for Fund: 97 - NORTHERN KANE REG VOC SYSTEM | 853,472.69 | 4,850.00 | 258,974.92 | 599,347.77 |
| | Beginning Balance | Debit | Credit | Ending Balance |
| Grand Totals: | 853,472.69 | 4,850.00 | 258,974.92 | 599,347.77 |

**Northern Kane County Regional Vocational System
Revenues and Expenditures Report
July 2025**

Revenues

| Source | Description | 2025-2026 Original Budget | % of Fund | July MTD | 2025-2026 FYTD | Budget Remaining | FYTD Percent |
|-------------------------------|--------------------------------------|--------------------------------------|----------------------|---------------------|---------------------------|-----------------------------|-------------------------|
| | 1999-00 Other Local Revenue | 45,000.00 | 1.60% | 4,850.00 | 4,850.00 | 40,150.00 | 10.78% |
| Total Local Revenues | | 45,000.00 | 1.60% | 4,850.00 | 4,850.00 | 40,150.00 | 10.78% |
| | 3220-00 Career & Technical Education | 2,144,384.00 | 76.27% | - | - | 2,144,384.00 | 0.00% |
| Total State Revenues | | 2,144,384.00 | 76.27% | - | - | 2,144,384.00 | 0.00% |
| | 4745-00 Perkins V Grant | 622,171.00 | 22.13% | - | - | 622,171.00 | 0.00% |
| Total Federal Revenues | | 622,171.00 | 22.13% | - | - | 622,171.00 | 0.00% |
| Total Revenues | | 2,811,555.00 | 98.40% | 4,850.00 | 4,850.00 | 2,806,705.00 | 0.17% |

70

Expenditures

| Object | Description | 2025-2026 Original Budget | % of Fund | July MTD | 2025-2026 FYTD | Encumbered Amount | Budget Remaining | FYTD Percent |
|---------------------------|--------------------|--------------------------------------|----------------------|---------------------|---------------------------|------------------------------|-----------------------------|-------------------------|
| 1000 | Salaries | 181,150.00 | 6.44% | - | - | - | 181,150.00 | 0.00% |
| 2000 | Benefits | 52,720.00 | 1.88% | - | - | - | 52,720.00 | 0.00% |
| 3000 | Purchased Services | 96,500.00 | 3.43% | - | - | 5,370.00 | 91,130.00 | 5.56% |
| 4000 | Supplies | 2,000.00 | 0.07% | 2,505.10 | 2,505.10 | - | (505.10) | 125.26% |
| 6000 | Other/Dues/Fees | 2,479,185.00 | 88.18% | 256,469.82 | 256,469.82 | - | 2,222,715.18 | 10.34% |
| Total Expenditures | | 2,811,555.00 | 100.00% | 258,974.92 | 258,974.92 | 5,370.00 | 2,547,210.08 | 9.40% |

**CCUSD #301 Personnel Report
August 18, 2025**

New Hire – Certified

| Name | School | Position |
|------------------------|---------------|---------------------------------|
| Alling, Katherine | PKMS | Special Education Teacher |
| Augustine, Gwyneth | LL/CT | Part Time LL/CT Music Teacher |
| Ballard, Caitlin | LL | Teacher |
| Bassett, Taylor | PKMS | Teacher |
| Cassidy, Caleigh | PKMS | Teacher |
| Dean, Laurie | HBT | SPED Resource Teacher |
| De Vita, Grace | CT / PV | Speech and language Pathologist |
| Kerr, Jennifer | CHS | Teacher |
| Lambert, Jack | CHS | Teacher |
| Logothetti,Michelle | CT | Teacher |
| Lustig, Jessica | PKMS | Special Education Teacher |
| Mangers, Jessica | CT | Social Worker |
| Mattson, Ashley | CT | Teacher |
| Schutzenhofer, Jackson | PKMS | Teacher |
| Sunder, Aparna | CHS | Teacher |
| Thornton, Brooke | CHS | Teacher |
| Watson, Vernell | HBT | Teacher |
| Widerski, Jodi | CMS | Special Education Teacher |

New Hire – Non-Certified

| Name | School | Position |
|------------------------|----------------|----------------------|
| Ahlschlager, Scott | Transportation | Bus Driver |
| Balice, Paolo | Transportation | Bus Aide |
| Crespo, Danielle | DO | BCBA |
| Davenport, Doreen | Transportation | Bus Aide |
| Klott, Emily | PV | Paraprofessional |
| Kondamadugula, Madhavi | CMS | Paraprofessional |
| Miller, Kim | CT | K-5 Paraprofessional |
| Sharma, Tauja | PV | EC Paraprofessional |
| Williams, Jada | Transportation | Bus Driver |
| Zeilenga, Karen | PV | Secretary |

Voluntary Transfer – Certified

| Name | School | Position |
|----------------|---------------|-----------------|
| Walker, Sharon | CMS/PKMS | Band Teacher |

Voluntary Transfer – Non-Certified

| Name | School | Position |
|-----------------|----------------|-------------------------------|
| Deihs,Julian | HBT | FT 2nd Shift Custodial Worker |
| Hoke, Skyler | PKMS | FT 2nd Shift Custodial Worker |
| James,Kris | Transportation | Bus Driver |
| Michael, George | Transportation | Utility Driver |
| Stewart, Robert | Transportation | Bus Driver |

Resignation – Certified

| Name | School | Position | Effective Date |
|----------------|---------------|-----------------|-----------------------|
| Green, Molly | CT | Teacher | June 5, 2025 |
| Martin, Amanda | PK | PE Teacher | July 31, 2025 |
| Schmitt, Adam | CHS | PE Teacher | September 5, 2025 |

Resignation – Non-Certified

| Name | School | Position | Effective Date |
|------------------|---------------|------------------|-----------------------|
| Atkins, Kimberly | PV | Paraprofessional | August 18, 2025 |
| Collins, Lisa | PV | Paraprofessional | August 18, 2025 |
| Kelly, Jina | CHS | Paraprofessional | August 18, 2025 |

Retirement

| Name | School | Position | Effective Date |
|--------------|---------------|-----------------|-----------------------|
| Remrey, Doug | CHS | Teacher | EOY 2028-2029 |

Leave of Absence - Certified

| Name | School | Position | Effective Date |
|-------------------|---------------|-----------------|-----------------------|
| Bellenie,Michelle | CHS | English Teacher | 8/18/2025-10/3/2025 |
| Blake, Lisa | PKMS | Science Teacher | 8/18/2025-12/19/2025? |
| Casey, Michael | PV | Teacher | 8/18/2025- Unknown |
| Lupei, Nicole | HBT | ECSE Teacher | Intermittent |
| Peterson, Heidi | PKMS | PE Teacher | 8/18/2025-10/10/2025 |

Leave of Absence – Non-Certified

| Name | School | Position | Effective Date |
|--------------|---------------|-----------------|-----------------------|
| Waxman, Cody | CHS | Custodian | 8/19/2025-8/22/2025 |

MEMORANDUM

FROM: Stephen Buchs, Director of Curriculum 6-12

TO: District 301 Board of Education, Dr. Griff Powell and Dr. Kyle Schumacher, Interim
-Superintendents

DATE: July 15, 2025

RE: Textbook Adoption for HS AP German - \$1,179.69

MATERIALS:

- Wayside Publishing Neue Blickwinkel- Student Editions
 - \$135.90 per units hardcopy and digital, Qty - 7 = total \$951.30
- HMH Science Dimensions Physics 1 yr - Teacher Editions
 - \$129.72 per unit, Qty - 1 = total \$129.72

Rationale:

This title would be specifically for the AP German culture and language. The AP students are in their fifth year of language learning. Many of the students in the AP course have the AP German Culture and Language Exam as their end goal. The College Board requires that the AP curriculum revolves around the 6 AP Themes (Families and Communities; Science and Technology; Contemporary Life; Personal and Public Identity; Beauty and Aesthetics; Global Challenges).

This textbook (Neue Blickwinkel) offers 10 chapters that specifically target the AP themes. This text book could be extremely helpful to students, it provides multiple primary sources to analyze, such as particular articles and videos pertaining to German culture, from the past and today. There are also journal entries from German students and civilians, which could help to draw the students into the German culture and language. Along with this, there is a plethora of AP style multiple choice questions going with the complex readings, writing prompts, and cultural comparisons, which could serve to prepare the students for the AP exam. It would also be very helpful to the instructor. The set up of the chapters and the task would allow the students to work more independently.

Other rationale provided by the instructor (Anette Bliss):

- Multiple contexts to choose from 73
- A plethora of informational texts but also other text genres like the biographical text

“Mein süßer erster Schultag”

- This topic is at the heart of the AP theme “Alltag”
- Good explanation of the German education system and on cultural practices going with the first day of school in Germany
- Alphabetical vocab guide at the end of the book, including English translations
- Each chapter comes with an authentic video, discussing one aspect of the unit in question

Textbook Information:

- *Neue Blickwinkel: Wege zur Kommunikation und Kultur*, By Wayside Publishing, ISBN 978-1-94240-016-5 Copyright: 2017

Recommendation:

The textbook *Neue Blickwinkel*, by Wayside Publishing, is recommended for purchase beginning for the 2025-2026 school year. This book will be a replacement resource as the current *Netzerk neu B1* book is a Ernst Klett Sprachen product. The purchase will provide one classroom hard copy set and e-versions accessible by the students.

MEMORANDUM

FROM: Stephen Buchs, Director of Curriculum 6-12

TO: District 301 Board of Education, Dr. Griff Powell and Dr. Kyle Schumacher, Interim
-Superintendents

DATE: July 15, 2025

RE: Textbook Adoption for HS Physics - \$23,181.96

MATERIALS:

- HMH Science Dimensions Physics - Student Editions
 - \$29.25 per unit, Qty - 60 = total \$1,755.00
- HMH Science Dimensions Physics 6 yr - Teacher Editions
 - \$197.35 per unit, Qty - 3 = total \$592.05
- HMH Science Dimensions Physics 6 yr - Student Digital Licenses
 - \$137.10 per unit, Qty - 150 = total \$20,565.00

Rationale:

This book is written for high school students enrolled in general education Physics Class. The reason for selecting this book is due to its relevance to Next Generation Science Standards, performance assessments, student growth assessments, reasonable pacing and content inclusion, and having resources readily available to a newer approach to teaching (NGSS and Performance Assessments). Furthermore, the book does a good job of linking standards to different Depth of Knowledge (DoK) levels on assessments and learning tasks. Overall, the book will provide a resource that matches relatively closely to the current curriculum, includes effective and research-based learning strategies, contains relevant phenomenon-based units, and will provide teachers and students with an updated learning resource to be used in and out of the classroom. The online portal for both students and teachers is also relatively easy to use and for students to learn how to use.

Other rationale provided by the instructors (Kelly Stoner and Terie Engelbrecht):

- Includes interactive practice material resources through the digital portal
- Emphasis the engineering process rather than scientific method
- Alignment to NGSS
- Designed to engage students in scientific practice while learning
- Materials are designed to move students from lower level to higher levels of Webb's DoK



Textbook Information:

- *Physics*, By Houghton Mifflin Harcourt, ISBN 978-0-35-804718-6, 978-0-35-839961-2, Copyright: 2020

Recommendation:

The textbook *Physics*, by HMH, is recommended for purchase beginning for the 2025-2026 school year. This book will be a replacement resource as the current *Physics* book is a Glencoe product that is not aligned to NGSS copyright 2005. The purchase will provide one classroom hard copy set to each of the high school *Physics* classrooms and e-versions accessible by the students.

MEMORANDUM OF UNDERSTANDING
BETWEEN THE
BOARD OF EDUCATION OF
CENTRAL COMMUNITY UNIT SCHOOL DISTRICT No. 301
AND THE
CENTRAL EDUCATION ASSOCIATION, IEA-NEA

The Board of Education of Central Community Unit School District No. 301 (“the Board”) and the Central Education Association, IEA-NEA (“the Association”) hereby enter into the following Memorandum of Understanding regarding the Board’s use of teachers contracted through Epic Special Education Staffing:

1. The Parties agree that, for the 2025-2026 school year, the Board may utilize educators contracted through Epic Special Education Staffing to fill up to two Special Education teacher positions. The educators contracted through Epic Special Education Staffing are not considered employees of the Board and are not members of the bargaining unit represented by the Association.
2. This Memorandum of Understanding expires on the last teacher workday of the 2025-2026 school year.
3. This Memorandum of Understanding shall not be used as precedent or cited as practice by either the Board or the Association in any proceeding whatsoever except to enforce the terms of this Memorandum of Understanding.

For the Board of Education
of Central CUSD No. 301

For the Central Education
Association, IEA-NEA

Date

Date

**AFFILIATION AGREEMENT
MEMORANDUM OF UNDERSTANDING
BETWEEN THE BOARD OF EDUCATION OF CENTRAL COMMUNITY UNIT SCHOOL DISTRICT NO. 301,
NORTHERN KANE REGION 110, AND FOX COLLEGE, INC.**

THIS AFFILIATION AGREEMENT ("Agreement") is entered as of the date of execution between Fox College, Inc., an Illinois corporation operating as a private college commonly known as Fox College (herein "Fox" and "College"), and the Board of Education of Central Technical Education System EFE 110 ("Northern Kane EFE 110") (collectively the "Parties") for the establishment, implementation, and approval of an affiliation agreement in accordance with the College's AVMA-accredited ("NAVTA") program in veterinary technology (herein "VT Program"). The affiliation should be one that encourages the acquiring of additional education beyond the assistant level for those individuals who choose to continue on with a career in veterinary technology. This MOU outlines the College's recognition of the curriculum and training of the Veterinary Assistant Program ("Assistant Program") offered by the District through Northern Kane EFE 110, a program under which participating high school students can obtain the Veterinary Assistant Certificate upon completion; and provides for opportunities for participating high school students to obtain from the College information on regarding veterinary technology careers and the VT program as well as scholarships for the VT Program.

The Parties agree as follows:

1. **Career Exploration.** In accordance with the terms of this Agreement and the AVMA-accredited (NAVTA) policies, the Parties agree to collaboratively establish the following activities to be delivered in collaboration with the District and Northern Kane EFE 110:

| Career Exploration Activity | Location Where Offered | Grade Level Attending | Minimum Per Year |
|-------------------------------|-----------------------------------|-----------------------|------------------|
| Site tour with guest speakers | Vet Tech Institute at Fox College | Sophomore | 1 |
| Investigate the Institute | Vet Tech Institute at Fox College | Junior | 2 |

2. **Approved Transfer Policies.** Fox College agrees to transfer credit for general education courses completed at the high school level if Northern Kane EFE 110 students who participated in the District's Assistant Program attend Fox College within 18 months of graduation from high school. These courses will not decrease the time necessary for the program completion at Fox College; however, they may be used towards meeting their general education requirements.

- English 101-AP with score of 3 or higher or dual credited earned through ECC with a grade of C or higher.
- Speech 101-AP with score of 3 or higher or dual credited earned through ECC with a grade of C or higher.
- Psychology 101-AP with score of 3 or higher or dual credited earned through ECC with a grade of C or higher.

3. Scholarship Policies for Assistant Program Students. Fox College agrees to provide scholarships for an unlimited number of students from the Northern Kane EFE 110 member school districts for tuition at Fox College of \$2,500 per student over the course of enrollment. To be eligible for the scholarship, the student must have successfully completed the Assistant Program through Northern Kane EFE 110, received his or her Veterinary Assistant Certificate, and met the Fox College entrance requirements.

A \$2,500 scholarship over the course of enrollment to be dispersed as follows: \$1,000 in first semester, \$1,000 in third semester, and \$500 in externship semester. The number of scholarships available to said Parties on an annual basis is unlimited.

No eligible recipient of the scholarship shall be denied access to such programs on the basis of sex, race, national origin, ethnic background, religious affiliation, or disability. 23 Ill. Admin. Code 254.940. The College shall also comply with all other applicable nondiscrimination laws and regulations.

4. Advisory Board Collaboration. Fox College agrees to partner, participate and/or host a semi-annual meeting for the Advisory Board of the Assistant Program.

5. Primary Contacts and Notifications. The Parties hereby designate the following individuals as having primary responsibility for the management and administration of this Agreement ("Primary Contacts"):

For the College: Jackie Flynn, or successor
 President
 jflynn@foxcollege.edu
 708-444-4500

For the District: Dr. Griff Powell
 Co-Interim Superintendent
 griff.powell@central301.net
 847-464-6005

For Northern Kane
County Region 110: Terry Stroh
 EFE Director
 terry.stroh@central301.net
 847-464-6005 ext. 8535

The Parties will ensure that the Primary Contacts are included on all correspondence regarding the administration of this Agreement.

- A. Disputes. The Parties agree to seek to collaboratively resolve any disputes regarding the proposed terms of this Agreement through the Primary Contacts identified in Section 6.B, above. In the event any such dispute cannot be timely resolved, the Primary Contacts will refer the dispute of the proposed terms to the College's President and the District's superintendent for resolution.
- B. Amendment. This Agreement may be amended at any time by the written agreement of all Parties.
- C. Term and Termination. This Agreement will remain in effect unless terminated by either Party upon ninety (90) day written notice to the other Party. Termination shall not affect any obligations of Fox College to provide scholarships for students who have been awarded scholarships as of the date of termination of this Agreement.
- D. Indemnification.
1. To the fullest extent permitted by law, the District agrees to indemnify and hold harmless Fox College, its officers, officials, agents, volunteers, employees, and their successors and assigns, in their individual and official capacities (the "Fox College Indemnified Parties") from and against any and all liabilities, loss, claim, demand, lien, damage, penalty, fine, interest, cost and expense, including without limitation, reasonable attorneys' fees and litigation costs, incurred by Fox College Indemnified Parties arising out of any activity of the District in performance of this Agreement, or any act or omission of the District or of any employee, agent, contractor, or volunteer of the District (the "District Indemnitors"), but only to the extent caused in whole or in part by any negligent or willful and wanton act or omission of the District Indemnitors.
 2. To the fullest extent permitted by law, Fox College agrees to indemnify and hold harmless the District, its Board and its members, employees, volunteers, agents, their successors, and assigns, in their individual and official capacities (the "District Indemnified Parties") from and against any and all liabilities, loss, claim, demand, lien, damage, penalty, fine, interest, cost and expense, including without limitation, reasonable attorneys' fees and litigation costs, incurred by the District Indemnified Parties arising out of any activity of Fox College in performance of this Agreement, or any act or omission of Fox College or of any employee, agent, contractor or volunteer of the Fox College (the "Fox College Indemnitors"), but only to the extent caused in whole or in part by any negligent or willful and wanton act or omission of the Fox College Indemnitors.
- E. Compliance with Laws and Grant Procedures. Each Party shall comply with all applicable local, state, and federal laws, rules, regulations, state and federal grant procedures, and ordinances in the performance of its obligations under this Agreement.
- F. Governing Law. This Agreement and the rights and responsibilities of the Parties shall be interpreted and enforced in accordance with the laws of the State of Illinois.

G. Severability. If any provision of this Agreement shall be held or deemed to be or shall in fact be inoperative or unenforceable as applied in any particular case in any jurisdiction or jurisdictions or in all cases because it conflicts with any other provision or provisions hereof or any constitution, statute, ordinance, rule of law or public policy, or for any reason, such circumstance shall not have the effect of rendering any other provision or provisions contained herein invalid, inoperative or unenforceable to any extent whatsoever. The invalidity of any one or more phrases, sentences, clauses, or sections contained in this Agreement shall not affect the remaining portions of this agreement or any part thereof. In the event that this Agreement is determined to be invalid by a court of competent jurisdiction, it shall be terminated immediately.

The Parties hereby confirm their agreement to the terms set forth herein.

FOR THE COLLEGE

President

Jacque Flynn

Printed Name

J. Flynn

Signature

7/29/2005

Date

FOR THE DISTRICT

Superintendent

Eriss Powell

Printed Name

Eriss Powell

Signature

8-1-05

Date

FOR NORTHERN KANE EFE 110

Terry L. Stroh Jr.

Printed Name

Terry Stroh Jr.

Signature

7/31/2005

Date

TO: Dr. Griff Powell & Kyle Schumacher, Interim Superintendents, Board of Education

FROM: Pam Porto, Director of Transportation

DATE: August 13, 2025

RE: Annual Review of Hazardous Routes

The Board is required to annually review all Serious Safety Findings approved by the Illinois Department of Transportation to verify that the hazardous conditions remain unchanged. Attached you will find Prairie View Grade School School's Serious Safety Hazard Findings that were approved by the Illinois Department of Transportation in 2017 with additional approved hazards that were approved by the Illinois Department of Transportation in 2024 for Prairie Knolls Middle School, Prairie View Grade School, Lily Lake Grade School, Central Middle School, Howard B. Thomas Grade School and Central High School.

The Transportation Department has reviewed these conditions and determined they have not changed. It is recommended that the Board renew these hazardous designations as hazardous routes for bussing.



Illinois Department of Transportation

Division of Highways / Region 1 / District 1
201 West Center Court / Schaumburg, Illinois 60196-1096

OPERATIONS: Serious Safety Hazard Finding - Busing
Kane County - SD #301

August 9, 2017

Ms. Pam Porto
Director of Transportation
Central Community Unit School District 301
275 South St
PO Box 396
Burlington, IL 60109

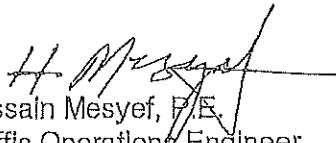
Dear Ms. Porto:

We have enclosed one copy of the approved Serious Safety Hazard Finding which your school district submitted. This copy should be retained in your files for use in obtaining reimbursement number 301-17-1.

If you have any questions or need additional information regarding this or other hazardous locations, please contact Mr. Jim Stoner, Pedestrian Safety Engineer, at (847) 705-4152.

Very truly yours,

Anthony J. Quigley, P.E.
Region One Engineer

By: 
Hussain Mesyef, P.E.
Traffic Operations Engineer

Enclosure



**Illinois Department
of Transportation**

Serious Safety Hazard Finding

A publication entitled "School Safety Busing and Instructions for Submitting Findings" is available from the Illinois Department of Transportation, 2300 South Dirksen Parkway, Springfield, Illinois 62764. The school administrator preparing this submittal should refer to the instructions in the booklet.

Two copies of this form are to be submitted to the IDOT District Office indicated in the instruction booklet. The IDOT District Office will approve or disapprove the submittal within thirty (30) days and return one copy to the school district indicating the action taken.

| | | | | | |
|--|----------------|--------------------|---|---|--|
| Name of School District Central Community Unit School District 301 | | | | Address of Administrative Office 275 South St P.O. Box 396 Burlington IL 60109 | |
| District # 301 | County Kane | City Burlington | Zip Code 60109 | | |
| Name of Contact Representative Frank Duffield <u>Pam Porto</u> | | | Title Director of Transportation | Phone Number (847) 464-6052 <u>or 847-867-4</u> | |
| Name of School to Which Children Are Walking Prairie View Grade School | | | Annual Sequential Number (Use on Map and Attachments) 301-17-1 | | |

| | | | |
|-------------------|--|------|----------------------|
| Type of Condition | 1. <input checked="" type="checkbox"/> Single Hazard | Type | <u>III</u> |
| | 2. <input type="checkbox"/> Combination Hazard | Type | _____ and Type _____ |

| | |
|---|---|
| Location | 3. Along _____ (Street or Road Name) |
| (Attach a map showing the described location(s).) | 4. Type I From _____ To _____ |
| | 5. Type II From _____ To _____ |
| | 6. Type III At <u>Nesler Rd and South St.</u> |
| | 7. Type IV At _____ |

| | | | |
|---|--------|--|----------------------|
| (Complete only for types listed on lines 1 or 2.) | Points | Type I - Walking Along a Roadway | _____ Points |
| | | 8. Highest qualifying grade level (through _____ grade) | Table 1 _____ Points |
| | | 9. Location of walkway (on shoulder _____ feet from roadway) OR (behind curb or ditch _____ feet from roadway) | Table 2 _____ Points |
| | | 10. Speed of traffic (_____ mph) | Table 3 _____ Points |
| | | 11. Volume of traffic (_____ vehicles/hour) (_____ lanes) | Table 4 _____ Points |
| | | 12. Length of hazardous section (_____ miles) | Table 5 _____ Points |
| | | 13. Board's judgment points (attach explanation) | _____ Points |
| | | 14. Total of lines 8 through 13 | _____ Points |

Type II - Walking on a Roadway

- 15. Highest qualifying grade level (through _____ grade) ____ Points
Table 6
- 16. Reason for walking on roadway:
(No shoulder or walkway off pavement for _____ feet, OR
Narrow bridge or underpass for _____ feet) ____ Points
Table 7
- 17. Speed of traffic (_____ mph) ____ Points
Table 8
- 18. Volume of traffic (_____ vehicles/hour) (_____ lanes) ____ Points
Table 9
- 19. Length of hazardous section (_____ miles) ____ Points
Table 10
- 20. Board's judgment points (attach explanation) ____ Points
- 21. Total of lines 15 through 20

Points
(Continued)

- Type III -- Crossing a Roadway** (Name of roadway being crossed Nesler Rd)
- 22. Highest qualifying grade level (through 5th grade) ____ Points
Table 11
 - 23. Control on roadway being crossed (No Stop Control) ____ Points
Table 12
 - 24. Speed and volume of traffic (45-55 mph) (547/914 vehicles/hour) ____ Points
Table 13
 - 25. Width of roadway (90 feet) ____ Points
Table 14
 - 26. Board's judgment points (attach explanation) No letter =
13 Points
 - 27. Total of lines 22 through 26

Type IV -- Crossing Railroad Tracks

- 28. Highest qualifying grade level (through _____ grade) ____ Points
Table 15
- 29. Crossing protection and number of tracks:
(_____ protection; _____ tracks used) ____ Points
Table 16
- 30. Speed and number of trains:
(_____ mph; _____ trains) ____ Points
Table 17
- 31. Board's judgment points (attach explanation) ____ Points
- 32. Total of lines 28 through 31

Finding

- 33. Single hazard qualifies since 13 points in a Type III situation equals or exceeds 12.
- 34. Combination hazard qualifies since the total of _____ points in a Type _____ situation and _____ points in a Type _____ situation equals or exceeds 20.
- 35. Hazard is temporary for _____ school year (resubmit annually).
- 36. No hazard

Certification

I hereby certify that the data in this application, including accompanying maps and statements, are true and correct to the best of my knowledge and belief. Board approval was given on date of _____, 20____, and the minutes of this meeting bear evidence of this approval.

See Next page.

15. Highest qualifying grade level (through _____ grade) _____ Points
Table 6
16. Reason for walking on roadway:
(No shoulder or walkway off pavement for _____ feet, OR
Narrow bridge or underpass for _____ feet) _____ Points
Table 7
17. Speed of traffic (_____ mph) _____ Points
Table 8
18. Volume of traffic (_____ vehicles/hour) (_____ lanes) _____ Points
Table 9
19. Length of hazardous section (_____ miles) _____ Points
Table 10
20. Board's judgment points (attach explanation) _____ Points
21. Total of lines 15 through 20

- Points (Continued)** **Type III -- Crossing a Roadway (Name of roadway being crossed Nesler Rd)**
22. Highest qualifying grade level (through 5th grade) 5 Points
Table 11
23. Control on roadway being crossed (No Stop Control) 3 Points
Table 12
24. Speed and volume of traffic (45-55 mph) (547/914 vehicles/hour) 3 Points
Table 13
25. Width of roadway (90 feet) 2 Points
Table 14
26. Board's judgment points (attach explanation) *No letter =*
13 Points
27. Total of lines 22 through 26

Type IV -- Crossing Railroad Tracks

28. Highest qualifying grade level (through _____ grade) _____ Points
Table 15
29. Crossing protection and number of tracks:
(_____ protection; _____ tracks used) _____ Points
Table 16
30. Speed and number of trains:
(_____ mph; _____ trains) _____ Points
Table 17
31. Board's judgment points (attach explanation) _____ Points
32. Total of lines 28 through 31

- Finding**
33. Single hazard qualifies since 13 points in a Type III situation equals or exceeds 12.
34. Combination hazard qualifies since the total of _____ points in a Type _____ situation and _____ points in a Type _____ situation equals or exceeds 20.
35. Hazard is temporary for _____ school year (resubmit annually).
36. No hazard

Certification I hereby certify that the data in this application, including accompanying maps and statements, are true and correct to the best of my knowledge and belief. Board approval was given on date of _____, 20____, and the minutes of this meeting bear evidence of this approval.

See Next page.

7-17-17
Date

Christina Johnson
Signature of Secretary or President of Board of Education or Board of Directors

Action by Illinois Department of Transportation

Date Submittal Received July 29, 2017

Serial No. 1-17-8

Approved

- Disapproved for corrections, additions, or clarifications noted in transmittal letter.
- Disapproved for reason or reasons noted in transmittal letter.

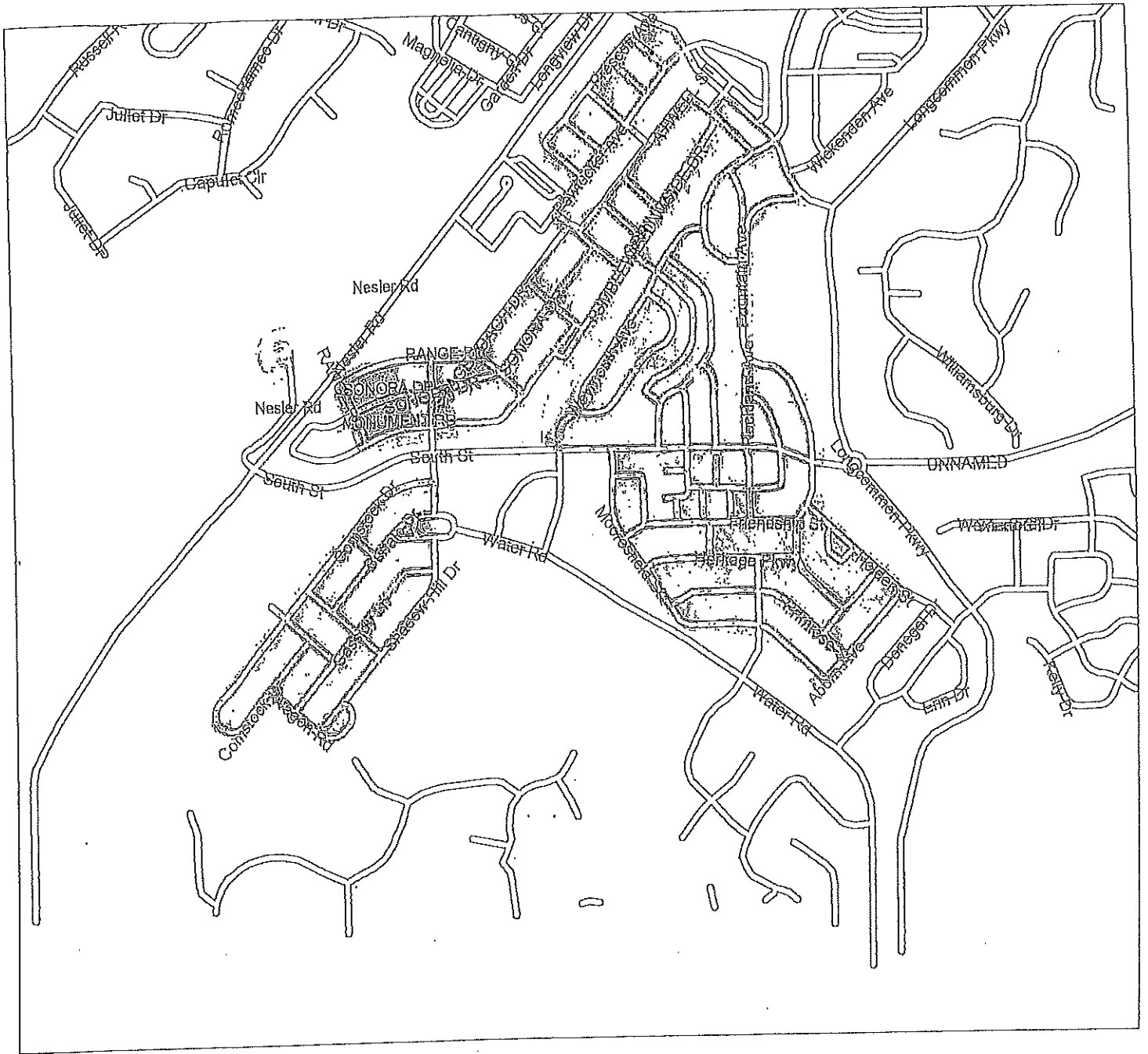
August 2, 2017
Date

Mr. Anthony Crowley
Signature of IDOT Regional Engineer

Reimbursement Estimate (This information will have no effect on IDOT's action on the submittal.)

1. Approximately how many students will annually be qualified for busing by this submittal that did not previously qualify for reimbursable busing? 500 students
2. What is the projected additional annual reimbursement that will result from this submittal? \$

Central Community Unit School District #301 District Map



[Stippled Area] = Prairie View Elementary School.

[Dotted Area] = AREA STUDENTS LIVE THAT QUALIFY FOR THIS HAZARD.

= Intersection of South St & Nesler (HAZARD)



Illinois Department of Transportation

Office of Highways Project Implementation / Region 1 / District 1
201 West Center Court / Schaumburg, Illinois 60196-1096

**OPERATIONS: Serious Safety Hazard Finding - Busing
Transportation Department District No. 301**

January 22, 2025

Mr. Rick Rindhage
Transportation Safety Coordinator
Central Community Unit School District #301
275 South Street
P.O. Box 396
Burlington, IL 60109

Dear Mr. Rindhage:


We have enclosed the approved Serious Safety Hazard Findings, which your school district submitted. These copies should be retained in your files for use in obtaining reimbursement for the following serial numbers:

- 301-25-02 Type II (Plato Road – Highland Trail to Route 47)
- 301-25-03 Type III (Nesler Road at Gansett Parkway)
- 301-25-04 Type III (Nesler Road at South Street)
- 301-25-05 Type III (Route 47 – Cochise Drive to Route 47) and
(Route 47 at IC Trail/Empire Road)
- 301-25-06 Type II (Plato Road – Highland Trail to Route 47)
- 301-25-07 Type II (Plato Road – Highland Trail to Route 47)

If you have any questions or need additional information regarding this or other hazardous locations, please contact Brandy Kennedy, Area Traffic Field Engineer, at (847) 705-4604.

Very truly yours,

Jose Rios, P.E.
Region One Engineer

By: 

Lisa E. Heaven-Baum, P.E.
Bureau Chief of Traffic Operations

Enclosure: Serious Safety Hazard Findings



Illinois Department of Transportation

Serious Safety Hazard Finding

A publication entitled "School Safety Busing and Instructions for Submitting Findings" is available from the Illinois Department of Transportation, 2300 South Dirksen Parkway, Springfield, Illinois 62764. The school administrator preparing this submittal should refer to the instructions in the booklet.

Two copies of this form are to be submitted to the IDOT District Office indicated in the instruction booklet. The IDOT District Office will approve or disapprove the submittal within thirty (30) days and return one copy to the school district indicating the action taken.

| | | | | | |
|--|--|-------------------------------------|--|-------------------------------------|--|
| Name of School District CENTRAL COMMUNITY UNIT SCHOOL DISTRICT | | | Address of Administrative Office 275 SOUTH STREET PO BOX 396 BURLINGTON, IL 60109 | | |
| District Number 301 | County, Illinois KANE, ILLINOIS | Zip Code 60109 | | | |
| Name of Contact Representative PAM PORTO | | Title DIRECTOR OF TRANSPORTATION | Phone No. (847) 464-6062 | (Area Code) | |
| Name of School to which Children are Walking CENTRAL HIGH SCHOOL | | | Annual Sequential Number 301 — 24 | (Use on Map and Attachments) — 1 | |
| Type of Condition | 1. <input checked="" type="checkbox"/> Single Hazard | | Type <u>II</u> | | |
| | 2. <input type="checkbox"/> Combination Hazard | | Type _____ and Type _____ | | |
| Location (Attach a map showing the described location(s).) | 3. Along <u>PLATO ROAD</u> (Street or Road Name) | | | | |
| | 4. Type I from _____ to _____ | | | | |
| | 5. Type II from <u>HIGHLAND TRAIL</u> to <u>ROUTE 47</u> | | | | |
| | 6. Type III at _____ | | | | |
| | 7. Type IV at _____ | | | | |

| Points | Type I - Walking Along a Roadway | Points | |
|---|---|---|----------------------------|
| (Complete only for Types listed on lines 1 or 2.) | 8. Highest qualifying grade level (through _____ grade) | _____ Points | |
| | 9. Location of walkway (on shoulder _____ feet from roadway, or) (behind curb or ditch _____ feet from roadway) | _____ Points | |
| | 10. Speed of traffic (_____ mph) | _____ Points | |
| | 11. Volume of traffic (_____ vehicles/hour) (_____ lanes) | _____ Points | |
| | 12. Length of hazardous section (_____ miles) | _____ Points | |
| | 13. Board's judgment points (attach explanation) | _____ Points | |
| | 14. Total of lines 8 through 13 | _____ Points | |
| | Type II - Walking on a Roadway | | |
| | | 15. Highest qualifying grade level (through <u>12</u> grade) | <u>2</u> Points |
| | | 16. Reason for walking on roadway (no shoulder or walkway off pavement for <u>528</u> feet, or narrow bridge or underpass for _____ feet) | <u>3</u> Points |
| | | 17. Speed of traffic (<u>40</u> mph) | <u>2</u> Points |
| | | 18. Volume of traffic (<u>689</u> vehicles/hour) (<u>2</u> lanes) | <u>2</u> Points |
| | | 19. Length of hazardous section (<u>0.3</u> / <u>0.8</u> miles) | <u>4</u> / <u>2</u> Points |
| | | 20. Board's judgment points (attach explanation) | <u>0</u> / <u>2</u> Points |
| | 21. Total of lines 15 through 20 | <u>13</u> Points | |

Con'd

Type III - Crossing a Roadway (Name of roadway being crossed _____)

- 22. Highest qualifying grade level (through _____ grade) _____ Points
Table 11
- 23. Control on roadway being crossed (_____) _____ Points
Table 12
- 24. Speed and volume of traffic (_____ mph)
(_____ vehicles/hour) _____ Points
Table 13
- 25. Width of roadway (_____ feet) _____ Points
Table 14
- 26. Board's judgment points (attach explanation) _____ Points
- 27. Total of lines 22 through 26 _____ Points

Type IV - Crossing Railroad Tracks

- 28. Highest qualifying grade level (through _____ grade) _____ Points
Table 16
- 29. Crossing protection and number of tracks _____ Points
Table 16
(_____ protection; _____ tracks used)
- 30. Speed and number of trains _____ Points
(_____ mph; _____ trains) _____ Points
Table 17
- 31. Board's judgment points (attach explanation) _____ Points
- 32. Total of lines 28 through 31 _____ Points

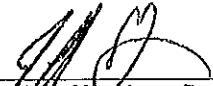
Finding

- 33. Single hazard qualifies since 13 points in a Type II situation equals or exceeds 12
- 34. Combination hazard qualifies since the total of _____ points
in a Type _____ situation and _____ points in a Type _____ situation equals or exceeds 20
- 35. Hazard is temporary for _____ school year (resubmit annually)

Certification

I hereby certify that the data in this application, including accompanying maps and statements, are true and correct to the best of my knowledge and belief. Board approval was given on date of July 15, 2024, and the minutes of this meeting bear evidence of this approval.

7-15-24
Date


Signature of Secretary or President of Board of Education or Board of Directors

Action by Illinois Department of Transportation

Date Submittal Received January 8, 2025

Serial No. 301-25-02

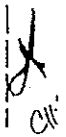
- Approved
- Disapproved for corrections, additions or clarifications noted in transmittal letter.
- Disapproved for reason or reasons noted in transmittal letter.

1/22/25
Date

Signature of IDOT District Engineer

Reimbursement Estimate (This information will have no effect on IDOT's action on the submittal)

- 1. Approximately how many students will annually be qualified for busing by this submittal that did not previously qualify for reimbursable busing? _____ students
- 2. What is the projected additional annual reimbursement that will result from this submittal? \$ _____





Illinois Department of Transportation

Serious Safety Hazard Finding

A publication entitled "School Safety Busing and Instructions for Submitting Findings" is available from the Illinois Department of Transportation, 2300 South Dirksen Parkway, Springfield, Illinois 62764. The school administrator preparing this submittal should refer to the instructions in the booklet.

Two copies of this form are to be submitted to the IDOT District Office indicated in the instruction booklet. The IDOT District Office will approve or disapprove the submittal within thirty (30) days and return one copy to the school district indicating the action taken.

| | | | |
|--|--|--|---|
| Name of School District Central Community Unit School District | | Address of Administrative Office 275 South Street PO Box 396 Burlington, IL 60109 | |
| District Number 301 | County, Illinois Kane, Illinois | Zip Code 60109 | |
| Name of Contact Representative Pam Porto | | Title Director of Transportation | Phone No. (Area Code) (847) 464-6052 |
| Name of School to which Children are Walking Prairie Knolls Middle School | | Annual Sequential Number 301 — 24 | (Use on Map and Attachments) — 2 |
| Type of Condition | 1. <input checked="" type="checkbox"/> Single Hazard Type III | | |
| | 2. <input type="checkbox"/> Combination Hazard Type _____ and Type _____ | | |
| Location (Attach a map showing the described location(s).) | 3. Along Nesler Road (Street or Road Name) | | |
| | 4. Type I from _____ to _____ | | |
| | 5. Type II from _____ to _____ | | |
| | 6. Type III at Gansett Parkway | | |
| | 7. Type IV at _____ | | |
| Points (Complete only for Types listed on lines 1 or 2.) | Type I - Walking Along a Roadway | | |
| | 8. Highest qualifying grade level (through _____ grade) | _____ | Points Table 1 |
| | 9. Location of walkway (on shoulder _____ feet from roadway, or (behind curb or ditch _____ feet from roadway) | _____ | Points Table 2 |
| | 10. Speed of traffic (_____ mph) | _____ | Points Table 3 |
| | 11. Volume of traffic (_____ vehicles/hour) (_____ lanes) | _____ | Points Table 4 |
| | 12. Length of hazardous section (_____ miles) | _____ | Points Table 5 |
| | 13. Board's judgment points (attach explanation) | _____ | Points |
| | 14. Total of lines 8 through 13 | _____ | Points |
| | Type II - Walking on a Roadway | | |
| | 15. Highest qualifying grade level (through _____ grade) | _____ | Points Table 6 |
| | 16. Reason for walking on roadway (no shoulder or walkway off pavement for _____ feet, or narrow bridge or underpass for _____ feet) | _____ | Points Table 7 |
| | 17. Speed of traffic (_____ mph) | _____ | Points Table 8 |
| | 18. Volume of traffic (_____ vehicles/hour) (_____ lanes) | _____ | Points Table 9 |
| | 19. Length of hazardous section (_____ miles) | _____ | Points Table 10 |
| | 20. Board's judgment points (attach explanation) | _____ | Points |
| | 21. Total of lines 15 through 20 | _____ | Points |

Type II - Crossing a Roadway (Name of roadway being crossed Nesler Road)

- 22. Highest qualifying grade level (through 7 grade) 5 Points
Table 11
- 23. Control on roadway being crossed (two-way stop control) 13 Points
Table 12
- 24. Speed and volume of traffic (45 mph)
(989 vehicles/hour) 3 Points
Table 13
- 25. Width of roadway (70 feet) 2 Points
Table 14
- 26. Board's judgment points (attach explanation) 20 Points
- 27. Total of lines 22 through 26 13 Points

Type IV - Crossing Railroad Tracks

- 28. Highest qualifying grade level (through _____ grade) _____ Points
Table 15
- 29. Crossing protection and number of tracks _____ Points
Table 16
(_____ protection; _____ tracks used)
- 30. Speed and number of trains _____ Points
Table 17
(_____ mph; _____ trains)
- 31. Board's judgment points (attach explanation) _____ Points
- 32. Total of lines 28 through 31 _____ Points

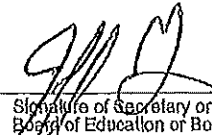
Finding

- 33. Single hazard qualifies since 13 points in a Type III situation equals or exceeds 12
- 34. Combination hazard qualifies since the total of _____ points
in a Type _____ situation and _____ points in a Type _____ situation equals or exceeds 20
- 35. Hazard is temporary for _____ school year (resubmit annually)

Certification

I hereby certify that the data in this application, including accompanying maps and statements, are true and correct to the best of my knowledge and belief. Board approval was given on date of July 15, 2024, and the minutes of this meeting bear evidence of this approval.

7.15.24
Date


Signature of Secretary or President of Board of Education or Board of Directors


Action by Illinois Department of Transportation

Date Submittal Received January 8 2025

Serial No. 301-25-03

- Approved
- Disapproved for corrections, additions or clarifications noted in transmittal letter.
- Disapproved for reason or reasons noted in transmittal letter.

1/22/25
Date


Signature of IDOT District Engineer

Reimbursement Estimate (This information will have no effect on IDOT's action on the submittal)

- 1. Approximately how many students will annually be qualified for busing by this submittal that did not previously qualify for reimbursable busing? _____ students
- 2. What is the projected additional annual reimbursement that will result from this submittal? \$ _____

Handwritten initials



Illinois Department of Transportation

Serious Safety Hazard Finding

A publication entitled "School Safety Busing and Instructions for Submitting Findings" is available from the Illinois Department of Transportation, 2300 South Dirksen Parkway, Springfield, Illinois 62764. The school administrator preparing this submittal should refer to the instructions in the booklet.

Two copies of this form are to be submitted to the IDOT District Office indicated in the instruction booklet. The IDOT District Office will approve or disapprove the submittal within thirty (30) days and return one copy to the school district indicating the action taken.

| | | | | | |
|---|------------------------------------|-------------------|--|--|--|
| Name of School District Central Community Unit School District | | | Address of Administrative Office 275 South Street PO Box 396 Burlington, IL 60109 | | |
| District Number 301 | County, Illinois Kane, Illinois | Zip Code 60109 | | | |

| | | |
|---|-------------------------------------|---|
| Name of Contact Representative Pam Porto | Title Director of Transportation | Phone No. (Area Code) (847) 464 - 6052 |
|---|-------------------------------------|---|

| | | |
|---|--------------------------------------|-------------------------------------|
| Name of School to which Children are Walking Prairie View Grade School | Annual Sequential Number 301 — 24 | (Use on Map and Attachments) — 3 |
|---|--------------------------------------|-------------------------------------|

| | | |
|-------------------|--|---------------------------|
| Type of Condition | 1. <input checked="" type="checkbox"/> Single Hazard | Type <u>III</u> |
| | 2. <input type="checkbox"/> Combination Hazard | Type _____ and Type _____ |

| | |
|---|--|
| Location (Attach a map showing the described location(s).) | 3. Along <u>Nesler Road</u> (Street or Road Name) |
| | 4. Type I from _____ to _____ |
| | 5. Type II from _____ to _____ |
| | 6. Type III at <u>South Street</u> |
| | 7. Type IV at _____ |

| | | |
|---|--|-------------------------|
| Points (Complete only for Types listed on lines 1 or 2.) | Type I - Walking Along a Roadway | |
| | 8. Highest qualifying grade level (through _____ grade) | _____ Points Table 1 |
| | 9. Location of walkway (on shoulder _____ feet from roadway, or) (behind curb or ditch _____ feet from roadway) | _____ Points Table 2 |
| | 10. Speed of traffic (_____ mph) | _____ Points Table 3 |
| | 11. Volume of traffic (_____ vehicles/hour) (_____ lanes) | _____ Points Table 4 |
| | 12. Length of hazardous section (_____ miles) | _____ Points Table 5 |
| | 13. Board's judgment points (attach explanation) | _____ Points |
| | 14. Total of lines 8 through 13 | _____ Points |

| | | |
|--|--|--------------------------|
| | Type II - Walking on a Roadway | |
| | 15. Highest qualifying grade level (through _____ grade) | _____ Points Table 6 |
| | 16. Reason for walking on roadway (no shoulder or walkway off pavement for _____ feet, or narrow bridge or underpass for _____ feet) | _____ Points Table 7 |
| | 17. Speed of traffic (_____ mph) | _____ Points Table 8 |
| | 18. Volume of traffic (_____ vehicles/hour) (_____ lanes) | _____ Points Table 9 |
| | 19. Length of hazardous section (_____ miles) | _____ Points Table 10 |
| | 20. Board's judgment points (attach explanation) | _____ Points |
| | 21. Total of lines 15 through 20 | _____ Points |

(Con'd)

Type III - Crossing a Roadway (Name of roadway being crossed Nesler Road)

- 22. Highest qualifying grade level (through 5 grade) 5 Points
Table 11
- 23. Control on roadway being crossed (NO two way stop control) 3 Points
Table 12
- 24. Speed and volume of traffic (45 mph)
(628 vehicles/hour) 3 Points
Table 13
- 25. Width of roadway (75 feet) 2 Points
Table 14
- 26. Board's Judgment points (attach explanation) 0-2 Points
- 27. Total of lines 22 through 26 13 Points

Type IV - Crossing Railroad Tracks

- 28. Highest qualifying grade level (through _____ grade) _____ Points
Table 15
- 29. Crossing protection and number of tracks
(_____ protection; _____ tracks used) _____ Points
Table 16
- 30. Speed and number of trains
(_____ mph; _____ trains) _____ Points
Table 17
- 31. Board's Judgment points (attach explanation) _____ Points
- 32. Total of lines 28 through 31 _____ Points

Finding

- 33. Single hazard qualifies since 13 points in a Type III situation equals or exceeds 12
- 34. Combination hazard qualifies since the total of _____ points
in a Type _____ situation and _____ points in a Type _____ situation equals or exceeds 20
- 35. Hazard is temporary for _____ school year (resubmit annually)

Certification

I hereby certify that the data in this application, including accompanying maps and statements, are true and correct to the best of my knowledge and belief. Board approval was given on date of July 15 2024, and the minutes of this meeting bear evidence of this approval.

7.15.24
Date

[Signature]
Signature of Secretary or President of Board of Education or Board of Directors

Action by Illinois Department of Transportation

Date Submittal Received January 8 2025

Serial No. 301-25-04

- Approved
- Disapproved for corrections, additions or clarifications noted in transmittal letter.
- Disapproved for reason or reasons noted in transmittal letter.

1/22/25 [Signature]
Date Signature of IDOT District Engineer

Reimbursement Estimate (This information will have no effect on IDOT's action on the submittal)

- 1. Approximately how many students will annually be qualified for busing by this submittal that did not previously qualify for reimbursable busing? _____ students
- 2. What is the projected additional annual reimbursement that will result from this submittal? \$ _____



A publication entitled "School Safety Busing and Instructions for Submitting Findings" is available from the Illinois Department of Transportation, 2300 South Dirksen Parkway, Springfield, Illinois 62764. The school administrator preparing this submittal should refer to the instructions in the booklet.

Two copies of this form are to be submitted to the IDOT District Office indicated in the instruction booklet. The IDOT District Office will approve or disapprove the submittal within thirty (30) days and return one copy to the school district indicating the action taken.

| | | | | | |
|---|------------------------------------|-------------------|--|--|--|
| Name of School District Central Community Unit School District | | | Address of Administrative Office 275 South Street PO Box 396 Burlington, IL 60109 | | |
| District Number 301 | County, Illinois Kane, Illinois | Zip Code 60109 | | | |

| | | |
|---|-------------------------------------|---|
| Name of Contact Representative Pam Porto | Title Director of Transportation | Phone No. (Area Code) (847) 464 - 6052 |
|---|-------------------------------------|---|

| | | |
|--|--------------------------------------|-------------------------------------|
| Name of School to which Children are Walking Lily Lake Grade School | Annual Sequential Number 301 — 24 | (Use on Map and Attachments) — 4 |
|--|--------------------------------------|-------------------------------------|

| | | |
|-------------------|---|------------------------------------|
| Type of Condition | 1. <input type="checkbox"/> Single Hazard | Type _____ |
| | 2. <input checked="" type="checkbox"/> Combination Hazard | Type <u>II</u> and Type <u>III</u> |

| | |
|---|---|
| Location (Attach a map showing the described location(s).) | 3. Along <u>Route 47</u> (Street or Road Name) |
| | 4. Type I from _____ to _____ |
| | 5. Type II from <u>Cochise Drive</u> to <u>Route 47</u> |
| | 6. Type III at <u>IC Trail / Empire Road</u> |
| | 7. Type IV at _____ |

| | | |
|---|--|--|
| Points (Complete only for Types listed on lines 1 or 2.) | Type I - Walking Along a Roadway | |
| | 8. Highest qualifying grade level (through _____ grade) | _____ Points <small>Table 1</small> |
| | 9. Location of walkway (on shoulder _____ feet from roadway, or) (behind curb or ditch _____ feet from roadway) | _____ Points <small>Table 2</small> |
| | 10. Speed of traffic (_____ mph) | _____ Points <small>Table 3</small> |
| | 11. Volume of traffic (_____ vehicles/hour) (_____ lanes) | _____ Points <small>Table 4</small> |
| | 12. Length of hazardous section (_____ miles) | _____ Points <small>Table 5</small> |
| | 13. Board's judgment points (attach explanation) | _____ Points |
| | 14. Total of lines 8 through 13 | _____ Points |

| | | |
|--------|---|---|
| Points | Type II - Walking on a Roadway | |
| | 15. Highest qualifying grade level (through <u>5</u> grade) | <u>5</u> Points <small>Table 6</small> |
| | 16. Reason for walking on roadway (no shoulder or walkway off pavement for <u>1,000</u> feet, or narrow bridge or underpass for _____ feet) | <u>3</u> Points <small>Table 7</small> |
| | 17. Speed of traffic (<u>30</u> mph) | <u>0.5</u> Points <small>Table 8</small> |
| | 18. Volume of traffic (<u>612</u> vehicles/hour) (<u>2</u> lanes) | <u>2</u> Points <small>Table 9</small> |
| | 19. Length of hazardous section (<u>0.2</u> miles) | <u>2</u> Points <small>Table 10</small> |
| | 20. Board's judgment points (attach explanation) | <u>2</u> Points |
| | 21. Total of lines 15 through 20 | <u>14.5</u> Points |

(Con'd)

Type III - Crossing a Roadway (Name of roadway being crossed Route 47 EMPIRE, C TRAIL)

22. Highest qualifying grade level (through 5 grade) 5 Points
Table 11

23. Control on roadway being crossed (NO WAY STOP CONTROL) 13 Points
Table 12

24. Speed and volume of traffic (40 mph)
(612 vehicles/hour) 2 Points
Table 13

25. Width of roadway (60 feet) 2 Points
Table 14

26. Board's judgment points (attach explanation) 0 Points

27. Total of lines 22 through 26 12 Points

Type IV - Crossing Railroad Tracks

28. Highest qualifying grade level (through _____ grade) _____ Points
Table 15

29. Crossing protection and number of tracks _____ Points
Table 16
(_____ protection; _____ tracks used)

30. Speed and number of trains _____ Points
(_____ mph; _____ trains) Table 17

31. Board's judgment points (attach explanation) _____ Points

32. Total of lines 28 through 31 _____ Points

Finding

33. Single hazard qualifies since _____ points in a Type _____ situation equals or exceeds 12

34. Combination hazard qualifies since the total of 14.5 points
in a Type II situation and 12 points in a Type III situation equals or exceeds 20

35. Hazard is temporary for _____ school year (resubmit annually)

Certification

I hereby certify that the data in this application, including accompanying maps and statements, are true and correct to the best of my knowledge and belief. Board approval was given on date of July 15 2024, and the minutes of this meeting bear evidence of this approval.

7.15.24
Date

[Signature]
Signature of Secretary or President of Board of Education or Board of Directors

Action by Illinois Department of Transportation

Date Submitted Received January 8 20 25 Serial No. 301-25-05

- Approved
- Disapproved for corrections, additions or clarifications noted in transmittal letter.
- Disapproved for reason or reasons noted in transmittal letter.

1/22/25
Date

[Signature]
Signature of IDOT District Engineer

Reimbursement Estimate (This information will have no effect on IDOT's action on the submittal)

1. Approximately how many students will annually be qualified for busing by this submittal that did not previously qualify for reimbursable busing? _____ students
2. What is the projected additional annual reimbursement that will result from this submittal? \$ _____



A publication entitled "School Safety Busing and Instructions for Submitting Findings" is available from the Illinois Department of Transportation, 2300 South Dirksen Parkway, Springfield, Illinois 62764. The school administrator preparing this submittal should refer to the instructions in the booklet.

Two copies of this form are to be submitted to the IDOT District Office indicated in the instruction booklet. The IDOT District Office will approve or disapprove the submittal within thirty (30) days and return one copy to the school district indicating the action taken.

| | | | | |
|--|---|--|---|--|
| Name of School District CENTRAL COMMUNITY UNIT SCHOOL DISTRICT | | | Address of Administrative Office 275 SOUTH STREET PO BOX 396 BURLINGTON, IL 60109 | |
| District Number 301 | County, Illinois KANE, ILLINOIS | Zip Code 60109 | | |
| Name of Contact Representative PAM PORTO | | Title DIRECTOR OF TRANSPORTATION | Phone No. (Area Code) (847) 464 -6052 | |
| Name of School to which Children are Walking CENTRAL MIDDLE SCHOOL | | | Annual Sequential Number 301 — 24 | (Use on Map and Attachments) — 5 |

| | | |
|---|--|---------------------------|
| Type of Condition | 1. <input checked="" type="checkbox"/> Single Hazard | Type <u>II</u> |
| | 2. <input type="checkbox"/> Combination Hazard | Type _____ and Type _____ |
| Location (Attach a map showing the described location(s).) | 3. Along <u>PLATO ROAD</u> | (Street or Road Name) |
| | 4. Type I from _____ to _____ | |
| | 5. Type II from <u>HIGHLAND TRAIL</u> to <u>ROUTE 47</u> | |
| | 6. Type III at _____ | |
| | 7. Type IV at _____ | |

| | | | |
|---|---|-------------------|-----------------------------|
| Points (Complete only for Types listed on lines 1 or 2.) | Type I - Walking Along a Roadway | | |
| | 8. Highest qualifying grade level (through _____ grade) | | _____ Points Table 1 |
| | 9. Location of walkway (on shoulder _____ feet from roadway, or behind curb or ditch _____ feet from roadway) | | _____ Points Table 2 |
| | 10. Speed of traffic (_____ mph) | | _____ Points Table 3 |
| | 11. Volume of traffic (_____ vehicles/hour) (_____ lanes) | | _____ Points Table 4 |
| | 12. Length of hazardous section (_____ miles) | | _____ Points Table 5 |
| | 13. Board's judgment points (attach explanation) | | _____ Points |
| | 14. Total of lines 8 through 13 | | _____ Points |
| | Type II - Walking on a Roadway | | |
| | 15. Highest qualifying grade level (through <u>8</u> grade) | | <u>5</u> Points Table 6 |
| | 16. Reason for walking on roadway (no shoulder or walkway off pavement for <u>528</u> feet, or narrow bridge or underpass for _____ feet) | <u>4223</u> | <u>3</u> Points Table 7 |
| | 17. Speed of traffic (<u>40</u> mph) | | <u>2</u> Points Table 8 |
| | 18. Volume of traffic (<u>648</u> vehicles/hour) (<u>2</u> lanes) | | <u>2</u> Points Table 9 |
| | 19. Length of hazardous section (<u>0.3</u> miles) | <u>0.3</u> | <u>4</u> Points Table 10 |
| 20. Board's judgment points (attach explanation) | | <u>0.2</u> Points | |
| 21. Total of lines 15 through 20 | | <u>16</u> Points | |

(Cont'd)

- Type III - Crossing a Roadway (Name of roadway being crossed _____),
- 22. Highest qualifying grade level (through _____ grade) _____ Points
Table 11
 - 23. Control on roadway being crossed (_____) _____ Points
Table 12
 - 24. Speed and volume of traffic (_____ mph)
(_____ vehicles/hour) _____ Points
Table 13
 - 25. Width of roadway (_____ feet) _____ Points
Table 14
 - 26. Board's judgment points (attach explanation) _____ Points
 - 27. Total of lines 22 through 26 _____ Points

Type IV - Crossing Railroad Tracks

- 28. Highest qualifying grade level (through _____ grade) _____ Points
Table 15
- 29. Crossing protection and number of tracks
(_____ protection; _____ tracks used) _____ Points
Table 16
- 30. Speed and number of trains
(_____ mph; _____ trains) _____ Points
Table 17
- 31. Board's judgment points (attach explanation) _____ Points
- 32. Total of lines 28 through 31 _____ Points

- Finding
- 33. Single hazard qualifies since 16 points in a Type II situation equals or exceeds 12
 - 34. Combination hazard qualifies since the total of _____ points
in a Type _____ situation and _____ points in a Type _____ situation equals or exceeds 20
 - 35. Hazard is temporary for _____ school year (resubmit annually)

Certification I hereby certify that the data in this application, including accompanying maps and statements, are true and correct to the best of my knowledge and belief, Board approval was given on date of July 15 2024, and the minutes of this meeting bear evidence of this approval.

7.15.24 _____
Date Signature of Secretary or President of Board of Education or Board of Directors

Action by Illinois Department of Transportation

Date Submittal Received January 8 20 25 Serial No. 301-25-06

- Approved
- Disapproved for corrections, additions or clarifications noted in transmittal letter.
- Disapproved for reason or reasons noted in transmittal letter.

1/22/25 _____
Date Signature of IDOT District Engineer

Reimbursement Estimate (This information will have no effect on IDOT's action on the submittal)

1. Approximately how many students will annually be qualified for busing by this submittal that did not previously qualify for reimbursable busing? _____ students
2. What is the projected additional annual reimbursement that will result from this submittal? \$ _____

[Handwritten initials]



A publication entitled "School Safety Busing and Instructions for Submitting Findings" is available from the Illinois Department of Transportation, 2300 South Dirksen Parkway, Springfield, Illinois 62764. The school administrator preparing this submittal should refer to the instructions in the booklet.

Two copies of this form are to be submitted to the IDOT District Office indicated in the instruction booklet. The IDOT District Office will approve or disapprove the submittal within thirty (30) days and return one copy to the school district indicating the action taken.

| | | | | | |
|---|------------------------------------|-------------------|--|--|--|
| Name of School District CENTRAL COMMUNITY UNIT SCHOOL DISTRICT | | | Address of Administrative Office 275 SOUTH STREET PO BOX 396 BURLINGTON, IL 60109 | | |
| District Number 301 | County, Illinois KANE, ILLINOIS | Zip Code 60109 | | | |

| | | |
|---|-------------------------------------|--|
| Name of Contact Representative PAM PORTO | Title DIRECTOR OF TRANSPORTATION | Phone No. (Area Code) (847) 464 -6052 |
|---|-------------------------------------|--|

| | | |
|--|--------------------------------------|-------------------------------------|
| Name of School to which Children are Walking HOWARD B THOMAS GRADE SCHOOL | Annual Sequential Number 301 — 24 | (Use on Map and Attachments) — 6 |
|--|--------------------------------------|-------------------------------------|

Type of Condition

1. Single Hazard Type II

2. Combination Hazard Type _____ and Type _____

Location (Attach a map showing the described location(s).)

3. Along PLATO ROAD
(Street or Road Name)

4. Type I from _____ to _____

5. Type II from HIGHLAND TRAIL to ROUTE 47

6. Type III at _____

7. Type IV at _____

Points (Complete only for Types listed on lines 1 or 2.)

Type I - Walking Along a Roadway

8. Highest qualifying grade level (through _____ grade) Table 1 Points

9. Location of walkway (on shoulder, _____ feet from roadway, or (behind curb or ditch, _____ feet from roadway) Table 2 Points

10. Speed of traffic (_____ mph) Table 3 Points

11. Volume of traffic (_____ vehicles/hour) (_____ lanes) Table 4 Points

12. Length of hazardous section (_____ miles) Table 5 Points

13. Board's judgment points (attach explanation) _____ Points

14. Total of lines 8 through 13 _____ Points

Type II - Walking on a Roadway

15. Highest qualifying grade level (through 5 grade) 5 Table 6 Points

16. Reason for walking on roadway (no shoulder or walkway off pavement for 528 feet, or narrow bridge or underpass for _____ feet) 3 Table 7 Points

17. Speed of traffic (40 mph) 2 Table 8 Points

18. Volume of traffic (457 vehicles/hour) (2 lanes) 2 Table 9 Points

19. Length of hazardous section (0.8 miles) 4 2 Table 10 Points

20. Board's judgment points (attach explanation) 0 2 Points

21. Total of lines 15 through 20 16 Points

Type III - Crossing a Roadway (Name of roadway being crossed _____)

- 22. Highest qualifying grade level (through _____ grade) _____ Points
Table 11
- 23. Control on roadway being crossed (_____) _____ Points
Table 12
- 24. Speed and volume of traffic (_____ mph)
(_____ vehicles/hour) _____ Points
Table 13
- 25. Width of roadway (_____ feet) _____ Points
Table 14
- 26. Board's judgment points (attach explanation) _____ Points
- 27. Total of lines 22 through 26 _____ Points

Type IV - Crossing Railroad Tracks

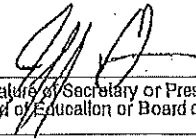
- 28. Highest qualifying grade level (through _____ grade) _____ Points
Table 16
- 29. Crossing protection and number of tracks _____ Points
(_____ protection; _____ tracks used)
Table 16
- 30. Speed and number of trains _____ Points
(_____ mph; _____ trains)
Table 17
- 31. Board's judgment points (attach explanation) _____ Points
- 32. Total of lines 28 through 31 _____ Points

Finding

- 33. Single hazard qualifies since 16 points in a Type II situation equals or exceeds 12
- 34. Combination hazard qualifies since the total of _____ points
in a Type _____ situation and _____ points in a Type _____ situation equals or exceeds 20
- 35. Hazard is temporary for _____ school year (resubmit annually)

Certification

I hereby certify that the data in this application, including accompanying maps and statements, are true and correct to the best of my knowledge and belief. Board approval was given on date of July 15, 2024, and the minutes of this meeting bear evidence of this approval.

7.15.24
Date

 Signature of Secretary or President of Board of Education or Board of Directors

Action by Illinois Department of Transportation

Date Submittal Received January 8 2025

Serial No. 301-25-07

- Approved
- Disapproved for corrections, additions or clarifications noted in transmittal letter.
- Disapproved for reason or reasons noted in transmittal letter.

1/22/25
Date

 Signature of IDOT District Engineer

Reimbursement Estimate (This information will have no effect on IDOT's action on the submittal)

- 1. Approximately how many students will annually be qualified for busing by this submittal that did not previously qualify for reimbursable busing? _____ students
- 2. What is the projected additional annual reimbursement that will result from this submittal? \$ _____

Handwritten initials

MEMORANDUM

TO: Dr. Griff Powell, Dr. Kyle Schumacher, Co-Interim Superintendents,
Board of Education

FROM: Daina Pflug, Business Manager & Dan Polowy, Facilities Director

DATE: August 18, 2025

RE: Annual Temporary Facility Resolution Approval

The Board of Education annually approves the usage of temporary facilities to be used in the connection with our schools. Included in your board packet are the Resolutions and Compliance Checklists for the Board of Education to certify and approve. Once approved, we will submit to the Kane County Regional Office of Education.

This approval includes the 18 temporary mobile classroom units and 3 storage units at the following locations:

- Lily Lake Grade School (2 classrooms)
- Howard B. Thomas Grade School (4 classrooms)
- Prairie View Grade School (4 classrooms)
- Country Trails Elementary School (8 classrooms)
- Transportation Offices behind Central Middle School (2 rooms)
- District Office (1 room)

APPLICATION FOR OCCUPANCY

| | |
|--|--|
| DISTRICT NAME AND NUMBER Central Unit School District 301 | <input type="checkbox"/> GENERAL CERTIFICATE OF OCCUPANCY <input type="checkbox"/> CERTIFICATE OF PARTIAL OCCUPANCY <input type="checkbox"/> CERTIFICATE FOR A VEHICULAR FACILITY <input checked="" type="checkbox"/> CERTIFICATE OF TEMPORARY OCCUPANCY |
| FACILITY NAME Prairie View Grade School | <input type="checkbox"/> Amendment # _____ <input type="checkbox"/> New Use - Bldg Permit # _____ <input type="checkbox"/> New Construction - Project # _____ Bldg Permit # _____ <input type="checkbox"/> Addition - Project # _____ Bldg Permit # _____ <input type="checkbox"/> Renovation/Repair - Project # _____ Bldg Permit # _____ |
| FACILITY LOCATION 10N630 Nesler Rd, Elgin, IL. 60124 | |
| <input checked="" type="checkbox"/> Property is owned by the district <input type="checkbox"/> Property is not owned by district (Attach Owner Authorization) | |

III. DESIGN PROFESSIONAL'S CERTIFICATION

To the best of my knowledge and belief (check and complete applicable statement):

- 1. Based upon my survey of the above named facility on ___/___/___ I find and hereby certify that the facility is in full compliance with Part 180. The INSPECTION STATEMENTS and the CONFIRMATION OF CALLED INSPECTION RECORDS have been submitted to, and the CALLED INSPECTIONS RECORDS have been reviewed by the Regional Superintendent during and/or upon completion as applicable to the work.
- 2. I find that the facility fails to comply fully with the requirements of Part 180. However, based upon my survey of the above named facility on ___/___/___ and the attached TEMPORARY FACILITY REPORT (includes the Temporary Facility Elimination Plan and the Temporary Facility Checklist), I hereby certify that such noncompliance does not jeopardize the general health and safety of the student and others who occupy the facility.
- 3. Based upon my survey of the work within the above named facility on 08/07/25 I find and hereby certify that the work is in full compliance with Part 180. The INSPECTION STATEMENTS and the CONFIRMATION OF CALLED INSPECTION RECORDS have been submitted to, and the CALLED INSPECTIONS RECORDS have been reviewed by the Regional Superintendent during and/or upon completion as applicable to the work.

This statement, as selected above, is valid as of the day of the survey indicated. Changes to the facility or conditions affecting it after that date may render this statement invalid.

08/08 Matthew T. Verdun Wold Architects and En
 Date Design Professional Name Firm Name
062.059546 847-241-6100
 License Number Phone Number


11/30/2025
 Expiration Date



SCHOOL DISTRICT CERTIFICATION

We hereby certify that this application accurately describes the status of the work and the occupancy we are seeking in order to occupy the above named facility for the primary purpose of: _____

8-11-25 Jeff E. Powell
 Date President of the Board of Education Date District Superintendent

FOR REGIONAL SUPERINTENDENT'S USE

INSPECTION RECORDS: Date Reviewed: ___/___/___
 INSPECTION STATEMENT: Date Received: ___/___/___
 CONFIRMATION OF CALLED INSPECTION RECORDS: Date Received: ___/___/___

An inspection was made or caused to be made upon the completion of the work and before issuance of a CERTIFICATE OF OCCUPANCY for the above named facility on ___/___/___ Any violations of the approved construction documents and building permits were noted, and the holder of the permit was notified of the discrepancies. No certificate of occupancy was issued until the discrepancies were remedied.

Date Regional Superintendent

TEMPORARY FACILITY REPORT - Part I

Temporary Facility Elimination Plan

The Board of Education for Central Unit School District 301
District Name and Number

in Kane County, IL, upon resolution adopted at a duly convened meeting, hereby

requests an approval for usage of temporary facility to be used in connection with the

Prairie View Grade School located at 10N630 Nesler Rd, Elgin, IL. 601
Name of School Building *Address of School Building*

until June 30, 2026.

This temporary facility will be used for:

- Classrooms
- Storage
- Library
- Gymnasium
- Auditorium
- Other _____

This temporary facility will be:

- Relocatables
- Temporary rooms in: _____
Name of Location (rental of churches, etc)

Number of units, rooms or buildings to be used: 1 unit, 4 classrooms

Number of pupils to be housed in temporary housing: ±100 (25 per classroom)

The Board of Education has diligently attempted to eliminate the need for this temporary facility by:
New facility planning, realignment, building additions, referendum, growth still coming.

