



Requesting Campus: John B. Alexander High School	
Campus Principal: Ernesto Sandoval, Jr.	
Originator's Email: esandoval@uisd.net	1
Board Member: Ms. Aliza Flores Oliveros	
Board Member: Mr. Javier Montemayor Jr.	
Board Member:	
Description of Request: Alexander High School Cafeteria Audio analog to wireless	Visual equipment upgrade from
Estimated Cost of Request: \$8,000.00 (4,000 per board member)	
Principal or Director Signature:	Date: August 20, 2024
ASSOCIATE SUPERINTENDENT APPROVAL: Yes	No
Signature:	Date:
SUPERINTENDENT APPROVAL: Yes	No
Signature:	Date:
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date: 9/3/24
BOARD MEMBER APPROVAL: Yes	
Signature:	Date:
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date:
BOARD APPROVAL DATE:	
Please return the completed form to the Superinten	dent's Office for final processing.



	Exhibit A	
_	30 3 3 A	
	Q 3	

Requesting Campus: United South Middle School			22
Campus Principal/Director: Carlos Valdez			
Originators Email: <u>grirodriguez@uisd.net</u>			
Board Member: Ricardo "Rick" Rodriguez			
Board Member: Ramiro Veliz, III			
Board Member:			
Description of Request: For purchase of student a	thletics uniforn	18.	
		Table 1	
Estimated Cost of Request: \$12,431.80 (\$6,215.90)	(each)		
Principal or Director Signature:			Date: 8/29/24
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
UPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	08/29/24
OARD MEMBER APPROVAL:	Yes V		No
		Date:	1
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	-	No
Signature:		Date:	



QUOTE # D6137354-00

DATE: 2024-07-18

We are pleased to submit this quotation for your consideration. Should you place an order please reference the quote number below.

ACCOUNT: 138702

BILL TO: UNITED ISD 201 LINDENWOOD DR LAREDO TX 78045-2499 US

ATTN: Albert Garza SHIP TO: United South Middle School Football

5208 SANTA CLAUDIA LANE USMS FB GARZA Laredo TX 78043

US

QUOTE	No	WAREHOUSE	DATE	PURCHASE ORDER					
D6137354	- 00	OD	2024-07-18						
Style Code	LINE	ITEM	DESCRIPTION	ORDERED	WAREHOUSE	PRICE	UOM	TOTAL PRICE	
	1	CADID-V01-00	AD00878M WH WVN A1 JERSEY	48	MF	123.30	EA	5,918.40	
	2	CADID-V02-00	AD00878M BLK WVN A1 JERSEY	48	MF	123.30	EA	5,918.40	
Prepared By:	iuliea					Merchandis	se Total	11,836.80	
110000000	,						Tax	0.00	
			ounted prices for payment by		S	hipping & H	landling	595.00	
			s not include freight charges at to change based on vendor				Total	12,431.80	
			THIS IS NOT A BILL. DO NOT PA'	Y FROM THIS D	OCUMENT.				

\$ 6,215.90

Exhibit A



United Independent School District Board of Trustees Discretionary Funds Fiscal Year 2024-2025

Requesting Campus:	Federal and	State Progr	ams		
Campus Principal/Director:	Adriana P.	Ramirez, Ex	ecutiv	e Director	•
Originators Email:	ramireza@ı	uisd.net			
Board Member:	Francisco "	Frank" Cas	tillo		
Board Member:					
Board Member:					
Description of Request: Funds	are to be used	to increase	Famil	y and Cor	nmunity Engagement
opportunities suc	ch as the Parer	nt Learning	Summ	it, UCOP	, and other related
events/activities.					
Estimated Cost of Request: \$1,	200.00				
Principal or Director Signature:	11	Home		Date:	9/3/24
ASSOCIATE SUPERINTENDEN	T APPROVAL:	Yes	_	No	
Signature:			Date:		
SUPERINTENDENT APPROVA	L:	Yes	-	No	
Signature:			Date:		
BOARD MEMBER APPROVAL:		Yes V	_	No	
Signature:			Date:		
BOARD MEMBER APPROVAL:		Yes	_	No	
Signature:			Date:		
BOARD MEMBER APPROVAL:	:	Yes	_	No	
Signature:	The state of the s		Date:		
	ADD ADDDOVAL				





Requesting Campus: John B. Alexander High School	
Campus Principal: Ernesto Sandoval, Jr.	
Originator's Email: esandoval@uisd.net	
Board Member: Ms. Aliza Flores Oliveros	
Board Member:	
Board Member:	
Description of Request: Alexander High School Band Consultant	s
Estimated Cost of Request: \$6,000.00	
Principal or Director Signature:	Date: August 20, 2024
ASSOCIATE SUPERINTENDENT APPROVAL: Yes	No
Signature:	Date:
SUPERINTENDENT APPROVAL: Yes	No
Signature:	Date:
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date:
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.

Exhibit A



United Independent School District Board of Trustees Discretionary Funds Fiscal Year 2024-2025

Requesting Campus:	Federal and	State Prog	rams		
Campus Principal/Director:	Adriana P.	Ramirez, E	xecutiv	e Director	
Originators Email:	ramireza@ı	uisd.net			
Board Member:	Aliza Flores	Oliveros			
Board Member:					
Board Member:					
	ich as the Parer				nmunity Engagement
events/activities.	•				
Estimated Cost of Request: \$1 Principal or Director Signature:	11	Kami	7	Date:	9/3/24
ASSOCIATE SUPERINTENDE	NT APPROVAL:	Yes	_	No	
Signature:			Date:		
SUPERINTENDENT APPROVA	AL:	Yes		No	
Signature:			Date:		
BOARD MEMBER APPROVAL	u:	Yes 10b		No	
Signature:			Date:		
BOARD MEMBER APPROVAL	u:	Yes		No	
Signature:			Date:		
BOARD MEMBER APPROVAL	L:	Yes		No	
Signature:			Date:		-
В	OARD APPROVAI	L DATE:			



