NEIGHBORHOOD DEVELOPMENT FUND Not-for-Profit Transmittal and Approval Form

Applicant/Program: Fairdale Lions Club, Inc	
Lions Club Inc. will once again offer so their scholastic achievement, attendan	charitable services to the community, the Fairdale holarships to those students who qualify based on ce and community service. The recipients will be ment of funds made in August and/or September.
Is this program/project a fundraiser? Is this applicant a faith based organization? Does this application include funding for sub-	
within Metro Council guidelines and request a	evelopment Fund Application and have found it complete and approval of funding in the following amount(s). I have read the per furthered by the funds requested and I agree that the public he disclosure section below, if required. \$3,000 Amount 4/14/2016 Date
Primary Sponsor Disclosure List below any personal or business relationsh organization, its volunteers, its employees or relationsh	ip you, your family or your legislative assistant have with this nembers of its board of directors.
Approved by:	
Appropriations Committee Chairman	Date
Clerk's Office Only:	
Request Amount:	Committee Amended Appropriation:
Original Appropriation:	Council Amended Appropriation:

Legal Name of Applicant Organization: Fairdale Lions Club, Inc. Program Name and Request Amount: 2016 Fairdale High School Scholarships Yes/No/NA Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding? Yes Is the funding proposed by Council Member(s) less than or equal to the request amount? Yes Is the proposed public purpose of the program viable and well-documented? Yes Will all of the funding go to programs specific to Louisville/Jefferson County? Yes Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet? Yes Has prior Metro Funds committed/granted been disclosed? Yes Is the application properly signed and dated by authorized signatory? Yes Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included? Yes If Metro funding is for a separate taxing district is the funding appropriated for a program outside N/A the legal responsibility of that taxing district? Is the entity in good standing with: Kentucky Secretary of State? Louisville Metro Revenue Commission? Yes Louisville Metro Government? Internal Revenue Service? Louisville Metro Human Relations Commission? Is the current Fiscal Year Budget included? Yes Is the entity's board member list (with term length/term limits) included? Yes Is recommended funding less than 33% of total agency operating budget? No Does the application budget reflect only the revenue and expenses of the project/program? Yes Is the cost estimate(s) from proposed vendor (if request is for capital expense) included? N/A Is the most recent annual audit (if required by organization) included? Yes Is a copy of Signed Lease (if rent costs are requested) included? N/A Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is No faith-based) included? Are the Articles of Incorporation of the Agency included? Yes Is the IRS Form W-9 included? Yes Is the IRS Form 990 included? Yes Are the evaluation forms (if program participants are given evaluation forms) included? N/A Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if N/A required to do so)? Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant N/A met the BBB Charity Review Standards? Prepared by: Date: 4/15/2016

3 | Page Effective July 2015

Triplett, Kevin D

From:

Pam Shofner <pshofner12@gmail.com>

Sent:

Monday, March 21, 2016 12:57 PM

To:

Welch, Vicki A; Triplett, Kevin D

Subject:

2016 Scholarships

Hi Vicki & Kevin,

It's that time again!

We are hoping to be awarded \$3,000 for our FHS Scholarships again this year. Therefore, can you please send me the appropriate paperwork to file for the grant.

Thanks so much,

Pam

502-387-4375



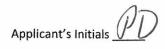
	SECTION 1 – APPLICANT INFORMATION				
Legal Name of Applic	ant Organ	ization: Foir	dala Lian	c Club Inc	
(as listed on: http://www.s	sos.ky.gov/bu	usiness/records) Fall (Jaie Lions	s Club, Inc	
Main Office Street &	Mailing A	ddress: 10101 Mitchell	Hill Rd., Fairdale,	KY 40118	
Website: N/A					
Applicant Contact:	Pam	Shofner-Daniels	Title:	Scholarship Chair	
Phone:	502-38	87-4375	Email:	PShofner12@gmail.com	
Financial Contact:	Brend	a Powell	Title:	Treasurer	
Phone:	502-9	55-8238	Email:	BPowell30@aol.com	
Organization's Repre	sentative v	who attended NDF Trai	ning: Pam Shofi	ner-Daniels	
GEO	RAPHICA	L AREA(S) WHERE PROG	GRAM ACTIVITIES A	RE (WILL BE) PROVIDED	
Program Facility Loca	tion(s):	10101 Mitchell Hi	ll Rd., Fairdale,	KY	
Council District(s):		13	Zip Code(s):	40118	
	SECTION	ON 2 – PROGRAM REQU	JEST & FINANCIAL I	NFORMATION	
PROGRAM/PROJECT	NAME: 20	16 Fairdale High Sch	ool Scholarships		
Total Request: (\$)	3,000	Total Metro A	Award (this progran	n) in previous year: (\$) 3,000	
Purpose of Request (check all t	hat apply):			
☐ Operating F	unds (gene	erally cannot exceed 33	% of agency's total	operating budget)	
Programming	ng/services	s/events for direct bene	fit to community or	qualified individuals	
☐ Capital Proj	ect of the	organization (equipmen	t, furnishing, buildir	ng, etc)	
The Following are Rec	quired Att	achments:	-,		
☐IRS Exempt Status De		n Letter	Signed lease if	ent costs are being requested	
Current Year Project	3. 7 .7		☐ IRS Form W9		
		le term & term limits	Evaluation form	is if used in the proposed program	
Current financial star		Special Control	Annual audit (if	required by organization)	
☐ Most recent IRS Forr ☐ Articles of Incorpora		20-H	Faith Based Organization Certification Form, if required		
		endor if request is for	Staff including	the 3 highest paid staff	
capital expense	p. op 0000 1				
				or received from Louisville Metro	
Government for this or any other program or expense, including funds received through Metro Federal Grants,					
from any department or Metro Council Appropriation (Neighborhood Development Funds). Attach additional sheet if necessary.					
Source:	Louisvil	lle Metro Gov	Amount: (\$)	3,000 (for 2015)	
Source:		A	Amount: (\$)		
Source:			Amount: (\$)		
Has the applicant con	tacted the	BBB Charity Review for		Yes No	
		Charity Review Standard			

Page 1 Effective April 2014





SECTION 3 – AGENCY DETAILS Describe Agency's Vision, Mission and Services: The Lions's Club is dedicated to services for the blind and visually impared. We support the world's eye banks, clinics, hospitals and eye research centers. We also provide charitable services in the community such as food baskets, scholarships, quality eye care, eye glasses, braill writers, guide dogs, glacoma screening and other community oriented events for educationa and socialization.