What is the plan for elimination of the code deficiencies to bring this facility into compliance with 23 Ill. Adm. Code, Part 180 or to eliminate the need to use this facility?
Referendum vote, new facilities, realignment.

This plan will be accomplished by Uncertain
Date

Date

Signature of Board President

Date

Signature of Board Secretary

I have reviewed the request of School District No. 301, and approve the request for temporary housing as submitted by the Board of Education and certified by their design professional.

Date

Signature of Regional Superintendent

TEMPORARY FACILITY REPORT - Part II

Temporary Facility Checklist

| | | | | | |
|---|--|----------------------------------|---|-------------------------------|------------------------------------|
| District Name/Number Central Unit School District 301 | | | Building Name Prairie View Grade School | | |
| Number of Units 1 unit, 4 classr | Year Originally Constructed 2022 | Area Square Feet 3,360 | Enrollment ±100 | Grade Level Pre-K-5 | Number of years in use 2 |

COMPLIANCE

CHECK FOR THE FOLLOWING CONDITIONS

| YES | NO | NA | |
|-------------------------------------|--------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Was the unit constructed according to 77 IL Adm Code Part 880 and the seal of approval from IDPH posted as required? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Does the district have on file the compliance certificate from IDPH (pink copy)? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Design Professional has verified with the IL Dept of Natural Resources/IDOT that the unit(s) is/are not located in a designated floodplain area. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Is the building securely anchored to the foundation as to withstand the wind load as described in ASCE 7-95? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Are there 2 exits on opposite sides of building? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Is there an interconnecting door between classrooms? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Is the building located in accordance with Section 175.120 of 23 IL Administrative Code, Part 175? (30 feet from adjacent building or separated by two-hour fire wall; or BOCA 705.2 20'-0" or fire wall) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Are the foundation walls maintained plumb and free from open cracks and breaks and kept in such condition as to prevent entry of weather, animals and insects? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Is the enclosure between the floor and ground in good condition? (Tight to prevent entrance of weather, animals and insects) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Are the steel floor support members in good rust-free condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Is the general exterior appearance of the building in an acceptable, well-maintained condition free of loose strips or battens? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Is the roof and flashing in good condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Are stair tread and ramps maintained with non-slip finish and platforms in good condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Are the restrooms clean, adequate and in operable condition and properly ventilated? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Are the plumbing fixtures properly installed and maintained in working order, free from leaks and defects? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Are the lighting fixtures properly maintained, complete with lenses and louvers? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Do the doors lock securely without additional locks, bolts or chains? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Are doors equipped with panic hardware (If occupancy is over 100 occupants) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. When building is occupied, are all the doors free from devices or wedges to prevent normal operation? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. Are screened or barred windows easily opened from inside without keys or tools? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 22. Is the exit lighting system used and all exit lights operable when the building is occupied? (rooms/corridors with more than 2 doors) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 23. Is the building equipped with an approved operable alarm and detector system? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 24. Are utility shut-offs properly and clearly marked? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 25. Is all fuel-burning and heating equipment (flues, ducts, pumps, etc.) maintained and in serviceable condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 26. Is automatic fuel-burning and heating equipment serviced annually by a qualified person? |

- 27. Have all heat exchanges of forced warm air furnaces and unit heater been examined to determine that they are airtight to prevent carbon monoxide and other combustion gases from getting into occupied space?
- 28. Are all combustible waste materials disposed of daily from classroom and building?
- 29. Is the insulation material non-combustible and interior finishing flamespread 75 or less?
- 30. Are non-flammable cleaning materials used?
- 31. Are storerooms and closets free from waste accumulations and unnecessary materials?
- 32. Are enough fire extinguishers of approved type for intended use installed in the building? (75 feet max. from any point in the facility to a fire extinguisher.)
- 33. Have fire extinguishers been inspected and so tagged within the past year?
- 34. Is the temperature control of the heating and/or cooling system adequate?
- 35. Is the supply of fresh air adequate (classroom, assemblies and toilets) as required?

List all areas of noncompliance:

Illinois Licensed Design Professional

The State of Illinois licensed design professional, employed by this district, has certified to this Board of Education that to the best of his/her knowledge and belief, the above mentioned structure will not present a health/life safety hazard to the students housed therein for the school year 20~~25~~ - 20~~26~~. Further, such design professional has listed the area of noncompliance with the Health/Life Safety Code.



062.059546 11/30/2025
 License Number Expiration Date

Matthew T. Verdun 
 Name and Signature of Design Professional

Wold Architects and E 08/07/25
 Name of Firm Date of Inspection

SCHOOL DISTRICT

We hereby certify that this application accurately describes the work to be performed, and that, upon approval all work will be completed in accordance with this application and all applicable laws and regulations

 Date Signature of President, Board of Education

8-11-95 
 Date Signature of District Superintendent

REGIONAL SUPERINTENDENT

The above Annual Inspection Checklist for a temporary facility is hereby accepted as submitted.

 Date Signature Regional Superintendent

APPLICATION FOR OCCUPANCY

| | |
|---|--|
| DISTRICT NAME AND NUMBER Central Unit School District 301 | <input type="checkbox"/> GENERAL CERTIFICATE OF OCCUPANCY <input type="checkbox"/> CERTIFICATE OF PARTIAL OCCUPANCY <input type="checkbox"/> CERTIFICATE FOR A VEHICULAR FACILITY <input checked="" type="checkbox"/> CERTIFICATE OF TEMPORARY OCCUPANCY |
| FACILITY NAME Lily Lake Grade School | |
| FACILITY LOCATION 5N720 Route 47, Maple Park, IL. 60151 | |
| <input checked="" type="checkbox"/> Property is owned by the district. <input type="checkbox"/> Property is not owned by district (Attach Owner Authorization) | <input type="checkbox"/> Amendment # _____ <input type="checkbox"/> New Use - Bldg Permit # _____ <input type="checkbox"/> New Construction - Project # _____ Bldg Permit # _____ <input type="checkbox"/> Addition - Project # _____ Bldg Permit # _____ <input type="checkbox"/> Renovation/Repair - Project # _____ Bldg Permit # _____ |

III. DESIGN PROFESSIONAL'S CERTIFICATION

To the best of my knowledge and belief (check and complete applicable statement):

- 1. Based upon my survey of the above named facility on ___/___/___ I find and hereby certify that the facility is in full compliance with Part 180. The INSPECTION STATEMENTS and the CONFIRMATION OF CALLED INSPECTION RECORDS have been submitted to, and the CALLED INSPECTIONS RECORDS have been reviewed by the Regional Superintendent during and/or upon completion as applicable to the work.
- 2. I find that the facility fails to comply fully with the requirements of Part 180. However, based upon my survey of the above named facility on ___/___/___ and the attached TEMPORARY FACILITY REPORT (includes the Temporary Facility Elimination Plan and the Temporary Facility Checklist), I hereby certify that such noncompliance does not jeopardize the general health and safety of the student and others who occupy the facility.
- 3. Based upon my survey of the work within the above named facility on 08/07/25 I find and hereby certify that the work is in full compliance with Part 180. The INSPECTION STATEMENTS and the CONFIRMATION OF CALLED INSPECTION RECORDS have been submitted to, and the CALLED INSPECTIONS RECORDS have been reviewed by the Regional Superintendent during and/or upon completion as applicable to the work.

This statement, as selected above, is valid as of the day of the survey indicated. Changes to the facility or conditions affecting it after that date may render this statement invalid.

08/08 Matthew T. Verdun Wold Architects and En
 Date Design Professional Name Firm Name
062.059546 847-241-6100
 License Number Phone Number


11/30/2025
 Expiration Date



SCHOOL DISTRICT CERTIFICATION

We hereby certify that this application accurately describes the status of the work and the occupancy we are seeking in order to occupy the above named facility for the primary purpose of: _____

 Date President of the Board of Education Date 8-11-25 District Superintendent Jeff E Powell

FOR REGIONAL SUPERINTENDENT'S USE

INSPECTION RECORDS: Date Reviewed: ___/___/___
 INSPECTION STATEMENT: Date Received: ___/___/___
 CONFIRMATION OF CALLED INSPECTION RECORDS: Date Received: ___/___/___

An inspection was made or caused to be made upon the completion of the work and before issuance of a CERTIFICATE OF OCCUPANCY for the above named facility on ___/___/___ Any violations of the approved construction documents and building permits were noted, and the holder of the permit was notified of the discrepancies. No certificate of occupancy was issued until the discrepancies were remedied.

 Date Regional Superintendent

TEMPORARY FACILITY REPORT - Part I

Temporary Facility Elimination Plan

The Board of Education for Central Unit School District 301
District Name and Number

in Kane County, IL, upon resolution adopted at a duly convened meeting, hereby

requests an approval for usage of temporary facility to be used in connection with the

Lily Lake Grade School located at 5N720 Route 47, Maple Park, IL.
Name of School Building *Address of School Building*

until June 30, 2026.

This temporary facility will be used for:

- Classrooms
- Storage
- Library
- Gymnasium
- Auditorium
- Other _____

This temporary facility will be:

- Relocatables
- Temporary rooms in: _____
Name of Location (rental of churches, etc)

Number of units, rooms or buildings to be used: 1 unit, 2 classrooms

Number of pupils to be housed in temporary housing: ±50 (25 per classroom)

The Board of Education has diligently attempted to eliminate the need for this temporary facility by:
New facility planning, realignment, building additions, referendum, growth still coming.

What is the plan for elimination of the code deficiencies to bring this facility into compliance with 23 Ill. Adm. Code, Part 180 or to eliminate the need to use this facility?
Referendum vote, new facilities, realignment.

This plan will be accomplished by Uncertain
Date

Date *Signature of Board President* _____
Date *Signature of Board Secretary*

I have reviewed the request of School District No. 301, and approve the request for temporary housing as submitted by the Board of Education and certified by their design professional.

Date *Signature of Regional Superintendent*

(3/09) Form 36-26 (Prescribed by the Regional Superintendent for local board use) 180.230 c)

TEMPORARY FACILITY REPORT - Part II

Temporary Facility Checklist

| | | | | | |
|---|--|--|--------------------------|-------------------------------|------------------------------------|
| District Name/Number Central Unit School District 301 | | Building Name Lily Lake Grade School | | | |
| Number of Units 1 unit, 2 classr | Year Originally Constructed 2022 | Area Square Feet 1,474 | Enrollment ±50 | Grade Level Pre-K-5 | Number of years in use 2 |

COMPLIANCE

CHECK FOR THE FOLLOWING CONDITIONS

| YES | NO | NA | |
|-------------------------------------|--------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Was the unit constructed according to 77 IL Adm Code Part 880 and the seal of approval from IDPH posted as required? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Does the district have on file the compliance certificate from IDPH (pink copy)? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Design Professional has verified with the IL Dept of Natural Resources/IDOT that the unit(s) is/are not located in a designated floodplain area. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Is the building securely anchored to the foundation as to withstand the wind load as described in ASCE 7-95? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Are there 2 exits on opposite sides of building? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Is there an interconnecting door between classrooms? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Is the building located in accordance with Section 175.120 of 23 IL Administrative Code, Part 175? (30 feet from adjacent building or separated by two-hour fire wall; or BOCA 705.2 20'-0" or fire wall) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Are the foundation walls maintained plumb and free from open cracks and breaks and kept in such condition as to prevent entry of weather, animals and insects? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Is the enclosure between the floor and ground in good condition? (Tight to prevent entrance of weather, animals and insects) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Are the steel floor support members in good rust-free condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Is the general exterior appearance of the building in an acceptable, well-maintained condition free of loose strips or battens? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Is the roof and flashing in good condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Are stair tread and ramps maintained with non-slip finish and platforms in good condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Are the restrooms clean, adequate and in operable condition and properly ventilated? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Are the plumbing fixtures properly installed and maintained in working order, free from leaks and defects? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Are the lighting fixtures properly maintained, complete with lenses and louvers? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Do the doors lock securely without additional locks, bolts or chains? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Are doors equipped with panic hardware (If occupancy is over 100 occupants) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. When building is occupied, are all the doors free from devices or wedges to prevent normal operation? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. Are screened or barred windows easily opened from inside without keys or tools? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 22. Is the exit lighting system used and all exit lights operable when the building is occupied? (rooms/corridors with more than 2 doors) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 23. Is the building equipped with an approved operable alarm and detector system? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 24. Are utility shut-offs properly and clearly marked? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 25. Is all fuel-burning and heating equipment (flues, ducts, pumps, etc.) maintained and in serviceable condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 26. Is automatic fuel-burning and heating equipment serviced annually by a qualified person? |

- 27. Have all heat exchanges of forced warm air furnaces and unit heater been examined to determine that they are airtight to prevent carbon monoxide and other combustion gases from getting into occupied space?
- 28. Are all combustible waste materials disposed of daily from classroom and building?
- 29. Is the insulation material non-combustible and interior finishing flamespread 75 or less?
- 30. Are non-flammable cleaning materials used?
- 31. Are storerooms and closets free from waste accumulations and unnecessary materials?
- 32. Are enough fire extinguishers of approved type for intended use installed in the building? (75 feet max. from any point in the facility to a fire extinguisher.)
- 33. Have fire extinguishers been inspected and so tagged within the past year?
- 34. Is the temperature control of the heating and/or cooling system adequate?
- 35. Is the supply of fresh air adequate (classroom, assemblies and toilets) as required?

List all areas of noncompliance:

Illinois Licensed Design Professional

The State of Illinois licensed design professional, employed by this district, has certified to this Board of Education that to the best of his/her knowledge and belief, the above mentioned structure will not present a health/life safety hazard to the students housed therein for the school year 2025 - 2026. Further, such design professional has listed the area of noncompliance with the Health/Life Safety Code.



062.059546 11/30/2025
 License Number Expiration Date

Matthew T. Verdun
 Name and Signature of Design Professional

Wold Architects and E 08/07/25
 Name of Firm Date of Inspection

SCHOOL DISTRICT

We hereby certify that this application accurately describes the work to be performed, and that, upon approval all work will be completed in accordance with this application and all applicable laws and regulations.

Date Signature of President, Board of Education

8/11-25
 Date Signature of District Superintendent

REGIONAL SUPERINTENDENT

The above Annual Inspection Checklist for a temporary facility is hereby accepted as submitted

Date Signature Regional Superintendent

APPLICATION FOR OCCUPANCY

| | |
|---|--|
| DISTRICT NAME AND NUMBER Central Unit School District 301 | <input type="checkbox"/> GENERAL CERTIFICATE OF OCCUPANCY <input type="checkbox"/> CERTIFICATE OF PARTIAL OCCUPANCY <input type="checkbox"/> CERTIFICATE FOR A VEHICULAR FACILITY <input checked="" type="checkbox"/> CERTIFICATE OF TEMPORARY OCCUPANCY |
| FACILITY NAME Country Trails Elementary School | |
| FACILITY LOCATION 3701 Highland Woods Blvd. Elgin, IL. 60124 | |
| <input checked="" type="checkbox"/> Property is owned by the district. <input type="checkbox"/> Property is not owned by district (Attach Owner Authorization) | <input type="checkbox"/> Amendment # _____ <input type="checkbox"/> New Use - Bldg Permit # _____ <input type="checkbox"/> New Construction - Project # _____ Bldg Permit # _____ <input type="checkbox"/> Addition - Project # _____ Bldg Permit # _____ <input type="checkbox"/> Renovation/Repair - Project # _____ Bldg Permit # _____ |

III. DESIGN PROFESSIONAL'S CERTIFICATION

To the best of my knowledge and belief (check and complete applicable statement):

- 1. Based upon my survey of the above named facility on ___/___/___ I find and hereby certify that the facility is in full compliance with Part 180. The INSPECTION STATEMENTS and the CONFIRMATION OF CALLED INSPECTION RECORDS have been submitted to, and the CALLED INSPECTIONS RECORDS have been reviewed by the Regional Superintendent during and/or upon completion as applicable to the work.
- 2. I find that the facility fails to comply fully with the requirements of Part 180. However, based upon my survey of the above named facility on ___/___/___ and the attached TEMPORARY FACILITY REPORT (includes the Temporary Facility Elimination Plan and the Temporary Facility Checklist), I hereby certify that such noncompliance does not jeopardize the general health and safety of the student and others who occupy the facility.
- 3. Based upon my survey of the work within the above named facility on 08/07/25 I find and hereby certify that the work is in full compliance with Part 180. The INSPECTION STATEMENTS and the CONFIRMATION OF CALLED INSPECTION RECORDS have been submitted to, and the CALLED INSPECTIONS RECORDS have been reviewed by the Regional Superintendent during and/or upon completion as applicable to the work.

This statement, as selected above, is valid as of the day of the survey indicated. Changes to the facility or conditions affecting it after that date may render this statement invalid.

08/08 Matthew T. Verdun Wold Architects and En
 Date Design Professional Name Firm Name
062.059546 847-241-6100
 License Number Phone Number


11/30/2025
 Expiration Date



SCHOOL DISTRICT CERTIFICATION

We hereby certify that this application accurately describes the status of the work and the occupancy we are seeking in order to occupy the above named facility for the primary purpose of: _____

Date 8-11-25 President of the Board of Education
 Date [Signature] District Superintendent

FOR REGIONAL SUPERINTENDENT'S USE

INSPECTION RECORDS: Date Reviewed: ___/___/___
 INSPECTION STATEMENT: Date Received: ___/___/___
 CONFIRMATION OF CALLED INSPECTION RECORDS: Date Received: ___/___/___

An inspection was made or caused to be made upon the completion of the work and before issuance of a CERTIFICATE OF OCCUPANCY for the above named facility on ___/___/___ Any violations of the approved construction documents and building permits were noted, and the holder of the permit was notified of the discrepancies. No certificate of occupancy was issued until the discrepancies were remedied.

Date _____ Regional Superintendent

TEMPORARY FACILITY REPORT - Part I

Temporary Facility Elimination Plan

The Board of Education for Central Unit School District 301
District Name and Number

in Kane County, IL, upon resolution adopted at a duly convened meeting, hereby

requests an approval for usage of temporary facility to be used in connection with the

Country Trails Elementary School located at 3701 Highland Woods Blvd. Elgin
Name of School Building *Address of School Building*

until June 30, 2026

This temporary facility will be used for:

- Classrooms
- Storage
- Library
- Gymnasium
- Auditorium
- Other _____

This temporary facility will be:

- Relocatables
- Temporary rooms in: _____
Name of Location (rental of churches, etc)

Number of units, rooms or buildings to be used: 1 unit, 4 classrooms

Number of pupils to be housed in temporary housing: ±100 (25 per classroom)

The Board of Education has diligently attempted to eliminate the need for this temporary facility by:
New facility planning, realignment, building additions, referendum, growth still coming.

What is the plan for elimination of the code deficiencies to bring this facility into compliance with 23 Ill. Adm. Code, Part 180 or to eliminate the need to use this facility?

Referendum vote, new facilities, realignment.

This plan will be accomplished by Uncertain
Date

Date

Signature of Board President

Date

Signature of Board Secretary

I have reviewed the request of School District No. 301, and approve the request for temporary housing as submitted by the Board of Education and certified by their design professional.

Date

Signature of Regional Superintendent

TEMPORARY FACILITY REPORT - Part II

Temporary Facility Checklist

| | | | | | |
|---|--|----------------------------------|--|-------------------------------|------------------------------------|
| District Name/Number Central Unit School District 301 | | | Building Name Country Trails Elementary School | | |
| Number of Units 1unit, 4 classr | Year Originally Constructed 2022 | Area Square Feet 3,360 | Enrollment ±100 | Grade Level Pre-K-5 | Number of years in usc 2 |

COMPLIANCE

CHECK FOR THE FOLLOWING CONDITIONS

| YES | NO | NA | |
|-------------------------------------|--------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Was the unit constructed according to 77 IL Adm Code Part 880 and the seal of approval from IDPH posted as required? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Does the district have on file the compliance certificate from IDPH (pink copy)? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Design Professional has verified with the IL Dept of Natural Resources/IDOT that the unit(s) is/are not located in a designated floodplain area. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Is the building securely anchored to the foundation as to withstand the wind load as described in ASCE 7-95? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Are there 2 exits on opposite sides of building? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Is there an interconnecting door between classrooms? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Is the building located in accordance with Section 175.120 of 23 IL Administrative Code, Part 175? (30 feet from adjacent building or separated by two-hour fire wall; or BOCA 705.2 20'-0" or fire wall) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Are the foundation walls maintained plumb and free from open cracks and breaks and kept in such condition as to prevent entry of weather, animals and insects? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Is the enclosure between the floor and ground in good condition? (Tight to prevent entrance of weather, animals and insects) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 10. Are the steel floor support members in good rust-free condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11. Is the general exterior appearance of the building in an acceptable, well-maintained condition free of loose strips or battens? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 12. Is the roof and flashing in good condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 14. Are stair tread and ramps maintained with non-slip finish and platforms in good condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 15. Are the restrooms clean, adequate and in operable condition and properly ventilated? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 16. Are the plumbing fixtures properly installed and maintained in working order, free from leaks and defects? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 17. Are the lighting fixtures properly maintained, complete with lenses and louvers? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Do the doors lock securely without additional locks, bolts or chains? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Are doors equipped with panic hardware (If occupancy is over 100 occupants) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 20. When building is occupied, are all the doors free from devices or wedges to prevent normal operation? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 21. Are screened or barred windows easily opened from inside without keys or tools? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 22. Is the exit lighting system used and all exit lights operable when the building is occupied? (rooms/corridors with more than 2 doors) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 23. Is the building equipped with an approved operable alarm and detector system? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 24. Are utility shut-offs properly and clearly marked? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 25. Is all fuel-burning and heating equipment (flues, ducts, pumps, etc.) maintained and in serviceable condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 26. Is automatic fuel-burning and heating equipment serviced annually by a qualified person? |

- | | | | |
|-------------------------------------|--------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 27. Have all heat exchanges of forced warm air furnaces and unit heater been examined to determine that they are airtight to prevent carbon monoxide and other combustion gases from getting into occupied space? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 28. Are all combustible waste materials disposed of daily from classroom and building? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 29. Is the insulation material non-combustible and interior finishing flamespread 75 or less? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 30. Are non-flammable cleaning materials used? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 31. Are storerooms and closets free from waste accumulations and unnecessary materials? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 32. Are enough fire extinguishers of approved type for intended use installed in the building? (75 feet max. from any point in the facility to a fire extinguisher.) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 33. Have fire extinguishers been inspected and so tagged within the past year? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 34. Is the temperature control of the heating and/or cooling system adequate? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 35. Is the supply of fresh air adequate (classroom, assemblies and toilets) as required? |

List all areas of noncompliance:

Illinois Licensed Design Professional

The State of Illinois licensed design professional, employed by this district, has certified to this Board of Education that to the best of his/her knowledge and belief, the above mentioned structure will not present a health/life safety hazard to the students housed therein for the school year 20~~25~~ - 20~~26~~. Further, such design professional has listed the area of noncompliance with the Health/Life Safety Code.



062.059546

11/30/2025

License Number

Expiration Date

Matthew T. Verdun

Name and Signature of Design Professional

Wold Architects and E 08/07/25

Name of Firm

Date of Inspection

SCHOOL DISTRICT

We hereby certify that this application accurately describes the work to be performed, and that, upon approval all work will be completed in accordance with this application and all applicable laws and regulations.

Date Signature of President, Board of Education

8-11-25 Date Signature of District Superintendent

REGIONAL SUPERINTENDENT

The above Annual Inspection Checklist for a temporary facility is hereby accepted as submitted.

Date Signature Regional Superintendent

APPLICATION FOR OCCUPANCY

| | | |
|---|--|--|
| DISTRICT NAME AND NUMBER Central Unit School District 301 | | <input type="checkbox"/> GENERAL CERTIFICATE OF OCCUPANCY |
| FACILITY NAME Howard B. Thomas Grade School | | <input type="checkbox"/> CERTIFICATE OF PARTIAL OCCUPANCY |
| FACILITY LOCATION 44W575 Plato Rd, Burlington, IL. 60109 | | <input type="checkbox"/> CERTIFICATE FOR A VEHICULAR FACILITY <input checked="" type="checkbox"/> CERTIFICATE OF TEMPORARY OCCUPANCY |
| <input checked="" type="checkbox"/> Property is owned by the district. <input type="checkbox"/> Property is not owned by district (Attach Owner Authorization) | | <input type="checkbox"/> Amendment # _____ <input type="checkbox"/> New Use - Bldg Permit # _____ <input type="checkbox"/> New Construction - Project # _____ Bldg Permit # _____ <input type="checkbox"/> Addition - Project # _____ Bldg Permit # _____ <input type="checkbox"/> Renovation/Repair - Project # _____ Bldg Permit # _____ |

III. DESIGN PROFESSIONAL'S CERTIFICATION

To the best of my knowledge and belief (check and complete applicable statement):

- 1. Based upon my survey of the above named facility on ___/___/___ I find and hereby certify that the facility is in full compliance with Part 180. The INSPECTION STATEMENTS and the CONFIRMATION OF CALLED INSPECTION RECORDS have been submitted to, and the CALLED INSPECTIONS RECORDS have been reviewed by the Regional Superintendent during and/or upon completion as applicable to the work.
- 2. I find that the facility fails to comply fully with the requirements of Part 180. However, based upon my survey of the above named facility on ___/___/___ and the attached TEMPORARY FACILITY REPORT (includes the Temporary Facility Elimination Plan and the Temporary Facility Checklist), I hereby certify that such noncompliance does not jeopardize the general health and safety of the student and others who occupy the facility.
- 3. Based upon my survey of the work within the above named facility on 08/07/25 I find and hereby certify that the work is in full compliance with Part 180. The INSPECTION STATEMENTS and the CONFIRMATION OF CALLED INSPECTION RECORDS have been submitted to, and the CALLED INSPECTIONS RECORDS have been reviewed by the Regional Superintendent during and/or upon completion as applicable to the work.

This statement, as selected above, is valid as of the day of the survey indicated. Changes to the facility or conditions affecting it after that date may render this statement invalid.

08/08 Matthew T. Verdun Wold Architects and En
 Date Design Professional Name Firm Name
062.059546 847-241-6100
 License Number Phone Number


11/30/2025
 Expiration Date



SCHOOL DISTRICT CERTIFICATION

We hereby certify that this application accurately describes the status of the work and the occupancy we are seeking in order to occupy the above named facility for the primary purpose of: _____

_____ 8-11-25 _____
 Date President of the Board of Education Date District Superintendent

FOR REGIONAL SUPERINTENDENT'S USE

INSPECTION RECORDS: Date Reviewed: ___/___/___
 INSPECTION STATEMENT: Date Received: ___/___/___
 CONFIRMATION OF CALLED INSPECTION RECORDS: Date Received: ___/___/___

An inspection was made or caused to be made upon the completion of the work and before issuance of a CERTIFICATE OF OCCUPANCY for the above named facility on ___/___/___ Any violations of the approved construction documents and building permits were noted, and the holder of the permit was notified of the discrepancies. No certificate of occupancy was issued until the discrepancies were remedied.

Date Regional Superintendent

TEMPORARY FACILITY REPORT - Part I

Temporary Facility Elimination Plan

The Board of Education for Central Unit School District 301
District Name and Number

in Kane County, IL, upon resolution adopted at a duly convened meeting, hereby

requests an approval for usage of temporary facility to be used in connection with the

Howard B. Thomas Grade School located at 44W575 Plato Rd, Burlington, IL.
Name of School Building *Address of School Building*

until June 30, 2026

This temporary facility will be used for:

- Classrooms
- Storage
- Library
- Gymnasium
- Auditorium
- Other _____

This temporary facility will be:

- Relocatables
- Temporary rooms in: _____
Name of Location (rental of churches, etc)

Number of units, rooms or buildings to be used: 1 unit, 4 classrooms

Number of pupils to be housed in temporary housing: ±100 (25 per classroom)

The Board of Education has diligently attempted to eliminate the need for this temporary facility by:
New facility planning, realignment, building additions, referendum, growth still coming.

What is the plan for elimination of the code deficiencies to bring this facility into compliance with 23 Ill. Adm. Code, Part 180 or to eliminate the need to use this facility?

Referendum vote, new facilities, realignment.

This plan will be accomplished by Uncertain
Date

Date *Signature of Board President*

Date *Signature of Board Secretary*

I have reviewed the request of School District No. 301, and approve the request for temporary housing as submitted by the Board of Education and certified by their design professional.

Date *Signature of Regional Superintendent*

TEMPORARY FACILITY REPORT - Part II

Temporary Facility Checklist

| | | | | | |
|---|--|---|---------------------------|-------------------------------|------------------------------------|
| District Name/Number Central Unit School District 301 | | Building Name Howard B. Thomas Grade School | | | |
| Number of Units 1 unit, 4 classr | Year Originally Constructed 2022 | Area Square Feet 3,360 | Enrollment ±100 | Grade Level Pre-K-5 | Number of years in use 2 |

COMPLIANCE

CHECK FOR THE FOLLOWING CONDITIONS

| YES | NO | NA | |
|-------------------------------------|--------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Was the unit constructed according to 77 IL Adm Code Part 880 and the seal of approval from IDPH posted as required? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Does the district have on file the compliance certificate from IDPH (pink copy)? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Design Professional has verified with the IL Dept of Natural Resources/IDOT that the unit(s) is/are not located in a designated floodplain area. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Is the building securely anchored to the foundation as to withstand the wind load as described in ASCE 7-95? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Are there 2 exits on opposite sides of building? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Is there an interconnecting door between classrooms? |
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| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 18. Do the doors lock securely without additional locks, bolts or chains? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 19. Are doors equipped with panic hardware (If occupancy is over 100 occupants) |
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| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 24. Are utility shut-offs properly and clearly marked? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 25. Is all fuel-burning and heating equipment (flues, ducts, pumps, etc.) maintained and in serviceable condition? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 26. Is automatic fuel-burning and heating equipment serviced annually by a qualified person? |

- | | | | |
|-------------------------------------|--------------------------|-------------------------------------|---|
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| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 29. Is the insulation material non-combustible and interior finishing flamespread 75 or less? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 30. Are non-flammable cleaning materials used? |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 31. Are storerooms and closets free from waste accumulations and unnecessary materials? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 32. Are enough fire extinguishers of approved type for intended use installed in the building? (75 feet max. from any point in the facility to a fire extinguisher.) |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 33. Have fire extinguishers been inspected and so tagged within the past year? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 34. Is the temperature control of the heating and/or cooling system adequate? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 35. Is the supply of fresh air adequate (classroom, assemblies and toilets) as required? |

List all areas of noncompliance:

Illinois Licensed Design Professional

The State of Illinois licensed design professional, employed by this district, has certified to this Board of Education that to the best of his/her knowledge and belief, the above mentioned structure will not present a health/life safety hazard to the students housed therein for the school year 20~~25~~ - 20~~26~~. Further, such design professional has listed the area of noncompliance with the Health/Life Safety Code.



062.059546

11/30/2025

License Number

Expiration Date

Matthew T. Verdun

Name and Signature of Design Professional

Wold Architects and E 08/07/25

Name of Firm

Date of Inspection

SCHOOL DISTRICT

We hereby certify that this application accurately describes the work to be performed, and that, upon approval all work will be completed in accordance with this application and all applicable laws and regulations.

Date Signature of President, Board of Education

8-11-25 Date Signature of District Superintendent

REGIONAL SUPERINTENDENT

The above Annual Inspection Checklist for a temporary facility is hereby accepted as submitted.

Date Signature Regional Superintendent

NORTHERN ILLINOIS UNIVERSITY CONVOCATION CENTER

LICENSE AGREEMENT

EVENT CODE: 1022384; 1022385; 1022386; 1022387

LICENSE AGREEMENT NUMBER: 5/14/2027; 5/26/2028; 5/25/2029; 5/24/2030

EVENT: Burlington Central HS Graduation

CERTIFICATE OF INSURANCE RECEIVED: _____

DEPOSIT RECEIVED \$ _____ DATE: _____ CHECK NO. _____

THIS AGREEMENT MUST BE SIGNED BY THE LICENSEE AND RETURNED WITHIN 14 DAYS FROM THE ISSUE DATE ALONG WITH ANY APPLICABLE DEPOSITS OR THE AGREEMENT MAY BE DECLARED NULL AND VOID AND LICENSOR SHALL HAVE THE RIGHT TO CANCEL THE DATES BEING HELD AND COVERED BY THIS AGREEMENT WITHOUT NOTICE.

THIS LICENSE AGREEMENT (together with the Exhibits attached hereto, the "Agreement"), is made and entered into by and between the Board of Trustees of Northern Illinois University, a body corporate and politic of the State of Illinois ("LICENSOR"), and

Sarah Farrington
Assistant Principal for Building & Operations
Burlington Central High School
847-464-6030 Ext. 8306
Direct Office Dial: 224-990-7086

("LICENSEE"),

WITNESSETH:

Whereas LICENSOR is the owner, operator and manager of the Northern Illinois University Convocation Center ("CONVOCATION CENTER"), located in De Kalb, Illinois, and

Whereas LICENSEE desires to use all or a portion of the CONVOCATION CENTER, as set forth below, for the purposes and in accordance with the terms and conditions set forth herein,

NOW, THEREFORE, in consideration of the foregoing and the mutual promises, covenants and agreements herein contained, the parties hereto, intending to be legally bound, hereby agree as follows:

1. USE OF THE CONVOCATION CENTER:

A. LICENSE AND TERM: LICENSOR hereby grants LICENSEE, upon the terms and conditions hereinafter expressed, a license to use those areas of the CONVOCATION CENTER described on Exhibit A attached hereto, including all improvements, furniture, fixtures, easements, rights of ingress and egress, and appurtenances thereto, during the dates and times set forth on Exhibit A (each such date and time, an "EVENT"). Available dressing rooms, office space and storage space shall be provided at the sole discretion of LICENSOR and at no cost to LICENSEE during the EVENT. The license granted herein shall be effective as of the date and time set forth on Exhibit A and shall continue in effect, unless earlier terminated as set forth herein, until the stated date and time. Use of the CONVOCATION CENTER in excess of the time described herein may result in additional charges.

B. ADDITIONAL USE: In the event LICENSEE desires to use any portion of the CONVOCATION CENTER at any time other than during the dates and times delineated on Exhibit A, LICENSEE shall request from LICENSOR prior written permission to use the CONVOCATION CENTER, or portions thereof, on said dates and times. In the event such permission is granted, LICENSEE shall pay an additional fee as determined solely by LICENSOR for such use. Only the areas the LICENSOR authorizes in writing and made a part of this Agreement shall be occupied by LICENSEE.

C. SIMULTANEOUS USES: LICENSEE acknowledges that in addition to the use of the CONVOCATION CENTER as contemplated by this Agreement, the CONVOCATION CENTER and the various parts thereof may be used for the installation, holding, presentation and removal of other activities or events, and that in order for LICENSOR to operate the CONVOCATION CENTER as efficiently as practical, it may be necessary to make available to others certain services and accommodations of the CONVOCATION CENTER, including without limitation, entrances, exits, truck ramps, receiving areas, marshaling areas, outdoor areas, storage area, passenger and freight elevators and concession areas, which may be scheduled or shared with other activities or events. LICENSOR shall have the right, in its sole discretion, to use or permit the use of any portion of the CONVOCATION CENTER other than the areas licensed herein to any person, firm or other entity regardless of the nature of the use of such other space. LICENSOR shall have full, complete and absolute authority to establish the schedule for the use and availability of such services and accommodations and to determine when and the extent to which the sharing of any such services and accommodations is

necessary or desirable. LICENSEE shall comply with any schedules so established and cooperate in any sharing arrangements so determined.

D. EQUIPMENT AND SERVICES: All equipment, staffing and services necessary or required for this EVENT by the LICENSEE, the LICENSEE'S exhibitors or guests shall be ordered through and furnished by LICENSOR at the LICENSEE'S sole expense. These items may include, but are not necessarily limited to, EVENT staffing, special custodial services, equipment set-up and removal, equipment items, electrical and utility services, food and beverage services, decorator services, advertising, marketing and publicity costs, ticketing costs or any other equipment, staffing or services at rates established for the CONVOCATION CENTER. If any equipment, staffing or services are furnished, with or without charges, by LICENSOR to LICENSEE, LICENSOR shall in no event be liable for a failure to provide such services when prevented by strikes, accidents or other causes beyond the reasonable control or prevention of LICENSOR or during the repairing of equipment which is provided by LICENSOR for such purposes. LICENSOR reserves the right to supply, operate and control all equipment used for the EVENT. If LICENSOR is unable to provide requested equipment or agrees to allow LICENSEE to bring equipment into the CONVOCATION CENTER, LICENSEE warrants that such equipment brought into the CONVOCATION CENTER shall be in good working order and meet all applicable safety regulations. LICENSEE accepts responsibility for supervision and guarding of its equipment, its property and the property of its employees, subcontractors and agents.

E. UTILITY SERVICES: LICENSOR shall supply lighting, heating or air conditioning and water as installed, at such times and in such amounts as shall be reasonably necessary in LICENSOR'S sole opinion, which shall be conducive for the comfortable use and occupancy of the CONVOCATION CENTER, except when prevented by strikes, accidents or other causes beyond the control or prevention of LICENSOR and except during the repairing of equipment or apparatus in the CONVOCATION CENTER which is provided for such air conditioning and illuminating purposes. All special electrical, water, gas, telecommunications and cable television services needed by the LICENSEE, the LICENSEE'S exhibitors or guests shall be ordered through and furnished by LICENSOR.

F. STAFFING AND LABOR: LICENSOR retains the right to determine the appropriate number of personnel necessary to serve and protect the public properly. All personnel provided by LICENSOR shall remain employees of LICENSOR and shall be under direct supervision of LICENSOR staff. LICENSEE shall not perform any work or employ any personnel in connection with the EVENT unless the work or employment conforms to labor Agreements to which LICENSOR is party or which control labor activities at the CONVOCATION CENTER, if any. At LICENSEE'S request, LICENSOR shall advise LICENSEE of pertinent provisions of the labor Agreements, if any.

G. CLEANING SERVICES: LICENSOR shall provide at its expense and at its discretion, appropriate cleaning services of corridors, public lobbies and rest rooms with necessary equipment, materials, supplies, labor and supervision and standard cleaning

services normally and customarily provided after each EVENT, but only in normal and reasonable amounts.

H. PARKING: LICENSOR shall operate all parking facilities and retain all revenues collected therefrom. LICENSOR shall have the sole right to determine parking fees. If LICENSEE desires that its attendees not pay the parking fee, LICENSEE may make prior arrangements with LICENSOR and LICENSEE may pay all or a portion of the parking fee. The amount of the parking fee, however, shall remain the same.

I. MANAGEMENT CONTROL: LICENSOR shall at all times maintain control of the CONVOCATION CENTER and shall enforce all rules and regulations relative to its operation. When applicable, the CONVOCATION CENTER shall provide LICENSEE a copy of its rules and regulations.

J. UNLAWFUL OR IMMORAL USE: LICENSEE shall not use the CONVOCATION CENTER, or permit the CONVOCATION CENTER to be used by any of its officers, agents, employees, guests or invitees, for any unlawful or immoral purpose or in any manner so as to injure persons or property in, on or near the CONVOCATION CENTER.

2. FINANCIAL TERMS AND CONDITIONS:

A. LICENSE FEE: LICENSEE shall pay a fee in the amount as set forth on Exhibit B attached hereto ("License Fee"). If the License Fee includes a percentage of revenue generated from an EVENT, then no collections, whether for charity or otherwise, shall be made, attempted or announced at the CONVOCATION CENTER, without first having made a written request and received the prior written consent of LICENSOR. Donations or collections may be allowed by LICENSOR in lieu of an admission ticket, and in such event, all such monies received from such collections or donations shall be considered as ticket revenues for the purpose of determining the License Fee due to LICENSOR.

B. TICKETING FEES: If the EVENT has no percentage license fee, then LICENSOR shall be reimbursed for the labor expenses incurred for the ticketing services in addition to the license fee. No portion of the ticketing phone or outlet convenience charges shall be shared with the LICENSEE.

C. OTHER CHARGES: In addition to the License Fee, LICENSEE shall pay LICENSOR for Additional Use, equipment, staffing and services as provided in Article 1 in accordance with the latest Convocation Center rate sheets, which shall be furnished to the LICENSEE upon request, or as otherwise determined by LICENSOR. In addition to payment of these expenses, LICENSEE shall be responsible for all additional expenses incurred by LICENSOR in connection with the holding of the EVENT at the CONVOCATION CENTER. This responsibility shall survive and continue after the Settlement described in paragraph J of this Article.

D. DEPOSIT: LICENSEE shall pay LICENSOR a deposit as provided in Exhibit B. The deposit shall be applied against the total charges for the EVENT at settlement. LICENSOR reserves the right to retain any or all of the deposit if LICENSEE violates any terms of this Agreement. LICENSOR further reserves the right to retain any or all of the deposit and apply it to any expenses incurred due to cancellation of the EVENT or to pay expenses incurred which are payable by the LICENSEE as a result of the EVENT.

E. REFUND OF DEPOSITS: If LICENSEE shall for any reason fail to occupy or use the CONVOCATION CENTER as provided herein, no refund shall be made of any amounts paid by LICENSEE to LICENSOR hereunder, and the aggregate amount payable by LICENSEE to LICENSOR hereunder, including disbursements or expenses incurred by LICENSOR in connection herewith, shall be payable in full by LICENSEE to LICENSOR.

F. ADDITIONAL DEPOSITS: LICENSEE shall pay any additional deposits required by LICENSOR upon demand. Failure to pay additional deposits promptly may result in cancellation of the EVENT. In addition to the deposits required in Exhibit B, in order to ensure the payment to LICENSOR of the License Fee, the expenses and any other amounts as may accrue from time to time under this Agreement, LICENSEE shall deliver into the custody of LICENSOR upon demand by LICENSOR and at least ten (10) days prior to the first EVENT, a certified check payable to LICENSOR, performance bond, letter of credit, ticket sales escrow or other security acceptable to LICENSOR, in the amount required in Exhibit B. Should LICENSEE fail to pay the License Fee, the expenses or any other amounts due to LICENSOR in accordance with the terms of this Agreement, then LICENSOR may apply the proceeds of said check, performance bond, letter of credit, ticket sales escrow or other security in settlement thereof. The remedy provided herein shall be non-exclusive and shall be in addition to any other remedy available to LICENSOR in this Agreement or in law or equity.

G. LATE CHARGES: If LICENSEE fails to pay any amounts when due under this Agreement, LICENSEE shall pay to LICENSOR a late charge of 1.5% per month on the unpaid balance.

H. EVENT EXPENSE ESTIMATE: Upon LICENSEE'S request and upon receipt of specific EVENT information, LICENSOR shall provide EVENT cost estimates. Any cost estimate provided is a good faith attempt to identify EVENT costs. Cost estimates are not a firm price quotation, and the LICENSEE shall be held responsible to pay LICENSOR the full payment of the actual costs presented to the LICENSEE at settlement.

I. TAXES: LICENSOR shall not be liable for the payment of taxes, late charges or penalties of any nature relating to any EVENT or any revenue received by, or payments made to, LICENSEE in respect of any EVENT, except as otherwise provided by law. LICENSEE shall pay and discharge as they become due, promptly and before delinquency, all taxes, assessments, rates, damages, license fees, permits, municipal liens, levies, excises or imposts, whether general or special, or ordinary or extraordinary,

of every name, nature and kind whatsoever, including all governmental charges of whatsoever name, nature or kind, which may be levied, assessed, charged or imposed, or which may become a lien or charge against this Agreement or any other improvements now or hereafter owned by LICENSEE. LICENSEE shall relieve LICENSOR from any responsibility for acquiring or paying for such taxes, licenses or permits, except that LICENSOR shall remit any taxes collected at settlement on behalf of the LICENSEE.

J. SETTLEMENT: At the conclusion of the EVENT, license fees, reimbursable costs and other expenses shall be deducted from deposits, ticket receipts or other applicable revenue, with all remaining funds paid to the LICENSEE, without interest.

3. TICKETS AND SEATING

A. TICKET OFFICE CONTROL: LICENSOR shall at all times maintain control and direction of the ticket office, ticket personnel and ticket sales. Only employees under the direct control and supervision of LICENSOR shall be permitted use of LICENSOR'S ticket office facilities or otherwise be engaged as admissions control personnel. LICENSEE shall be required to use the computer ticketing company designated by LICENSOR and to abide by terms agreed upon between LICENSOR and the computer ticket company, unless LICENSOR agrees in writing to allow LICENSEE to utilize another method of selling tickets. If such permission is granted, LICENSEE must agree to follow the ticket consignment procedures set by LICENSOR. In the handling, control and custody of ticket receipts, whether received through the ticket office or otherwise, LICENSOR is acting for the accommodation and sole benefit of the LICENSEE and, as to such receipts, LICENSOR shall be responsible only for gross negligence or willful misconduct.

B. OUTLETS: NA

C. ORDERING OF TICKETS: NA

D. MANIFEST: A ticket printer's manifest shall be submitted in duplicate to LICENSOR when hard tickets are printed.

E. DELIVERY OF TICKETS: NA

F. TICKET PRICES: NA

G. COMPLIMENTARY TICKETS: LICENSEE shall provide to LICENSOR'S ticket office a designated, authorized representative to approve requests for complimentary tickets. No requests for complimentary tickets shall be processed without approval of this authorized representative.

H. PERSONAL CHECKS/CREDIT CARDS: NA

I. SEATING CAPACITY: LICENSEE shall not sell or distribute in any fashion tickets or passes in excess of the seating capacity for the EVENT. LICENSOR shall have the sole right to establish capacities in the CONVOCATION CENTER. LICENSEE shall not admit to the CONVOCATION CENTER a larger number of persons than can safely and freely move about in the CONVOCATION CENTER.

J. OBSTRUCTED VIEW SEATS: LICENSEE agrees that any seats with limited or impaired vision shall be marked as "OBSTRUCTED VIEW" or "LIMITED VIEW."

K. TICKET REFUNDS: NA

L. CAPITAL IMPROVEMENT FEE: NA

M. PREMIUM SEAT TICKETS: Tickets used by LICENSOR for private suite holders shall not be included on ticket manifest or in gross receipts calculations, and all revenue derived from this premium seating shall be retained by LICENSOR. If requested, LICENSEE may buy out premium seating at a discounted rate.

Licensee Buy Out- Suites A-D \$250 per suite
Standard Rate- Suites A-D \$350 per suite

Licensee Buy Out- Nelson Suite \$500
Standard Rate- Nelson Suite \$1,000

N. RELOCATE SEATS: NA

O. ACCOUNTING: NA

P. SCALPING: NA

4. FOOD, BEVERAGES, MERCHANDISE AND PARKING:

A. LICENSOR RETAINED REVENUES AND RIGHTS: LICENSOR shall retain one hundred percent (100%) of all revenues generated in connection with the sale of food and beverages, merchandise and parking at the CONVOCATION CENTER. LICENSOR reserves all rights to concession sales, including, but not necessarily limited to, all food and beverage products, vending items, souvenirs, novelties and checkroom services except as otherwise provided.

B. CATERING: All catering must be provided by LICENSOR or LICENSOR'S contracted caterer .

C. FREE SAMPLES: Neither LICENSEE nor any of LICENSEE'S exhibitors, patrons or guests may sell or give away any samples of food, beverages or any product without prior written approval of LICENSOR.

D. ALCOHOLIC BEVERAGES: All rights to the sale or distribution of alcoholic beverages are reserved by LICENSOR. LICENSEE agrees that no alcoholic beverages of any type may be sold, distributed or brought onto the CONVOCATION CENTER premises by the LICENSEE, its agents, employees, exhibitors or patrons except upon prior written permission of LICENSOR. LICENSOR shall solely determine the types and brands of alcoholic beverages to be dispensed, the methods of selling and distributing alcoholic beverages and the events during which they may be sold or distributed.

5. RIGHTS AND RESPONSIBILITIES OF LICENSEE

A. AUTHORIZED AGENT: An authorized representative of LICENSEE with decision making capabilities must be at the CONVOCATION CENTER for the duration of any load-in, set-up, rehearsal(s), performance(s), strike and load-out of all scheduled EVENTS, unless prior arrangements have been made with the appropriate staff of LICENSOR.

B. CLEANING: LICENSEE shall keep the CONVOCATION CENTER in an orderly condition, and shall cause all refuse, rubbish and debris to be deposited in containers or at locations in the CONVOCATION CENTER which are designated for that purpose.

C. CONDITION OF CONVOCATION CENTER: LICENSEE acknowledges that LICENSEE has inspected the CONVOCATION CENTER, and that LICENSEE is satisfied with the condition, fitness and order of the CONVOCATION CENTER and has accepted the CONVOCATION CENTER in its present condition. Neither LICENSOR nor LICENSOR'S employees or agents have made any representations or warranties with respect to the CONVOCATION CENTER. Commencement of the use of the CONVOCATION CENTER by LICENSEE shall be conclusive evidence against LICENSEE that the CONVOCATION CENTER was in good repair and satisfactory condition, fitness and order when such use commenced. LICENSOR shall have the continuing obligation and responsibility to maintain and keep the CONVOCATION CENTER in good order and repair, normal wear and tear excepted, provided, however, that any damages to the CONVOCATION CENTER and its appurtenances caused by LICENSEE or its officers, agents, employees, guests or invitees shall be paid for by LICENSEE at the estimated or actual cost of repair.

D. ALTERATIONS AND IMPROVEMENTS: LICENSEE shall not make any alterations or improvements to the CONVOCATION CENTER without the prior written consent of LICENSOR. Any alterations or improvements of whatever nature made or placed by LICENSEE to or on the CONVOCATION CENTER, except movable trade fixtures, shall, at the option of LICENSOR, (i) be removed by LICENSEE, at LICENSEE'S expense, immediately upon the conclusion of the EVENT, or (ii) become the property of LICENSOR.

E. SHIPMENTS: LICENSEE shall not direct shipments to LICENSOR prior to the first set up day of the EVENT without advance written permission of LICENSOR. LICENSOR reserves the right to refuse any shipments.

F. COPYRIGHT: LICENSEE shall assume all responsibility for procuring and paying for the use of any copyrights, trademarks or other materials used in the EVENT. LICENSEE further agrees to save and hold harmless LICENSOR and its trustees, officers, employees and agents from any costs or claims arising from any alleged copyright or trademark violations. LICENSEE warrants that it has in effect, and shall maintain in effect during the time of the EVENT, valid performing rights and licenses for the EVENT. LICENSEE further agrees to submit upon demand valid written evidence of such licenses.

G. DISABILITIES: LICENSEE agrees to abide by all procedures and policies to insure that the EVENT complies with all legislation respecting persons with disabilities. LICENSEE shall be responsible for ensuring that the CONVOCATION CENTER complies and continues to comply in all respects with the Americans with Disabilities Act (ADA), including accessibility, usability and configuration insofar as LICENSEE modifies, rearranges or sets up in the CONVOCATION CENTER in order to accommodate LICENSEE'S usage. LICENSEE shall be responsible for any violations of the ADA that arise from LICENSEE'S reconfiguration of the seating areas or modification of other portions of the CONVOCATION CENTER in order to accommodate LICENSEE'S usage. LICENSEE shall be responsible for providing auxiliary aids and services that are ancillary to its usage and for ensuring that the policies, practices and procedures it applies in connection with the EVENT are in compliance with the ADA.

H. NOTIFICATION: It is the obligation and responsibility of LICENSEE to inform in a timely manner the performer's management and its clients contracted with LICENSEE of any and all general conditions, restrictions and policies specified in this Agreement. LICENSOR shall not be held responsible for any discrepancies, difficulties or charges that might occur if LICENSEE'S artist and clients are not aware of LICENSOR'S restrictions and policies.

I. PRODUCTION REQUIREMENTS: LICENSEE shall furnish LICENSOR with detailed production and EVENT requirements no later than two (2) weeks prior to the beginning of the EVENT. The intent of the foregoing is to enable both parties of this Agreement to anticipate and work out in advance any problems that might occur relating to LICENSEE'S use of CONVOCATION CENTER. Further, LICENSOR requires advance information in order to schedule the appropriate personnel and equipment for LICENSEE'S use of CONVOCATION CENTER and to compile expense estimates. LICENSOR shall provide a reasonable amount of production consulting at no cost. A fee shall be levied for any excessive production demands place upon LICENSOR'S employees.

J. STORAGE OF GOODS AND SURRENDER OF PREMISES: Upon the termination of this Agreement for any reason whatsoever, LICENSEE shall immediately

quit and surrender the CONVOCATION CENTER to LICENSOR. Upon such quitting and surrender, the CONVOCATION CENTER shall be in the same condition of cleanliness as at the beginning of the EVENT and in good order, ordinary wear excepted. LICENSEE shall promptly remove from the CONVOCATION CENTER any goods or chattels brought or permitted in the CONVOCATION CENTER. At the end of the EVENT, LICENSOR shall have the right, but not the obligation, in addition to any other rights provided by law or elsewhere in this Agreement, to remove or store the property of LICENSEE and any third parties occupying the CONVOCATION CENTER pursuant to this Agreement in such manner as it may deem reasonable under the circumstances. All costs resulting from the removal or storage of such property shall be borne exclusively by LICENSEE, and LICENSOR shall have the right to retain ticket office receipts or any other funds otherwise payable to LICENSEE in satisfaction of such costs. LICENSOR shall incur no liability whatsoever in connection with such removal or storage, except for willful malfeasance on its part. LICENSOR shall exercise all reasonable care to safeguard the property of the LICENSEE while in the CONVOCATION CENTER, however, LICENSOR shall assume no responsibility whatsoever for any property placed in LICENSOR'S facilities and is hereby expressly relieved and discharged from any and all liability for any loss, injury, or damage to persons or property that may be sustained by reason of the occupancy of the CONVOCATION CENTER, or any part thereof under this Agreement except if caused by the gross negligence of LICENSOR.

K. TRANSPORTATION: All transportation of LICENSEE equipment and personnel required for this EVENT shall be the responsibility of the LICENSEE.

6. PUBLIC SAFETY:

A. PUBLIC SAFETY: LICENSEE shall at all times conduct activities with full regard to public safety and shall observe and abide by all applicable regulations and requests by duly authorized governmental agencies responsible for public safety and with LICENSOR'S regulations and requests established or made to assure such safety. LICENSOR has the right at all times to take such steps as it deems necessary to ensure public safety.

B. OBSTRUCTIONS: It is further understood and agreed that LICENSEE shall permit no chairs or seats to be or to remain in the passageways, fire exits and other exits of the CONVOCATION CENTER and shall keep all passageways, fire exits and other exits clear at all times; and the sidewalk, grounds, entries, passages, vestibules, halls, elevators, abutting streets and all ways of access to public utilities of CONVOCATION CENTER shall not be obstructed by LICENSEE or used for any purpose other than for ingress to, and egress from, the CONVOCATION CENTER.

C. HAZARDS: LICENSEE shall not bring into the CONVOCATION CENTER or generate therein any material, substance, equipment or object, including a hazardous material, which is likely to endanger the life of, or cause bodily injury to, any person in the CONVOCATION CENTER or which is likely to constitute a hazard to property thereon, without the prior approval of LICENSOR. LICENSOR shall have the right to refuse to

allow such material, substance, equipment or object to be brought into the CONVOCATION CENTER and the further right to require its immediate removal if found thereon. "Hazardous material" shall include, without limitation, those substances included within the definitions of "hazardous substances," "hazardous materials," "toxic substances" or "solid waste" in any applicable state or federal environmental law.

D. EVACUATION: LICENSOR shall have the sole right to determine when and if it is necessary to evacuate the CONVOCATION CENTER for whatever reason. If such evacuation occurs and results in cancellation of the EVENT, LICENSEE hereby agrees to waive any claims for damages against LICENSOR. Should it become necessary in the judgment of LICENSOR to evacuate and then later reoccupy the CONVOCATION CENTER because of a bomb threat or for other reasons of public safety, LICENSEE shall retain possession of the CONVOCATION CENTER for sufficient time to complete presentation of its activity without additional license charges, providing such time does not interfere with another building commitment. If it is not possible to complete presentation of the activity, the License Fee shall be forfeited, prorated or adjusted at the discretion of LICENSOR based on the situation, and the LICENSEE hereby waives any claim for damages or compensation from LICENSOR.

E. LASER AND PYROTECHNIC DEVICES: LICENSEE shall with respect to the use of any and all laser and pyrotechnic devices to be operated in connection with the presentation of the EVENT, if any, comply with all laws, rules, regulations, prescriptions, criteria and policies of all federal, state and municipal authorities or agencies applicable thereto, including, without limitation, the applicable rules, regulations and directives of LICENSOR. LICENSEE shall deliver all supporting documentation confirming LICENSEE'S compliance with the above requirements at least seven (7) days prior to the first performance of the EVENT. Notwithstanding all of the foregoing, LICENSEE shall not use any laser or pyrotechnic devices whatsoever without the prior written consent of LICENSOR, which may be withheld in LICENSOR'S sole discretion.

F. ENTRANCES AND EXITS: The entrances and exits of the CONVOCATION CENTER shall be locked or unlocked during the EVENT as LICENSEE may direct, subject to regulations of federal, state or municipal authorities, any lawful direction of peace officers, and also subject to LICENSOR'S approval. No exit door or other exit shall be locked, blocked or bolted, preventing egress, while the CONVOCATION CENTER is in use. All designated exitways shall be maintained in such manner as to be visible at all times. LICENSOR shall, at LICENSEE'S expense, at all times maintain security, as designated by LICENSOR, at all exits and entrances of the CONVOCATION CENTER when such exits and entrances are unlocked. Articles, fittings, fixtures, materials and equipment shall be brought into or removed from the CONVOCATION CENTER only at entrances and exits designated by LICENSOR. The total number and weight of vehicles which may enter the CONVOCATION CENTER at one time shall be determined by LICENSOR in its absolute discretion.

G. ANNOUNCEMENTS: LICENSOR reserves the right to make announcements in the interest of public safety, to provide information to attendees and to announce upcoming events at the CONVOCATION CENTER.

H. ACCESS: LICENSOR shall have the right to free access of any and all areas of the CONVOCATION CENTER during the EVENT.

I. DANGEROUS PERSONS: LICENSOR reserves the right to eject or cause to be ejected from the CONVOCATION CENTER any person or persons who in the judgment of LICENSOR pose a threat to the safety of others attending the EVENT. LICENSOR shall not be liable for any damages which may be sustained as a result of such action. LICENSEE hereby appoints LICENSOR or any servant, employee or agent of LICENSOR, as LICENSEE'S agent to refuse admission to or to cause to be removed from the CONVOCATION CENTER any such person. Any persons employed by LICENSEE shall be under the general supervision and control of LICENSOR (but not as an agent, servant or employee of LICENSOR) while in or about the CONVOCATION CENTER and may be refused entrance by LICENSOR for non-compliance with provisions of this Agreement or for objectionable or improper conduct without any liability on LICENSOR'S part for such refusal or ejection.

J. OPENING OF DOORS: LICENSOR reserves the right to open the doors when LICENSOR deems it necessary to move the public into or out of the CONVOCATION CENTER in a safe and orderly manner. LICENSOR may cancel any sound checks or other EVENT preparations in order to move the public in or out of the CONVOCATION CENTER safely. Doors opening hours shall be in accordance with advertised time, LICENSOR'S policy and applicable law.

7. PROMOTION, ADVERTISING AND BROADCASTING:

A. EVENT SPONSORSHIP: LICENSEE shall not allow any advertising or media coverage publicizing the EVENT to state or imply that LICENSOR is sponsoring the EVENT unless the EVENT is, in fact, sponsored or co-sponsored by LICENSOR. The use of the CONVOCATION CENTER by any organization, individual or group of individuals does not in itself constitute endorsement by LICENSOR of that organization, individual or group of individuals, nor of any product, service, precept or tenet of any kind. Those who use the CONVOCATION CENTER are forbidden to express or imply such endorsement in any of the programs or performances carried on at the CONVOCATION CENTER or in advertising or promotion associated with such EVENTS. A statement of true EVENT sponsorship must appear in all advertising for an EVENT. LICENSOR reserves the right to withhold its name or logo from any advertisement, if used in any way other than to indicate the venue of the EVENT.

B. APPROVAL BY LICENSOR: In no case shall LICENSEE promote, advertise or arrange for the promotion or advertising of the EVENT in any medium whatsoever prior to receipt of written approval from LICENSOR. Such approval may be withheld by LICENSOR for any reason whatsoever in its sole discretion. Under no

circumstances shall such approval be given until such time as there is full availability of tickets for the EVENT at LICENSOR'S ticket office. LICENSEE agrees that all advertising of the EVENT shall be honest, accurate and true.

C. LOGO USE: In all advertising as described herein, the standard logo of the CONVOCATION CENTER must be displayed and described in the manner directed by LICENSOR in its sole discretion.

D. USE OF VISUAL DEPICTION: Notwithstanding anything in this section to the contrary, LICENSEE acknowledges that there shall be no visual depiction of the CONVOCATION CENTER for advertising, promotional or any other purposes without the express written approval of LICENSOR.

E. EVENT PRESENTED AS ADVERTISED: LICENSEE represents and warrants to LICENSOR that it has secured all rights required to advertise or promote the EVENT, including the appearance of all artists, athletes or other persons participating therein. LICENSEE hereby guarantees that all persons or groups advertised as appearing in the EVENT shall in fact participate in the EVENT as advertised.

F. ADVERTISING/SIGNAGE: LICENSOR reserves all rights to advertising, signs, scoreboards, displays and banners of all types on, in and around the CONVOCATION CENTER, and all revenues therefrom shall accrue to LICENSOR. No signage shall be allowed to be placed by the LICENSEE, or any of the LICENSEE'S agents, employees or invitees without prior written approval of LICENSOR. LICENSEE shall not advertise, paint, post or exhibit, nor allow to be advertised, painted, posted or exhibited signs, advertisements, show bills, lithographs, posters or cards of any description inside or outside or on any part of the CONVOCATION CENTER except upon written permission of LICENSOR. LICENSOR reserves and retains the right to use the sound system, video system, display advertising capabilities and all other advertising capabilities in and about the CONVOCATION CENTER in any manner which in its sole opinion are desirable or appropriate, providing only that such announcements, descriptions, advertisements and use do not unduly disrupt or interfere with the EVENT.

G. ADVERTISING PLACEMENT: LICENSEE shall pay LICENSOR a negotiated fee for all advertising placed by LICENSOR'S marketing department. LICENSOR shall not pay for advertising of an EVENT which has been placed directly by LICENSEE without prior approval by LICENSOR'S marketing department.

H. PHOTOGRAPHS: LICENSOR shall honor requests from working media to and may have photographers photograph portions of the EVENT, subject to reasonable and proper restrictions, unless specifically prohibited by the LICENSEE in advance in writing. LICENSOR reserves the right to use photographs of and references to LICENSEE'S entertainment and activity, subject to artist approval and reasonable and proper restrictions, for promotion of the CONVOCATION CENTER and for archival purposes.

I. BROADCAST: LICENSEE shall not broadcast by television, radio or on the Internet, whether by way of video streaming, web casting or otherwise, any EVENT scheduled to be presented in the CONVOCATION CENTER under the terms of this Agreement without the prior written approval of LICENSOR. LICENSOR reserves all rights and privileges for radio broadcasting, televising, video streaming, web casting, filming, videotaping, sound recording, photographing or any kinds of reproduction of whatever nature originating from CONVOCATION CENTER during the term of this Agreement. Should LICENSOR grant to LICENSEE such privilege, LICENSOR has the right to require payment for the privilege in addition to the License Fee. Such permission must be obtained in writing in advance of EVENT date. LICENSEE agrees that for all closed circuit television events there shall be two projection units in place and tested no less than twenty-four (24) hours before the scheduled EVENT time.

J. MEDIA COVERAGE: Media covering the EVENT shall be admitted to the EVENT with proper credentials which have been approved in advance of the EVENT by LICENSOR and LICENSEE.

8. INSURANCE AND INDEMNIFICATION:

A. INSURANCE: LICENSEE shall, at its own expense, secure and deliver to LICENSOR not less than thirty (30) days prior to the commencement of this Agreement, and shall keep in force at all times during the term of this Agreement, the following:

1. Commercial general liability insurance in a form acceptable to LICENSOR, covering its activities hereunder, including coverage for premises and operations, personal injury/advertising liability, products/completed operations, liability assumed under an insured contract, broad form property damages and independent contractors, in an amount not less than One Million Dollars (\$1,000,000) for bodily injury and One Million Dollars (\$1,000,000) for property damage, or such other amount as LICENSOR shall determine in its sole discretion;

2. Comprehensive automotive bodily injury and property damage insurance in a form acceptable to LICENSOR for business use covering all vehicles operated by LICENSEE, its officers, agents and employees in connection with its activities hereunder, whether owned by LICENSEE, LICENSOR or otherwise, with a combined single limit of not less than One Million Dollars (\$1,000,000) (including an extension of hired and non-owned coverage); and

3. Worker's compensation and employer's liability insurance for LICENSEE'S employees, as follows:

| | |
|--------------------------------------|---------------------------------|
| Worker's compensation (Coverage "A") | Statutory Limits |
| Employer's liability (Coverage "B") | \$100,000 each accident |
| | \$300,000 disease-policy limit |
| | \$100,000 disease-each employee |

4. Umbrella insurance over the coverages required herein in the amount of at least Two Million Dollars (\$2,000,000), or such other amount as LICENSOR shall determine in its sole discretion.

The following shall apply to the insurance policies required in the clauses above:

(i) LICENSOR and its trustees, officers, employees and agents shall be named as additional insureds thereunder. Not less than thirty (30) days prior to the date of the EVENT set forth on Exhibit A, LICENSEE shall deliver to LICENSOR certificates of insurance evidencing the existence thereof, all in such form as LICENSOR may reasonably require. Each such policy or certificate shall contain a valid provision or endorsement stating, "This policy shall not be canceled or materially changed or altered without first giving thirty (30) days' prior written notice" to the Director of the CONVOCATION CENTER. If any of the insurance policies covered by the foregoing certificates of insurance shall expire prior to or during the time of an EVENT, LICENSEE shall deliver to LICENSOR at least thirty (30) days prior to such expiration a certificate of insurance evidencing the renewal of such policy or policies.

(ii) The coverage limits on such policies shall be on a per-occurrence basis only; there shall be no aggregate limit with respect to the aggregate amount of coverage provided thereunder.

(iii) LICENSEE hereby acknowledges that the coverage limits contained in any policy shall in no way limit the liabilities or obligations of LICENSEE under this Agreement, including, without limitation, LICENSEE'S indemnification obligations below.

The terms of all insurance policies referred to in this section shall preclude subrogation claims against LICENSOR and its trustees, officers, affiliates, employees and agents. The insurance must be written by an insurance company licensed to do business in the State of Illinois and have an A.M. Best rating of at least A-VI. If the LICENSEE fails to provide the aforementioned evidence of insurance by the stated date, LICENSOR shall have the right either to obtain the required insurance with the premium to be paid by the LICENSEE or to cancel the EVENT.

B. INDEMNIFICATION: LICENSEE shall indemnify, defend and hold harmless LICENSOR and its trustees, officers, affiliates, employees and agents from and against any and all losses, liabilities, claims, damages and expenses (including reasonable costs of investigation and attorneys' fees) (collectively, the "Losses") arising from (i) LICENSEE'S failure to comply with any and all federal, state, foreign, local and municipal regulations, ordinances, statutes, rules, laws and constitutional provisions (collectively, the "Laws") applicable to LICENSEE'S performance under this Agreement, (ii) any unlawful acts on the part of LICENSEE or its officers, employees, agents or subcontractors, (iii) personal or bodily injury to or death of persons or damage to the property of LICENSOR to the extent caused by the negligent acts, errors or omissions or the willful misconduct of LICENSEE or its officers, employees, agents or subcontractors, or (iv) the material breach or default by LICENSEE or its officers, employees, agents or subcontractors of any provisions of this Agreement.

LICENSEE shall assume, defend, indemnify, protect and hold harmless LICENSOR and its trustees, officers, affiliates, employees and agents against any and all claims, demands, losses, actions or causes of action of whatsoever kind, arising or resulting directly or indirectly from the use, occupancy or licensing of the CONVOCATION CENTER by the LICENSEE, its sub-licensees, contractors, subcontractors, exhibitors, agents, officers, employees or persons attending the EVENT; and without limiting the generality of the foregoing, shall include any claim for any loss or expense arising from

any liability or claim of liability for injuries or damages to persons or property sustained or claimed to have been sustained by anyone by reason of the use of the CONVOCATION CENTER for the EVENT, whether such use was authorized or not or for any claims from anyone for loss or damage to property placed on the CONVOCATION CENTER, except if such claims arise from the gross negligence of LICENSOR.

C. RISK OF LOSS: LICENSEE agrees that all of its property and any property of others brought or permitted to be brought into the CONVOCATION CENTER shall be at the risk of LICENSEE and that LICENSOR shall not be liable to LICENSEE for any loss or damage due to theft, cleaning, steam, electricity, gas, water or rain which may leak or flow from or into any part of the CONVOCATION CENTER, from fire or explosion, or from any other similar or dissimilar cause whatsoever. LICENSEE shall indemnify, defend and hold harmless LICENSOR and its trustees, officers, employees and agents from any claims for loss or damage to property brought into the CONVOCATION CENTER. LICENSEE shall assume all responsibility for any equipment or goods placed in storage on LICENSOR'S property. LICENSOR shall accept delivery of property addressed to LICENSEE only as a service to LICENSEE, and LICENSEE shall indemnify and hold harmless LICENSOR and its trustees, officers, employees and agents for any loss or damage to such property in the receipt, handling, care or custody of such property at any time. LICENSEE further indemnifies LICENSOR and its trustees, officers, employees and agents from any claims or costs related to claims from any third party for loss or damage to property during the time covered by this Agreement, unless caused by the gross negligence of LICENSOR.

9. DEFAULT, TERMINATION AND OTHER REMEDIES:

A. DEFAULT: LICENSEE shall be in default under this Agreement if any of the following occur: (i) LICENSEE fails to pay any amount due hereunder (including, without limitation, the License Fee, deposits, security or the expenses on demand) when the same are required to be paid hereunder or (ii) LICENSEE or any of its officers, employees or agents fails to perform or fulfill any other term, covenant or condition contained in this Agreement or (iii) LICENSEE is adjudicated a bankrupt or adjudged to be insolvent, or a receiver or trustee of LICENSEE'S property and affairs is appointed, or the LICENSEE makes an assignment for the benefit of creditors or files a petition in bankruptcy or insolvency or for the appointment of a receiver, or any execution or attachment is issued against LICENSEE or any of LICENSEE'S property under which any person other than LICENSEE attempts to take or occupy any of LICENSEE'S rights under this Agreement, and the execution or attachment is not set aside, vacated, discharged or bonded within fifteen (15) days after it issues. In the event of such default, this Agreement may at the option of LICENSOR be canceled, whether the term has commenced or any moneys have been prepaid or not, by delivering to LICENSEE notice to that effect, and upon such delivery this License shall cease, but without prejudice to any rights of LICENSOR which had accrued before the cancellation. In the event of such default, LICENSOR shall have the right to collect all license fees and expenses due from LICENSEE from either the sources herein described or as a first lien on all property of the LICENSEE in or upon the CONVOCATION CENTER at the time of any default of any

provisions of this Agreement, and the LICENSEE hereby mortgages or pledges said property of LICENSEE for the purposes of securing the payment of all license fees and other expenses of the EVENT. LICENSOR may take possession of any and all of said property and exercise any remedies provided by law. This remedy is not exclusive and LICENSOR may, at its discretion, pursue any appropriate remedy to recover any or all deficits remaining of the License Fee and expenses due LICENSOR or for any other default. Reference in this Agreement to any particular remedy shall not preclude LICENSOR from any other remedy. LICENSOR'S failure to seek redress for violation of, or to insist upon strict performance of, any covenant or conditions of this Agreement shall not prevent a subsequent act which would have originally constituted a violation from having all the force and effect of an original violation.