Exh	ibit	A	
N			
01			
%			

	School		
Campus Principal/Director: Monica Zepeda			
Originators Email: monzep@uisd.net			
Board Member: Ramiro Veliz			
Board Member:			
Board Member:			
Description of Request: Classroom printers a	and toners		
Estimated Cost of Request: \$3,500 Principal or Director Signature:	i Depede	Date: 9-5-	-2024
ASSOCIATE SUPERINTENDENT APPROVA	L: Yes	No	
Signature:		Date:	<u> </u>
SUPERINTENDENT APPROVAL:	Yes	No	
SUPERINTENDENT APPROVAL: Signature:		Date:	<u> </u>
Signature:		Date:	
Signature:	Yes/		
Signature: BOARD MEMBER APPROVAL: Signature:	Yes/	Date:	
Signature: BOARD MEMBER APPROVAL: Signature:	YesYes	Date:	12025
BOARD MEMBER APPROVAL: Signature: BOARD MEMBER APPROVAL:	YesYes	Date:	12025



UNITED INDEPENDENT SCHOOL DISTRICT

	NAME OF THE PARTY	TRUCT								1	PURCHASE REC	IUISITION	Pg.	1 of 1	
	THE CHILDREN FI	RST											VENDOR NA	ME AND ADDR	ESS
1	A TEA Rat	ing 2018 2019										Advanta	ge Imaging S	unnly	
(2022		Pro	\a	Local	D	oi.		Sub		Advanta	ge imaging a	uppiy	
	Fund/YR	Func	Org	Cod				ım Ot	bj. (Amount				
									1			32242 Pase	o Adelanto, Ste 0		
					_			+	1			San Juan C	apistrano, CA 92	675-3610	
_			Destroy	0 - 1 -							10-1-	Phone	800-805-7720	D #	
D	urchasing Cont	ract Anni	Budget		1						scount:	Campus Date	September 5, 2	2024	
		ract Appr	Oval CO	ide.					_	D 1.		_			
_	Commodity Code	H	tem #						1	De	scription		Unit Price Per	Discounted Price Per	Extension Unit Total
		29	S0100	31	Lexn	nark N	VIS4	131DW	V Las	ser Pri	nter		\$235.00	\$235.00	\$1,880.00
		551	B1H0E		Lexn	nark E	Blad	ck ton	er ca	artridg	е		\$179.00	\$179.00	\$1,611.00
	7.1			н									\$0.00	\$0.00	\$0.00
			700									=	\$0.00	\$0.00	\$0.00
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	Disposition:	Check		Mail		_ Picl	kUp		F	ax				Page Total:	\$3,491.00
	Remarks:									_				Grand Total:	\$3,491.00
ć	Zepeda ir		(PRIN	T\				9	9/5/ Dat		Down Provided in the Control of the	dget Coordinator	-	Date	
10	A 0 1 4	0	de					01	Jat I	121	Buc	ager Cooldinator		Date	
	TY WWW '	April	The	-				-(10	124	Oth	ner .		Date	

Purchasing Dept. 2022



Quotation

Number: JR-16745

Date: 08/20/2024

32242 Paseo Adelanto, Ste. C. San Juan Capistrano, CA 92675-3610 Phone: 800-805-7720 Fax: 949-388-6304

Bill To:

Accounts Payable Department United ISD 201 Lindenwood Drive Laredo, TX 78045 Phone: (956)473-3300

Ship To: Cindy Hernandez Ruiz Elementary School 1717 Los Presidentes Ave Laredo, TX 78046

Fax: (956)473-3399 Email: chernandez1@uisd.net

Srl	Part Number	Description	Unit Price	Qty.	Price
1	2980100	Lexmark MS431DW Laser Printer - Monochrome - 42 ppm Mono - 2400 dpi Print - Automatic Duplex Print - 100 Sheets Input - Wireless LAN - TAA Compliance	\$ 235.00	8	\$ 1,880.00
2	55B1H0E	Lexmark Unison Original High Yield Laser Toner Cartridge - Black - 1 Pack - 15000 Pages - TAA Compliance	\$ 179.00	9	\$ 1,611.00
		2 item(s)	Sub-Tot	tal	\$ 3,491.00
			Tax @ 0	%	\$ 0.00
			Freig	ht	\$ 0.00
			To	tal	\$ 3,491.00

Payment Details

Pay by: Company PO Payment Term: 30 days

Shipping and Delivery Details

Shipping via: UPS Ground

Terms and Conditions
**NOTE: We are registered to collect Tax on orders shipping into CA, TX & the territory of Puerto Rico. We do not have Nexus in any other States. If there is No Tax added to this order, it does not mean that No Tax is Due. As the Customer, You Are Responsible for All Sales & Use Taxes on this order for your Municipality. For questions, please contact us.

The information & pricing outlined above is based on our conversation with you and/or the information contained in your quote request. Please review the above quote in detail for accuracy. Pricting outlined on this quote is valid for 30 days, unless notified otherwise, and is subject to availability at the time of order. For Questions or additional information please call us at: 800-805-7720. We look forward to the opportunity to serve you.

Due to current economic conditions, our policies have changed on the acceptance of credit cards. Rather than increase our product prices across the board, we have decided we can no longer accept credit card payments for invoices without assessing a 4.0% processing fee. This includes payments made by JP Morgan or other financial institutions after invoiced. These changes are effective 1/1/2022. Payments made via check or direct deposit will not be assessed a fee. Note: Processing fee amount is subject to change as processing fees change.

