

United Independent School District AGENDA ACTION ITEM

TOPIC Approval of Requests from Judd Gilpin, Juan Roberto Ramirez and Javier Montemayor for Use							
of Board of Trustees Discretionary Funds for United High School for 21,150							
SUBMITTED BY: Judd Gilpin, Juan R. Ramirez and Javier Montemayor, Jr. OF: Board Members							
APPROVED FOR TRANSMITTAL TO SCHOOL BOARD:							
DATE ASSIGNED FOR BOARD CONSIDERATION: March 21, 2012							
RECOMMENDATION:							
It is recommended that the United ISD Board of Trustees approve requests from Judd Gilpin, Juan Roberto Ramirez and Javier Montemayor for Use of Board of Trustees Discretionary Funds for United High School for 21,150.							
RATIONALE:							
BUDGETARY INFORMATION							
BOARD POLICY REFERENCE AND COMPLIANCE:							



Exhibit A

United Independent School District Board of Trustees Discretionary Funds Request Form Fiscal Year 2011-2012

D	Marita	A Hick	S. L. val
Requesting Campus:	11		()
Campus Principal:	- A/kers	to Hhou	man Jr.
Board Member:	Min Con	pix	
Board Member:	Ma Ran	nerez	& Mc Montemay
Description of Request	::(e)ood	ex Di	splay Clases
School D	reffitters	- 5 (Pases @ \$1,109.99
=15,549	7.95		(\$1,849.98/EA.)
Estimated Cost of Requ	uest <u># 5,5</u>	749.95	}
Principal or Director S	Charles .	LC. Sy	Date 2.29-12
Associate Superintende	ent Approval:	Yes	No
Associate Superintende	ent Signature:	selo Jun	ige Date 3/2/12
Superintendent Approv	val:	Yes	No
Superintendent Signati	ure:		Date
Board Member Approv	val:	Yes	No
Board Member Signati	ure:	,	Date
Board Member Approv	val:	Yes	No
Board Member Signatu	ure:		Date
Board Approval:	Yes No	_ Date A	Approved:
Please return the comp	oleted form to the Sup	erintendent's C	Office for final processing.



Exhibit A

United Independent School District Board of Trustees Discretionary Funds Request Form Fiscal Year 2011-2012

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Requesting Campus:	United	Hisl	School	/	
Campus Principal:	Alber	to Ale	man)	R	
Board Member:	ma G	relpin	/		
Board Member:	Mr. T	enures	x 7 Mes	Norteman	yer
Description of Request			人 ′		
25-3 pie	ee Grece ies (Mi	Trace	(Paladix	.) \$ 374.9 ea.(9,3	79 374.75) 1 ~ 25-80
1 - 1	2		eons att	ached) o	5 925.
WITH	accessar	The same of the sa			
Estimated Cost of Requ	aest	5,599.	75	(#5,199.	92 /EA.)
Principal or Director S	ignature:	of C Sy	2-/ Date 2	1-29-12	
Accociata Superintanda	ent Approval	Yes	<i>N</i> o		
Associate Superintende	AL Approvat		migr Date 3	12/12	
Associate Superintende	nt Signature:	The state of the s	Date 7	712	
Superintendent Approv	val:	Yes	No		
Superintendent Signatu	ore:		Date		
Board Member Approv	/al:	Yes	No		
Board Member Signatu	ıre:		Date		
Board Member Approv	val:	Yes	No		
Board Member Signatu	ire:		Date	-	
Board Approval:	Yes No	Date A	Approved:		

Please return the completed form to the Superintendent's Office for final processing.