B. GOVERNMENTAL LIENS: If any monies become due hereunder from LICENSOR to LICENSEE or any assignee of LICENSEE, and if any payment or transfer thereof is or appears to LICENSOR to be subject to federal or other governmental licensing, withholding or other restrictive regulations, LICENSOR shall not be obligated to pay over or transfer moneys unless and until LICENSOR has been satisfied by LICENSEE that LICENSOR may lawfully pay over or transfer such moneys in compliance with such regulations, and any payments shall be subject to withholding of any such moneys if required under any such regulations.

C. FORCE MAJEURE, DEMOLITION, ALTERATION: LICENSOR and LICENSEE shall be excused from the performance of this Agreement in whole or in part by reason of any of the following causes: In the event the CONVOCATION CENTER or any portion thereof shall be destroyed or damaged by fire or other calamity so as to prevent the use of the CONVOCATION CENTER for the purposes specified herein, or if the CONVOCATION CENTER cannot be so used because of strikes, acts of God, national emergency, operation of law or other causes beyond the control of LICENSOR, then this Agreement shall terminate and LICENSOR is hereby released by LICENSEE from any damage caused thereby. LICENSEE hereby waives any claim against LICENSOR for damages or compensation by reason of such termination except that any unearned portion of the license fee or deposit due hereunder shall abate or be refunded by LICENSOR to LICENSEE.

D. INJUNCTIVE RELIEF: The parties agree and acknowledge that LICENSEE is a unique entity and, therefore, the rights and benefits that shall accrue to LICENSOR by reason of this Agreement are unique and that LICENSOR cannot be adequately compensated in money damages for LICENSEE'S failure to comply with the material obligations of LICENSEE under this Agreement and that therefore LICENSOR shall have the right to seek equitable relief (whether it be injunctive relief, specific performance or otherwise) in the event that LICENSEE violates its obligations herein. In addition to any other remedy available at law, equity or otherwise, LICENSOR shall have the right to seek to enjoin any breach or threatened breach or obtain specific performance of this Agreement by LICENSEE, or both, upon meeting its burden of proof of such breach or threatened breach as required by applicable statute or rule of law.

10. MISCELLANEOUS PROVISIONS

A. ALTERATIONS, ADDENDA AND REPRESENTATIONS: This Agreement and its written addenda and exhibits shall supersede any and all variations, additions, addenda, representations or agreements to the terms of this Agreement. No alterations, amendments or modifications hereof shall be valid unless executed by an instrument in writing by the parties hereto and made a part of this Agreement.

B. AUTHORITY AND JURISDICTION: All matters not authorized expressly by the terms of this Agreement shall be reserved to the discretion of LICENSOR.

C. INDEPENDENT CONTRACTOR: LICENSOR and LICENSEE are acting as independent contractors with respect to all rights and obligations under this Agreement, and this Agreement shall not create a partnership, joint venture or employment relationship between LICENSOR and LICENSEE. Nothing herein contained shall make, or be construed to make, LICENSOR or LICENSEE a partner of one another, nor shall this Agreement be construed to create a partnership or joint venture between and of the parties hereto or referred to herein.

D. GOVERNING LAW: This Agreement shall be deemed to be made, governed by and construed in accordance with the laws of the State of Illinois without giving effect to the conflict of law principles thereof. LICENSOR may without liability refuse to perform any obligations otherwise arising under this Agreement if performance of such obligations would in any way violate or result in conflict on the part of LICENSOR or LICENSEE with applicable federal, state or municipal laws, or be objectionable or contrary to public interests, with all such judgments to be made by LICENSOR in its sole reasonable discretion. LICENSEE shall comply with all legal requirements which arise with respect of the CONVOCATION CENTER and the use and occupation thereof. LICENSEE agrees that every person connected with LICENSEE'S use of the CONVOCATION CENTER shall abide by and conform to all federal, state and municipal laws, rules and regulations and by all rules and regulations as adopted or prescribed by LICENSOR, and that LICENSEE and its employees or agents shall not do nor suffer to be done anything at the CONVOCATION CENTER during the term of this Agreement in violation of any such laws, ordinances, rules or regulations.

E. NONDISCRIMINATION: LICENSEE shall not discriminate against any worker, employee or applicant or any member of the public, because of race, creed, color, religion, national origin, ancestry, age, sex or marital status or mental or physical disability, nor shall otherwise commit an unfair employment practice and shall not illegally discriminate against any such persons relative to admission, services or privileges offered to or enjoyed by the general public. During the performance of this Agreement, LICENSEE shall comply fully with Title VI and Title VII of the Civil Rights Act of 1964, as amended, and all other regulations promulgated thereunder, in addition to all applicable state and local ordinances concerning civil rights.

F. LEGAL FEES: In the event that any legal action is taken under this Agreement, subject to the applicable limitations of the Court of Claims Act and the State Employee Indemnification Act, the prevailing party shall be entitled to have and recover from the non-prevailing party reasonable attorney's fees, cost of suit and other costs reasonably related to enforcement of its rights under this Agreement.

G. FALSE INFORMATION: Unless otherwise stated, the LICENSEE herein named is the real party in interest and is not acting for or on behalf of any undisclosed principals. If it is determined that the LICENSEE is not the real party in interest or has falsified any information relative to this Agreement and EVENT, LICENSOR shall have the right immediately to cancel this EVENT and the LICENSEE shall hold LICENSOR harmless from any expenses or damages arising from such cancellation. LICENSOR shall also be entitled to full license fees and related expense payments in the event of cancellation under the conditions described herein.

H. AUTHORITY TO CONTRACT: Each party hereby represents and warrants to the other party that:

1. It has the full power and authority to enter into this Agreement and perform each of its obligations hereunder;
2. It is legally authorized and has obtained all necessary regulatory approvals for the execution, delivery and performance of this Agreement; and
3. No litigation or pending or threatened claims or litigation exist which do or might adversely affect its ability to perform its obligations hereunder or the rights granted by it to the other party under this Agreement.

I. RETENTION OF DOCUMENTS: LICENSEE shall maintain, for a minimum of three (3) years after the date of final payment or the completion of this agreement, whichever is later, such books and records relating to its performance of this agreement which are necessary to support the amounts charged to LICENSOR under this agreement; all books and records required to be maintained hereunder shall be available for review and audit by the Illinois Auditor General and LICENSOR; and LICENSEE shall cooperate fully with any such audit. Failure to maintain the books and records required by this paragraph shall establish a presumption in favor of LICENSOR for the recovery of any funds paid by LICENSOR hereunder for which the books and records are not available.

J. NONAPPROPRIATION: This agreement is subject to termination and cancellation without penalty in any year in which the Illinois General Assembly fails to make an appropriation to make payments under the terms hereof.

K. SECURITY INTEREST IN LICENSE: LICENSEE shall not encumber, hypothecate or otherwise use as security its interests in this Agreement for any purpose whatsoever without the express written consent of LICENSOR.

L. SEVERABILITY: In the EVENT any of the provisions contained herein shall for any reason be held to be invalid, illegal or unenforceable, such invalidity, illegality or unenforceability shall not affect any other provisions contained herein.

M. SUCCESSORS AND ASSIGNMENT: This Agreement shall not be assigned, transferred or otherwise encumbered without express written approval of LICENSOR. This Agreement shall be binding upon, and shall inure to, the benefit of the successors and assigns of LICENSOR, and to such successors and assigns of LICENSEE as are permitted to succeed to the LICENSEE'S right upon and subject to the terms hereof.

N. WAIVER: The failure of any party to enforce any of the provisions of this Agreement, or any rights with respect hereto, or the failure to exercise any election provided for herein, shall in no way be considered a waiver of such provisions, rights or elections, or in any way affect the validity of this Agreement. The failure of any party to enforce any of such provisions, rights or elections shall not prejudice such party from later enforcing or exercising the same or any other provisions, rights or elections which it may have under this Agreement.

O. SMOKE FREE CAMPUS ACT: Smoke Free Campus Act (Public Act 098-0985), smoking is prohibited on all Campus Property. Campus Property is defined as property that is owned, leased, occupied or otherwise controlled by Northern Illinois University, both indoors and outdoors and in university-owned vehicles. The advertising, sale, or free sampling of tobacco products is also prohibited on campus property.

IN WITNESS WHEREOF, THE PARTIES HERETO HAVE CAUSED THIS LICENSE AGREEMENT TO BE EXECUTED AS OF THE DAY AND YEAR FIRST ABOVE WRITTEN.

LICENSOR

Board of Trustees of Northern Illinois University

By: _____

Name: _____

Title: _____

Date: _____

LICENSEE

Burlington High School – Central 301.

By: _____

Name: _____

Title: _____

Date: _____

EXHIBIT A

LICENSEE is granted use of the following areas of the CONVOCATION CENTER on the dates and hours as specified:

AREA(S) OF CONVOCATION CENTER:

Arena

Auxiliary Gym

Multi-Purpose Room

Production Office (170D)

Locker Rooms

MOVE-IN DATE(S) AND TIME(S):

May 14, 2027, Time TBD

May 26, 2028, Time TBD

May 25, 2029, Time TBD

May 24, 2030, Time TBD

MOVE-OUT DATE(S) AND TIME(S):

May 14, 2027

May 26, 2028

May 25, 2029

May 24, 2030

Immediately following event

EVENT DATE(S):

May 14, 2027

May 26, 2028

May 25, 2029

May 24, 2030

EVENT TIME(S):

7:00 pm

DOORS OPEN TIME:

6:00 pm

REHEARSAL

TBD, 2027, 2028, 2029, 2030

EXHIBIT B

LICENSE FEES

1. PAYMENT OF LICENSE FEE: LICENSEE agrees to pay to LICENSOR as license for the aforementioned space and EVENT covered under this Agreement the sum of:

\$3,900.00 Flat Fee for 2027
\$3,900.00 Flat Fee for 2028
\$4,000.00 Flat Fee for 2029
\$4,100.00 Flat Fee for 2030

- *Rehearsal charge of \$250 each year*

2. PAYMENT OF BOX OFFICE FEE: LICENSEE agrees to pay to LICENSOR as fee for Box Office the sum of:

All ceremonies must use tickets

Ticket printing costs:
2027-2030: \$.20/ticket

3. PAYMENT OF LABOR, EQUIPMENT AND SERVICES: LICENSEE agrees to pay to LICENSOR the following costs for all Labor, Equipment and Services:

2027- \$7,250.00
2028- \$7,500.00
2029- \$8,000.00
2030- \$8,250.00

4. PAYMENT FOR ANY ADDITIONAL COSTS: LICENSEE agrees to pay to LICENSOR the following add-on costs:

\$2,500.00 (Estimated each year for AV Production; LICENSEE will pay actual costs.)

Catering Costs: LICENSEE will pay actual

5. DEPOSIT: NA

OTHER SECURITY REQUIRED:

6. CREDIT CARD FEE: NA

7. COMPLIMENTARY TICKETS: NA

8. VENDOR FEE: LICENSEE will be charged for any Vendor that wishes to sell flowers, souvenirs, etc. at a flat rate \$150 per vendor.

9. CASH ADVANCE REQUEST: NA

10. SETTLEMENT/PAYMENT METHODS: NA

11. DECORATOR FEE: NA

MEMORANDUM

FROM: Stephen Buchs, Director of Curriculum 9-12 and College Partnerships

TO: Board of Education & Dr. Griff Powell and Dr. Kyle Schumacher, Interim
-Superintendents

CC: Brett Binding, Amber Ballard, Donna Gibbons, Ryan Robinson, Ryan Dalen, Kelly
Greene

DATE: August 11, 2025

RE: Veterinarian Affiliation Agreements

As part of the National Association of Veterinary Technicians in America (NAVTA) program requirements for students to obtain their Veterinarian Assistant certificate, students are required to complete 100 hours of externships. We are currently working with many different animal clinics to seek partnerships for these opportunities for our students. This agreement ensures that students receive practical experiences that meet educational standards, and ensure an appropriate learning environment away from the students' school that matches the career focus. I am seeking approval for the following sites for the SY25-26. We have worked with four of these locations in the past and have one new location.

Anderson Humane Low Cost Vet Care
Dundee Animal Hospital (East Dundee)
Red Barn Animal Hospital of Gilberts
Healthy Paws Animal Hospital
Tails Humane Society
Elgin Animal Clinic
Spring Hill Veterinary Clinic



Pet Vet Animal Clinic and Mobile Practice
Animal Care Clinic of Pingree Grove
Autumn Green Animal Hospital
Loyal companions Animal Hospital
Dundee Animal Hospital (Elgin)
Animal Clinic of South Elgin
Army Trail Animal Hospital LLC
Companion Animal Specialty and Emergency
Animal Medical Clinic of Saint Charles
Meadow View Veterinary Clinic

New Agreement:

Red barn Animal Hospital of Hampshire

Standard Affiliation Agreement

Dear Tails Humane Society

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

Tails Humane Society
for Student Veterinary Assistant Externship Experience

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Tails Humane Society (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Tails Humane Society facility at 2250 Barber Greene Road, DeKalb, IL 60115 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Tail Humane Society
2250 Barber Greene Road
DeKalb, IL 60115

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Tails Humane Society

Board of Education,
Central Community Unit School District 301

Signature: Michelle Groeper

Signature: _____

Printed Name: Michelle Groeper

Printed Name: _____

Title: Executive Director

Title: _____

Date: 7/28/25

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Spring Hill Veterinary Clinic

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND
Spring Hill Veterinary Clinic
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Spring Hill Veterinary Clinic (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Spring Hill Veterinary Clinic facility at 25 N Western Ave, Carpentersville, IL 60110 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Spring Hill Veterinary Clinic
25 N Western Ave
Carpentersville, IL 60110

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Spring Hill Veterinary Clinic

Board of Education,
Central Community Unit School District 301

Signature: Erin Goelitz

Signature: _____

Printed Name: Erin Goelitz

Printed Name: _____

Title: Veterinarian/Owner

Title: _____

Date: 08/04/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Red Barn Animal Hospital of Hampshire

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Red Barn Animal Hospital of Hampshire
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Red Barn Animal Hospital of Hampshire (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Red Barn Animal Hospital of Hampshire facility at 126 Park St, Hampshire, IL 60140 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

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2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

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- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
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5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

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possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

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The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

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(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

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D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Red Barn Animal Hospital
of Hampshire
126 Park St.
Hampshire, IL 60140

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility: Red Barn Animal Hospital of Hampshire
Board of Education, Central Community Unit School District 301

Signature: Diana Stoll

Signature: _____

Printed Name: Diana Stoll

Printed Name: _____

Title: Practice Manager

Title: _____

Date: August 4, 2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Red Barn Animal Hospital of Gilberts

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Red Barn Animal Hospital of Gilberts
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Red Barn Animal Hospital of Gilberts (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Red Barn Animal Hospital of Gilberts facility at 20 Center Dr., Gilberts, IL 60136 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Red Barn Animal Hospital
of Gilberts
20 Center Dr.
Gilberts, IL 60136

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Red Barn Animal Hospital of Gilberts

Board of Education,
Central Community Unit School District 301

Signature: Diana Stoll

Signature: _____

Printed Name: Diana Stoll

Printed Name: _____

Title: Practice Manager

Title: _____

Date: August 4, 2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Pet Vet Animal Clinic & Mobile Practice

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND
Pet Vet Animal Clinic & Mobile Practice
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Pet Vet Animal Clinic & Mobile Practice (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Pet Vet Animal Clinic & Mobile Practice facility at 11901 North St, Huntley, IL 60142 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

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- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Pet Vet Animal Clinic &
Mobile Practice
11901 North St.
Huntley, IL 60142

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Pet Vet Animal Clinic & Mobile Practice

Board of Education,
Central Community Unit School District 301

Signature: Karen L Larsen

Signature: _____

Printed Name: Karen L Larsen

Printed Name: _____

Title: Practice Manager

Title: _____

Date: 7/29/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Loyal Companions Animal Hospital

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Loyal Companions Animal Hospital
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Loyal Companions Animal Hospital (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Loyal Companions Animal Hospital facility at 2312 W Main St., St. Charles, IL 60175 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Loyal Companions Animal
Hospital
2312 W Main St.
St. Charles, IL 60175

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Loyal Companions Animal Hospital

Board of Education,
Central Community Unit School District 301

Signature: Siri Peterson

Signature: _____

Printed Name: Siri Peterson

Printed Name: _____

Title: Practice Manager

Title: _____

Date: 7/29/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Healthy Paws Animal Hospital

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND
Healthy Paws Animal Hospital
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Healthy Paws Animal Hospital (“Facility”), the Board of Education of Central Community Unit School District No. 301 (“District”), and Northern Kane Region 100 (collectively the “Parties”).

WHEREAS, the District desires to utilize Healthy Paws Animal Hospital facility at 4581 Princeton Ln #101, Lake in the Hills, IL 60156 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Healthy Paws Animal
Hospital
4581 Princeton Ln #101
Lake in the Hills, IL 60156

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Healthy Paws Animal Hospital

Board of Education,
Central Community Unit School District 301

Signature: Karen Burgess

Signature: _____

Printed Name: Karen Burgess

Printed Name: _____

Title: Owner

Title: _____

Date: 8/9/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Elgin Animal Clinic

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND
Elgin Animal Clinic
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Elgin Animal Clinic (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Elgin Animal Clinic facility at 1380 E Chicago St, Elgin, IL 60120 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Elgin Animal Clinic
1380 E Chicago St.
Elgin, IL 60120

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Elgin Animal Clinic

Board of Education,
Central Community Unit School District 301

Signature: Lakhwinder Dhillon

Signature: _____

Printed Name: Lakhwinder Dhillon

Printed Name: _____

Title: Veterinarian

Title: _____

Date: 7/29/25

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Dundee Animal Hospital (Dundee)

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Dundee Animal Hospital (Dundee)
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Dundee Animal Hospital (Dundee) (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Dundee Animal Hospital (Dundee) facility at 199 Penny Ave, East Dundee, IL 60118 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

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- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

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6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

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possession to the District or, at the District's request, directly to the student's home school district if other than the District.

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The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Dundee Animal Hospital
(Dundee)
199 Penny Ave
East Dundee, IL 60118

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Dundee Animal Hospital (Dundee)

Board of Education,
Central Community Unit School District 301

Signature: _____

Signature: _____

Printed Name: Dena Chiddister

Printed Name: _____

Title: Practice Manager

Title: _____

Date: 8/4/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301_____

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Dundee Animal Hospital - Elgin

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Dundee Animal Hospital of Elgin
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Dundee Animal Hospital of Elgin (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Dundee Animal Hospital of Elgin facility at 11N250 Gale St, Elgin, IL 60123 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Dundee Animal Hospital of
Elgin
11N250 Gale St.
Elgin, IL 60123

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Dundee Animal Hospital of Elgin

Board of Education,
Central Community Unit School District 301

Signature: Tawnya Wesemann

Signature: _____

Printed Name: Tawnya Wesemann

Printed Name: _____

Title: Technician Team Leader

Title: _____

Date: 07/29/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Companion Animal Specialty & Emergency Hospital

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110**

**AND
Companion Animal Specialty & Emergency Hospital
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Companion Animal Specialty & Emergency Hospital (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Companion Animal Specialty & Emergency Hospital facility at 1095 Pingree Rd Ste 120, Crystal Lake, IL 60014 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Companion Animal Specialty &
Emergency Hospital
1095 Pingree Rd. Ste 120
Crystal Lake, IL 60014

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Companion Animal Specialty & Emergency Hospital

Board of Education,
Central Community Unit School District 301

Signature: Jennifer Fink

Signature: _____

Printed Name: Jennifer Fink

Printed Name: _____

Title: Hospital Manager

Title: _____

Date: 07/29/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Bartlett Animal Hospital

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND
Bartlett Animal Hospital
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Bartlett Animal Hospital (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Bartlett Animal Hospital facility at 1251 Humbracht Cir STE E, Bartlett, IL 60103 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Bartlett Animal Hospital
1251 Humbracht Cir STE E
Bartlett, IL 60103

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Bartlett Animal Hospital

Board of Education,
Central Community Unit School District 301

Signature: Stacy Potter

Signature: _____

Printed Name: Stacy Potter

Printed Name: _____

Title: Manager

Title: _____

Date: 7/31/25

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Autumn Green Animal Hospital

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Autumn Green Animal Hospital
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Autumn Green Animal Hospital (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Autumn Green Animal Hospital facility at 39W124 Keslinger Rd, Geneva, IL 60134 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Autumn Green Animal
Hospital
39W124 Keslinger Rd
Geneva, IL 60134

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Autumn Green Animal Hospital

Board of Education,
Central Community Unit School District 301

Signature: Dr. Vivian Grant

Signature: _____

Printed Name: Dr. Vivian Grant

Printed Name: _____

Title: member

Title: _____

Date: 8/4/25

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301_____

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Army Trail Animal Hospital LLC

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Army Trail Animal Hospital LLC
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Army Trail Animal Hospital LLC (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Army Trail Animal Hospital LLC facility at 1095 W Army Trail Rd, Bartlett, IL 60103 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Army Trail Animal Hospital
LLC
1095 W Army Trail Rd
Bartlett, IL 60103

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Army Trail Animal Hospital LLC

Board of Education,
Central Community Unit School District 301

Signature: Lori Diehl

Signature: _____

Printed Name: Lori Diehl

Printed Name: _____

Title: Office Manager

Title: _____

Date: 7/30/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Animal Medical Clinic of St. Charles

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Animal Medical Clinic of St. Charles
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Animal Medical Clinic of St. Charles (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Animal Medical Clinic of St. Charles facility at 525 S Tyler Rd #F, St. Charles, IL 60174 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

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6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Animal-Medical Clinic of St.
Charles
525 S Tyler Rd #F
St. Charles, IL 60174

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Animal Medical Clinic of St. Charles

Board of Education,
Central Community Unit School District 301

Signature: Megan McGregor

Signature: _____

Printed Name: Megan McGregor

Printed Name: _____

Title: Hospital Manager

Title: _____

Date: 7/30/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Animal Clinic of South Elgin

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND
Animal Clinic of South Elgin
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Animal Clinic of South Elgin (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Animal Clinic of South Elgin facility at 896 N La Fox St., South Elgin, IL 60177 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

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- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

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1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

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5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Animal Clinic of South Elgin
896 N La Fox St
South Elgin, IL 60177

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Animal Clinic of South Elgin

Board of Education,
Central Community Unit School District 301

Signature: Jean Churan

Signature: _____

Printed Name: Jean Churan

Printed Name: _____

Title: DVM

Title: _____

Date: 08/04/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Animal Care Clinic of Pingree Grove

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Animal Care Clinic of Pingree Grove
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Animal Care Clinic of Pingree Grove (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Animal Care Clinic of Pingree Grove facility at 2401 US-20, Pingree Grove, IL 60140 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Animal Care Clinic of
Pingree Grove
2401 US-20
Pingree Grove, IL 60140

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Animal Care Clinic of Pingree Grove

Board of Education,
Central Community Unit School District 301

Signature: Kimberly Abbate

Signature: _____

Printed Name: Kimberly Abbate

Printed Name: _____

Title: Hospital Manager

Title: _____

Date: 7/28/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Anderson Humane Veterinary Clinic

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND**

**Anderson Humane Veterinary Clinic
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Anderson Humane Veterinary Clinic (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Anderson Humane Veterinary Clinic facility at 309 S Randall Rd., South Elgin, IL 60177 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Anderson Humane
Veterinary Clinic
309 S Randall Rd.
South Elgin, IL 60177

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Anderson Humane Veterinary Clinic

Board of Education,
Central Community Unit School District 301

Signature: Tiffany M Janda

Signature: _____

Printed Name: Tiffany M Janda

Printed Name: _____

Title: Clinic Manager

Title: _____

Date: 07/30/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

Standard Affiliation Agreement

Dear Meadow View Veterinary Clinic

Thank you for allowing our students to complete their required externship hours at your facility.

Prior to our students beginning their externship visits at your facility, we will need this Affiliation Agreement completed. Please review this Affiliation Agreement document and place an electronic signature in the designated area. Once all required signatures are obtained, an electronic copy of this document will be shared with you for your records.

Please reach out with any questions or concerns you have regarding this document.

Thank you,
Amber Ballard, CVT
Program Coordinator
Phone: 847-464-6030
amber.ballard@central301.net

Dr. Todd Stirn
Work Based Learning Specialist II
Phone: 224-990-7093
efe.stirn@central301.net

**AFFILIATION AGREEMENT
BETWEEN
Northern Kane County Region 110
AND
Meadow View Veterinary Clinic
for Student Veterinary Assistant Externship Experience**

THIS AGREEMENT (“Agreement”) is entered into this 28th Day, of July 2025, by and between Meadow View Veterinary Clinic (“**Facility**”), the Board of Education of Central Community Unit School District No. 301 (“**District**”), and Northern Kane Region 100 (collectively the “**Parties**”).

WHEREAS, the District desires to utilize Meadow View Veterinary Clinic facility at 590 Lark St., Geneva, IL 60134 for the purpose of providing veterinary assistant practical learning and clinical experiences (see Exhibit A for program-specific requirements) to the high school students of the District and the high school students of the other school districts in Northern Kane Region 110 (an intergovernmental agreement between Community Unit School District 300, Community Unit School District 301, Community Unit School District 303, and Unit School District U-46); and

WHEREAS, the Facility desires to provide such practical learning and clinical experiences to students, both as a community service and as ongoing education for its own staff.

NOW, THEREFORE, it is understood and agreed upon by the parties hereto as follows:

A. SCHOOL RESPONSIBILITIES:

1. Provision of foundational curriculum to students. The District shall have the total responsibility for planning and determining the adequacy of the educational experience of students in theoretical background, basic skill, professional ethics, attitude and behavior, and will assign to the Facility only those students who have satisfactorily completed the prerequisite didactic portion of the District’s curriculum.

2. Liability insurance. The Facility and each participating school district shall provide its own General Liability insurance, including but not limited to property loss and damage claims, claims for bodily injury or death, and other civil actions, claims or suits, including the defenses thereof, which may be made against the insured party. No provision of insurance or self-insurance by the District, Northern Kane County Region 110, or other participating school district shall modify, amend, or in any other way remove the immunities of public employees and local governmental entities granted in the *Local Governmental and Governmental Employees Tort Immunity Act*, 745 ILCS 10/1 et seq.

3. Designation of liaison to Facility; communications relating to clinical placements. The District and/or Northern Kane County Region 110 will designate a faculty or other professional staff member to coordinate and act as its liaison to the Facility. The assignments to be undertaken by the students participating in the educational program

will be mutually arranged and a regular exchange of information will be maintained by on-site visits when practical and by letter, email or telephone in other instances.

The District shall notify the Facility in writing of any change or proposed change of the person(s) responsible for coordinating clinical placements with the Facility.

4. School notices to students. The District shall notify each student prior to his or her arrival at the Facility that he/she is required to:

- (a) Follow the administrative policies, standards, and practices of the Facility.
- (b) Obtain medical care at his or her own expense for any injuries or illnesses sustained as a direct or indirect result of his/her affiliation with the Facility.
- (c) Provide his/her own transportation.
- (d) Report to the Facility on time and follow all established regulations during the regularly scheduled operating hours of the Facility.
- (e) Conform to the standards and practices established by the District while functioning at the Facility.
- (f) Obtain prior written approval of the Facility and the District before publishing any material relating to the clinical learning experience.
- (g) Meet the personal, ethical, and professional standards required of employees of the Facility and that are consistent with the applicable professional Code of Ethics and the applicable standards of relevant accrediting or regulatory bodies.
- (h) Notify his or her home school district of any medical conditions which may affect participation at the Facility.

B. FACILITY RESPONSIBILITIES:

1. Provision of facilities for supervised experiences. Subject to the provisions of Section C.2 of this Agreement, the Facility agrees to make the appropriate facilities available to the District in order for the District to provide supervised clinical experiences to students. Such facilities shall include a safe working environment conducive to the learning process of the students as intended by the terms of this Agreement and conforming to customary Facility procedures. Students shall be supervised by qualified Facility staff at all times.

2. Facility rules applicable to students during clinical assignments. Students are to remain subject to the authority, policies, and regulations imposed by the District and, during periods of clinical assignment, students will be subject to all rules and regulations of the Facility and imposed by the Facility on its employees and agents with regard to

following the administrative policies, standards, and practices of the Facility. The Facility must notify the District in advance of any specific requirements for the Facility, such as dress code, uniforms, or other workplace rules.

3. Emergency treatment of students. In case of emergency at a non-hospital site, standard procedure will be followed. The District may provide the Facility with specific protocols to be followed for emergency treatment of an individual student, if necessary. The Facility shall immediately notify the District liaison of any student injury or other emergency involving students. It is the student's responsibility to bear the cost of the emergency treatment.

4. Designation of liaison to the District; communications relating to placements. The Facility shall designate a liaison responsible for coordinating the placements. That person shall maintain contact with the District's designated liaison person to assure mutual participation in and surveillance of the program. The Facility shall notify the District in writing of any change or proposed change of the person(s) responsible for coordinating the placements.

5. School Tour of Facility. The Facility shall, on reasonable request, permit a tour of its clinical facilities and services available and other items pertaining to clinical learning experiences, by representatives of the District and agencies charged with responsibility for approval of the facilities or accreditation of the curriculum.

6. Provision of Relevant Facility policies. The Facility shall provide the student(s) and the District the Facility's administrative policies, standards, and practices with which the students must comply relevant to the placement.

7. Facility Transportation and Use of Mobile Units. The Facility must obtain advance written permission from the District for transportation of students by the Facility or its staff or for student participation in any mobile veterinary unit. Such permission must be signed by the Facility staff member, a District representative, the student, and the student's parent or guardian. At no time will one student be alone with any one Facility employee.

8. FERPA Compliance. The Facility shall comply with the applicable provisions of the *Family Educational Rights and Privacy Act of 1974*, 20 USC 1232 (g), otherwise known as FERPA or the Buckley Amendment, as well as the *Illinois School Student Records Act*, 105 ILCS 10/1 et seq., and shall take all measures necessary to ensure the confidentiality of any and all information in its possession regarding the District's students who train at the Facility pursuant to this agreement. The Facility shall have access to student record information (records which alone, or with other records, personally identify a student) only to the extent necessary for student participation in the program. The Facility will maintain such records as confidential records and shall not disclose them to third parties except pursuant to court order, in the case of an emergency, or with consent of the District or student and parent/guardian. At the conclusion of a student's participation in the program, the Facility shall return all student records in its

possession to the District or, at the District's request, directly to the student's home school district if other than the District.

C. OTHER RESPONSIBILITIES:

1. **Compliance with client/patient privacy laws.** The District agrees to abide by and require that its participating faculty and students abide by all applicable state and federal laws, rules and regulations regarding client/patient privacy, including but not limited to, laws relating to consumer financial information. Students shall be required to comply with the Facility's policies and procedures regarding the confidentiality of client/patient information and the use of all such information. The Facility will notify the District and students of the foregoing laws and policies applicable to the Facility program. The Parties shall notify one another if there are known breaches of this confidentiality.

The District will advise students that dissemination or public posting of any client/patient information through social media or other means will be prohibited.

2. **Determination of instructional period.** The course of instruction will cover a period of time as arranged between the District and the Facility. The starting clinical date will begin on July 1st, 2025 with the last clinical on August 31st, 2026 .

3. **Determination of number of participating students.** The number of students eligible to participate in the clinical placement will be determined, and may be changed, by mutual agreement of the Parties. For certain clinical programs, IDPH regulations may limit the maximum number of students per sessions. Notwithstanding the foregoing, the Facility and the District agree and understand that the availability of clinical placements at the Facility during the term of this Agreement may periodically be affected by a variety of factors. In such event, the Facility may reduce the number of students eligible to participate in the clinical education program with prior notice to the District and adequate time for the District to reassign the student(s) to another clinical site. The Facility agrees further to accommodate students of the District who are similarly displaced from other clinical affiliates of the District to the extent that clinical space is available at the Facility.

4. **Evaluation of students' experiences.** Evaluation of the clinical learning experiences of the students will be accomplished jointly by the appropriate school district staff. The Parties agree that a clinical supervisor must be present throughout the entire time the students are present. Each student must be paired with a Facility staff member and supervised at all times. These Facility staff members will complete evaluations of the student she or he supervises, including but not limited to, evaluating the student's professionalism and personal attributes related to performance of outline skills. Specifically, the supervising Certified Veterinary Technician or Licensed Veterinarian must sign off on all performed skills listed on the Evaluation Form attached to this Agreement as Exhibit A. The Facility staff and the District's externship coordinator will communicate on a regular basis for the purpose of reviewing and evaluating current clinical experiences offered to students.

5. Removal of students.

(a) The District has the right to remove a student from a clinical education program. The District shall notify the Facility of such removal in writing.

(b) The Facility may immediately remove any student participating in a clinical education program from the Facility's premises for behavior that the Facility deems to be an immediate threat to the health or welfare of its clients/patients, staff members, visitors, or operations. In such an event, the Facility shall notify the relevant District staff member in writing of its actions and the reasons for its actions as soon as practicable. If the Facility desires to remove a student for any other reason, it shall notify the relevant District staff member in writing of the reasons for the removal and shall consult with that individual before removing the student.

D. TERM OF AGREEMENT:

The term of this Agreement shall be for one (1) year, to commence on 1st Day of July, 2025 . Either party may terminate this Agreement at any time, with or without cause, upon ninety (90) days prior written notice to the other party. In the event that this Agreement is not renewed for a subsequent term, students who are participating in the clinical learning experiences at the time of termination shall be allowed to complete such assignment under the terms and conditions herein set forth.

E. ADDITIONAL TERMS:

1. **Stipulations as to liability.** Subject to applicable state law, neither party to this Agreement shall be legally liable for the consequences, whether bodily injury or property damage, occasioned by an act, omission, or neglect chargeable to the other party. Where Worker's Compensation or other obligation for payment of benefits may arise, this Agreement shall neither enlarge nor diminish such obligation.

2. **Criminal Background Screening:** Facility staff who come to the District schools to work with students will need to comply with the District's onsite security protocols, including sex offender and criminal background screening.

3. **Assignment of Agreement.** This Agreement may not be assigned without the prior written consent of the other party, which will not be unreasonably withheld.

4. **Entire Agreement.** This Agreement supersedes any and all other agreements, either oral or written, between the parties hereto with respect to the subject matter hereof. No changes or modifications of this Agreement shall be valid unless the same are in writing and signed by the parties. No waiver of any provisions of this Agreement shall be valid unless in writing and signed by the parties.

5. **Severability.** If any provision of this Agreement or the application thereof to any person or situation shall, to any extent, be held invalid or unenforceable, the remainder of this Agreement, and the application of such provision to persons or situations other than those to which it shall have been held invalid or unenforceable, shall not be affected thereby, but shall continue valid and enforceable to the fullest extent permitted by law.

6. **Employment Status.** No assigned student or District faculty member under this Agreement shall in any way be considered an employee or agent of the Facility nor shall any such student or faculty member be entitled to any compensation, fringe benefits, Worker's Compensation, disability benefits, or other rights normally afforded to employees of the Facility. The students shall not at any time during their clinical placement replace or substitute for any employee at the Facility or perform any of the duties normally performed by an employee of the Facility, except as such duties are part of the students' training or learning experience. Upon the completion of the clinical placement, the Facility may offer students employment with the Facility.

7. **Notice to Parties.** Any notice, demand, or request required or permitted to be given under the provisions of this Agreement shall be in writing and shall be deemed to have been duly given under the earlier of (a) the date actually received by the party in question, by whatever means and however addressed, or (b) the date sent by facsimile (receipt confirmed), or on the date of personal delivery, if delivered by hand, or on the date signed for if sent by an overnight delivery service, to the following addresses, or to such other address as either party may request, in the case of the District, by notifying the Facility, and in the case of the Facility, by notifying the District, or to such other addresses as the parties may specify in writing from time to time:

If to the Facility:
Meadow-View Veterinary
Clinic
590 Lark St.
Geneva, IL 60134

If to the District:
275 South Street
Burlington IL, 60109
Program in Career and Technical Education
Attention: Career and Technical Education Department
Facsimile: (847)464-6021

8. **Governing Law.** This Agreement shall be construed and enforced in accordance with the laws of the State of Illinois, without regard to the conflict of laws provisions thereof.

9. **Counterparts.** This Agreement may be executed in one or more counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same instrument.

10. **No Third-Party Beneficiaries.** This Agreement shall inure exclusively to the benefit of and be binding upon the parties hereto and their respective successors, assigns, executors and legal representatives. Nothing in this Agreement, expressed or implied, is intended to confer on any person other than the parties hereto or their respective successors and assigns any rights, remedies, obligations or liabilities under or by reason of this Agreement.

11. **Agreement binding on parties successors and assigns.** This Agreement shall be binding upon the District and the Facility, their successors, employees, agents and assigns, during the initial term of this Agreement and any extensions thereof.

12. **Captions for reference only.** The captions contained in this Agreement are for convenience of reference only and do not define, describe, or limit the scope or intent of this Agreement or any of its provisions.

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed in their respective corporate names by duly authorized officers, all on the day and year first set forth above.

For and on behalf of:

Veterinary Facility:
Meadow View Veterinary Clinic

Board of Education,
Central Community Unit School District 301

Signature: Laurie Fitzgerald

Signature: _____

Printed Name: Laurie Fitzgerald

Printed Name: _____

Title: Asst Hosp Mgr

Title: _____

Date: 08/15/2025

Date: _____

Northern Kane Region 110
By Its Administrative District
District __CUSD 301__

1199751.1

Signature: _____

Printed Name: _____

Title: _____

Date: _____

EXHIBIT A
STUDENT EVALUATION FORM

[TO BE ATTACHED]

**RESOLUTION TO ADOPT ANNUAL BUDGET AND
APPROPRIATION ORDINANCE FOR FISCAL YEAR
JULY 1, 2025 AND ENDING JUNE 30, 2026**

WHEREAS, pursuant to the direction of the Board of Education of Central Community Unit School District 301, Kane and DeKalb Counties, Illinois, the Superintendent, the staff, and the Budget Committee is prepared to tender a Budget and Appropriation Ordinance for the school year beginning July 1, 2025; and

WHEREAS, said Tentative Budget and Appropriation Ordinance is now before the Board for its consideration and action.

NOW THEREFORE, BE IT RESOLVED, that the Board of Education of Central Community Unit School District 301, Kane and DeKalb Counties, Illinois, adopts the Tentative Budget and Appropriation Ordinance.

BE IT RESOLVED by the Board of Education that the Tentative Budget and Appropriation Ordinance for the said Central Community Unit School District 301 for the year beginning July 1, 2025 and ending June 30, 2026 was filed and conveniently available for public inspection from and after 8:00 o'clock a.m., Daylight Savings time on August 15, 2025 at the Administrative office located at 275 South Street, Burlington, Illinois, until the time of hearing is hereinafter set out.

BE IT FURTHER RESOLVED that a public hearing on said Budget and Appropriation Ordinance be held at 5:45 o'clock p.m. Central Daylight Savings Time on the 15th day of September, 2025 at the Administrative office located at 275 South Street, Burlington, Illinois in the said Central Community Unit School District 301.

BE IT FURTHER RESOLVED that Notice of said hearing on said Budget and Appropriation Ordinance be by publication of such notice in the Daily Herald, a daily secular newspaper published in Elgin, Illinois, said publication to be at least 30 days prior to the said public hearing.

Ryan Wasson, President

Scott Mrkvicka, Secretary

Date

Date

MEMORANDUM

TO: Dr. Griff Powell, Kyle Schumacher, Co-Superintendent, Board of Education
FROM: Daina Pflug, Business Manager
DATE: August 18, 2025
RE: FY26 Northern Kane County Regional Vocational System Final Budget

Attached is the final budget for FY26. There were a few minor budget revisions made from the tentative budget. The unaudited beginning fund balance is still recorded in this budget and may change slightly once the audit is complete. Current cash reserves from the Treasurer's report dated June 30, 2025 total \$853,472.69.

Budget Highlights:

1. The budget is balanced with revenues and expenditures.
2. Revenues for the Federal Perkins V Grant increased from \$598,878 to \$622,171 for FY26. The CTEI Grant increased in revenues to \$2,144,384 from the tentative total of \$2,034,723.
3. All expenditures will be covered by a combination of these grants and local funds from all participating schools.

Formal approval of the final FY26 budget is being requested tonight, August 18, 2025. Thirty day notice of a public budget hearing was published on July 18, 2025 in the Daily Herald, Elgin, Illinois and budget hearing was held just before this regular board meeting.



CENTRAL
UNIT SCHOOL DISTRICT 301



Northern Kane County
REGION 110
EDUCATION THAT WORKS

Northern Kane County Regional Vocational System FY26 Final Budget

Daina Pflug, Business Manager
August 18, 2025



Northern Kane County Regional Vocational System

The Northern Kane County Regional Vocational System (EFE 110) is a collaborative organization consisting of four Kane County unit school districts:

- ❖ School District U-46
- ❖ Community Unit School District 300
- ❖ Central Community Unit School District 301
- ❖ Community Unit School District 303

The goal of the System is the planning, evaluation and improvement of career and technical education programs throughout the region.



319



Flow of Funds



ILLINOIS
STATE BOARD OF
EDUCATION



Northern Kane County
REGION 110
EDUCATION THAT WORKS



District
300



DISTRICT 300

District
301




CENTRAL
UNIT SCHOOL DISTRICT 301

District
303



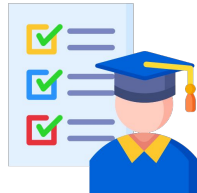
District
U-46



U46
ACADEMIC
SUCCESS
FOR ALL

CTE Programs Offered

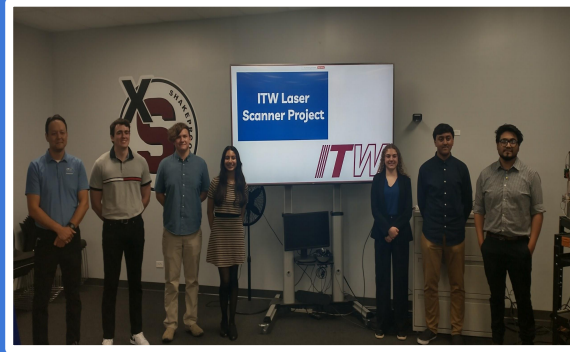
Accounting
Agricultural Science
Automotive Service
Business Administration
Computer Networking
Computer Programming
Cyber Security
Culinary Arts
Drafting
Education
Electrical Technology
Entrepreneurship



Fashion
Graphic Arts
Health Services &
Nursing
Marketing
Precision Manufacturing
STEM Engineering
Video Production
Web Page Design
Welding
Woods Production
Cabinet Making



Summer Internship Opportunities



- ★ Automotive
- ★ Education
- ★ Engineering
- ★ Healthcare - Pharmacy Technician
- ★ Medical Rotation
- ★ Manufacturing ³²²
- ★ Video Production

Regional Programs



Precision Manufacturing

South Elgin High School
District U-46
Hampshire High School
District 300



Welding

Elgin High School
District U-46
Hampshire High School
District 300



Automotive

South Elgin High School
District U-46



Educator

Hampshire High School
District 300



Agriculture/Veterinary Assistant

Central High School
District 301



Primary Grant Funding Sources

| | | | |
|---------------------|---------|----------|--|
| Perkins V Grant | Federal | Annual | Based on the number of students enrolled within each school district combined with number of students in poverty within that district. |
| CTE Incentive Grant | State | Annual | Based on the number of CTE programs being offered within a district and the number of students that successfully complete one or more of those programs. |
| STAMP Grant | Local | One-Time | Scaling Transformative Advanced Manufacturing Pathways |

FY26 Revenues/Expenditures

| | |
|---|---------------------|
| Unaudited Beginning Balance 7/1/2025 | \$ 853,473 |
| Revenues: | |
| CTEI Grant | \$2,144,384 |
| Perkins V Grant | \$ 622,171 |
| STAMP Grant | \$ 22,000 |
| Local Funds | <u>\$ 23,000</u> |
| Total Revenues | \$ 2,811,555 |
| Expenditures: | |
| CTEI Grant | \$2,144,384 |
| Perkins V Grant | \$ 622,171 |
| STAMP Grant | \$ 22,000 |
| Local Funds | <u>\$ 23,000</u> |
| Total Expenditures | \$ 2,811,555 |
| Projected Ending Balance 6/30/2026 | \$ 853,473 |





FY26 CTEI Grant Allotment

| | FY26 | FY25 |
|-----------------------------|---------------------|--------------------|
| Salaries and Benefits | \$ 63,125 | \$ 173,290 |
| Services | \$ 51,500 | \$ 45,500 |
| Supplies | \$ 2,000 | \$ 2,000 |
| District U-46 | \$ 667,000 | \$634,433 |
| District 300 | \$ 472,000 | \$440,019 |
| District 301 | \$ 179,000 | \$ 146,162 |
| District 303 | \$ 317,152 | \$ 284,712 |
| <u>Special CTE Projects</u> | <u>\$ 292,607</u> | <u>\$308,607</u> |
| Grand Total | \$ 2,144,384 | \$2,034,723 |

FY26 Budget Revisions

| CTEI | | | | |
|-----------|----------------------|-----------|---------|------------|
| Account | Description | Tentative | Final | Difference |
| 4000-6000 | District U-46 | 638,873 | 667,000 | 28,127 |
| 4000-6000 | District 300 | 444,459 | 472,000 | 27,541 |
| 4000-6000 | District 301 | 150,602 | 179,000 | 28,398 |
| 4000-6000 | District 303 | 289,152 | 317,152 | 28,000 |
| 4000-6000 | Special CTE Projects | 295,012 | 292,607 | -2,405 |
| | | | | |
| | Totals | | | 109,661 |

CTEI Budget

| Function Code | Object Code | Budgeted Amount |
|---------------|-------------|-----------------|
| 1000 | 300 | \$12,000 |
| 2120 | 100 | \$33,075 |
| 2120 | 200 | \$13,050 |
| 2120 | 300 | \$3,500 |
| 2120 | 400 | \$1,000 |
| 2210 | 300 | \$25,000 |

| Function Code | Object Code | Budgeted Amount |
|---------------|-------------|-----------------|
| 2300 | 300 | \$11,000 |
| 2300 | 400 | \$1,000 |
| 2400 | 100 | \$95,000 |
| 2400 | 200 | \$22,000 |
| 4000 | 600 | \$1,927,759 |

| | |
|---|-------------|
| Total Planned | \$2,144,384 |
| Total Allocated | \$2,144,384 |
| Total Remaining | \$0 |
| Elementary Career Development Allocation | \$54,114 |



FY26 Perkins V Grant Allotment

| | FY26 | FY25 |
|-----------------------|------------------|------------------|
| Salaries and Benefits | \$ 70,745 | \$ 61,835 |
| District U-46 | \$ 316,350 | \$313,633 |
| District 300 | \$ 143,350 | \$140,705 |
| District 301 | \$ 26,376 | \$ 20,408 |
| District 303 | <u>\$ 65,350</u> | <u>\$ 62,297</u> |
| Grand Total | \$622,171 | \$598,878 |



FY26 Budget Revisions

| Perkins | | | | |
|-----------|---------------|-----------|---------|------------|
| Account | Description | Tentative | Final | Difference |
| 4000-6000 | District U-46 | 310,000 | 316,350 | 6,350 |
| 4000-6000 | District 300 | 137,000 | 143,350 | 6,350 |
| 4000-6000 | District 301 | 21,133 | 26,376 | 5,243 |
| 4000-6000 | District 303 | 60,000 | 65,350 | 5,350 |
| | | | | |
| | Totals | | | 23,293 |

Perkins V Budget



Total Planned: 622,171
Total Allocated: 622,171
Total Remaining: 0

| Function Code: | Object Code: | Budgeted amount: |
|----------------|--------------|------------------|
| 2120 | 100 | \$33,075 |
| 2120 | 200 | \$13,050 |
| 2300 | 100 | \$20,000 |
| 2300 | 200 | \$4,620 |
| 4000 | 600 | \$316,350 |
| 4000 | 600 | \$143,350 |
| 4000 | 600 | \$26,376 |
| 4000 | 600 | \$65,350 |

FY26 STAMP Grant-IMA Allotment

Scaling Transformative Advanced Manufacturing Pathways

| FY26 | FY25 |
|------------------|------------------|
| \$ 22,000 | \$ 12,000 |

These funds are used to support Manufacturing Month tours and summer manufacturing internships.



Questions?



This presentation was created by Isha Raval & Deborah Vega
(CHS summer finance interns)



Northern Kane County
REGION 110
EDUCATION THAT WORKS

Community Unit School District 300
Central Community Unit School District 301
St. Charles Community Unit School District 303
School District U-46
northernkanepathways.com

Northern Kane County Regional Vocational System

2025-2026 Final Budget

**Presented
August 18, 2025**

Fiscal Agent

**Central Community Unit School District 301
275 South St.
Burlington, IL 60109**



Revenues

The Regional Vocational Revenues represent the vocational funding for Districts 300, 301, 303 and U-46. These dollars come to the region through two separate grants and are then distributed to the member districts. Specific grant revenues are received through the federal Perkins grant and the state Career and Technical Education Improvement grant.

Expenditures

Expenditures are incurred for both the Region and for Member districts. Regional expenditures are incurred for the administration of grants and programs across the region. Member districts are reimbursed by the Region for expenditures incurred for the delivery of vocational programs. This delivery includes regular vocational education, program administration and other support services.

Flow of Funds

Illinois State Board of Education



Northern Kane County Regional Vocational System



District 300

District 301

District 303

District U-46



Education Fund
2025-2026

Unaudited Beginning Balance 7/1/2025 **\$ 853,473.00**

Revenues

| | |
|-----------------------|-----------------------|
| CTEI Grant | \$2,144,384.00 |
| Perkins V Grant | \$ 622,171.00 |
| STAMP Grant | \$ 22,000.00 |
| Local Funds | \$ 23,000.00 |
| Total Revenues | \$2,811,555.00 |

Expenditures

| | |
|---------------------------|-----------------------|
| CTEI Grant | \$2,144,384.00 |
| Perkins V Grant | \$ 622,171.00 |
| STAMP Grant | \$ 22,000.00 |
| Local Funds | \$ 23,000.00 |
| Total Expenditures | \$2,811,555.00 |

Estimated Ending Balance 6/30/2026 **\$ 853,473.00**



CTEI Grant Allotment

| Account | Description | Budget |
|-------------|---|-----------------------|
| | | \$2,144,384.00 |
| 1000 | Improvement of Instruction Services | |
| 300 | Purchased Services | \$12,000.00 |
| | Total | \$12,000.00 |
| 2120 | Guidance Services | |
| 100 | Salaries | \$33,075.00 |
| 200 | Benefits | \$13,050.00 |
| 300 | Purchased Services | \$3,500.00 |
| 400 | Supplies | \$1,000.00 |
| | Total | \$50,625.00 |
| 2210 | Improvement of Instruction Services | |
| 300 | Travel Related Expenditures | \$25,000.00 |
| | Total | \$25,000.00 |
| 2300 | General Administration | |
| 300 | Purchased Services | \$11,000.00 |
| 400 | Supplies | \$1,000.00 |
| | Total | \$12,000.00 |
| 2400 | School Administration | |
| 100 | Salaries | \$95,000.00 |
| 200 | Benefits | \$22,000.00 |
| | Total | \$117,000.00 |
| 4100 | Payments to Other Governmental Units | |
| 600 | School Districts U-46, 300,301,303 | \$1,927,759.00 |
| | Total | \$1,927,759.00 |
| | Grand Total | \$2,144,384.00 |



Perkins V Grant Allotment

| Account | Description | Budget |
|-------------|---|----------------------|
| | | \$ 622,171.00 |
| 2120 | Guidance Services | |
| 100 | Salaries | \$ 33,075.00 |
| 200 | Benefits | \$ 13,050.00 |
| | Total | \$ 46,125.00 |
| 2300 | General Administration | |
| 100 | Salaries | \$ 20,000.00 |
| 200 | Benefits | \$ 4,620.00 |
| | Total | \$ 24,620.00 |
| 4140 | Payments To Other Governmental Units | |
| 600 | School District U-46 | \$ 316,350.00 |
| 600 | School District 300 | \$ 143,350.00 |
| 600 | School District 301 | \$ 26,376.00 |
| 600 | School District 303 | \$ 65,350.00 |
| | Total | \$ 551,426.00 |
| | Grand Total | \$ 622,171.00 |



STAMP Grant Allotment

| Account | Description | Budget |
|-------------|--|---------------------|
| | | \$ 22,000.00 |
| 1000 | Improvement of Instruction Services | |
| 300 | Purchased Services | \$ 22,000.00 |
| | Total | \$ 22,000.00 |
| | Grand Total | \$ 22,000.00 |

Local Funds Allotment

| Account | Description | Budget |
|-------------|-------------------------------|---------------------|
| | | \$ 23,000.00 |
| 2300 | General Administration | |
| 100 | Salaries | \$ 15,000.00 |
| 200 | Benefits | \$ 3,000.00 |
| 300 | Purchased Services | \$ 5,000.00 |
| | Total | \$ 23,000.00 |
| | Grand Total | \$ 23,000.00 |

RESOLUTION ADOPTING ANNUAL
BUDGET AND APPROPRIATION ORDINANCE
FOR SCHOOL YEAR COMMENCING
JULY 1, 2025 AND ENDING JUNE 30, 2026

WHEREAS, the Board of Education of Central Community Unit School District 301, Kane and DeKalb Counties, Illinois, on behalf of Northern Kane County Regional Vocational System has caused to be prepared in tentative form a budget and the Secretary of the Board has made the same conveniently available to public inspection for at least thirty days prior to the final action thereon; and

WHEREAS, notice of said public hearing was given at least thirty days prior thereto as required by publication in the Daily Herald, Elgin, Illinois on July 18, 2025; and

WHEREAS, a public hearing was held on said budget on the 18th day of August, 2025.

NOW THEREFORE BE IT RESOLVED by the Board of Education of Central Community Unit School District 301, Kane and DeKalb Counties, Illinois, on behalf of Northern Kane County Regional Vocational System that the Tentative Budget and Appropriation Ordinance, as amended, for the school year commencing July 1, 2025 and ending June 30, 2026, as hereinbefore placed on public display, be and the same is hereby adopted, as amended, as the Budget and Appropriation Ordinance for the said school district for the said school year commencing on July 1, 2025 and ending on June 30, 2026.

Ryan Wasson, President

Date

Scott Mrkvicka, Secretary

Date

MEMORANDUM

TO: Dr. Kyle Schumacher & Griff Powell, Interim Superintendent, Board of Education

FROM: Dan Polowy, Facilities Director

DATE: August 18, 2025

RE: Electricity Supply - Live Reverse Auction

Background:

Nania Energy Advisors has acted as Central CUSD 301's energy consultant since 2020, helping the District secure favorable natural gas and electricity rates long-term for significant cost avoidance over the term of the agreements. Nania Energy Advisors has provided expertise and market monitoring for Central CUSD 301, and informed District administrators of both opportunities and threats in the energy marketplace that could affect our energy costs.

Summary of Findings:

The District's current electricity supply contract expires in November 2025. Given the increase in energy prices and current market climate, the District is seeking ways to mitigate further cost increases and provide budget certainty for the District's energy costs. Therefore, Central CUSD 301 is seeking approval to utilize a live reverse auction for the purchase of electricity.

In a live reverse auction, energy suppliers bid against each other in real time for a specified period of time, typically 15 to 20 minutes. The process is completely transparent and often results in more competitive pricing than a sealed RFP. Pricing may be requested for multiple terms and products, allowing a thorough analysis of all options. All suppliers participating in the live auctions must first submit sealed pricing to ensure accurate RFP responsiveness before participating in the live auction. At the conclusion of the actual live event, the District will have the option of accepting or not accepting the low bid price, as well as what product and term the district would like to accept, if any.

Nania Energy Advisors will complete a sealed qualifying round of electricity supply rates with registered retail energy suppliers to be presented at the September 2025 Board of Education meeting. The purpose of this qualifying round is to (1) qualify responsive and responsible suppliers who can meet all RFP parameters and (2) establish the thresholds for acceptable results from the upcoming live reverse auction. Final results will be presented to the Board of Education for approval for Central CUSD 301 administration to conduct a live reverse auction, and furthermore, accept and execute a new electricity supply agreement if all pre-approved parameters are met.



Energy Review & Market Update

Presenter: Becky Thompson



Introduction



Becky
Thompson



Senior Energy
Advisor, CEP



Specialties

- Electricity Supply
- Natural Gas Supply
- IL Utility Tariffs
- Price Hedging
- Risk Management



Experience

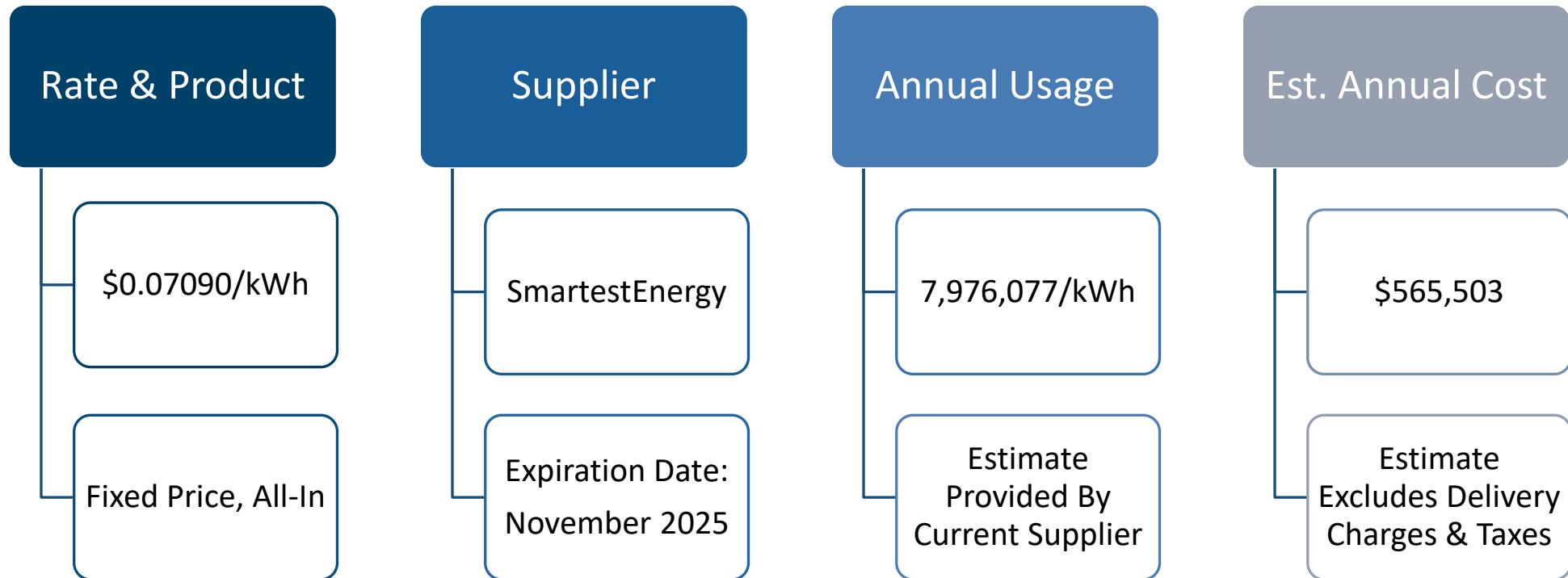
- K-12 School Districts
- Group Purchasing
- Long Range Planning
- Market Analysis



Electricity



Current Electric Contract



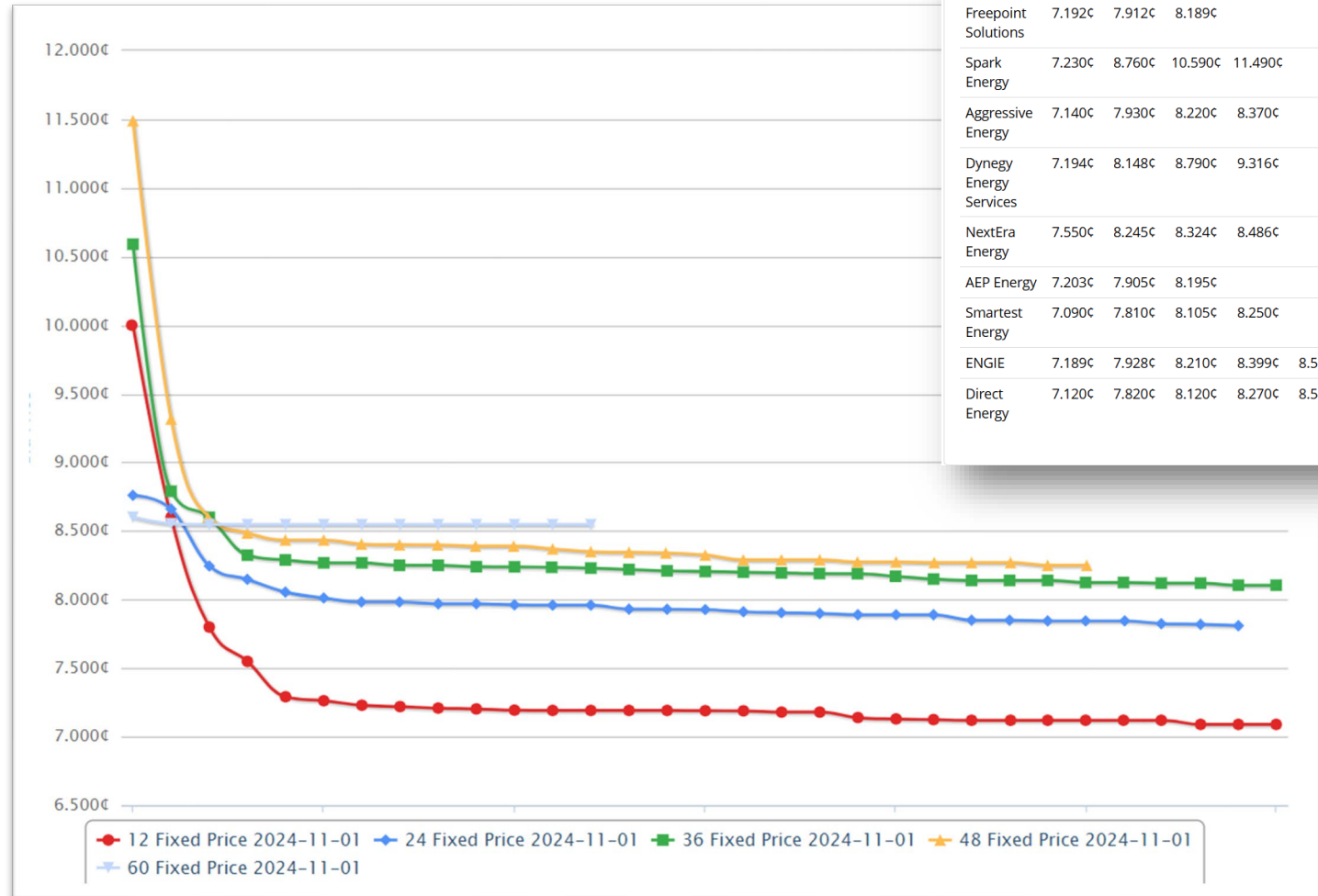
345

Procurement Strategy: Reverse Auction

- Live event encourages increased competition and results in lower rates
- Multiple bids received over 15-20 minutes
- Last auction completed in Oct 2024 received 131 bids from 10 suppliers

| | | | |
|-------------------|--|--------------|--|
| Current Status | ENDED | Company Name | Central Community Unit School District 301 |
| Actual Start Time | Tuesday, October 22, 2024 11:30 AM EST | | |
| Actual Duration | 19 minutes | | |
| End Time | Tuesday, October 22, 2024 11:49 AM EST | | |

| Current Bids | | | | | |
|------------------------|----------|----------|----------|----------|----------|
| Supplier | 12 Month | 24 Month | 36 Month | 48 Month | 60 Month |
| BP Energy | 7.190c | 8.055c | 8.205c | 8.345c | |
| Freepoint Solutions | 7.192c | 7.912c | 8.189c | | |
| Spark Energy | 7.230c | 8.760c | 10.590c | 11.490c | |
| Aggressive Energy | 7.140c | 7.930c | 8.220c | 8.370c | |
| Dynegy Energy Services | 7.194c | 8.148c | 8.790c | 9.316c | |
| NextEra Energy | 7.550c | 8.245c | 8.324c | 8.486c | |
| AEP Energy | 7.203c | 7.905c | 8.195c | | |
| Smartest Energy | 7.090c | 7.810c | 8.105c | 8.250c | |
| ENGIE | 7.189c | 7.928c | 8.210c | 8.399c | 8.553c |
| Direct Energy | 7.120c | 7.820c | 8.120c | 8.270c | 8.546c |



Electricity Forward Pricing

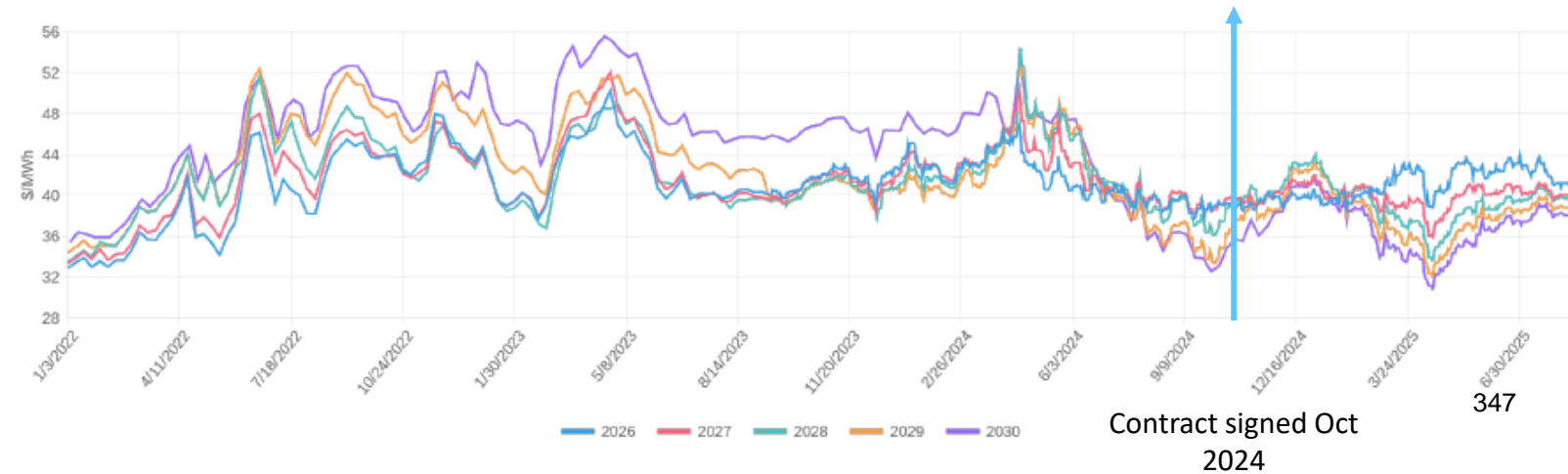
- Market is still seeing retiring coal plants, increasing demand from automation, data centers
- Costs for capacity increased 9X June 1, 2025, impacting total electricity budget by ~20%
- Expect higher rates with next auction based on current market conditions

ComEd (PJM ComEd)

Aug 11, 2025



Historical Pricing Energy (RTC)

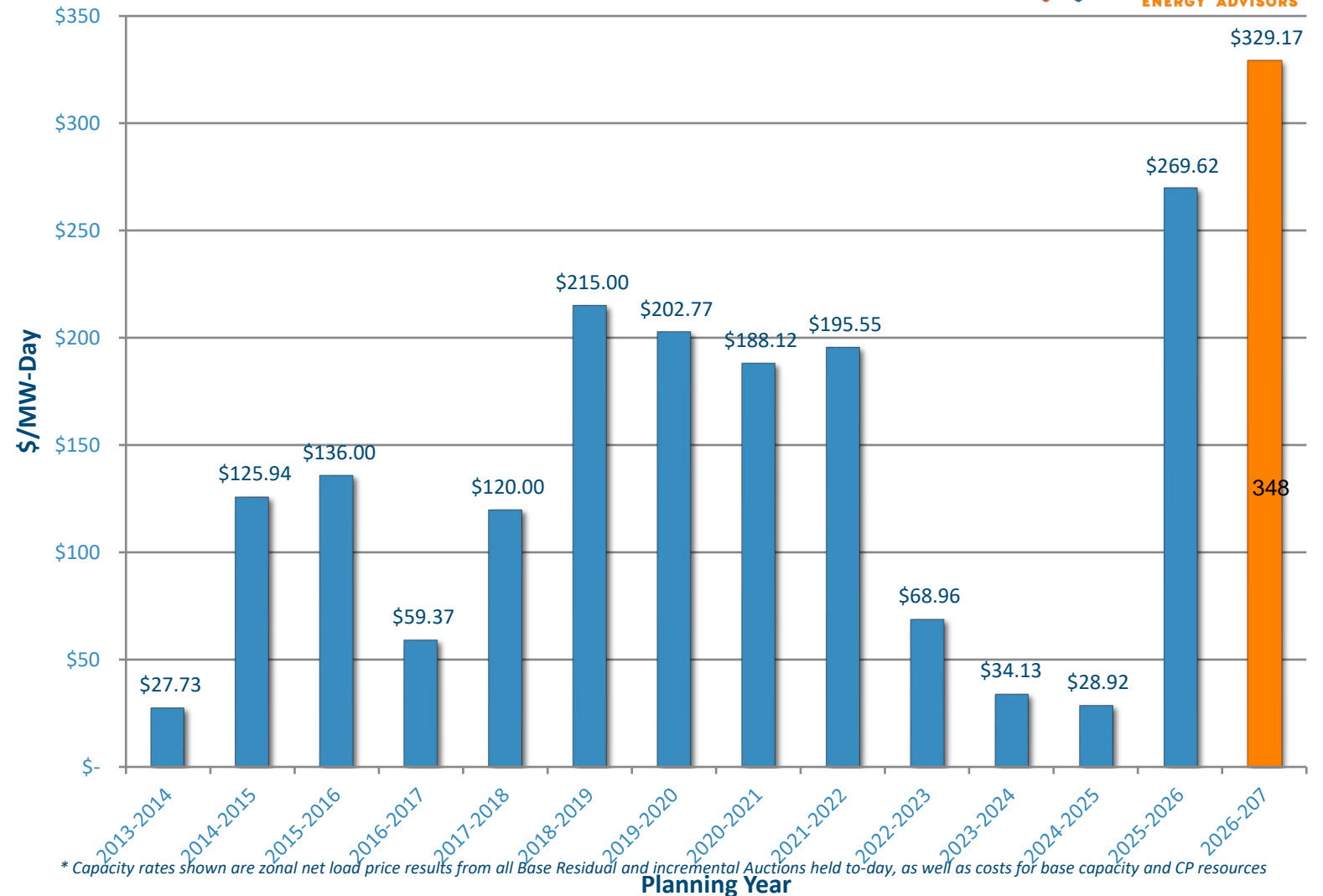


| Start Mo | Term (months) | Price* (\$/MWh) | Daily Change | Weekly Change | Monthly Change |
|----------|---------------|-----------------|--------------|---------------|----------------|
| Jan 26 | 12 (Cal 2026) | \$41.01 | (\$0.19) | (\$0.22) | (\$1.35) |
| Jan 27 | 12 (Cal 2027) | \$40.01 | (\$0.01) | (\$0.09) | (\$0.30) |
| Jan 28 | 12 (Cal 2028) | \$39.76 | \$0.02 | (\$0.12) | (\$0.39) |
| Jan 29 | 12 (Cal 2029) | \$38.81 | \$0.03 | (\$0.17) | (\$0.37) |
| Jan 30 | 12 (Cal 2030) | \$38.03 | \$0.00 | (\$0.26) | (\$0.09) |

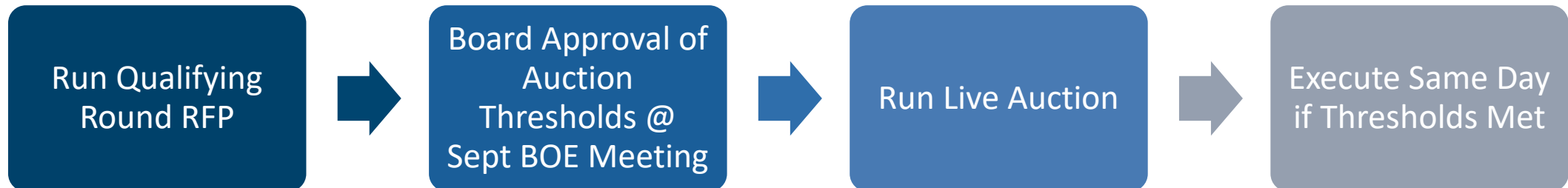
Capacity Cost Increase

- Less generation available, coupled with more demand from data centers
- Impacts bills starting June 2025, 20-25% total budgetary impact YOY
- Next year, capacity increasing another 20%

ComEd Capacity Auction \$/MW-Day



Next Steps



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The background image shows a vast indoor sports arena. In the foreground, there is a blue running track with white lane markings. To the right, blue bleachers are visible. The floor in the center is a light-colored basketball court with blue and white markings. The ceiling is high with a complex steel truss structure and numerous recessed lights. A large, curved blue structure, possibly a slide or part of the arena's architecture, hangs from the ceiling. The overall lighting is dim, with a blue color cast.