Prepared by: James Reid

Email: jamesr@aisink.com

Phone: 949-388-9204

Exhibit A



United Independent School District Board of Trustees Discretionary Funds Fiscal Year 2024-2025

Requesting Campus:	Federal an	d State Pro	grams		
Campus Principal/Director:	Adriana P.	Ramirez,	Executiv	e Director	1 2
Originators Email:	ramireza@	uisd.net			
Board Member:	Ramiro Ve	liz, III			
Board Member:					
Board Member:					
				y and Community Engagen it, UCOP, and other relate	
events/activities.					
Estimated Cost of Request: \$1, Principal or Director Signature:	1.	. Pamer		Date: 9/3/24	
ASSOCIATE SUPERINTENDE	T APPROVAL:	Yes		No	
Signature:			Date:		
SUPERINTENDENT APPROVA	L:	Yes		No	
Signature:			Date:		
BOARD MEMBER APPROVAL	:	Yes/	0/5	No	
Signature:	_		Date:	9/6/24	
BOARD MEMBER APPROVAL	:	Yes		No	
Signature:			Date:		
BOARD MEMBER APPROVAL	i	Yes		No	
Signature:		<u></u> ;	Date:		
ВС	OARD APPROVA	L DATE: _			

Exhibit A



United Independent School District Board of Trustees Discretionary Funds Fiscal Year 2024-2025

Requesting Campus:	uesting Campus: Federal and State Programs						
Campus Principal/Director:	ncipal/Director: Adriana P. Ramirez, Executive Director						
Originators Email:	riginators Email: ramireza@uisd.net						
Board Member:	Gilbert Agu	ilar, Jr.				1	
Board Member:							
Board Member:							
Description of Request: Funds	are to be used	to increase	Famil	y and Co	nmunity En	gagement	
opportunities sucl	h as the Parer	nt Learning S	Summ	it, UCOP	, and other	related	
events/activities.		-					
Estimated Cost of Request: \$1,5 Principal or Director Signature:	Odrians	Hamre	7	Date:	9/3/24		
ASSOCIATE SUPERINTENDENT	APPROVAL:	Yes		No			
Signature:			Date:				
SUPERINTENDENT APPROVAL	.:	Yes		No			
Signature:			Date:				
BOARD MEMBER APPROVAL		Yes N	- Datas	No			
Signature:			Date:				
BOARD MEMBER APPROVAL:		Yes	-	No			
Signature:			Date:				
BOARD MEMBER APPROVAL:		Yes	_	No			
Signature:			Date:				
	ARD APPROVAL						





United Independent School District **Board of Trustees Discretionary Funds Request**

Form Fiscal Year 2024-2025

UNITED HIGH SCHOOL				
ESSICA C. SALAZAR		<u> </u>		
CSALAZAR@UISD.NET		11		<u> </u>
bert Aguilar – District 1 Bo	oard Member			
	1 .		1	
ATTENDANCE AND I	NCENTIVES I	FOR EMP	LOYEES	
	Siloge		Date:	8/20/14
			No	
APPROVAL:	Yes	Date:	No	
PROVAL:	Yes	Date:	No	
PROVAL:	Yes		No	
		Date:		
PROVAL:	Yes		No	
	ATTENDANCE AND I	bert Aguilar – District 1 Board Member ATTENDANCE AND INCENTIVES I Dest: \$2,000.00 Japanere: Yes	Date: Dert Aguilar – District 1 Board Member ATTENDANCE AND INCENTIVES FOR EMPI Diest: \$ 2,000.00 Ignature:	Date: PPROVAL: Yes

BOARD APPROVAL DATE: _

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





Requesting Campus: United South High School –	9th		
Campus Principal: Marta Alvarez / Karla Garza	1		<u> </u>
Originators Email: kgarza@uisd.net			<u> </u>
Board Member: Gilbert Aguilar, Jr.	<u> </u>		
Board Member:			
Board Member:	a e		
Description of Request: For Wall Decals to displ	ay UISD's 2024	-2025 Vi	ision and Mission Statements
Estimated Cost of Request: \$ 1,100.00			
Principal or Director Signature: Karla Gar	za		Date: 08/21/2024
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes_ V	_	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	_	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	

Make checks payable to: Boxxx Signs & more 4202 E. Saunders Laredo, Texas 78040 boxxxsigns@yahoo.com 956-712-9872



Estimate

Estimate No:

1286 08/12/2024

Date:

For: USHS 9Th Grade Campus

kgarza@uisd.net,

karlagarza6047@gmail.com

Ě	Code	Description	Quantity	Rate	Amount	
	Perforated	8 Perforated Windows/Door With Custom Design for Vice Principal Bottom Room	1	\$1,075.00	\$1,075.00	
		Subtotal			\$1,075.00	
		TAX 0%			\$0.00	
		Total			\$1,075.00	
		Total		\$1	,075.00	

Comments

All orders require 50% deposit. All credit/debit cards will incur a 3% fee. Remaining balance will be due upon receipt of merchandise.



Exhibit A

Requesting Campus: United South High School		1		1.7	
Campus Principal: Martha Alvarez		<u> </u>			
Originators Email: <u>malavarez@uisd.net</u> <u>edavlia</u>	1@uisd.net				<u> </u>
Board Member: Gilbert Aguilar, Jr.					
Board Member:					
Board Member:	5 6				
Description of Request: Student and Staff Attend	lance Incentives	s.		4 6 7	
				В	
Estimated Cost of Request: 41400.00					
Principal or Director Signature: Martha Alv	earez	Date:	08/21/2024	<u> </u>	<u> </u>
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	No			Ĺ
Signature:		Date:			
SUPERINTENDENT APPROVAL:	Yes	No			7 3 7
Signature:	<u> </u>	Date:			
BOARD MEMBER APPROVAL:	Yes	No	- T P		
Signature:		Date:			
BOARD MEMBER APPROVAL:	Yes	No			
Signature:		Date:			_
BOARD MEMBER APPROVAL:	Yes	No			
Signature:		Date:	<u> </u>	-	_
SUPERINTENDENT APPROVAL: Signature: BOARD MEMBER APPROVAL: Signature: BOARD MEMBER APPROVAL: Signature:	Yes Yes	Date:No Date:No Date:No			





Requesting Campus: Prada Elementary School					
Campus Principal: Vanessa Saldaña					
Originators Email: <u>vasaldana@uisd.net</u>		- ',			
Board Member: Gilbert Aguilar, Jr.					
Board Member:					
Board Member:					
Description of Request: Student and Staff Incenti	ives				
				7 ,	
Estimated Cost of Request: # 3,50	0.00			4.	
Principal or Director Signature: Vanessa Sak	daña		Date:	08/21/2024	
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes		No		
Signature:	<u> </u>	Date:			
SUPERINTENDENT APPROVAL:	Yes		No		
Signature:		Date:			
BOARD MEMBER APPROVAL:	Yes	V	No	- 1 - 11 - 15	
Signature:		Date:			<u>.</u>
BOARD MEMBER APPROVAL:	Yes		No		
Signature:		Date:		100	
BOARD MEMBER APPROVAL:	Yes		No		
Signature:		Date:		<u> </u>	









