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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2011

OMB No 1545-1150

Open to Public

Department of the Treasury Internal Revenue Service Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross heceipts less than \$200,000 and total assets less than \$500,000.

at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2011 calendar year, or tax year beginning , 2011, and ending December 31 11 January 1 C Name of organization B Check if applicable D Employer identification number Clark County Skills Center Foundation 91-1530644 Address change Room/suite Name change Number and street (or P O box, if mail is not delivered to street address) F Telephone number Initial return 360-604-1050 12200 NE 28 Street Terminated City or town, state or country, and ZIP + 4 F Group Exemption Amended return Vancouver, WA 98682-7858 Number ▶ Application pending G Accounting Method Other (specify) ▶ H Check ▶ ☐ If the organization is not Website: ▶ ccskillscenter.com (Foundation tab) required to attach Schedule B J Tax-exempt status (check only one) — ✓ 501(c)(3) ☐ 501(c) (527 (Form 990, 990-EZ, or 990-PF).) ◀ (insert no) ☐ 4947(a)(1) or if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions) But if the organization chooses to file a return, be sure to file a complete return L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 113,138.98 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.) Part I Check if the organization used Schedule O to respond to any question in this Part I. $\overline{\mathbf{Z}}$ 76,302.76 Contributions, gifts, grants, and similar amounts received 32,983.52 2 2 Program service revenue including government fees and contracts 0 3 Membership dues and assessments 3 4 Investment income . . 4 3852.70 5a Gross amount from sale of assets other than inventory 5a 0 0 Less: cost or other basis and sales expenses 0 Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Revenue 6a 0 Gross income from fundraising events (not including \$ from fundraising events reported on line 1) (attach Schedule G sum of such gross income and contributions exceeds \$15,0000 6b JUN 622 0 Less: direct expenses from gaming and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and 6d 0 0 Gross sales of inventory, less returns and allowances . 7a O Less: cost of goods sold 0 Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c C 0 8 8 Other revenue (describe in Schedule O) . . . 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 113,138.98 10 29.286.81 10 Grants and similar amounts paid (list in Schedule O) 11 Benefits paid to or for members 11 12 0 12 Salaries, other compensation, and employee benefits 1,600.00 13 13 Professional fees and other payments to independent contractors. 14 14 15 Printing, publications, postage, and shipping 15 100.00 16 Other expenses (describe in Schedule O) 16 41,071.62 17 17 72,058.43 Total expenses. Add lines 10 through 16. 18 18 41,080.55 **Net Assets** Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 end-of-year figure reported on prior year's return) 19 239,522.61 20 Other changes in net assets or fund balances (explain in Schedule O) 20 0 Net assets or fund balances at end of year. Combine lines 18 through 20 280,603.16

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form 990-EZ (2011)