SECTION 4 - PROGRAM/PROJECT NARRATIVE A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.): Services for direct benefit to the community for qualified individuals. Scholarships will be awarded, typically, in May and the actual payment to the colleges typically occurs in August or September. B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s): We will be awarding \$3,000 worth of scholarships to qualified JCPS students to be used for their college costs. Individuals will qualify based on their scholastic achievements, attendence, community service, etc. to help further their education.





C: If this request is a fundraiser, please detail how the proceeds will be spent:
N/A
D: For Expenditure Reimbursement Only – The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for funds to be spent before the grant award period, identify the applicable circumstances:
☐ Effective October 24, 2013, reimbursements should not be made unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan
 identified in this application. ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.
 ■ The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this
application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.

Applicant's Initials



E: Describe the program's benefits to those being served (measurable outcomes). Include the program's process for collecting data and the indicators that will be tracked to measure the benefits to those being served: We request each recipient of our scholarships to keep us informed of their progress as they continue through college. However, if they choose not to communicate their progress we have no way to monitor them.
F: Briefly describe any existing collaborative relationships the organization has with other community organizations. Describe what those partners are bringing to the relationship in general and to this program/project specifically.
We are affiliated with several local community organizations such as the Fairdale Community Club, Fairdale Ministries, etc. We are also part of the International Lions Club Organization as our parent.



SECTION 5 - PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

Program/Project Expenses	Column 1 Proposed Metro Funds	Column 2 Non- Metro Funds	Column (1+2)=3 Total Funds
A: Personnel Costs Including Benefits	0	0	0
B: Rent/Utilities	0	0	0
C: Office Supplies	0	0	0
D: Telephone	0	0	0
E: In-town Travel	0	0	0
F: Client Assistance (Attach Detailed List)	0	0	0
G: Professional Service Contracts	0	0	0
H: Program Materials	0	0	0
I: Community Events & Festivals (Attach Detail List)	0	0	0
J: Machinery & Equipment	0	0	0
K: Capital Project	0	0	0
L: Other Expenses (Attach Detail List) Scholarships	3,000	1,500	4,500
*TOTAL PROGRAM/PROJECT FUNDS	3,000	1,500	4,500
% of Program Budget	66.667 %	33.333 %	100%

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Total Revenue for Columns 2 Expenses **	1,500
Other (please specify)	1,500 (Club Donation)
Fees Collected from Program Participants	0
Private Contributions (do not include individual donor names)	0
United Way	0
Other State, Federal or Local Government	0

^{*}Total of Column 1 MUST match "Total Request on Page 1, Section 2"



^{**}Must equal or exceed total in column 2.



Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

	Donor*/Type of Contribution	Value of Contribution	Method of Valuation			
	Scholarships	N/A	N/A			
	Total Value of In-Kind (to match Program Budget Line Item.					
LIS	* DONOR INFORMATION REFERS TO WHO MADE THE IN KIND CONTRIBUTION. VOLUNTEERS NEED NOT BE LISTED INDIVIDUALLY, BUT GROUPED TOGETHER ON ONE LINE AS A TOTAL NOTING HOW MANY HOURS PER PERSON PER WEEK					
Ag	ency Fiscal Year Start Date:					
	es your Agency anticipate a significant increase dget projected for next fiscal year? NO	or decrease in your budget f	rom the current fiscal year to the			
If Y	'ES, please explain:					





SECTION 6 – CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

Standard Assurances

- Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of
 expenditure is subject to Kentucky's open records law.
- Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- 5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- 6. Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal
 vear end
- 8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
- 9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
- 10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
- 11. Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked.

Standard Certifications

- 1. The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
- 2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
- 3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
- 4. The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
- 5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

Relationship Disclosure: List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

		DECTION / CENT	III ICATIONS & ASSONA	TOLO	
accurate t		I am aware my organizat er funding has been appr	tion will not be eligible for fur roved, any allocations already	nding if investiga received and ex	ation at any time shows
Signatur	e of Legal Signatory:	Cem hof	re- Janes	Date:	4/12/20/6
Legal Sig	gnatory: (please print):	Pam Shoffne	er-Daniels	Title:	Scholarship Chair
Phone:	502-387-4375	Extension:	Email:	PShofne	r12@gmail.com

SECTION 7 - CERTIFICATIONS 9. ASSURANCES

Page 8 Effective April 2014 Applicant's Initials

Officers of Fairdale Lions Club, Inc.

2015 - 2016

Officer	Member Name	Length of Office
President	Anna Daniels	1 year
Secretary	Bob Warren	1 year
Treasurer	Brenda Powell	1 year
1 st Vice President	Kathy Neagle	1 year
2 nd Vice President	Pam Shofner-Daniels	1 year
3 rd Vice President	Sue Collins	1 year
Lion Tamer	William Collins	1 year
Tail Twister	Karen Hayse	1 year
3 rd Year Director	Brenda Simpson	1 year
3 rd Year Director	Kim Durden	1 year
2 nd Year Director	Carolyn Hobart	1 year
2 nd Year Director	Juanita Giltner	1 year
1 st Year Director	Tammy Skinner	1 year
1 st Year Director	Scott Skinner	1 year
Membership Chair	Bill Neagle	1 year
Co-Membership Chair	Kathy Neagle	1 year
Past President	Sue Collins	1 year
Past President	Pam Shofner-Daniels	1 year
Past President	Kathy Neagle	1 Year

Note: All are volunteers. We have no paid staff.



TREASURY DEPARTMENT

WASHINGTON

OFFICE OF COMMISSIONER OF INTERNAL REVENUE

ADDRESS REPLY TO COMMISSIONER OF INTERNAL REVENUE AND REFER TO

> IT:P:T:1 LLA

International Association of Lions Clubs, 332 South Michigan Avenue, Chicago, Illinois.