Requesting Campus: Veterans Memorial Element	ary School		
Campus Principal: Luz Serna Ramirez			
Originators Email: <u>luzserna@uisd.net</u>			
Board Member: Gilbert Aguilar, Jr.		.35	
Board Member:			
Board Member:			
Description of Request: Student and Staff Incent	ives		
Estimated Cost of Request: # 15			
Principal or Director Signature: Luz Seuna R	Camirez	<u> </u>	Date: 08/21/2024
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes/	_	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	_	No
Signature:		Date:	
Signature: BOARD MEMBER APPROVAL:	Yes		No
	Yes	_	
BOARD MEMBER APPROVAL:	Yes	Date:	No



Exhibit A

Dr. Sprigg

Requesting Campus: _l	Kennedy Zapata Elementary	School			4.	
Campus Principal:	Yolanda Mauricio				<u></u>	111
Originators Email:	mauricio@uisd.net crodrig	uez@uisd.net				
Board Member: Gil	bert Aguilar, Jr.					
Board Member:						
Board Member:	a _ : : : : : :					
Description of Request:	Student and Staff Incenti	ives			· ·	
Estimated Cost of Requ Principal or Director Si	est: 4 15 gnature: Yolanda Ma	46.		Date: 08/21/2024		
ASSOCIATE SUPERIN	NTENDENT APPROVAL:	Yes		No		
Signature:			Date:			_
SUPERINTENDENT A	PPROVAL:	Yes		No		
Signature:		<u> </u>	Date:			_
BOARD MEMBER AP	PROVAL:	Yes		No		
Signature:			Date:	08/21/202	4	
BOARD MEMBER AP	PROVAL:	Yes		No		
			Date:			- : 5
Signature:						
Signature:	PROVAL:	Yes	<u> </u>	No		



Exhibit A

Requesting Campus:	Arndt Elementary School			
Campus Principal:	Griselda Flores-Ibarra		9	
Originators Email:	gflores@uisd.net			
Board Member: 0	Gilbert Aguilar, Jr.			
Board Member:				
Board Member:				5 6
Description of Reques		ivos		
Estimated Cost of Rec	wyost.	3,50000		
Estimated Cost of Rec				
Principal or Director	Signature: Griselda Flo	res-Ibarra		Date: 08/21/2024
ASSOCIATE SUPER	INTENDENT APPROVAL:	Yes		No
Signature:	1			
SUPERINTENDENT	APPROVAL:	Yes	-	No
Signature:			Date:	
BOARD MEMBER A	PPROVAL:	Yes	_	No
Signature:			Date:	
DOADD WEWDED A	PDDOVA	*7		NY-
BOARD MEMBER A		Yes		No
Signature:			Date:	
BOARD MEMBER A	PPROVAL:	Yes		No
Signature:			Date:	
	DO LED LEDDOWN	LDATE		7
	BOARD APPROVAL	LDAIE:		





Requesting Campus:	Lyndon B. Johnson H. S.						
Campus Principal:	Armando Salazar	7					
Originators Email:	asalazar1@uisd.net jpalomo@uisd.net						
Board Member:	Gilbert Aguilar, Jr.						
Board Member:							
Board Member:							
Description of Reques	st: Students and Staff Ince						
Estimated Cost of Re			6,000.	/Attendance-\$2,000.00)			
Principal or Director		Salazar	Da	ate: 08/21/2024			
ASSOCIATE SUPER	RINTENDENT APPROVAL:	Yes	No				
Signature: _		-	Date:				
SUPERINTENDENT	APPROVAL:	Yes	No_				
Signature:			Date:				
BOARD MEMBER A	APPROVAL:	Yes	No_				
Signature: _	A.		Date:				
BOARD MEMBER A	APPROVAL:	Yes	No_				
Signature: _			Date:				
DO A DE MEMBER	APPROVAL:	Yes	No_				
BOARD MEMBER A							

Exhibit A



United Independent School District Board of Trustees Discretionary Funds Fiscal Year 2024-2025

Requesting Campus: Sa vador (xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	ircia		
Campus Principal/Director: Dr. Jon a Han	Martin	er	
Originators Email: <u>grirodriguez@uisd.net</u>			
Board Member: Gilbert Aguilar, Jr.	1 300		
Board Member:			
Board Member:			
Description of Request: attendan	ie sluce	ntives	
Estimated Cost of Request: \$2,000,00			
Principal or Director Signature:	78.7		Date:
Timespar of Director Signature.	الملكل ويوسي		Date
ASSOCIATE SUPERINTENDENT APPROVAL:	: Yes		No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes V	/	
	res	Deter	No09/06/24
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	<u></u>	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD APPROVA	AL DATE: _		





Requesting Campus: Lamar Bruni V		
Campus Principal/Director: Clase Flores		
Originators Email: grirodriguez@uisd.net		
Board Member: Gilbert Aguilar, Jr.		
Board Member:		
Board Member:		
Description of Request: Attendance	Incentives	
Estimated Cost of Request: #1,500,00		
Principal or Director Signature:	Date:	
ASSOCIATE SUPERINTENDENT APPROVAL: Y	es No	- 1
Signature:	Date:	
UPERINTENDENT APPROVAL:	esNo	
Signature:	Date:	
BOARD MEMBER APPROVAL:	esNo	
Signature:	Date:09/0	6/24
SOARD MEMBER APPROVAL:	es No	
Signature:	Date:	Market Comment
BOARD MEMBER APPROVAL:	es No	4
Signature:	Date:	





- M.S.	
Dalapa	<u> </u>
el chre	entires / Staff incentives
11 12 13	Date:
: Yes	No
	Date:
Yes	No
	Date:
Yes -	No
	Date: 09/06/27
	Date
Yes	No
	Date:
7 E' 7 ET	
Yes	No
	Yes