99-12 13

Pai	t II Balance Sheets. (see the instructions	for Part II.)			_	
	Check if the organization used Schedule	e O to respond to a	ny question in this	Part II		🗆
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		[239,522.61	22	280,603.16
23	Land and buildings			100,675.39	23	100,675.39
24	Other assets (describe in Schedule O)		[24	
25	Total assets			340,198.00	25	381,278.55
26	-		<i>.</i> .	100,675.39	26	100,675.39
27	Net assets or fund balances (line 27 of column	n (B) must agree with	n line 21)	239,522.61	+	280,603.16
Par	Statement of Program Service Accom	plishments (see th	e instructions for		!	
	Check if the organization used Schedule	•		•	/Dag	Expenses aured for section
What	is the organization's primary exempt purpose?	Raise & manage car	oital resources to su	pport the Skills		(c)(3) and 501(c)(4)
Door	ribe the organization's program service accompl	CENTERS	MISSION		orga	anizations and section
as m	easured by expenses. In a clear and concise n	nanner, describe the	e services provide	d, the number of		7(a)(1) trusts, optional others)
perso	ons benefited, and other relevant information for e	ach program title.				,
28	Student Support: Scholarships \$6,547.86 (125 stude	ents); Skills Competiti	ons, awards & prize	s, training		
	workshops \$14,251.28 (352 students); Food for need	dy students \$4,125.74	(146 students); Oth	er help to		
	needy students \$116.50 (4 students)					
	(Grants \$ 25,041.18) If this amount			▶ 🗌	28a	25,041 18
29	Grant Expense: Grant received for Challenge Cours	e update \$1,253.78 (s	pent from previous	grant), all		
	students benefit (1,000 students); Grant received fo	r restaurant event \$1,	855.27 (65 students	worked at event);		
	\$346.78 donated by Board members to pay for Boar	d dinner (10 Board m	embers benefitted)		l	
	(Grants \$ 3,455.83) If this amount	includes foreign gra	ints, check here .	▶ 🗆	29a	3,455.83
30	Teacher Training: \$789.80 JAG Training for teacher					
	(1 staff member)					
					ļ	
	(Grants \$ 789.80) If this amount	includes foreign ara	ants, check here .	▶ □	30a	789.80
31	Other program services (describe in Schedule O)					
•		includes foreign gra			31a	,
32	Total program service expenses (add lines 28a	through 31a)		· · · · •	32	
Par						<u> </u>
	Check if the organization used Schedule					
	one on game and a conceasion	·	(c) Reportable	(d) Health benefits,	$\neg \Gamma$	
	(a) Name and address	(b) Title and average hours per week	compensation	contributions to employ		
	()	devoted to position	(Forms W-2/1099-MISC (if not paid, enter -0-			other compensation
Addi	ess for all: 12200 NE 28th Street	 	, , ,	'	+	
	Vancouver, WA 98682					
Case	y Wyckoff - Chair				+	
	y wyckon - Chan	Chair, 2 hr.		o		
Shar	f Burdzik - Treasurer			<u> </u>	+	•
Silai	ii buluzik - 17easulei	Treasurer, 2 hr.				
<u></u>	Elekus Constant			0	-	
Greg	Flakus - Secretary	Secretary, 2 hr.				
	anna Viar Obain	 		0		
JIII 2	asser - Vice Chair	Vice Chair, 2 hr.				
				0	-	
	tors:	Director, 2 hr.				
	Blanchard		-	0		
	ly Burns	Director, 2 hr.				
	h Davis			0		. <u> </u>
	nis Kampe	Director, 2 hr.				
	C. Kramer		ļ	0	_ _	
	Mannello	Director, 2 hr.				
Tim	Probst			0		
Peg	y Sheehan	Director, 2 hr.				
				0		
					T	
						_
		-]			1	

Part	· · · · · · · · · · · · · · · · · · ·			
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	s Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	Yes	No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		./
35 _a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		√
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		√
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			!
b 38a	Did the organization file Form 1120-POL for this year?	37b 38a		- <u>-</u>
b 39	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b Section 501(c)(7) organizations. Enter:	30a		V
а	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶]. *		
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit		<u> </u>	
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	401		,
С	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on	40b	,	✓
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		√
41	List the states with which a copy of this return is filed. ▶ Washington			
42a	The organization's books are in care of ▶ Barbara Ainslie, Foundation Secretary Telephone no. ▶ 360			2169
L	Located at ► 12200 NE 28 Street, Vancouver, WA ZIP + 4 ►	98682		N
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	NO ✓
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	_	✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. 1	▶ □
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44a 45a		1
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of	-+Jd		
	Form 990-EZ (see instructions)	45b		/

Barbara Ainslie, Foundation Secretary Type or print name and title Preparer's signature PTIN Print/Type preparer's name Check I If self-employed Preparer Firm's EIN ▶ Firm's name Use Only Firm's address ▶ May the IRS discuss this return with the preparer shown above? See instructions

unse

Signature of officer

Sign

Here

Paid

SCHEDULE A (Form 990-or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Clark County Skills Center Foundation