Sirs:

Reference is made to evidence submitted for use in determining your status and the status of your districts and subordinate clubs for Federal income and employment tax purposes.

The records of the Bureau disclose that under date of December 20, 1926, you were held exempt from Federal income tax under the provisions of section 251(9) of the Revenue Act of 1926 and the corresponding provisions of prior revenue acts.

It is the opinion of this office, based upon the evidence presented, that you and your districts and subordinate clubs appearing in four revised copies of the "Annual Directory Lions International", of August, 1940, are exempt from Federal income tax under the provisions of section 101(9) of the Internal Revenue Code and the corresponding provisions of prior revenue acts.

Accordingly, you and your districts and subordinate clubs appearing in the "Annual Directory Lions International" will not be required to file returns of income unless there is a change in the character, purposes, or method of operation of your organization or of your districts and subordinate clubs. Any such changes should be immediately reported by you to this Bureau in order that the effect of the changes upon your present exampt status may be determined.

You should furnish the Bureau annually on the calendar-year basis lists in quadruplicate, showing only the names and addresses of any districts and subordinate clubs which were chartered during the calendar year and the names and addresses of any districts and clubs which for any reason ceased to exist. Such annual lists should be accompanied by a statement sworn to by one of your principal officers as to whether or not the information heretofore submitted by you, and on which this ruling is based, is applicable in all respects to the new districts and clubs appearing on the lists, and should be forwarded so as to reach this office not later than February 15 of the following year.

EC 4 1940 (1940)



Louisville Metro Government Office of Wanagement and Budget

Neighborhood Development Fund Training Attestation

Organization Name: FAIR GARE LIONS CLUB

Participant Name: PAM Shofner - DAniels

I agree that I am an authorized signatory of the organization named above and attest to having participated in reviewing the PowerPoint and the NDF financial reporting examples. In addition, I understand the requirements of the Neighborhood Development Fund grant process and the financial reporting documentation guidelines.

Participant Signature

Date



Exempt Organizations Select Check

Exempt Organizations Select Check Home

990-N (e-Postcard) filer Information

Tax Period:

2014 (07/01/2014 - 06/30/2015)

Employer Identification Number (EIN):

Legal Name: INTERNATIONAL ASSOCIATION OF LIONS CLUBS

Mailing Address:

PO Box 528 Fairdale, KY 40118 United States

Doing Business As:

Gross receipts not greater than: \$50,000

Organization has terminated: No

Principal Officer's Name and Address:

Pam Shofner 8900 Brown Austin Road Fairdale, KY 40118 United States

Website URL:

Related 990-N (ePostcard) Filings:

If the organization has filed additional Forms 990-N (e-Postcards), link(s) to additional e-Postcard filings are displayed below. Click on the link(s) to see the information included in those filing(s).

Tax Year 2011
Tax Year 2012
Tax Year 2013

1 of 2

FAIRDALE LIONS CLUB, INC.

General Information

Organization Number 0181426

Name FAIRDALE LIONS CLUB, INC.

Profit or Non-Profit N - Non-profit

Company Type KCO - Kentucky Corporation

StatusA - ActiveStandingG - Good

State KY

 File Date
 9/8/1983

 Organization Date
 9/8/1983

 Last Annual Report
 3/9/2016

 Principal Office
 P O BOX 528

FAIRDALE, KY 40118

Registered Agent ROBERT M. KAERCHER

1410 KENTUCKY HOME LIFE BLDG.

LOUISVILLE, KY 40202

Current Officers

President ANNA DANIELS
Vice President KATHY NEAGLE
Secretary Robert Warren
Treasurer Brenda Powell

DirectorBRENDA SIMPSONDirectorCAROLYN HOLBERTDirectorJUANITA GILTNERDirectorSCOTT SKINNER

Individuals / Entities listed at time of formation

Director GARY PARKS

DirectorCHARLES TERRYDirectorEDWARD LIMBERDirectorDANNY S JONESIncorporatorGARY PARKSIncorporatorCHARLES TERRYIncorporatorEDWARD LIME

Incorporator DANNY S JONES

1 of 4 4/12/2016 9:03 PM

Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are creat

Annual Report	3/9/2016	2 pages	tiff	PDF
Annual Report	4/16/2015	1 page	tiff	PDF
Annual Report	2/27/2014	1 page	tiff	PDF
Annual Report	2/28/2013	1 page	tiff	PDF
Annual Report	2/17/2012	1 page	tiff	PDF
Annual Report	2/22/2011	1 page	tiff	PDF
Annual Report	4/1/2010	1 page	tiff	PDF
Annual Report	2/27/2009	2 pages	tiff	PDF
Annual Report	1/18/2008	1 page	tiff	PDF
Annual Report	1/22/2007	1 page	tiff	PDF
Annual Report	3/24/2006	1 page	tiff	PDF
Annual Report	3/24/2005	1 page	tiff	PDF
Annual Report	10/30/2003	1 page	tiff	<u>PDF</u>
Annual Report	5/2/2002	1 page	tiff	PDF
Annual Report	5/15/2001	1 page	tiff	PDF
Annual Report	6/19/2000	1 page	tiff	PDF
Annual Report	7/8/1999	1 page	tiff	<u>PDF</u>
Annual Report	4/28/1998	1 page	tiff	PDF
Annual Report	7/1/1997	1 page	tiff	PDF
Annual Report	7/1/1996	1 page	tiff	<u>PDF</u>
Annual Report	7/1/1995	1 page	tiff	PDF
Annual Report	7/1/1994	1 page	tiff	PDF
Annual Report	7/1/1993	1 page	tiff	PDF
Annual Report	7/1/1992	1 page	tiff	PDF
Annual Report	7/1/1991	1 page	tiff	PDF
Statement of Change	10/29/1990	1 page	tiff	<u>PDF</u>
Annual Report	10/2/1990	1 page	tiff	<u>PDF</u>
Sixty Day Notice	9/1/1990	1 page	tiff	<u>PDF</u>
Annual Report	7/1/1989	1 page	tiff	PDF
Annual Report	7/1/1984	1 page	tiff	PDF
Articles of Incorporation	9/8/1983	5 pages	tiff	<u>PDF</u>

Assumed Names

Activity History

Filing	File Date	Effective Date	Org. Referenced
Annual report	3/9/2016 3:41:21 PM	3/9/2016	
Annual report	4/16/2015 10:41:55 AM	4/16/2015	

2 of 4

Information copy. Do not send to IRS.