Athletic Program Expansion

Presented on August 18th, 2025
Michael Sitter, Athletic Director

D301's Mission Statement

*Engage the mind
Empower the learner
Inspire excellence
Influence the world*



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Activity/Club Update

For the 2025-2026 school year, CHS will pilot 8 new clubs. If the clubs demonstrate high levels of participation, they will become official clubs the following year.

| | | | |
|------|---------|--------|---------------|
| DECA | STEM | Coding | Stick Club |
| HOSA | Esports | Chess | Debate/Speech |

The Athletic Department has also created a Google form, which students can fill out to propose new clubs. This will be communicated to the student body at the start of the school year.

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Current High School Athletic Offerings

In the 2024-25 school year, Central High School provided roughly 1,074 IHSA participation opportunities to our high school students.

| Fall | Winter | Spring |
|---|---|--|
| <ul style="list-style-type: none">• BOYS CROSS COUNTRY• BOYS GOLF• BOYS SOCCER• GIRLS CROSS COUNTRY• GIRLS GOLF• GIRLS VOLLEYBALL• FOOTBALL | <ul style="list-style-type: none">• BOYS BASKETBALL• BOYS WRESTLING• CHEERLEADING• DANCE• GIRLS BASKETBALL• GIRLS BOWLING• GIRLS WRESTLING• BOYS BOWLING | <ul style="list-style-type: none">• BASEBALL• BOYS LACROSSE• BOYS TRACK AND FIELD• GIRLS LACROSSE• GIRLS SOCCER• GIRLS TRACK AND FIELD• SOFTBALL |

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Additional Sports Requests

Since July 1st, the Athletic Department has had parents, coaches and students reach out about adding the following sports at Central High School.

| Fall | Winter | Spring |
|--|--|---|
| <ul style="list-style-type: none">• GIRLS FLAG FOOTBALL• GIRLS TENNIS• GIRLS SWIMMING* | <ul style="list-style-type: none">• BOYS SWIMMING* | <ul style="list-style-type: none">• BOYS VOLLEYBALL• BOYS TENNIS |

*Boys and girls swimming - at this time, the lack of district facilities and the difficulty in using outside facilities, makes this sport prohibitive.

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Athletic Expansion Process

When Central High School looks to add additional athletic offerings, the steps below should be taken with internal stakeholders to analyze cost and identify potential barriers.

1. Athletic Director approval
2. Principal approval
3. Superintendent approval
4. A formal budget request is prepared
5. Board of Education budget approval

General Program Operation Overview

| | Girls Flag Football | Boys Volleyball | Girls Tennis | Boys Tennis |
|--|---------------------|-----------------|--------------|--------------|
| Season | Fall | Spring | Fall | Spring |
| Levels | Varsity/JV | 3 Levels | Varsity/JV | Varsity/JV |
| Season Length | 10 weeks | 12 weeks | 12 weeks | 12 weeks |
| Max Amount of Games per IHSA | 25 dates | 35 matches | 20 dates | 20 dates |
| Anticipated Athletic Participants | ~20-25 students | ~20-25 students | ~35 students | ~30 students |
| Conference | Fox Valley | *None | Fox Valley | Fox Valley |

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Operating Costs

| | Girls Flag Football | Boys Volleyball | Girls Tennis | Boys Tennis |
|-----------------------|----------------------------|------------------------|---------------------|--------------------|
| Equipment | \$3000 | \$1000 | \$500 | \$500 |
| Uniforms | \$7500 | \$9000 | \$2500 | \$2500 |
| Officials | \$3600 | \$3000 | - | - |
| Transportation | \$2500 | \$7100 | \$3100 | \$3100 |
| Coaches | \$14,500 | \$19,000 | \$9500 | \$9500 |
| Supervision | \$850 | \$1050 | - | - |

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Associated Concerns

1. Facilities

- Flag Football
 - Would require additional competition size football field for practices
 - Games would be played in the stadium, adding to the stress on the field
- Boys Volleyball
 - Adding 3 levels of boys volleyball would make all sports share practice space, leading to more late practices for all
- Tennis
 - Require 8-10 courts together on CHS property
 - McHenry High School built courts in 2020 at a cost of 2.2 million
 - Dundee Crown High School refurbished their courts this summer at a cost 1.1 million

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Associated Concerns, continued

2. Athletic training services
 - Additional strain on current trainer
 - Evaluate need for additional services
3. Transportation
 - We are struggling to meet our current needs as most drivers are not available until after 4pm, once school routes are complete

| Questions?



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MEMORANDUM

TO: Dr. Griff Powell, Kyle Schumacher, Co-Superintendent, Board of Education
FROM: Daina Pflug, Business Manager
DATE: August 18, 2025
RE: FY26 Central 301 Tentative Budget

Attached is the tentative budget for FY26. Listed below are some key points:

1. All funds are projected to end in positive fund balances
2. The tentative budget has deficit balances in the Education, Debt Services, Transportation, and Tort Funds. This is partially due to the timing of early tax receipts we received this spring and the cost of expenditures increasing. We received more than the 50% we budgeted for property tax receipts, which adds to the fund balance as of June 30, 2025, and will be used to cover these deficits in FY26.
3. The Illinois State Board of Education has projected that Central 301's Evidence-Based Funding (EBF) revenues will increase by \$1,248,381. We are still in Tier 1 in the EBF calculation for FY26.
4. Categorical payments have been budgeted at four payments - one owed from FY25 and three of the four owed for FY26.
5. These figures are conservative but realistic, especially with all the unknowns of prices increases and state prorated payments.
6. Budget revisions may come in the final budget for grants, new staff salaries, levy revenues, possible shifts in EBF revenues and balance transfers from funds.
7. This tentative budget was put on display August 15, 2025 and posted in the Daily Herald on August 14, 2025 and will be on display for 30 days for review. A public hearing will take place prior to September 15, 2025's board meeting.

**FY 2026
Tentative Budget
Presentation**

**Daina Pflug
Business Manager**

August 18, 2025



CENTRAL
SCHOOL DISTRICT 301

2024-2025 Budget Review

Revenues exceeded expenditures in all funds except the O&M and Tort funds

- These deficits were intentional to reduce fund balances in these funds

Positive fund balances in all funds at the start of FY26

- These reserves will help cover deficits over the next years with capital projects and state funding prorations

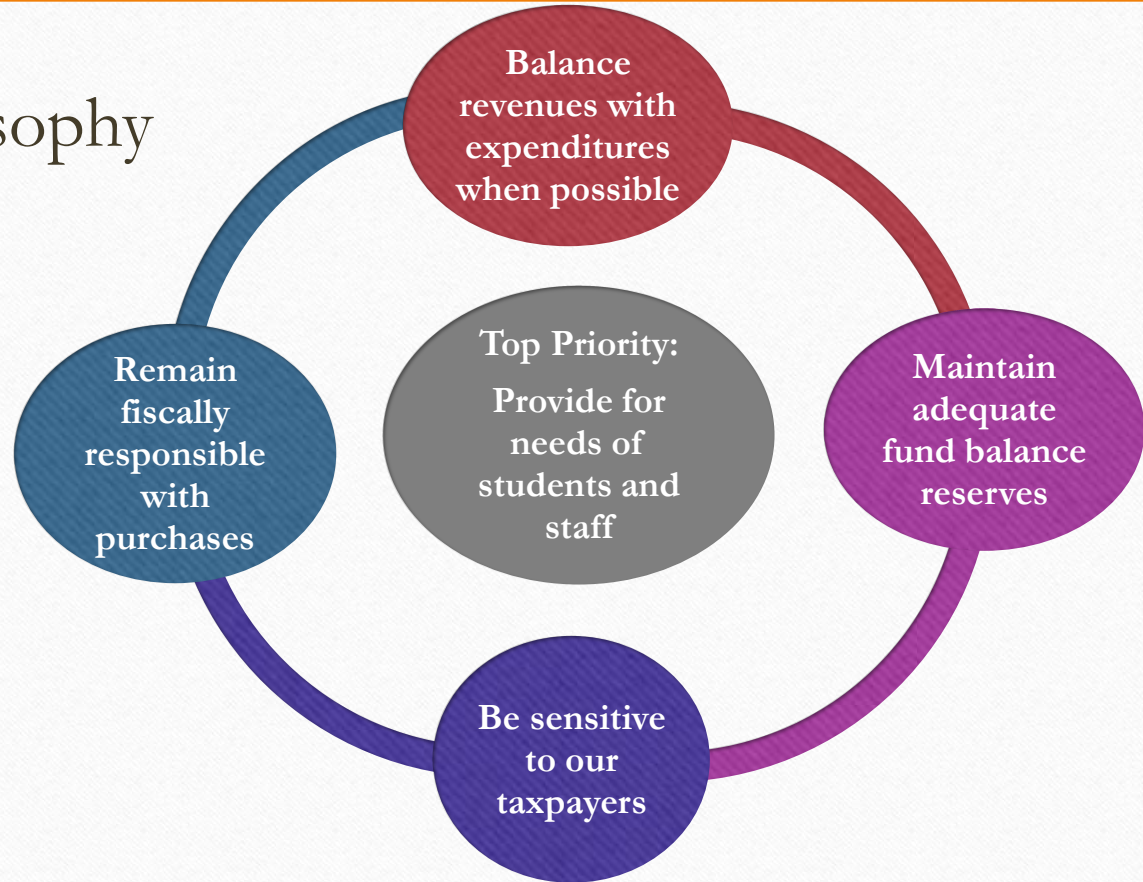
Major capital projects

- Central High School 20 classroom addition
- Prairie Knolls MS, Prairie View GS paving
- Generators

Capitalized on annual renewal payments

- Paid for some FY26 supplies in FY25
- Paid technology equipment, software, tuition and curriculum renewals in advance

Budgeting Philosophy



Budgeting Considerations

Local property taxes are the primary source of revenues

State revenues are critical
Evidence-Based Funding (EBF)

Salaries and Benefits are largest expenditures

Support instructional and curriculum needs

Address major capital improvement projects

Cover routine operating costs increases

Sources of Revenues



Local Revenues

Property Taxes
Registration Fees
Technology Fees
Lunches
Athletics
Transition Fees
Impact Fees



State Revenues

Evidence-Based
Funding
Career and Tech Ed
Drivers Ed
Transportation
(Regular and Special Ed)
Special Education
• Private Facility
• Orphanage



Federal Revenues

National School Lunch
Title I, II, III, IV Grants
Special Ed IDEA Grants
• IDEA Flow Through
• IDEA Preschool
Medicaid
Perkins IV

Revenue Assumptions

| Local Taxes | Evidence-Based Funding | State Categoricals | Impact Fees | Transition Fees |
|--|------------------------------------|--|----------------------------------|----------------------------|
| Fall 50% Tax Distribution | Projected at \$16,014,069 for FY26 | Projected to be delayed one payment at end of FY25 | Projected at \$1,013,225 | Projected at \$10,000 |
| Projected 50% Spring Tax Distribution | New tier funds of \$1,248,381 | FY25 Received 4 payments. One from FY24 and 3 for FY25 | Last year received \$933,648 | Last year received \$5,700 |
| Total local taxes approx. \$64.8 million including Bond & Interest | Tier 1 in the EBF calculations | Budgeted for 1 from FY25 and 3 for FY26 | Dependent on new housing permits | |

Expenditure Objects

Salaries

Benefits

Purchase
Services

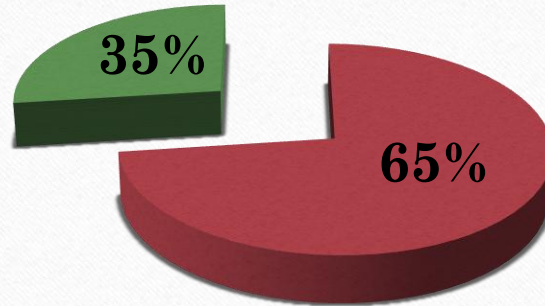
Supplies

Capital
Outlays

Dues &
Fees

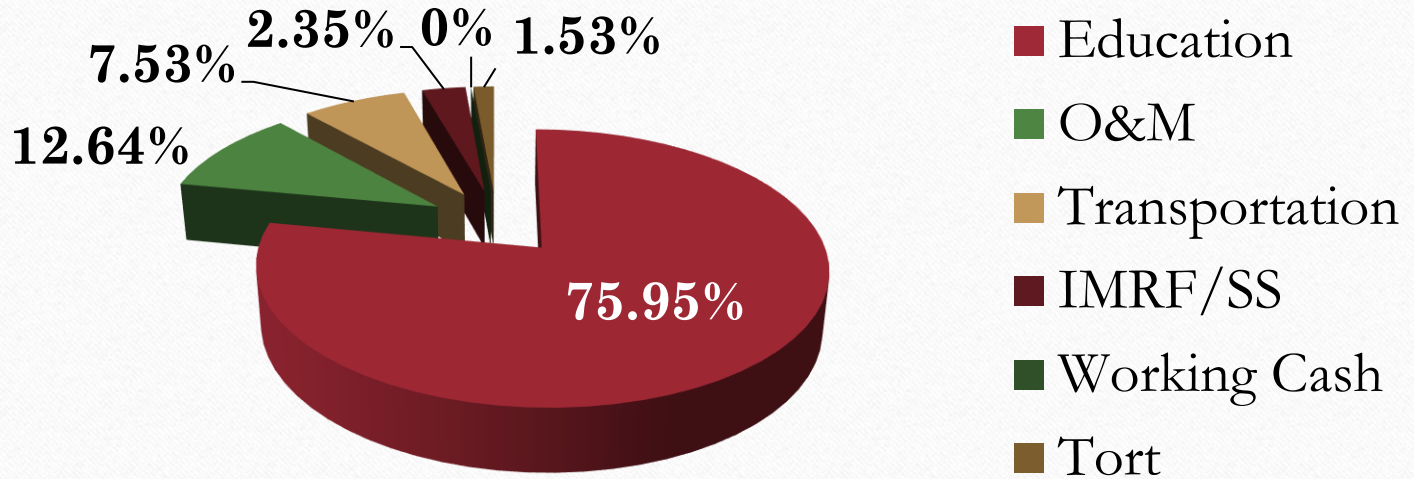
Non-Capital
Outlays

Approximate Expenditures for All Operating Funds



- Salaries & Benefits
- All Other Sources

Total Operating Expenditures by Fund FY26



Expenditure Assumptions



Salaries and Benefits

Adjusted for BEST/CEA salaries from contracts

Adjusted for benefits cost increases



Staffing/FTEs

Adjusted for staff changes and additional FTEs



Capital Improvement Projects

Howard B. Thomas roof
Country Trails mobile
Central High School track



Increased Costs

Special Ed Tuition
Bus Fuel, Bus Leases
Utilities
Property Insurance
Curriculum 371
Technology

Expenditure Item 2025-2026

Key Components - Education Fund

| | |
|--|-------------------|
| Elementary Classroom Salaries | 7,724,505 |
| Middle School Classroom Salaries | 4,669,571 |
| High School Classroom Salaries | 6,212,640 |
| Total Education Fund All Salaries | 38,134,194 |

Key Components - Education Fund

| Expenditure Item | 2025-2026 |
|-------------------------------------|-------------------|
| Total Athletics | 1,664,195 |
| Total Food Service | 1,900,997 |
| Special Ed Tuition | 8,495,000 |
| Technology Budget | 3,149,480 |
| Total Education Expenditures | 67,863,747 |

Key Components - O&M Fund

| Expenditure Item | 2025-2026 |
|---|-------------------|
| Custodial, Maintenance, Grounds Salaries | 2,517,711 |
| Purchased Services | 1,642,150 |
| Supplies | 2,153,700 |
| Capital Outlay | 3,795,000 |
| Total O&M Expenditures | 11,297,684 |

Key Components - Transportation Fund

| Expenditure Item | 2025-2026 |
|--|------------------|
| Salaries | 2,849,345 |
| Bus Leases | 2,550,000 |
| Fuel | 460,000 |
| Contingency | 50,000 |
| Total Transportation Expenditures | 6,726,495 |

Key Components - Remaining Funds

| Expenditure Item | 2025-2026 |
|--|------------------|
| Debt Service (Bonds, Debt Certificates) | 9,905,725 |
| IMRF, Social Security, Medicare | 2,099,234 |
| Capital Projects Fund | 590,000 |
| Working Cash | 0 |
| Tort (Property Insurance, Legal, Unemployment, Worker Comp) | 1,370,000 |

FY26 Fund Summary

| Fund | Projected Revenues | Projected Expenditures | Difference |
|----------------------|--------------------|------------------------|----------------|
| Education (no TRS) | \$ 66,298,509 | \$ 67,863,747 | \$ (1,565,238) |
| O&M | \$ 11,595,700 | \$ 11,297,684 | \$ 298,016 |
| Transportation | \$ 6,431,210 | \$ 6,726,495 | \$ (295,285) |
| IMRF/Social Security | \$ 2,112,620 | \$ 2,099,234 | \$ 13,386 |
| Capital Projects | \$ 592,000 | \$ 590,000 | \$ 2,000 |
| Working Cash | \$ 181,600 | \$ - | \$ 181,600 |
| Tort | \$ 1,042,600 | \$ 1,370,000 | \$ (327,400) |

Projected Balances FY26

| Fund | 7/1/25 Unaudited Fund Balance | FY26 Budget Revenues +/- Expenditures | 6/30/26 Projected Fund Balance |
|------------------|-------------------------------------|---|--------------------------------------|
| Education | 26,410,216 | (1,565,238) | 24,844,978 |
| O&M | 5,807,529 | 298,016 | 6,105,545 |
| Debt Service | 6,342,909 | (3,690,670) | 2,652,239 |
| Transportation | 8,263,002 | (295,285) | 7,967,717 |
| IMRF/SS | 3,433,687 | 13,386 | 3,447,073 |
| Capital Projects | 5,489,034 | 2,000 | 5,491,034 |
| Working Cash | 3,250,257 | 181,600 | 3,431,857 |
| Tort | 459,749 | (327,400) | 132,349 |

Future Issues and Concerns



Future costs with increasing enrollments

Staffing-FTE increases
Building capacities maxed out, mobiles
Increased special education tuition costs
Transportation parking hub-more buses



Future increase in costs related to economic factors

Staffing shortage in some departments
Increased costs on supplies, services, fuel, food, insurance



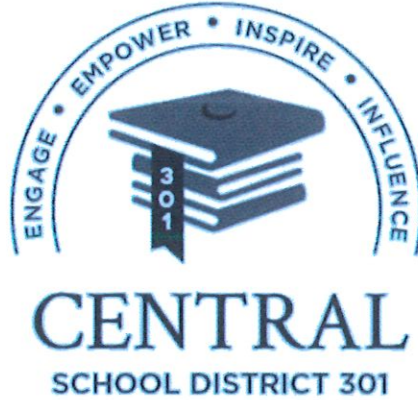
State of Illinois fiscal problems

Delayed and prorated payments
PTELL Reform-Limits new construction to 50% of assessed value
Property tax freeze with 0% CPI



ESSA curriculum requirements and legal mandates

High School requirements
College and Career Readiness Indicators



2025 – 2026 Tentative Budget

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Board of Education

Ryan Wasson, President
Dr. Morgan Pappas, Vice President
Scott Mrkvicka, Secretary
Andrew Dogan
Chad Herst
Jeff Gorman
Danielle Ward

Administration

Dr. Kyle Schumacher, Interim Superintendent
Dr. Griff Powell, Interim Superintendent
Daina Pflug, Business Manager

August 18, 2025

| CENTRAL COMM UNIT SCHOOL DISTRICT 301 | | | | | |
|---------------------------------------|---|----------------------------------|------------------------------|------------------------------------|----------------------------------|
| BUDGET 2025-2026 | | | | | |
| ACCOUNT NUMBER | DESCRIPTION | 2025-2026 TENTATIVE BUDGET | 2024-2025 FINAL BUDGET | 2024-2025 ACTUAL (UNAUDITED) | 2024-2025 BUDGET vs ACTUAL |
| EDUCATION FUND (FUND 10) | | | | | |
| REVENUE FROM LOCAL SOURCES | | | | | |
| 10 R 000 1110 0000 00 000000 0000 | TAXES, EARLY | 18,960,100.00 | 17,794,794.00 | 18,501,793.83 | 3.97% |
| 10 R 001 1110 0000 00 000000 0000 | TAXES, BUDGET YEAR | 17,600,590.00 | 17,183,991.00 | 17,151,277.74 | -0.19% |
| 10 R 000 1140 0000 00 000000 0000 | SPECIAL ED, EARLY | 4,415,300.00 | 3,917,930.00 | 4,019,693.48 | 2.60% |
| 10 R 001 1140 0000 00 000000 0000 | SPECIAL ED, BUDGET YEAR | 3,823,930.00 | 3,750,833.00 | 3,743,699.22 | -0.19% |
| 10 R 001 1510 0000 00 000000 0000 | INTEREST - SWEEP ACCOUNT | 700,000.00 | 500,000.00 | 908,882.93 | 81.78% |
| 10 R 003 1510 0000 00 000000 0000 | INTEREST - DISTRIBUTION ON TAXES | 70,000.00 | 28,000.00 | 90,717.31 | 223.99% |
| 10 R 002 1611 0000 00 000000 0000 | CHS LUNCH, STUDENTS | 610,000.00 | 540,000.00 | 605,501.93 | 12.13% |
| 10 R 003 1611 0000 00 000000 0000 | CMS LUNCH, STUDENTS | 106,000.00 | 114,000.00 | 106,330.73 | -6.73% |
| 10 R 004 1611 0000 00 000000 0000 | HBT LUNCH, STUDENTS | 86,000.00 | 84,000.00 | 85,749.55 | 2.08% |
| 10 R 005 1611 0000 00 000000 0000 | LL LUNCH, STUDENTS | 41,000.00 | 38,000.00 | 40,806.99 | 7.39% |
| 10 R 008 1611 0000 00 000000 0000 | PV LUNCH, STUDENTS | 99,000.00 | 110,000.00 | 98,934.50 | -10.06% |
| 10 R 010 1611 0000 00 000000 0000 | CT LUNCH, STUDENTS | 90,000.00 | 93,000.00 | 89,871.95 | -3.36% |
| 10 R 011 1611 0000 00 000000 0000 | PKMS LUNCH, STUDENTS | 211,000.00 | 211,000.00 | 206,828.17 | -1.98% |
| 10 R 002 1620 0000 00 000000 0000 | CHS LUNCH, ADULTS | 0.00 | 2,000.00 | 0.00 | -100.00% |
| 10 R 003 1620 0000 00 000000 0000 | CMS LUNCH, ADULTS | 0.00 | 50.00 | 0.00 | -100.00% |
| 10 R 004 1620 0000 00 000000 0000 | HBT LUNCH, ADULTS | 0.00 | 50.00 | 0.00 | -100.00% |
| 10 R 005 1620 0000 00 000000 0000 | LL LUNCH, ADULTS | 0.00 | 50.00 | 0.00 | -100.00% |
| 10 R 008 1620 0000 00 000000 0000 | PV LUNCH, ADULTS | 0.00 | 50.00 | 0.00 | -100.00% |
| 10 R 010 1620 0000 00 000000 0000 | CT LUNCH, ADULTS | 0.00 | 50.00 | 0.00 | -100.00% |
| 10 R 011 1620 0000 00 000000 0000 | PKMS LUNCH, ADULTS | 0.00 | 200.00 | 0.00 | -100.00% |
| 10 R 000 1711 0000 00 000000 0000 | ATHLETIC ADMISSION | 94,000.00 | 45,000.00 | 93,166.45 | 107.04% |
| 10 R 000 1720 0000 00 000000 0000 | ATHLETIC PARTICIPATION FEE | 160,000.00 | 154,000.00 | 158,635.00 | 3.01% |
| 10 R 002 1720 0000 00 000000 0000 | OTHER FEES-CHS | 100,000.00 | 96,000.00 | 99,739.27 | 3.90% |
| 10 R 003 1720 0000 00 000000 0000 | OTHER FEES-CMS | 19,500.00 | 11,000.00 | 19,239.42 | 74.90% |
| 10 R 004 1720 0000 00 000000 0000 | OTHER FEES-HBT | 38,100.00 | 30,000.00 | 38,109.41 | 27.03% |
| 10 R 005 1720 0000 00 000000 0000 | OTHER FEES-LL | 13,500.00 | 19,000.00 | 13,512.15 | -28.88% |
| 10 R 008 1720 0000 00 000000 0000 | OTHER FEES-PV | 27,100.00 | 26,000.00 | 27,050.89 | 4.04% |
| 10 R 010 1720 0000 00 000000 0000 | OTHER FEES-CT | 12,300.00 | 13,000.00 | 12,221.75 | -5.99% |
| 10 R 011 1720 0000 00 000000 0000 | OTHER FEES-PKMS | 30,500.00 | 11,000.00 | 30,453.60 | 176.85% |
| 10 R 000 1721 0000 00 000000 0000 | OTHER FEES-CHS ATHLETICS | 57,000.00 | 58,000.00 | 56,694.19 | -2.25% |
| 10 R 000 1799 0000 00 000000 0000 | CHS ACTIVITY FUND REVENUES | 665,000.00 | 655,000.00 | 662,537.26 | 1.15% |
| 10 R 001 1799 0000 00 000000 0000 | ELEM MS ACTIVITY FUND REVENUES | 22,600.00 | 22,000.00 | 22,577.95 | 2.63% |
| 10 R 000 1811 0000 00 000000 0000 | TEXTBOOK INCOME | 855,000.00 | 615,000.00 | 853,363.71 | 38.76% |
| 10 R 000 1830 0000 00 000000 0000 | TECHNOLOGY FEES | 330,000.00 | 225,000.00 | 328,136.80 | 45.84% |
| 10 R 000 1930 0000 00 000000 0000 | TRANSITION FEES | 10,000.00 | 50,000.00 | 5,700.02 | -88.60% |
| 10 R 000 1950 0000 00 000000 0000 | REFUND OF PRIOR YEAR EXPENDITURES | 50,000.00 | 100,000.00 | 10,011.10 | -89.99% |
| 10 R 000 1970 0000 00 000000 0000 | DRIVERS ED B-T-W | 47,000.00 | 20,000.00 | 46,811.50 | 134.06% |
| 10 R 002 1991 0000 00 000000 0000 | CAREER PATHWAYS REVENUE | 63,000.00 | 63,000.00 | 25,500.00 | -59.52% |
| 10 R 000 1999 0000 00 000000 0000 | OTHER LOCAL REVENUE | 25,000.00 | 50,000.00 | 22,462.57 | -55.07% |
| | TOTAL REVENUE FROM LOCAL SOURCES | 49,432,520.00 | 46,630,998.00 | 48,176,011.37 | 3.31% |
| REVENUE FROM STATE SOURCES | | | | | |
| 10 R 000 3001 0000 00 000000 0000 | EVIDENCE-BASED FUNDING | 13,014,070.00 | 10,765,688.00 | 8,727,762.11 | -18.93% |
| 10 R 001 3001 0000 00 000000 0000 | EVIDENCE BASED FUNDING-MV COOP | 0.00 | 50,000.00 | 0.00 | -100.00% |
| 10 R 002 3001 0000 00 000000 0000 | EVIDENCE BASED FUNDING-ALOP | 113,000.00 | 67,000.00 | 113,448.52 | 69.33% |
| 10 R 000 3100 0000 00 000000 0000 | SPECIAL ED - PRIVATE FACILITY | 650,000.00 | 1,000,000.00 | 626,644.61 | -37.34% |
| 10 R 000 3120 0000 00 000000 0000 | SPECIAL ED-ORPHANAGE | 41,000.00 | 32,396.00 | 40,899.09 | 26.25% |
| 10 R 000 3220 0000 00 000000 0000 | CAREER & TECHNICAL EDUCATION | 213,650.00 | 146,162.00 | 81,165.97 | -44.47% |
| 10 R 000 3235 0000 00 000000 0000 | CTE AGRICULTURE EDUCATION | 4,871.00 | 3,869.00 | 3,169.00 | -18.09% |
| 10 R 002 3235 0000 00 000000 0000 | CTE FFA THREE CIRCLES GRANT | 32,245.00 | 32,245.00 | 32,245.00 | 0.00% |
| 10 R 000 3360 0000 00 000000 0000 | STATE FREE LUNCH | 2,850.00 | 4,000.00 | 2,848.07 | -28.80% |
| 10 R 000 3370 0000 00 000000 0000 | DRIVER'S ED | 35,000.00 | 37,200.00 | 34,720.12 | -6.67% |
| 10 R 000 3998 0000 00 000000 0000 | TRS-ON BEHALF PAYMENTS | 18,306,000.00 | 18,306,000.00 | 18,306,000.00 | 0.00% |
| 10 R 000 3999 0000 00 000000 0000 | OTHER STATE REVENUE | 67,000.00 | 100,000.00 | 100,747.00 | 0.75% |
| 10 R 001 3999 0000 00 000000 0000 | LIBRARY GRANT | 4,200.00 | 4,010.00 | 4,178.09 | 4.19% |
| | TOTAL REVENUE FROM STATE SOURCES | 32,483,886.00 | 30,548,570.00 | 28,073,827.58 | -8.10% |
| REVENUE FROM FEDERAL SOURCES | | | | | |
| 10 R 000 4210 0000 00 000000 0000 | NATIONAL SCHOOL LUNCH PROGRAM | 450,000.00 | 535,000.00 | 432,174.78 | -19.22% |
| 10 R 000 4300 0000 00 000000 0000 | TITLE I LOW INCOME | 170,709.00 | 164,626.00 | 174,335.00 | 5.90% |
| 10 R 000 4400 0000 00 000000 0000 | TITLE IV-A SSAE GRANT | 21,112.00 | 11,256.00 | 10,155.00 | -9.78% |
| 10 R 000 4600 0000 00 000000 0000 | IDEA PRESCHOOL FLOW THROUGH | 8,629.00 | 8,425.00 | 12,857.00 | 52.61% |
| 10 R 000 4620 0000 00 000000 0000 | IDEA FLOW THROUGH | 987,993.00 | 853,974.00 | 948,750.00 | 11.10% |
| 10 R 000 4625 0000 00 000000 0000 | IDEA FLOW THROUGH ROOM & BOARD | 590,000.00 | 500,000.00 | 589,176.63 | 17.84% |
| 10 R 000 4745 0000 00 000000 0000 | CARL PERKINS | 20,408.00 | 20,408.00 | 23,231.03 | 13.83% |
| 10 R 000 4905 0000 00 000000 0000 | TITLE III IEP GRANT | 8,200.00 | 11,900.00 | 8,227.00 | -30.87% |
| 10 R 000 4909 0000 00 000000 0000 | TITLE III ELL-TBE/TPI LIPLEPS | 49,795.00 | 48,510.00 | 59,080.00 | 21.79% |
| 10 R 000 4932 0000 00 000000 0000 | TITLE II-TEACHER QUALITY | 91,257.00 | 45,389.00 | 68,857.00 | 51.70% |

| | | | | | |
|---|---|----------------------|----------------------|----------------------|-----------------|
| 10 R 000 4991 0000 00 000000 0000 | MEDICAID MATCHING FUNDS-ADMIN OUTREACH | 60,000.00 | 65,000.00 | 58,900.71 | -9.38% |
| 10 R 000 4992 0000 00 000000 0000 | MEDICAID MATCHING FUNDS-FEE FOR SERVICE | 230,000.00 | 141,000.00 | 227,615.10 | 61.43% |
| 10 R 003 4998 0000 00 000000 0000 | ESSER III GRANT (ARP) | 0.00 | 0.00 | 22,187.00 | 0.00% |
| | TOTAL REVENUE FROM FEDERAL SOURCES | 2,688,103.00 | 2,405,488.00 | 2,635,546.25 | 9.56% |
| | TOTAL REVENUE FROM ALL SOURCES | 84,604,509.00 | 79,585,056.00 | 78,885,385.20 | -0.88% |
| | TOTAL REVENUE FROM ALL SOURCES W/O TRS ON BEHALF | 66,298,509.00 | 61,279,056.00 | 60,579,385.20 | -1.14% |
| | GRAND TOTAL REVENUE FROM ALL SOURCES | 84,604,509.00 | 79,585,056.00 | 78,885,385.20 | -0.88% |
| NON-CATEGORICAL DISTRICT WIDE PROGRAMS | | | | | |
| 10 E 001 1100 1130 00 000000 0000 | COMMITTEE STIPENDS | 12,000.00 | 9,200.00 | 10,622.50 | 15.46% |
| 10 E 001 1100 1220 00 000000 0000 | TEACHER SUBSTITUTES | 515,000.00 | 430,000.00 | 507,227.19 | 17.96% |
| 10 E 001 1100 1240 00 000000 0000 | ENROLLMENT/AIDA PARA SUBS | 1,000.00 | 3,900.00 | 585.00 | -85.00% |
| 10 E 001 1100 1260 00 000000 0000 | NEW TEACHER ORIENTATION | 17,500.00 | 15,600.00 | 16,300.00 | 4.49% |
| 10 E 001 1100 1350 00 000000 0000 | CLASSROOM MOVE PAYMENTS | 7,500.00 | 10,000.00 | 4,650.00 | -53.50% |
| | TOTAL SALARIES | 553,000.00 | 468,700.00 | 539,384.69 | 15.08% |
| 10 E 001 1100 2110 00 000000 0000 | TEACHER RETIREMENT | 2,700.00 | 2,500.00 | 2,655.36 | 6.21% |
| 10 E 001 1100 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 2,800.00 | 2,100.00 | 2,783.68 | 32.56% |
| 10 E 001 1100 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 3,500.00 | 2,700.00 | 3,478.58 | 28.84% |
| | TOTAL EMPLOYEE BENEFITS | 9,000.00 | 7,300.00 | 8,917.62 | 22.16% |
| 10 E 001 1100 3900 00 000000 0000 | PURCHASE SERVICES | 5,000.00 | 10,000.00 | 2,777.28 | -72.23% |
| | TOTAL PURCHASED SERVICES | 5,000.00 | 10,000.00 | 2,777.28 | -72.23% |
| 10 E 001 1100 4100 00 000000 0000 | DISTRICT CLASSROOM SUPPLIES | 40,000.00 | 50,000.00 | 34,050.57 | -31.90% |
| 10 E 001 1100 4110 00 000000 0000 | DISTRICT CHROMEBOOKS | 1,010,000.00 | 870,000.00 | 1,007,600.00 | 38.82% |
| 10 E 002 1100 4200 00 000000 0000 | TEXTBOOK-NEW ADOPTIONS/DIGITAL LEASES | 170,000.00 | 170,000.00 | 120,970.58 | -28.84% |
| 10 E 003 1100 4200 00 000000 0000 | TEXTBOOK-NEW ADOPTIONS/DIGITAL LEASES | 115,000.00 | 25,000.00 | 1,645.99 | -93.42% |
| 10 E 004 1100 4200 00 000000 0000 | TEXTBOOK-NEW ADOPTIONS/DIGITAL LEASES | 96,000.00 | 25,000.00 | 95,592.59 | 282.37% |
| 10 E 005 1100 4200 00 000000 0000 | TEXTBOOK-NEW ADOPTIONS/DIGITAL LEASES | 41,000.00 | 7,500.00 | 40,168.48 | 435.58% |
| 10 E 008 1100 4200 00 000000 0000 | TEXTBOOK-NEW ADOPTIONS/DIGITAL LEASES | 96,000.00 | 25,000.00 | 95,708.01 | 282.83% |
| 10 E 010 1100 4200 00 000000 0000 | TEXTBOOK-NEW ADOPTIONS/DIGITAL LEASES | 96,000.00 | 25,000.00 | 95,591.05 | 282.36% |
| 10 E 011 1100 4200 00 000000 0000 | TEXTBOOK-NEW ADOPTIONS/DIGITAL LEASES | 235,500.00 | 50,000.00 | 0.00 | -100.00% |
| | TOTAL SUPPLIES | 1,899,500.00 | 1,247,500.00 | 1,491,327.27 | 19.55% |
| 10 E 001 1100 5400 00 000000 0000 | CLASSROOM EQUIPMENT | 0.00 | 5,000.00 | 0.00 | -100.00% |
| 10 E 002 1100 5400 00 000000 0000 | NEW ADOPTIONS | 15,000.00 | 30,000.00 | 0.00 | -100.00% |
| | TOTAL CAPITAL OUTLAYS | 15,000.00 | 35,000.00 | 0.00 | -100.00% |
| 10 E 001 1100 7100 00 000000 0000 | CLASSROOM MOVES NON CAPITAL | 0.00 | 12,000.00 | 0.00 | -100.00% |
| 10 E 002 1100 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 10,000.00 | 13,000.00 | 5,190.00 | -60.08% |
| | TOTAL NON-CAPITAL EQUIPMENT | 10,000.00 | 25,000.00 | 5,190.00 | -79.24% |
| | GRAND TOTAL NON-CATEGORICAL DISTRICT WIDE PROGRAMS | 2,491,500.00 | 1,793,500.00 | 2,047,596.86 | 14.17% |
| ELEMENTARY | | | | | |
| 10 E 004 1110 1100 00 000000 0000 | ELEMENTARY TEACHER SALARY | 2,114,405.00 | 2,112,550.00 | 2,088,025.93 | -1.16% |
| 10 E 005 1110 1100 00 000000 0000 | ELEMENTARY TEACHER SALARY | 912,200.00 | 896,830.00 | 881,444.78 | -1.72% |
| 10 E 008 1110 1100 00 000000 0000 | ELEMENTARY TEACHER SALARY | 2,071,720.00 | 2,026,900.00 | 2,032,233.49 | 0.26% |
| 10 E 010 1110 1100 00 000000 0000 | ELEMENTARY TEACHER SALARY | 2,353,800.00 | 2,193,375.00 | 2,178,218.64 | -0.69% |
| 10 E 004 1110 1120 00 000000 0000 | LONGEVITY | 6,935.00 | 6,961.00 | 6,960.75 | 0.00% |
| 10 E 005 1110 1120 00 000000 0000 | LONGEVITY | 3,230.00 | 3,155.00 | 3,155.54 | 0.02% |
| 10 E 008 1110 1120 00 000000 0000 | LONGEVITY | 13,300.00 | 12,065.00 | 12,065.30 | 0.00% |
| 10 E 010 1110 1120 00 000000 0000 | LONGEVITY | 15,100.00 | 12,065.00 | 12,065.30 | 0.00% |
| 10 E 004 1110 1130 00 000000 0000 | SALARY ADD ON | 3,705.00 | 2,600.00 | 778.78 | -70.05% |
| 10 E 005 1110 1130 00 000000 0000 | SALARY ADD ON | 2,420.00 | 1,000.00 | 1,609.28 | 60.93% |
| 10 E 008 1110 1130 00 000000 0000 | SALARY ADD ON | 3,015.00 | 1,800.00 | 437.36 | -75.70% |
| 10 E 010 1110 1130 00 000000 0000 | SALARY ADD ON | 5,790.00 | 2,900.00 | 1,903.88 | -34.35% |
| 10 E 004 1110 1135 00 000000 0000 | INTERNAL SUBSTITUTION | 8,600.00 | 6,000.00 | 6,320.00 | 5.33% |
| 10 E 005 1110 1135 00 000000 0000 | INTERNAL SUBSTITUTION | 2,000.00 | 1,000.00 | 1,050.00 | 5.00% |
| 10 E 008 1110 1135 00 000000 0000 | INTERNAL SUBSTITUTION | 5,300.00 | 3,500.00 | 3,030.00 | -13.43% |
| 10 E 010 1110 1135 00 000000 0000 | INTERNAL SUBSTITUTION | 6,900.00 | 2,000.00 | 6,700.00 | 235.00% |
| 10 E 004 1110 1140 00 000000 0000 | MENTORING SALARY | 3,765.00 | 8,825.00 | 8,360.64 | -5.26% |
| 10 E 005 1110 1140 00 000000 0000 | MENTORING SALARY | 2,510.00 | 2,265.00 | 2,073.48 | -8.46% |
| 10 E 008 1110 1140 00 000000 0000 | MENTORING SALARY | 1,255.00 | 5,090.00 | 5,156.60 | 1.31% |
| 10 E 010 1110 1140 00 000000 0000 | MENTORING SALARY | 1,255.00 | 4,525.00 | 4,062.84 | -10.21% |
| 10 E 004 1110 1200 00 000000 0000 | INSURANCE STIPEND | 21,600.00 | 12,600.00 | 21,600.00 | 71.43% |
| 10 E 005 1110 1200 00 000000 0000 | INSURANCE STIPEND | 3,600.00 | 5,400.00 | 5,400.00 | 0.00% |
| 10 E 008 1110 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 5,250.00 | 191.67% |
| 10 E 010 1110 1200 00 000000 0000 | INSURANCE STIPEND | 8,500.00 | 9,000.00 | 10,350.00 | 15.00% |
| 10 E 004 1110 1230 00 000000 0000 | HOMEBOUND TEACHER PAY | 500.00 | 1,600.00 | 0.00 | -100.00% |
| 10 E 005 1110 1230 00 000000 0000 | HOMEBOUND TEACHER PAY | 300.00 | 300.00 | 0.00 | -100.00% |
| 10 E 008 1110 1230 00 000000 0000 | HOMEBOUND TEACHER PAY | 500.00 | 700.00 | 0.00 | -100.00% |
| 10 E 010 1110 1230 00 000000 0000 | HOMEBOUND TEACHER PAY | 500.00 | 300.00 | 0.00 | -100.00% |

| | | | | | |
|-----------------------------------|-------------------------------|---------------------|---------------------|---------------------|----------------|
| 10 E 004 1110 1250 00 000000 0000 | LUNCHROOM SUPERVISOR | 50,000.00 | 38,000.00 | 48,671.41 | 28.08% |
| 10 E 005 1110 1250 00 000000 0000 | LUNCHROOM SUPERVISOR | 18,000.00 | 18,000.00 | 10,296.90 | -42.80% |
| 10 E 008 1110 1250 00 000000 0000 | LUNCHROOM SUPERVISOR | 41,000.00 | 34,000.00 | 41,401.66 | 21.77% |
| 10 E 010 1110 1250 00 000000 0000 | LUNCHROOM SUPERVISOR | 41,000.00 | 38,500.00 | 40,449.61 | 5.06% |
| TOTAL | SALARIES | 7,724,505.00 | 7,465,606.00 | 7,439,072.17 | -0.36% |
| 10 E 004 1110 2110 00 000000 0000 | TEACHER RETIREMENT | 217,770.00 | 215,365.00 | 215,015.87 | -0.16% |
| 10 E 005 1110 2110 00 000000 0000 | TEACHER RETIREMENT | 97,935.00 | 93,765.00 | 91,456.39 | -2.46% |
| 10 E 008 1110 2110 00 000000 0000 | TEACHER RETIREMENT | 212,740.00 | 217,335.00 | 208,802.64 | -3.93% |
| 10 E 010 1110 2110 00 000000 0000 | TEACHER RETIREMENT | 241,450.00 | 220,545.00 | 224,054.09 | 1.59% |
| 10 E 004 1110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 14,035.00 | 13,880.00 | 13,857.43 | -0.16% |
| 10 E 005 1110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 6,315.00 | 6,045.00 | 5,894.25 | -2.49% |
| 10 E 008 1110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 13,710.00 | 14,010.00 | 13,457.13 | -3.95% |
| 10 E 010 1110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 15,565.00 | 14,215.00 | 14,439.86 | 1.58% |
| 10 E 004 1110 2210 00 000000 0000 | LIFE INSURANCE | 1,505.00 | 1,460.00 | 1,474.40 | 0.99% |
| 10 E 005 1110 2210 00 000000 0000 | LIFE INSURANCE | 620.00 | 654.00 | 636.00 | -2.75% |
| 10 E 008 1110 2210 00 000000 0000 | LIFE INSURANCE | 1,370.00 | 1,460.00 | 1,432.60 | -1.88% |
| 10 E 010 1110 2210 00 000000 0000 | LIFE INSURANCE | 1,596.00 | 1,505.00 | 1,561.80 | 3.77% |
| 10 E 004 1110 2220 00 000000 0000 | MEDICAL INSURANCE | 309,830.00 | 362,750.00 | 303,293.14 | -16.39% |
| 10 E 005 1110 2220 00 000000 0000 | MEDICAL INSURANCE | 152,245.00 | 149,850.00 | 148,628.60 | -0.82% |
| 10 E 008 1110 2220 00 000000 0000 | MEDICAL INSURANCE | 477,650.00 | 504,720.00 | 446,889.56 | -11.46% |
| 10 E 010 1110 2220 00 000000 0000 | MEDICAL INSURANCE | 439,100.00 | 419,040.00 | 397,215.03 | -5.21% |
| 10 E 004 1110 2230 00 000000 0000 | DENTAL INSURANCE | 16,940.00 | 19,160.00 | 15,081.92 | -21.28% |
| 10 E 005 1110 2230 00 000000 0000 | DENTAL INSURANCE | 8,640.00 | 9,265.00 | 8,855.64 | -4.42% |
| 10 E 008 1110 2230 00 000000 0000 | DENTAL INSURANCE | 28,600.00 | 27,940.00 | 23,571.80 | -15.63% |
| 10 E 010 1110 2230 00 000000 0000 | DENTAL INSURANCE | 25,290.00 | 23,845.00 | 21,217.92 | -11.02% |
| 10 E 004 1110 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 37,990.00 | 37,570.00 | 37,509.69 | -0.16% |
| 10 E 005 1110 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 17,085.00 | 16,360.00 | 15,954.90 | 384.48% |
| 10 E 008 1110 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 37,115.00 | 37,913.00 | 36,424.67 | -3.93% |
| 10 E 010 1110 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 42,120.00 | 38,475.00 | 39,086.09 | 1.59% |
| 10 E 004 1110 2300 00 000000 0000 | TUITION REIMBURSEMENT | 8,550.00 | 5,700.00 | 8,550.00 | 50.00% |
| 10 E 005 1110 2300 00 000000 0000 | TUITION REIMBURSEMENT | 10,800.00 | 12,150.00 | 10,800.00 | -11.11% |
| 10 E 008 1110 2300 00 000000 0000 | TUITION REIMBURSEMENT | 5,550.00 | 5,400.00 | 5,550.00 | 2.78% |
| 10 E 010 1110 2300 00 000000 0000 | TUITION REIMBURSEMENT | 6,300.00 | 12,000.00 | 6,300.00 | -47.50% |
| 10 E 004 1110 2900 00 000000 0000 | 403B MATCH | 3,000.00 | 1,450.00 | 2,100.00 | 44.83% |
| 10 E 005 1110 2900 00 000000 0000 | 403B MATCH | 1,500.00 | 1,050.00 | 1,050.00 | 0.00% |
| 10 E 008 1110 2900 00 000000 0000 | 403B MATCH | 2,286.00 | 1,050.00 | 1,600.00 | 52.38% |
| 10 E 010 1110 2900 00 000000 0000 | 403B MATCH | 500.00 | 350.00 | 350.00 | 0.00% |
| TOTAL | EMPLOYEE BENEFITS | 2,453,702.00 | 2,486,277.00 | 2,322,111.42 | -6.60% |
| 10 E 004 1110 3320 00 000000 0000 | TRAVEL | 50.00 | 0.00 | 30.00 | 0.00% |
| 10 E 005 1110 3320 00 000000 0000 | TRAVEL | 400.00 | 500.00 | 362.32 | -27.54% |
| 10 E 008 1110 3320 00 000000 0000 | TRAVEL | 100.00 | 50.00 | 88.44 | 76.88% |
| 10 E 010 1110 3320 00 000000 0000 | TRAVEL | 125.00 | 200.00 | 124.27 | -37.87% |
| 10 E 004 1110 3900 00 000000 0000 | OTHER PURCHASE SERVICES | 9,400.00 | 7,500.00 | 9,398.97 | 25.32% |
| 10 E 005 1110 3900 00 000000 0000 | OTHER PURCHASE SERVICES | 7,000.00 | 1,700.00 | 6,968.57 | 309.92% |
| 10 E 008 1110 3900 00 000000 0000 | OTHER PURCHASE SERVICES | 4,600.00 | 4,100.00 | 4,611.43 | 12.47% |
| 10 E 010 1110 3900 00 000000 0000 | OTHER PURCHASE SERVICES | 4,000.00 | 5,100.00 | 3,968.60 | -22.18% |
| TOTAL | PURCHASED SERVICES | 25,675.00 | 19,150.00 | 25,552.60 | 33.43% |
| 10 E 004 1110 4100 00 000000 0000 | INSTRUCTIONAL SUPPLIES | 20,000.00 | 18,000.00 | 20,208.99 | 12.27% |
| 10 E 005 1110 4100 00 000000 0000 | INSTRUCTIONAL SUPPLIES | 9,000.00 | 9,000.00 | 8,735.20 | -2.94% |
| 10 E 008 1110 4100 00 000000 0000 | INSTRUCTIONAL SUPPLIES | 25,000.00 | 25,000.00 | 19,756.23 | -20.98% |
| 10 E 010 1110 4100 00 000000 0000 | INSTRUCTIONAL SUPPLIES | 26,000.00 | 25,100.00 | 18,131.61 | -27.76% |
| 10 E 004 1110 4160 00 000000 0000 | COPY PAPER | 12,000.00 | 14,535.00 | 14,533.00 | -0.01% |
| 10 E 005 1110 4160 00 000000 0000 | COPY PAPER | 4,500.00 | 4,085.00 | 4,083.25 | -0.04% |
| 10 E 008 1110 4160 00 000000 0000 | COPY PAPER | 9,800.00 | 15,340.00 | 15,339.50 | 0.00% |
| 10 E 010 1110 4160 00 000000 0000 | COPY PAPER | 12,100.00 | 11,865.00 | 11,861.50 | -0.03% |
| 10 E 004 1110 4170 00 000000 0000 | COPY SUPPLIES | 800.00 | 500.00 | 853.56 | 70.71% |
| 10 E 005 1110 4170 00 000000 0000 | COPY SUPPLIES | 300.00 | 300.00 | 161.79 | -46.07% |
| 10 E 008 1110 4170 00 000000 0000 | COPY SUPPLIES | 1,000.00 | 1,000.00 | 947.79 | -5.22% |
| 10 E 010 1110 4170 00 000000 0000 | COPY SUPPLIES | 1,100.00 | 1,000.00 | 880.46 | -11.95% |
| 10 E 004 1110 4200 00 000000 0000 | MISC. TEXTBOOK REPLACABLES | 18,000.00 | 25,000.00 | 17,731.23 | -29.08% |
| 10 E 005 1110 4200 00 000000 0000 | MISC. TEXTBOOK REPLACABLES | 2,600.00 | 10,000.00 | 2,517.97 | -74.82% |
| 10 E 008 1110 4200 00 000000 0000 | MISC. TEXTBOOK REPLACABLES | 11,300.00 | 25,000.00 | 11,219.00 | -55.12% |
| 10 E 010 1110 4200 00 000000 0000 | MISC. TEXTBOOK REPLACABLES | 13,000.00 | 30,000.00 | 12,739.71 | -57.53% |
| 10 E 004 1110 4250 00 000000 0000 | NURSE SUPPLIES | 0.00 | 1,100.00 | 765.95 | -30.37% |
| 10 E 005 1110 4250 00 000000 0000 | NURSE SUPPLIES | 0.00 | 900.00 | 743.80 | -17.36% |
| 10 E 008 1110 4250 00 000000 0000 | NURSE SUPPLIES | 0.00 | 1,500.00 | 831.84 | -44.54% |
| 10 E 010 1110 4250 00 000000 0000 | NURSE SUPPLIES | 0.00 | 1,700.00 | 332.78 | -80.42% |
| 10 E 004 1110 4900 00 000000 0000 | OTHER SUPPLIES | 20,000.00 | 20,000.00 | 19,819.08 | -0.90% |
| 10 E 005 1110 4900 00 000000 0000 | OTHER SUPPLIES | 3,100.00 | 11,500.00 | 3,106.95 | -72.98% |
| 10 E 008 1110 4900 00 000000 0000 | OTHER SUPPLIES | 12,500.00 | 19,000.00 | 12,404.84 | -34.71% |
| 10 E 010 1110 4900 00 000000 0000 | OTHER SUPPLIES | 5,500.00 | 10,000.00 | 5,453.05 | -45.47% |
| TOTAL | SUPPLIES | 207,600.00 | 281,425.00 | 203,159.08 | -27.81% |

| | | | | | |
|-----------------------------------|------------------------------------|----------------------|----------------------|---------------------|----------------|
| 10 E 004 1110 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 3,000.00 | 3,000.00 | 4,963.63 | 65.45% |
| | TOTAL NON-CAPITAL EQUIPMENT | 3,000.00 | 3,000.00 | 4,963.63 | 65.45% |
| | GRAND TOTAL ELEMENTARY | 10,414,482.00 | 10,255,458.00 | 9,994,858.90 | -2.54% |
| MIDDLE SCHOOL | | | | | |
| 10 E 003 1120 1100 00 000000 0000 | TEACHER SALARY | 1,440,355.00 | 1,362,550.00 | 1,308,113.83 | -4.00% |
| 10 E 011 1120 1100 00 000000 0000 | TEACHER SALARY | 3,015,795.00 | 2,698,620.00 | 2,686,393.21 | -0.45% |
| 10 E 003 1120 1120 00 000000 0000 | LONGEVITY | 3,800.00 | 2,970.00 | 2,969.92 | 0.00% |
| 10 E 011 1120 1120 00 000000 0000 | LONGEVITY | 21,465.00 | 20,550.00 | 20,511.01 | -0.19% |
| 10 E 003 1120 1130 00 000000 0000 | SALARY ADD ON | 32,765.00 | 27,760.00 | 20,808.17 | -25.04% |
| 10 E 011 1120 1130 00 000000 0000 | SALARY ADD ON | 47,985.00 | 42,350.00 | 36,389.42 | -14.07% |
| 10 E 003 1120 1135 00 000000 0000 | INTERNAL SUBSTITUTION | 8,000.00 | 3,000.00 | 6,420.00 | 114.00% |
| 10 E 011 1120 1135 00 000000 0000 | INTERNAL SUBSTITUTION | 27,000.00 | 19,000.00 | 24,940.00 | 31.26% |
| 10 E 003 1120 1140 00 000000 0000 | MENTORING SALARY | 0.00 | 1,700.00 | 1,596.82 | -6.07% |
| 10 E 011 1120 1140 00 000000 0000 | MENTORING SALARY | 6,300.00 | 3,400.00 | 3,376.44 | -0.69% |
| 10 E 003 1120 1200 00 000000 0000 | INSURANCE STIPEND | 1,206.00 | 0.00 | 0.00 | 0.00% |
| 10 E 011 1120 1200 00 000000 0000 | INSURANCE STIPEND | 14,400.00 | 12,600.00 | 14,400.00 | 14.29% |
| 10 E 003 1120 1230 00 000000 0000 | HOMEBOUND TEACHER PAY | 500.00 | 500.00 | 0.00 | -100.00% |
| 10 E 011 1120 1230 00 000000 0000 | HOMEBOUND TEACHER PAY | 1,000.00 | 3,100.00 | 816.40 | -73.66% |
| 10 E 003 1120 1250 00 000000 0000 | LUNCHROOM SUPERVISOR | 15,500.00 | 15,500.00 | 15,253.72 | -1.59% |
| 10 E 011 1120 1250 00 000000 0000 | LUNCHROOM SUPERVISOR | 33,500.00 | 33,500.00 | 28,904.10 | -13.72% |
| | TOTAL SALARIES | 4,669,571.00 | 4,247,100.00 | 4,170,893.04 | -1.79% |
| 10 E 003 1120 2110 00 000000 0000 | TEACHER RETIREMENT | 151,950.00 | 143,450.00 | 136,250.69 | -5.02% |
| 10 E 011 1120 2110 00 000000 0000 | TEACHER RETIREMENT | 322,185.00 | 283,095.00 | 283,057.82 | -0.01% |
| 10 E 003 1120 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 9,795.00 | 9,245.00 | 8,781.66 | -5.01% |
| 10 E 011 1120 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 20,765.00 | 18,245.00 | 18,242.95 | 385.01% |
| 10 E 003 1120 2210 00 000000 0000 | LIFE INSURANCE | 870.00 | 892.00 | 866.57 | -2.85% |
| 10 E 011 1120 2210 00 000000 0000 | LIFE INSURANCE | 1,760.00 | 1,690.00 | 1,679.60 | -0.62% |
| 10 E 003 1120 2220 00 000000 0000 | MEDICAL INSURANCE | 288,950.00 | 295,410.00 | 282,738.77 | -4.29% |
| 10 E 011 1120 2220 00 000000 0000 | MEDICAL INSURANCE | 478,650.00 | 465,920.00 | 441,365.97 | -5.27% |
| 10 E 003 1120 2230 00 000000 0000 | DENTAL INSURANCE | 17,050.00 | 16,265.00 | 15,152.02 | -6.84% |
| 10 E 011 1120 2230 00 000000 0000 | DENTAL INSURANCE | 27,720.00 | 24,550.00 | 23,030.64 | -6.19% |
| 10 E 003 1120 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 28,170.00 | 26,610.00 | 23,768.52 | -10.68% |
| 10 E 011 1120 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 56,210.00 | 49,385.00 | 49,379.16 | -0.01% |
| 10 E 003 1120 2300 00 000000 0000 | TUITION REIMBURSEMENT | 11,700.00 | 10,000.00 | 11,700.00 | 17.00% |
| 10 E 011 1120 2300 00 000000 0000 | TUITION REIMBURSEMENT | 12,600.00 | 14,000.00 | 12,600.00 | -10.00% |
| 10 E 003 1120 2900 00 000000 0000 | 403B MATCH | 3,125.00 | 1,950.00 | 2,184.50 | 12.03% |
| 10 E 011 1120 2900 00 000000 0000 | 403B MATCH | 2,000.00 | 1,400.00 | 1,400.00 | 0.00% |
| | TOTAL EMPLOYEE BENEFITS | 1,433,500.00 | 1,362,107.00 | 1,312,198.87 | -3.66% |
| 10 E 003 1120 3190 00 000000 0000 | PURCHASE SERVICES | 2,000.00 | 4,000.00 | 6,109.76 | 52.74% |
| 10 E 011 1120 3190 00 000000 0000 | PURCHASE SERVICES | 5,000.00 | 5,000.00 | 950.00 | -81.00% |
| 10 E 003 1120 3230 00 000000 0000 | REPAIRS | 1,500.00 | 1,500.00 | 427.05 | -71.53% |
| 10 E 011 1120 3230 00 000000 0000 | REPAIRS | 3,950.00 | 3,950.00 | 2,392.05 | -39.44% |
| 10 E 003 1120 3320 00 000000 0000 | TRAVEL | 500.00 | 500.00 | 463.76 | -7.25% |
| 10 E 011 1120 3320 00 000000 0000 | TRAVEL | 300.00 | 300.00 | 226.71 | -24.43% |
| 10 E 003 1120 3900 00 000000 0000 | OTHER PURCHASED SERVICES | 12,000.00 | 8,500.00 | 12,289.45 | 44.58% |
| 10 E 011 1120 3900 00 000000 0000 | OTHER PURCHASED SERVICES | 3,000.00 | 5,000.00 | 0.00 | -100.00% |
| | TOTAL PURCHASED SERVICES | 28,250.00 | 28,750.00 | 22,858.78 | -20.49% |
| 10 E 003 1120 4100 00 000000 0000 | INSTRUCTIONAL SUPPLIES | 15,000.00 | 15,000.00 | 12,072.69 | -19.52% |
| 10 E 011 1120 4100 00 000000 0000 | INSTRUCTIONAL SUPPLIES | 18,820.00 | 18,815.00 | 1,883.17 | -89.99% |
| 10 E 011 1120 4110 00 000000 0000 | INSTRUCTIONAL SUPPLIES | 16,500.00 | 16,500.00 | 15,418.15 | -6.56% |
| 10 E 003 1120 4160 00 000000 0000 | COPY PAPER | 3,900.00 | 3,000.00 | 2,944.00 | -1.87% |
| 10 E 011 1120 4160 00 000000 0000 | COPY PAPER | 5,100.00 | 6,560.00 | 6,555.15 | -0.07% |
| 10 E 003 1120 4170 00 000000 0000 | COPY SUPPLIES | 150.00 | 150.00 | 458.23 | 205.49% |
| 10 E 011 1120 4170 00 000000 0000 | COPY SUPPLIES | 750.00 | 660.00 | 739.73 | 12.08% |
| 10 E 003 1120 4200 00 000000 0000 | MISC. TEXTBOOK REPLACABLES | 10,000.00 | 10,000.00 | 1,334.12 | -86.66% |
| 10 E 011 1120 4200 00 000000 0000 | MISC. TEXTBOOK REPLACABLES | 20,000.00 | 20,000.00 | 2,916.55 | -85.42% |
| 10 E 003 1120 4250 00 000000 0000 | NURSE SUPPLIES | 0.00 | 1,500.00 | 1,417.32 | -5.51% |
| 10 E 011 1120 4250 00 000000 0000 | NURSE SUPPLIES | 0.00 | 1,073.00 | 1,736.21 | 61.81% |
| 10 E 003 1120 4900 00 000000 0000 | OTHER SUPPLIES | 5,000.00 | 0.00 | 5,753.57 | 0.00% |
| 10 E 011 1120 4900 00 000000 0000 | OTHER SUPPLIES | 40,000.00 | 20,000.00 | 39,964.60 | 99.82% |
| | TOTAL SUPPLIES | 135,220.00 | 113,258.00 | 93,193.49 | -17.72% |
| 10 E 003 1120 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 7,000.00 | 7,000.00 | 0.00 | -100.00% |
| 10 E 011 1120 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 5,000.00 | 0.00 | 1,746.40 | 0.00% |
| | TOTAL NON-CAPITAL EQUIPMENT | 12,000.00 | 7,000.00 | 1,746.40 | -75.05% |
| | GRAND TOTAL MIDDLE SCHOOL | 6,278,541.00 | 5,758,215.00 | 5,600,890.58 | -2.73% |
| HIGH SCHOOL | | | | | |
| 10 E 002 1130 1100 00 000000 0000 | HIGH SCHOOL SALARIES | 5,807,285.00 | 5,222,850.00 | 5,319,511.60 | 1.85% |
| 10 E 002 1130 1120 00 000000 0000 | LONGEVITY | 39,040.00 | 33,690.00 | 33,690.03 | 0.00% |

| | | | | | |
|-----------------------------------|---------------------------------|---------------------|---------------------|---------------------|----------------|
| 10 E 002 1130 1130 00 000000 0000 | SALARY ADD ON | 183,290.00 | 148,520.00 | 143,872.68 | -3.13% |
| 10 E 002 1130 1135 00 000000 0000 | INTERNAL SUBSTITUTION | 75,000.00 | 50,000.00 | 71,645.00 | 43.29% |
| 10 E 002 1130 1140 00 000000 0000 | MENTORING SALARY | 6,270.00 | 11,600.00 | 11,230.32 | -3.19% |
| 10 E 002 1130 1150 00 000000 0000 | ACCOMPANIST | 32,755.00 | 30,795.00 | 8,617.61 | -72.02% |
| 10 E 002 1130 1200 00 000000 0000 | INSURANCE STIPEND | 13,000.00 | 8,695.00 | 12,894.00 | 48.29% |
| 10 E 002 1130 1230 00 000000 0000 | HOMEBOUND TEACHER PAY | 1,000.00 | 500.00 | 1,000.00 | 100.00% |
| 10 E 002 1130 1250 00 000000 0000 | LUNCHROOM SUPERVISION | 55,000.00 | 50,000.00 | 52,196.14 | 4.39% |
| TOTAL | SALARIES | 6,212,640.00 | 5,556,650.00 | 5,654,657.38 | 1.76% |
| 10 E 002 1130 2110 00 000000 0000 | TEACHER RETIREMENT | 624,500.00 | 558,260.00 | 572,647.71 | 2.58% |
| 10 E 002 1130 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 40,250.00 | 35,980.00 | 36,900.65 | 2.56% |
| 10 E 002 1130 2210 00 000000 0000 | LIFE INSURANCE | 3,670.00 | 3,395.00 | 3,402.76 | 0.23% |
| 10 E 002 1130 2220 00 000000 0000 | MEDICAL INSURANCE | 1,026,895.00 | 995,736.00 | 947,395.20 | -4.85% |
| 10 E 002 1130 2230 00 000000 0000 | DENTAL INSURANCE | 60,460.00 | 54,610.00 | 56,595.96 | 3.64% |
| 10 E 002 1130 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 108,950.00 | 97,390.00 | 99,891.85 | 2.57% |
| 10 E 002 1130 2300 00 000000 0000 | TUITION REIMBURSEMENT | 31,500.00 | 40,000.00 | 31,500.00 | -21.25% |
| 10 E 002 1130 2900 00 000000 0000 | 403B MATCH | 5,415.00 | 2,900.00 | 3,790.50 | 30.71% |
| TOTAL | EMPLOYEE BENEFITS | 1,901,640.00 | 1,788,271.00 | 1,752,124.63 | -2.02% |
| 10 E 002 1130 3100 00 000000 0000 | POLICE/LIASON OFFICER | 63,400.00 | 55,000.00 | 52,865.92 | -3.88% |
| 10 E 002 1130 3190 00 000000 0000 | PURCHASE SERVICES | 16,000.00 | 16,000.00 | 44,229.31 | 176.43% |
| 10 E 002 1130 3230 00 000000 0000 | REPAIRS | 10,000.00 | 9,000.00 | 6,885.45 | -23.50% |
| 10 E 002 1130 3320 00 000000 0000 | TRAVEL | 0.00 | 150.00 | 0.00 | -100.00% |
| 10 E 002 1130 3900 00 000000 0000 | OTHER PURCHASE SERVICES | 60,000.00 | 60,000.00 | 67,076.47 | 11.79% |
| TOTAL | PURCHASED SERVICES | 149,400.00 | 140,150.00 | 171,057.15 | 22.05% |
| 10 E 002 1130 4100 00 000000 0000 | GENERAL SUPPLIES | 49,000.00 | 48,680.00 | 44,596.66 | -8.39% |
| 10 E 002 1130 4100 01 000000 0000 | GENERAL SUPPLIES | 60,000.00 | 0.00 | 211,221.00 | 386.00% |
| 10 E 002 1130 4160 00 000000 0000 | COPY PAPER | 16,200.00 | 4,010.00 | 4,002.00 | -0.20% |
| 10 E 002 1130 4200 00 000000 0000 | MISC. TEXTBOOK REPLACABLES | 75,000.00 | 75,000.00 | 43,604.15 | -41.86% |
| 10 E 002 1130 4250 00 000000 0000 | NURSE SUPPLIES | 0.00 | 900.00 | 740.37 | -17.74% |
| 10 E 002 1130 4900 00 000000 0000 | OTHER SUPPLIES | 22,000.00 | 22,000.00 | 45,708.54 | 107.77% |
| TOTAL | SUPPLIES | 222,200.00 | 150,590.00 | 349,872.72 | 132.33% |
| 10 E 002 1130 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 54,500.00 | 900,000.00 | 47,102.00 | -94.77% |
| TOTAL | NON-CAPITAL EQUIPMENT | 54,500.00 | 900,000.00 | 47,102.00 | -94.77% |
| GRAND TOTAL | HIGH SCHOOL | 8,540,380.00 | 8,535,661.00 | 7,974,813.88 | -6.57% |
| SPECIAL PROGRAMS | | | | | |
| 10 E 001 1200 1220 00 000000 0000 | SPECIAL ED TEACHER SUBSTITUTES | 12,000.00 | 20,000.00 | 10,770.00 | -46.15% |
| 10 E 001 1200 1240 00 000000 0000 | SPECIAL ED PARA-PRO/SUBSTITUTES | 62,000.00 | 46,000.00 | 60,155.54 | 30.77% |
| TOTAL | SALARIES | 74,000.00 | 66,000.00 | 70,925.54 | 7.46% |
| 10 E 001 1200 2160 00 000000 0000 | SPEC ED SUB TRS SURCHARGE | 65.00 | 100.00 | 61.01 | -38.99% |
| 10 E 001 1200 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 70.00 | 105.00 | 70.46 | -32.90% |
| TOTAL | EMPLOYEE BENEFITS | 135.00 | 205.00 | 131.47 | -35.87% |
| GRAND TOTAL | SPECIAL PROGRAMS | 74,135.00 | 66,205.00 | 71,057.01 | 7.33% |
| SPECIAL EDUCATION | | | | | |
| 10 E 001 1205 1000 00 000000 0000 | FACILITATOR EXTENDED PROGRAMS | 101,340.00 | 96,282.00 | 95,929.43 | -0.37% |
| 10 E 001 1205 1100 00 000000 0000 | SPECIAL ED COORDINATORS | 274,675.00 | 272,119.00 | 280,285.68 | 3.00% |
| 10 E 001 1205 1110 00 000000 0000 | BCBA SALARY | 58,905.00 | 0.00 | 0.00 | 0.00% |
| 10 E 002 1205 1000 00 000000 0000 | ALOP TEACHER SALARY | 70,335.00 | 68,730.00 | 49,973.48 | -27.29% |
| 10 E 002 1205 1100 00 000000 0000 | SPECIAL ED TEACHER SALARY | 659,365.00 | 561,125.00 | 406,803.23 | -27.50% |
| 10 E 003 1205 1100 00 000000 0000 | SPECIAL ED TEACHER SALARY | 162,295.00 | 129,120.00 | 105,489.22 | -18.30% |
| 10 E 004 1205 1100 00 000000 0000 | SPECIAL ED TEACHER SALARY | 422,340.00 | 301,210.00 | 291,989.04 | -3.06% |
| 10 E 005 1205 1100 00 000000 0000 | SPECIAL ED TEACHER SALARY | 162,385.00 | 172,640.00 | 166,185.58 | -3.74% |
| 10 E 008 1205 1100 00 000000 0000 | SPECIAL ED TEACHER SALARY | 261,805.00 | 197,545.00 | 130,488.14 | -33.95% |
| 10 E 010 1205 1100 00 000000 0000 | SPECIAL ED TEACHER SALARY | 210,360.00 | 162,965.00 | 139,468.01 | -14.42% |
| 10 E 011 1205 1100 00 000000 0000 | SPECIAL ED TEACHER SALARY | 349,660.00 | 289,400.00 | 309,630.41 | 6.99% |
| 10 E 005 1205 1120 00 000000 0000 | LONGEVITY | 2,850.00 | 2,784.00 | 2,784.30 | 0.01% |
| 10 E 001 1205 1130 00 000000 0000 | SALARY ADD ON-SPECIAL ED | 0.00 | 1,100.00 | 434.48 | -60.50% |
| 10 E 002 1205 1130 00 000000 0000 | SALARY ADD ON | 3,600.00 | 2,000.00 | 0.00 | -100.00% |
| 10 E 003 1205 1130 00 000000 0000 | SALARY ADD ON | 870.00 | 275.00 | 0.00 | -100.00% |
| 10 E 004 1205 1130 00 000000 0000 | SALARY ADD ON | 2,310.00 | 200.00 | 0.00 | -100.00% |
| 10 E 005 1205 1130 00 000000 0000 | SALARY ADD ON | 895.00 | 600.00 | 0.00 | -100.00% |
| 10 E 008 1205 1130 00 000000 0000 | SALARY ADD ON | 1,405.00 | 200.00 | 0.00 | -100.00% |
| 10 E 010 1205 1130 00 000000 0000 | SALARY ADD ON | 1,145.00 | 500.00 | 0.00 | -100.00% |
| 10 E 011 1205 1130 00 000000 0000 | SALARY ADD ON | 1,900.00 | 800.00 | 0.00 | -100.00% |
| 10 E 002 1205 1140 00 000000 0000 | MENTOR | 5,020.00 | 1,980.00 | 1,544.32 | -22.00% |
| 10 E 003 1205 1140 00 000000 0000 | MENTOR | 2,510.00 | 565.00 | 0.00 | -100.00% |
| 10 E 004 1205 1140 00 000000 0000 | MENTOR | 2,510.00 | 0.00 | 0.00 | 0.00% |
| 10 E 005 1205 1140 00 000000 0000 | MENTOR | 1,255.00 | 0.00 | 0.00 | 0.00% |
| 10 E 008 1205 1140 00 000000 0000 | MENTOR | 3,765.00 | 1,700.00 | 1,125.48 | -33.80% |