Employer identification number

Clark	County Skills Cen	ter Foundation							91-153	30644
Par	t I Reason f	or Public Cha	rity Status (All orga	nizations	s must c	omplete	this par	t.) See ii	nstructio	ns.
The c 1 2 3 4	A church, con A school desc A hospital or a A medical rese	vention of churc ribed in section a cooperative ho	ation because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza on operated in conjunc e:	churches ch Schede ation desc	s describe ule E.) cribed in s	ed in sec section 1	tion 170(70(b)(1)((b)(1)(A)(i) (A)(iii).		iii). Enter the
5		on operated for a)(1)(A)(iv). (Com	the benefit of a collect plete Part II.)	ge or uni	versity ov	wned or	operated	by a go	vernment	al unit described in
6 7	☐ An organization	on that normally	nment or governmenta receives a substantia ((A)(vi). (Complete Par	I part of					it or from	the general public
8	A community	trust described i	n section 170(b)(1)(A)	(vi). (Cor	nplete Pa	ırt II.)				
9	An organization receipts from support from	on that normally activities related gross investme	receives: (1) more that d to its exempt funct ent income and unrel lifter June 30, 1975 Se	an 33¹/₃% ions−sul lated bus	of its subject to desiness tax	ipport fro certain ex xable inc	ceptions ome (les	s, and (2) ss section	no more	than 331/3% of its
10	☐ An organization	on organized and	I operated exclusively	to test fo	r public s	safety Se	e sectio	n 509(a)(4).	
11	purposes of c 509(a)(3). Che	one or more pub eck the box that	nd operated exclusive blicly supported organ describes the type of	nizations supportin	described ng organiz	d in secti zation and	on 509(a d comple	a)(1) or se	ection 509 1e throug	9(a)(2) See section th 11h.
е		his box, I certify indation manage	Type II c that the organization ers and other than one	is not co		irectly or	indirectly		or more o	
f	_	ation received a	a written determination	on from 1	the IRS t	hat it is	а Туре 	I, Type I 	I, or Typ 	e III supporting
g	Since August following pers		he organization accep	oted any	gift or co	ontributio	n from a	ny of the		
			ndirectly controls, eithody of the supported of						d in (ii) ar 	Yes No
	(ii) A famıly m	ember of a pers	on described in (i) abo	ve?						11g(ii)
h			a person described in ion about the supporte							11g(iii)
<u>h</u>			1	· •						
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	in col (i) lis governing	organization sted in your document?	the organ	ou notify nization in of your port?	organizat	s the non in col zed in the S?	(vii) Amount of support
				Yes	No	Yes	No	Yes	No	
(A)										
(B)										
(C)										
(D)										
(E)										
Tota	1									

Part	II · Support Schedule for Organiza	itions Descr	ibed in Sect	ions 170(b)(1	I)(A)(iv) and 1	170(b)(1)(A)(v	(i)
•	(Complete only if you checked th				_	•	alify under
04	Part III. If the organization fails to	quality unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support	() 0007	4) 0000	4) 2000	(n 0010		1 10 = 1 1
_	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						<u> </u>
	on B. Total Support		To	·	·		
Calen 7	dar year (or fiscal year beginning in) ► Amounts from line 4	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	1					
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.				•	12	
13	First five years. If the Form 990 is for the organization, check this box and stop he	re			n, or fifth tax y		on 501(c)(3) . ► □
	on C. Computation of Public Suppor			4 1 (0)			
14 15 16a	Public support percentage for 2011 (line 6 Public support percentage from 2010 Sch 331/3% support test—2011. If the organization	nedule A, Part zation did not	II, line 14 . check the box	on line 13, an	 d line 14 ıs 33¹	14 15 73% or more, o	% % check this
	box and stop here. The organization qua	· ·		-			. ▶ 🛚
b	33½% support test—2010. If the organ check this box and stop here. The organ					9 15 is 33½% 	or more, ► □
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "forganization	ets the "facts-	and-circumsta	inces" test, ch	eck this box a	nd stop here.	Explain ın
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization management organization in supported organization	tion meets the neets the "fact	e "facts-and-c	ircumstances"	test, check the	his box and <mark>s</mark>	a, and line top here. a publicly
18	Private foundation. If the organization di			, 16a, 16b, 17	a, or 17b, chec	ck this box and	► ∐ I see

Part III · Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support			т, ртошов во	р.с.с., с		
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants ")	128,840.16	95,722.24	85,909.69	76,537.51	76,302.76	463,312.36
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	37,760.92	51,731.34	25,228.32	35,374.39	32,983.52	183,078.49
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	166,601.08	147,453.58	111,138.01	111,911.90	109,286.28	646,390.85
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b			,	^ *		
	line 6)				* 		646,390.85
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	166,601.08	147,453.58	111,138.01	111,911.90	109,286.28	646,390.85
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	5,533.93	(64,310.98)	13,038.06	16,606.34	3,852.70	(25,279.95)
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		:		141.84		141.84
13	Total support. (Add lines 9, 10c, 11, and 12.)	172,135.01	83,142.60	124,176.07	128,660.08	113,138.98	621,252.74
14							
Secti	on C. Computation of Public Suppor	t Percentage	•				=
15	Public support percentage for 2011 (line 8			3, column (f))		15	104.05 %
16	Public support percentage from 2010 Sch	nedule A, Part I	II, line 15 .			16	99.8 %
Secti	on D. Computation of Investment Inc	come Percer	ntage			•	
17	Investment income percentage for 2011 (ine 10c, colum	n (f) divided b	y line 13, colur	nn (f))	17	(4.07) %
18	Investment income percentage from 2010					18	.1 %
19a							
b	17 is not more than 331/3%, check this box 331/3% support tests—2010. If the organiz	ation did not ch	neck a box on	line 14 or line 1	9a, and line 16	is more than 3	31/3%, and
	line 18 is not more than 331/2%, check this b						
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions						