Form 990-N

Electronic Notice (e-Postcard)

OMB No. 1545-2085

Department of the Treasury Internal Revenue Service for Tax-Exempt Organizations not Required To File Form 990 or 990-EZ

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 7/1/2014, and ending 6/30/2015.

B Check if applicable Terminated, Out of Business	C Name of organization: INTERNATIONAL ASSOCIATION OF LIONS CLUBS d/b/a: Fairdale Lions Club Inc	D Employer Identification
☐ Gross receipts are normally \$50,000 or less	% Pam Shofner PO Box 528 Fairdale, KY, US, 40118	
E Website:	F Name of Principal Officer: Pam Shofner	
	8900 Brown Austin Road Fairdale, KY, US, 40118	

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to give us the information. We need it to ensure that you are complying with these laws.

The organization is not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. The rules governing the confidentiality of the Form 990-N is covered in Code section 6104.

The time needed to complete and file this form and related schedules will vary depending on individual circumstances. The estimated average times is 15 minutes.

Note: This image is provided for your records only. Do NOT mail this page to the IRS. The IRS will not accept this filing via paper. You must file your Form 990-N (e-Postcard) electronically.

Form W-9
(Rev. December 2014)
Department of the Treasury

Internal Revenue Service

Request for Taxpayer Identification Number and Certification

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

	4 N / 1		
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.		
	Fairdale Lions Club, INC.		
2	2 Business name/disregarded entity name, if different from above		
ge			
Print or type Specific Instructions on page	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: Individual/sole proprietor or Corporation S Corporation Partnership single-member LLC	Trust/estate	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)
Σ×	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partners	ship) ►	
Print or type	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the tax classification of the single-member owner.	the line above for	Exemption from FATCA reporting code (if any)
F	Other (see instructions) ▶		(Applies to accounts maintained outside the U.S.)
ij	5 Address (number, street, and apt. or suite no.)	Requester's name a	and address (optional)
Spec	10101 Mitchell Hill Rd.		Section of the sectio
See	6 City, state, and ZIP code		
ഗ്	Fairdale, Kv 40118		
	7 List account number(s) here (optional)		
C08			
Pa	rt I Taxpayer Identification Number (TIN)		
Ente	r your TIN in the appropriate box. The TIN provided must match the name given on line 1 to av	oid Social sec	curity number
resid entiti	rup withholding. For individuals, this is generally your social security number (SSN). However, f lent alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other les, it is your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	.	
TIN C	on page 3.	or	
	e. If the account is in more than one name, see the instructions for line 1 and the chart on page	4 for Employer	identification number
guid	elines on whose number to enter.		
Pa	rt II Certification		
Unde	er penalties of perjury, I certify that:		
1. TI	he number shown on this form is my correct taxpayer identification number (or I am waiting for	a number to be is	sued to me); and
S	am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b ervice (IRS) that I am subject to backup withholding as a result of a failure to report all interest o longer subject to backup withholding: and	o) I have not been r or dividends, or (c)	notified by the Internal Revenue the IRS has notified me that I am

I am a U.S. citizen or other U.S. person (defined below); and
 The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person March 1997

General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

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

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

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

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued), $\,$
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See What is FATCA reporting? on page 2 for further information.

ARTICLES OF INCORPORATION

OF

PAIRDALE LIONS CLUB, INC.

ORIGINAL CONTROL FILED
SESSION OF STATE OF HEATOCA

SEP X8 1983

Janus fra Hills

KNOW ALL MEN BY THESE PRESENTS THAT:

The undersigned, GARY PARKS, CHARLES TERRY, EDWARD LIMER, and DANKY S. JONES, do hereby form a nonprofit corporation under the laws of the Commonwealth of Kentucky.

ARTICLE I

The name of the corporation shall be:

"FAIRDALE LIONS CLUB, INC."

ARTICLE II

The duration of the corporation shall be perpetual.

ARTICLE III

The purpose of the corporation shall be to promote, sustain, aid, and assist civic and charitable activities in the Fairdale Community, and to do any and all lawful business for which corporations may be incorporated under KRS 273.

ARTICLE IV

The address of the registered office shall be 715 Marion E. Taylor Building, Louisville, Kentucky 40202; and the resident agent will be ROBERT M. KAERCHER, at such address.

ARTICLE V

The initial Board of Directors of the corporation shall consist of four (4) directors; and the directors who are to serve until the ifrst annual meeting of the members of the corporation, or until their successors are elected and qualified are:

CHARLES TERRY, 7408 King Williams Ct., Louisville, KY 40214
CHARLES TERRY, 608 Kirsch Way, Fairdale, Kentucky 40118
EDWARD LIMER, 8407 Fox Ridge Court, Louisville, KY 40272
DANNY S. JONES, 11202 Holsclaw Hill Rd., Fairdale, KY 40118

The number of directors thereafter shall be as the By-Laws of the

corporation may, from time to time, provide.

ARTICLE VI

The names and addresses of the incorporates are:

GARY PARKS, 7408 King Williams Ct., Louisville, KY 40214 608 Kirsch Way, Fairdale, Kentucky 40118 EDWARD LIMER, 8407 Fox Ridge Court, Louisville, KY 40272 DANNY S. JONES, 11202 Holsclaw Hill Rd., Fairdale, KY 40118

Under the name of the corporation it may adopt a corporate seal, and it has the power to contract and be contracted with, to sue and be sued, and it may receive, accept, purchase or acquire and hold in any other lawful manner, real and personal property, and it may dispose of same by gift, deed, or in any other lawful manner, for the benefit of the corporation, its members, associates, or any other cause or causes or a civic, educational or charitable nature.