| | | | | | |
|-----------------------------------|--------------------------------------|---------------------|---------------------|---------------------|----------------|
| 10 E 010 1205 1140 00 000000 0000 | MENTOR | 1,570.00 | 565.00 | 1,884.96 | 233.62% |
| 10 E 011 1205 1140 00 000000 0000 | MENTOR | 2,510.00 | 0.00 | 183.00 | 0.00% |
| 10 E 002 1205 1150 00 000000 0000 | SPECIAL ED AIDE SALARY | 123,990.00 | 118,992.00 | 113,185.47 | -4.88% |
| 10 E 003 1205 1150 00 000000 0000 | SPECIAL ED AIDE SALARY | 73,760.00 | 47,767.00 | 42,607.04 | -10.80% |
| 10 E 004 1205 1150 00 000000 0000 | SPECIAL ED AIDE SALARY | 209,915.00 | 179,625.00 | 167,577.83 | -6.71% |
| 10 E 005 1205 1150 00 000000 0000 | SPECIAL ED AIDE SALARY | 69,115.00 | 90,190.00 | 85,883.87 | -4.77% |
| 10 E 008 1205 1150 00 000000 0000 | SPECIAL ED AIDE SALARY | 176,195.00 | 146,723.00 | 148,689.60 | 1.34% |
| 10 E 010 1205 1150 00 000000 0000 | SPECIAL ED AIDE SALARY | 177,875.00 | 149,144.00 | 130,827.95 | -12.28% |
| 10 E 011 1205 1150 00 000000 0000 | SPECIAL ED AIDE SALARY | 123,565.00 | 117,140.00 | 113,348.84 | -3.24% |
| 10 E 002 1205 1200 00 000000 0000 | INSURANCE STIPEND | 1,500.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 003 1205 1200 00 000000 0000 | INSURANCE STIPEND | 3,600.00 | 1,800.00 | 4,500.00 | 150.00% |
| 10 E 004 1205 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 3,600.00 | 3,600.00 | 0.00% |
| 10 E 005 1205 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 008 1205 1200 00 000000 0000 | INSURANCE STIPEND | 5,400.00 | 5,400.00 | 7,200.00 | 33.33% |
| 10 E 010 1205 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 5,400.00 | 200.00% |
| 10 E 011 1205 1200 00 000000 0000 | INSURANCE STIPEND | 7,200.00 | 1,800.00 | 7,200.00 | 300.00% |
| TOTAL SALARIES | | 3,745,095.00 | 3,131,986.00 | 2,817,819.36 | -10.03% |
| 10 E 001 1205 2110 00 000000 0000 | TEACHER RETIREMENT | 37,900.00 | 37,260.00 | 37,963.42 | 1.89% |
| 10 E 002 1205 2110 00 000000 0000 | TEACHER RETIREMENT | 74,950.00 | 61,605.00 | 46,930.89 | -23.82% |
| 10 E 003 1205 2110 00 000000 0000 | TEACHER RETIREMENT | 16,525.00 | 10,715.00 | 10,789.14 | 0.69% |
| 10 E 004 1205 2110 00 000000 0000 | TEACHER RETIREMENT | 43,120.00 | 30,522.00 | 29,419.57 | -3.61% |
| 10 E 005 1205 2110 00 000000 0000 | TEACHER RETIREMENT | 16,900.00 | 17,765.00 | 16,978.31 | -4.43% |
| 10 E 008 1205 2110 00 000000 0000 | TEACHER RETIREMENT | 26,475.00 | 19,390.00 | 13,728.87 | -29.20% |
| 10 E 010 1205 2110 00 000000 0000 | TEACHER RETIREMENT | 21,410.00 | 17,000.00 | 14,336.05 | -15.67% |
| 10 E 011 1205 2110 00 000000 0000 | TEACHER RETIREMENT | 35,690.00 | 29,705.00 | 31,565.61 | 6.26% |
| 10 E 001 1205 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 2,445.00 | 2,400.00 | 2,446.64 | 1.94% |
| 10 E 002 1205 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 4,850.00 | 3,970.00 | 3,024.55 | 387.81% |
| 10 E 003 1205 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,065.00 | 690.00 | 692.91 | 0.42% |
| 10 E 004 1205 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 2,780.00 | 1,970.00 | 1,896.19 | -3.75% |
| 10 E 005 1205 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,090.00 | 1,145.00 | 1,092.47 | -4.59% |
| 10 E 008 1205 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,705.00 | 1,250.00 | 884.73 | -29.22% |
| 10 E 010 1205 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,380.00 | 1,095.00 | 924.05 | -15.61% |
| 10 E 011 1205 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 2,300.00 | 1,915.00 | 2,034.46 | 6.24% |
| 10 E 001 1205 2210 00 000000 0000 | LIFE INSURANCE | 505.00 | 365.00 | 357.20 | -2.14% |
| 10 E 002 1205 2210 00 000000 0000 | LIFE INSURANCE | 550.00 | 410.00 | 344.81 | -15.90% |
| 10 E 003 1205 2210 00 000000 0000 | LIFE INSURANCE | 140.00 | 92.00 | 91.20 | -0.87% |
| 10 E 004 1205 2210 00 000000 0000 | LIFE INSURANCE | 275.00 | 182.00 | 178.52 | -1.91% |
| 10 E 005 1205 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 87.40 | -5.00% |
| 10 E 008 1205 2210 00 000000 0000 | LIFE INSURANCE | 185.00 | 160.00 | 99.64 | -37.73% |
| 10 E 010 1205 2210 00 000000 0000 | LIFE INSURANCE | 140.00 | 114.00 | 98.80 | -13.33% |
| 10 E 011 1205 2210 00 000000 0000 | LIFE INSURANCE | 140.00 | 228.00 | 257.56 | 12.96% |
| 10 E 001 1205 2220 00 000000 0000 | MEDICAL INSURANCE | 114,900.00 | 79,240.00 | 76,327.98 | -3.67% |
| 10 E 002 1205 2220 00 000000 0000 | MEDICAL INSURANCE | 214,810.00 | 160,500.00 | 135,430.61 | -15.62% |
| 10 E 003 1205 2220 00 000000 0000 | MEDICAL INSURANCE | 54,500.00 | 10,965.00 | 16,357.76 | 49.18% |
| 10 E 004 1205 2220 00 000000 0000 | MEDICAL INSURANCE | 154,655.00 | 92,960.00 | 104,818.81 | 12.76% |
| 10 E 005 1205 2220 00 000000 0000 | MEDICAL INSURANCE | 53,070.00 | 36,930.00 | 62,489.28 | 69.21% |
| 10 E 008 1205 2220 00 000000 0000 | MEDICAL INSURANCE | 96,700.00 | 67,930.00 | 54,889.36 | -19.20% |
| 10 E 010 1205 2220 00 000000 0000 | MEDICAL INSURANCE | 107,685.00 | 91,090.00 | 70,186.64 | -22.95% |
| 10 E 011 1205 2220 00 000000 0000 | MEDICAL INSURANCE | 43,510.00 | 101,506.00 | 67,558.16 | -33.44% |
| 10 E 001 1205 2230 00 000000 0000 | DENTAL INSURANCE | 6,915.00 | 4,215.00 | 4,071.90 | -3.40% |
| 10 E 002 1205 2230 00 000000 0000 | DENTAL INSURANCE | 11,750.00 | 7,975.00 | 7,021.91 | -11.95% |
| 10 E 003 1205 2230 00 000000 0000 | DENTAL INSURANCE | 3,050.00 | 0.00 | 275.28 | 0.00% |
| 10 E 004 1205 2230 00 000000 0000 | DENTAL INSURANCE | 8,485.00 | 5,025.00 | 5,780.29 | 15.03% |
| 10 E 005 1205 2230 00 000000 0000 | DENTAL INSURANCE | 3,050.00 | 3,370.00 | 3,311.68 | -1.73% |
| 10 E 008 1205 2230 00 000000 0000 | DENTAL INSURANCE | 5,505.00 | 3,645.00 | 2,935.36 | -19.47% |
| 10 E 010 1205 2230 00 000000 0000 | DENTAL INSURANCE | 5,435.00 | 4,746.00 | 3,020.76 | -36.35% |
| 10 E 011 1205 2230 00 000000 0000 | DENTAL INSURANCE | 2,460.00 | 5,640.00 | 2,937.44 | -47.92% |
| 10 E 001 1205 2250 00 000000 0000 | LONG TERM DISABILITY | 1,150.00 | 904.00 | 978.24 | 8.21% |
| 10 E 001 1205 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 6,610.00 | 6,500.00 | 6,622.68 | 1.89% |
| 10 E 002 1205 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 13,075.00 | 10,750.00 | 8,186.90 | -23.84% |
| 10 E 003 1205 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,885.00 | 1,870.00 | 1,879.22 | 0.49% |
| 10 E 004 1205 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 7,500.00 | 5,325.00 | 5,132.08 | -3.62% |
| 10 E 005 1205 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,950.00 | 3,100.00 | 2,928.17 | -5.54% |
| 10 E 008 1205 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 4,615.00 | 3,385.00 | 2,394.89 | -29.25% |
| 10 E 010 1205 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 3,730.00 | 2,970.00 | 2,500.80 | -15.80% |
| 10 E 011 1205 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 6,250.00 | 5,185.00 | 5,506.38 | 6.20% |
| 10 E 008 1205 2900 00 000000 0000 | 403B MATCH | 500.00 | 200.00 | 0.00 | -100.00% |
| 10 E 011 1205 2900 00 000000 0000 | 403B MATCH | 500.00 | 700.00 | 350.00 | -50.00% |
| TOTAL EMPLOYEE BENEFITS | | 1,228,857.00 | 956,666.00 | 870,115.57 | -9.05% |
| 10 E 001 1205 3100 00 000000 0000 | PURCHASE SERVICES | 50,000.00 | 50,000.00 | 44,081.25 | -11.84% |
| 10 E 001 1205 3190 00 000000 0000 | OTHER PROFESSIONAL SERVICES-NIA FEES | 15,000.00 | 20,000.00 | 9,158.18 | -54.21% |
| 10 E 001 1205 3320 00 000000 0000 | TRAVEL | 1,500.00 | 1,500.00 | 1,934.14 | 28.94% |
| 10 E 008 1205 3320 00 000000 0000 | TRAVEL | 50.00 | 50.00 | 0.00 | -100.00% |

| | | | | | |
|-----------------------------------|--------------------------------------|---------------------|---------------------|---------------------|-----------------|
| 10 E 010 1205 3320 00 000000 0000 | TRAVEL | 50.00 | 250.00 | 0.00 | -100.00% |
| | TOTAL PURCHASED SERVICES | 66,600.00 | 71,800.00 | 55,173.57 | -23.16% |
| 10 E 001 1205 4100 00 000000 0000 | GENERAL SUPPLIES | 1,500.00 | 1,500.00 | 142.07 | -90.53% |
| 10 E 002 1205 4100 00 000000 0000 | GENERAL SUPPLIES | 2,200.00 | 2,200.00 | 1,792.28 | -18.53% |
| 10 E 003 1205 4100 00 000000 0000 | GENERAL SUPPLIES | 350.00 | 350.00 | 337.28 | -3.63% |
| 10 E 004 1205 4100 00 000000 0000 | GENERAL SUPPLIES | 2,000.00 | 2,500.00 | 1,881.46 | -24.74% |
| 10 E 005 1205 4100 00 000000 0000 | GENERAL SUPPLIES | 125.00 | 125.00 | 73.68 | -41.06% |
| 10 E 008 1205 4100 00 000000 0000 | GENERAL SUPPLIES | 750.00 | 750.00 | 138.57 | -81.52% |
| 10 E 010 1205 4100 00 000000 0000 | GENERAL SUPPLIES | 1,000.00 | 1,000.00 | 628.31 | -37.17% |
| 10 E 011 1205 4100 00 000000 0000 | GENERAL SUPPLIES | 1,100.00 | 800.00 | 1,035.19 | 29.40% |
| | TOTAL SUPPLIES | 9,025.00 | 9,225.00 | 6,028.84 | -34.65% |
| 10 E 001 1205 6400 00 000000 0000 | DUES/FEES | 2,000.00 | 2,000.00 | 750.00 | -62.50% |
| | TOTAL OTHER OBJECTS | 2,000.00 | 2,000.00 | 750.00 | -62.50% |
| 10 E 001 1205 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 4,000.00 | 4,000.00 | 0.00 | -100.00% |
| | TOTAL NON-CAPITAL EQUIPMENT | 4,000.00 | 4,000.00 | 0.00 | -100.00% |
| | GRAND TOTAL SPECIAL EDUCATION | 5,055,577.00 | 4,175,677.00 | 3,749,887.34 | -10.20% |
| EARLY CHILDHOOD | | | | | |
| 10 E 001 1225 1000 00 000000 0000 | EARLY CHILDHOOD COORDINATOR SALARY | 0.00 | 20,000.00 | 0.00 | -100.00% |
| 10 E 001 1225 1110 00 000000 0000 | EARLY CHILDHOOD SECRETARY SALARY | 33,925.00 | 32,232.00 | 32,232.18 | 0.00% |
| 10 E 004 1225 1100 00 000000 0000 | EARLY CHILDHOOD SALARIES | 141,025.00 | 133,988.00 | 132,067.48 | -1.43% |
| 10 E 008 1225 1100 00 000000 0000 | EARLY CHILDHOOD SALARIES | 318,995.00 | 122,200.00 | 127,017.46 | 3.94% |
| 10 E 010 1225 1100 00 000000 0000 | EARLY CHILDHOOD SALARIES | 130,345.00 | 221,895.00 | 210,918.08 | -4.95% |
| 10 E 008 1225 1120 00 000000 0000 | LONGEVITY | 1,900.00 | 1,856.00 | 1,856.20 | 388.01% |
| 10 E 004 1225 1130 00 000000 0000 | SALARY ADD ON | 1,000.00 | 1,000.00 | 301.71 | -69.83% |
| 10 E 008 1225 1130 00 000000 0000 | SALARY ADD ON | 1,000.00 | 1,000.00 | 814.04 | -18.60% |
| 10 E 010 1225 1130 00 000000 0000 | SALARY ADD ON | 1,000.00 | 1,000.00 | 399.42 | -60.06% |
| 10 E 004 1225 1140 00 000000 0000 | MENTOR | 0.00 | 1,135.00 | 942.48 | -16.96% |
| 10 E 008 1225 1140 00 000000 0000 | MENTOR | 1,255.00 | 0.00 | 0.00 | 0.00% |
| 10 E 010 1225 1140 00 000000 0000 | MENTOR | 1,255.00 | 0.00 | 0.00 | 0.00% |
| 10 E 004 1225 1150 00 000000 0000 | AIDE SALARIES | 41,045.00 | 69,990.00 | 46,156.27 | -34.05% |
| 10 E 008 1225 1150 00 000000 0000 | AIDE SALARIES | 130,430.00 | 53,010.00 | 43,602.89 | -17.75% |
| 10 E 010 1225 1150 00 000000 0000 | AIDE SALARIES | 44,970.00 | 85,620.00 | 91,056.49 | 6.35% |
| 10 E 004 1225 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 3,600.00 | 0.00 | -100.00% |
| 10 E 008 1225 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 0.00 | 1,500.00 | 0.00% |
| 10 E 010 1225 1200 00 000000 0000 | INSURANCE STIPEND | 5,400.00 | 5,400.00 | 3,600.00 | -33.33% |
| | TOTAL SALARIES | 857,145.00 | 753,926.00 | 692,464.70 | -8.15% |
| 10 E 001 1225 2110 00 000000 0000 | TEACHER RETIREMENT | 0.00 | 1,980.00 | 0.00 | -100.00% |
| 10 E 004 1225 2110 00 000000 0000 | TEACHER RETIREMENT | 14,305.00 | 13,720.00 | 13,540.77 | -1.31% |
| 10 E 008 1225 2110 00 000000 0000 | TEACHER RETIREMENT | 32,575.00 | 12,355.00 | 13,188.22 | 6.74% |
| 10 E 010 1225 2110 00 000000 0000 | TEACHER RETIREMENT | 13,372.00 | 22,480.00 | 21,255.56 | -5.45% |
| 10 E 001 1225 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 0.00 | 128.00 | 0.00 | -100.00% |
| 10 E 004 1225 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 925.00 | 885.00 | 872.60 | -1.40% |
| 10 E 008 1225 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 2,100.00 | 800.00 | 849.89 | 6.24% |
| 10 E 010 1225 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 870.00 | 1,045.00 | 1,369.99 | 31.10% |
| 10 E 001 1225 2210 00 000000 0000 | LIFE INSURANCE | 25.00 | 35.00 | 22.80 | -34.86% |
| 10 E 004 1225 2210 00 000000 0000 | LIFE INSURANCE | 95.00 | 137.00 | 91.20 | -33.43% |
| 10 E 008 1225 2210 00 000000 0000 | LIFE INSURANCE | 185.00 | 92.00 | 91.20 | -0.87% |
| 10 E 010 1225 2210 00 000000 0000 | LIFE INSURANCE | 95.00 | 70.00 | 129.20 | 84.57% |
| 10 E 001 1225 2220 00 000000 0000 | MEDICAL INSURANCE | 14,360.00 | 17,000.00 | 14,212.12 | -16.40% |
| 10 E 004 1225 2220 00 000000 0000 | MEDICAL INSURANCE | 48,995.00 | 21,930.00 | 42,916.60 | 95.70% |
| 10 E 008 1225 2220 00 000000 0000 | MEDICAL INSURANCE | 117,060.00 | 49,340.00 | 29,240.88 | -40.74% |
| 10 E 010 1225 2220 00 000000 0000 | MEDICAL INSURANCE | 10,990.00 | 51,790.00 | 44,223.50 | -14.61% |
| 10 E 001 1225 2230 00 000000 0000 | DENTAL INSURANCE | 845.00 | 1,000.00 | 775.36 | -22.46% |
| 10 E 004 1225 2230 00 000000 0000 | DENTAL INSURANCE | 1,860.00 | 550.00 | 1,611.16 | 192.94% |
| 10 E 008 1225 2230 00 000000 0000 | DENTAL INSURANCE | 6,320.00 | 2,480.00 | 1,537.76 | -37.99% |
| 10 E 010 1225 2230 00 000000 0000 | DENTAL INSURANCE | 1,410.00 | 3,025.00 | 3,026.96 | 0.06% |
| 10 E 001 1225 2250 00 000000 0000 | LONG TERM DISABILITY | 0.00 | 40.00 | 0.00 | -100.00% |
| 10 E 001 1225 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 0.00 | 345.00 | 0.00 | -100.00% |
| 10 E 004 1225 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,495.00 | 3,395.00 | 2,362.24 | -30.42% |
| 10 E 008 1225 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 5,685.00 | 2,155.00 | 2,300.62 | 6.76% |
| 10 E 010 1225 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,335.00 | 3,925.00 | 3,708.11 | -5.53% |
| 10 E 008 1225 2900 00 000000 0000 | 403B MATCH | 500.00 | 0.00 | 60.00 | 0.00% |
| | TOTAL EMPLOYEE BENEFITS | 277,402.00 | 210,702.00 | 197,386.74 | -6.32% |
| 10 E 010 1225 3100 00 000000 0000 | PURCHASE SERVICES | 2,000.00 | 5,000.00 | 0.00 | -100.00% |
| | TOTAL PURCHASED SERVICES | 2,000.00 | 5,000.00 | 0.00 | -100.00% |
| 10 E 004 1225 4100 00 000000 0000 | GENERAL SUPPLIES | 2,000.00 | 1,500.00 | 2,521.13 | 68.08% |
| 10 E 008 1225 4100 00 000000 0000 | GENERAL SUPPLIES | 2,000.00 | 750.00 | 1,805.93 | 140.79% |
| 10 E 010 1225 4100 00 000000 0000 | GENERAL SUPPLIES | 2,000.00 | 2,200.00 | 1,698.93 | -22.78% |

| | | | | | |
|-----------------------------------|--|---------------------|-------------------|-------------------|-----------------|
| | TOTAL SUPPLIES | 6,000.00 | 4,450.00 | 6,025.99 | 35.42% |
| 10 E 001 1225 6400 00 000000 0000 | DUES/FEES | 0.00 | 200.00 | 0.00 | -100.00% |
| | TOTAL OTHER OBJECTS | 0.00 | 200.00 | 0.00 | -100.00% |
| | GRAND TOTAL EARLY CHILDHOOD | 1,142,547.00 | 974,278.00 | 895,877.43 | -8.05% |
| READING SPECIALIST | | | | | |
| 10 E 003 1250 1100 00 000000 0000 | READING SPECIALIST | 15,395.00 | 13,970.00 | 13,864.35 | -0.76% |
| 10 E 004 1250 1100 00 000000 0000 | READING SPECIALIST | 191,930.00 | 187,893.00 | 186,916.13 | -0.52% |
| 10 E 005 1250 1100 00 000000 0000 | READING SPECIALIST | 83,230.00 | 79,076.00 | 78,490.48 | -0.74% |
| 10 E 008 1250 1100 00 000000 0000 | READING SPECIALIST | 147,075.00 | 139,739.00 | 138,417.76 | -0.95% |
| 10 E 010 1250 1100 00 000000 0000 | READING SPECIALIST | 199,770.00 | 189,806.00 | 188,339.98 | -0.77% |
| 10 E 011 1250 1100 00 000000 0000 | READING SPECIALIST | 98,485.00 | 93,575.00 | 73,658.29 | -21.28% |
| 10 E 004 1250 1120 00 000000 0000 | LONGEVITY | 3,515.00 | 3,434.00 | 3,433.97 | 0.00% |
| 10 E 005 1250 1120 00 000000 0000 | LONGEVITY | 1,140.00 | 1,114.00 | 1,113.72 | -0.03% |
| 10 E 008 1250 1120 00 000000 0000 | LONGEVITY | 1,140.00 | 1,114.00 | 1,113.72 | -0.03% |
| 10 E 010 1250 1120 00 000000 0000 | LONGEVITY | 1,805.00 | 1,763.00 | 1,763.39 | 0.02% |
| 10 E 011 1250 1120 00 000000 0000 | LONGEVITY | 1,140.00 | 1,115.00 | 1,113.72 | -0.11% |
| 10 E 003 1250 1200 00 000000 0000 | INSURANCE STIPEND | 305.00 | 0.00 | 0.00 | 0.00% |
| 10 E 010 1250 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 011 1250 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| | TOTAL SALARIES | 748,530.00 | 716,199.00 | 691,825.51 | -3.40% |
| 10 E 003 1250 2110 00 000000 0000 | TEACHER RETIREMENT | 1,555.00 | 1,415.00 | 1,371.20 | -3.10% |
| 10 E 004 1250 2110 00 000000 0000 | TEACHER RETIREMENT | 19,685.00 | 19,280.00 | 19,181.80 | -0.51% |
| 10 E 005 1250 2110 00 000000 0000 | TEACHER RETIREMENT | 8,525.00 | 8,109.00 | 8,050.94 | -0.72% |
| 10 E 008 1250 2110 00 000000 0000 | TEACHER RETIREMENT | 15,015.00 | 14,290.00 | 14,155.80 | -0.94% |
| 10 E 010 1250 2110 00 000000 0000 | TEACHER RETIREMENT | 20,295.00 | 19,305.00 | 19,157.51 | -0.76% |
| 10 E 011 1250 2110 00 000000 0000 | TEACHER RETIREMENT | 10,030.00 | 9,545.00 | 7,751.07 | -18.79% |
| 10 E 003 1250 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 100.00 | 92.00 | 88.40 | -3.91% |
| 10 E 004 1250 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,270.00 | 1,245.00 | 1,236.25 | -0.70% |
| 10 E 005 1250 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 550.00 | 525.00 | 518.85 | -1.17% |
| 10 E 008 1250 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 970.00 | 925.00 | 912.40 | -1.36% |
| 10 E 010 1250 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,310.00 | 1,245.00 | 1,234.70 | -0.83% |
| 10 E 011 1250 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 650.00 | 615.00 | 499.51 | -18.78% |
| 10 E 003 1250 2210 00 000000 0000 | LIFE INSURANCE | 10.00 | 10.00 | 7.68 | -23.20% |
| 10 E 004 1250 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 91.20 | -0.87% |
| 10 E 005 1250 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 008 1250 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 91.20 | -0.87% |
| 10 E 010 1250 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 91.20 | -0.87% |
| 10 E 011 1250 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 35.80 | -22.17% |
| 10 E 003 1250 2220 00 000000 0000 | MEDICAL INSURANCE | 0.00 | 2,985.00 | 0.00 | -100.00% |
| 10 E 004 1250 2220 00 000000 0000 | MEDICAL INSURANCE | 28,760.00 | 28,825.00 | 28,675.24 | -0.52% |
| 10 E 005 1250 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 21,495.00 | 21,318.32 | -0.82% |
| 10 E 008 1250 2220 00 000000 0000 | MEDICAL INSURANCE | 21,975.00 | 21,930.00 | 21,751.36 | -0.81% |
| 10 E 010 1250 2220 00 000000 0000 | MEDICAL INSURANCE | 10,990.00 | 10,965.00 | 10,875.68 | -0.81% |
| 10 E 003 1250 2230 00 000000 0000 | DENTAL INSURANCE | 0.00 | 92.00 | 0.00 | -100.00% |
| 10 E 004 1250 2230 00 000000 0000 | DENTAL INSURANCE | 1,860.00 | 1,720.00 | 1,711.56 | -0.49% |
| 10 E 005 1250 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 1,170.00 | 817.08 | -30.16% |
| 10 E 008 1250 2230 00 000000 0000 | DENTAL INSURANCE | 1,195.00 | 1,105.00 | 1,096.56 | -0.76% |
| 10 E 010 1250 2230 00 000000 0000 | DENTAL INSURANCE | 560.00 | 550.00 | 548.28 | -0.31% |
| 10 E 003 1250 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 270.00 | 246.00 | 239.31 | -2.72% |
| 10 E 004 1250 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 3,435.00 | 3,365.00 | 3,346.21 | -0.56% |
| 10 E 005 1250 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,490.00 | 1,415.00 | 1,404.50 | -0.74% |
| 10 E 008 1250 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,620.00 | 2,500.00 | 2,469.53 | -1.22% |
| 10 E 010 1250 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 3,540.00 | 3,367.00 | 3,341.99 | -0.74% |
| 10 E 011 1250 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,750.00 | 1,665.00 | 1,352.15 | -18.79% |
| | TOTAL EMPLOYEE BENEFITS | 181,578.00 | 180,364.00 | 173,468.88 | -3.82% |
| | GRAND TOTAL READING SPECIALISTS | 930,108.00 | 896,563.00 | 865,294.39 | -3.49% |
| VOCATIONAL PROGRAMS | | | | | |
| 10 E 002 1400 3100 00 000000 0000 | PURCHASE SERVICES | 600.00 | 0.00 | 607.80 | 0.00% |
| 10 E 002 1400 3160 00 000000 0000 | CAREER PATHWAYS SERVICES | 20,000.00 | 10,000.00 | 17,973.79 | 79.74% |
| 10 E 002 1400 3320 00 000000 0000 | TRAVEL | 100.00 | 150.00 | 98.14 | -34.57% |
| | TOTAL PURCHASED SERVICES | 20,700.00 | 10,150.00 | 18,679.73 | 84.04% |
| 10 E 002 1400 4100 00 000000 0000 | AGRICULTURE/VET TECH SUPPLIES | 3,800.00 | 4,500.00 | 3,746.98 | -16.73% |
| 10 E 002 1400 4110 00 000000 0000 | CAREER PATHWAYS SUPPLIES | 50,000.00 | 30,000.00 | 74,550.66 | 148.50% |
| 10 E 002 1400 4110 01 000000 0000 | BIOMEDICAL/DIGITAL GRAPHICS | 18,000.00 | 18,000.00 | 4,861.87 | -72.99% |
| 10 E 002 1400 4100 03 000000 0000 | CTE/INCUBATOR/MOBILE MAKER SUPPLIES | 2,000.00 | 3,600.00 | 1,217.17 | -66.19% |
| | TOTAL SUPPLIES | 73,800.00 | 56,100.00 | 84,376.68 | 50.40% |
| 10 E 002 1400 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 2,500.00 | 0.00 | 2,413.24 | 0.00% |
| | TOTAL NON-CAPITAL EQUIPMENT | 2,500.00 | 0.00 | 2,413.24 | 0.00% |

| | | | | | |
|-----------------------------------|--|---------------------|-------------------|-------------------|-----------------|
| 10 E 002 1400 5400 00 000000 0000 | CAPITAL OUTLAY | 5,000.00 | 5,000.00 | 0.00 | -100.00% |
| | TOTAL CAPITAL OUTLAYS | 5,000.00 | 5,000.00 | 0.00 | -100.00% |
| 10 E 002 1400 6400 00 000000 0000 | DUES/FEES | 350.00 | 0.00 | 360.00 | 0.00% |
| | TOTAL OTHER OBJECTS | 350.00 | 0.00 | 360.00 | 0.00% |
| | GRAND TOTAL VOCATIONAL PROGRAMS | 102,350.00 | 71,250.00 | 105,829.65 | 48.53% |
| ATHLETICS | | | | | |
| 10 E 002 1500 1000 00 000000 0000 | ATHLETIC DIRECTOR SALARY | 221,085.00 | 217,230.00 | 217,228.05 | 0.00% |
| 10 E 003 1500 1000 00 000000 0000 | ATHLETIC COORDINATOR SALARY | 3,390.00 | 3,060.00 | 3,329.66 | 8.81% |
| 10 E 011 1500 1000 00 000000 0000 | ATHLETIC COORDINATOR SALARY | 3,390.00 | 3,060.00 | 3,329.66 | 8.81% |
| 10 E 002 1500 1100 00 000000 0000 | CHS COACHING | 526,755.00 | 416,220.00 | 412,351.96 | -0.93% |
| 10 E 003 1500 1100 00 000000 0000 | CMS COACHING | 84,650.00 | 53,650.00 | 58,695.21 | 9.40% |
| 10 E 011 1500 1100 00 000000 0000 | PKMS COACHING | 86,745.00 | 65,975.00 | 60,504.44 | -8.29% |
| 10 E 002 1500 1110 00 000000 0000 | SECRETARY SALARY | 44,300.00 | 36,085.00 | 37,499.67 | 3.92% |
| 10 E 002 1500 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 0.00 | 900.00 | 0.00% |
| 10 E 002 1500 1250 00 000000 0000 | ATHLETIC SUPERVISION | 60,000.00 | 60,000.00 | 57,001.60 | -5.00% |
| 10 E 003 1500 1250 00 000000 0000 | ATHLETIC SUPERVISION | 5,800.00 | 5,800.00 | 5,660.00 | -2.41% |
| 10 E 011 1500 1250 00 000000 0000 | ATHLETIC SUPERVISION | 6,200.00 | 5,900.00 | 6,110.03 | 3.56% |
| 10 E 002 1500 1900 00 000000 0000 | SALARY ADD ON | 1,000.00 | 1,000.00 | -129.46 | -112.95% |
| | TOTAL SALARIES | 1,045,115.00 | 867,980.00 | 862,480.82 | -0.63% |
| 10 E 002 1500 2110 00 000000 0000 | TEACHER RETIREMENT-AD/COACHING | 70,275.00 | 59,445.00 | 43,227.11 | -27.28% |
| 10 E 003 1500 2110 00 000000 0000 | TEACHER RETIREMENT-AD/COACHING | 9,285.00 | 6,355.00 | 6,315.07 | -0.63% |
| 10 E 011 1500 2110 00 000000 0000 | TEACHER RETIREMENT-AD/COACHING | 9,530.00 | 7,500.00 | 6,905.09 | -7.93% |
| 10 E 002 1500 2160 00 000000 0000 | TRS SURCHARGE EXPENSE-AD/COACHING | 4,515.00 | 3,830.00 | 2,923.11 | 39.68% |
| 10 E 003 1500 2160 00 000000 0000 | TRS SURCHARGE EXPENSE-AD/COACHING | 600.00 | 410.00 | 406.88 | -0.76% |
| 10 E 011 1500 2160 00 000000 0000 | TRS SURCHARGE EXPENSE-AD/COACHING | 600.00 | 485.00 | 444.76 | -8.30% |
| 10 E 002 1500 2210 00 000000 0000 | LIFE INSURANCE | 200.00 | 200.00 | 199.88 | -0.06% |
| 10 E 003 1500 2210 00 000000 0000 | LIFE INSURANCE | 0.00 | 0.00 | 0.66 | 0.00% |
| 10 E 002 1500 2220 00 000000 0000 | MEDICAL INSURANCE | 39,700.00 | 68,275.00 | 64,983.60 | -4.82% |
| 10 E 003 1500 2220 00 000000 0000 | MEDICAL INSURANCE | 0.00 | 0.00 | 157.99 | 0.00% |
| 10 E 002 1500 2230 00 000000 0000 | DENTAL INSURANCE | 2,280.00 | 3,115.00 | 2,960.92 | -4.95% |
| 10 E 003 1500 2230 00 000000 0000 | DENTAL INSURANCE | 0.00 | 0.00 | 7.94 | 0.00% |
| 10 E 002 1500 2250 00 000000 0000 | LONG TERM DISABILITY | 300.00 | 0.00 | 272.60 | 0.00% |
| 10 E 002 1500 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 12,215.00 | 10,370.00 | 7,698.53 | -25.78% |
| 10 E 003 1500 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,620.00 | 1,110.00 | 1,101.82 | -0.74% |
| 10 E 011 1500 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,610.00 | 1,310.00 | 1,204.06 | -8.09% |
| | TOTAL EMPLOYEE BENEFITS | 152,730.00 | 162,405.00 | 138,810.02 | -14.53% |
| 10 E 002 1500 3120 00 000000 0000 | ATHLETIC IHSA STATE SERVICES | 45,000.00 | 20,000.00 | 40,107.60 | 100.54% |
| 10 E 002 1500 3190 00 000000 0000 | ATHLETIC PURCHASED SERVICES | 175,000.00 | 130,000.00 | 171,931.69 | 32.26% |
| 10 E 003 1500 3190 00 000000 0000 | ATHLETIC PURCHASED SERVICES | 11,500.00 | 6,000.00 | 11,249.25 | 87.49% |
| 10 E 011 1500 3190 00 000000 0000 | ATHLETIC PURCHASED SERVICES | 7,800.00 | 10,500.00 | 7,720.75 | -26.47% |
| 10 E 002 1500 3230 00 000000 0000 | REPAIRS | 20,000.00 | 20,000.00 | 18,491.29 | -7.54% |
| 10 E 003 1500 3230 00 000000 0000 | REPAIRS | 2,000.00 | 3,000.00 | 0.00 | -100.00% |
| 10 E 011 1500 3230 00 000000 0000 | REPAIRS | 2,000.00 | 3,000.00 | 0.00 | -100.00% |
| 10 E 002 1500 3320 00 000000 0000 | TRAVEL | 1,000.00 | 1,000.00 | 665.98 | -33.40% |
| 10 E 003 1500 3320 00 000000 0000 | TRAVEL | 150.00 | 800.00 | 360.57 | -54.93% |
| 10 E 011 1500 3320 00 000000 0000 | TRAVEL | 200.00 | 650.00 | 0.00 | -100.00% |
| 10 E 002 1500 3900 00 000000 0000 | OTHER PURCHASE SERVICES | 30,000.00 | 50,000.00 | 21,612.68 | -56.77% |
| 10 E 002 1500 3910 00 000000 0000 | OTHER PURCHASE SERVICES | 0.00 | 1,000.00 | 324.00 | -67.60% |
| | TOTAL PURCHASED SERVICES | 294,650.00 | 245,950.00 | 272,463.81 | 10.78% |
| 10 E 002 1500 4100 00 000000 0000 | ATHLETIC SUPPLIES | 50,000.00 | 50,000.00 | 35,565.91 | -28.87% |
| 10 E 003 1500 4100 00 000000 0000 | ATHLETIC SUPPLIES | 2,700.00 | 1,000.00 | 2,743.30 | 174.33% |
| 10 E 011 1500 4100 00 000000 0000 | ATHLETIC SUPPLIES | 3,500.00 | 5,500.00 | 3,532.59 | -35.77% |
| 10 E 002 1500 4110 00 000000 0000 | UNIFORMS | 17,000.00 | 17,000.00 | 24,728.18 | 45.46% |
| 10 E 003 1500 4110 00 000000 0000 | UNIFORMS | 4,000.00 | 5,000.00 | 2,222.50 | -55.55% |
| 10 E 011 1500 4110 00 000000 0000 | UNIFORMS | 3,000.00 | 2,000.00 | 0.00 | -100.00% |
| 10 E 002 1500 4120 00 000000 0000 | IHSA STATE SUPPLIES | 15,000.00 | 6,200.00 | 14,227.68 | 129.48% |
| 10 E 002 1500 4900 00 000000 0000 | OTHER ATHLETIC SUPPLIES | 12,500.00 | 12,000.00 | 11,606.19 | -3.28% |
| 10 E 002 1500 4910 00 000000 0000 | OTHER SUPPLIES | 0.00 | 400.00 | 303.16 | -24.21% |
| | TOTAL SUPPLIES | 107,700.00 | 99,100.00 | 94,929.51 | -4.21% |
| 10 E 002 1500 5400 00 000000 0000 | CAPITAL OUTLAY | 5,000.00 | 5,000.00 | 0.00 | -100.00% |
| | TOTAL CAPITAL OUTLAYS | 5,000.00 | 5,000.00 | 0.00 | -100.00% |
| 10 E 002 1500 6400 00 000000 0000 | DUES/FEES | 50,000.00 | 55,000.00 | 29,647.69 | -46.10% |
| 10 E 003 1500 6400 00 000000 0000 | DUES/FEES | 2,000.00 | 900.00 | 1,595.00 | 77.22% |
| 10 E 011 1500 6400 00 000000 0000 | DUES/FEES | 3,000.00 | 2,500.00 | 1,440.00 | -42.40% |
| | TOTAL OTHER OBJECTS | 55,000.00 | 58,400.00 | 32,682.69 | -44.04% |
| 10 E 002 1500 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 2,500.00 | 2,000.00 | 2,734.33 | 36.72% |

| | | | | | |
|-----------------------------------|-------------------------------|---------------------|---------------------|---------------------|----------------|
| 10 E 003 1500 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 1,000.00 | 4,000.00 | 0.00 | -100.00% |
| 10 E 011 1500 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 500.00 | 0.00 | 0.00 | 0.00% |
| TOTAL | NON-CAPITAL EQUIPMENT | 4,000.00 | 6,000.00 | 2,734.33 | -54.43% |
| GRAND TOTAL | ATHLETICS | 1,664,195.00 | 1,444,835.00 | 1,404,101.18 | -2.82% |
| DRIVER'S EDUCATION | | | | | |
| 10 E 002 1730 1100 00 000000 0000 | HS DRIVER'S ED SALARY | 78,885.00 | 73,275.00 | 73,022.30 | -0.34% |
| 10 E 002 1730 1130 00 000000 0000 | HS DRIVER'S ED SALARY ADD ON | 44,000.00 | 44,000.00 | 33,086.00 | -24.80% |
| 10 E 002 1730 1200 00 000000 0000 | INSURANCE STIPEND | 900.00 | 900.00 | 0.00 | 0.00% |
| TOTAL | SALARIES | 123,785.00 | 118,175.00 | 106,108.30 | -10.21% |
| 10 E 002 1730 2110 00 000000 0000 | TEACHER RETIREMENT | 12,335.00 | 11,775.00 | 8,658.14 | -26.47% |
| 10 E 002 1730 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 795.00 | 760.00 | 666.71 | -12.28% |
| 10 E 002 1730 2210 00 000000 0000 | LIFE INSURANCE | 45.00 | 46.00 | 45.60 | -0.87% |
| 10 E 002 1730 2220 00 000000 0000 | MEDICAL INSURANCE | 9,700.00 | 9,595.00 | 9,699.04 | 1.08% |
| 10 E 002 1730 2230 00 000000 0000 | DENTAL INSURANCE | 580.00 | 585.00 | 581.52 | -0.59% |
| 10 E 002 1730 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,150.00 | 2,055.00 | 1,635.83 | -20.40% |
| 10 E 002 1730 2900 00 000000 0000 | 403B MATCH | 250.00 | 175.00 | 175.00 | 0.00% |
| TOTAL | EMPLOYEE BENEFITS | 25,855.00 | 24,991.00 | 21,461.84 | -14.12% |
| 10 E 002 1730 3100 00 000000 0000 | PURCHASE SERVICES | 800.00 | 800.00 | 753.30 | -5.84% |
| TOTAL | PURCHASED SERVICES | 800.00 | 800.00 | 753.30 | -5.84% |
| 10 E 002 1730 4100 00 000000 0000 | DRIVER'S ED SUPPLIES | 8,100.00 | 6,000.00 | 8,085.76 | 34.76% |
| TOTAL | SUPPLIES | 8,100.00 | 6,000.00 | 8,085.76 | 34.76% |
| 10 E 002 1730 5400 00 000000 0000 | CAPITAL OUTLAY | 35,000.00 | 20,000.00 | 26,717.70 | 3943.59% |
| TOTAL | CAPITAL OUTLAYS | 35,000.00 | 20,000.00 | 26,717.70 | 33.59% |
| GRAND TOTAL | DRIVER'S EDUCATION | 193,540.00 | 169,966.00 | 163,126.90 | -4.02% |
| ENGLISH LANGUAGE LEARNER | | | | | |
| 10 E 001 1800 1000 00 000000 0000 | ELL DIRECTOR | 104,025.00 | 45,763.00 | 45,762.62 | 0.00% |
| 10 E 002 1800 1100 00 000000 0000 | ELL TEACHER SALARY | 85,270.00 | 56,475.00 | 47,770.74 | -15.41% |
| 10 E 003 1800 1100 00 000000 0000 | ELL TEACHER SALARY | 61,130.00 | 41,237.00 | 47,528.94 | 15.26% |
| 10 E 004 1800 1100 00 000000 0000 | ELL TEACHER SALARY | 249,695.00 | 192,218.00 | 175,714.60 | -8.59% |
| 10 E 005 1800 1100 00 000000 0000 | ELL TEACHER SALARY | 43,925.00 | 28,340.00 | 31,052.17 | 9.57% |
| 10 E 008 1800 1100 00 000000 0000 | ELL TEACHER SALARY | 136,885.00 | 130,157.00 | 127,207.88 | -2.27% |
| 10 E 010 1800 1100 00 000000 0000 | ELL TEACHER SALARY | 168,350.00 | 156,620.00 | 126,101.93 | -19.49% |
| 10 E 011 1800 1100 00 000000 0000 | ELL TEACHER SALARY | 154,100.00 | 78,275.00 | 65,959.32 | -15.73% |
| 10 E 001 1800 1110 00 000000 0000 | BILINGUAL ADMIN ASSISTANT | 35,955.00 | 57,530.00 | 46,655.60 | -18.90% |
| 10 E 004 1800 1120 00 000000 0000 | LONGEVITY | 665.00 | 650.00 | 649.67 | -0.05% |
| 10 E 001 1800 1130 00 000000 0000 | TRANSLATION SERVICES SALARIES | 0.00 | 1,500.00 | 0.00 | -100.00% |
| 10 E 002 1800 1130 00 000000 0000 | SALARY ADD ON | 490.00 | 400.00 | 0.00 | -100.00% |
| 10 E 003 1800 1130 00 000000 0000 | SALARY ADD ON | 335.00 | 100.00 | 0.00 | -100.00% |
| 10 E 004 1800 1130 00 000000 0000 | SALARY ADD ON | 1,375.00 | 400.00 | 357.02 | -10.75% |
| 10 E 005 1800 1130 00 000000 0000 | SALARY ADD ON | 250.00 | 100.00 | 0.00 | -100.00% |
| 10 E 008 1800 1130 00 000000 0000 | SALARY ADD ON | 750.00 | 400.00 | 0.00 | -100.00% |
| 10 E 010 1800 1130 00 000000 0000 | SALARY ADD ON | 925.00 | 400.00 | 583.17 | 45.79% |
| 10 E 011 1800 1130 00 000000 0000 | SALARY ADD ON | 850.00 | 100.00 | 0.00 | -100.00% |
| 10 E 002 1800 1140 00 000000 0000 | MENTOR SALARY | 565.00 | 0.00 | 0.00 | 0.00% |
| 10 E 003 1800 1140 00 000000 0000 | MENTOR SALARY | 0.00 | 803.00 | 669.12 | -16.67% |
| 10 E 004 1800 1140 00 000000 0000 | MENTOR SALARY | 1,130.00 | 0.00 | 0.00 | 0.00% |
| 10 E 005 1800 1140 00 000000 0000 | MENTOR SALARY | 0.00 | 0.00 | 0.00 | 0.00% |
| 10 E 008 1800 1140 00 000000 0000 | MENTOR SALARY | 0.00 | 0.00 | 183.00 | 0.00% |
| 10 E 010 1800 1140 00 000000 0000 | MENTOR SALARY | 1,255.00 | 2,282.00 | 942.48 | -58.33% |
| 10 E 011 1800 1140 00 000000 0000 | MENTOR SALARY | 1,255.00 | 1,742.00 | 1,634.68 | -6.16% |
| 10 E 004 1800 1200 00 000000 0000 | INSURANCE STIPEND | 3,600.00 | 3,600.00 | 1,800.00 | -50.00% |
| 10 E 008 1800 1200 00 000000 0000 | INSURANCE STIPEND | 0.00 | 0.00 | 1,800.00 | 0.00% |
| 10 E 011 1800 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 0.00 | 0.00 | 0.00% |
| TOTAL | SALARIES | 1,054,580.00 | 799,072.00 | 722,372.94 | -9.60% |
| 10 E 001 1800 2110 00 000000 0000 | TEACHER RETIREMENT | 10,465.00 | 4,615.00 | 4,614.93 | 0.00% |
| 10 E 002 1800 2110 00 000000 0000 | TEACHER RETIREMENT | 8,755.00 | 5,765.00 | 4,902.56 | -14.96% |
| 10 E 003 1800 2110 00 000000 0000 | TEACHER RETIREMENT | 6,225.00 | 4,285.00 | 4,893.25 | 14.19% |
| 10 E 004 1800 2110 00 000000 0000 | TEACHER RETIREMENT | 25,385.00 | 19,412.00 | 17,903.08 | -7.77% |
| 10 E 005 1800 2110 00 000000 0000 | TEACHER RETIREMENT | 4,480.00 | 2,916.00 | 3,160.10 | 8.37% |
| 10 E 008 1800 2110 00 000000 0000 | TEACHER RETIREMENT | 13,700.00 | 13,230.00 | 12,955.13 | -2.08% |
| 10 E 010 1800 2110 00 000000 0000 | TEACHER RETIREMENT | 17,205.00 | 16,650.00 | 13,013.08 | -21.84% |
| 10 E 011 1800 2110 00 000000 0000 | TEACHER RETIREMENT | 15,605.00 | 8,145.00 | 6,914.81 | -15.10% |
| 10 E 001 1800 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 675.00 | 300.00 | 297.58 | -0.81% |
| 10 E 002 1800 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 565.00 | 375.00 | 315.99 | -15.74% |
| 10 E 003 1800 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 400.00 | 276.00 | 315.37 | 14.26% |
| 10 E 004 1800 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,035.00 | 1,255.00 | 1,153.93 | -8.05% |
| 10 E 005 1800 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 290.00 | 190.00 | 203.58 | 7.15% |

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|--|---|---------------------|---------------------|---------------------|----------------|
| 10 E 008 1800 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 885.00 | 855.00 | 834.97 | -2.34% |
| 10 E 010 1800 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,110.00 | 1,075.00 | 838.63 | -21.99% |
| 10 E 011 1800 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,005.00 | 525.00 | 445.77 | -15.09% |
| 10 E 001 1800 2210 00 000000 0000 | LIFE INSURANCE | 215.00 | 137.00 | 83.96 | -38.72% |
| 10 E 002 1800 2210 00 000000 0000 | LIFE INSURANCE | 70.00 | 45.00 | 38.80 | -13.78% |
| 10 E 003 1800 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 35.00 | 37.49 | 7.11% |
| 10 E 004 1800 2210 00 000000 0000 | LIFE INSURANCE | 185.00 | 137.00 | 128.59 | -6.14% |
| 10 E 005 1800 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 23.00 | 41.80 | 81.74% |
| 10 E 008 1800 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 91.20 | -0.87% |
| 10 E 010 1800 2210 00 000000 0000 | LIFE INSURANCE | 137.00 | 137.00 | 112.10 | -18.18% |
| 10 E 011 1800 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 59.00 | 48.35 | -18.05% |
| 10 E 001 1800 2220 00 000000 0000 | MEDICAL INSURANCE | 46,660.00 | 42,985.00 | 37,423.66 | -12.94% |
| 10 E 002 1800 2220 00 000000 0000 | MEDICAL INSURANCE | 16,480.00 | 10,965.00 | 9,269.34 | -15.46% |
| 10 E 003 1800 2220 00 000000 0000 | MEDICAL INSURANCE | 10,990.00 | 7,785.00 | 8,984.40 | 15.41% |
| 10 E 004 1800 2220 00 000000 0000 | MEDICAL INSURANCE | 21,975.00 | 10,965.00 | 9,779.22 | -10.81% |
| 10 E 005 1800 2220 00 000000 0000 | MEDICAL INSURANCE | 0.00 | 5,485.00 | 869.44 | -84.15% |
| 10 E 008 1800 2220 00 000000 0000 | MEDICAL INSURANCE | 27,020.00 | 27,154.00 | 27,178.64 | 0.09% |
| 10 E 010 1800 2220 00 000000 0000 | MEDICAL INSURANCE | 31,220.00 | 46,690.00 | 22,928.04 | -50.89% |
| 10 E 011 1800 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 14,145.00 | 13,207.72 | -6.63% |
| 10 E 001 1800 2230 00 000000 0000 | DENTAL INSURANCE | 2,140.00 | 2,060.00 | 1,761.52 | -14.49% |
| 10 E 002 1800 2230 00 000000 0000 | DENTAL INSURANCE | 1,115.00 | 550.00 | 466.99 | -15.09% |
| 10 E 003 1800 2230 00 000000 0000 | DENTAL INSURANCE | 596.00 | 400.00 | 451.79 | 12.95% |
| 10 E 004 1800 2230 00 000000 0000 | DENTAL INSURANCE | 1,190.00 | 550.00 | 493.22 | -10.32% |
| 10 E 005 1800 2230 00 000000 0000 | DENTAL INSURANCE | 0.00 | 585.00 | 44.72 | -92.36% |
| 10 E 008 1800 2230 00 000000 0000 | DENTAL INSURANCE | 1,860.00 | 1,720.00 | 1,711.56 | -0.49% |
| 10 E 010 1800 2230 00 000000 0000 | DENTAL INSURANCE | 1,190.00 | 2,886.00 | 1,196.96 | -58.53% |
| 10 E 011 1800 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 710.00 | 568.49 | -19.93% |
| 10 E 001 1800 2250 00 000000 0000 | LONG TERM DISABILITY | 306.00 | 153.00 | 0.00 | 390.00% |
| 10 E 001 1800 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 1,825.00 | 805.00 | 805.13 | 0.02% |
| 10 E 002 1800 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 1,530.00 | 1,005.00 | 855.29 | -14.90% |
| 10 E 003 1800 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 1,085.00 | 750.00 | 853.43 | 13.79% |
| 10 E 004 1800 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 4,430.00 | 3,390.00 | 3,123.25 | -7.87% |
| 10 E 005 1800 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 780.00 | 510.00 | 551.25 | 8.09% |
| 10 E 008 1800 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 2,390.00 | 2,310.00 | 2,260.02 | -2.16% |
| 10 E 010 1800 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 3,000.00 | 2,905.00 | 2,270.05 | -21.86% |
| 10 E 011 1800 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 2,725.00 | 1,420.00 | 1,206.17 | -15.06% |
| 10 E 004 1800 2900 00 000000 0000 | 403B MATCH | 1,000.00 | 700.00 | 700.00 | 0.00% |
| 10 E 008 1800 2900 00 000000 0000 | 403B MATCH | 500.00 | 350.00 | 0.00 | -100.00% |
| 10 E 010 1800 2900 00 000000 0000 | 403B MATCH | 500.00 | 350.00 | 350.00 | 0.00% |
| | TOTAL EMPLOYEE BENEFITS | 313,975.00 | 270,817.00 | 222,655.35 | -17.78% |
| 10 E 001 1800 3190 00 000000 0000 | ELL PURCHASED SERVICES | 11,000.00 | 11,000.00 | 6,637.08 | -39.66% |
| 10 E 001 1800 3320 00 000000 0000 | ELL TRAVEL | 350.00 | 350.00 | 148.19 | -57.66% |
| | TOTAL PURCHASED SERVICES | 11,350.00 | 11,350.00 | 6,785.27 | -40.22% |
| 10 E 001 1800 4100 00 000000 0000 | ELL SUPPLIES | 4,000.00 | 4,000.00 | 665.67 | -83.36% |
| 10 E 002 1800 4100 00 000000 0000 | ELL SUPPLIES | 400.00 | 400.00 | 314.66 | -21.34% |
| 10 E 003 1800 4100 00 000000 0000 | ELL SUPPLIES | 200.00 | 200.00 | 198.09 | -0.95% |
| 10 E 004 1800 4100 00 000000 0000 | ELL SUPPLIES | 500.00 | 500.00 | 648.33 | 29.67% |
| 10 E 005 1800 4100 00 000000 0000 | ELL SUPPLIES | 150.00 | 125.00 | 69.98 | -44.02% |
| 10 E 008 1800 4100 00 000000 0000 | ELL SUPPLIES | 750.00 | 400.00 | 739.40 | 84.85% |
| 10 E 010 1800 4100 00 000000 0000 | ELL SUPPLIES | 750.00 | 700.00 | 825.21 | 17.89% |
| 10 E 011 1800 4100 00 000000 0000 | ELL SUPPLIES | 250.00 | 200.00 | 226.01 | 13.01% |
| | TOTAL SUPPLIES | 7,000.00 | 6,525.00 | 3,687.35 | -43.49% |
| 10 E 001 1800 6400 00 000000 0000 | DUES/FEES | 600.00 | 300.00 | 544.00 | 81.33% |
| | TOTAL OTHER OBJECTS | 600.00 | 300.00 | 544.00 | 81.33% |
| | GRAND TOTAL ENGLISH LANGUAGE LEARNER | 1,387,505.00 | 1,088,064.00 | 956,044.91 | -12.13% |
| SPECIAL EDUCATION PRIVATE TUITION | | | | | |
| 10 E 001 1912 6700 00 000000 0000 | SPECIAL ED K-12 PRIVATE TUITION | 2,500,000.00 | 1,950,000.00 | 2,227,689.40 | 14.24% |
| | TOTAL OTHER OBJECTS | 2,500,000.00 | 1,950,000.00 | 2,227,689.40 | 14.24% |
| | GRAND TOTAL SPECIAL ED PRIVATE TUITION | 2,500,000.00 | 1,950,000.00 | 2,227,689.40 | 14.24% |
| ACTIVITY ACCOUNTS | | | | | |
| 10 E 000 1999 6000 00 000000 0000 | CHS ACTIVITY FUND EXPENDITURES | 640,000.00 | 655,000.00 | 627,446.34 | -4.21% |
| 10 E 001 1999 6000 00 000000 0000 | ELEM MS ACTY FUND EXPENDITURES | 17,000.00 | 22,000.00 | 14,144.37 | -35.71% |
| | TOTAL OTHER OBJECTS | 657,000.00 | 677,000.00 | 641,590.71 | -5.23% |
| | GRAND TOTAL ACTIVITY ACCOUNTS | 657,000.00 | 677,000.00 | 641,590.71 | -5.23% |
| SOCIAL WORK | | | | | |
| 10 E 002 2110 1100 00 000000 0000 | SOCIAL WORKER/ALOP | 282,485.00 | 268,391.00 | 266,423.20 | -0.73% |
| 10 E 003 2110 1100 00 000000 0000 | SOCIAL WORKER | 72,665.00 | 69,041.00 | 61,479.97 | -10.95% |

| | | | | | |
|-----------------------------------|------------------------------|---------------------|---------------------|---------------------|---------------|
| 10 E 004 2110 1100 00 000000 0000 | SOCIAL WORKER | 134,045.00 | 139,360.00 | 132,064.75 | -5.23% |
| 10 E 005 2110 1100 00 000000 0000 | SOCIAL WORKER | 66,800.00 | 63,466.00 | 58,922.87 | -7.16% |
| 10 E 008 2110 1100 00 000000 0000 | SOCIAL WORKER | 161,905.00 | 128,452.00 | 127,510.06 | -0.73% |
| 10 E 010 2110 1100 00 000000 0000 | SOCIAL WORKER | 97,365.00 | 158,425.00 | 157,361.46 | -0.67% |
| 10 E 011 2110 1100 00 000000 0000 | SOCIAL WORKER | 162,540.00 | 154,433.00 | 146,166.38 | -5.35% |
| 10 E 010 2110 1120 00 000000 0000 | LONGEVITY | 0.00 | 650.00 | 649.67 | -0.05% |
| 10 E 002 2110 1140 00 000000 0000 | MENTOR | 0.00 | 0.00 | 183.00 | 0.00% |
| 10 E 004 2110 1140 00 000000 0000 | MENTOR | 0.00 | 0.00 | 183.00 | 0.00% |
| 10 E 008 2110 1140 00 000000 0000 | MENTOR | 630.00 | 0.00 | 183.00 | 0.00% |
| 11 E 010 2110 1140 00 000000 0000 | MENTOR | 630.00 | 0.00 | 0.00 | 0.00% |
| 10 E 002 2110 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 005 2110 1200 00 000000 0000 | INSURANCE STIPEND | 0.00 | 1,800.00 | 0.00 | -100.00% |
| 10 E 008 2110 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 011 2110 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| TOTAL | SALARIES | 984,465.00 | 989,418.00 | 956,527.36 | -3.32% |
| 10 E 002 2110 2110 00 000000 0000 | TEACHER RETIREMENT | 28,650.00 | 27,260.00 | 27,148.84 | -0.41% |
| 10 E 003 2110 2110 00 000000 0000 | TEACHER RETIREMENT | 7,365.00 | 7,010.00 | 6,336.50 | -9.61% |
| 10 E 004 2110 2110 00 000000 0000 | TEACHER RETIREMENT | 13,615.00 | 12,955.00 | 12,545.36 | -3.16% |
| 10 E 005 2110 2110 00 000000 0000 | TEACHER RETIREMENT | 6,785.00 | 6,455.00 | 6,005.55 | -6.96% |
| 10 E 008 2110 2110 00 000000 0000 | TEACHER RETIREMENT | 16,605.00 | 13,060.00 | 12,985.07 | -0.57% |
| 10 E 010 2110 2110 00 000000 0000 | TEACHER RETIREMENT | 10,045.00 | 16,100.00 | 15,983.56 | -0.72% |
| 10 E 011 2110 2110 00 000000 0000 | TEACHER RETIREMENT | 16,435.00 | 15,630.00 | 14,874.95 | -4.83% |
| 10 E 002 2110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,845.00 | 1,760.00 | 1,749.66 | -0.59% |
| 10 E 003 2110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 475.00 | 452.00 | 403.41 | -10.75% |
| 10 E 004 2110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 875.00 | 835.00 | 808.47 | -3.18% |
| 10 E 005 2110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 435.00 | 420.00 | 386.99 | -7.86% |
| 10 E 008 2110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,070.00 | 845.00 | 836.95 | 399.95% |
| 10 E 010 2110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 650.00 | 1,040.00 | 1,030.08 | -0.95% |
| 10 E 011 2110 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,060.00 | 1,010.00 | 954.77 | -5.47% |
| 10 E 002 2110 2210 00 000000 0000 | LIFE INSURANCE | 183.00 | 183.00 | 182.40 | -0.33% |
| 10 E 003 2110 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 41.04 | -10.78% |
| 10 E 004 2110 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 91.20 | -0.87% |
| 10 E 005 2110 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 008 2110 2210 00 000000 0000 | LIFE INSURANCE | 114.00 | 92.00 | 91.20 | -0.87% |
| 10 E 010 2110 2210 00 000000 0000 | LIFE INSURANCE | 70.00 | 92.00 | 91.20 | -0.87% |
| 10 E 011 2110 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 86.03 | -6.49% |
| 10 E 002 2110 2220 00 000000 0000 | MEDICAL INSURANCE | 50,295.00 | 50,320.00 | 49,993.56 | -0.65% |
| 10 E 003 2110 2220 00 000000 0000 | MEDICAL INSURANCE | 17,800.00 | 21,495.00 | 19,169.25 | -10.82% |
| 10 E 004 2110 2220 00 000000 0000 | MEDICAL INSURANCE | 28,760.00 | 32,460.00 | 32,194.00 | -0.82% |
| 10 E 005 2110 2220 00 000000 0000 | MEDICAL INSURANCE | 10,990.00 | 0.00 | 9,136.80 | 0.00% |
| 10 E 008 2110 2220 00 000000 0000 | MEDICAL INSURANCE | 27,030.00 | 21,495.00 | 21,318.32 | -0.82% |
| 10 E 010 2110 2220 00 000000 0000 | MEDICAL INSURANCE | 16,480.00 | 21,930.00 | 21,751.36 | -0.81% |
| 10 E 011 2110 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 21,495.00 | 23,057.20 | 7.27% |
| 10 E 002 2110 2230 00 000000 0000 | DENTAL INSURANCE | 3,125.00 | 2,890.00 | 2,874.84 | -0.52% |
| 10 E 003 2110 2230 00 000000 0000 | DENTAL INSURANCE | 815.00 | 755.00 | 674.26 | -10.69% |
| 10 E 004 2110 2230 00 000000 0000 | DENTAL INSURANCE | 1,860.00 | 1,720.00 | 1,711.56 | -0.49% |
| 10 E 005 2110 2230 00 000000 0000 | DENTAL INSURANCE | 596.00 | 0.00 | 458.80 | 0.00% |
| 10 E 008 2110 2230 00 000000 0000 | DENTAL INSURANCE | 2,160.00 | 1,170.00 | 1,163.28 | -0.57% |
| 10 E 010 2110 2230 00 000000 0000 | DENTAL INSURANCE | 895.00 | 1,105.00 | 1,096.56 | -0.76% |
| 10 E 011 2110 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 1,170.00 | 1,252.76 | 7.07% |
| 10 E 002 2110 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 5,000.00 | 4,755.00 | 4,735.97 | -0.40% |
| 10 E 003 2110 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,285.00 | 1,225.00 | 1,091.72 | -10.88% |
| 10 E 004 2110 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,375.00 | 2,260.00 | 2,188.61 | -3.16% |
| 10 E 005 2110 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,185.00 | 1,130.00 | 1,047.65 | -7.29% |
| 10 E 008 2110 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,900.00 | 2,280.00 | 2,265.04 | -0.66% |
| 10 E 010 2110 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,755.00 | 2,810.00 | 2,788.13 | -0.78% |
| 10 E 011 2110 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,870.00 | 2,730.00 | 2,584.52 | -5.33% |
| 10 E 002 2110 2900 00 000000 0000 | 403B MATCH | 1,000.00 | 700.00 | 700.00 | 0.00% |
| TOTAL | EMPLOYEE BENEFITS | 308,529.00 | 301,370.00 | 305,933.02 | 1.51% |
| 10 E 002 2110 3320 00 000000 0000 | TRAVEL | 30.00 | 0.00 | 28.27 | 0.00% |
| TOTAL | PURCHASED SERVICES | 30.00 | 0.00 | 28.27 | 0.00% |
| 10 E 002 2110 4100 00 000000 0000 | SOCIAL WORK SUPPLIES | 560.00 | 560.00 | 570.17 | 1.82% |
| 10 E 003 2110 4100 00 000000 0000 | SOCIAL WORK SUPPLIES | 150.00 | 150.00 | 148.87 | -0.75% |
| 10 E 004 2110 4100 00 000000 0000 | SOCIAL WORK SUPPLIES | 250.00 | 100.00 | 354.23 | 254.23% |
| 10 E 005 2110 4100 00 000000 0000 | SOCIAL WORK SUPPLIES | 75.00 | 75.00 | 18.99 | -74.68% |
| 10 E 008 2110 4100 00 000000 0000 | SOCIAL WORK SUPPLIES | 400.00 | 400.00 | 224.51 | -43.87% |
| 10 E 010 2110 4100 00 000000 0000 | SOCIAL WORK SUPPLIES | 200.00 | 200.00 | 127.10 | -36.45% |
| 10 E 011 2110 4100 00 000000 0000 | SOCIAL WORK SUPPLIES | 250.00 | 200.00 | 248.88 | 24.44% |
| TOTAL | SUPPLIES | 1,885.00 | 1,685.00 | 1,692.75 | 0.46% |
| GRAND TOTAL | SOCIAL WORK | 1,294,909.00 | 1,292,473.00 | 1,264,181.40 | -2.19% |
| GUIDANCE SERVICES | | | | | |

| | | | | | |
|-----------------------------------|--------------------------------------|-------------------|-------------------|-------------------|---------------|
| 10 E 002 2120 1100 00 000000 0000 | COUNSELOR SALARY | 352,205.00 | 332,635.00 | 330,166.43 | -0.74% |
| 10 E 002 2120 1110 00 000000 0000 | SECRETARY SALARY | 55,745.00 | 53,490.00 | 53,508.87 | 0.04% |
| | TOTAL SALARIES | 407,950.00 | 386,125.00 | 383,675.30 | -0.63% |
| 10 E 002 2120 2110 00 000000 0000 | TEACHER RETIREMENT | 35,725.00 | 33,790.00 | 33,613.19 | -0.52% |
| 10 E 002 2120 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 2,305.00 | 2,180.00 | 2,166.33 | -0.63% |
| 10 E 002 2120 2210 00 000000 0000 | LIFE INSURANCE | 245.00 | 245.00 | 246.24 | 0.51% |
| 10 E 002 2120 2220 00 000000 0000 | MEDICAL INSURANCE | 104,535.00 | 104,535.00 | 103,688.16 | -0.81% |
| 10 E 002 2120 2230 00 000000 0000 | DENTAL INSURANCE | 5,550.00 | 5,545.00 | 5,522.36 | -0.41% |
| 10 E 002 2120 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 6,235.00 | 5,895.00 | 5,863.98 | -0.53% |
| 10 E 002 2120 2900 00 000000 0000 | 403B MATCH | 1,000.00 | 700.00 | 700.00 | 0.00% |
| | TOTAL EMPLOYEE BENEFITS | 155,595.00 | 152,890.00 | 151,800.26 | -0.71% |
| 10 E 002 2120 4100 00 000000 0000 | GUIDANCE SUPPLIES | 1,200.00 | 1,200.00 | 1,469.55 | 22.46% |
| | TOTAL SUPPLIES | 1,200.00 | 1,200.00 | 1,469.55 | 22.46% |
| | GRAND TOTAL GUIDANCE SERVICES | 564,745.00 | 540,215.00 | 536,945.11 | -0.61% |
| HEALTH SERVICES | | | | | |
| 10 E 001 2130 1100 00 000000 0000 | NURSE SALARY | 135,640.00 | 75,630.00 | 78,833.19 | 4.24% |
| 10 E 002 2130 1100 00 000000 0000 | NURSE SALARY | 53,735.00 | 51,565.00 | 51,735.54 | 0.33% |
| 10 E 003 2130 1100 00 000000 0000 | NURSE SALARY | 61,130.00 | 58,080.00 | 57,650.00 | -0.74% |
| 10 E 004 2130 1100 00 000000 0000 | NURSE SALARY | 44,415.00 | 79,076.00 | 74,874.21 | -5.31% |
| 10 E 005 2130 1100 00 000000 0000 | NURSE SALARY | 45,848.00 | 44,800.00 | 44,833.84 | 0.08% |
| 10 E 008 2130 1100 00 000000 0000 | NURSE SALARY | 47,550.00 | 45,626.00 | 45,483.42 | -0.31% |
| 10 E 010 2130 1100 00 000000 0000 | NURSE SALARY | 46,155.00 | 44,297.00 | 44,090.79 | -0.47% |
| 10 E 011 2130 1100 00 000000 0000 | NURSE SALARY | 48,195.00 | 46,245.00 | 46,014.96 | -0.50% |
| 10 E 004 2130 1140 00 000000 0000 | MENTOR | 0.00 | 0.00 | 183.00 | 394.00% |
| 10 E 001 2130 1150 00 000000 0000 | HEALTH ASSISTANT | 34,740.00 | 33,344.00 | 33,159.42 | -0.55% |
| 10 E 002 2130 1150 00 000000 0000 | HEALTH ASSISTANT | 33,435.00 | 32,000.00 | 31,927.48 | -0.23% |
| 10 E 001 2130 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 011 2130 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 001 2130 1220 00 000000 0000 | SUB NURSE PAY | 2,000.00 | 2,000.00 | 802.76 | -59.86% |
| | TOTAL SALARIES | 556,443.00 | 516,263.00 | 513,188.61 | -0.60% |
| 10 E 001 2130 2110 00 000000 0000 | TEACHER RETIREMENT | 13,770.00 | 7,660.00 | 7,976.99 | 4.14% |
| 10 E 003 2130 2110 00 000000 0000 | TEACHER RETIREMENT | 6,225.00 | 5,925.00 | 5,879.66 | -0.77% |
| 10 E 004 2130 2110 00 000000 0000 | TEACHER RETIREMENT | 0.00 | 8,000.00 | 7,601.38 | -4.98% |
| 10 E 005 2130 2110 00 000000 0000 | TEACHER RETIREMENT | 4,535.00 | 4,435.00 | 4,443.92 | 0.20% |
| 10 E 001 2130 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 890.00 | 500.00 | 514.39 | 2.88% |
| 10 E 003 2130 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 400.00 | 385.00 | 379.03 | -1.55% |
| 10 E 004 2130 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 0.00 | 516.00 | 490.05 | -5.03% |
| 10 E 005 2130 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 295.00 | 290.00 | 286.43 | -1.23% |
| 10 E 001 2130 2210 00 000000 0000 | LIFE INSURANCE | 80.00 | 46.00 | 47.95 | 4.24% |
| 10 E 002 2130 2210 00 000000 0000 | LIFE INSURANCE | 20.00 | 20.00 | 18.24 | -8.80% |
| 10 E 003 2130 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 004 2130 2210 00 000000 0000 | LIFE INSURANCE | 20.00 | 46.00 | 43.25 | -5.98% |
| 10 E 005 2130 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 008 2130 2210 00 000000 0000 | LIFE INSURANCE | 20.00 | 20.00 | 18.24 | -8.80% |
| 10 E 010 2130 2210 00 000000 0000 | LIFE INSURANCE | 20.00 | 20.00 | 18.24 | -8.80% |
| 10 E 011 2130 2210 00 000000 0000 | LIFE INSURANCE | 20.00 | 20.00 | 18.24 | -8.80% |
| 10 E 001 2130 2220 00 000000 0000 | MEDICAL INSURANCE | 18,350.00 | 10,965.00 | 11,412.88 | 4.08% |
| 10 E 002 2130 2220 00 000000 0000 | MEDICAL INSURANCE | 32,520.00 | 29,055.00 | 31,612.60 | 8.80% |
| 10 E 003 2130 2220 00 000000 0000 | MEDICAL INSURANCE | 9,250.00 | 10,965.00 | 10,771.28 | -1.77% |
| 10 E 004 2130 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 10,965.00 | 10,338.48 | -5.71% |
| 10 E 008 2130 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 21,495.00 | 21,318.32 | -0.82% |
| 10 E 010 2130 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 21,495.00 | 21,318.32 | -0.82% |
| 10 E 001 2130 2230 00 000000 0000 | DENTAL INSURANCE | 995.00 | 550.00 | 575.13 | 4.57% |
| 10 E 002 2130 2230 00 000000 0000 | DENTAL INSURANCE | 2,225.00 | 2,340.00 | 1,711.52 | -26.86% |
| 10 E 003 2130 2230 00 000000 0000 | DENTAL INSURANCE | 595.00 | 550.00 | 548.28 | -0.31% |
| 10 E 004 2130 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 550.00 | 521.43 | -5.19% |
| 10 E 008 2130 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 1,170.00 | 1,163.28 | -0.57% |
| 10 E 010 2130 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 1,170.00 | 1,163.28 | -0.57% |
| 10 E 001 2130 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,405.00 | 1,340.00 | 1,392.22 | 3.90% |
| 10 E 003 2130 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,085.00 | 1,035.00 | 1,025.66 | -0.90% |
| 10 E 004 2130 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 0.00 | 1,395.00 | 1,325.81 | -4.96% |
| 10 E 005 2130 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 790.00 | 775.00 | 775.14 | 0.02% |
| 10 E 004 2130 2900 00 000000 0000 | 403B MATCH | 500.00 | 350.00 | 0.00 | -100.00% |
| 10 E 005 2130 2900 00 000000 0000 | 403B MATCH | 500.00 | 350.00 | 262.50 | -25.00% |
| | TOTAL EMPLOYEE BENEFITS | 164,002.00 | 144,490.00 | 145,063.34 | 0.40% |
| 10 E 001 2130 3320 00 000000 0000 | TRAVEL | 350.00 | 350.00 | 335.92 | -4.02% |
| | TOTAL PURCHASED SERVICES | 350.00 | 350.00 | 335.92 | -4.02% |
| 10 E 002 2130 4100 00 000000 0000 | NURSE SUPPLIES | 1,800.00 | 0.00 | 0.00 | 0.00% |
| 10 E 003 2130 4100 00 000000 0000 | NURSE SUPPLIES | 1,000.00 | 0.00 | 0.00 | 0.00% |