Requesting Campus:	/	-	
Campus Principal/Director: Matras Yd	rog o	<u> </u>	
Originators Email: <u>grirodriguez@uisd.net</u>			
Board Member: Gilbert Aguilar, Jr.		4 3	
Board Member:			
Board Member:			
Description of Request: Studen +	Stoff I.	rcon	Two
	, ,		
Estimated Cost of Request: \$1,500.00			
Estimated Cost of Request:		1	
Principal or Director Signature:	10000		Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	<u> 1 </u>
CLIDED IN THE ADDROVAL	W/		NT.
SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	09/06/24
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
	22.7 16	14111	No
BOARD MEMBER APPROVAL:	Yes	_	No



United Independent School District Board of Trustees Discretionary Funds Request Form

Exhibit A

Fiscal Year 2024-2025

UNITED HIGH SCHO	OOL		
JESSICA C. SALAZAR			
JC SALAZAR@UISD.N	ET		7 1
ıvier Montemayor – Dist	rict 5 Board Men	nber	
	2 1		
t: Miscellaneous I	Expenses (6499) fo	or Teachers and Sta	ff Professional Development
quest: \$ 2500.00 Signature:	Dren	Date:	8/20/24
APPROVAL:	Yes	No	
	<u> </u>	20.4	
PPROVAL:	Yes	No_	
A Proposition		Date:	
PPROVAL:	Yes	No	
		Date:	
PPROVAL:	Yes	No	<u> </u>
		Date	
	JESSICA C. SALAZAR JC SALAZAR@UISD.N avier Montemayor – Dist t: Miscellaneous I quest: \$ 2500.00 Signature: INTENDENT APPROVAL: PPROVAL: PPROVAL: PPROVAL: PPROVAL:	JESSICA C. SALAZAR JC SALAZAR@UISD.NET avier Montemayor – District 5 Board Men t: Miscellaneous Expenses (6499) fo quest: \$ 2500.00 Signature: Yes APPROVAL: Yes PPROVAL: Yes PPROVAL: Yes PPROVAL: Yes	JESSICA C. SALAZAR JC SALAZAR@UISD.NET avier Montemayor – District 5 Board Member t: Miscellaneous Expenses (6499) for Teachers and States quest: \$ 2500.00 Signature: Date: INTENDENT APPROVAL: Yes No Date: PPROVAL: Yes No

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 2024-2025

Requesting Campus:	Clark Middle School	ol		
Campus Principal:	Michelle Gomez			
Originator's Email:	mcgomez@uisd.net			
Board Member:	Javier Montemayor			
Board Member:				
Board Member:				
Description of Request	: _ Instructional tables fo	r unit, fans for	athleti	cs, media backdrop and
tablecloth for camp	us use.			
Estimated Cost of Req	7.111			Date: 8/28/24
ASSOCIATE SUPERI	NTENDENT APPROVAL:	Yes	-	No
Signature:			Date:	No.
SUPERINTENDENT A	APPROVAL:	Yes	_	No
Signature:			Date:	
BOARD MEMBER AI	PPROVAL:	Yes_		No
Signature:	FRIT	<u> </u>	Date:	
BOARD MEMBER AI	PPROVAL:	Yes	_	No
Signature:			Date:	
BOARD MEMBER AI	PPROVAL:	Yes		No
Signature:			Date:	
	BOARD APPROVAL	DATE:		

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



Cart



Classic Allied MarkerBoard™ Table - Circle 48 in.

\$270.15

\$270.15

Product Number: Z48004

1 on back-order.



Allied MarkerBoard™ Table - Rectangle

\$226.00

\$226.00

Product Number: Z48008

1 on back-order.

Subtotal

\$496.15

2

Notifications			My Lists Sic	ın In Ca
What are you looking for to	oday?			Q
Q Laredo Lowe's V Open until 10 PM				Delivery t 78041 V
Lowe's	and availability of prod where discovered, and	les, and availability may vary. Our local store ducts and services are subject to change wit I Lowe's reserves the right to revoke any state ons including after an order has been submi	hout notice. Errors wi ed offer and to correc	ll be corrected
Cart (2) Email Cart Empty Cart				
Pickup at <u>Laredo Lowe's</u>	(2)			
	+	Pickup Ready Today At Laredo Lowe's Delivery to 78041 Get it Today Same-Day Delivery ① Order by 2 p.m. Get it by Thu, Aug 29 Scheduled Delivery ① Delivery Scheduling in Checkout	\$1,196.0	00 ×
Add a Prot	tection Plan			
	Protection Plans		Terms & Coverage	
FREE & Easy Returns View	v Returns Policy			
Lowest Price Guarantee	View <u>Details</u>			
Pickup & Delivery Options	<u>View Details</u>			

Enter keyword or product number

All Back to School Buy Again Today's Deals

Account for United Indepen...

Price

\$273.08

Typical price:

\$79.01 (22%)

Educator Price

\$352.09

Savings:

Business Prime

Shop now

Jessica, treat your employees and clients to an Amazon Gift Card.



Shopping Cart

Bush Business Furniture Series A 72W Desk in Hansen Cherry and

Only 16 left in stock (more on the way).

FREE delivery Thu, Sep 5 Color: Hansen Cherry Size: 72W

Qty: 1

Delete

Save for later

Compare with similar items

Subtotal (1 item): \$273.08

☐ This order contains a gift

Proceed to checkout

Bulk savings to consider

Acer KB272 EBI 27" IPS Full HD (1920 x 1080) Zero-Frame Gaming O... was removed from Shopping Cart.

