



UNITED INDEPENDENT SCHOOL DISTRICT AGENDA ACTION ITEM

TOPIC: Approval of Requests from Board Members in re: Use of Board Trustees Discretionary Funds for Various Projects/Campuses

SUBMITTED BY: Juan Roberto Ramirez **OF:** Board President

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: _____

DATE ASSIGNED FOR BOARD CONSIDERATION: May 16, 2018

RECOMMENDATION: It is recommended that the United ISD Board of Trustees approve Requests from Board Members in re: Use of Board of Trustees Discretionary Funds Various Projects/Campuses.

RATIONALE:

BUDGETARY INFORMATION:

POLICY REFERENCE & COMPLIANCE:



United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2017-2018

Requesting Campus: Board Member District 3

Campus Principal:

Board Member: Aliza Flores-Oliveros

Board Member:

Description of Request: For Teacher Appreciation Week Incentives for Teachers at the following

Campuses: Cuellar Elementary, Newman Elementary, Gutierrez Elementary, Col. Santos Benavides Elem., Clark Middle School, United Middle School, and Alexander High School

Estimated Cost of Request: \$336.00 (\$48/ea)

Principal or Director Signature: Aliza Flores-Oliveros Date: 5/01/18

ASSOCIATE SUPERINTENDENT APPROVAL: Yes No

Signature: Date:

SUPERINTENDENT APPROVAL: Yes No

Signature: Date:

BOARD MEMBER APPROVAL: Yes No

Signature: Ms. Aliza Flores-Oliveros Date: 5-1-18

BOARD MEMBER APPROVAL: Yes No

Signature: Date:

BOARD APPROVAL DATE:

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



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2017-2018

Requesting Campus: UNITED MIDDLE SCHOOL

Campus Principal: REBECCA MORALES-COSS

Board Member: ALICIA FLORES OLIVEROS

Board Member:

Board Member:

Description of Request: INSTALLATION OF CAMERAS FOR FRONT AND SIDE SCHOOL PARKING LOT

Estimated Cost of Request: \$5312.00

Principal or Director Signature: [Handwritten Signature] Date: 4/24/18

ASSOCIATE SUPERINTENDENT APPROVAL: Yes No

Signature: Date:

SUPERINTENDENT APPROVAL: Yes No

Signature: Date:

BOARD MEMBER APPROVAL: Yes No

Signature: [Handwritten Signature] Date: 5-2-18

BOARD MEMBER APPROVAL: Yes No

Signature: Date:

BOARD MEMBER APPROVAL: Yes No

Signature: Date:

BOARD APPROVAL DATE:

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



United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2017-2018

Requesting Campus: Administration

Campus Principal: Gloria S. Rendon

Board Member: Ramiro Veliz, III

Board Member:

Description of Request: 2018 Graduation Ceremony Digital Backdrop with LED Panels

Estimated Cost of Request: \$511.00

Principal or Director Signature: [Handwritten Signature]

Date:

ASSOCIATE SUPERINTENDENT APPROVAL: Yes No

Signature:

Date:

SUPERINTENDENT APPROVAL: Yes No

Signature:

Date:

BOARD MEMBER APPROVAL: Yes [checked] No

Signature: [Handwritten Signature]

Date: 5-3-18

BOARD MEMBER APPROVAL: Yes No

Signature:

Date:

BOARD APPROVAL DATE:

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



United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2017-2018

Requesting Campus: Administration

Campus Principal: Gloria S. Rendon

Board Member: Aliza Flores-Oliveros

Board Member:

Description of Request: 2018 Graduation Ceremony Digital Backdrop with LED Panels

Estimated Cost of Request: \$2,500.00

Principal or Director Signature: [Signature] Date: 5/4/18

ASSOCIATE SUPERINTENDENT APPROVAL: Yes No

Signature: Date:

SUPERINTENDENT APPROVAL: Yes No

Signature: Date:

BOARD MEMBER APPROVAL: Yes No

Signature: Priscilla Rodriguez for Ms. Aliza Flores-Oliveros Date: 5-3-18

BOARD MEMBER APPROVAL: Yes No

Signature: Date:

BOARD APPROVAL DATE:

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



United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2017-2018

Requesting Campus: Administration

Campus Principal: Gloria S. Rendon

Board Member: Juan Roberto Ramirez

Board Member:

Description of Request: 2018 Graduation Ceremony Digital Backdrop with LED Panels

Estimated Cost of Request: \$2,500.00

Principal or Director Signature: Genia S. Rendon Date: 5/4/18

ASSOCIATE SUPERINTENDENT APPROVAL: Yes No

Signature: Date:

SUPERINTENDENT APPROVAL: Yes No

Signature: Date:

BOARD MEMBER APPROVAL: Yes No

Signature: Priscilla Rodriguez for Juan R. Ramirez Date: 5-3-18

BOARD MEMBER APPROVAL: Yes No

Signature: Date:

BOARD APPROVAL DATE:

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



United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2017-2018

Requesting Campus: Administration

Campus Principal: Gloria S. Rendon

Board Member: Javier Montemayor

Board Member:

Description of Request: 2018 Graduation Ceremony Digital Backdrop with LED Panels

Estimated Cost of Request: \$2,500.00

Principal or Director Signature: [Handwritten Signature] Date: 5/4/18

ASSOCIATE SUPERINTENDENT APPROVAL: Yes No
Signature: Date:

SUPERINTENDENT APPROVAL: Yes No
Signature: Date:

BOARD MEMBER APPROVAL: Yes [checked] No
Signature: [Handwritten Signature] Date: 5-3-18

BOARD MEMBER APPROVAL: Yes No
Signature: Date:

BOARD APPROVAL DATE:

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



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2017-2018**

Requesting Campus: Trautmann Middle School

Campus Principal: Leti Menchaca

Board Member: Javier Montemayor

Board Member: _____

Description of Request: PRINTER, TONER AND COLORED PAPER FOR BAND

Estimated Cost of Request \$ 999.69

Principal or Director Signature: *Leti Menchaca* Date 5/3/18

Associate Superintendent Approval: Yes ___ No ___

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes ___ No ___

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No ___

Board Member Signature: *Briselda Rodriguez for Mr. Javier Montemayor* Date 5-4-18

Board Member Approval: Yes ___ No ___

Board Member Signature: _____ Date _____

Board Approval: Yes ___ No ___ Date Approved: _____

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



UNITED INDEPENDENT SCHOOL DISTRICT

PURCHASE REQUISITION

Page 1 to 1

VENDOR NAME AND ADDRESS

NETSYNC

2500 W Loop South Suite 110
Houston, TX 77027

Phone 713-877-5186
Campus TMS Rm #
Date May 3, 2018

Fund/YR	Func	Org	Prog. Code	Local Option	Proj. Num	Obj.	Sub Object	Amount

Approval Code: _____ Discount: _____

Qty	Item	Description	Unit Price Per	Discounted Price Per	Extension Unit Total
1	62447601	MC363DN PRINTER	\$405.73	\$405.73	\$405.73
2	46508704	BLACK TONER	\$52.80	\$52.80	\$105.60
1.	46508701	YELLOW TONER	\$82.86	\$82.86	\$82.86
1	46508703	CYAN TONER	\$82.86	\$82.86	\$82.86
1	46508702	MAGENTA TONER	\$82.86	\$82.86	\$82.86
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00

Disposition: Check _____ Mail _____ PickUp _____ Fax EMAIL: ctorres@netsyncnetwork.com Page Total \$759.91

Remarks _____ Grand Total \$759.91

ORIGINATOR
JORGE GARCIA
 Originator *Jorge Garcia* Date 5/3/18
 Administrator Signature _____ Date _____

Budget Coordinator _____ Date _____
 Other _____ Date _____



UNITED INDEPENDENT SCHOOL DISTRICT

PURCHASE REQUISITION

Page 1 to 1

VENDOR NAME AND ADDRESS

PATRIA

302 E. HILLSIDE

LAREDO TX

Phone 723-2332

Campus TMS Rm #

Date May 3, 2018

Fund/YR	Func	Org	Prog. Code	Local Option	Proj. Num	Obj.	Sub Object	Amount

Budget Code

Account Code

Approval Code: _____ Discount: _____

Qty	Item	Description	Unit Price Per	Discounted Price Per	Extension Unit Total
5	CASMP2201CY	CANARY PAPER	\$5.66	\$5.66	\$28.30
5	CASMP2201BE	BLUE PAPER	\$5.66	\$5.66	\$28.30
5	CASMP2201GN	GREEN PAPER	\$5.66	\$5.66	\$28.30
5	CASMP2201SN	SALMON PAPER	\$5.66	\$5.66	\$28.30
5	CASMP2201LV	LAVENDER PAPER	\$5.66	\$5.66	\$28.30
5	CASMP2201PKN	PUMPKIN PAPER	\$5.66	\$5.66	\$28.30
5	CASMP2201GS	LIME GREEN PAPER	\$5.66	\$5.66	\$28.30
5	CASMP2201GRP	GOLD PAPER	\$5.66	\$5.66	\$28.30
1	WAU20270	ASST NEON PAPER	\$13.38	\$13.38	\$13.38
				\$0.00	\$0.00
				\$0.00	\$0.00
				\$0.00	\$0.00

Disposition: Check _____ Mail _____ Pickup _____ Fax 724-8081 Page Total **\$239.78**

Remarks _____ Grand Total **\$239.78**

ORIGINATOR
JORGE GARCIA
 Originator *Jorge Garcia* Date 5/3/18
 Administrator Signature _____ Date _____

Budget Coordinator _____ Date _____
 Other _____ Date _____