ARTICLE VIII

The corporation is not organized for pecuniary profit nor shall it have any power to issue certificates of stock or declare dividends, and no part of its net earnings shall inure to the benefit of any member of director. The balance, if any, of all money received by the corporation from its operations after the payment in full of all debts and obligations of the corporation, of whatsoever kind and nature, shall be used and distributed exclusively for charitable, civic and educational purposes.

ARTICLE IX

The corporation formed hereby shall have no capital stock, and shall be composed of members rather than shareholders.

ARTICLE X

Members, Directors, and Officers of the corporation shall

not be personally liable for any debts or obligations of the corporation.

alice &

CHARLES PERRY

PROMADO LIMER

DANNY S. JONES

COUNTY OF JEFFERSON

I, a Notary Public in and for the State and County aforesaid, hereby certify that the foregoing persons, GARY PARKS, CHARLES TERRY, EDWARD LIMER, and DANNY S. JONES, all of Jefferson County, Kentucky, appeared before me personally and acknowledged that they and each of them signed the foregoing Articles of Incorporation as their free act and deed for the purposes there stated.

Witness my signature and seal of office this 7th day of SEPTEMBER, 1983.

My commission expires:

3/13/87

NOTARY PUBLIC, KY, STATE AT LARGE

This Instrument Prepared By: CONNELLY, KAERCHER & STAMPER

ROBERT M. KAERCHER Attorney at Law

Attorney at Law 715 Marion E. Taylor Bldg. Louisville, Kentucky 40202 Phone: (502) 589-2100

SER TAIT

308 mi 322

office of secretary of state

FRANCES JONES MILLS
Secretary



FRANKFORT, KENTUCKY

CERTIFICATE OF INCORPORATION OF NON-STOCK, NON-PROFIT CORPORATION

I, FRANCES JONES MILLS, Secretary of State of the Commonwealth of Kentucky certify that there has been delivered to my office articles of incorporation of

incorporation of	FAIRDALE LIONS CLUB, INC.	
The name and addr	ess of the registered agent of this corporation is	
	ROBERT M. KAERCHER	
NAME	715 MARION E. TAYLOR BUIDLING	
STREET ADDRESS	LOUISVILLE, KENTUCKY 40202	-
THE RESERVE ASSESSMENT		

NOW, THEREFORE, finding that these articles of incorporation conform to law and that all fees therefore having been paid as prescribed by law, I, FRANCES JONES MILLS, Secretary of State, issue this Certificate of Incorporation.



at Frankfort, Kentucky.

Frances Jones Mills
SECRETARY OF STATE

SECRETARY OF STATE

ASSISTANT SECRETARY OF STATE

Fairdale Lions Club, Inc. Income & Expenses 2014-2015

-						
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- 8	8 8	L	u	m	C	

	Total Gross Income:	\$ 40,185.00
•	Fundraiser Income	31,697.00
•	Regular Income	\$ 8,487.00

Expenses:

	Total Gross Expenses:	Ś	30.245.00
•	Fundraiser Expenses		11,584.00
•	Ongoing Expenses	\$	18,661.00

Gross Income:	\$ 40,185.00
Gross Expenses:	\$ 30,245.00

Net Income: \$ 9,940.00

Fairdale Lions Club, Inc. Operating Budget 2014-2015

A.	Personnel Costs: (All vo	lunteers. No paid Staff)	\$	0.00
В.	Rent/Utilities: • Gas & Electric			2 794 00
	Water & Sewers			3,784.00
	Garbage			1,262.00 540.00
	Cable/Phone			920.00
	PO Box Rental			58.00
	Total:		\$	6,564.00
C.	Office Supplies:		Ψ.	0,50 1100
	 PO Stamps 		\$	98.00
	 Misc Office Supplies 			95.00
	Total:		\$	193.00
D.	In-Town Travel: (Volunteers pay	y own expenses)	\$	0.00
	Total:		\$	0.00
E.	Client Assistance:			
	 Eye Glasses purchased by 	Club for Needy	\$	1,045.00
	 Scholarships to FHS Stude 	ents		5,500.00
	Flowers Sick/Funeral			119.00
	Total:		\$	6,664.00
F.	Professional Service Contracts:			
	 CPA – Form 990 filing 		\$	25.00
G.	Program Materials:		\$	0.00
	Total:		\$	0.00
Н.	Community Events & Festivals:		\$	11,584.00
	(See "Fundraiser Expenses" she	et)		
	Total:		\$	11,584.00

Fairdale Lions Club, Inc. Operating Budget 2014-2015

١.	Small Equipment:		
	 Lawn Mower Service 	\$	263.00
	 Lowes for Bulbs & Filters 		24.00
	 Choates Fire Protection 		104.00
	 Snow Removal 		225.00
	Hall Maintenance		225.00
	 Kitchen Supplies & Equipment 		119.00
	 Hood Cleaning 		225.00
	Copier Service		312.00
	 Gas for Mower 		100.00
	 Electrical/Concrete Work 		1,500.00
	 Hardware Supplies 	****	2.00
	Total:	\$	3,100.00
J.	Capital Equipment:		
	No Capital Equipment	\$	0.00
	Total:	\$	0.00
K.	Other Expenses:		
	 See detailed list "Club Ongoing Expenses" 	\$	8,778.00
	(Designated with an "O" beside amount)		
	Total:	\$	8,778.00