Subtotal (1 item): \$273.08

Your Items

Saved for later (39 items)

Buy it again

Headphones & earbuds (1)

Fabric ribbons (4)

All-purpose labels (2)

Tool cabinets (1)

Office tape (1)

Tablecloths (1)

Gift wrap bags (2)

✓ See more categories



ZHENWAY 30 Pack Class Set Headphones for Kids Studen... \$43.89



Gteller Ribbon Stars Wired Sheer Glitter Ribbon, 2-Inch... \$15.90





P.O. Box 841393 DALLAS, TX 75284-1393

Tel: 1-800-527-7510 | Fax: 1-800-899-0149

Visit us at www.bsnsports.com

Cart #:	186846
Ordered By:	Jessica Murrillo
Payment Terms:	
Quote Created:	08/28/2024

Sold To

0001037886

CLARK MIDDLE SCHOOL 500 W Hillside Rd Rear

LAREDO, TX 78041-3198

Ship To

0001037886

CLARK MIDDLE SCHOOL 500 W Hillside Rd Rear

LAREDO, TX 78041-3198

Payer

0001037886

CLARK MIDDLE SCHOOL

500 W Hillside Rd Rear

LAREDO, TX 78041-3198

TC005 -		Туре	Size	Qty	Unit Price	Total
CBNTCE0008	TC005_08082022	Тор	8 FT	1	\$325.00	\$325.00
			Totals	1		\$325.00
BKDS001 -		Туре	Size	Qty	Unit Price	Total
CBNMBASS	BKDS001_08102022	Тор	10x8	1	\$995.00	\$995.00
			Totals	1		\$995.00

Total Units	2
Subtotal	\$1,320,00
Freight	\$66.00
Sales Tax	\$0.00

Order Total

\$1,386.00



P.O. Box 841393 DALLAS, TX 75284-1393

Tel: 1-800-527-7510 | Fax: 1-800-899-0149

Visit us at www.bsnsports.com

Cart #:	186846
Ordered By:	Jessica Murrillo
Payment Terms:	
Quote Created:	08/28/2024

Style: TC005

Color Info

тог	
FABRIC ACCENT 1	VICTORY WHITE
FABRIC ACCENT 2	VICTORY GRAY
FABRIC PRODUCT COLOR	VICTORY NAVY
TEXT COLOR	VICTORY WHITE
TEXT OUTLINE 1	VICTORY GRAY
TEXT OUTLINE 2	VICTORY NAVY

Size Breakdown

Size	Тор	Bottom
8 FT	-1	0
Total	1	0

Names and Numbers

Туре	Name	#	Size	QTY	SKU
TOP			8 FT	1	CBNTCE0008



P.O. Box 841393 DALLAS, TX 75284-1393

Tel: 1-800-527-7510 | Fax: 1-800-899-0149 Visit us at www.bsnsports.com

Cart #:	186846
Ordered By:	Jessica Murrillo
Payment Terms:	
Quote Created:	08/28/2024

Style: BKDS001

Color Info

то	Р	#	ráilin		*00*105		****
FABRIC PRODUCT COLOR	VICTORY NAVY	editas		estile.		sector	-
TEXT COLOR	VICTORY WHITE	*	******		milita		-
TEXT OUTLINE 1	VICTORY GRAY	motivies		*****		*****	-
TEXT OUTLINE 2	VICTORY NAVY	*	B165.21		#10E01		*****
		estrin	10050	milities SS	Milita		
Size Breakdown							

Size	Тор	Bottom
10x8	1	0
Total	. 1	0

Names and Numbers

Туре	Name	#	Size	QTY	SKU	
ТОР			10x8	1	CBNMBASS	



Exl	hi	b	ií	A	
		~	-		

Requesting Campus: Board District 5			y
Campus Principal/Director: N/A			
Originators Email: grirodriguez@uisd.net			
Board Member: Javier Montemayor			<u> </u>
Board Member:			
Board Member:			
Description of Request: To process, print and mai	l out the Distric	ct 5 Nev	vsletter.
Estimated Cost of Request: \$3,389.69	. :		
Principal or Director Signature:			Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes		No
Signature:		_	
Signature.		Date.	
SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:	_ /	Date:	
BOARD MEMBER APPROVAL:	Yes	_	No
Signature:		Date:	08/30/2024
BOARD MEMBER APPROVAL:	Yes	_	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	



Kwik Kopy Printing 616 W. Calton Rd. Suite 8 Laredo, TX 78041 Tel: (956) 723-1367 Fax: (956)723-5870

KKP Estimate

No: 16704

Date:

8/28/24

U.I.S.D. 201 Lindenwood Dirve Laredo TX 78045

E-Mail: parcos@uisd.net

Customer No 308

Quantity	Description	Amount	
3,100	(OO) 8.5x11 Newsletters, 4/4, 70# Matte Uncoated Opaque Smooth (OO) Newsletters	\$ 1,769.00	
9,300	(OO) Chroma Labels, clear with perforation in middle, sealing brochur place, for total of 20,100 labels.	\$ 1,116.00	
1			
			· ·
			40
Taken by:	Sofia Wanted: Mon 9/2/24	SUBTOTAL	\$ 2,885.00
		TAX	\$ 2,885.00
		TOTAL	φ 2,885.00



District 5

Post Office: Note Mail Arrival Date & Time (Do Not Round-Stamp)