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	Page 4
None		
	•••••••••••••••••••••••••••••••••••••••	
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••••		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Name of the organization Employer identification number Clark County Skills Center Foundation 91-1530644 (See Attached)

|Part 1 - Line 10 - Grants and Similar Amts Paid

\$ 6,547.86	Student Scholarships
\$ 14,251.28	Skills competitions, awards, prizes, training workshops
\$ 4,125.74	Food gift cards for needy students
\$ 116.30	Other help to needy students
\$ 1,253.78	Grant funds spent on Challenge Course
\$ 1,855.27	Grant funds spent for food event
\$ 346.78	Grant funds spent for Board dinner
\$ 789.80	Training course for instructor
\$ 29,286.81	Total Line 10

Part I - Line 16 - Other Expenses - SCHEDULE O

I ditt Eine it	Tart 1- Line 10 - Other Expenses - OUTEDOLL O				
Expenses other	er than program supplies (see t				
Amount	Payee	Description			
I .	Washington Restaurant Assn.	Dues for non-profit			
	Cascade Awards, Inc.	GAC Chairperson plaque			
1 '	Jan Strickland	Food for GAC retreat			
	Kari Duffy	Reimbursement for WAVA Conference			
1 '	ESD 105	CTE Alignment Construction Tech			
	Affordable Tree Service	Tree Trimming on campus			
	Jill Neyenhouse	JAG expenses			
	Kari Duffy	Reimbursement for WAVA Conference			
	Cascade Awards, Inc.	Acrylic star awards for legislators			
\$ 2,371.63	Special Events - Other Exp.				
					
	Lynette Bato	Food for mock interviews			
1 '	Linda Bamard	Fall Health Sciences Conference			
	Marilyn Smith	Fall Health Sciences Conference			
\$ 135.73	Applied Med Sci - other	_			
\$ 192.00		Student testing fees			
	Dale Vandeberg	Advisory meeting dinner exp.			
	Clark County Skills Center	Expenses to repair car, later sold			
	Dale Vandeberg	Gift card for employee service			
	Dale Vandeberg	_Advisory meeting dinner exp.			
\$ 921.52	Auto Tech - other	_			
		_			
	Bill Draper	Donuts/food for students			
	Designs of All Kinds	Program t-shirts for students			
	CSI Geosynthetics	Sales tax due on 2008 house			
	Bill Draper	Lunch for advisors			
	Lance Landis	Food for awards dinner			
\$ 1,337.68	Constr.Tech - other	_			