| | | | | | |
|-----------------------------------|-------------------------------|-------------------|-------------------|-------------------|----------------|
| 10 E 004 2130 4100 00 000000 0000 | NURSE SUPPLIES | 1,300.00 | 0.00 | 0.00 | 0.00% |
| 10 E 005 2130 4100 00 000000 0000 | NURSE SUPPLIES | 900.00 | 0.00 | 0.00 | 0.00% |
| 10 E 008 2130 4100 00 000000 0000 | NURSE SUPPLIES | 1,500.00 | 0.00 | 0.00 | 0.00% |
| 10 E 010 2130 4100 00 000000 0000 | NURSE SUPPLIES | 1,700.00 | 0.00 | 0.00 | 0.00% |
| 10 E 011 2130 4100 00 000000 0000 | NURSE SUPPLIES | 1,750.00 | 0.00 | 0.00 | 0.00% |
| TOTAL | SUPPLIES | 9,950.00 | 0.00 | 0.00 | 0.00% |
| 10 E 002 2130 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 1,500.00 | 0.00 | 0.00 | 0.00% |
| TOTAL | NON-CAPITAL EQUIPMENT | 1,500.00 | 0.00 | 0.00 | 0.00% |
| GRAND TOTAL | HEALTH SERVICES | 732,245.00 | 661,103.00 | 658,587.87 | -0.38% |
| PSYCHOLOGICAL SERVICES | | | | | |
| 10 E 002 2140 1100 00 000000 0000 | PSYCHOLOGIST SALARY | 127,580.00 | 121,215.00 | 142,734.93 | 17.75% |
| 10 E 003 2140 1100 00 000000 0000 | PSYCHOLOGIST SALARY | 40,780.00 | 38,750.00 | 7,013.20 | -81.90% |
| 10 E 004 2140 1100 00 000000 0000 | PSYCHOLOGIST SALARY | 106,310.00 | 101,006.00 | 100,265.44 | -0.73% |
| 10 E 005 2140 1100 00 000000 0000 | PSYCHOLOGIST SALARY | 82,900.00 | 78,762.00 | 78,184.71 | -0.73% |
| 10 E 008 2140 1100 00 000000 0000 | PSYCHOLOGIST SALARY | 95,995.00 | 91,207.00 | 90,538.71 | -0.73% |
| 10 E 010 2140 1100 00 000000 0000 | PSYCHOLOGIST SALARY | 67,785.00 | 64,402.00 | 68,668.31 | 6.62% |
| 10 E 011 2140 1100 00 000000 0000 | PSYCHOLOGIST SALARY | 77,100.00 | 73,255.00 | 72,718.19 | -0.73% |
| 11 E 001 2140 1110 00 000000 0000 | PSYCHOLOGIST INTERN SALARY | 18,000.00 | 0.00 | 0.00 | 0.00% |
| 10 E 004 2140 1120 00 000000 0000 | LONGEVITY | 1,900.00 | 1,114.00 | 1,113.72 | -0.03% |
| 10 E 002 2140 1140 00 000000 0000 | MENTOR | 1,255.00 | 566.00 | 0.00 | -100.00% |
| 10 E 003 2140 1140 00 000000 0000 | MENTOR | 0.00 | 566.00 | 471.14 | -16.76% |
| 10 E 010 2140 1140 00 000000 0000 | MENTOR | 0.00 | 1,131.00 | 1,125.48 | -0.49% |
| 10 E 008 2140 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| TOTAL | SALARIES | 621,405.00 | 573,774.00 | 564,633.83 | -1.59% |
| | | | | | 395 |
| 10 E 002 2140 2110 00 000000 0000 | TEACHER RETIREMENT | 13,010.00 | 12,205.00 | 14,124.03 | 15.72% |
| 10 E 003 2140 2110 00 000000 0000 | TEACHER RETIREMENT | 4,125.00 | 3,875.00 | 829.16 | -78.60% |
| 10 E 004 2140 2110 00 000000 0000 | TEACHER RETIREMENT | 10,880.00 | 10,280.00 | 10,204.48 | -0.73% |
| 10 E 005 2140 2110 00 000000 0000 | TEACHER RETIREMENT | 8,375.00 | 7,970.00 | 7,910.59 | -0.75% |
| 10 E 008 2140 2110 00 000000 0000 | TEACHER RETIREMENT | 9,675.00 | 9,200.00 | 9,132.37 | -0.74% |
| 10 E 010 2140 2110 00 000000 0000 | TEACHER RETIREMENT | 6,885.00 | 6,660.00 | 7,080.60 | 6.32% |
| 10 E 011 2140 2110 00 000000 0000 | TEACHER RETIREMENT | 7,805.00 | 7,425.00 | 7,369.95 | -0.74% |
| 10 E 002 2140 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 840.00 | 790.00 | 910.24 | 15.22% |
| 10 E 003 2140 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 265.00 | 250.00 | 53.44 | -78.62% |
| 10 E 004 2140 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 700.00 | 665.00 | 657.76 | -1.09% |
| 10 E 005 2140 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 540.00 | 515.00 | 509.86 | -1.00% |
| 10 E 008 2140 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 625.00 | 595.00 | 588.52 | -1.09% |
| 10 E 010 2140 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 445.00 | 430.00 | 456.23 | 6.10% |
| 10 E 011 2140 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 505.00 | 480.00 | 475.05 | -1.03% |
| 10 E 002 2140 2210 00 000000 0000 | LIFE INSURANCE | 70.00 | 70.00 | 82.84 | 18.34% |
| 10 E 003 2140 2210 00 000000 0000 | LIFE INSURANCE | 23.00 | 25.00 | 3.80 | -84.80% |
| 10 E 004 2140 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 005 2140 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 008 2140 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 010 2140 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 011 2140 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 001 2140 2220 00 000000 0000 | MEDICAL INSURANCE | 10,987.00 | 0.00 | 0.00 | 0.00% |
| 10 E 002 2140 2220 00 000000 0000 | MEDICAL INSURANCE | 28,115.00 | 29,935.00 | 32,427.68 | 8.33% |
| 10 E 003 2140 2220 00 000000 0000 | MEDICAL INSURANCE | 8,886.00 | 10,750.00 | 1,488.40 | -86.15% |
| 10 E 004 2140 2220 00 000000 0000 | MEDICAL INSURANCE | 17,775.00 | 17,865.00 | 17,799.56 | -0.37% |
| 10 E 005 2140 2220 00 000000 0000 | MEDICAL INSURANCE | 10,987.00 | 10,965.00 | 10,875.68 | -0.81% |
| 10 E 010 2140 2220 00 000000 0000 | MEDICAL INSURANCE | 10,990.00 | 10,965.00 | 9,136.80 | -16.67% |
| 10 E 011 2140 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 21,500.00 | 21,318.32 | -0.85% |
| 10 E 002 2140 2230 00 000000 0000 | DENTAL INSURANCE | 1,895.00 | 1,755.00 | 2,039.36 | 16.20% |
| 10 E 003 2140 2230 00 000000 0000 | DENTAL INSURANCE | 635.00 | 585.00 | 97.32 | -83.36% |
| 10 E 004 2140 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 1,170.00 | 1,163.28 | -0.57% |
| 10 E 005 2140 2230 00 000000 0000 | DENTAL INSURANCE | 596.00 | 550.00 | 548.28 | -0.31% |
| 10 E 008 2140 2230 00 000000 0000 | DENTAL INSURANCE | 596.00 | 550.00 | 1,062.88 | 83.25% |
| 10 E 010 2140 2230 00 000000 0000 | DENTAL INSURANCE | 596.00 | 550.00 | 648.68 | 17.94% |
| 10 E 011 2140 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 1,170.00 | 1,163.28 | -0.57% |
| 10 E 002 2140 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 2,270.00 | 2,130.00 | 2,463.80 | 15.67% |
| 10 E 003 2140 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 720.00 | 675.00 | 144.47 | -78.60% |
| 10 E 004 2140 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 1,900.00 | 1,795.00 | 1,780.14 | -0.83% |
| 10 E 005 2140 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 1,460.00 | 1,390.00 | 1,379.96 | -0.72% |
| 10 E 008 2140 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 1,690.00 | 1,605.00 | 1,593.17 | -0.74% |
| 10 E 010 2140 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 1,200.00 | 1,165.00 | 1,235.26 | 6.03% |
| 10 E 011 2140 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 1,360.00 | 1,295.00 | 1,285.65 | -0.72% |
| 10 E 002 2140 2900 00 000000 0000 | 403(B) | 500.00 | 350.00 | 350.00 | 0.00% |
| TOTAL | EMPLOYEE BENEFITS | 192,221.00 | 180,380.00 | 170,618.89 | -5.41% |
| 10 E 002 2140 3320 00 000000 0000 | TRAVEL | 100.00 | 100.00 | 69.10 | -30.90% |
| 10 E 010 2140 3320 00 000000 0000 | TRAVEL | 50.00 | 50.00 | 0.00 | -100.00% |
| TOTAL | PURCHASED SERVICES | 150.00 | 150.00 | 69.10 | -53.93% |

| | | | | | |
|---|------------------------------|-------------------|-------------------|-------------------|----------------|
| 10 E 002 2140 4100 00 000000 0000 | PSYCHOLOGICAL SUPPLIES | 400.00 | 400.00 | 394.43 | -1.39% |
| 10 E 003 2140 4100 00 000000 0000 | PSYCHOLOGICAL SUPPLIES | 100.00 | 100.00 | 87.01 | -12.99% |
| 10 E 004 2140 4100 00 000000 0000 | PSYCHOLOGICAL SUPPLIES | 125.00 | 100.00 | 0.00 | -100.00% |
| 10 E 005 2140 4100 00 000000 0000 | PSYCHOLOGICAL SUPPLIES | 75.00 | 75.00 | 89.96 | 19.95% |
| 10 E 008 2140 4100 00 000000 0000 | PSYCHOLOGICAL SUPPLIES | 300.00 | 300.00 | 251.27 | -16.24% |
| 10 E 010 2140 4100 00 000000 0000 | PSYCHOLOGICAL SUPPLIES | 100.00 | 100.00 | 87.52 | -12.48% |
| 10 E 011 2140 4100 00 000000 0000 | PSYCHOLOGICAL SUPPLIES | 130.00 | 130.00 | 123.38 | -5.09% |
| TOTAL SUPPLIES | | 1,230.00 | 1,205.00 | 1,033.57 | -14.23% |
| 10 E 001 2140 6400 00 000000 0000 | DUES/FEES | 500.00 | 500.00 | 460.00 | -8.00% |
| 10 E 002 2140 6400 00 000000 0000 | DUES/FEES | 80.00 | 80.00 | 0.00 | -100.00% |
| 10 E 003 2140 6400 00 000000 0000 | DUES/FEES | 100.00 | 100.00 | 0.00 | -100.00% |
| 10 E 005 2140 6400 00 000000 0000 | DUES/FEES | 0.00 | 100.00 | 0.00 | -100.00% |
| 10 E 010 2140 6400 00 000000 0000 | DUES/FEES | 0.00 | 100.00 | 0.00 | -100.00% |
| 10 E 011 2140 6400 00 000000 0000 | DUES/FEES | 0.00 | 100.00 | 0.00 | -100.00% |
| TOTAL OTHER OBJECTS | | 680.00 | 980.00 | 460.00 | -53.06% |
| GRAND TOTAL PSYCHOLOGICAL SERVICES | | 815,686.00 | 756,489.00 | 736,815.39 | -2.60% |
| SPEECH PATHOLOGY & AUDIOLOGY | | | | | |
| 10 E 002 2150 1100 00 000000 0000 | SPEECH PATHOLOGIST SALARY | 6,545.00 | 6,167.00 | 84,200.24 | 1265.34% |
| 10 E 003 2150 1100 00 000000 0000 | SPEECH PATHOLOGIST SALARY | 45,800.00 | 43,170.00 | 13,795.91 | -68.04% |
| 10 E 004 2150 1100 00 000000 0000 | SPEECH PATHOLOGIST SALARY | 168,710.00 | 160,291.00 | 151,017.95 | -5.79% |
| 10 E 005 2150 1100 00 000000 0000 | SPEECH PATHOLOGIST SALARY | 78,515.00 | 74,007.00 | 23,650.31 | -68.04% |
| 10 E 008 2150 1100 00 000000 0000 | SPEECH PATHOLOGIST SALARY | 214,510.00 | 174,545.00 | 172,847.98 | -0.97% |
| 10 E 010 2150 1100 00 000000 0000 | SPEECH PATHOLOGIST SALARY | 99,515.00 | 175,066.00 | 175,208.01 | 0.08% |
| 10 E 011 2150 1100 00 000000 0000 | SPEECH PATHOLOGIST SALARY | 112,490.00 | 109,375.00 | 108,973.07 | 396.37% |
| 10 E 004 2150 1120 00 000000 0000 | LONGEVITY | 1,140.00 | 1,114.00 | 1,113.72 | -0.03% |
| 10 E 008 2150 1120 00 000000 0000 | LONGEVITY | 1,805.00 | 1,763.00 | 1,763.39 | 0.02% |
| 10 E 010 2150 1120 00 000000 0000 | LONGEVITY | 0.00 | 1,114.00 | 1,113.72 | -0.03% |
| 10 E 011 2150 1120 00 000000 0000 | LONGEVITY | 1,140.00 | 1,114.00 | 1,113.72 | -0.03% |
| 11 E 008 2150 1140 00 000000 0000 | MENTOR | 630.00 | 0.00 | 0.00 | 0.00% |
| 11 E 010 2150 1140 00 000000 0000 | MENTOR | 630.00 | 0.00 | 0.00 | 0.00% |
| 10 E 011 2150 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| TOTAL SALARIES | | 733,230.00 | 749,526.00 | 736,598.02 | -1.72% |
| 10 E 002 2150 2110 00 000000 0000 | TEACHER RETIREMENT | 660.00 | 620.00 | 8,336.41 | 1244.58% |
| 10 E 003 2150 2110 00 000000 0000 | TEACHER RETIREMENT | 4,595.00 | 4,332.00 | 1,426.73 | -67.07% |
| 10 E 004 2150 2110 00 000000 0000 | TEACHER RETIREMENT | 17,155.00 | 16,320.00 | 15,402.02 | -5.62% |
| 10 E 005 2150 2110 00 000000 0000 | TEACHER RETIREMENT | 7,875.00 | 7,426.00 | 2,445.92 | -67.06% |
| 10 E 008 2150 2110 00 000000 0000 | TEACHER RETIREMENT | 21,895.00 | 17,795.00 | 17,625.30 | -0.95% |
| 10 E 010 2150 2110 00 000000 0000 | TEACHER RETIREMENT | 10,250.00 | 17,780.00 | 17,829.07 | 0.28% |
| 10 E 011 2150 2110 00 000000 0000 | TEACHER RETIREMENT | 11,415.00 | 11,105.00 | 11,065.73 | -0.35% |
| 10 E 002 2150 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 43.00 | 40.00 | 537.33 | 1243.33% |
| 10 E 003 2150 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 295.00 | 280.00 | 91.93 | -67.17% |
| 10 E 004 2150 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,105.00 | 1,055.00 | 992.59 | -5.92% |
| 10 E 005 2150 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 510.00 | 480.00 | 157.61 | -67.16% |
| 10 E 008 2150 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,410.00 | 1,150.00 | 1,135.81 | -1.23% |
| 10 E 010 2150 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 665.00 | 1,146.00 | 1,149.15 | 0.27% |
| 10 E 011 2150 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 735.00 | 720.00 | 713.21 | -0.94% |
| 10 E 002 2150 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 5.00 | 31.17 | 523.40% |
| 10 E 003 2150 2210 00 000000 0000 | LIFE INSURANCE | 0.00 | 16.00 | 5.31 | -66.81% |
| 10 E 004 2150 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 87.40 | -5.00% |
| 10 E 005 2150 2210 00 000000 0000 | LIFE INSURANCE | 0.00 | 30.00 | 9.12 | -69.60% |
| 10 E 008 2150 2210 00 000000 0000 | LIFE INSURANCE | 140.00 | 92.00 | 91.20 | -0.87% |
| 10 E 010 2150 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 91.20 | -0.87% |
| 10 E 011 2150 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 002 2150 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 1,075.00 | 14,677.36 | 1265.34% |
| 10 E 003 2150 2220 00 000000 0000 | MEDICAL INSURANCE | 0.00 | 7,525.00 | 2,446.66 | -67.49% |
| 10 E 004 2150 2220 00 000000 0000 | MEDICAL INSURANCE | 43,070.00 | 32,460.00 | 40,248.66 | 23.99% |
| 10 E 005 2150 2220 00 000000 0000 | MEDICAL INSURANCE | 0.00 | 12,895.00 | 4,194.30 | -67.47% |
| 10 E 008 2150 2220 00 000000 0000 | MEDICAL INSURANCE | 43,510.00 | 21,930.00 | 21,751.36 | -0.81% |
| 10 E 010 2150 2220 00 000000 0000 | MEDICAL INSURANCE | 43,070.00 | 42,985.00 | 42,636.64 | -0.81% |
| 10 E 002 2150 2230 00 000000 0000 | DENTAL INSURANCE | 815.00 | 60.00 | 797.92 | 1229.87% |
| 10 E 003 2150 2230 00 000000 0000 | DENTAL INSURANCE | 0.00 | 410.00 | 134.56 | -67.18% |
| 10 E 004 2150 2230 00 000000 0000 | DENTAL INSURANCE | 1,860.00 | 1,720.00 | 1,665.68 | -3.16% |
| 10 E 005 2150 2230 00 000000 0000 | DENTAL INSURANCE | 0.00 | 705.00 | 230.80 | -67.26% |
| 10 E 008 2150 2230 00 000000 0000 | DENTAL INSURANCE | 2,005.00 | 1,105.00 | 1,096.56 | -0.76% |
| 10 E 010 2150 2230 00 000000 0000 | DENTAL INSURANCE | 1,630.00 | 1,925.00 | 2,120.52 | 10.16% |
| 10 E 002 2150 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 115.00 | 108.00 | 1,454.31 | 1246.58% |
| 10 E 003 2150 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 800.00 | 760.00 | 248.87 | -67.25% |
| 10 E 004 2150 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,995.00 | 2,850.00 | 2,686.85 | -5.72% |
| 10 E 005 2150 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,375.00 | 1,300.00 | 426.66 | -67.18% |
| 10 E 008 2150 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 3,820.00 | 3,105.00 | 3,074.55 | -0.98% |
| 10 E 010 2150 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,790.00 | 3,105.00 | 3,110.25 | 0.17% |

| | | | | | |
|---|---|---------------------|---------------------|---------------------|----------------|
| 10 E 011 2150 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,195.00 | 1,940.00 | 1,930.45 | -0.49% |
| 10 E 010 2150 2900 00 000000 0000 | 403(B) | 500.00 | 350.00 | 350.00 | 0.00% |
| | TOTAL EMPLOYEE BENEFITS | 249,109.00 | 218,935.00 | 224,552.77 | 2.57% |
| 10 E 001 2150 3140 00 000000 0000 | SPEECH CONSULTANT/INTERPRETER | 5,000.00 | 5,000.00 | 18,613.66 | 272.27% |
| 10 E 002 2150 3320 00 000000 0000 | TRAVEL | 60.00 | 60.00 | 46.55 | -22.42% |
| 10 E 003 2150 3320 00 000000 0000 | TRAVEL | 60.00 | 60.00 | 46.55 | -22.42% |
| 10 E 005 2150 3320 00 000000 0000 | TRAVEL | 60.00 | 60.00 | 46.56 | -22.40% |
| | TOTAL PURCHASED SERVICES | 5,180.00 | 5,180.00 | 18,753.32 | 262.03% |
| 10 E 002 2150 4100 00 000000 0000 | SPEECH SUPPLIES | 400.00 | 400.00 | 0.00 | -100.00% |
| 10 E 003 2150 4100 00 000000 0000 | SPEECH SUPPLIES | 100.00 | 100.00 | 86.48 | -13.52% |
| 10 E 004 2150 4100 00 000000 0000 | SPEECH SUPPLIES | 125.00 | 100.00 | 227.59 | 127.59% |
| 10 E 005 2150 4100 00 000000 0000 | SPEECH SUPPLIES | 85.00 | 75.00 | 83.95 | 11.93% |
| 10 E 008 2150 4100 00 000000 0000 | SPEECH SUPPLIES | 350.00 | 350.00 | 265.68 | -24.09% |
| 10 E 010 2150 4100 00 000000 0000 | SPEECH SUPPLIES | 200.00 | 200.00 | 117.97 | -41.02% |
| 10 E 011 2150 4100 00 000000 0000 | SPEECH SUPPLIES | 230.00 | 225.00 | 225.00 | 0.00% |
| | TOTAL SUPPLIES | 1,490.00 | 1,450.00 | 1,006.67 | -30.57% |
| | GRAND TOTAL SPEECH PATHOLOGY | 989,009.00 | 975,091.00 | 980,910.78 | 0.60% |
| IMPROVEMENT OF INSTRUCTION | | | | | |
| 10 E 001 2210 1000 00 000000 0000 | STUDENT SUPPORT SERVICES | 0.00 | 45,765.00 | 45,762.38 | -0.01% |
| 10 E 001 2210 1100 00 000000 0000 | IMPROVEMENT OF INSTRUCTION | 2,000.00 | 15,000.00 | -188.87 | -101.26% |
| | TOTAL SALARIES | 2,000.00 | 60,765.00 | 45,573.51 | -25.00% |
| 10 E 001 2210 2110 00 000000 0000 | TEACHER RETIREMENT | 12,000.00 | 9,000.00 | 10,010.46 | 11.23% |
| 10 E 001 2210 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 650.00 | 600.00 | 644.37 | 397.40% |
| 10 E 001 2210 2210 00 000000 0000 | LIFE INSURANCE | 200.00 | 200.00 | 182.40 | -8.80% |
| 10 E 001 2210 2220 00 000000 0000 | MEDICAL INSURANCE | 33,000.00 | 38,000.00 | 32,106.63 | -15.51% |
| 10 E 001 2210 2230 00 000000 0000 | DENTAL INSURANCE | 1,045.00 | 1,900.00 | 1,043.44 | -45.08% |
| 10 E 001 2210 2250 00 000000 0000 | LONG TERM DISABILITY | 330.00 | 315.00 | 328.28 | 4.22% |
| 10 E 001 2210 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 6,250.00 | 805.00 | 1,746.29 | 116.93% |
| | TOTAL EMPLOYEE BENEFITS | 53,475.00 | 50,820.00 | 46,061.87 | -9.36% |
| 10 E 001 2210 3100 00 000000 0000 | PURCHASE SERVICES | 15,000.00 | 15,000.00 | 6,262.50 | -58.25% |
| 10 E 001 2210 3320 00 000000 0000 | TRAVEL | 150.00 | 300.00 | 0.00 | -100.00% |
| | TOTAL PURCHASED SERVICES | 15,150.00 | 15,300.00 | 6,262.50 | -59.07% |
| 10 E 001 2210 4100 00 000000 0000 | STUDENT SUPPORT SUPPLIES | 6,500.00 | 4,000.00 | 6,292.15 | 57.30% |
| | TOTAL SUPPLIES | 6,500.00 | 4,000.00 | 6,292.15 | 57.30% |
| 10 E 001 2210 6400 00 000000 0000 | PROFESSIONAL DEVELOPMENT | 60,000.00 | 60,000.00 | 63,366.06 | 5.61% |
| 10 E 002 2210 6400 00 000000 0000 | PROFESSIONAL DEVELOPMENT | 5,000.00 | 5,000.00 | 7,062.18 | 41.24% |
| 10 E 003 2210 6400 00 000000 0000 | PROFESSIONAL DEVELOPMENT | 1,500.00 | 1,500.00 | 445.00 | -70.33% |
| 10 E 004 2210 6400 00 000000 0000 | PROFESSIONAL DEVELOPMENT | 5,000.00 | 51,500.00 | 43,159.52 | -16.20% |
| 10 E 005 2210 6400 00 000000 0000 | PROFESSIONAL DEVELOPMENT | 3,000.00 | 51,000.00 | 43,298.52 | -15.10% |
| 10 E 008 2210 6400 00 000000 0000 | PROFESSIONAL DEVELOPMENT | 5,000.00 | 51,500.00 | 43,035.00 | -16.44% |
| 10 E 010 2210 6400 00 000000 0000 | PROFESSIONAL DEVELOPMENT | 5,000.00 | 51,500.00 | 43,602.52 | -15.33% |
| 10 E 011 2210 6400 00 000000 0000 | PROFESSIONAL DEVELOPMENT | 4,000.00 | 1,500.00 | 240.00 | -84.00% |
| | TOTAL OTHER OBJECTS | 88,500.00 | 273,500.00 | 244,208.80 | -10.71% |
| | GRAND TOTAL IMPROVEMENT OF INSTRUCTION | 166,625.00 | 404,385.00 | 348,398.83 | -13.84% |
| INSTRUCTION & CURRICULUM DEVELOPMENT | | | | | |
| 10 E 001 2212 1000 00 000000 0000 | DIRECTORS OF CURRICULUM | 273,900.00 | 255,918.00 | 255,918.33 | 0.00% |
| 10 E 001 2212 1100 00 000000 0000 | INSTRUCTIONAL COACHES | 978,300.00 | 940,725.00 | 932,975.81 | -0.82% |
| 10 E 001 2212 1110 00 000000 0000 | CURRICULUM SECRETARY SALARY | 116,875.00 | 111,042.00 | 111,042.17 | 0.00% |
| 10 E 001 2212 1120 00 000000 0000 | LONGEVITY | 4,370.00 | 9,374.00 | 9,373.81 | 0.00% |
| 10 E 001 2212 1200 00 000000 0000 | INSURANCE STIPEND | 0.00 | 1,800.00 | 1,206.00 | -33.00% |
| | TOTAL SALARIES | 1,373,445.00 | 1,318,859.00 | 1,310,516.12 | -0.63% |
| 10 E 001 2212 2110 00 000000 0000 | TEACHER RETIREMENT | 126,355.00 | 121,165.00 | 119,913.91 | -1.03% |
| 10 E 001 2212 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 8,145.00 | 7,810.00 | 7,728.29 | -1.05% |
| 10 E 001 2212 2210 00 000000 0000 | LIFE INSURANCE | 925.00 | 876.00 | 873.00 | -0.34% |
| 10 E 001 2212 2220 00 000000 0000 | MEDICAL INSURANCE | 227,815.00 | 197,334.00 | 197,788.88 | 0.23% |
| 10 E 001 2212 2230 00 000000 0000 | DENTAL INSURANCE | 12,235.00 | 10,350.00 | 10,426.60 | 0.74% |
| 10 E 001 2212 2250 00 000000 0000 | DISABILITY INSURANCE | 1,250.00 | 640.00 | 681.76 | 6.53% |
| 10 E 001 2212 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 22,045.00 | 21,140.00 | 20,918.51 | -1.05% |
| 10 E 001 2212 2900 00 000000 0000 | 403B MATCH | 500.00 | 350.00 | 350.00 | 0.00% |
| 10 E 001 2212 2300 00 000000 0000 | TUITION REIMBURSEMENT | 0.00 | 1,200.00 | 0.00 | -100.00% |
| | TOTAL EMPLOYEE BENEFITS | 399,270.00 | 360,865.00 | 358,680.95 | -0.61% |
| 10 E 001 2212 3190 00 000000 0000 | CURRICULUM & DATA MANAGEMENT | 60,000.00 | 115,000.00 | 19,733.80 | -82.84% |
| 10 E 001 2212 3320 00 000000 0000 | TRAVEL | 12,000.00 | 10,000.00 | 12,317.87 | 23.18% |
| 10 E 001 2212 3800 00 000000 0000 | TEST SCORING | 170,000.00 | 45,000.00 | 165,822.55 | 268.49% |

| | | | | | |
|-----------------------------------|---|---------------------|---------------------|---------------------|---------------|
| | TOTAL PURCHASED SERVICES | 242,000.00 | 170,000.00 | 197,874.22 | 16.40% |
| 10 E 001 2212 4100 00 000000 0000 | CURRICULUM SUPPLIES | 20,000.00 | 12,000.00 | 20,601.25 | 71.68% |
| 10 E 002 2212 4100 00 000000 0000 | CURRICULUM SUPPLIES TOSA | 6,500.00 | 6,500.00 | 5,912.48 | -9.04% |
| | TOTAL SUPPLIES | 26,500.00 | 18,500.00 | 26,513.73 | 43.32% |
| 10 E 001 2212 6400 00 000000 0000 | DUES/FEES | 6,100.00 | 1,700.00 | 190.00 | -88.82% |
| 10 E 002 2212 6400 00 000000 0000 | DUES/FEES | 0.00 | 500.00 | 927.00 | 85.40% |
| 10 E 003 2212 6400 00 000000 0000 | DUES/FEES | 0.00 | 500.00 | 697.00 | 39.40% |
| 10 E 010 2212 6400 00 000000 0000 | DUES/FEES | 0.00 | 2,000.00 | 3,197.69 | 59.88% |
| 10 E 011 2212 6400 00 000000 0000 | DUES/FEES | 0.00 | 600.00 | 1,053.89 | 75.65% |
| | TOTAL OTHER OBJECTS | 6,100.00 | 5,300.00 | 6,065.58 | 14.44% |
| | GRAND TOTAL INSTRUCTION & CURRICULUM DEVELOPMENT | 2,047,315.00 | 1,873,524.00 | 1,899,650.60 | 1.39% |
| | EDUCATION MEDIA SERVICES | | | | |
| 10 E 002 2220 1100 00 000000 0000 | LIBRARIAN SALARY | 78,690.00 | 74,765.00 | 74,182.97 | -0.78% |
| 10 E 003 2220 1100 00 000000 0000 | LIBRARIAN SALARY | 116,095.00 | 112,881.00 | 112,466.87 | -0.37% |
| 10 E 004 2220 1100 00 000000 0000 | LIBRARIAN SALARY | 80,925.00 | 74,762.00 | 74,630.13 | -0.18% |
| 10 E 005 2220 1100 00 000000 0000 | LIBRARIAN SALARY | 80,925.00 | 76,890.00 | 76,319.56 | -0.74% |
| 10 E 008 2220 1100 00 000000 0000 | LIBRARIAN SALARY | 57,795.00 | 54,915.00 | 54,505.20 | -0.75% |
| 10 E 010 2220 1100 00 000000 0000 | LIBRARIAN SALARY | 57,795.00 | 54,915.00 | 54,470.70 | -0.81% |
| 10 E 011 2220 1100 00 000000 0000 | LIBRARIAN SALARY | 72,335.00 | 68,727.00 | 79,714.47 | 15.99% |
| 10 E 003 2220 1120 00 000000 0000 | LONGEVITY | 2,850.00 | 2,785.00 | 2,784.30 | -0.03% |
| 10 E 011 2220 1140 00 000000 0000 | MENTOR | 0.00 | 1,415.00 | 1,178.32 | -16.73% |
| 10 E 002 2220 1150 00 000000 0000 | LIBRARY AIDE SALARY | 24,495.00 | 24,426.00 | 23,707.86 | -2.94% |
| 10 E 004 2220 1200 00 000000 0000 | INSURANCE STIPEND | 0.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 008 2220 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 398.00% |
| | TOTAL SALARIES | 573,705.00 | 550,081.00 | 557,560.38 | 1.36% |
| 10 E 002 2220 2110 00 000000 0000 | TEACHER RETIREMENT | 7,960.00 | 7,575.00 | 7,549.37 | -0.34% |
| 10 E 003 2220 2110 00 000000 0000 | TEACHER RETIREMENT | 11,945.00 | 11,620.00 | 11,576.50 | -0.37% |
| 10 E 004 2220 2110 00 000000 0000 | TEACHER RETIREMENT | 8,185.00 | 7,575.00 | 7,559.04 | -0.21% |
| 10 E 005 2220 2110 00 000000 0000 | TEACHER RETIREMENT | 8,185.00 | 7,782.00 | 7,726.09 | -0.72% |
| 10 E 008 2220 2110 00 000000 0000 | TEACHER RETIREMENT | 5,895.00 | 5,610.00 | 5,568.72 | -0.74% |
| 10 E 010 2220 2110 00 000000 0000 | TEACHER RETIREMENT | 5,895.00 | 5,610.00 | 5,565.32 | -0.80% |
| 10 E 011 2220 2110 00 000000 0000 | TEACHER RETIREMENT | 7,335.00 | 7,115.00 | 8,178.44 | 14.95% |
| 10 E 002 2220 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 515.00 | 488.00 | 486.61 | -0.28% |
| 10 E 003 2220 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 770.00 | 750.00 | 746.09 | -0.52% |
| 10 E 004 2220 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 530.00 | 488.00 | 487.18 | -0.17% |
| 10 E 005 2220 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 530.00 | 505.00 | 497.93 | -1.40% |
| 10 E 008 2220 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 380.00 | 365.00 | 358.84 | -1.69% |
| 10 E 010 2220 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 380.00 | 365.00 | 358.61 | -1.75% |
| 10 E 011 2220 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 475.00 | 460.00 | 527.11 | 14.59% |
| 10 E 002 2220 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 003 2220 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 004 2220 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 005 2220 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 008 2220 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 010 2220 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 011 2220 2210 00 000000 0000 | LIFE INSURANCE | 46.00 | 46.00 | 45.60 | -0.87% |
| 10 E 002 2220 2220 00 000000 0000 | MEDICAL INSURANCE | 21,975.00 | 21,930.00 | 21,751.36 | -0.81% |
| 10 E 003 2220 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 21,495.00 | 18,973.56 | -11.73% |
| 10 E 004 2220 2220 00 000000 0000 | MEDICAL INSURANCE | 19,225.00 | 0.00 | 6,395.84 | 0.00% |
| 10 E 005 2220 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 10,965.00 | 12,630.28 | 15.19% |
| 10 E 010 2220 2220 00 000000 0000 | MEDICAL INSURANCE | 21,535.00 | 21,495.00 | 21,318.32 | -0.82% |
| 10 E 011 2220 2220 00 000000 0000 | MEDICAL INSURANCE | 9,565.00 | 17,215.00 | 8,749.27 | -49.18% |
| 10 E 002 2220 2230 00 000000 0000 | DENTAL INSURANCE | 1,105.00 | 1,105.00 | 1,096.56 | -0.76% |
| 10 E 003 2220 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 1,168.00 | 1,163.28 | -0.40% |
| 10 E 004 2220 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 0.00 | 389.36 | 0.00% |
| 10 E 005 2220 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 1,170.00 | 1,163.28 | -0.57% |
| 10 E 010 2220 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 1,170.00 | 1,163.28 | -0.57% |
| 10 E 011 2220 2230 00 000000 0000 | DENTAL INSURANCE | 1,265.00 | 675.00 | 1,095.72 | 62.33% |
| 10 E 002 2220 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,390.00 | 1,325.00 | 1,317.05 | -0.60% |
| 10 E 003 2220 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 2,085.00 | 2,030.00 | 2,019.54 | -0.52% |
| 10 E 004 2220 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,430.00 | 1,325.00 | 1,318.70 | -0.48% |
| 10 E 005 2220 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,430.00 | 1,360.00 | 1,347.74 | -0.90% |
| 10 E 008 2220 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,030.00 | 980.00 | 971.52 | -0.87% |
| 10 E 010 2220 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,030.00 | 980.00 | 970.92 | -0.93% |
| 10 E 011 2220 2290 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 1,280.00 | 1,241.00 | 1,426.57 | 14.95% |
| 10 E 002 2220 2900 00 000000 0000 | 403B MATCH | 500.00 | 350.00 | 350.00 | 0.00% |
| 10 E 004 2220 2900 00 000000 0000 | 403B MATCH | 500.00 | 350.00 | 0.00 | -100.00% |
| | TOTAL EMPLOYEE BENEFITS | 192,777.00 | 164,959.00 | 163,117.20 | -1.12% |
| 10 E 002 2220 3100 00 000000 0000 | LIBRARY PURCHASE SERVICES | 6,840.00 | 6,840.00 | 5,084.31 | -25.67% |
| 10 E 003 2220 3100 00 000000 0000 | LIBRARY PURCHASE SERVICES | 1,350.00 | 1,350.00 | 2,163.71 | 60.27% |

| | | | | | |
|-----------------------------------|---|-------------------|-------------------|-------------------|-----------------|
| 10 E 004 2220 3100 00 000000 0000 | LIBRARY PURCHASE SERVICES | 2,000.00 | 2,000.00 | 3,014.67 | 50.73% |
| 10 E 005 2220 3100 00 000000 0000 | LIBRARY PURCHASE SERVICES | 2,350.00 | 2,000.00 | 2,352.39 | 17.62% |
| 10 E 008 2220 3100 00 000000 0000 | LIBRARY PURCHASE SERVICES | 2,950.00 | 2,800.00 | 2,933.11 | 4.75% |
| 10 E 010 2220 3100 00 000000 0000 | LIBRARY PURCHASE SERVICES | 3,125.00 | 2,000.00 | 3,125.60 | 56.28% |
| 10 E 011 2220 3100 00 000000 0000 | LIBRARY PURCHASE SERVICES | 3,175.00 | 2,000.00 | 3,172.90 | 58.65% |
| 10 E 003 2220 3230 00 000000 0000 | REPAIRS | 250.00 | 250.00 | 0.00 | -100.00% |
| 10 E 011 2220 3230 00 000000 0000 | REPAIRS | 0.00 | 132.00 | 0.00 | -100.00% |
| | TOTAL PURCHASED SERVICES | 22,040.00 | 19,372.00 | 21,846.69 | 12.77% |
| 10 E 002 2220 4100 00 000000 0000 | LIBRARY SUPPLIES | 3,000.00 | 3,000.00 | 4,714.42 | 57.15% |
| 10 E 003 2220 4100 00 000000 0000 | LIBRARY SUPPLIES | 2,000.00 | 2,000.00 | 1,948.66 | -2.57% |
| 10 E 004 2220 4100 00 000000 0000 | LIBRARY SUPPLIES | 2,000.00 | 2,000.00 | 455.39 | -77.23% |
| 10 E 005 2220 4100 00 000000 0000 | LIBRARY SUPPLIES | 500.00 | 500.00 | 0.00 | -100.00% |
| 10 E 008 2220 4100 00 000000 0000 | LIBRARY SUPPLIES | 1,250.00 | 1,250.00 | 779.81 | -37.62% |
| 10 E 010 2220 4100 00 000000 0000 | LIBRARY SUPPLIES | 1,500.00 | 1,500.00 | 114.20 | -92.39% |
| 10 E 011 2220 4100 00 000000 0000 | LIBRARY SUPPLIES | 3,000.00 | 3,000.00 | 1,422.24 | -52.59% |
| 10 E 002 2220 4300 00 000000 0000 | BOOKS | 2,000.00 | 0.00 | 0.00 | 0.00% |
| 10 E 003 2220 4300 00 000000 0000 | BOOKS | 2,000.00 | 2,000.00 | 1,987.63 | -0.62% |
| 10 E 004 2220 4300 00 000000 0000 | BOOKS | 2,500.00 | 2,800.00 | 2,737.55 | -2.23% |
| 10 E 005 2220 4300 00 000000 0000 | BOOKS | 2,000.00 | 2,000.00 | 735.68 | -63.22% |
| 10 E 008 2220 4300 00 000000 0000 | BOOKS | 4,500.00 | 4,500.00 | 8,138.35 | 80.85% |
| 10 E 010 2220 4300 00 000000 0000 | BOOKS | 5,000.00 | 5,000.00 | 4,336.82 | -13.26% |
| 10 E 011 2220 4300 00 000000 0000 | BOOKS | 4,375.00 | 4,373.00 | 5,060.55 | 15.72% |
| | TOTAL SUPPLIES | 35,625.00 | 33,923.00 | 32,431.30 | -4.40% |
| 10 E 005 2220 5400 00 000000 0000 | CAPITAL OUTLAY | 0.00 | 5,000.00 | 0.00 | -100.00% |
| | TOTAL CAPITAL OUTLAYS | 0.00 | 5,000.00 | 0.00 | -100.00% |
| | | | | | 399 |
| 10 E 003 2220 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 1,500.00 | 1,500.00 | 0.00 | -100.00% |
| 10 E 005 2220 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 500.00 | 0.00 | 0.00 | 0.00% |
| 10 E 008 2220 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 500.00 | 0.00 | 0.00 | 0.00% |
| 10 E 011 2220 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 1,500.00 | 1,403.00 | 0.00 | -100.00% |
| | TOTAL NON-CAPITAL EQUIPMENT | 4,000.00 | 2,903.00 | 0.00 | -100.00% |
| | GRAND TOTAL EDUCATION MEDIA SERVICES | 828,147.00 | 776,238.00 | 774,955.57 | -0.17% |
| BOARD OF EDUCATION | | | | | |
| 10 E 001 2310 3100 00 000000 0000 | PROFESSIONAL & TECH SERVICES | 70,000.00 | 100,000.00 | 57,225.00 | -42.78% |
| 10 E 001 2310 3170 00 000000 0000 | AUDIT SERVICES | 26,150.00 | 26,150.00 | 25,125.00 | -3.92% |
| 10 E 001 2310 3180 00 000000 0000 | LEGAL SERVICES/NOTICES/BIDS | 3,000.00 | 2,400.00 | 2,868.10 | 19.50% |
| 10 E 001 2310 3320 00 000000 0000 | TRAVEL | 4,000.00 | 6,000.00 | 2,140.08 | -64.33% |
| 10 E 001 2310 3810 00 000000 0000 | OTHER INSURANCE-TREASURER BOND | 13,000.00 | 0.00 | 0.00 | 0.00% |
| | TOTAL PURCHASED SERVICES | 116,150.00 | 134,550.00 | 87,358.18 | -35.07% |
| 10 E 001 2310 4100 00 000000 0000 | BOARD OF EDUCATION SUPPLIES | 25,000.00 | 25,000.00 | 21,624.48 | -13.50% |
| | TOTAL SUPPLIES | 25,000.00 | 25,000.00 | 21,624.48 | -13.50% |
| 10 E 001 2310 6400 00 000000 0000 | DUES AND FEES | 21,000.00 | 12,000.00 | 20,829.00 | 73.58% |
| 10 E 001 2310 6900 00 000000 0000 | OTHER OBJECTS-TAXES | 10,000.00 | 35,000.00 | -16,864.64 | -148.18% |
| | TOTAL OTHER OBJECTS | 31,000.00 | 47,000.00 | 3,964.36 | -91.57% |
| | GRAND TOTAL BOARD OF EDUCATION | 172,150.00 | 206,550.00 | 112,947.02 | -45.32% |
| EXECUTIVE ADMINISTRATION | | | | | |
| 10 E 001 2320 1000 00 000000 0000 | SUPERINTENDENT SALARY | 263,140.00 | 250,695.00 | 327,737.95 | 30.73% |
| 10 E 001 2320 1100 00 000000 0000 | DIRECTOR OF HR SALARY | 157,050.00 | 149,217.00 | 149,217.13 | 0.00% |
| 10 E 001 2320 1110 00 000000 0000 | ADMIN ASSISTANT SALARIES | 204,025.00 | 202,324.00 | 212,541.04 | 5.05% |
| | TOTAL SALARIES | 624,215.00 | 602,236.00 | 689,496.12 | 14.49% |
| 10 E 001 2320 2110 00 000000 0000 | RETIREMENT | 15,715.00 | 40,265.00 | 46,154.06 | 14.63% |
| 10 E 001 2320 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,015.00 | 2,595.00 | 2,617.97 | 0.89% |
| 10 E 001 2320 2210 00 000000 0000 | LIFE INSURANCE | 360.00 | 538.00 | 545.68 | 1.43% |
| 10 E 001 2320 2220 00 000000 0000 | MEDICAL INSURANCE | 100,015.00 | 126,085.00 | 129,843.76 | 2.98% |
| 10 E 001 2320 2230 00 000000 0000 | DENTAL INSURANCE | 4,660.00 | 5,190.00 | 5,336.64 | 2.83% |
| 10 E 001 2320 2250 00 000000 0000 | DISABILITY INSURANCE | 350.00 | 700.00 | 680.11 | -2.84% |
| 10 E 001 2320 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 2,740.00 | 7,025.00 | 7,086.12 | 0.87% |
| 10 E 001 2320 2900 00 000000 0000 | ANNUITY | 0.00 | 3,600.00 | 3,600.00 | 0.00% |
| | TOTAL EMPLOYEE BENEFITS | 124,855.00 | 185,998.00 | 195,864.34 | 5.30% |
| 10 E 001 2320 3190 00 000000 0000 | PROFESSIONAL & TECHNICAL SERVICE | 2,300.00 | 1,200.00 | 2,156.91 | 79.74% |
| 10 E 001 2320 3320 00 000000 0000 | TRAVEL | 500.00 | 500.00 | 96.48 | -80.70% |
| | TOTAL PURCHASED SERVICES | 2,800.00 | 1,700.00 | 2,253.39 | 32.55% |
| 10 E 001 2320 4100 00 000000 0000 | ADMIN SUPPLIES | 5,500.00 | 5,500.00 | 2,570.86 | -53.26% |
| | TOTAL SUPPLIES | 5,500.00 | 5,500.00 | 2,570.86 | -53.26% |

| | | | | | |
|------------------------------------|--|---------------------|---------------------|---------------------|----------------|
| 10 E 001 2320 6400 00 000000 0000 | DUES/FEES | 8,000.00 | 10,000.00 | 6,982.87 | -30.17% |
| | TOTAL OTHER OBJECTS | 8,000.00 | 10,000.00 | 6,982.87 | -30.17% |
| | GRAND TOTAL EXECUTIVE ADMINISTRATION | 765,370.00 | 805,434.00 | 897,167.58 | 11.39% |
| SPECIAL AREA ADMINISTRATION | | | | | |
| 10 E 001 2330 1000 00 000000 0000 | DIRECTOR OF STUDENT SUPPORT SERVICE | 152,345.00 | 151,640.00 | 151,926.08 | 0.19% |
| 10 E 001 2330 1100 00 000000 0000 | ASSISTANT DIRECTOR | 103,145.00 | 98,000.00 | 89,833.32 | -8.33% |
| 10 E 001 2330 1110 00 000000 0000 | SECRETARY | 94,970.00 | 106,377.00 | 108,639.72 | 2.13% |
| 10 E 001 2330 1200 00 000000 0000 | INSURANCE STIPEND | 0.00 | 1,800.00 | 600.00 | -66.67% |
| | TOTAL SALARIES | 350,460.00 | 357,817.00 | 350,999.12 | -1.91% |
| 10 E 001 2330 2110 00 000000 0000 | RETIREMENT | 25,625.00 | 25,050.00 | 24,059.89 | -3.95% |
| 10 E 001 2330 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,855.00 | 1,615.00 | 1,550.63 | -3.99% |
| 10 E 001 2330 2210 00 000000 0000 | LIFE INSURANCE | 345.00 | 360.00 | 357.20 | -0.78% |
| 10 E 001 2330 2220 00 000000 0000 | MEDICAL INSURANCE | 100,500.00 | 72,509.00 | 91,150.24 | 25.71% |
| 10 E 001 2330 2230 00 000000 0000 | DENTAL INSURANCE | 5,300.00 | 4,945.00 | 5,045.86 | 2.04% |
| 10 E 001 2330 2250 00 000000 0000 | DISABILITY INSURANCE | 510.00 | 535.00 | 377.00 | -29.53% |
| 10 E 001 2330 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 4,475.00 | 4,370.00 | 4,197.29 | -3.95% |
| | TOTAL EMPLOYEE BENEFITS | 138,410.00 | 109,384.00 | 126,738.11 | 15.87% |
| 10 E 001 2330 3320 00 000000 0000 | TRAVEL | 2,000.00 | 2,000.00 | 1,670.17 | -16.49% |
| | TOTAL PURCHASED SERVICES | 2,000.00 | 2,000.00 | 1,670.17 | -16.49% |
| 10 E 001 2330 4100 00 000000 0000 | SPECIAL AREA ADMIN SUPPLIES | 3,000.00 | 3,000.00 | 2,228.97 | -25.70% |
| | TOTAL SUPPLIES | 3,000.00 | 3,000.00 | 2,228.97 | -25.70% |
| 10 E 001 2330 6400 00 000000 0000 | DUES AND FEES | 1,500.00 | 1,500.00 | 850.00 | -43.33% |
| | TOTAL OTHER OBJECTS | 1,500.00 | 1,500.00 | 850.00 | -43.33% |
| | GRAND TOTAL SPECIAL AREA ADMINISTRATION | 495,370.00 | 473,701.00 | 482,486.37 | 1.85% |
| OFFICE OF THE PRINCIPALS | | | | | |
| 10 E 002 2410 1100 00 000000 0000 | PRINCIPAL/ASST PRINCIPAL SALARY | 594,495.00 | 538,020.00 | 467,374.04 | -13.13% |
| 10 E 003 2410 1100 00 000000 0000 | PRINCIPAL/ASST PRINCIPAL SALARY | 227,490.00 | 216,540.00 | 216,540.00 | 0.00% |
| 10 E 004 2410 1100 00 000000 0000 | PRINCIPAL/ASST PRINCIPAL SALARY | 233,790.00 | 222,120.00 | 222,120.11 | 0.00% |
| 10 E 005 2410 1100 00 000000 0000 | PRINCIPAL/ASST PRINCIPAL SALARY | 119,500.00 | 104,600.00 | 104,600.00 | 0.00% |
| 10 E 008 2410 1100 00 000000 0000 | PRINCIPAL/ASST PRINCIPAL SALARY | 225,480.00 | 214,232.00 | 214,232.00 | 0.00% |
| 10 E 010 2410 1100 00 000000 0000 | PRINCIPAL/ASST PRINCIPAL SALARY | 220,735.00 | 209,725.00 | 209,723.00 | 0.00% |
| 10 E 011 2410 1100 00 000000 0000 | PRINCIPAL/ASST PRINCIPAL SALARY | 334,900.00 | 318,195.00 | 318,193.20 | 0.00% |
| 10 E 002 2410 1110 00 000000 0000 | SECRETARY SALARY | 149,890.00 | 146,690.00 | 140,415.37 | -4.28% |
| 10 E 003 2410 1110 00 000000 0000 | SECRETARY SALARY | 56,560.00 | 54,125.00 | 45,620.58 | -15.71% |
| 10 E 004 2410 1110 00 000000 0000 | SECRETARY SALARY | 91,775.00 | 88,075.00 | 87,352.22 | -0.82% |
| 10 E 005 2410 1110 00 000000 0000 | SECRETARY SALARY | 37,055.00 | 35,570.00 | 35,412.69 | -0.44% |
| 10 E 008 2410 1110 00 000000 0000 | SECRETARY SALARY | 66,275.00 | 64,495.00 | 67,674.70 | 4.93% |
| 10 E 010 2410 1110 00 000000 0000 | SECRETARY SALARY | 75,485.00 | 72,445.00 | 72,517.76 | 0.10% |
| 10 E 011 2410 1110 00 000000 0000 | SECRETARY SALARY | 111,370.00 | 100,140.00 | 100,202.33 | 0.06% |
| 10 E 002 2410 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 003 2410 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 004 2410 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 008 2410 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 900.00 | -50.00% |
| 10 E 010 2410 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| 10 E 001 2410 1220 00 000000 0000 | SECRETARY SUBSTITUTE | 14,000.00 | 7,600.00 | 13,202.50 | 73.72% |
| | TOTAL SALARIES | 2,567,800.00 | 2,401,572.00 | 2,323,280.50 | -3.26% |
| 10 E 002 2410 2110 00 000000 0000 | TEACHER RETIREMENT | 59,690.00 | 57,070.00 | 44,769.85 | -21.55% |
| 10 E 003 2410 2110 00 000000 0000 | TEACHER RETIREMENT | 22,855.00 | 21,780.00 | 21,771.95 | -0.04% |
| 10 E 004 2410 2110 00 000000 0000 | TEACHER RETIREMENT | 23,475.00 | 22,325.00 | 22,323.73 | -0.01% |
| 10 E 005 2410 2110 00 000000 0000 | TEACHER RETIREMENT | 12,000.00 | 10,525.00 | 10,522.98 | -0.02% |
| 10 E 008 2410 2110 00 000000 0000 | TEACHER RETIREMENT | 22,660.00 | 21,545.00 | 21,721.75 | 0.82% |
| 10 E 010 2410 2110 00 000000 0000 | TEACHER RETIREMENT | 22,190.00 | 21,100.00 | 21,275.80 | 0.83% |
| 10 E 011 2410 2110 00 000000 0000 | TEACHER RETIREMENT | 33,660.00 | 32,005.00 | 31,825.76 | -0.56% |
| 10 E 001 2410 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 0.00 | 0.00 | 2.72 | 0.00% |
| 10 E 002 2410 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 3,850.00 | 3,680.00 | 2,885.48 | -21.59% |
| 10 E 003 2410 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,475.00 | 1,405.00 | 1,403.18 | -0.13% |
| 10 E 004 2410 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,515.00 | 1,440.00 | 1,438.71 | -0.09% |
| 10 E 005 2410 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 775.00 | 680.00 | 678.19 | -0.27% |
| 10 E 008 2410 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,460.00 | 1,390.00 | 1,400.01 | 0.72% |
| 10 E 010 2410 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 1,430.00 | 1,360.00 | 1,371.21 | 0.82% |
| 10 E 011 2410 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 2,170.00 | 2,065.00 | 2,050.95 | -0.68% |
| 10 E 002 2410 2210 00 000000 0000 | LIFE INSURANCE | 605.00 | 605.00 | 525.16 | -13.20% |
| 10 E 003 2410 2210 00 000000 0000 | LIFE INSURANCE | 295.00 | 295.00 | 288.04 | -2.36% |
| 10 E 004 2410 2210 00 000000 0000 | LIFE INSURANCE | 310.00 | 310.00 | 310.08 | 0.03% |
| 10 E 005 2410 2210 00 000000 0000 | LIFE INSURANCE | 210.00 | 205.00 | 208.24 | 1.58% |
| 10 E 008 2410 2210 00 000000 0000 | LIFE INSURANCE | 310.00 | 310.00 | 310.84 | 0.27% |
| 10 E 010 2410 2210 00 000000 0000 | LIFE INSURANCE | 310.00 | 310.00 | 310.08 | 0.03% |

| | | | | | |
|-----------------------------------|-------------------------------|-------------------|-------------------|-------------------|-----------------|
| 10 E 011 2410 2210 00 000000 0000 | LIFE INSURANCE | 500.00 | 401.00 | 401.28 | 0.07% |
| 10 E 002 2410 2220 00 000000 0000 | MEDICAL INSURANCE | 156,060.00 | 138,050.00 | 125,257.40 | -9.27% |
| 10 E 003 2410 2220 00 000000 0000 | MEDICAL INSURANCE | 61,235.00 | 39,620.00 | 39,300.16 | -0.81% |
| 10 E 004 2410 2220 00 000000 0000 | MEDICAL INSURANCE | 68,415.00 | 68,175.00 | 67,724.64 | -0.66% |
| 10 E 005 2410 2220 00 000000 0000 | MEDICAL INSURANCE | 39,700.00 | 39,620.00 | 41,127.52 | 3.80% |
| 10 E 008 2410 2220 00 000000 0000 | MEDICAL INSURANCE | 75,190.00 | 67,910.00 | 69,885.72 | 2.91% |
| 10 E 010 2410 2220 00 000000 0000 | MEDICAL INSURANCE | 76,655.00 | 76,500.00 | 75,881.04 | -0.81% |
| 10 E 011 2410 2220 00 000000 0000 | MEDICAL INSURANCE | 93,715.00 | 69,440.00 | 70,353.06 | 1.31% |
| 10 E 002 2410 2230 00 000000 0000 | DENTAL INSURANCE | 8,595.00 | 6,940.00 | 6,312.41 | -9.04% |
| 10 E 003 2410 2230 00 000000 0000 | DENTAL INSURANCE | 3,545.00 | 1,555.00 | 1,547.60 | -0.48% |
| 10 E 004 2410 2230 00 000000 0000 | DENTAL INSURANCE | 4,185.00 | 3,870.00 | 3,851.44 | -0.48% |
| 10 E 005 2410 2230 00 000000 0000 | DENTAL INSURANCE | 2,280.00 | 2,110.00 | 2,191.00 | 3.84% |
| 10 E 008 2410 2230 00 000000 0000 | DENTAL INSURANCE | 4,635.00 | 4,285.00 | 3,429.44 | -19.97% |
| 10 E 010 2410 2230 00 000000 0000 | DENTAL INSURANCE | 4,635.00 | 4,285.00 | 4,265.20 | -0.46% |
| 10 E 011 2410 2230 00 000000 0000 | DENTAL INSURANCE | 4,560.00 | 3,760.00 | 3,827.98 | 1.81% |
| 10 E 002 2410 2250 00 000000 0000 | LONG TERM DISABILITY | 960.00 | 960.00 | 938.32 | -2.26% |
| 10 E 003 2410 2250 00 000000 0000 | LONG TERM DISABILITY | 520.00 | 545.00 | 336.28 | -38.30% |
| 10 E 004 2410 2250 00 000000 0000 | LONG TERM DISABILITY | 565.00 | 585.00 | 612.76 | 4.75% |
| 10 E 005 2410 2250 00 000000 0000 | LONG TERM DISABILITY | 330.00 | 325.00 | 288.76 | -11.15% |
| 10 E 008 2410 2250 00 000000 0000 | LONG TERM DISABILITY | 560.00 | 560.00 | 593.72 | 6.02% |
| 10 E 010 2410 2250 00 000000 0000 | LONG TERM DISABILITY | 475.00 | 475.00 | 326.16 | -31.33% |
| 10 E 011 2410 2250 00 000000 0000 | LONG TERM DISABILITY | 760.00 | 757.00 | 538.72 | -28.83% |
| 10 E 001 2410 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 0.00 | 0.00 | 3.14 | 0.00% |
| 10 E 002 2410 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 10,415.00 | 9,955.00 | 7,809.94 | -21.55% |
| 10 E 003 2410 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 3,990.00 | 3,790.00 | 3,798.18 | 0.22% |
| 10 E 004 2410 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 4,100.00 | 3,895.00 | 3,894.20 | -0.02% |
| 10 E 005 2410 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 2,095.00 | 1,835.00 | 1,835.62 | 0.03% |
| 10 E 008 2410 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 3,955.00 | 3,760.00 | 3,789.40 | 4010.78% |
| 10 E 010 2410 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 3,870.00 | 3,680.00 | 3,711.63 | 0.86% |
| 10 E 011 2410 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 5,875.00 | 5,585.00 | 5,552.11 | -0.59% |
| TOTAL | EMPLOYEE BENEFITS | 853,620.00 | 763,633.00 | 736,779.54 | -3.52% |
| 10 E 002 2410 3100 00 000000 0000 | PURCHASE SERVICES | 23,000.00 | 23,000.00 | 18,084.84 | -21.37% |
| 10 E 001 2410 3250 00 000000 0000 | COPIER LEASES | 225,000.00 | 230,000.00 | 210,900.49 | -8.30% |
| 10 E 002 2410 3320 00 000000 0000 | TRAVEL | 100.00 | 0.00 | 0.00 | 0.00% |
| 10 E 002 2410 3410 00 000000 0000 | POSTAGE | 700.00 | 2,000.00 | 263.55 | -86.82% |
| 10 E 003 2410 3410 00 000000 0000 | POSTAGE | 0.00 | 150.00 | 162.00 | 8.00% |
| 10 E 004 2410 3410 00 000000 0000 | POSTAGE | 0.00 | 0.00 | 110.00 | 0.00% |
| 10 E 010 2410 3410 00 000000 0000 | POSTAGE | 0.00 | 50.00 | 0.00 | -100.00% |
| 10 E 011 2410 3410 00 000000 0000 | POSTAGE | 0.00 | 1,200.00 | 0.00 | -100.00% |
| 10 E 002 2410 3900 00 000000 0000 | OTHER PURCHASED SERVICES | 0.00 | 500.00 | 0.00 | -100.00% |
| 10 E 003 2410 3900 00 000000 0000 | OTHER PURCHASED SERVICES | 0.00 | 100.00 | 0.00 | -100.00% |
| 10 E 010 2410 3900 00 000000 0000 | OTHER PURCHASED SERVICES | 0.00 | 375.00 | 369.50 | -1.47% |
| 10 E 011 2410 3900 00 000000 0000 | OTHER PURCHASED SERVICES | 0.00 | 300.00 | 0.00 | -100.00% |
| TOTAL | PURCHASED SERVICES | 248,800.00 | 267,675.00 | 229,890.38 | -10.78% |
| 10 E 002 2410 4100 00 000000 0000 | PRINCIPAL SUPPLIES | 35,000.00 | 20,850.00 | 37,505.58 | 79.88% |
| 10 E 003 2410 4100 00 000000 0000 | PRINCIPAL SUPPLIES | 8,100.00 | 8,100.00 | 5,874.74 | -27.47% |
| 10 E 004 2410 4100 00 000000 0000 | PRINCIPAL SUPPLIES | 28,300.00 | 23,820.00 | 21,578.93 | -9.41% |
| 10 E 005 2410 4100 00 000000 0000 | PRINCIPAL SUPPLIES | 8,100.00 | 9,980.00 | 9,320.62 | -6.61% |
| 10 E 008 2410 4100 00 000000 0000 | PRINCIPAL SUPPLIES | 22,000.00 | 18,000.00 | 17,826.00 | -0.97% |
| 10 E 010 2410 4100 00 000000 0000 | PRINCIPAL SUPPLIES | 25,000.00 | 16,615.00 | 8,553.95 | -48.52% |
| 10 E 011 2410 4100 00 000000 0000 | PRINCIPAL SUPPLIES | 16,000.00 | 14,540.00 | 8,087.54 | -44.38% |
| 10 E 002 2410 4900 00 000000 0000 | OTHER SUPPLIES | 500.00 | 500.00 | 79.00 | -84.20% |
| 10 E 003 2410 4900 00 000000 0000 | OTHER SUPPLIES | 0.00 | 300.00 | 0.00 | -100.00% |
| 10 E 004 2410 4900 00 000000 0000 | OTHER SUPPLIES | 450.00 | 450.00 | 211.42 | -53.02% |
| 10 E 005 2410 4900 00 000000 0000 | OTHER SUPPLIES | 200.00 | 200.00 | 0.00 | -100.00% |
| 10 E 008 2410 4900 00 000000 0000 | OTHER SUPPLIES | 1,000.00 | 450.00 | 1,048.95 | 133.10% |
| 10 E 010 2410 4900 00 000000 0000 | OTHER SUPPLIES | 500.00 | 500.00 | 0.00 | -100.00% |
| 10 E 011 2410 4900 00 000000 0000 | OTHER SUPPLIES | 6,000.00 | 4,400.00 | 6,335.99 | 44.00% |
| TOTAL | SUPPLIES | 151,150.00 | 118,705.00 | 116,422.72 | -1.92% |
| 10 E 002 2410 5400 00 000000 0000 | CAPITAL OUTLAY | 10,000.00 | 30,000.00 | 0.00 | -100.00% |
| TOTAL | CAPITAL OUTLAYS | 10,000.00 | 30,000.00 | 0.00 | -100.00% |
| 10 E 002 2410 6400 00 000000 0000 | DUES/FEES | 2,800.00 | 2,800.00 | 2,266.00 | -19.07% |
| 10 E 003 2410 6400 00 000000 0000 | DUES/FEES | 1,100.00 | 500.00 | 1,162.75 | 132.55% |
| 10 E 004 2410 6400 00 000000 0000 | DUES/FEES | 1,000.00 | 600.00 | 1,052.96 | 75.49% |
| 10 E 005 2410 6400 00 000000 0000 | DUES/FEES | 500.00 | 500.00 | 220.00 | -56.00% |
| 10 E 008 2410 6400 00 000000 0000 | DUES/FEES | 1,200.00 | 0.00 | 1,545.00 | 0.00% |
| 10 E 010 2410 6400 00 000000 0000 | DUES/FEES | 1,200.00 | 2,000.00 | 1,193.00 | -40.35% |
| 10 E 011 2410 6400 00 000000 0000 | DUES/FEES | 2,000.00 | 1,403.00 | 1,832.32 | 30.60% |
| TOTAL | OTHER OBJECTS | 9,800.00 | 7,803.00 | 9,272.03 | 18.83% |
| 10 E 002 2410 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 8,000.00 | 2,000.00 | 0.00 | -100.00% |
| 10 E 003 2410 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 4,000.00 | 14,320.00 | 0.00 | -100.00% |

| | | | | | |
|---|--|---------------------|---------------------|---------------------|-----------------|
| 10 E 004 2410 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 6,000.00 | 6,000.00 | 3,122.19 | -47.96% |
| 10 E 005 2410 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 4,000.00 | 25,000.00 | 6,440.15 | -74.24% |
| 10 E 008 2410 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 8,000.00 | 2,000.00 | 3,019.34 | 50.97% |
| 10 E 010 2410 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 10,000.00 | 4,000.00 | 5,951.02 | 48.78% |
| 10 E 011 2410 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 4,000.00 | 4,455.00 | 2,982.42 | -33.05% |
| TOTAL | NON-CAPITAL EQUIPMENT | 44,000.00 | 57,775.00 | 21,515.12 | -62.76% |
| GRAND TOTAL | OFFICE OF THE PRINCIPALS | 3,885,170.00 | 3,637,163.00 | 3,437,160.29 | -5.50% |
| OTHER SUPPORT SERVICES-SCHOOL ADMINISTRATION | | | | | |
| 10 E 002 2490 1110 00 000000 0000 | HS DEAN ASSISTANT SALARIES | 115,880.00 | 110,105.00 | 109,298.28 | -0.73% |
| TOTAL | SALARIES | 115,880.00 | 110,105.00 | 109,298.28 | -0.73% |
| 10 E 002 2490 2210 00 000000 0000 | LIFE INSURANCE | 75.00 | 75.00 | 54.72 | -27.04% |
| 10 E 002 2490 2220 00 000000 0000 | MEDICAL INSURANCE | 20,550.00 | 20,510.00 | 20,289.04 | -1.08% |
| 10 E 002 2490 2230 00 000000 0000 | DENTAL INSURANCE | 560.00 | 550.00 | 0.00 | -100.00% |
| TOTAL | EMPLOYEE BENEFITS | 21,185.00 | 21,135.00 | 20,343.76 | -3.74% |
| GRAND TOTAL | OTHER SUPPORT SERVICES-SCHOOL ADMIN | 137,065.00 | 131,240.00 | 129,642.04 | -1.22% |
| DIRECTION OF BUSINESS SUPPORT | | | | | |
| 10 E 001 2510 1000 00 000000 0000 | BUSINESS MANAGER SALARY | 82,350.00 | 109,070.00 | 109,070.00 | 0.00% |
| TOTAL | SALARIES | 82,350.00 | 109,070.00 | 109,070.00 | 0.00% |
| 10 E 001 2510 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 128.00 | 127.13 | -0.68% |
| 10 E 001 2510 2220 00 000000 0000 | MEDICAL INSURANCE | 14,360.00 | 19,975.00 | 19,741.97 | -1.17% |
| 10 E 001 2510 2230 00 000000 0000 | DENTAL INSURANCE | 845.00 | 1,086.00 | 1,079.09 | -0.64% |
| 10 E 001 2510 2250 00 000000 0000 | LONG TERM DISABILITY | 320.00 | 243.00 | 242.56 | 402.18% |
| TOTAL | EMPLOYEE BENEFITS | 15,617.00 | 21,432.00 | 21,190.75 | -1.13% |
| 10 E 001 2510 3320 00 000000 0000 | TRAVEL | 650.00 | 550.00 | 627.85 | 14.15% |
| TOTAL | PURCHASED SERVICES | 650.00 | 550.00 | 627.85 | 14.15% |
| 10 E 001 2510 4100 00 000000 0000 | OFFICE SUPPLIES | 25.00 | 50.00 | 0.00 | -100.00% |
| TOTAL | SUPPLIES | 25.00 | 50.00 | 0.00 | -100.00% |
| 10 E 001 2510 6400 00 000000 0000 | DUES AND FEES | 750.00 | 600.00 | 600.00 | 0.00% |
| TOTAL | OTHER OBJECTS | 750.00 | 600.00 | 600.00 | 0.00% |
| GRAND TOTAL | DIRECTION OF BUSINESS SUPPORT | 99,392.00 | 131,702.00 | 131,488.60 | -0.16% |
| FISCAL SERVICES | | | | | |
| 10 E 001 2520 1100 00 000000 0000 | HR/PAYROLL SALARY | 179,705.00 | 217,808.00 | 196,234.09 | -9.91% |
| 10 E 001 2520 1105 00 000000 0000 | DIRECTOR OF GRANTS | 130,165.00 | 123,675.00 | 82,290.88 | -33.46% |
| 10 E 001 2520 1110 00 000000 0000 | ADMINISTRATIVE ASSISTANTS | 202,900.00 | 145,706.00 | 167,099.84 | 14.68% |
| 10 E 001 2520 1130 00 000000 0000 | TREASURER | 82,350.00 | 47,414.00 | 47,413.41 | 0.00% |
| TOTAL | SALARIES | 595,120.00 | 534,603.00 | 493,038.22 | -7.77% |
| 10 E 001 2520 2110 00 000000 0000 | TEACHER RETIREMENT | 13,050.00 | 12,410.00 | 7,226.90 | -41.77% |
| 10 E 001 2520 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 840.00 | 800.00 | 465.81 | -41.77% |
| 10 E 001 2520 2210 00 000000 0000 | LIFE INSURANCE | 595.00 | 559.00 | 468.40 | -16.21% |
| 10 E 001 2520 2220 00 000000 0000 | MEDICAL INSURANCE | 186,635.00 | 180,618.00 | 162,169.09 | -10.21% |
| 10 E 001 2520 2230 00 000000 0000 | DENTAL INSURANCE | 9,155.00 | 8,709.00 | 7,096.11 | -18.52% |
| 10 E 001 2520 2250 00 000000 0000 | LONG TERM DISABILITY | 495.00 | 426.00 | 334.28 | -21.53% |
| 10 E 001 2520 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 2,275.00 | 2,165.00 | 1,260.66 | -41.77% |
| TOTAL | EMPLOYEE BENEFITS | 213,045.00 | 205,687.00 | 179,021.25 | -12.96% |
| 10 E 001 2520 3100 00 000000 0000 | PURCHASE/CONTRACTED SERVICES | 205,000.00 | 120,000.00 | 202,305.71 | 68.59% |
| 10 E 001 2520 3160 00 000000 0000 | SOFTWARE | 140,000.00 | 160,000.00 | 115,904.63 | -27.56% |
| 10 E 001 2520 3190 00 000000 0000 | PROFESSIONAL & TECH SERVICES | 500.00 | 2,000.00 | 285.00 | -85.75% |
| 10 E 001 2520 3320 00 000000 0000 | TRAVEL | 2,200.00 | 600.00 | 2,118.72 | 253.12% |
| 10 E 001 2520 3410 00 000000 0000 | POSTAGE | 7,200.00 | 5,200.00 | 7,110.00 | 36.73% |
| TOTAL | PURCHASED SERVICES | 354,900.00 | 287,800.00 | 327,724.06 | 13.87% |
| 10 E 001 2520 4100 00 000000 0000 | FISCAL SERVICES SUPPLIES | 42,000.00 | 40,000.00 | 38,348.61 | -4.13% |
| TOTAL | SUPPLIES | 42,000.00 | 40,000.00 | 38,348.61 | -4.13% |
| 10 E 001 2520 6400 00 000000 0000 | DUES/FEES | 6,000.00 | 5,000.00 | 5,387.76 | 7.76% |
| 10 E 001 2520 6900 00 000000 0000 | PENALTY PAYMENTS | 35,000.00 | 35,000.00 | 5,491.90 | -84.31% |
| TOTAL | OTHER OBJECTS | 41,000.00 | 40,000.00 | 10,879.66 | -72.80% |
| 10 E 001 2520 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 2,000.00 | 3,000.00 | 1,753.52 | -41.55% |
| TOTAL | NON-CAPITAL EQUIPMENT | 2,000.00 | 3,000.00 | 1,753.52 | -41.55% |
| GRAND TOTAL | FISCAL SERVICES | 1,248,065.00 | 1,111,090.00 | 1,050,765.32 | -5.43% |