					ses	ongoinpanses	0	
		RECEIVED	ONS R	7 FUND RAISER AND DONATIONS RECEIVED	#	2014-2015		BUILDING MAITANCE/SUPPLIES
	nse's	0=0ther Expenses	2		# 11,737.18 + 1,033.09	There is	فخ	* We own our build!
6923,99	\$73,000,000 \$6923,99		es I		\$11,737,18>	+ 2,055.50	\$ -13,792.68 \$	TOTALS
<u></u>		118.99	49	FLOWERS FOR SICK Clights	Net /		\$ 650.00	NEW CLUB PINS
	`	200.00	49	CRUSADE FOR CHILDREN			\$ 335.00	DISTRICT CONVENTION
	0	40.00	49	SHRINE CIRCUS		35.50	49	CLUB SHIRTS & HATS
				LIONS HALL OF FAME			\$ 171.45	CLUB AWARDS/MERCHANDICE
	0		49	SENIOR CITIZENS			\$ (95.00)	NEW CHECKS ORDERED
	0	70.00	49	FOOD FOR NEEDY FAMILY	\$ (326.63)	44.00	\$ 370.63 \$	CLUB AWARDS (DINNER) 2014
				FAIRDALE MINISTRIES	\$ (22.05)	9.00	\$ 31.05 \$	LION'S CATALOG ORDERS
	0	50.00	49	OTHER CLUB DONATIONS				CHARGES ON NSF CHECKS
				CHRISTIAN ACADAMY				CHECKS WRITTEN UN CLAIMED
	0	100.00	49	TAPPS PHOOH CORNER		<	\$ 25.00	TAXS FILED/CPA POF SRVS
				DRUG/DIABETES (CG)				TREASURER'S BOND
				HI TECH (GC)			\$ 15.00	INCORPORATION FEES
	0		49	VISION VAN (GC)			\$ 30.00	ASSOCIATE MEMBERSHIP FEES
	0	_	(A)	LEADERDOG FOUNDATION (GC)			\$ 155.00	BD OF HEALTH PERMIT/INSPEC.
	0	100.00	co	PATRON FUND (GC)	\$ (25.04)	1,967.00	\$ 1,992.04 \$	CLUB DUES TO INTO!
	0	500.00	49	LCIF (MELVIN JONES)	9		\$ 98.00	P.O. STAMPS OFF Supplies
				KLEF (GC)			\$ 58.00 ~	P.O. BOX RENTAL
di ose		0.0000000000000000000000000000000000000						BANK CHECKS ORDERED
Special	\$ 3,000,00		49	SCHOLORSHIPS (FHS) Client			\$ 1,432.65	PROPERTY TAX
-	0	800.00	€9				\$ (920.39)	INSIGHT (CABLE phone.)
				ALL STATE BAND (GC)			\$ 1,767.67	HALL INSURANCE
	0		€9	CAMP CRESENDO (GC)			\$ 540.00	GARBAGE PICK-UP U\+; \
	0		€9	YOUTH CAMP (GC)	•		\$ (1,262.30) V	WATER & SEWERS U
	` 0	_	49	KID SIGHT (GC)	Now	Partof cable Now	0	TELEPHONE
		1,045.00	49	EYEGLASSES Pairs) 1557 54			\$ (3,783.89)	GAS & ELECTRIC
	CREDIT	DEBIT		REASON DONATIONS GIVEN		CREDIT	DEBIT	REASON (CLUB OPERATIONS)
77	10 - OF 2				ILDING ACCOUNTS	AND BU	TION, CHARITY	2014-2015 ADMINISTRATION, CHARITY AND BUILDING ACCOUNTS
	2				MUDUING	NA I		

			/ SSay
\$ 17,858.84	\$ + 56,159.05	\$ 38,300.21	NET PROFIT/0
Net			GROSS NET TOTAL
\$3,099,98 /	40 (\$ -3099,88	
	,		OFFICE SUPPLIES
	5 grup of	\$ (2.49)	HARDWARE SUPPLIES
	1. July Jus	\$ (1,500.00)	ELECTRICAL/CONCRETE WORK
	5111	\$ 262.89	MOWER SERVICE
) 11 \	# 100,-	GAS FOR MOWER
		\$ 312.00	COPIER /SERVICE
	511	\$ 225.00	HOOD CLEANING
	smaril y	\$ (119.25)	DINES(KIT. SUPPLIES & EQUIP.
) V	\$ (225.00	HALL MAINTANCES TO BUT &
) (HALL EQUIPMENT
	Z	\$ (225.00	SNOW REMOVAL SWA EXXIV
	,		DIRT, GRAVEL & SPREADING
			LAWN EQUIPMENT
		AIR	REFRIGERATOR/ICE MAKER REPAIR
) \ 	\$ 104.15	CHOATES FIRE PROT. SMOTH
) \	\$ (24.10	LOEWS BULBS/FILTERS HOW
)	FURNACE REPAIRS
			PARKING LOT
	CREDIT	DEBIT	REASON (CLUB OPERATIONS)
ノタンと	たこと		

Sunitable + Jacin Mount	15 LECTOINED	ľD
INCOME	DEBIT	CREDIT
CLUB DINNERS	\$ 205.00	\$ 654.00
LION BANK/ JAN. 1,14-DEC. 30,14		\$ 422.10
DONATIONS (TIPS)/XMAS 1/14-12/14		\$ 390.15
HALL RENTALS		\$ 5,400.00
FISH FRY	\$ 5,891.45	\$ 16,341.35
GUM BALL MACHINES		\$ 402.90
PRP BANK INTEREST		\$ 20.95
BUNCO PARTY	49	\$ 1,684.00
QUILT GIVE AWAY	\$ 100.00	\$ 500.00
FAIRDALE FAIR	\$ 2,021.14	\$ 5,561.00
EASTER	\$ 1,376.92	\$ 1,559.00
SCHOLARSHIP BREAKFAST		
VOLUNTEER CHRISTMAS DINNER	\$ 158.84	\$ 148.00
CHRISTMAS	\$ 2,172.83	\$ 1,567.75
AUCTION		
DONATIONS		\$ 870.00
HOLLOWEEN STREET	\$ 16.60	7
	\$ 11,942.78	\$ + 35,521.20