Postage Statement - Nonprofit USPS Marketing Mail

Mailing Agent (If other than permit holder) Mail Owner (If other than permit holder) Permit Holder Name, Address, Email, Telephone Name, Address, Telephone Name, Address UNITED INDEPENDENT SCHOOL DISTRICT **ENRIQUE RUBIO** 201 LINDENWOOD LAREDO TX 78045-2429 enrique.rubio@uisd.net 956-473-7900 USPS Nonprofit Auth. No. 260304 USPS Nonprofit Auth. No. 3225743 EPS Cust. Ref. No. CRID CRID CRID For Automation Pieces Post Office of Mailing Mailer's Mailing Date Federal Agency Cost Code Statement Seq. No. No. & Type of Enter Date of Address 78041-9998 Aug 28, 2024 143410 Matching and Coding Containers Parcels-Machinable Type of Postage Processing Category Total # of Pieces in Mailing SSF Transaction # 08/28/2024 Permit Imprint Letters O Sacks Parcels-Irregular 2,889 Precanceled Stamps For Carrier Route Pieces Flats Enter Date of Address ☐ CMM 3 1 ft. Total Weight Permit # Marketing Matching and Coding ☐ Metered Letter Trays 41.6016 757 08/28/2024 For Mail Enclosed within Weight of a Single Piece 4 2 ft. Move Update Method: Alternative Method For Carrier Route Price Another Class Letter Trays Ancillary Service Pieces Enter Date of 0.0144 pounds Multiple Carrier Route Sequencing EMM Endorsement Bound Printed Matter 0 Letter Trays Letter-size or flat mailpiece contains DVD/CD NCOA Link OneCode ACS or other disk Library Mail n/a Alternative For Pieces Bearing a O Flat Trays T ACS Address Format Simplified Address Enter Political Campaign Mailing Periodicals ☐ Yes X No **Date of Delivery Statistics** Combined Mailing 0 Pallets Media Mail File or Alternative Method ☐ Yes X No Marriage Mail Incentive Election Mail - Official Ballots Mixed Class 0 Other Election Mail - Non-Ballot Materials Single Class ☐ Catalogs Parts Completed MA MB OC OD OE OF (Select all that apply): \$504.69 Subtotal Postage (Add parts totals) Price at Which Postage Affixed (Check one) Correct Lowest Neither Postage Affixed Complete if mailing includes pieces bearing metered/PC Postage or precanceled stamps pcs. x \$ 3 Incentive/Discount Flat Dollar Amount 4 Fee Flat Dollar Amount Permit # Net Postage Due (Line 1 +/- Lines 2, 3, 4) \$504.69 5 Additional Postage Payment (State reason) For postage affixed, add additional payment to net postage due **Total Adjusted Postage Affixed** for permit imprint add additional payment to total postage. Postmaster: Report Total Postage in AIC 125 **Total Adjusted Postage Permit Imprint** (Permit Imprint Only, Excluding Simplified Addressing (EDDM)) Postmaster: Report Total Postage in AIC 208 Total Adjusted Postage Simplified Addressing (EDDM) (Simplified Addressing (EDDM), Permit Imprint Only) Incentive/Discount Claimed: The mailer's signature certifies that. (1) the mailing complies with DMM 703, (2) the income derived from the sale of any products or services advertised in the mailing is not subject to the Unrelated Business Income Tax (UBIT) and any products and services advertised are substantially related to the nonprofit organization's authorized purpose within the meaning of 39 U.S.C. 3626(j)(1)(d)(ii)(l) and 26 U.S.C. 513(A), (3) the mailing if made by a voting registration official is required or authorized under the National Voter Registration Act of 1993, and (4) it will agree to pay, subject to appeal any revenue deficiencies assessed on this mailing. If an agent signs this form, the agent certifies that he or she is authorized to sign on behalf of the mailer, and that the mailer is bound by the certification and agrees to pay any deficiencies. In addition, agents may be liable for any deficiencies resulting from matters within their responsibility, knowledge, or control. The mailer hereby certifies that all information furnished on this form is accurate, truthful and complete, that the mail and supporting documentation comply with all postal standards and that the mailing qualifies for the prices and fees claimed, and that the mailing does not contain any matter prohibited by law or postal regulation. I understand that anyone who furnishes false or misleading information on this form or who omits information requested on this form may be subject to criminal and/or civil penalties, including fines and imprisonment Privacy Notice: For information regarding our Privacy Policy visit www.usps.com. Signature of Mailer or Agent Printed Name of Mailer or Agent Signing Form Telephone 956-473-7900 **ENRIQUE RUBIO** Weight of a Single Piece Total Weight Are postage figures at left adjusted from mailer's entries? Round Stamp (Required) Payment Date pounds Yes If yes, reason: in non-PostalOne Total Pieces Total Postage Only Presort Verification Performed? (If required) Yes Date Mailer Notified Contact Use I CERTIFY that this mailing has been inspected for each item below if USPS ((1) eligibility for postage prices claimed; (2) proper preparation (and presort where required); By (Initials) Time AM proper completion of postage statement; PM (4) payment of annual fee; and (5) sufficient funds on deposit (if required) USPS Employee's Signature Print USPS Employee's Name





Requesting Campus: Board District 6	True.		
Campus Principal/Director: N/A			
Originators Email: <u>grirodriguez@uisd.net</u>			
Board Member: Michelle Molina			
Board Member:			· · · · · · · · · · · · · · · · · · ·
Board Member:			
Description of Request:To process, print and ma	il out the Distric	t 6 Nev	vsletter.
Estimated Cost of Request: \$2,608.30			
Principal or Director Signature:			Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature: Michelle Meline		Date:	09/03/24
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	,	No
Signature:		Date:	
ROARD APPROVAL	L. DATE:		



Kwik Kopy Printing 616 W. Calton Rd. Suite 8 Laredo, TX 78041 Tel: (956) 723-1367

Fax: (956)723-5870

KKP Estimate

No: 16703

Date:

8/28/24

U.I.S.D. 201 Lindenwood Dirve

Laredo TX 78045

E-Mail: parcos@uisd.net

Customer	No	308
Customer	INO	300

Quantity	Descripti	Amount	
2,350	(OO) 8.5x11 Newsletters, 4/4, 70# Matte Uncoate (OO) Newsletters	ed Opaque Smooth Text, folded tri-fold,	\$ 1,386.18
7,050	(OO) Chroma Labels, clear with perforation in midplace, for total of 20,100 labels.	ddle, sealing brochure in three different	\$ 846.00
-			
Taken by:	Sofia Wanted: Mo	n 9/2/24 SUBTOTAL	\$ 2,232.18
		TAX	
		TOTAL	\$ 2,232.18

United States Postal Service

District 6

Post Office: Note Mail Arrival Date & Time (Do Not Round-Stamp)