| FOOD SERVICES | | | | | |
|-----------------------------------|---------------------------|-------------------|-------------------|-------------------|----------------|
| 10 E 001 2560 1000 00 000000 0000 | DIRECTOR OF FOOD SERVICES | 74,865.00 | 71,128.00 | 71,128.00 | 0.00% |
| 10 E 002 2560 1190 00 000000 0000 | COOKS SALARY | 179,425.00 | 181,975.00 | 161,732.95 | -11.12% |
| 10 E 003 2560 1190 00 000000 0000 | COOKS SALARY | 67,285.00 | 64,680.00 | 63,857.31 | -1.27% |
| 10 E 004 2560 1190 00 000000 0000 | COOKS SALARY | 60,465.00 | 57,420.00 | 58,039.38 | 1.08% |
| 10 E 005 2560 1190 00 000000 0000 | COOKS SALARY | 33,280.00 | 32,485.00 | 32,744.95 | 0.80% |
| 10 E 008 2560 1190 00 000000 0000 | COOKS SALARY | 54,545.00 | 50,990.00 | 51,492.86 | 0.99% |
| 10 E 010 2560 1190 00 000000 0000 | COOKS SALARY | 60,035.00 | 57,010.00 | 54,075.67 | -5.15% |
| 10 E 011 2560 1190 00 000000 0000 | COOKS SALARY | 104,800.00 | 89,675.00 | 80,365.53 | -10.38% |
| 10 E 002 2560 1200 00 000000 0000 | INSURANCE STIPEND | 7,200.00 | 5,400.00 | 5,100.00 | -5.56% |
| 10 E 011 2560 1200 00 000000 0000 | INSURANCE STIPEND | 3,600.00 | 3,600.00 | 3,300.00 | -8.33% |
| 10 E 001 2560 1220 00 000000 0000 | COOKS SUB PAY | 35,000.00 | 40,000.00 | 25,275.64 | -36.81% |
| TOTAL | SALARIES | 680,500.00 | 654,363.00 | 607,112.29 | -7.22% |
| 10 E 001 2560 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 92.72 | 0.78% |
| 10 E 002 2560 2210 00 000000 0000 | LIFE INSURANCE | 0.00 | 20.00 | 0.00 | -100.00% |
| 10 E 001 2560 2220 00 000000 0000 | MEDICAL INSURANCE | 28,715.00 | 28,660.00 | 33,193.77 | 15.82% |
| 10 E 002 2560 2220 00 000000 0000 | MEDICAL INSURANCE | 49,440.00 | 43,860.00 | 45,352.84 | 3.40% |
| 10 E 011 2560 2220 00 000000 0000 | MEDICAL INSURANCE | 21,975.00 | 21,930.00 | 21,751.36 | -0.81% |
| 10 E 001 2560 2230 00 000000 0000 | DENTAL INSURANCE | 1,885.00 | 1,560.00 | 1,550.96 | -0.58% |
| 10 E 002 2560 2230 00 000000 0000 | DENTAL INSURANCE | 2,515.00 | 2,205.00 | 2,320.02 | 5.22% |
| 10 E 011 2560 2230 00 000000 0000 | DENTAL INSURANCE | 1,195.00 | 1,105.00 | 1,096.56 | -0.76% |
| 10 E 001 2560 2250 00 000000 0000 | LONG TERM DISABILITY | 200.00 | 180.00 | 194.92 | 8.29% |
| TOTAL | EMPLOYEE BENEFITS | 105,817.00 | 99,612.00 | 105,553.15 | 5.96% |
| 10 E 001 2560 3190 00 000000 0000 | PURCHASE SERVICES | 75,000.00 | 40,000.00 | 72,735.00 | 81.84% |
| 10 E 002 2560 3230 00 000000 0000 | REPAIRS | 2,500.00 | 5,100.00 | 1,301.03 | -74.49% |
| 10 E 003 2560 3230 00 000000 0000 | REPAIRS | 1,300.00 | 1,000.00 | 1,238.14 | 403.81% |
| 10 E 004 2560 3230 00 000000 0000 | REPAIRS | 1,700.00 | 2,500.00 | 1,659.48 | -33.62% |
| 10 E 005 2560 3230 00 000000 0000 | REPAIRS | 1,000.00 | 1,000.00 | 844.59 | -15.54% |
| 10 E 008 2560 3230 00 000000 0000 | REPAIRS | 5,400.00 | 2,500.00 | 5,402.44 | 116.10% |
| 10 E 010 2560 3230 00 000000 0000 | REPAIRS | 2,500.00 | 2,500.00 | 736.03 | -70.56% |
| 10 E 011 2560 3230 00 000000 0000 | REPAIRS | 3,000.00 | 3,500.00 | 2,844.64 | -18.72% |
| 10 E 001 2560 3320 00 000000 0000 | TRAVEL | 200.00 | 200.00 | 85.55 | -57.23% |
| TOTAL | PURCHASED SERVICES | 92,600.00 | 58,300.00 | 86,846.90 | 48.97% |
| 10 E 001 2560 4100 00 000000 0000 | SUPPLIES/FOOD | 800.00 | 1,000.00 | 527.62 | -47.24% |
| 10 E 002 2560 4100 00 000000 0000 | SUPPLIES/FOOD | 345,000.00 | 345,000.00 | 335,263.53 | -2.82% |
| 10 E 003 2560 4100 00 000000 0000 | SUPPLIES/FOOD | 70,000.00 | 87,000.00 | 63,491.62 | -27.02% |
| 10 E 004 2560 4100 00 000000 0000 | SUPPLIES/FOOD | 80,000.00 | 82,000.00 | 71,294.93 | -13.05% |
| 10 E 005 2560 4100 00 000000 0000 | SUPPLIES/FOOD | 36,000.00 | 36,000.00 | 33,004.78 | -8.32% |
| 10 E 008 2560 4100 00 000000 0000 | SUPPLIES/FOOD | 73,000.00 | 85,000.00 | 63,096.79 | -25.77% |
| 10 E 010 2560 4100 00 000000 0000 | SUPPLIES/FOOD | 73,000.00 | 85,000.00 | 62,543.40 | -26.42% |
| 10 E 011 2560 4100 00 000000 0000 | SUPPLIES/FOOD | 130,000.00 | 140,000.00 | 110,366.55 | -21.17% |
| 10 E 002 2560 4110 00 000000 0000 | UNIFORMS | 2,000.00 | 2,400.00 | 851.73 | -64.51% |
| 10 E 003 2560 4110 00 000000 0000 | UNIFORMS | 500.00 | 700.00 | 106.99 | -84.72% |
| 10 E 004 2560 4110 00 000000 0000 | UNIFORMS | 700.00 | 900.00 | 525.00 | -41.67% |
| 10 E 005 2560 4110 00 000000 0000 | UNIFORMS | 400.00 | 500.00 | 217.69 | -56.46% |
| 10 E 008 2560 4110 00 000000 0000 | UNIFORMS | 700.00 | 900.00 | 75.59 | -91.60% |
| 10 E 010 2560 4110 00 000000 0000 | UNIFORMS | 700.00 | 900.00 | 436.31 | -51.52% |
| 10 E 011 2560 4110 00 000000 0000 | UNIFORMS | 900.00 | 1,200.00 | 690.85 | -42.43% |
| 10 E 001 2560 4900 00 000000 0000 | SUPPLIES/NON-FOOD | 1,000.00 | 2,000.00 | 745.03 | -62.75% |
| 10 E 002 2560 4900 00 000000 0000 | SUPPLIES/NON-FOOD | 32,000.00 | 30,000.00 | 30,955.44 | 3.18% |
| 10 E 003 2560 4900 00 000000 0000 | SUPPLIES/NON-FOOD | 8,200.00 | 8,700.00 | 7,202.25 | -17.22% |
| 10 E 004 2560 4900 00 000000 0000 | SUPPLIES/NON-FOOD | 8,500.00 | 6,000.00 | 7,478.14 | 24.64% |
| 10 E 005 2560 4900 00 000000 0000 | SUPPLIES/NON-FOOD | 4,700.00 | 3,000.00 | 3,762.15 | 25.41% |
| 10 E 008 2560 4900 00 000000 0000 | SUPPLIES/NON-FOOD | 4,800.00 | 6,000.00 | 3,881.91 | -35.30% |
| 10 E 010 2560 4900 00 000000 0000 | SUPPLIES/NON-FOOD | 8,000.00 | 6,000.00 | 5,974.35 | -0.43% |
| 10 E 011 2560 4900 00 000000 0000 | SUPPLIES/NON-FOOD | 15,000.00 | 12,000.00 | 12,669.20 | 5.58% |
| TOTAL | SUPPLIES | 895,900.00 | 942,200.00 | 815,161.85 | -13.48% |
| 10 E 002 2560 5400 00 000000 0000 | CAPITAL OUTLAY | 10,000.00 | 50,000.00 | 0.00 | -100.00% |
| 10 E 003 2560 5400 00 000000 0000 | CAPITAL OUTLAY | 20,000.00 | 40,000.00 | 18,283.58 | -54.29% |
| 10 E 004 2560 5400 00 000000 0000 | CAPITAL OUTLAY | 50,000.00 | 7,500.00 | 0.00 | -100.00% |
| 10 E 005 2560 5400 00 000000 0000 | CAPTIAL OUTLAY | 5,000.00 | 10,000.00 | 0.00 | -100.00% |
| 10 E 008 2560 5400 00 000000 0000 | CAPTIAL OUTLAY | 5,000.00 | 7,500.00 | 0.00 | -100.00% |
| 10 E 010 2560 5400 00 000000 0000 | CAPTIAL OUTLAY | 5,000.00 | 7,500.00 | 5,056.71 | -32.58% |
| 10 E 011 2560 5400 00 000000 0000 | CAPTIAL OUTLAY | 8,000.00 | 7,500.00 | 0.00 | -100.00% |
| TOTAL | CAPITAL OUTLAYS | 103,000.00 | 130,000.00 | 23,340.29 | -82.05% |
| 10 E 001 2560 6400 00 000000 0000 | DUES/FEES | 2,000.00 | 2,000.00 | 1,836.78 | -8.16% |
| 10 E 002 2560 6400 00 000000 0000 | DUES/FEES | 1,500.00 | 1,100.00 | 1,418.00 | 28.91% |
| 10 E 003 2560 6400 00 000000 0000 | DUES/FEES | 1,100.00 | 900.00 | 1,013.00 | 12.56% |
| 10 E 004 2560 6400 00 000000 0000 | DUES/FEES | 1,100.00 | 1,100.00 | 1,003.00 | -8.82% |
| 10 E 005 2560 6400 00 000000 0000 | DUES/FEES | 1,100.00 | 900.00 | 1,003.00 | 11.44% |
| 10 E 008 2560 6400 00 000000 0000 | DUES/FEES | 1,000.00 | 1,100.00 | 983.00 | -10.64% |

| | | | | | |
|------------------------------------|------------------------------------|---------------------|---------------------|---------------------|-----------------|
| 10 E 010 2560 6400 00 000000 0000 | DUES/FEES | 900.00 | 1,000.00 | 705.00 | -29.50% |
| 10 E 011 2560 6400 00 000000 0000 | DUES/FEES | 1,180.00 | 850.00 | 1,180.00 | 38.82% |
| TOTAL | OTHER OBJECTS | 9,880.00 | 8,960.00 | 9,141.78 | 2.14% |
| 10 E 002 2560 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 2,000.00 | 4,000.00 | 0.00 | -100.00% |
| 10 E 003 2560 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 1,200.00 | 1,000.00 | 1,201.01 | 20.10% |
| 10 E 004 2560 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 1,200.00 | 2,000.00 | 1,201.01 | -39.95% |
| 10 E 005 2560 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 1,200.00 | 750.00 | 1,201.01 | 60.13% |
| 10 E 008 2560 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 1,200.00 | 2,000.00 | 4,472.23 | 123.61% |
| 10 E 010 2560 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 1,500.00 | 2,000.00 | 1,961.54 | -1.92% |
| 10 E 011 2560 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 5,000.00 | 3,000.00 | 10,022.35 | 234.08% |
| TOTAL | NON-CAPITAL EQUIPMENT | 13,300.00 | 14,750.00 | 20,059.15 | 35.99% |
| GRAND TOTAL | FOOD SERVICES | 1,900,997.00 | 1,908,175.00 | 1,667,215.41 | -12.63% |
| COMMUNICATION SERVICES | | | | | |
| 10 E 001 2630 1000 00 000000 0000 | COMMUNICATIONS DIRECTOR SALARY | 99,220.00 | 94,271.00 | 94,270.75 | 0.00% |
| TOTAL | SALARIES | 99,220.00 | 94,271.00 | 94,270.75 | 0.00% |
| 10 E 001 2630 2110 00 000000 0000 | TEACHER RETIREMENT INSURANCE | 9,990.00 | 9,505.00 | 9,501.53 | -0.04% |
| 10 E 001 2630 2160 00 000000 0000 | TRS SURCHARGE EXPENSE | 645.00 | 612.00 | 612.43 | 0.07% |
| 10 E 001 2630 2210 00 000000 0000 | LIFE INSURANCE | 92.00 | 92.00 | 91.20 | -0.87% |
| 10 E 001 2630 2220 00 000000 0000 | MEDICAL INSURANCE | 28,715.00 | 28,660.00 | 28,424.48 | -0.82% |
| 10 E 001 2630 2230 00 000000 0000 | DENTAL INSURANCE | 1,685.00 | 1,560.00 | 1,550.96 | -0.58% |
| 10 E 001 2630 2290 00 000000 0000 | TEACHERS RETIREMENT INSURANCE | 1,745.00 | 1,660.00 | 1,657.53 | -0.15% |
| TOTAL | EMPLOYEE BENEFITS | 42,872.00 | 42,089.00 | 41,838.13 | -0.60% |
| 10 E 001 2630 3100 00 000000 0000 | PURCHASE SERVICES | 350.00 | 350.00 | 74.90 | 40.46% |
| TOTAL | PURCHASED SERVICES | 350.00 | 350.00 | 74.90 | -78.60% |
| 10 E 001 2630 4100 00 000000 0000 | COMMUNICATION SUPPLIES | 1,500.00 | 2,000.00 | 1,426.96 | -28.65% |
| TOTAL | SUPPLIES | 1,500.00 | 2,000.00 | 1,426.96 | -28.65% |
| 10 E 001 2630 6400 00 000000 0000 | DUES/FEES | 250.00 | 500.00 | 0.00 | -100.00% |
| TOTAL | OTHER OBJECTS | 250.00 | 500.00 | 0.00 | -100.00% |
| 10 E 001 2630 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 500.00 | 500.00 | 0.00 | -100.00% |
| TOTAL | NON-CAPITAL EQUIPMENT | 500.00 | 500.00 | 0.00 | -100.00% |
| GRAND TOTAL | COMMUNICATION SERVICES | 144,692.00 | 139,710.00 | 137,610.74 | -1.50% |
| COMPUTER EDUCATION SERVICES | | | | | |
| 10 E 001 2660 1000 00 000000 0000 | COMPUTER DIRECTOR SALARY | 162,700.00 | 154,583.00 | 154,582.95 | 0.00% |
| 10 E 001 2660 1110 00 000000 0000 | ADMIN ASSISTANT SALARY | 16,515.00 | 15,690.00 | 15,690.00 | 0.00% |
| 10 E 001 2660 1150 00 000000 0000 | COMPUTER TECHNICIANS | 511,700.00 | 486,176.00 | 497,228.85 | 2.27% |
| TOTAL | SALARIES | 690,915.00 | 656,449.00 | 667,501.80 | 1.68% |
| 10 E 001 2660 2210 00 000000 0000 | LIFE INSURANCE | 425.00 | 422.00 | 422.75 | 0.18% |
| 10 E 001 2660 2220 00 000000 0000 | MEDICAL INSURANCE | 137,265.00 | 136,990.00 | 135,822.00 | -0.85% |
| 10 E 001 2660 2230 00 000000 0000 | DENTAL INSURANCE | 8,525.00 | 7,880.00 | 7,556.76 | -4.10% |
| 10 E 001 2660 2250 00 000000 0000 | LONG TERM DISABILITY | 350.00 | 350.00 | 348.00 | -0.57% |
| TOTAL | EMPLOYEE BENEFITS | 146,565.00 | 145,642.00 | 144,149.51 | -1.02% |
| 10 E 001 2660 3160 00 000000 0000 | PURCHASE SERVICES/SOFTWARE/LEASES | 560,000.00 | 550,000.00 | 547,727.38 | -0.41% |
| 10 E 001 2660 3190 00 000000 0000 | PURCHASE SERVICES/WEBSITE | 80,000.00 | 5,000.00 | 70,541.32 | 1310.83% |
| 10 E 001 2660 3230 00 000000 0000 | REPAIRS | 0.00 | 300.00 | 0.00 | -100.00% |
| 10 E 001 2660 3320 00 000000 0000 | TRAVEL | 5,000.00 | 5,500.00 | 4,481.95 | -18.51% |
| TOTAL | PURCHASED SERVICES | 645,000.00 | 560,800.00 | 622,750.65 | 11.05% |
| 10 E 001 2660 4100 00 000000 0000 | TECHNOLOGY SUPPLIES | 200,000.00 | 290,000.00 | 66,534.79 | -77.06% |
| TOTAL | SUPPLIES | 200,000.00 | 290,000.00 | 66,534.79 | -77.06% |
| 10 E 001 2660 5400 00 000000 0000 | CAPITAL OUTLAY | 5,000.00 | 20,000.00 | 0.00 | -100.00% |
| TOTAL | CAPITAL OUTLAYS | 5,000.00 | 20,000.00 | 0.00 | -100.00% |
| 10 E 001 2660 6400 00 000000 0000 | DUES/FEES | 2,000.00 | 1,700.00 | 1,922.58 | 13.09% |
| TOTAL | OTHER OBJECTS | 2,000.00 | 1,700.00 | 1,922.58 | 13.09% |
| 10 E 001 2660 7100 00 000000 0000 | NON-CAPITAL OUTLAY | 450,000.00 | 300,000.00 | 589,772.39 | 96.59% |
| TOTAL | NON-CAPITAL EQUIPMENT | 450,000.00 | 300,000.00 | 589,772.39 | 96.59% |
| GRAND TOTAL | COMPUTER EDUCATION SERVICES | 2,139,480.00 | 1,974,591.00 | 2,092,631.72 | 5.98% |
| OTHER SUPPORTING SERVICES | | | | | |
| 10 E 001 2900 3000 00 000000 0000 | CONTRACTED SERVICES-SOCIAL MEDIA | 0.00 | 2,000.00 | 0.00 | -100.00% |

| | | | | | |
|---|-----------------------------------|---------------|---------------|---------------|----------|
| TOTAL | PURCHASED SERVICES | 0.00 | 2,000.00 | 0.00 | -100.00% |
| GRAND TOTAL | OTHER SUPPORTING SERVICES | 0.00 | 2,000.00 | 0.00 | -100.00% |
| SPECIAL EDUCATION TUITION | | | | | |
| 10 E 001 4120 3190 00 000000 0000 | SPECIAL ED PAYMENTS TO OTHER GOVT | 850,000.00 | 800,000.00 | 626,164.45 | -21.73% |
| TOTAL | PURCHASED SERVICES | 850,000.00 | 800,000.00 | 626,164.45 | -21.73% |
| GRAND TOTAL | SPECIAL EDUCATION TUITION | 850,000.00 | 800,000.00 | 626,164.45 | -21.73% |
| ON BEHALF PAYMENTS | | | | | |
| 10 E 001 4180 6000 00 000000 0000 | TRS-ON BEHALF PAYMENT | 18,306,000.00 | 18,306,000.00 | 18,306,000.00 | 0.00% |
| TOTAL | OTHER OBJECTS | 18,306,000.00 | 18,306,000.00 | 18,306,000.00 | 0.00% |
| GRAND TOTAL | ON BEHALF PAYMENTS | 18,306,000.00 | 18,306,000.00 | 18,306,000.00 | 0.00% |
| OTHER PAYMENTS TO GOVT UNITS | | | | | |
| 10 E 001 4190 6000 00 000000 0000 | SPECIAL ED PAYMENTS TO OTHER GOVT | 40,000.00 | 65,000.00 | 64,489.49 | 0.00% |
| TOTAL | OTHER OBJECTS | 40,000.00 | 65,000.00 | 64,489.49 | 0.00% |
| GRAND TOTAL | OTHER PAYMENTS TO GOV'T UNITS | 40,000.00 | 65,000.00 | 64,489.49 | 0.00% |
| SPECIAL EDUCATION TUITION | | | | | |
| 10 E 001 4220 6700 00 000000 0000 | SPECIAL EDUCATION TUITION | 5,100,000.00 | 3,200,000.00 | 3,690,182.10 | 15.32% |
| TOTAL | OTHER OBJECTS | 5,100,000.00 | 3,200,000.00 | 3,690,182.10 | 15.32% |
| CAREER & TECHNICAL TUITION | | | | | |
| 10 E 001 4240 6700 00 000000 0000 | CAREER & TECHNICAL TUITION | 40,000.00 | 0.00 | 34,437.84 | 405.00% |
| TOTAL | OTHER OBJECTS | 40,000.00 | 0.00 | 34,437.84 | 0.00% |
| COMMUNITY COLLEGE TUITION | | | | | |
| 10 E 001 4270 6700 00 000000 0000 | COMMUNITY COLLEGE TUITION | 70,000.00 | 47,000.00 | 68,018.54 | 44.72% |
| TOTAL | OTHER OBJECTS | 70,000.00 | 47,000.00 | 68,018.54 | 44.72% |
| VIRTUAL HIGH SCHOOL TUITION | | | | | |
| 10 E 001 4280 6700 00 000000 0000 | VIRTUAL HIGH SCHOOL TUITION | 0.00 | 200.00 | 0.00 | -100.00% |
| TOTAL | OTHER OBJECTS | 0.00 | 200.00 | 0.00 | -100.00% |
| SAFE SCHOOL TUITION | | | | | |
| 10 E 001 4290 6700 00 000000 0000 | SAFE SCHOOL TUITION | 5,000.00 | 0.00 | 0.00 | 0.00% |
| TOTAL | OTHER OBJECTS | 5,000.00 | 0.00 | 0.00 | 0.00% |
| GRAND TOTAL | TUITION | 5,215,000.00 | 3,247,200.00 | 3,792,638.48 | 16.80% |
| PROVISION FOR CONTINGENCIES | | | | | |
| 10 E 001 6000 6900 00 000000 0000 | CONTINGENCY ACCT | 200,000.00 | 200,000.00 | 0.00 | -100.00% |
| TOTAL | OTHER OBJECTS | 200,000.00 | 200,000.00 | 0.00 | -100.00% |
| GRAND TOTAL | PROVISION FOR CONTINGENCIES | 200,000.00 | 200,000.00 | 0.00 | -100.00% |
| GRANTS | | | | | |
| CAREER & TECHNICAL EDUCATION GRANT | | | | | |
| 10 E 002 1130 1100 00 322000 0000 | CTE SALARIES | 320.00 | 0.00 | 320.00 | 0.00% |
| TOTAL | SALARIES | 320.00 | 0.00 | 320.00 | 0.00% |
| 10 E 002 1130 2160 00 322000 0000 | CTE TRS SURCHARGE EXPENSE | 5.00 | 0.00 | 1.86 | 0.00% |
| 10 E 002 1130 2290 00 322000 0000 | CTE-TEACHER RETIREMENT INS | 5.00 | 0.00 | 2.14 | 0.00% |
| TOTAL | EMPLOYEE BENEFITS | 10.00 | 0.00 | 4.00 | 0.00% |
| 10 E 002 1130 3100 00 322000 0000 | PURCHASE SERVICES | 37,280.00 | 31,410.00 | 37,660.00 | 19.90% |
| TOTAL | PURCHASED SERVICES | 37,280.00 | 31,410.00 | 37,660.00 | 19.90% |
| 10 E 002 1130 4100 00 322000 0000 | CTE SUPPLIES | 65,369.00 | 100,853.00 | 66,818.47 | -33.75% |
| TOTAL | SUPPLIES | 65,369.00 | 100,853.00 | 66,818.47 | -33.75% |
| 10 E 002 1130 5400 00 322000 0000 | CAPITAL OUTLAY | 78,500.00 | 0.00 | 0.00 | 0.00% |
| TOTAL | CAPITAL OUTLAYS | 78,500.00 | 0.00 | 0.00 | 0.00% |
| 10 E 002 1130 7100 00 322000 0000 | NON-CAPITAL OUTLAY | 14,580.00 | 4,600.00 | 14,582.32 | 217.01% |
| TOTAL | NON-CAPITAL EQUIPMENT | 14,580.00 | 4,600.00 | 14,582.32 | 217.01% |
| 10 E 002 2210 1100 00 322000 0000 | CTE SALARIES | 6,800.00 | 1,500.00 | 6,800.00 | 353.33% |
| TOTAL | SALARIES | 6,800.00 | 1,500.00 | 6,800.00 | 353.33% |
| 10 E 002 2210 2110 00 322000 0000 | CTE-TEACHER RETIREMENT | 675.00 | 0.00 | 672.52 | 0.00% |
| 10 E 002 2210 2160 00 322000 0000 | CTE-TRS SURCHARGE EXPENSE | 45.00 | 0.00 | 43.35 | 0.00% |

| | | | | | |
|-----------------------------------|--|-------------------|-------------------|-------------------|----------------|
| 10 E 002 2210 2290 00 322000 0000 | CTE-TEACHER RETIREMENT INS | 120.00 | 0.00 | 117.30 | 0.00% |
| TOTAL | EMPLOYEE BENEFITS | 840.00 | 0.00 | 833.17 | 0.00% |
| 10 E 002 2210 3190 00 322000 0000 | CTE PURCHASE SERVICES | 2,500.00 | 2,500.00 | 1,469.30 | -41.23% |
| TOTAL | PURCHASED SERVICES | 2,500.00 | 2,500.00 | 1,469.30 | -41.23% |
| 10 E 002 2230 4100 00 322000 0000 | CTE SUPPLIES | 5,300.00 | 5,299.00 | 5,299.00 | 0.00% |
| TOTAL | SUPPLIES | 5,300.00 | 5,299.00 | 5,299.00 | 0.00% |
| 10 E 002 2550 3320 00 322000 0000 | CTE PURCHASE SERVICES | 3,000.00 | 0.00 | 1,672.00 | 0.00% |
| TOTAL | PURCHASED SERVICES | 3,000.00 | 0.00 | 1,672.00 | 0.00% |
| GRAND TOTAL | CAREER & TECHNICAL ED GRANT | 214,499.00 | 146,162.00 | 135,458.26 | -7.32% |
| AGRICULTURE GRANT | | | | | |
| 10 E 002 1130 3100 00 323500 0000 | AGRICULTURE SERVICES | 1,000.00 | 1,000.00 | 1,000.00 | 0.00% |
| TOTAL | PURCHASED SERVICES | 1,000.00 | 1,000.00 | 1,000.00 | 0.00% |
| 10 E 002 1130 4100 00 323500 0000 | AGRICULTURE SUPPLIES | 695.00 | 2,169.00 | 1,112.14 | -48.73% |
| TOTAL | SUPPLIES | 695.00 | 2,169.00 | 1,112.14 | -48.73% |
| 10 E 002 1130 7100 00 323500 0000 | AGRICULTURE NON-CAPITAL OUTLAY | 2,480.00 | 0.00 | 67.00 | 0.00% |
| TOTAL | NON-CAPITAL EQUIPMENT | 2,480.00 | 0.00 | 67.00 | 0.00% |
| 10 E 002 2210 3100 00 323500 0000 | AGRICULTURE SERVICES | 700.00 | 700.00 | 750.00 | 7.14% |
| TOTAL | PURCHASED SERVICES | 700.00 | 700.00 | 750.00 | 7.14% |
| GRAND TOTAL | AGRICULTURE GRANT | 4,875.00 | 3,869.00 | 2,929.14 | 40.62% |
| THREE CIRCLES FFA/AG GRANT | | | | | |
| 10 E 002 1130 1100 00 323530 0000 | THREE CIRCLES SALARIES | 23,265.00 | 23,265.00 | 23,265.00 | 0.00% |
| TOTAL | SALARIES | 23,265.00 | 23,265.00 | 23,265.00 | 0.00% |
| 10 E 002 1130 2110 00 323530 0000 | THREE CIRCLES TRS | 2,300.00 | 2,301.00 | 2,300.80 | -0.01% |
| 10 E 002 1130 2160 00 323530 0000 | THREE CIRCLES TRS SURCHARGE | 150.00 | 0.00 | 148.40 | 0.00% |
| 10 E 002 1130 2290 00 323530 0000 | THREE CIRCLES TRS THIS | 405.00 | 230.00 | 401.20 | 74.43% |
| TOTAL | EMPLOYEE BENEFITS | 2,855.00 | 2,531.00 | 2,850.40 | 12.62% |
| 10 E 002 2210 1100 00 323530 0000 | THREE CIRCLES SALARIES | 5,815.00 | 5,816.00 | 5,816.00 | 0.00% |
| TOTAL | SALARIES | 5,815.00 | 5,816.00 | 5,816.00 | 0.00% |
| 10 E 002 2210 2110 00 323530 0000 | THREE CIRCLES TRS | 575.00 | 576.00 | 575.11 | -0.15% |
| 10 E 002 2210 2160 00 323530 0000 | THREE CIRCLES TRS SURCHARGE | 40.00 | 0.00 | 36.99 | 0.00% |
| 10 E 002 2210 2290 00 323530 0000 | THREE CIRCLES TRS THIS | 100.00 | 57.00 | 100.57 | 76.44% |
| TOTAL | EMPLOYEE BENEFITS | 715.00 | 633.00 | 712.67 | 12.59% |
| GRAND TOTAL | THREE CIRCLES FFA/AG GRANT | 32,650.00 | 32,245.00 | 32,644.07 | 1.24% |
| TEACHERS VACANCY GRANT | | | | | |
| 10 E 001 1100 1130 00 399900 0000 | TEACHER VACANCY SALARIES | 17,000.00 | 10,747.00 | 18,114.44 | 68.55% |
| TOTAL | SALARIES | 17,000.00 | 10,747.00 | 18,114.44 | 68.55% |
| 10 E 001 1100 4100 00 399900 0000 | TEACHER VACANCY SUPPLIES | 0.00 | 0.00 | 12,435.15 | 0.00% |
| TOTAL | SUPPLIES | 0.00 | 0.00 | 12,435.15 | 0.00% |
| 10 E 001 2210 3100 00 399900 0000 | TEACHER VACANCY PURCHASE SERVICES | 20,000.00 | 30,000.00 | 35,256.15 | 17.52% |
| TOTAL | PURCHASED SERVICES | 20,000.00 | 30,000.00 | 35,256.15 | 17.52% |
| 10 E 001 2540 3100 00 399900 0000 | TEACHER VACANCY PURCHASE SERVICES | 0.00 | 0.00 | 3,000.00 | 0.00% |
| TOTAL | PURCHASED SERVICES | 0.00 | 0.00 | 3,000.00 | 0.00% |
| 10 E 001 2540 4100 00 399900 0000 | TEACHER VACANCY SUPPLIES | 0.00 | 10,000.00 | 25,081.70 | 150.82% |
| TOTAL | SUPPLIES | 0.00 | 10,000.00 | 25,081.70 | 150.82% |
| 10 E 001 2640 4100 00 399900 0000 | TEACHER VACANCY SUPPLIES | 30,000.00 | 50,000.00 | 33,829.96 | -32.34% |
| TOTAL | SUPPLIES | 30,000.00 | 50,000.00 | 33,829.96 | -32.34% |
| 10 E 001 2640 6400 00 399900 0000 | TEACHER VACANCY DUES/FEES | 0.00 | 0.00 | 350.00 | 0.00% |
| TOTAL | OTHER OBJECTS | 0.00 | 0.00 | 350.00 | 0.00% |
| GRAND TOTAL | TEACHER VACANCY GRANT | 67,000.00 | 100,747.00 | 128,067.40 | 27.12% |
| LIBRARY GRANT | | | | | |
| 10 E 002 2220 4300 00 399900 0000 | LIBRARY GRANT SUPPLIES | 1,317.00 | 1,300.00 | 1,058.58 | -18.57% |
| 10 E 003 2220 4300 00 399900 0000 | LIBRARY GRANT SUPPLIES | 340.00 | 335.00 | 646.29 | 92.92% |
| 10 E 004 2220 4300 00 399900 0000 | LIBRARY GRANT SUPPLIES | 550.00 | 625.00 | 540.56 | -13.51% |

| | | | | | |
|-----------------------------------|--------------------------------------|-------------------|-------------------|-------------------|----------------|
| 10 E 005 2220 4300 00 399900 0000 | LIBRARY GRANT SUPPLIES | 215.00 | 541.00 | 335.34 | -38.01% |
| 10 E 008 2220 4300 00 399900 0000 | LIBRARY GRANT SUPPLIES | 510.00 | 212.00 | 504.47 | 137.96% |
| 10 E 010 2220 4300 00 399900 0000 | LIBRARY GRANT SUPPLIES | 605.00 | 505.00 | 598.71 | 18.56% |
| 10 E 011 2220 4300 00 399900 0000 | LIBRARY GRANT SUPPLIES | 640.00 | 600.00 | 575.06 | -4.16% |
| TOTAL | SUPPLIES | 4,177.00 | 4,118.00 | 4,259.01 | 3.42% |
| GRAND TOTAL | LIBRARY GRANT | 4,177.00 | 4,118.00 | 4,259.01 | 3.42% |
| TITLE I LOW INCOME GRANT | | | | | |
| 10 E 001 1100 1100 00 430000 0000 | TITLE I SALARIES | 109,680.00 | 120,000.00 | 108,021.40 | -9.98% |
| TOTAL | SALARIES | 109,680.00 | 120,000.00 | 108,021.40 | -9.98% |
| 10 E 001 1100 2110 00 430000 0000 | TITLE I TRS | 23,000.00 | 11,868.00 | 22,957.37 | 93.44% |
| 10 E 001 1100 2160 00 430000 0000 | TITLE I TRS SURCHARGE EXPENSE | 690.00 | 765.00 | 688.58 | -9.99% |
| 10 E 001 1100 2210 00 430000 0000 | TITLE I LIFE INSURANCE | 40.00 | 0.00 | 38.76 | 0.00% |
| 10 E 001 1100 2220 00 430000 0000 | TITLE I MEDICAL INSURANCE | 5,950.00 | 0.00 | 5,942.94 | 0.00% |
| 10 E 001 1100 2230 00 430000 0000 | TITLE I DENTAL | 305.00 | 0.00 | 305.55 | 0.00% |
| 10 E 001 1100 2290 00 430000 0000 | TITLE I THIS | 1,865.00 | 2,069.00 | 1,863.63 | -9.93% |
| TOTAL | EMPLOYEE BENEFITS | 31,850.00 | 14,702.00 | 31,796.83 | 116.28% |
| 10 E 001 1100 4100 00 430000 0000 | TITLE I SUPPLIES | 3,135.00 | 0.00 | 947.95 | 0.00% |
| TOTAL | SUPPLIES | 3,135.00 | 0.00 | 947.95 | 0.00% |
| SOCIAL WORK | | | | | |
| 10 E 001 2110 1100 00 430000 0000 | TITLE I SOCIAL WORK SALARIES | 13,970.00 | 12,466.00 | 13,970.00 | 12.06% |
| TOTAL | SALARIES | 13,970.00 | 12,466.00 | 13,970.00 | 12.06% |
| 10 E 001 2110 2110 00 430000 0000 | TITLE I TRS | 3,040.00 | 3,040.00 | 2,831.07 | 4076.87% |
| 10 E 001 2110 2160 00 430000 0000 | TITLE I TRS SURCHARGE | 103.00 | 103.00 | 89.05 | -13.54% |
| 10 E 001 2110 2210 00 430000 0000 | TITLE I LIFE INSURANCE | 10.00 | 0.00 | 9.73 | 0.00% |
| 10 E 001 2110 2220 00 430000 0000 | TITLE I MEDICAL INSURANCE | 2,150.00 | 0.00 | 2,149.07 | 0.00% |
| 10 E 001 2110 2230 00 430000 0000 | TITLE I DENTAL INSURANCE | 80.00 | 0.00 | 75.26 | 0.00% |
| 10 E 001 2110 2290 00 430000 0000 | TITLE I THIS | 241.00 | 275.00 | 241.02 | -12.36% |
| TOTAL | EMPLOYEE BENEFITS | 5,624.00 | 3,418.00 | 5,395.20 | 57.85% |
| HEALTH SERVICES | | | | | |
| 10 E 001 2130 1100 00 430000 0000 | TITLE I SALARIES | 1,760.00 | 0.00 | 1,760.00 | 0.00% |
| TOTAL | SALARIES | 1,760.00 | 0.00 | 1,760.00 | 0.00% |
| 10 E 001 2130 2110 00 430000 0000 | TITLE I TRS | 375.00 | 0.00 | 374.05 | 0.00% |
| 10 E 001 2130 2160 00 430000 0000 | TITLE I TRS SURCHARGE EXPENSE | 12.00 | 0.00 | 11.22 | 0.00% |
| 10 E 001 2130 2290 00 430000 0000 | TITLE I TEACHER RETIREMENT INSURANCE | 31.00 | 0.00 | 30.37 | 0.00% |
| TOTAL | EMPLOYEE BENEFITS | 418.00 | 0.00 | 415.64 | 0.00% |
| ADMINISTRATION | | | | | |
| 10 E 001 2400 1000 00 430000 0000 | TITLE I SALARIES | 3,233.00 | 10,660.00 | 3,233.00 | -69.67% |
| 10 E 001 2400 1100 00 430000 0000 | TITLE I SALARIES | 3,500.00 | 0.00 | 3,500.00 | 0.00% |
| TOTAL | SALARIES | 6,733.00 | 10,660.00 | 6,733.00 | -36.84% |
| 10 E 001 2400 2110 00 430000 0000 | TITLE I TEACHER RETIREMENT | 1,431.00 | 3,000.00 | 1,430.94 | -52.30% |
| 10 E 001 2400 2160 00 430000 0000 | TITLE I TRS SURCHARGE EXPENSE | 43.00 | 100.00 | 42.92 | -57.08% |
| 10 E 001 2400 2210 00 430000 0000 | TITLE I LIFE INSURANCE | 5.00 | 0.00 | 1.14 | 0.00% |
| 10 E 001 2400 2220 00 430000 0000 | TITLE I MEDICAL INSURANCE | 538.00 | 0.00 | 537.27 | 0.00% |
| 10 E 001 2400 2230 00 430000 0000 | TITLE I DENTAL INSURANCE | 30.00 | 0.00 | 29.20 | 0.00% |
| 10 E 001 2400 2290 00 430000 0000 | TITLE I TEACHER RETIREMENT INSURANCE | 115.00 | 280.00 | 116.17 | -58.51% |
| TOTAL | EMPLOYEE BENEFITS | 2,162.00 | 3,380.00 | 2,157.64 | -36.16% |
| TRANSPORTATION | | | | | |
| 10 E 001 2550 3320 00 430000 0000 | TITLE I PURCHASE SERVICES | 1,800.00 | 0.00 | 4,761.00 | 0.00% |
| TOTAL | PURCHASED SERVICES | 1,800.00 | 0.00 | 4,761.00 | 0.00% |
| TRANSLATION SALARY | | | | | |
| 10 E 001 2630 1100 00 430000 0000 | TITLE I SALARIES | 0.00 | 0.00 | 9,134.62 | 0.00% |
| TOTAL | SALARIES | 0.00 | 0.00 | 9,134.62 | 0.00% |
| 10 E 001 2630 2210 00 430000 0000 | TITLE I LIFE INSURANCE | 0.00 | 0.00 | 7.24 | 0.00% |
| 10 E 001 2630 2220 00 430000 0000 | TITLE I MEDICAL INSURANCE | 0.00 | 0.00 | 4,329.62 | 0.00% |
| 10 E 001 2630 2230 00 430000 0000 | TITLE I DENTAL INSURANCE | 0.00 | 0.00 | 241.18 | 0.00% |
| TOTAL | EMPLOYEE BENEFITS | 0.00 | 0.00 | 4,578.04 | 0.00% |
| GRAND TOTAL | TITLE I LOW INCOME GRANT | 177,132.00 | 164,626.00 | 189,671.32 | 15.21% |
| TITLE IV-A SSAE GRANT | | | | | |
| 10 E 001 1100 4100 00 440000 0000 | TITLE IV SUPPLIES | 3,000.00 | 0.00 | 0.00 | 0.00% |
| TOTAL | SUPPLIES | 3,000.00 | 0.00 | 0.00 | 0.00% |

| | | | | | |
|------------------------------------|--|------------------|------------------|------------------|-----------------|
| SUPPLIES | | | | | |
| 10 E 001 2220 4100 00 440000 0000 | TITLE IV LIBRARY SUPPLIES | 18,112.00 | 11,256.00 | 12,567.76 | 11.65% |
| | TOTAL SUPPLIES | 18,112.00 | 11,256.00 | 12,567.76 | 11.65% |
| | GRAND TOTAL | 21,112.00 | 11,256.00 | 12,567.76 | 11.65% |
| IDEA PART B PRESCHOOL GRANT | | | | | |
| ELEMENTARY | | | | | |
| 10 E 001 1110 4100 00 460000 0000 | IDEA PRESCHOOL INSTRUCT SUPPLIES | 7,500.00 | 925.00 | 1,078.98 | 16.65% |
| | TOTAL SUPPLIES | 7,500.00 | 925.00 | 1,078.98 | 16.65% |
| CURRICULUM | | | | | |
| 10 E 001 2210 3190 00 460000 0000 | IDEA PRESCHOOL PURCHASE SERVICES | 1,129.00 | 4,000.00 | 9,080.45 | 127.01% |
| | TOTAL PURCHASED SERVICES | 1,129.00 | 4,000.00 | 9,080.45 | 127.01% |
| ASSESSMENT | | | | | |
| 10 E 001 2230 3190 00 460000 0000 | IDEA PRESCHOOL PURCHASE SERVICES | 0.00 | 3,500.00 | 0.00 | -100.00% |
| | TOTAL PURCHASED SERVICES | 0.00 | 3,500.00 | 0.00 | -100.00% |
| | GRAND TOTAL | 8,629.00 | 8,425.00 | 10,159.43 | 20.59% |
| IDEA FLOW THROUGH GRANT | | | | | |
| SPECIAL PROGRAMS | | | | | |
| 10 E 001 1200 3140 00 462000 0000 | IDEA FT PURCHASE SERVICES | 40,000.00 | 25,000.00 | 34,309.64 | 37.24% |
| | TOTAL PURCHASED SERVICES | 40,000.00 | 25,000.00 | 34,309.64 | 37.24% |
| 10 E 001 1200 4100 00 462000 0000 | IDEA FT SUPPLIES | 61,500.00 | 14,500.00 | 36,021.02 | 148.42% |
| | TOTAL SUPPLIES | 61,500.00 | 14,500.00 | 36,021.02 | 408.42% |
| 10 E 001 1200 5400 00 462000 0000 | IDEA FT CAPITAL OUTLAY | 0.00 | 7,000.00 | 7,895.00 | 12.79% |
| | TOTAL CAPITAL OUTLAYS | 0.00 | 7,000.00 | 7,895.00 | 12.79% |
| HEALTH SERVICES | | | | | |
| 10 E 001 2130 7100 00 462000 0000 | IDEA FT HEALTH SERVICES NON-CAPITAL OUTLAY | 0.00 | 0.00 | 3,064.62 | 0.00% |
| | TOTAL NON-CAPITAL EQUIPMENT | 0.00 | 0.00 | 3,064.62 | 0.00% |
| PSYCHOLOGICAL | | | | | |
| 10 E 001 2140 3140 00 462000 0000 | IDEA FT PSYCHOLOGICAL SERVICES | 8,500.00 | 3,500.00 | 8,500.00 | 142.86% |
| | TOTAL PURCHASED SERVICES | 8,500.00 | 3,500.00 | 8,500.00 | 142.86% |
| SPEECH | | | | | |
| 10 E 001 2150 3100 00 462000 0000 | IDEA FT SPEECH SERVICES | 57,000.00 | 45,000.00 | 49,748.91 | 10.55% |
| | TOTAL PURCHASED SERVICES | 57,000.00 | 45,000.00 | 49,748.91 | 10.55% |
| CURRICULUM | | | | | |
| 10 E 001 2210 1100 00 462000 0000 | IDEA FT SALARIES | 4,000.00 | 4,000.00 | 730.00 | -81.75% |
| | TOTAL SALARIES | 4,000.00 | 4,000.00 | 730.00 | -81.75% |
| 10 E 001 2210 2110 00 462000 0000 | TEACHERS RETIREMENT | 862.00 | 862.00 | 72.19 | -91.63% |
| 10 E 001 2210 2160 00 462000 0000 | TRS SURCHARGE EXPENSE | 25.00 | 26.00 | 4.65 | -82.12% |
| 10 E 001 2210 2290 00 462000 0000 | IDEA FT TEACHER RETIREMENT INS | 70.00 | 70.00 | 12.59 | -82.01% |
| | TOTAL EMPLOYEE BENEFITS | 957.00 | 958.00 | 89.43 | -90.66% |
| 10 E 001 2210 3100 00 462000 0000 | IDEA FT PURCHASE SERVICES | 56,000.00 | 56,000.00 | 50,238.66 | -10.29% |
| | TOTAL PURCHASED SERVICES | 56,000.00 | 56,000.00 | 50,238.66 | -10.29% |
| ASSESSMENT | | | | | |
| 10 E 001 2230 3190 00 462000 0000 | IDEA FT PURCHASE SERVICES | 40,000.00 | 30,000.00 | 35,101.26 | 17.00% |
| | TOTAL PURCHASED SERVICES | 40,000.00 | 30,000.00 | 35,101.26 | 17.00% |
| ADMINISTRATION | | | | | |
| 10 E 001 2330 1000 00 462000 0000 | IDEA FT SALARIES | 51,382.00 | 41,382.00 | 41,382.00 | 0.00% |
| | TOTAL SALARIES | 51,382.00 | 41,382.00 | 41,382.00 | 0.00% |
| 10 E 001 2330 2110 00 462000 0000 | IDEA FT TEACHERS RETIREMENT | 11,066.00 | 8,913.00 | 8,794.78 | -1.33% |
| 10 E 001 2330 2160 00 462000 0000 | IDEA FT TRS SURCHARGE EXPENSE | 325.00 | 264.00 | 263.81 | -0.07% |
| 10 E 001 2330 2210 00 462000 0000 | IDEA FT LIFE INSURANCE | 30.00 | 32.00 | 30.52 | -4.63% |
| 10 E 001 2330 2220 00 462000 0000 | IDEA FT MEDICAL INSURANCE | 12,100.00 | 9,550.00 | 9,357.18 | -2.02% |
| 10 E 001 2330 2230 00 462000 0000 | IDEA FT DENTAL INSURANCE | 715.00 | 532.00 | 514.70 | -3.25% |
| 10 E 001 2330 2250 00 462000 0000 | IDEA FT LTD | 150.00 | 115.00 | 112.56 | -2.12% |
| 10 E 001 2330 2290 00 462000 0000 | IDEA FT TEACHER RETIREMENT INS | 885.00 | 715.00 | 713.91 | -0.15% |
| | TOTAL EMPLOYEE BENEFITS | 25,271.00 | 20,121.00 | 19,787.46 | -1.66% |
| TRANSPORTATION | | | | | |
| 10 E 001 2550 3320 00 462000 0000 | IDEA FT PURCHASE SERVICES | 10,000.00 | 10,000.00 | 5,843.11 | -41.57% |
| | TOTAL PURCHASED SERVICES | 10,000.00 | 10,000.00 | 5,843.11 | -41.57% |

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|---|---|---------------------|-------------------|-------------------|-----------------|
| COMPUTER EDUCATION SERVICES | | | | | |
| 10 E 001 2660 3160 00 462000 0000 | IDEA FT CONTRACTED SERVICES | 13,000.00 | 13,000.00 | 7,893.90 | -39.28% |
| TOTAL | PURCHASED SERVICES | 13,000.00 | 13,000.00 | 7,893.90 | -39.28% |
| SPECIAL EDUCATION TUITION | | | | | |
| 10 E 001 4120 3190 00 462000 0000 | IDEA FT PAYMENTS TO OTHER GOVT | 309,485.00 | 270,000.00 | 309,485.00 | 14.62% |
| TOTAL | PURCHASED SERVICES | 309,485.00 | 270,000.00 | 309,485.00 | 14.62% |
| 10 E 001 4220 6700 00 462000 0000 | IDEA FT PMTS TO GOVT/TUITION | 323,086.00 | 323,086.00 | 323,086.00 | 0.00% |
| TOTAL | OTHER OBJECTS | 323,086.00 | 323,086.00 | 323,086.00 | 0.00% |
| GRAND TOTAL | IDEA FLOW THROUGH GRANT | 1,000,181.00 | 863,547.00 | 933,176.01 | 8.06% |
| PERKINS GRANT | | | | | |
| 10 E 002 1130 3100 00 474500 0000 | PERKINS PURCHASE SERVICES | 9,890.00 | 9,890.00 | 9,805.00 | -0.86% |
| TOTAL | PURCHASED SERVICES | 9,890.00 | 9,890.00 | 9,805.00 | -0.86% |
| 10 E 002 1130 4100 00 474500 0000 | PERKINS SUPPLIES | 2,564.00 | 2,564.00 | 4,430.73 | 72.81% |
| TOTAL | SUPPLIES | 2,564.00 | 2,564.00 | 4,430.73 | 72.81% |
| 10 E 002 1130 7100 00 474500 0000 | PERKINS NON-CAPITAL OUTLAY | 1,386.00 | 1,386.00 | 1,285.00 | -7.29% |
| TOTAL | NON-CAPITAL EQUIPMENT | 1,386.00 | 1,386.00 | 1,285.00 | -7.29% |
| 10 E 002 2120 3100 00 474500 0000 | PERKINS PURCHASE SERVICES | 3,868.00 | 3,868.00 | 3,868.00 | 0.00% |
| TOTAL | PURCHASED SERVICES | 3,868.00 | 3,868.00 | 3,868.00 | 0.00% |
| 10 E 002 2230 4100 00 474500 0000 | PERKINS ASSESSMENT AND TESTING | 2,700.00 | 2,700.00 | 2,600.00 | -3.70% |
| TOTAL | SUPPLIES | 2,700.00 | 2,700.00 | 2,600.00 | -3.70% |
| GRAND TOTAL | PERKINS GRANT | 20,408.00 | 20,408.00 | 21,988.73 | 7.75% |
| TITLE III EL IMMIGRANT STUDENT EDUCATION | | | | | |
| 10 E 001 1800 1130 00 490500 0000 | TITLE III SALARY ADD ON | 1,400.00 | 1,400.00 | 0.00 | -100.00% |
| TOTAL | SALARIES | 1,400.00 | 1,400.00 | 0.00 | -100.00% |
| 10 E 001 1800 2110 00 490500 0000 | TITLE III TEACHER RETIREMENT | 305.00 | 305.00 | 0.00 | -100.00% |
| 10 E 001 1800 2160 00 490500 0000 | TITLE III TRS SURCHARGE | 10.00 | 10.00 | 0.00 | -100.00% |
| 10 E 001 1800 2290 00 490500 0000 | TITLE III TEACHER RET INS | 25.00 | 25.00 | 0.00 | -100.00% |
| TOTAL | EMPLOYEE BENEFITS | 340.00 | 340.00 | 0.00 | -100.00% |
| 10 E 001 1800 4100 00 490500 0000 | TITLE III SUPPLIES | 5,000.00 | 7,160.00 | 0.00 | -100.00% |
| TOTAL | SUPPLIES | 5,000.00 | 7,160.00 | 0.00 | -100.00% |
| 10 E 001 2210 3100 00 490500 0000 | TITLE III PURCHASE SERVICES | 3,000.00 | 3,000.00 | 0.00 | -100.00% |
| TOTAL | PURCHASED SERVICES | 3,000.00 | 3,000.00 | 0.00 | -100.00% |
| GRAND TOTAL | TITLE III EL IMMIGRANT STUDENT EDUCATION | 9,740.00 | 11,900.00 | 0.00 | -100.00% |
| TITLE III ELL-TBE/TPI LIPLEPS GRANT | | | | | |
| 10 E 001 1100 3100 00 490900 0000 | TITLE III PURCHASE SERVICES | 24,000.00 | 25,000.00 | 24,000.00 | -4.00% |
| TOTAL | PURCHASED SERVICES | 24,000.00 | 25,000.00 | 24,000.00 | -4.00% |
| 10 E 001 1100 4100 00 490900 0000 | TITLE III SUPPLIES | 7,607.00 | 5,932.00 | 7,580.96 | 27.80% |
| TOTAL | SUPPLIES | 7,607.00 | 5,932.00 | 7,580.96 | 27.80% |
| INSTRUCTION | | | | | |
| 10 E 001 2210 3190 00 490900 0000 | TITLE III PURCHASE SERVICES | 17,578.00 | 17,578.00 | 17,578.00 | 0.00% |
| TOTAL | PURCHASED SERVICES | 17,578.00 | 17,578.00 | 17,578.00 | 0.00% |
| SERVICES | | | | | |
| 10 E 001 3000 3100 00 490900 0000 | TITLE III PURCHASE SERVICES | 60.00 | 0.00 | 30.00 | 0.00% |
| TOTAL | PURCHASED SERVICES | 60.00 | 0.00 | 30.00 | 0.00% |
| 10 E 001 3000 4100 00 490900 0000 | TITLE III SUPPLIES | 550.00 | 0.00 | 505.73 | 0.00% |
| TOTAL | SUPPLIES | 550.00 | 0.00 | 505.73 | 0.00% |
| GRAND TOTAL | TITLE III ELL-TBE/TPI LIPLEPS GRANT | 49,795.00 | 48,510.00 | 49,694.69 | 2.44% |
| TITLE II TEACHER QUALITY GRANT | | | | | |
| 10 E 001 2210 1100 00 493200 0000 | TITLE II SALARIES | 25,000.00 | 20,900.00 | 5,760.00 | -72.44% |
| TOTAL | SALARIES | 25,000.00 | 20,900.00 | 5,760.00 | -72.44% |
| 10 E 001 2210 2110 00 493200 0000 | TITLE II-TEACHER RETIREMENT | 0.00 | 855.00 | 0.00 | -100.00% |
| 10 E 001 2210 2160 00 493200 0000 | TITLE II-TRS SURCHARGE EXPENSE | 1,000.00 | 60.00 | 22.74 | -62.10% |
| 10 E 001 2210 2290 00 493200 0000 | TITLE II-TEACHER RETIRE INS | 5,005.00 | 600.00 | 528.81 | -11.87% |
| TOTAL | EMPLOYEE BENEFITS | 6,005.00 | 1,515.00 | 551.55 | -63.59% |

| | | | | | |
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| 10 E 001 2210 3190 00 493200 0000 | TITLE II-PURCHASE SERVICES | 55,000.00 | 15,000.00 | 47,150.76 | 214.34% |
| | TOTAL PURCHASED SERVICES | 55,000.00 | 15,000.00 | 47,150.76 | 214.34% |
| 10 E 001 2210 4100 00 493200 0000 | TITLE II-SUPPLIES | 2,000.00 | 2,889.00 | 1,470.12 | -49.11% |
| | TOTAL SUPPLIES | 2,000.00 | 2,889.00 | 1,470.12 | -49.11% |
| 10 E 001 2320 1000 00 493200 0000 | TITLE II SALARIES | 0.00 | 4,100.00 | 0.00 | -100.00% |
| | TOTAL SALARIES | 0.00 | 4,100.00 | 0.00 | -100.00% |
| 10 E 001 2320 2110 00 493200 0000 | TITLE II-TEACHER RETIREMENT | 0.00 | 885.00 | 0.00 | -100.00% |
| 10 E 001 2320 2160 00 493200 0000 | TITLE II-TRS SURCHARGE EXPENSE | 0.00 | 30.00 | 0.00 | -100.00% |
| 10 E 001 2320 2290 00 493200 0000 | TITLE II-TEACHER RETIRE INS | 0.00 | 70.00 | 0.00 | -100.00% |
| | TOTAL EMPLOYEE BENEFITS | 0.00 | 985.00 | 0.00 | -100.00% |
| INSTRUCTION-PUPIL SERVICES | | | | | |
| 10 E 001 3700 3100 00 493200 0000 | TITLE II-PURCHASE SERVICES | 3,252.00 | 0.00 | 3,252.00 | 0.00% |
| | TOTAL PURCHASED SERVICES | 3,252.00 | 0.00 | 3,252.00 | 0.00% |
| | GRAND TOTAL TITLE II TEACHER QUALITY GRANT | 91,257.00 | 45,389.00 | 58,184.43 | 28.19% |
| | GRAND TOTALS EDUCATION FUND | 86,169,747.00 | 79,736,948.00 | 78,406,312.45 | -1.67% |
| | GRAND TOTALS EDUCATION FUND LESS TRS ON BEHALF PMTS | 67,863,747.00 | 61,430,948.00 | 60,100,312.45 | -2.17% |
| OPERATIONS & MAINTENANCE FUND (FUND 20) | | | | | |
| REVENUE FROM LOCAL SOURCES | | | | | 410 |
| 20 R 000 1111 0000 00 000000 0000 | TAXES, EARLY | 4,187,800.00 | 4,236,139.00 | 3,996,652.58 | -5.65% |
| 20 R 001 1111 0000 00 000000 0000 | TAXES, BUDGET YEAR | 3,801,900.00 | 3,544,812.00 | 3,659,518.02 | 3.24% |
| 20 R 000 1230 0000 00 000000 0000 | CORPORATE PERSONAL PROPERTY TAX | 183,000.00 | 130,465.00 | 153,010.95 | 17.28% |
| 20 R 001 1510 0000 00 000000 0000 | INTEREST - SWEEP ACCOUNT | 170,000.00 | 180,000.00 | 188,579.44 | 4.77% |
| 20 R 003 1510 0000 00 000000 0000 | INTEREST DISTRIBUTION ON TAXES | 8,000.00 | 4,650.00 | 15,888.06 | 241.68% |
| 20 R 001 1720 0000 00 000000 0000 | PARKING FEES | 34,000.00 | 30,000.00 | 33,300.00 | 11.00% |
| 20 R 000 1910 0000 00 000000 0000 | RENTALS | 65,000.00 | 85,000.00 | 62,552.00 | -26.41% |
| 20 R 000 1950 0000 00 000000 0000 | REFUND OF PRIOR YEAR EXPENDITURES | 6,000.00 | 6,000.00 | 339.33 | -94.34% |
| 20 R 000 1999 0000 00 000000 0000 | OTHER REVENUE | 90,000.00 | 20,000.00 | 88,143.90 | 340.72% |
| | TOTAL REVENUE FROM LOCAL SOURCES | 8,545,700.00 | 8,237,066.00 | 8,197,984.28 | -0.47% |
| REVENUE FROM STATE SOURCES | | | | | |
| 20 R 000 3001 0000 00 000000 0000 | EVIDENCE-BASED FUNDING | 3,000,000.00 | 4,000,000.00 | 6,040,512.00 | -51.01% |
| 20 R 000 3925 0000 00 000000 0000 | SCHOOL MAINTENANCE GRANT | 50,000.00 | 50,000.00 | 50,000.00 | 0.00% |
| | TOTAL REVENUE FROM STATE SOURCES | 3,050,000.00 | 4,050,000.00 | 6,090,512.00 | -50.38% |
| REVENUE FROM FEDERAL SOURCES | | | | | |
| 20 R 000 4999 0000 00 000000 0000 | OTHER FEDERAL REVENUE | 0.00 | 10,000.00 | 0.00 | 100.00% |
| | TOTAL REVENUE FROM FEDERAL SOURCES | 0.00 | 10,000.00 | 0.00 | -100.00% |
| | TOTAL REVENUE FROM ALL SOURCES | 11,595,700.00 | 12,297,066.00 | 14,288,496.28 | -16.19% |
| | GRAND TOTALS REVENUE FROM ALL SOURCES | 11,595,700.00 | 12,297,066.00 | 14,288,496.28 | -16.19% |
| OPERATIONS & MAINTENANCE | | | | | |
| 20 E 001 2540 1000 00 000000 0000 | DIRECTOR SALARY | 138,375.00 | 131,475.00 | 131,473.41 | 0.00% |
| 20 E 001 2540 1100 00 000000 0000 | SUPERVISOR SALARIES | 162,985.00 | 154,854.00 | 154,854.19 | 0.00% |
| 20 E 001 2540 1110 00 000000 0000 | SECRETARY SALARY | 50,785.00 | 48,250.00 | 48,354.92 | 0.22% |
| 20 E 001 2540 1160 00 000000 0000 | MAINTENANCE STAFF SALARY | 262,335.00 | 246,150.00 | 235,600.49 | -4.29% |
| 20 E 001 2540 1170 00 000000 0000 | MAINTENANCE-SEASONAL | 0.00 | 6,000.00 | 0.00 | -100.00% |
| 20 E 001 2540 1190 00 000000 0000 | CUSTODIAN SALARY | 203,789.00 | 195,460.00 | 144,704.90 | -25.97% |
| 20 E 002 2540 1190 00 000000 0000 | CUSTODIAN SALARY | 457,880.00 | 397,634.00 | 409,929.57 | 3.09% |
| 20 E 003 2540 1190 00 000000 0000 | CUSTODIAN SALARY | 134,655.00 | 128,731.00 | 129,146.73 | 0.32% |
| 20 E 004 2540 1190 00 000000 0000 | CUSTODIAN SALARY | 161,110.00 | 154,025.00 | 148,729.36 | -3.44% |
| 20 E 005 2540 1190 00 000000 0000 | CUSTODIAN SALARY | 84,755.00 | 81,037.00 | 82,812.44 | 2.19% |
| 20 E 008 2540 1190 00 000000 0000 | CUSTODIAN SALARY | 173,262.00 | 185,682.00 | 174,818.53 | -5.85% |
| 20 E 010 2540 1190 00 000000 0000 | CUSTODIAN SALARY | 170,340.00 | 162,345.00 | 166,107.75 | 2.32% |
| 20 E 011 2540 1190 00 000000 0000 | CUSTODIAN SALARY | 256,640.00 | 245,370.00 | 246,519.96 | 0.47% |
| 20 E 001 2540 1191 00 000000 0000 | GROUNDNS STAFF | 250,000.00 | 186,910.00 | 246,216.88 | 31.73% |
| 20 E 001 2540 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 150.00 | -91.67% |
| 20 E 002 2540 1200 00 000000 0000 | INSURANCE STIPEND | 3,600.00 | 1,800.00 | 1,800.00 | 0.00% |
| 20 E 008 2540 1200 00 000000 0000 | INSURANCE STIPEND | 3,600.00 | 1,800.00 | 1,950.00 | 8.33% |
| 20 E 011 2540 1200 00 000000 0000 | INSURANCE STIPEND | 1,800.00 | 1,800.00 | 1,800.00 | 0.00% |
| | TOTAL SALARIES | 2,517,711.00 | 2,331,123.00 | 2,324,969.13 | -0.26% |
| 20 E 001 2540 2210 00 000000 0000 | LIFE INSURANCE | 465.00 | 500.00 | 420.61 | -15.88% |
| 20 E 002 2540 2210 00 000000 0000 | LIFE INSURANCE | 185.00 | 182.00 | 181.39 | -0.34% |
| 20 E 003 2540 2210 00 000000 0000 | LIFE INSURANCE | 55.00 | 55.00 | 54.72 | -0.51% |
| 20 E 004 2540 2210 00 000000 0000 | LIFE INSURANCE | 73.00 | 73.00 | 69.16 | -5.26% |