		00	4.8	\$ 40,184.88	*									
		100	7,4	31,69	Fund Raiser INC: 31, 697,49	Funda								
	JUNE	L	MAY	APRIL	MARCH	, FEB	JAN	טבט	NO.					
31,697.49	2,301.10/\$	69	\$2,169.75	\$ 2,605.25	0	4/2.69	418.00	DEC -, /+0.00) I		m I	G	JULY	
	69				525.00			24000	4 1 1 1 2 2 5	\$ 5 325 00	\$ 5,977.25	\$ 1.851.50	\$ 1,552.50	TOTALS
\$ 853.00	69	300.00	ده س											EGG HUNT DONATIONS
	49													EGG HUNT
\$ 148.00	49							\$					\$ 44.00	AWARDS DINNER
\$ 600.00	69	-												VOLUNTEER DINNER
	€5	-						\$ 600 00						CHRISTMAS (DONATIONS)
_	69	-									\$ 300.00			FAIRDALE FAIR (SCHOL.)
	4	+									\$ 1,000.00			FAIRDALE FAIR (CHARITY)
	. 6	+									\$ 1,000.00			FAIRDALE FAIR (BUILD.)
	9 6	1				-				\$ 85.00	\$ 3,476.00			FAIRUALE FAIR (ADMIN.)
1		+				\$ 955.00				\$ 729.00				BONCO
1	0	+						\$ 500.00						COLOCANOLIC DONALION
ω	46									\$ 3,000.00				SCHOL ARSHIP DONATION
	ક							\$ 500.00						SCHOI ARSHIPS CRANT
\$ 651.00	_	68.00 \$	€9	\$ 80.00	\$ 97.00	\$ 57.00	\$ 53.00		\$ 51.00	04.00			1	QUILT GIVE AWAY
\$ 200.75	16.50	12.25 \$	49	\$ 12.00	12.50		1							FISH FRY SCHOLARSHIP
\$ 1,551.00-	359.00 \$	67.00 \$	49		297.00		وا				\$ 85.00		\$ 12.50	DRINK FUND
\$ 1,200.00		200.00 \$	69		200.00				A 100	-		- 1	\$ 58.00	FISH FRY (CHARITY)
\$ 12,738.60	1,199.35	1,277.00 \$	49	_	1,661.50	_	9 -,200.20		-				69	FISH FRY (BUILDING)
	+	+-	65	1	30.10				1	-		\$ 1,225.50	\$ 1,360.00	FISH FRY(ADMINIST.)
	+-				30 ,					-	\$ 106.25	\$ 58.00	\$ 20.00	FISH FRY TIPS/XMAS
\$ 870.00	650.00	\$ 00.01			P	20.60	\$ 27.00		\$ 29.25	\$ 26.00		\$ 24.00		LION BANK/XMAS
ō	+	+	_	AFAIL	THE STATE OF						\$ 10.00			DONATIONS (CHARITY)
				A 70	MADOL	ח ח ח	JAN	DEC.	NOV.	OCT.	SEPT.	AUG.	JULY	7/1/14-6/30/15
\$ 8,487.39	500.10	\$ 17.600	6	\$ 102.00		1	- 1	3	H	FUND RAISERS	FUNI			
1)		-	,	40000	551 03	\$ 134717	\$ 710.77	\$ 1,110.95	\$ 908.81	\$ 665.67	\$ 403.14	\$ 1,028.96	\$ 551.79	TOTALS
	-	1	1										200	ORCHESTED CHECKS KE-AUD

CLUB SHIRTS/HATS UNCLEARED CHECKS RE-ADD BANK CHARGES (REPAY) INSF CHECKS (REPAYED) NEW MEM ENTRANCE FEE CLUB DINNERS CLUB DUES FORCHT BANK INTEREST GUMBALL MACHINES HALL RENTAL 7/1/14-6/30/15 69 4 G JULY 325.00 \$ 450.00 225.00 1.79 49 AUG 411.00 102.00 14.00 50.50 1.46 G SEPT. 3 300.00 51.60 50.00 1.54 € OCT. 500.00 114.00 50.00 1.67 69 G NOV. 625.00 101.00 108.00 9.00 50.20 1.61 49 DEC 925.00 84.00 50.00 50.00 1.95 4 JAN. 525.00 100.00 84.00 69 FEB. 108.00 400.00 \$ 780.00 \$ 50.00 7.50 1.67 MARCH 450.00 100.00 \$ 1.93 60 APRIL 50.00 50.50 1.83 S () MAY 500.00 50.00 54.00 1.77 4 JUNE 400.00 50.00 50.10 4 \$ 20,5518.99 69 TOTALS 5,400.00 1,967.00 402.90 654.00 35.50 9.00

INCOME

	IOIALS	HOLOWEEN STREET	SCHOLARSHIP BREAKFAST	YARD SALE/CAR WASH	EGG HUNT	QUILT GIVE AWAY	DRINKS FOR BUNCO	BUNCO PARTY	DRINKS FOR FAIR	FAIRDALE FAIR ADS	FAIRUALE FAIR	OLOG DIMMEN DISAMMING	CI LIB DINNIED DOMANINO	CLUB DINNER ENTREES	VOLUNTEER DINNER	FOOD BASKETS	CIRIO INIAO FROIT	CHRISTINAS PRESENTS	PIGHTRY SIGNS	MISC/FISH FRY	MISC/EIGH FOX	DRINKS FOR FIGH FRY	FISH FRY		//01/14-6/30/2015
	\$ 1,069.00									\$ 75.00	\$ 157.86	l	+								₩ 12.50			2011	= <
	\$ 708.86									\$ 100.00		\$ 25.00		\$ 20.00							\$ 15.00			AUG	2:5
	\$ 1,461.69								\$ 85.00		\$ 1,291.69										\$ 85.00		7	SEPT	2007
	\$ 785.30 \$	\$ 16.60										\$ 25.00									\$ 10.50	\$ 713.20	/z	001	
												\$ 25.00						\$ 297.83			\$ 8.50	\$ 394.19		YON	
	725.52 \$ 2,392.36					\$ 100.00						€ 9				-	\$ 230.00	\$ 505.09				\$ 617.36	EXPENSES	DEC	
	\$ 182.00				\$ 150.00							\$ 25.00	•	•							\$ 7.00		ES	JAN	
	\$ 781.61										1	\$ 25.00	\$ 20.00							1	69	\$ 727.61		FEB	
- 1	\$ 1,901.86				\$ 707.05							69									-	\$ 1,091.41		MAR	
	\$ 643.74			\$ 420.37								4								•	A	\$ 202.77		APR	
	\$ 369 42									\$C.00.2		1	\$ 20.00							-	9	\$ 100.58		MAY	
004.00	\$ 582 58									\$ /5.00	, 6	P								\$ 10.00	9 €	\$ 471 08		- INF	
	٩			\$ 1,376.92				\$ 85.00			6		\$ 80.00	\$ 158.84	\$ 781.07	\$ 230.00				\$ 200.75	9 6	A	L		