\$	380.00	City of Vancouver	Rent & deposit on facility for ceremony
\$		Cascade Awards, Inc.	Award for Advisory Member
\$		Criminal Justice - other	
Ť			
\$	495.55	Brown Industries, Inc.	Pins for end of year ceremony
\$	350.00	Tracee Godfrey	Food & supplies for pinning ceremony
\$	37.84	Tracee Godfrey	Programs for pinning ceremony
\$	496.00	Clark County Skills Center	Restaurant charges for student lunch
\$	1,379.39	Dental Program - other	
\$		Phil Baus	Food for skills competition
\$		Phil Baus	CERT training
\$		Phil Baus	Lunch for Employability Panel
\$		Phil Baus	Lunch for advisors
\$	188.01	Diesel Tech - other	
\$	101 50	As Good As it Gets Catering	Food for mock interviews
\$		Leslie Hinton	
\$		Clark County Skills Center	Supplies for end of year ceremony Keychains for students
\$		Legal/Med - other	Reychams for students
-	070.47	Legarrice - other	
\$	32.00	Clark County Skills Center	Lunch for guest speakers (4)
\$		Pre-Engineering - other	
			~~~~
\$	71.79	Robbin McColley	Reimb. To replace damaged student jackets
\$	296.00	NOCTI	Student Testing fees
\$		Amer.Culinary Federation	Student re-take tests
\$		Ingrain Inc.	ACF Certification classes for students
\$		Clark County Skills Center	Meal charges from 2009
\$		Comcast Cable	Monthly usage fee (for overhead system)
\$		Nicholas Ellison	Reimb. For embroidery on chef coat
\$		Clark County Skills Center	Student sweatshirts
\$	2,094.97	Restaurant - other	
\$	72 00	Clark County Skills Center	Etiquette training lunch
S S		Brown Industries, Inc.	Student pins for graduation
\$		(teachers)	Supplies for grad. Ceremony
\$		Travel & Hotel - other	- Cappillos for grad. Coloniony
	7.50		
\$	3,237.00	Infusionsoft Inc.	Database Software - \$249 per month (13 mos)
\$	680.48	Clark County Treasurer	Taxes due on lot
\$	17.96	Barbara Ainslie	Donuts to thank students
\$	28.32	Paypal & online donations	Service charge (bank)
\$		Dick Riley	Land appraisal report
\$	-	iQ Credit Union	Interest due on loan for lot
\$		Clark County Skills Center	(3) meals for tour guests
\$		Secretary of State	Filing fee for charities program
\$		Metasoft Systems Inc.	1 yr Grant Finding Software fee
\$	11,868.76	Unrestricted - Other	
\$	22,029.72	Misc. Expenses	Add to Program Supplies total for Line 16

		Drawn -	Supplies
	Amount	Program	
•		Payee	Description
\$		A.J.'s Custom Embroidery Barbara Ainslie	logo setup
\$		Jim Gakel	Emergency kit duffel bags supplies to repair tables
\$			• •
\$		Property Maintenance Enterprises	LCD Projector mounting, other
\$		Metasoft Systems, Inc. Margaret Rice	1-year Fee: Grant search software (partial)
\$		Special Events - Supplies	Mannequins for Fashion Merch.class
4	1,454.09	Special Events - Supplies	
e	1 107 00	Clark County Skills Center	Food for theme dinner
\$ \$		Clark County Skills Center	Food for theme dinner
\$		Theme Dinner - Supplies	
4	3,343.73	Theme Diliner - Supplies	
\$	1 351 13	Clark County Skills Center	Mannequins for CPR
\$		Lynette Bato	Supplies for pinning ceremony - AMS
\$		Marilyn Smith	Supplies for portfolio presentation - AMS
\$		Lynette Bato	Supplies for end of year ceremony/social
\$		Applied Med. Sci - Supplies	
	1,024.00	Applied Med. Gel - Capplies	
\$	121 73	Dale Vandeberg	Food for students and program supplies
\$		Kathy Phelan	Misc. program supplies
\$		Auto Tech - Supplies	
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			_
\$	724.83	Constr. Tech - Program supplies	Misc. items as needed for program
	4 000 50		7-
\$	1,309.59	Dental Assisting - Prog.supplies	Teeth whitening supplies, other supplies
\$	1 382 30	Diesel Tech - Program supplies	Supplies as needed for program
Ψ.	1,002.09	Dieser recht - r rogram supplies	Joupplies as needed for program
\$	1.062.33	Financial Serv Program supplies	Supplies as needed for program
			Teabhing as increas io. biodiam.
\$	3.382.00	R. Andrew McColley	Equipment: TV, Sound, Cameras, etc.
\$		R. Andrew McColley	Reimb. For new laptop for program
\$		(various)	Other supplies as needed for program
\$		Restaurant Mgmt - Prog. Supplies	7
			_
\$	430.21	Travel & Hotel - Program Supplies	Supplies as needed for program
\$		TMC (Total Merchant Concepts)	Online - credit card machine rental
\$		Barbara Ainslie (& other)	_Reimb. For mileage and supplies as needed
\$	274.30	Unrestricted Foundation Fund	
-	40.044.00	TOTAL CURRILIES	
\$	19,041.90	TOTAL SUPPLIES	
\$	41.071 R2	TOTAL OTHER - LINE 16 PART 1	
—▼	71,071.02	- TO THE TO PART I	