| | | | | | |
|-----------------------------------|--------------------------------|---------------------|---------------------|---------------------|----------------|
| 20 E 005 2540 2210 00 000000 0000 | LIFE INSURANCE | 37.00 | 37.00 | 36.48 | -1.41% |
| 20 E 008 2540 2210 00 000000 0000 | LIFE INSURANCE | 70.00 | 68.00 | 65.37 | -3.87% |
| 20 E 010 2540 2210 00 000000 0000 | LIFE INSURANCE | 73.00 | 73.00 | 72.20 | -1.10% |
| 20 E 011 2540 2210 00 000000 0000 | LIFE INSURANCE | 110.00 | 110.00 | 108.68 | -1.20% |
| 20 E 001 2540 2220 00 000000 0000 | MEDICAL INSURANCE | 237,660.00 | 243,455.00 | 207,665.95 | -14.70% |
| 20 E 002 2540 2220 00 000000 0000 | MEDICAL INSURANCE | 112,730.00 | 114,435.00 | 109,065.24 | -4.69% |
| 20 E 003 2540 2220 00 000000 0000 | MEDICAL INSURANCE | 41,200.00 | 41,116.00 | 40,783.44 | -0.81% |
| 20 E 004 2540 2220 00 000000 0000 | MEDICAL INSURANCE | 53,315.00 | 43,860.00 | 48,281.16 | 10.08% |
| 20 E 005 2540 2220 00 000000 0000 | MEDICAL INSURANCE | 32,520.00 | 32,456.00 | 32,194.00 | -0.81% |
| 20 E 008 2540 2220 00 000000 0000 | MEDICAL INSURANCE | 21,975.00 | 31,225.00 | 28,771.48 | -7.86% |
| 20 E 010 2540 2220 00 000000 0000 | MEDICAL INSURANCE | 50,730.00 | 47,415.00 | 49,691.78 | 4.80% |
| 20 E 011 2540 2220 00 000000 0000 | MEDICAL INSURANCE | 59,980.00 | 60,050.00 | 59,242.06 | -1.35% |
| 20 E 001 2540 2230 00 000000 0000 | DENTAL INSURANCE | 13,260.00 | 12,875.00 | 3,072.80 | -76.13% |
| 20 E 002 2540 2230 00 000000 0000 | DENTAL INSURANCE | 6,245.00 | 5,335.00 | 5,521.36 | 3.49% |
| 20 E 003 2540 2230 00 000000 0000 | DENTAL INSURANCE | 2,005.00 | 1,855.00 | 1,846.08 | -0.48% |
| 20 E 004 2540 2230 00 000000 0000 | DENTAL INSURANCE | 2,600.00 | 2,405.00 | 2,280.80 | -5.16% |
| 20 E 005 2540 2230 00 000000 0000 | DENTAL INSURANCE | 1,410.00 | 1,305.00 | 1,297.80 | -0.55% |
| 20 E 008 2540 2230 00 000000 0000 | DENTAL INSURANCE | 2,225.00 | 2,610.00 | 2,412.08 | -7.58% |
| 20 E 010 2540 2230 00 000000 0000 | DENTAL INSURANCE | 3,050.00 | 2,820.00 | 2,785.75 | -1.21% |
| 20 E 011 2540 2230 00 000000 0000 | DENTAL INSURANCE | 3,200.00 | 2,960.00 | 2,920.27 | -1.34% |
| 20 E 001 2540 2250 00 000000 0000 | LONG TERM DISABILITY INSURANCE | 350.00 | 345.00 | 346.48 | 0.43% |
| TOTAL | EMPLOYEE BENEFITS | 645,523.00 | 647,620.00 | 599,187.14 | -7.48% |
| 20 E 001 2540 3100 00 000000 0000 | PROF & TECH SERV | 1,000,000.00 | 800,000.00 | 988,375.44 | 23.55% |
| 20 E 001 2540 3190 00 000000 0000 | LIFE SAFETY | 3,000.00 | 5,000.00 | 0.00 | -100.00% |
| 20 E 001 2540 3210 00 000000 0000 | TRASH REMOVAL | 45,000.00 | 45,000.00 | 42,688.24 | -5.14% |
| 20 E 001 2540 3220 00 000000 0000 | SNOW REMOVAL | 5,000.00 | 5,000.00 | 0.00 | -100.00% |
| 20 E 001 2540 3230 00 000000 0000 | REPAIRS-DISTRICT | 460,000.00 | 280,000.00 | 454,893.55 | 4162.46% |
| 20 E 002 2540 3230 00 000000 0000 | REPAIRS-VEHICLE | 30,000.00 | 50,000.00 | 26,542.93 | -46.91% |
| 20 E 002 2540 3250 00 000000 0000 | RENTALS | 10,000.00 | 5,000.00 | 9,054.50 | 81.09% |
| 20 E 001 2540 3320 00 000000 0000 | TRAVEL | 150.00 | 300.00 | 0.00 | -100.00% |
| 20 E 001 2540 3400 00 000000 0000 | TELEPHONE | 43,000.00 | 40,000.00 | 42,411.33 | 6.03% |
| 20 E 001 2540 3700 00 000000 0000 | WATER | 46,000.00 | 37,000.00 | 45,253.85 | 22.31% |
| TOTAL | PURCHASED SERVICES | 1,642,150.00 | 1,267,300.00 | 1,609,217.84 | 26.98% |
| 20 E 001 2540 4100 00 000000 0000 | SUPPLIES/CUSTODIANS | 230,000.00 | 235,000.00 | 223,954.71 | -4.70% |
| 20 E 001 2540 4110 00 000000 0000 | SUPPLIES/MAINTENANCE | 227,000.00 | 220,000.00 | 224,674.83 | 2.12% |
| 20 E 002 2540 4110 00 000000 0000 | UNIFORM ALLOWANCE | 16,400.00 | 15,000.00 | 16,319.47 | 8.80% |
| 20 E 001 2540 4120 00 000000 0000 | SUPPLIES/GROUNDS | 115,000.00 | 110,000.00 | 110,430.80 | 0.39% |
| 20 E 001 2540 4190 00 000000 0000 | LIFE SAFETY SUPPLIES | 5,000.00 | 2,000.00 | 0.00 | -100.00% |
| 20 E 001 2540 4650 00 000000 0000 | GAS HEAT | 13,000.00 | 9,000.00 | 8,569.13 | -4.79% |
| 20 E 002 2540 4650 00 000000 0000 | GAS HEAT | 97,000.00 | 90,000.00 | 79,107.04 | -12.10% |
| 20 E 003 2540 4650 00 000000 0000 | GAS HEAT | 37,000.00 | 28,000.00 | 31,381.40 | 12.08% |
| 20 E 004 2540 4650 00 000000 0000 | GAS HEAT | 30,000.00 | 22,000.00 | 23,102.96 | 5.01% |
| 20 E 005 2540 4650 00 000000 0000 | GAS HEAT | 17,000.00 | 12,000.00 | 11,946.29 | -0.45% |
| 20 E 007 2540 4650 00 000000 0000 | GAS HEAT | 7,300.00 | 2,000.00 | 0.00 | -100.00% |
| 20 E 008 2540 4650 00 000000 0000 | GAS HEAT | 38,000.00 | 26,000.00 | 29,868.63 | 14.88% |
| 20 E 010 2540 4650 00 000000 0000 | GAS HEAT | 40,000.00 | 32,000.00 | 32,577.22 | 1.80% |
| 20 E 011 2540 4650 00 000000 0000 | GAS HEAT | 65,000.00 | 65,000.00 | 50,699.83 | -22.00% |
| 20 E 001 2540 4660 00 000000 0000 | ELECTRICITY | 20,000.00 | 11,000.00 | 17,585.50 | 59.87% |
| 20 E 002 2540 4660 00 000000 0000 | ELECTRICITY | 435,000.00 | 375,000.00 | 432,507.77 | 15.34% |
| 20 E 003 2540 4660 00 000000 0000 | ELECTRICITY | 97,000.00 | 81,000.00 | 95,177.97 | 17.50% |
| 20 E 004 2540 4660 00 000000 0000 | ELECTRICITY | 150,000.00 | 105,000.00 | 146,245.02 | 39.28% |
| 20 E 005 2540 4660 00 000000 0000 | ELECTRICITY | 45,000.00 | 45,000.00 | 41,056.97 | -8.76% |
| 20 E 007 2540 4660 00 000000 0000 | ELECTRICITY | 5,000.00 | 5,000.00 | 0.00 | -100.00% |
| 20 E 008 2540 4660 00 000000 0000 | ELECTRICITY | 123,000.00 | 102,000.00 | 118,181.69 | 15.86% |
| 20 E 010 2540 4660 00 000000 0000 | ELECTRICITY | 126,000.00 | 105,000.00 | 124,816.76 | 18.87% |
| 20 E 011 2540 4660 00 000000 0000 | ELECTRICITY | 215,000.00 | 195,000.00 | 210,806.88 | 8.11% |
| TOTAL | SUPPLIES | 2,153,700.00 | 1,892,000.00 | 2,029,010.87 | 7.24% |
| 20 E 001 2540 5300 00 000000 0000 | IMPROVEMENT/GROUNDS | 150,000.00 | 90,000.00 | 133,782.38 | 48.65% |
| 20 E 001 2540 5400 00 000000 0000 | CAPITALIZED EQUIPMENT | 150,000.00 | 200,000.00 | 136,631.07 | -31.68% |
| 20 E 002 2540 5400 00 000000 0000 | HS CLASSROOM ADDITIONS | 0.00 | 6,000,000.00 | 5,493,556.00 | -8.44% |
| 20 E 004 2540 5400 00 000000 0000 | HBT ROOF | 1,995,000.00 | 0.00 | 0.00 | 0.00% |
| 21 E 010 2540 5400 00 000000 0000 | CT MOBILE | 500,000.00 | 0.00 | 0.00 | 0.00% |
| 20 E 001 2540 5410 00 000000 0000 | DISTRICT CAPITAL PROJECTS | 1,000,000.00 | 1,000,000.00 | 786,463.59 | -21.35% |
| 20 E 002 2540 5410 00 000000 0000 | NEW HS BUILDING | 0.00 | 1,000,000.00 | 859,830.38 | -14.02% |
| TOTAL | CAPITAL OUTLAYS | 3,795,000.00 | 8,290,000.00 | 7,410,263.42 | -10.61% |
| 20 E 001 2540 6400 00 000000 0000 | DUES/FEES | 8,100.00 | 3,800.00 | 8,030.80 | 111.34% |
| TOTAL | OTHER OBJECTS | 8,100.00 | 3,800.00 | 8,030.80 | 111.34% |
| 20 E 001 2540 7100 00 000000 0000 | NON-CAPITALIZED EQUIPMENT | 220,000.00 | 100,000.00 | 218,870.92 | 118.87% |
| TOTAL | NON-CAPITAL EQUIPMENT | 220,000.00 | 100,000.00 | 218,870.92 | 118.87% |
| GRANTS | | | | | |

| | | | | | |
|--------------------------------------|--|----------------------|----------------------|----------------------|-----------------|
| 20 E 002 2540 4100 00 392500 0000 | SCHOOL MAINTENANCE GRANT CHS | 55,000.00 | 0.00 | 0.00 | 0.00% |
| 20 E 003 2540 4100 00 392500 0000 | SCHOOL MAINTENANCE GRANT CMS | 22,000.00 | 0.00 | 0.00 | 0.00% |
| 20 E 011 2540 4100 00 392500 0000 | SCHOOL MAINTENANCE GRANT PKMS | 38,500.00 | 0.00 | 0.00 | 0.00% |
| TOTAL | SUPPLIES | 115,500.00 | 0.00 | 0.00 | 0.00% |
| 20 E 004 2540 5400 00 392500 0000 | SCHOOL MAINTENANCE GRANT HBT | 0.00 | 91,000.00 | 110,637.37 | 21.58% |
| 20 E 008 2540 5400 00 392500 0000 | SCHOOL MAINTENANCE GRANT PV | 0.00 | 91,000.00 | 110,751.36 | 21.70% |
| TOTAL | CAPITAL OUTLAYS | 0.00 | 182,000.00 | 221,388.73 | 21.64% |
| PROVISION FOR CONTINGENCIES | | | | | |
| 20 E 001 6000 6900 00 000000 0000 | CONTINGENCY ACCT | 200,000.00 | 50,000.00 | 0.00 | -100.00% |
| TOTAL | OTHER OBJECTS | 200,000.00 | 50,000.00 | 0.00 | -100.00% |
| GRAND TOTALS | OPERATIONS & MAINTENANCE FUND | 11,297,684.00 | 14,763,843.00 | 14,420,938.85 | -2.32% |
| DEBT SERVICE FUND (FUND 30) | | | | | |
| REVENUE FROM LOCAL SOURCES | | | | | |
| 30 R 000 1112 0000 00 000000 0000 | TAXES, EARLY | 971,100.00 | 4,709,475.00 | 4,860,685.70 | 3.21% |
| 30 R 001 1112 0000 00 000000 0000 | TAXES, BUDGET YR | 4,623,930.00 | 4,525,928.00 | 4,517,327.29 | -0.19% |
| 30 R 001 1510 0000 00 000000 0000 | INTEREST - SWEEP ACCOUNT | 100,000.00 | 100,000.00 | 194,549.62 | 94.55% |
| 30 R 003 1510 0000 00 000000 0000 | INTEREST DISTRIBUTION ON TAXES | 6,800.00 | 6,800.00 | 19,612.35 | 188.42% |
| 30 R 000 1930 0000 00 000000 0000 | IMPACT FEES | 513,225.00 | 516,125.00 | 516,125.00 | 0.00% |
| TOTAL | REVENUE FROM LOCAL SOURCES | 6,215,055.00 | 9,858,328.00 | 10,108,299.96 | 2.54% |
| GRAND TOTALS | REVENUE FROM ALL SOURCES | 6,215,055.00 | 9,858,328.00 | 10,108,299.96 | 2.54% |
| 30 E 001 5220 6240 10 000000 0000 | INTEREST ON 2016 DEBT CERTIFICATES | 78,225.00 | 91,125.00 | 91,125.00 | 0.00% |
| 30 E 001 5220 6240 11 000000 0000 | INTEREST ON 2016A DSEB BONDS | 24,300.00 | 31,125.00 | 31,125.00 | 0.00% |
| 30 E 001 5220 6240 12 000000 0000 | INTEREST ON 2017 BONDS | 656,200.00 | 705,075.00 | 705,075.00 | 412.00% |
| 30 E 001 5220 6240 13 000000 0000 | INTEREST ON 2013 BONDS | 2,501,312.00 | 2,137,908.00 | 2,137,907.25 | 0.00% |
| TOTAL | OTHER OBJECTS | 3,260,037.00 | 2,965,233.00 | 2,965,232.25 | 0.00% |
| 30 E 001 5320 6100 05 000000 0000 | PRINCIPAL ON 2016A DSEB BONDS | 230,000.00 | 225,000.00 | 225,000.00 | 0.00% |
| 30 E 001 5320 6100 06 000000 0000 | PRINCIPAL ON 2016 DEBT CERTIFICATES | 435,000.00 | 425,000.00 | 425,000.00 | 0.00% |
| 30 E 001 5320 6100 10 000000 0000 | PRINCIPAL ON 2017 BONDS | 1,000,000.00 | 955,000.00 | 955,000.00 | 0.00% |
| 30 E 001 5320 6100 13 000000 0000 | PRINCIPAL ON 2013 BONDS | 4,978,688.00 | 4,837,093.00 | 4,837,092.75 | 0.00% |
| TOTAL | OTHER OBJECTS | 6,643,688.00 | 6,442,093.00 | 6,442,092.75 | 0.00% |
| 30 E 001 5400 3190 00 000000 0000 | SERVICE CHARGE | 2,000.00 | 2,000.00 | 1,716.67 | -14.17% |
| TOTAL | PURCHASED SERVICES | 2,000.00 | 2,000.00 | 1,716.67 | -14.17% |
| GRAND TOTALS | DEBT SERVICE FUND | 9,905,725.00 | 9,409,326.00 | 9,409,041.67 | 0.00% |
| TRANSPORTATION FUND (FUND 40) | | | | | |
| REVENUE FROM LOCAL SOURCES | | | | | |
| 40 R 000 1113 0000 00 000000 0000 | TAXES, EARLY | 1,754,500.00 | 1,558,967.00 | 1,672,774.70 | 7.30% |
| 40 R 001 1113 0000 00 000000 0000 | TAXES, BUDGET YEAR | 1,591,300.00 | 1,543,559.00 | 1,540,591.40 | -0.19% |
| 40 R 000 1415 0000 00 000000 0000 | FIELD TRIP FEES | 7,000.00 | 7,000.00 | 4,135.00 | -40.93% |
| 40 R 001 1510 0000 00 000000 0000 | INTEREST - SWEEP ACCOUNT | 150,000.00 | 150,000.00 | 283,535.63 | 89.02% |
| 40 R 003 1510 0000 00 000000 0000 | INTEREST - DISTRIBUTION ON TAXES | 4,000.00 | 2,150.00 | 6,688.61 | 211.10% |
| 40 R 000 1950 0000 00 000000 0000 | PRIOR YEAR REFUND | 2,000.00 | 5,000.00 | 275.00 | -94.50% |
| 40 R 000 1999 0000 00 000000 0000 | OTHER REVENUE | 15,000.00 | 18,000.00 | 12,636.27 | -29.80% |
| TOTAL | REVENUE FROM LOCAL SOURCES | 3,523,800.00 | 3,284,676.00 | 3,520,636.61 | 7.18% |
| REVENUE FROM STATE SOURCES | | | | | |
| 40 R 000 3500 0000 00 000000 0000 | STATE AID, REGULAR | 1,632,180.00 | 1,652,509.00 | 1,537,511.11 | -6.96% |
| 40 R 000 3510 0000 00 000000 0000 | STATE AID, SPECIAL ED | 1,275,230.00 | 1,289,331.00 | 1,084,265.14 | -15.90% |
| TOTAL | REVENUE FROM STATE SOURCES | 2,907,410.00 | 2,941,840.00 | 2,621,776.25 | -10.88% |
| GRAND TOTALS | REVENUE FROM ALL SOURCES | 6,431,210.00 | 6,226,516.00 | 6,142,412.86 | -1.35% |
| TRANSPORTATION | | | | | |
| 40 E 001 2550 1000 00 000000 0000 | DIRECTOR/MECHANIC SALARY | 251,080.00 | 238,553.00 | 238,552.75 | 0.00% |
| 40 E 001 2550 1110 00 000000 0000 | OFFICE STAFF SALARIES | 203,190.00 | 193,052.00 | 193,054.88 | 0.00% |
| 40 E 001 2550 1120 00 000000 0000 | LONGEVITY | 13,075.00 | 13,075.00 | 13,074.48 | 0.00% |
| 40 E 001 2550 1150 00 000000 0000 | BUS AIDE SALARIES | 72,000.00 | 72,200.00 | 64,088.84 | -11.23% |
| 40 E 001 2550 1180 00 000000 0000 | EXTRA DUTY | 150,000.00 | 175,000.00 | 127,482.49 | -27.15% |
| 40 E 001 2550 1210 00 000000 0000 | BUS DRIVER SALARIES/UTILITY | 2,100,000.00 | 1,844,305.00 | 1,928,397.64 | 4.56% |
| 40 E 001 2550 1220 00 000000 0000 | SUBSTITUTE DRIVERS | 60,000.00 | 75,000.00 | 39,081.00 | -47.89% |
| TOTAL | SALARIES | 2,849,345.00 | 2,611,185.00 | 2,603,732.08 | -0.29% |
| 40 E 001 2550 2210 00 000000 0000 | LIFE INSURANCE | 200.00 | 365.00 | 148.20 | -59.40% |
| 40 E 001 2550 2220 00 000000 0000 | MEDICAL INSURANCE | 280,000.00 | 280,000.00 | 266,010.32 | -5.00% |
| 40 E 001 2550 2230 00 000000 0000 | DENTAL INSURANCE | 8,000.00 | 25,000.00 | 5,560.16 | -77.76% |
| 40 E 001 2550 2250 00 000000 0000 | LONG TERM DISABILITY | 350.00 | 310.00 | 321.60 | 3.74% |
| TOTAL | EMPLOYEE BENEFITS | 288,550.00 | 305,675.00 | 272,040.28 | -11.00% |

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|---|---------------------------------------|---------------------|---------------------|---------------------|-----------------|
| 40 E 001 2550 3190 00 000000 0000 | PHYSICAL EXAM & FINGER PRINT | 12,000.00 | 10,000.00 | 11,168.00 | 11.68% |
| 40 E 001 2550 3230 00 000000 0000 | REPAIRS | 37,000.00 | 25,000.00 | 35,009.67 | 40.04% |
| 40 E 001 2550 3240 00 000000 0000 | RADIO REPAIRS | 3,500.00 | 4,200.00 | 2,614.00 | -37.76% |
| 40 E 001 2550 3250 00 000000 0000 | RENTALS/BUS LEASES | 2,550,000.00 | 2,520,000.00 | 2,542,242.68 | 0.88% |
| 40 E 001 2550 3310 00 000000 0000 | CONTRACTED TRANSPORTATION | 245,000.00 | 220,000.00 | 238,553.82 | 8.43% |
| 40 E 001 2550 3320 00 000000 0000 | TRAVEL | 1,600.00 | 4,000.00 | 802.53 | -79.94% |
| 40 E 001 2550 3700 00 000000 0000 | PURCHASE SERVICES | 17,000.00 | 25,000.00 | 11,468.99 | -54.12% |
| 40 E 001 2550 3840 00 000000 0000 | P & C INSURANCE | 72,000.00 | 72,000.00 | 0.00 | -100.00% |
| TOTAL | PURCHASED SERVICES | 2,938,100.00 | 2,880,200.00 | 2,841,859.69 | -1.33% |
| 40 E 001 2550 4100 00 000000 0000 | GENERAL SUPPLIES | 30,000.00 | 30,000.00 | 21,155.14 | -29.48% |
| 40 E 001 2550 4110 00 000000 0000 | OFFICE SUPPLIES | 8,000.00 | 25,000.00 | 3,207.12 | -87.17% |
| 40 E 001 2550 4120 00 000000 0000 | GREASE & OIL | 3,000.00 | 3,000.00 | 608.30 | -79.72% |
| 40 E 001 2550 4130 00 000000 0000 | TIRES | 8,500.00 | 15,500.00 | 2,301.14 | -85.15% |
| 40 E 001 2550 4640 00 000000 0000 | FUEL | 460,000.00 | 500,000.00 | 367,574.93 | -26.49% |
| 40 E 001 2550 4650 00 000000 0000 | GAS HEAT/GARAGE | 10,000.00 | 5,000.00 | 6,015.46 | 20.31% |
| 40 E 001 2550 4900 00 000000 0000 | OTHER SUPPLIES-NON REIMBURSABLE | 2,500.00 | 3,500.00 | 2,255.52 | -35.56% |
| TOTAL | SUPPLIES | 522,000.00 | 582,000.00 | 403,117.61 | -30.74% |
| 40 E 001 2550 5400 00 000000 0000 | CAPITAL OUTLAY | 60,000.00 | 29,000.00 | 0.00 | -100.00% |
| TOTAL | CAPITAL OUTLAYS | 60,000.00 | 29,000.00 | 0.00 | -100.00% |
| 40 E 001 2550 6400 00 000000 0000 | DUES/FEES/LICENSES | 13,500.00 | 13,500.00 | 12,994.95 | -3.74% |
| TOTAL | OTHER OBJECTS | 13,500.00 | 13,500.00 | 12,994.95 | -3.74% |
| 40 E 001 2550 7100 00 000000 0000 | NON CAPITAL OUTLAY/EQUIPMENT | 5,000.00 | 5,500.00 | 2,011.40 | -63.43% |
| TOTAL | NON-CAPITAL EQUIPMENT | 5,000.00 | 5,500.00 | 2,011.40 | -63.43% |
| | | | | | 413 |
| 40 E 001 6000 6900 00 000000 0000 | CONTINGENCY | 50,000.00 | 50,000.00 | 0.00 | -100.00% |
| TOTAL | OTHER OBJECTS | 50,000.00 | 50,000.00 | 0.00 | -100.00% |
| TOTAL | TRANSPORTATION FUND | 6,726,495.00 | 6,477,060.00 | 6,135,756.01 | -5.27% |
| GRAND TOTALS | TRANSPORTATION FUND | 6,726,495.00 | 6,477,060.00 | 6,135,756.01 | -5.27% |
| IMRF/SS FUND (FUND 50) | | | | | |
| REVENUE FROM LOCAL SOURCES | | | | | |
| 50 R 000 1114 0000 00 000000 0000 | IMRF TAXES, EARLY | 518,900.00 | 428,130.00 | 504,353.00 | 17.80% |
| 50 R 001 1114 0000 00 000000 0000 | IMRF TAXES, BUDGET YEAR | 479,810.00 | 512,000.00 | 511,029.84 | -0.19% |
| 50 R 000 1151 0000 00 000000 0000 | SOCIAL SECURITY/MEDICARE, EARLY | 518,900.00 | 428,130.00 | 504,353.00 | 17.80% |
| 50 R 001 1151 0000 00 000000 0000 | SOCIAL SECURITY/MEDICARE, BUDGET YEAR | 479,810.00 | 512,000.00 | 511,029.84 | -0.19% |
| 50 R 000 1230 0000 00 000000 0000 | CORPORATE PERSONAL PROPERTY TAX | 20,300.00 | 72,000.00 | 45,406.64 | -36.94% |
| 50 R 001 1510 0000 00 000000 0000 | INTEREST - SWEEP ACCOUNT | 92,000.00 | 92,000.00 | 169,480.19 | 84.22% |
| 50 R 003 1510 0000 00 000000 0000 | INTEREST - DISTRIBUTION ON TAXES | 2,900.00 | 1,500.00 | 4,437.36 | 195.82% |
| TOTAL | REVENUE FROM LOCAL SOURCES | 2,112,620.00 | 2,045,760.00 | 2,250,089.87 | 9.99% |
| GRAND TOTALS | REVENUE FROM ALL SOURCES | 2,112,620.00 | 2,045,760.00 | 2,250,089.87 | 9.99% |
| NON-CATEGORICAL DISTRICT WIDE PROGRAMS | | | | | |
| 50 E 001 1100 2130 00 000000 0000 | FICA | 950.00 | 200.00 | 918.78 | 359.39% |
| 50 E 001 1100 2140 00 000000 0000 | MEDICARE | 7,850.00 | 6,700.00 | 7,830.73 | 16.88% |
| 50 E 001 1100 2140 00 399900 0000 | MEDICARE | 0.00 | 0.00 | 141.38 | 0.00% |
| 50 E 001 1100 2140 00 430000 0000 | MEDICARE | 1,600.00 | 1,715.00 | 1,561.64 | -8.94% |
| TOTAL | EMPLOYEE BENEFITS | 10,400.00 | 8,615.00 | 10,452.53 | 21.33% |
| ELEMENTARY | | | | | |
| 50 E 008 1110 2120 00 000000 0000 | IMRF | 1,000.00 | 0.00 | 1,231.41 | 0.00% |
| 50 E 004 1110 2130 00 000000 0000 | FICA | 3,100.00 | 2,356.00 | 2,998.72 | 27.28% |
| 50 E 005 1110 2130 00 000000 0000 | FICA | 70.00 | 0.00 | 71.58 | 0.00% |
| 50 E 008 1110 2130 00 000000 0000 | FICA | 2,545.00 | 2,110.00 | 2,564.95 | 21.56% |
| 50 E 010 1110 2130 00 000000 0000 | FICA | 2,545.00 | 2,387.00 | 2,507.91 | 5.07% |
| 50 E 004 1110 2140 00 000000 0000 | MEDICARE | 31,920.00 | 30,925.00 | 30,664.11 | -0.84% |
| 50 E 005 1110 2140 00 000000 0000 | MEDICARE | 13,355.00 | 13,160.00 | 12,730.28 | -3.27% |
| 50 E 008 1110 2140 00 000000 0000 | MEDICARE | 30,950.00 | 30,255.00 | 28,972.39 | -4.24% |
| 50 E 010 1110 2140 00 000000 0000 | MEDICARE | 35,360.00 | 31,925.00 | 31,452.04 | -1.48% |
| TOTAL | EMPLOYEE BENEFITS | 120,845.00 | 113,118.00 | 113,193.39 | 0.07% |
| MIDDLE SCHOOL | | | | | |
| 50 E 003 1120 2130 00 000000 0000 | FICA | 715.00 | 620.00 | 713.20 | 15.03% |
| 50 E 011 1120 2130 00 000000 0000 | FICA | 3,963.00 | 620.00 | 569.16 | -8.20% |
| 50 E 003 1120 2140 00 000000 0000 | MEDICARE | 22,340.00 | 21,867.00 | 18,612.78 | -14.88% |
| 50 E 011 1120 2140 00 000000 0000 | MEDICARE | 46,580.00 | 41,035.00 | 39,073.73 | -4.78% |
| TOTAL | EMPLOYEE BENEFITS | 73,598.00 | 64,142.00 | 58,968.87 | -8.07% |
| HIGH SCHOOL | | | | | |
| 50 E 002 1130 2120 00 000000 0000 | IMRF | 3,455.00 | 2,551.00 | 803.91 | -68.49% |
| 50 E 002 1130 2130 00 000000 0000 | FICA | 2,630.00 | 1,909.00 | 592.95 | -68.94% |
| 50 E 002 1130 2140 00 000000 0000 | MEDICARE | 90,595.00 | 79,885.00 | 79,387.41 | -0.62% |

| | | | | | |
|-----------------------------------|--------------------------|-------------------|-------------------|-------------------|----------------|
| 50 E 002 1130 2140 00 322000 0000 | MEDICARE | 5.00 | 0.00 | 4.64 | 0.00% |
| 50 E 002 1130 2140 00 323530 0000 | MEDICARE | 340.00 | 320.00 | 337.00 | 5.31% |
| TOTAL | EMPLOYEE BENEFITS | 97,025.00 | 84,665.00 | 81,125.91 | -4.18% |
| SPECIAL PROGRAMS | | | | | |
| 50 E 001 1200 2130 00 000000 0000 | FICA | 3,700.00 | 2,625.00 | 3,713.83 | 41.48% |
| 50 E 001 1200 2140 00 000000 0000 | MEDICARE | 1,025.00 | 910.00 | 1,027.97 | 12.96% |
| TOTAL | EMPLOYEE BENEFITS | 4,725.00 | 3,535.00 | 4,741.80 | 34.14% |
| SPECIAL EDUCATION | | | | | |
| 50 E 001 1205 2120 00 000000 0000 | IMRF | 8,030.00 | 0.00 | 0.00 | 0.00% |
| 50 E 002 1205 2120 00 000000 0000 | IMRF | 10,030.00 | 9,860.00 | 9,348.91 | -5.18% |
| 50 E 003 1205 2120 00 000000 0000 | IMRF | 6,015.00 | 4,256.00 | 3,741.37 | -12.09% |
| 50 E 004 1205 2120 00 000000 0000 | IMRF | 17,105.00 | 15,030.00 | 13,996.15 | -6.88% |
| 50 E 005 1205 2120 00 000000 0000 | IMRF | 5,735.00 | 7,621.00 | 7,242.20 | -4.97% |
| 50 E 008 1205 2120 00 000000 0000 | IMRF | 13,770.00 | 12,604.00 | 12,726.35 | 0.97% |
| 50 E 010 1205 2120 00 000000 0000 | IMRF | 14,535.00 | 12,506.00 | 11,252.63 | -10.02% |
| 50 E 011 1205 2120 00 000000 0000 | IMRF | 10,460.00 | 8,037.00 | 9,961.00 | 23.94% |
| 50 E 001 1205 2130 00 000000 0000 | FICA | 3,775.00 | 0.00 | 0.00 | 0.00% |
| 50 E 002 1205 2130 00 000000 0000 | FICA | 7,685.00 | 7,380.00 | 6,708.63 | -9.10% |
| 50 E 003 1205 2130 00 000000 0000 | FICA | 4,610.00 | 3,185.00 | 2,804.76 | -11.94% |
| 50 E 004 1205 2130 00 000000 0000 | FICA | 13,110.00 | 11,248.00 | 10,454.32 | -7.06% |
| 50 E 005 1205 2130 00 000000 0000 | FICA | 4,395.00 | 5,704.00 | 5,350.53 | -6.20% |
| 50 E 008 1205 2130 00 000000 0000 | FICA | 10,555.00 | 9,435.00 | 9,529.40 | 1.00% |
| 50 E 010 1205 2130 00 000000 0000 | FICA | 11,140.00 | 9,360.00 | 8,419.71 | -10.05% |
| 50 E 011 1205 2130 00 000000 0000 | FICA | 8,015.00 | 6,015.00 | 7,473.81 | 24.25% |
| 50 E 001 1205 2140 00 000000 0000 | MEDICARE | 6,360.00 | 1,500.00 | 5,373.71 | 258.25% |
| 50 E 002 1205 2140 00 000000 0000 | MEDICARE | 12,525.00 | 9,955.00 | 8,093.30 | 414.70% |
| 50 E 003 1205 2140 00 000000 0000 | MEDICARE | 3,760.00 | 2,668.00 | 2,209.59 | -17.18% |
| 50 E 004 1205 2140 00 000000 0000 | MEDICARE | 9,225.00 | 7,027.00 | 6,593.44 | -6.17% |
| 50 E 005 1205 2140 00 000000 0000 | MEDICARE | 3,455.00 | 3,887.00 | 3,518.72 | -9.47% |
| 50 E 008 1205 2140 00 000000 0000 | MEDICARE | 6,340.00 | 5,090.00 | 4,138.01 | -18.70% |
| 50 E 010 1205 2140 00 000000 0000 | MEDICARE | 5,695.00 | 4,710.00 | 3,999.00 | -15.10% |
| 50 E 011 1205 2140 00 000000 0000 | MEDICARE | 7,030.00 | 5,635.00 | 6,047.42 | 7.32% |
| TOTAL | EMPLOYEE BENEFITS | 203,355.00 | 162,713.00 | 158,982.96 | -2.29% |
| EARLY CHILDHOOD | | | | | |
| 50 E 001 1225 2120 00 000000 0000 | IMRF | 4,470.00 | 4,315.00 | 4,306.19 | -0.20% |
| 50 E 004 1225 2120 00 000000 0000 | IMRF | 3,320.00 | 5,950.00 | 2,521.47 | -57.62% |
| 50 E 008 1225 2120 00 000000 0000 | IMRF | 5,235.00 | 4,395.00 | 3,610.87 | -17.84% |
| 50 E 010 1225 2120 00 000000 0000 | IMRF | 3,930.00 | 7,400.00 | 7,374.22 | -0.35% |
| 50 E 001 1225 2130 00 000000 0000 | FICA | 2,105.00 | 1,999.00 | 1,885.56 | -5.67% |
| 50 E 004 1225 2130 00 000000 0000 | FICA | 2,545.00 | 4,450.00 | 2,857.38 | -35.79% |
| 50 E 008 1225 2130 00 000000 0000 | FICA | 8,200.00 | 3,290.00 | 2,637.11 | -19.84% |
| 50 E 010 1225 2130 00 000000 0000 | FICA | 3,010.00 | 5,535.00 | 5,656.09 | 2.19% |
| 50 E 001 1225 2140 00 000000 0000 | MEDICARE | 490.00 | 468.00 | 441.00 | -5.77% |
| 50 E 004 1225 2140 00 000000 0000 | MEDICARE | 2,665.00 | 3,026.00 | 2,517.66 | -16.80% |
| 50 E 008 1225 2140 00 000000 0000 | MEDICARE | 1,920.00 | 2,530.00 | 2,426.93 | -4.07% |
| 50 E 010 1225 2140 00 000000 0000 | MEDICARE | 2,560.00 | 4,540.00 | 4,290.97 | -5.49% |
| TOTAL | EMPLOYEE BENEFITS | 40,450.00 | 47,898.00 | 40,525.45 | -15.39% |
| READING SPECIALIST | | | | | |
| 50 E 003 1250 2140 00 000000 0000 | MEDICARE | 230.00 | 210.00 | 201.04 | -4.27% |
| 50 E 004 1250 2140 00 000000 0000 | MEDICARE | 2,835.00 | 2,775.00 | 2,666.38 | -3.91% |
| 50 E 005 1250 2140 00 000000 0000 | MEDICARE | 1,225.00 | 1,163.00 | 1,024.08 | -11.94% |
| 50 E 008 1250 2140 00 000000 0000 | MEDICARE | 2,150.00 | 2,045.00 | 2,019.54 | -1.24% |
| 50 E 010 1250 2140 00 000000 0000 | MEDICARE | 2,950.00 | 2,805.00 | 2,771.86 | -1.18% |
| 50 E 011 1250 2140 00 000000 0000 | MEDICARE | 1,470.00 | 1,400.00 | 1,110.29 | -20.69% |
| TOTAL | EMPLOYEE BENEFITS | 10,860.00 | 10,398.00 | 9,793.19 | -5.82% |
| ATHLETICS | | | | | |
| 50 E 002 1500 2120 00 000000 0000 | IMRF | 16,415.00 | 15,225.00 | 16,044.69 | 5.38% |
| 50 E 011 1500 2120 00 000000 0000 | IMRF | 0.00 | 0.00 | 4.92 | 0.00% |
| 50 E 002 1500 2130 00 000000 0000 | FICA | 18,815.00 | 16,180.00 | 15,078.26 | -6.81% |
| 50 E 003 1500 2130 00 000000 0000 | FICA | 0.00 | 100.00 | 237.70 | 137.70% |
| 50 E 011 1500 2130 00 000000 0000 | FICA | 0.00 | 310.00 | 7.26 | -97.66% |
| 50 E 002 1500 2140 00 000000 0000 | MEDICARE | 12,345.00 | 10,580.00 | 10,187.02 | -3.71% |
| 50 E 003 1500 2140 00 000000 0000 | MEDICARE | 1,360.00 | 935.00 | 977.64 | 4.56% |
| 50 E 011 1500 2140 00 000000 0000 | MEDICARE | 1,305.00 | 1,100.00 | 1,006.55 | -8.50% |
| TOTAL | EMPLOYEE BENEFITS | 50,240.00 | 44,430.00 | 43,544.04 | -1.99% |
| DRIVER'S EDUCATION | | | | | |
| 50 E 002 1730 2140 00 000000 0000 | MEDICARE | 1,795.00 | 1,715.00 | 1,470.13 | -14.28% |
| TOTAL | EMPLOYEE BENEFITS | 1,795.00 | 1,715.00 | 1,470.13 | -14.28% |
| ENGLISH LANGUAGE LEARNER | | | | | |

| | | | | | |
|---|--------------------------|------------------|------------------|------------------|----------------|
| 50 E 001 1800 2120 00 000000 0000 | IMRF | 4,605.00 | 7,480.00 | 6,238.69 | -16.60% |
| 50 E 001 1800 2130 00 000000 0000 | FICA | 2,230.00 | 3,567.00 | 2,670.03 | -25.15% |
| 50 E 001 1800 2140 00 000000 0000 | MEDICARE | 2,030.00 | 1,500.00 | 1,285.53 | -14.30% |
| 50 E 001 1800 2140 00 490500 0000 | TITLE III MEDICARE | 0.00 | 20.00 | 0.00 | -100.00% |
| 50 E 002 1800 2140 00 000000 0000 | MEDICARE | 1,245.00 | 820.00 | 691.12 | -15.72% |
| 50 E 003 1800 2140 00 000000 0000 | MEDICARE | 890.00 | 610.00 | 689.63 | 13.05% |
| 50 E 004 1800 2140 00 000000 0000 | MEDICARE | 3,720.00 | 2,820.00 | 2,568.17 | -8.93% |
| 50 E 005 1800 2140 00 000000 0000 | MEDICARE | 640.00 | 415.00 | 446.19 | 7.52% |
| 50 E 008 1800 2140 00 000000 0000 | MEDICARE | 1,985.00 | 1,890.00 | 1,751.18 | -7.34% |
| 50 E 010 1800 2140 00 000000 0000 | MEDICARE | 2,475.00 | 2,305.00 | 1,831.95 | -20.52% |
| 50 E 011 1800 2140 00 000000 0000 | MEDICARE | 2,320.00 | 1,160.00 | 951.94 | -17.94% |
| TOTAL | EMPLOYEE BENEFITS | 22,140.00 | 22,587.00 | 19,124.43 | -15.33% |
| SOCIAL WORK | | | | | |
| 50 E 004 2110 2130 00 000000 0000 | FICA | 0.00 | 0.00 | 558.03 | 0.00% |
| 50 E 001 2110 2140 00 430000 0000 | MEDICARE | 195.00 | 170.00 | 191.81 | 12.83% |
| 50 E 001 2110 2140 00 462000 0000 | MEDICARE | 0.00 | 20.00 | 0.00 | -100.00% |
| 50 E 002 2110 2140 00 000000 0000 | MEDICARE | 4,125.00 | 3,920.00 | 3,679.97 | -6.12% |
| 50 E 003 2110 2140 00 000000 0000 | MEDICARE | 1,055.00 | 1,005.00 | 795.51 | -20.84% |
| 50 E 004 2110 2140 00 000000 0000 | MEDICARE | 1,945.00 | 1,847.00 | 1,808.96 | -2.06% |
| 50 E 005 2110 2140 00 000000 0000 | MEDICARE | 970.00 | 946.00 | 852.72 | -9.86% |
| 50 E 008 2110 2140 00 000000 0000 | MEDICARE | 2,430.00 | 1,889.00 | 1,763.37 | -6.65% |
| 50 E 010 2110 2140 00 000000 0000 | MEDICARE | 1,465.00 | 2,310.00 | 2,283.40 | -1.15% |
| 50 E 011 2110 2140 00 000000 0000 | MEDICARE | 2,385.00 | 2,265.00 | 2,036.95 | -10.07% |
| TOTAL | EMPLOYEE BENEFITS | 14,570.00 | 14,372.00 | 13,970.72 | -2.79% |
| GUIDANCE SERVICES | | | | | |
| 50 E 002 2120 2120 00 000000 0000 | IMRF | 4,510.00 | 4,435.00 | 4,419.83 | 415.34% |
| 50 E 002 2120 2130 00 000000 0000 | FICA | 3,460.00 | 3,320.00 | 2,829.74 | -14.77% |
| 50 E 002 2120 2140 00 000000 0000 | MEDICARE | 5,915.00 | 5,600.00 | 5,312.04 | -5.14% |
| TOTAL | EMPLOYEE BENEFITS | 13,885.00 | 13,355.00 | 12,561.61 | -5.94% |
| HEALTH SERVICES | | | | | |
| 50 E 001 2130 2120 00 000000 0000 | IMRF | 2,810.00 | 2,763.00 | 2,739.14 | -0.86% |
| 50 E 002 2130 2120 00 000000 0000 | IMRF | 7,055.00 | 6,925.00 | 6,871.91 | -0.77% |
| 50 E 005 2130 2120 00 000000 0000 | IMRF | 0.00 | 0.00 | 17.47 | 0.00% |
| 50 E 008 2130 2120 00 000000 0000 | IMRF | 3,850.00 | 3,780.00 | 3,757.13 | -0.61% |
| 50 E 010 2130 2120 00 000000 0000 | IMRF | 3,735.00 | 3,670.00 | 3,642.16 | -0.76% |
| 50 E 011 2130 2120 00 000000 0000 | IMRF | 4,045.00 | 3,960.00 | 3,951.68 | -0.71% |
| 50 E 001 2130 2130 00 000000 0000 | FICA | 2,155.00 | 2,068.00 | 2,092.09 | 1.16% |
| 50 E 002 2130 2130 00 000000 0000 | FICA | 5,405.00 | 5,181.00 | 4,410.66 | -14.87% |
| 50 E 004 2130 2130 00 000000 0000 | FICA | 2,755.00 | 0.00 | 0.00 | 0.00% |
| 50 E 005 2130 2130 00 000000 0000 | FICA | 0.00 | 0.00 | 10.10 | 0.00% |
| 50 E 008 2130 2130 00 000000 0000 | FICA | 2,950.00 | 2,830.00 | 2,355.36 | -16.77% |
| 50 E 010 2130 2130 00 000000 0000 | FICA | 2,860.00 | 2,747.00 | 2,244.93 | -18.28% |
| 50 E 011 2130 2130 00 000000 0000 | FICA | 3,100.00 | 2,980.00 | 2,965.92 | -0.47% |
| 50 E 001 2130 2140 00 000000 0000 | MEDICARE | 1,995.00 | 1,606.00 | 1,659.83 | 3.35% |
| 50 E 001 2130 2140 00 430000 0000 | MEDICARE | 25.00 | 0.00 | 25.52 | 0.00% |
| 50 E 002 2130 2140 00 000000 0000 | MEDICARE | 1,265.00 | 1,212.00 | 1,031.43 | -14.90% |
| 50 E 003 2130 2140 00 000000 0000 | MEDICARE | 885.00 | 842.00 | 834.00 | -0.95% |
| 50 E 004 2130 2140 00 000000 0000 | MEDICARE | 645.00 | 1,147.00 | 1,086.39 | -5.28% |
| 50 E 005 2130 2140 00 000000 0000 | MEDICARE | 665.00 | 676.00 | 650.16 | -3.82% |
| 50 E 008 2130 2140 00 000000 0000 | MEDICARE | 690.00 | 662.00 | 550.81 | -16.80% |
| 50 E 010 2130 2140 00 000000 0000 | MEDICARE | 670.00 | 643.00 | 525.01 | -18.35% |
| 50 E 011 2130 2140 00 000000 0000 | MEDICARE | 725.00 | 697.00 | 693.67 | -0.48% |
| TOTAL | EMPLOYEE BENEFITS | 48,285.00 | 44,409.00 | 42,115.37 | -5.16% |
| PSYCHOLOGICAL SERVICES | | | | | |
| 50 E 001 2140 2130 00 000000 0000 | FICA | 1,116.00 | 0.00 | 0.00 | 0.00% |
| 50 E 002 2140 2130 00 000000 0000 | FICA | 0.00 | 0.00 | 186.00 | 0.00% |
| 50 E 002 2140 2140 00 000000 0000 | MEDICARE | 1,870.00 | 1,750.00 | 1,899.30 | 8.53% |
| 50 E 003 2140 2140 00 000000 0000 | MEDICARE | 590.00 | 555.00 | 100.73 | -81.85% |
| 50 E 004 2140 2140 00 000000 0000 | MEDICARE | 1,570.00 | 1,480.00 | 1,378.44 | -6.86% |
| 50 E 005 2140 2140 00 000000 0000 | MEDICARE | 1,205.00 | 1,145.00 | 1,131.96 | -1.14% |
| 50 E 008 2140 2140 00 000000 0000 | MEDICARE | 1,420.00 | 1,350.00 | 1,328.49 | -1.59% |
| 50 E 010 2140 2140 00 000000 0000 | MEDICARE | 985.00 | 950.00 | 1,008.53 | 6.16% |
| 50 E 011 2140 2140 00 000000 0000 | MEDICARE | 1,120.00 | 1,065.00 | 940.12 | -11.73% |
| TOTAL | EMPLOYEE BENEFITS | 9,876.00 | 8,295.00 | 7,973.57 | -3.87% |
| SPEECH PATHOLOGY & AUDIOLOGY | | | | | |
| 50 E 002 2150 2140 00 000000 0000 | MEDICARE | 95.00 | 90.00 | 1,118.24 | 1142.49% |
| 50 E 003 2150 2140 00 000000 0000 | MEDICARE | 665.00 | 626.00 | 183.20 | -70.73% |
| 50 E 004 2150 2140 00 000000 0000 | MEDICARE | 2,465.00 | 2,340.00 | 2,002.85 | -14.41% |
| 50 E 005 2150 2140 00 000000 0000 | MEDICARE | 1,140.00 | 1,074.00 | 314.03 | -70.76% |
| 50 E 008 2150 2140 00 000000 0000 | MEDICARE | 3,150.00 | 2,560.00 | 2,528.17 | -1.24% |
| 50 E 010 2150 2140 00 000000 0000 | MEDICARE | 1,465.00 | 2,555.00 | 2,305.84 | -9.75% |

| | | | | | |
|---|--------------------------|-------------------|-------------------|-------------------|-----------------|
| 50 E 011 2150 2140 00 000000 0000 | MEDICARE | 1,675.00 | 1,630.00 | 1,591.16 | -2.38% |
| TOTAL | EMPLOYEE BENEFITS | 10,655.00 | 10,875.00 | 10,043.49 | -7.65% |
| IMPROVEMENT OF INSTRUCTION | | | | | |
| 50 E 001 2210 2120 00 000000 0000 | IMRF | 500.00 | 670.00 | -623.36 | -193.04% |
| 50 E 001 2210 2130 00 000000 0000 | FICA | 100.00 | 100.00 | -1,454.52 | -1554.52% |
| 50 E 001 2210 2140 00 000000 0000 | MEDICARE | 1,885.00 | 950.00 | 1,106.87 | 16.51% |
| 50 E 001 2210 2140 00 462000 0000 | MEDICARE | 55.00 | 58.00 | 10.58 | -81.76% |
| 50 E 001 2210 2140 00 493200 0000 | TITLE II MEDICARE | 70.00 | 170.00 | 69.90 | -58.88% |
| 50 E 002 2210 2140 00 322000 0000 | MEDICARE | 100.00 | 15.00 | 98.54 | 556.93% |
| 50 E 002 2210 2140 00 323530 0000 | MEDICARE | 85.00 | 80.00 | 84.17 | 5.21% |
| TOTAL | EMPLOYEE BENEFITS | 2,795.00 | 2,043.00 | -707.82 | -134.65% |
| INSTRUCTION & CURRICULUM DEVELOPMENT | | | | | |
| 50 E 001 2212 2120 00 000000 0000 | IMRF | 14,960.00 | 14,435.00 | 14,835.47 | 2.77% |
| 50 E 001 2212 2130 00 000000 0000 | FICA | 7,245.00 | 6,885.00 | 6,752.22 | -1.93% |
| 50 E 001 2212 2140 00 000000 0000 | MEDICARE | 19,905.00 | 19,125.00 | 18,673.61 | -2.36% |
| TOTAL | EMPLOYEE BENEFITS | 42,110.00 | 40,445.00 | 40,261.30 | -0.45% |
| EDUCATION MEDIA SERVICES | | | | | |
| 50 E 002 2220 2120 00 000000 0000 | IMRF | 1,985.00 | 2,024.00 | 1,958.33 | -3.24% |
| 50 E 002 2220 2130 00 000000 0000 | FICA | 1,520.00 | 1,515.00 | 329.82 | -78.23% |
| 50 E 002 2220 2140 00 000000 0000 | MEDICARE | 1,495.00 | 1,440.00 | 1,104.57 | -23.29% |
| 50 E 003 2220 2140 00 000000 0000 | MEDICARE | 1,725.00 | 1,677.00 | 1,560.95 | -6.92% |
| 50 E 004 2220 2140 00 000000 0000 | MEDICARE | 1,175.00 | 1,110.00 | 1,073.55 | -3.28% |
| 50 E 005 2220 2140 00 000000 0000 | MEDICARE | 1,175.00 | 1,115.00 | 1,078.03 | -3.32% |
| 50 E 008 2220 2140 00 000000 0000 | MEDICARE | 865.00 | 823.00 | 816.49 | -0.79% |
| 50 E 010 2220 2140 00 000000 0000 | MEDICARE | 840.00 | 796.00 | 675.55 | 416.13% |
| 50 E 011 2220 2140 00 000000 0000 | MEDICARE | 1,050.00 | 1,017.00 | 1,146.65 | 12.75% |
| TOTAL | EMPLOYEE BENEFITS | 11,830.00 | 11,517.00 | 9,743.94 | -15.40% |
| EXECUTIVE ADMINISTRATION | | | | | |
| 50 E 001 2320 2120 00 000000 0000 | IMRF | 26,900.00 | 27,804.00 | 28,403.22 | 2.16% |
| 50 E 001 2320 2130 00 000000 0000 | FICA | 12,650.00 | 12,545.00 | 12,954.64 | 3.27% |
| 50 E 001 2320 2140 00 000000 0000 | MEDICARE | 5,235.00 | 8,733.00 | 10,029.65 | 14.85% |
| 50 E 001 2320 2140 00 430000 0000 | MEDICARE | 0.00 | 150.00 | 0.00 | -100.00% |
| 50 E 001 2320 2140 00 493200 0000 | MEDICARE | 0.00 | 57.00 | 0.00 | -100.00% |
| TOTAL | EMPLOYEE BENEFITS | 44,785.00 | 49,289.00 | 51,387.51 | 4.26% |
| SPECIAL AREA ADMINISTRATION | | | | | |
| 50 E 001 2330 2120 00 000000 0000 | IMRF | 12,520.00 | 14,481.00 | 14,580.81 | 0.69% |
| 50 E 001 2330 2130 00 000000 0000 | FICA | 3,785.00 | 6,707.00 | 6,558.76 | -2.21% |
| 50 E 001 2330 2140 00 000000 0000 | MEDICARE | 5,085.00 | 5,188.00 | 5,026.57 | -3.11% |
| 50 E 001 2330 2140 00 462000 0000 | MEDICARE | 745.00 | 570.00 | 573.87 | 0.68% |
| TOTAL | EMPLOYEE BENEFITS | 22,135.00 | 26,946.00 | 26,740.01 | -0.76% |
| SUPPORT SERVICES | | | | | |
| 50 E 001 2400 2140 00 430000 0000 | MEDICARE | 95.00 | 240.00 | 94.75 | -60.52% |
| TOTAL | EMPLOYEE BENEFITS | 95.00 | 240.00 | 94.75 | -60.52% |
| OFFICE OF THE PRINCIPALS | | | | | |
| 50 E 002 2410 2120 00 000000 0000 | IMRF | 12,275.00 | 12,305.00 | 11,730.05 | -4.67% |
| 50 E 003 2410 2120 00 000000 0000 | IMRF | 4,575.00 | 4,635.00 | 3,906.06 | -15.73% |
| 50 E 004 2410 2120 00 000000 0000 | IMRF | 7,570.00 | 7,450.00 | 7,364.24 | -1.15% |
| 50 E 005 2410 2120 00 000000 0000 | IMRF | 3,000.00 | 2,950.00 | 2,925.04 | -0.85% |
| 50 E 008 2410 2120 00 000000 0000 | IMRF | 5,520.00 | 5,495.00 | 5,666.59 | 3.12% |
| 50 E 010 2410 2120 00 000000 0000 | IMRF | 6,255.00 | 6,155.00 | 6,138.69 | -0.26% |
| 50 E 011 2410 2120 00 000000 0000 | IMRF | 9,010.00 | 8,300.00 | 8,276.73 | -0.28% |
| 50 E 001 2410 2130 00 000000 0000 | FICA | 800.00 | 460.00 | 789.58 | 71.65% |
| 50 E 002 2410 2130 00 000000 0000 | FICA | 9,405.00 | 9,207.00 | 8,234.01 | -10.57% |
| 50 E 003 2410 2130 00 000000 0000 | FICA | 3,510.00 | 3,470.00 | 2,840.90 | -18.13% |
| 50 E 004 2410 2130 00 000000 0000 | FICA | 5,800.00 | 5,575.00 | 5,511.90 | -1.13% |
| 50 E 005 2410 2130 00 000000 0000 | FICA | 2,300.00 | 2,205.00 | 2,187.02 | -0.82% |
| 50 E 008 2410 2130 00 000000 0000 | FICA | 4,230.00 | 4,110.00 | 3,953.80 | -3.80% |
| 50 E 010 2410 2130 00 000000 0000 | FICA | 4,790.00 | 4,605.00 | 4,166.20 | -9.53% |
| 50 E 011 2410 2130 00 000000 0000 | FICA | 6,905.00 | 6,210.00 | 6,142.79 | -1.08% |
| 50 E 001 2410 2140 00 000000 0000 | MEDICARE | 200.00 | 100.00 | 191.48 | 91.48% |
| 50 E 002 2410 2140 00 000000 0000 | MEDICARE | 10,820.00 | 10,390.00 | 8,649.55 | -16.75% |
| 50 E 003 2410 2140 00 000000 0000 | MEDICARE | 4,145.00 | 3,980.00 | 3,800.90 | -4.50% |
| 50 E 004 2410 2140 00 000000 0000 | MEDICARE | 4,750.00 | 4,525.00 | 4,483.10 | -0.93% |
| 50 E 005 2410 2140 00 000000 0000 | MEDICARE | 2,270.00 | 2,035.00 | 2,026.30 | -0.43% |
| 50 E 008 2410 2140 00 000000 0000 | MEDICARE | 4,260.00 | 4,070.00 | 3,964.29 | -2.60% |
| 50 E 010 2410 2140 00 000000 0000 | MEDICARE | 4,325.00 | 4,120.00 | 3,991.19 | -3.13% |
| 50 E 011 2410 2140 00 000000 0000 | MEDICARE | 6,470.00 | 6,065.00 | 6,030.77 | -0.56% |
| TOTAL | EMPLOYEE BENEFITS | 123,185.00 | 118,417.00 | 112,971.18 | -4.60% |

| | | | | | |
|--------------------------------------|--------------------------|-------------------|-------------------|-------------------|---------------|
| DEAN | | | | | |
| 50 E 002 2490 2120 00 000000 0000 | IMRF | 9,375.00 | 9,125.00 | 9,028.67 | -1.06% |
| 50 E 002 2490 2130 00 000000 0000 | FICA | 7,185.00 | 6,830.00 | 6,742.99 | -1.27% |
| 50 E 002 2490 2140 00 000000 0000 | MEDICARE | 1,680.00 | 1,597.00 | 1,576.99 | -1.25% |
| TOTAL | EMPLOYEE BENEFITS | 18,240.00 | 17,552.00 | 17,348.65 | -1.16% |
| DIRECTION OF BUSINESS SUPPORT | | | | | |
| 50 E 001 2510 2120 00 000000 0000 | IMRF | 10,855.00 | 10,474.00 | 10,162.04 | -2.98% |
| 50 E 001 2510 2130 00 000000 0000 | FICA | 5,105.00 | 4,851.00 | 6,622.81 | 36.52% |
| 50 E 001 2510 2140 00 000000 0000 | MEDICARE | 1,195.00 | 1,135.00 | 1,548.83 | 36.48% |
| TOTAL | EMPLOYEE BENEFITS | 17,155.00 | 16,460.00 | 18,333.68 | 11.38% |
| FISCAL SERVICES | | | | | |
| 50 E 001 2520 2120 00 000000 0000 | IMRF | 61,290.00 | 59,135.00 | 54,935.42 | -7.10% |
| 50 E 001 2520 2130 00 000000 0000 | FICA | 28,825.00 | 27,390.00 | 24,923.03 | -9.01% |
| 50 E 001 2520 2140 00 000000 0000 | MEDICARE | 8,630.00 | 8,199.00 | 6,970.64 | -14.98% |
| TOTAL | EMPLOYEE BENEFITS | 98,745.00 | 94,724.00 | 86,829.09 | -8.33% |
| OPERATIONS & MAINTENANCE | | | | | |
| 50 E 001 2540 2120 00 000000 0000 | IMRF | 88,515.00 | 86,650.00 | 80,758.54 | -6.80% |
| 50 E 002 2540 2120 00 000000 0000 | IMRF | 37,335.00 | 33,095.00 | 34,016.31 | 2.78% |
| 50 E 003 2540 2120 00 000000 0000 | IMRF | 10,895.00 | 10,665.00 | 10,667.69 | 0.03% |
| 50 E 004 2540 2120 00 000000 0000 | IMRF | 13,035.00 | 12,760.00 | 12,156.49 | -4.73% |
| 50 E 005 2540 2120 00 000000 0000 | IMRF | 6,860.00 | 6,715.00 | 6,840.83 | 1.87% |
| 50 E 008 2540 2120 00 000000 0000 | IMRF | 14,310.00 | 15,535.00 | 14,138.95 | -8.99% |
| 50 E 010 2540 2120 00 000000 0000 | IMRF | 13,780.00 | 13,450.00 | 13,542.54 | 0.69% |
| 50 E 011 2540 2120 00 000000 0000 | IMRF | 20,910.00 | 20,480.00 | 20,513.76 | 0.16% |
| 50 E 001 2540 2130 00 000000 0000 | FICA | 62,435.00 | 59,825.00 | 58,273.46 | 417.59% |
| 50 E 002 2540 2130 00 000000 0000 | FICA | 26,215.00 | 24,765.00 | 24,341.98 | -1.71% |
| 50 E 003 2540 2130 00 000000 0000 | FICA | 8,350.00 | 7,985.00 | 7,557.15 | -5.36% |
| 50 E 004 2540 2130 00 000000 0000 | FICA | 9,990.00 | 9,550.00 | 8,884.32 | -6.97% |
| 50 E 005 2540 2130 00 000000 0000 | FICA | 5,255.00 | 5,025.00 | 4,645.63 | -7.55% |
| 50 E 008 2540 2130 00 000000 0000 | FICA | 10,965.00 | 11,625.00 | 10,890.47 | -6.32% |
| 50 E 010 2540 2130 00 000000 0000 | FICA | 10,560.00 | 10,065.00 | 9,887.75 | -1.76% |
| 50 E 011 2540 2130 00 000000 0000 | FICA | 16,025.00 | 15,325.00 | 14,972.06 | -2.30% |
| 50 E 001 2540 2140 00 000000 0000 | MEDICARE | 14,600.00 | 13,990.00 | 13,628.47 | -2.58% |
| 50 E 002 2540 2140 00 000000 0000 | MEDICARE | 6,130.00 | 5,795.00 | 5,692.70 | -1.77% |
| 50 E 003 2540 2140 00 000000 0000 | MEDICARE | 1,955.00 | 1,870.00 | 1,767.45 | -5.48% |
| 50 E 004 2540 2140 00 000000 0000 | MEDICARE | 2,335.00 | 2,235.00 | 2,077.93 | -7.03% |
| 50 E 005 2540 2140 00 000000 0000 | MEDICARE | 1,230.00 | 1,175.00 | 1,086.47 | -7.53% |
| 50 E 008 2540 2140 00 000000 0000 | MEDICARE | 2,565.00 | 2,720.00 | 2,547.06 | -6.36% |
| 50 E 010 2540 2140 00 000000 0000 | MEDICARE | 2,470.00 | 2,355.00 | 2,312.55 | -1.80% |
| 50 E 011 2540 2140 00 000000 0000 | MEDICARE | 3,750.00 | 3,585.00 | 3,501.43 | -2.33% |
| TOTAL | EMPLOYEE BENEFITS | 390,470.00 | 377,240.00 | 364,701.99 | -3.32% |
| TRANSPORTATION | | | | | |
| 50 E 001 2550 2120 00 000000 0000 | IMRF | 197,325.00 | 206,650.00 | 213,373.67 | 3.25% |
| 50 E 001 2550 2130 00 000000 0000 | FICA | 146,440.00 | 155,710.00 | 158,308.56 | 1.67% |
| 50 E 001 2550 2140 00 000000 0000 | MEDICARE | 34,250.00 | 36,420.00 | 37,024.04 | 1.66% |
| TOTAL | EMPLOYEE BENEFITS | 378,015.00 | 398,780.00 | 408,706.27 | 2.49% |
| FOOD SERVICES | | | | | |
| 50 E 001 2560 2120 00 000000 0000 | IMRF | 9,870.00 | 9,522.00 | 8,786.11 | -7.73% |
| 50 E 002 2560 2120 00 000000 0000 | IMRF | 15,100.00 | 14,945.00 | 12,978.57 | -13.16% |
| 50 E 003 2560 2120 00 000000 0000 | IMRF | 4,195.00 | 5,359.00 | 5,275.52 | -1.56% |
| 50 E 004 2560 2120 00 000000 0000 | IMRF | 4,890.00 | 4,757.00 | 4,794.31 | 0.78% |
| 50 E 005 2560 2120 00 000000 0000 | IMRF | 2,695.00 | 2,692.00 | 2,704.91 | 0.48% |
| 50 E 008 2560 2120 00 000000 0000 | IMRF | 4,350.00 | 4,225.00 | 4,253.65 | 0.68% |
| 50 E 010 2560 2120 00 000000 0000 | IMRF | 4,855.00 | 4,724.00 | 4,468.54 | -5.41% |
| 50 E 011 2560 2120 00 000000 0000 | IMRF | 4,145.00 | 7,728.00 | 6,916.60 | -10.50% |
| 50 E 001 2560 2130 00 000000 0000 | FICA | 4,640.00 | 4,410.00 | 5,746.23 | 30.30% |
| 50 E 002 2560 2130 00 000000 0000 | FICA | 11,570.00 | 11,184.00 | 8,903.53 | -20.39% |
| 50 E 003 2560 2130 00 000000 0000 | FICA | 3,215.00 | 4,010.00 | 3,959.25 | -1.27% |
| 50 E 004 2560 2130 00 000000 0000 | FICA | 3,750.00 | 3,560.00 | 3,598.43 | 1.08% |
| 50 E 005 2560 2130 00 000000 0000 | FICA | 2,065.00 | 2,014.00 | 2,030.20 | 0.80% |
| 50 E 008 2560 2130 00 000000 0000 | FICA | 3,335.00 | 3,162.00 | 3,192.51 | 0.96% |
| 50 E 010 2560 2130 00 000000 0000 | FICA | 3,725.00 | 3,535.00 | 3,352.82 | -5.15% |
| 50 E 011 2560 2130 00 000000 0000 | FICA | 3,180.00 | 5,783.00 | 5,170.14 | -10.60% |
| 50 E 001 2560 2140 00 000000 0000 | MEDICARE | 1,085.00 | 1,032.00 | 1,343.83 | 30.22% |
| 50 E 002 2560 2140 00 000000 0000 | MEDICARE | 2,705.00 | 2,616.00 | 2,082.22 | -20.40% |
| 50 E 003 2560 2140 00 000000 0000 | MEDICARE | 755.00 | 938.00 | 926.00 | -1.28% |
| 50 E 004 2560 2140 00 000000 0000 | MEDICARE | 875.00 | 833.00 | 841.68 | 1.04% |
| 50 E 005 2560 2140 00 000000 0000 | MEDICARE | 485.00 | 471.00 | 474.87 | 0.82% |
| 50 E 008 2560 2140 00 000000 0000 | MEDICARE | 780.00 | 740.00 | 746.67 | 0.90% |
| 50 E 010 2560 2140 00 000000 0000 | MEDICARE | 870.00 | 830.00 | 784.11 | -5.53% |
| 50 E 011 2560 2140 00 000000 0000 | MEDICARE | 745.00 | 1,353.00 | 1,209.15 | -10.63% |

| | | | | | |
|--|----------------------------------|---------------------|---------------------|---------------------|----------------|
| TOTAL EMPLOYEE BENEFITS | | 93,880.00 | 100,423.00 | 94,539.85 | -5.86% |
| COMMUNICATION SERVICES | | | | | |
| 50 E 001 2630 2140 00 000000 0000 | MEDICARE | 1,440.00 | 1,367.00 | 1,362.15 | -0.35% |
| 50 E 001 2630 2120 00 430000 0000 | TITLE I IMRF | 1,200.00 | 2,100.00 | 1,213.71 | -42.20% |
| 50 E 001 2630 2130 00 430000 0000 | TITLE I FICA | 500.00 | 945.00 | 542.84 | -42.56% |
| 50 E 001 2630 2140 00 430000 0000 | TITLE I MEDICARE | 125.00 | 220.00 | 126.93 | -42.30% |
| TOTAL EMPLOYEE BENEFITS | | 3,265.00 | 4,632.00 | 3,245.63 | -29.93% |
| COMPUTER EDUCATION SERVICES | | | | | |
| 50 E 001 2660 2120 00 000000 0000 | IMRF | 66,970.00 | 64,967.00 | 62,912.54 | -3.16% |
| 50 E 001 2660 2130 00 000000 0000 | FICA | 42,835.00 | 40,700.00 | 41,101.78 | 0.99% |
| 50 E 001 2660 2140 00 000000 0000 | MEDICARE | 10,020.00 | 9,520.00 | 9,612.48 | 0.97% |
| TOTAL EMPLOYEE BENEFITS | | 119,825.00 | 115,187.00 | 113,626.80 | -1.35% |
| GRAND TOTALS IMRF/SS FUND | | 2,099,234.00 | 2,029,017.00 | 1,976,410.29 | -2.59% |
| CAPITAL PROJECTS FUND (FUND 60) | | | | | |
| 60 R 000 1930 0000 00 000000 0000 | IMPACT FEES | 500,000.00 | 783,875.00 | 417,522.63 | -46.74% |
| 60 R 001 1510 0000 00 000000 0000 | INTEREST - SWEEP ACCOUNT | 92,000.00 | 92,000.00 | 137,452.97 | 49.41% |
| TOTAL REVENUE FROM LOCAL SOURCES | | 592,000.00 | 875,875.00 | 554,975.60 | -36.64% |
| GRAND TOTALS REVENUE FROM ALL SOURCES | | 592,000.00 | 875,875.00 | 554,975.60 | -36.64% |
| 60 E 001 2530 5400 00 000000 0000 | CAPITAL OUTLAY | 590,000.00 | 875,000.00 | 309,919.23 | -64.58% |
| TOTAL CAPITAL OUTLAYS | | 590,000.00 | 875,000.00 | 309,919.23 | -64.58% |
| GRAND TOTALS CAPITAL PROJECTS FUND | | 590,000.00 | 875,000.00 | 309,919.23 | -64.58% |
| | | | | | 418 |
| WORKING CASH FUND (FUND 70) | | | | | |
| 70 R 000 1115 0000 00 000000 0000 | TAXES, EARLY | 58,300.00 | 53,799.00 | 55,743.01 | 3.61% |
| 70 R 001 1115 0000 00 000000 0000 | TAXES, BUDGET YEAR | 53,100.00 | 51,492.00 | 51,418.50 | -0.14% |
| 70 R 001 1510 0000 00 000000 0000 | INTEREST - SWEEP ACCOUNT | 70,000.00 | 70,000.00 | 134,600.20 | 92.29% |
| 70 R 003 1510 0000 00 000000 0000 | INTEREST - DISTRIBUTION ON TAXES | 200.00 | 65.00 | 223.24 | 243.45% |
| TOTAL REVENUE FROM LOCAL SOURCES | | 181,600.00 | 175,356.00 | 241,984.95 | 38.00% |
| GRAND TOTALS WORKING CASH FUND | | 181,600.00 | 175,356.00 | 241,984.95 | 38.00% |
| TORT FUND (FUND 80) | | | | | |
| 80 R 000 1120 0000 00 000000 0000 | TAXES, EARLY | 531,400.00 | 534,811.00 | 506,915.08 | -5.22% |
| 80 R 001 1120 0000 00 000000 0000 | TAXES, BUDGET YEAR | 482,200.00 | 512,000.00 | 511,029.84 | -0.19% |
| 80 R 001 1510 0000 00 000000 0000 | INTEREST - SWEEP ACCOUNT | 19,000.00 | 19,000.00 | 33,710.67 | 77.42% |
| 80 R 000 1950 0000 00 000000 0000 | REFUND PRIOR YEAR EXPENDITURE | 10,000.00 | 20,000.00 | 0.00 | -100.00% |
| GRAND TOTALS REVENUE FROM LOCAL SOURCES | | 1,042,600.00 | 1,085,811.00 | 1,051,655.59 | -3.15% |
| 80 E 001 2362 3820 00 000000 0000 | WORKER'S COMPENSATION INSURANCE | 230,000.00 | 166,116.00 | 30,878.05 | -81.41% |
| 80 E 001 2363 3830 00 000000 0000 | UNEMPLOYMENT INSURANCE | 5,000.00 | 5,000.00 | 2,258.28 | -54.83% |
| 80 E 001 2369 3180 00 000000 0000 | LEGAL SERVICES | 325,000.00 | 220,000.00 | 327,630.55 | 48.92% |
| 80 E 001 2371 3840 00 000000 0000 | PROPERTY INSURANCE | 810,000.00 | 793,500.00 | 777,916.20 | -1.96% |
| TOTAL PURCHASED SERVICES | | 1,370,000.00 | 1,184,616.00 | 1,138,683.08 | -3.88% |
| GRAND TOTALS TORT FUND | | 1,370,000.00 | 1,184,616.00 | 1,138,683.08 | -3.88% |

**Central Community School District 301
Budget Summary for Fiscal Year 2025-2026**

| Fund | Fund Description | Beginning Fund Balance | Projected Revenue | Projected Expenditure | Projected FY26 Fund Balance |
|------------------------|-------------------------------|-----------------------------------|------------------------------|----------------------------------|--|
| 10 | Education | \$ 26,410,216 | \$ 66,298,509 | \$ 67,863,747 | \$ 24,844,978 |
| 20 | Operations & Maintenance | \$ 5,807,529 | \$ 11,595,700 | \$ 11,297,684 | \$ 6,105,545 |
| 30 | Debt Service, Bond & Interest | \$ 6,342,909 | \$ 6,215,055 | \$ 9,905,725 | \$ 2,652,239 |
| 40 | Transportation | \$ 8,263,002 | \$ 6,431,210 | \$ 6,726,495 | \$ 7,967,717 |
| 50 | IMRF/SS/Medicare | \$ 3,433,687 | \$ 2,112,620 | \$ 2,099,234 | \$ 3,447,073 |
| 60 | Capital Projects | \$ 5,489,034 | \$ 592,000 | \$ 590,000 | \$ 5,491,034 |
| 70 | Working Cash | \$ 3,250,257 | \$ 181,600 | \$ - | \$ 3,431,857 |
| 80 | Tort | \$ 459,749 | \$ 1,042,600 | \$ 1,370,000 | \$ 132,349 |
| Total All Funds | | \$ 59,456,383 | \$ 94,469,294 | \$ 99,852,885 | \$ 54,072,792 |

Central 301 FOIA Report
August 2025

| Name of Requestor | Summary of Request | Response | Letter |
|---------------------|---|-----------------|-------------------------------------|
| James Becker | -I am curious to know if District 301 is providing any form of LGBTQ events for students. I also want to know if this information is being hidden from parents. | Granted In Part | J Becker |
| CT Mills | Names, titles, and business contact information (email and phone number if available) for current district-level or school-level staff whose responsibilities include any of the following: • Career & Technical Education (CTE) • Director or Coordinator of CTE • Perkins grant administration • Career and College Readiness • Work-Based Learning / Industry Partnerships • Career Pathways or Workforce Development Programs • STEM & CTE coordination | Granted in Part | CT Mills |
| Michelle Dubanowski | <p>All audio recordings and verbatim written minutes of closed session Board meetings held between January 1, 2025 and July 1, 2025, during which the Board discussed:</p> <ul style="list-style-type: none"> • Communications with legal counsel (including but not limited to Jennifer Rosenberg) pertaining to our family's case or any related litigation strategy. | Denied | Michelle Dubanowski |
| Michael Dubanowski | Same as above | Denied | M Dubanowski |
| Chris Willilams | I request the following information for your district's multifunction copiers, printers, and print management software. | Granted In Part | C Williams |

| | | | |
|-------------|--|-----------|---------------------------|
| Lee Bennett | Please provide the following information for the five most recent school years: For each high school and middle school in your district : For each Athletic activity: * Number of participants by sex | Extension | L.Bennett |
| | | | |

SUPERINTENDENT SEARCH TIMELINE

Central Unit School District 301

(boldface indicates Board involvement)

| | |
|--|---|
| July 21, 2025 | Consultants Facilitate Planning Meeting with Board of Education |
| September 22, 2025 | Consultants (DR) Facilitate BOE Focus Group |
| September 22nd & 23rd, 2025 | Consultants Facilitate Community Engagement: <ol style="list-style-type: none">1. Conduct Interviews with Focus Groups, Conduct Open Forum for Staff, Conduct Open Forum for the Community2. Collect Online Survey Feedback from Members of the School Community (<i>available online September 22-29, 2025</i>). |
| July-November 2025 | Accept and Screen Applications |
| October 20, 2025 | Consultants Present New Superintendent Profile to the Board |
| By November 2025 | Consultants Interview and Vet Promising Candidates |
| October 27, 2025 | Consultants Present Slate of 5-7 Recommended Candidates to the Board, Interviewing Workshop |
| November 3rd/6th 5PM | Board Conducts Initial Interviews of 5-7 Candidates |
| November 10th Committee A 4PM Committee B 5PM Board of Education 6PM | Board Conducts Second Interviews of 3 Finalists |
| Late November 2025 | Board Selects their Top Choice and May Choose to Conduct a Site Visit or conduct reference calls. Board Negotiates Contract with Selected Candidate. |
| By December 2025 | Board Takes Formal Action on the New Superintendent's Contract |
| July 1, 2026 | New Superintendent Assumes Duties |

The Board reserves the right to change the timeline.