JULY

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JUNE

[5]	FOOD FOR NEEDY FAMILY	DONATIONS TO OTHER CLUBS	SHRINE CIRCUS	CLUB PICNIC	GIFT CARDS	HOLARSHIPS	CRUSADE FOR CHILDREN	TAPP	4	DISTRICT CONVENTIONS	FLOWERS (SICK)/FUNERALS	KLEF (VISION VAN)	PATRONS FUND (GC)	HIGH TECH (GC)	CANDY DAYS (GC)	YOUTH CAMP (GC)	LEADER DOG (GC)	DIABETES (GC)	DRINKS FOR STATE FAIR	KLEF	MELVIN JONES (LCIF)	LCIF	ALL STATE BAND (GC)	KID SIGHT	CAMP CRESENDO (GC)	GLASSES (2)		7/01/14-6/30/2015		TOTALS	DIRT/GRAVEL/PAVEMENT	SNOW REMOVAL	ELECTRICAL WORK	FURNACE/AIR REPAIRS	HALL MAINTANCE	CONCRETE WORK	MOWER GAS	HALL EQUIPMENT	LOWES BULBS/FILTERS/PAINT	OFFICE SUPPLIES	MOWERS TUNE UP/REPAIRS	FAIRDALE HARDWARE	ICE MAKER REPAIRS	REFRIGERATOR SERVICE/REPAIR	KITCHEN EQUIPMENT	HOOD CLEANING	MISC. KITTCHEN SUPPLIES	DINES (SUPPLIES)	PAYEE	7/01/14-6/30/2015
\$ 5,030.00						\$ 4,000.00		- 1	\$ 800.00																	\$ 230.00	JULY																	AIR					JULY	
\$ 1,620.00						\$1,500.00																			- 1	\$ 120.00	AUG.								- 1	\$ 1.500.00					le l								AUG	
\$ 50.00		\$ 50.00																								!	SEPT	CHARITIES																					SEPT	הווס הווס
360.00	\$ 70.00							\$ 100.00																	-	\$ 190.00	OCT	SOLO IONO	DONATIONS										\$ 24.10									-	SEPT OCT NOV	7
\$ 200.00				\$ 200.00																						1404.	VON																					NOV.	ND SUPPLIE	
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\$ 213.30										\$ 58.30															\$ 155.00	1					\$ /5.00													T			\$ 119.25	FEB.		}
\$ 255.00		\$ 40.00							\$ 135.00																\$ 80.00	NA NA					\$ 150.00										\$ 2.49							MARCH		
\$ 1,750.00												\$ 100.00			\$ 100.00	\$ 150.00				\$ 500.00	1		\$ 150.00	\$ 500.00		APRIL								\$ 225.00											\$ 225.00	1		APRIL		
\$ 250.00						\$ 200.00																		\$ 50.00		MAY														\$ 262.89								MAY		
										\$ 60.69															\$ 40.00	JUNE																			,	/		JUNE	_	
10,1		\$ 40.00	\$ 200.00		5		1			\$ 118.99	\$ 250.00			1	\$ 100.00	\$ 150.00				\$ 500.00			\$ 150.00	\$ 550.00	\$ 1,045.00			- 1	\$ 2,358.73	5 683 C	\$ 225.00			1	\$ 1,500.00			\$ 24.10		\$ 262.89					\$ 225.00		\$ 119.25	X TOTALS		`.

920.39 \$ / 3,377.09 406.80 693.00 540.00 98.00 58.00 155.00 104.15 171.45 12484.34 370.63 19.10 15.00 95.00 25.00 \$ 11796.04 TOTADE G 8 8 69 267.55 30.24 59.51 135.00 84.25 112.75 00 1057 JUNE 69 197.28 84.25 30.63 207.55 59.85 337.50 917.06 G 312.50 219.02 86.84 814.10 31.72 59.87 104.15 APRIL 69 69 302.56 69.99 59.87 175.54 135.00 15.00 \$ 2,522.33 \$ 1,767.67 MARCH မာ 919.12 34.50 59.92 336.37 312.16 95.00 81.17 FEB 49 32.49 228.63 187.64 59.82 822.75 135.00 98.00 81.17 JAN. 552.82 \$ 296.66 32.17 59.82 58.00 81.17 25.00 DEC 69 30.69 59.84 196.42 81.17 513.21 \$ 2,190.64 222.92 155.00 \$ 1,432.65 11.95 NOV. 69 w 56.86 81.17 343.11 32.07 OCT. s G 41.57 29.25 97.07 \$ 319.23 215.84 19.10 \$ 857.06 SEPT DEBIT 0 69 31.93 81.17 \$ 1,151.63 \$ 535.32 335.25 58.70 28.27 AUG. 84.14 308.51 28.08 80.96 279.31 370.63 4 69 NEW/OTHER CLUB DONATIONS
AWARDS DINNER OFFICE DEPOT/ SUPPLIES RETURNED CHECK (BAD) WELLS FARGO/BOND INS. NEW CHECKS ORDERED HALL DEPOSITS RETURN POST MASTER (STAMPS)
MAIL BOX RENTAL COPIER INS. & SERVICE CATA. AWARD/MERCH. CHOATES FIRE PROT CATALOG CLUB SUP. TOTALS PAYEE HEALTH DEPT LIC. 7/01/14-6/30/2015 LG & E (STREET) BANK CHARGES CLUB T-SHIRTS PROPERTY TAX CLUB BADGES DISH (CABLE) AXES FILED TELEPHONE INSURANCE CLUB PINS GARBAGE NC. FEES WATER

	-	2	214.50 \$ 407.00	\$ 1.456.28	01100		\$ 128.76		40.7887.04		10000	30.00				
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