Postage Statement - Nonprofit USPS Marketing Mail

						ing Agent			ail Owner (If other than permit holder)			
Mollow	Maner	EN 201 LA	ITED INDEPEND RIQUE RUBIO I LINDENWOOD REDO, TX 78045- ique.rubio@uisd.r		RICT	Name, Address, Telephone			Name, Address			
	- 1	USP	5-473-7900 S Nonprofit Auth. Cust. Ref. No.	No. 260304	CRID 3225743	_ CRID				USPS Nonprofit Auth.	No	
	- 1		Office of Mailing		Mailer's Mailing Date	Federal	Agency Cost Code	Statement Seq N	0.	For Automation Pieces. Enter Date of Address	No. & Type of	
	-	Туре	of Postage Permit Imprint Precanceled	Processing Category Letters Flats	Aug 28, 2024 Parcels-Machinable Parcels-Irregular	Total # of 2,150	Pieces in Mailing	SSF Transaction	n#	Matching and Coding 08/28/2024 For Carrier Route Pieces.	Containers O Sacks	
			Metered	Marketing Parcels	СММ	Total W 30.96		Permit # 757		Enter Date of Address Matching and Coding 08/28/2024	3 1 ft. Letter Tr	ays
1000	Mallin	Anoth	lail Enclosed within her Class ound Printed Matter	Move Update Method Ancillary Service Endorsement	☐ Alternative Method ☐ Multiple		of a Single Piece 0.0144 pounds tter-size or flat ma		DVD/CD	For Carrier Route Price Pieces, Enter Date of Carrier Route Sequencing	2 2 ft. Letter Tr	
	C] Li	brary Mail	□ NCOA Link	OneCode ACS	or	other disk.	inpress dontains		For Pieces Bearing a	0 Flat Tray	
	ľ	□ P	eriodicals	Combined Mailing	☐ Address Format	Political C	ampaign Mailing	☐ Yes	No ⊠	Simplified Address Enter Date of Delivery Statistics	O Dellate	
	ľ	M	edia Mail		Marriage Mail Incentive		Mail - Official Ballo			File or Alternative Method		
_	4	D	- Commission		Catalogs		fail - Non-Ballot M □ D □ E □			L DS DNS	O Other	_
	ŀ	1	s Completed	(Select all that ap	oply): 🖾 A 🖾	в ЦС		Subtotal				6.12
	age	2		tage Affixed (Check on includes pieces bearing	e). Correct Lo			pcs. x \$		= Postage Affix		
4	2 Complete if mailing includes pieces bearing metered/PC Postage or precanceled stamps pcs. 3 Incenti						entive/Disc	count F	lat Dollar Amo	unt -		
		4							Fee F	lat Dollar Amo	unt +	
_	1	5	Permit #				Net P	1 +/- Lines 2, 3	, 4) \$37	6.12		
	Additional Postage Payment (State reason) For postage affixed, add additional payment to net postage due				A 1980	and the later of t	Total /	diueta	ed Postage Affix	rod .	19/64 19/64	
	φĺ			additional payment to tal Postage in AIC								
	2	(Per	mit Imprint Only, E		Addressing (EDDM))	T-22-10A				age Permit Impi		
_	4	_	plified Addressing entive/Discount C	(EDDM), Permit Imp	print Only)	I Otal A	ajustea Pos	ddressing (EDD Type of Fee:)NI)	13.10		
	Certification	The r Busin and 2 any r certific certific prices	nailer's signature cer less Income Tax (UB 16 U.S.C. 513(A); (3) evenue deficiencies i cation and agrees to es that all information is and fees claimed, a o omits information of	tifies that: (1) the mailin IT) and any products ar the mailing if made by is assessed on this mailing pay any deficiencies. In numished on this form that the mailing doe equested on this form in	nd services advertised are a voting registration official g. If an agent signs this for n addition, agents may be is accurate, truthful and c s not contain any matter p nay be subject to criminal	substantially I is required or m, the agent liable for any omplete; that rohibited by I and/or civil p	related to the nonpror authorized under the certifies that he or sideficiencies resulting the mail and suppor aw or postal regulational titles, including fin	ofit organization's a he National Voter R he is authorized to g from matters with ting documentation on. I understand tha	uthorized po egistration a sign on beha in their resp comply with at anyone with	s advertised in the mailing is urpose within the meaning of Act of 1993; and (4) it will a alf of the mailer, and that the onsibility, knowledge, or consibility, knowledge, or con all postal standards and it he furnishes false or mislea	of 39 U.S.C. 3626(j)(1)(d gree to pay, subject to ag e mailer is bound by the introl. The mailer hereby that the mailing qualifies f)(ii)(I) opeal or the
		Sign	ature of Mailer or	Agent	our Privacy Policy visit		Printed Name of ENRIQUE				Telephone 956-473-7900	
		completed in non-PostalOnel sites	Weight of a Single Piece Total Weight			Are	e postage figures Yes N	The state of the s	Round Stamp (Requi	red)		
	e Only	Presort Verification Performed? (If required) Yes No					te Mailer Notified					
	USPS USe Only	leted in	required: (1) eligibility for p	oostage prices claime								
9/	S	To be	(3) proper compl (4) payment of a (5) sufficient fund	ds on deposit (if requ	tement;		(Initials)		me	AM PM		
			USPS Employee's	Signature	a constraint	Pri	nt USPS Employe	e's Name	igg s			



United Independent School District Board of Trustees Discretionary Funds Request Form

Exhibit A

Fiscal Year 2024-2025

Requesting Campus:	UNITED HIGH SCHOOL				
Campus Principal:	JESSICA C. SALAZAR	<u> </u>			
Originators Email:	JCSALAZAR@UISD.NET				
Board Member: M	lichelle Molina – District 6 Bo	ard Secretary			
Board Member:					
Board Member:					
Description of Reques	t: Teacher Discretionary Inc	centive			
Estimated Cost of Req	uest: \$ 5350.00				CA
Principal or Director	Signature:	gr		Date:	8/20/24
ASSOCIATE SUPER	INTENDENT APPROVAL:	Yes	_	No	_
Signature:			Date:	œ	
SUPERINTENDENT	APPROVAL:	Yes	_	No	
Signature:			Date:		a de la composição de la composição de
BOARD MEMBER A	PPROVAL:	Yes	_	No	_
Signature: 🖊	Michelle Molore	-	Date:		
BOARD MEMBER A	PPROVAL:	Yes	_	No	
Signature:			Date:		
BOARD MEMBER A	PPROVAL:	Yes	_	No	_
Signature:		-	Date:		-

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

BOARD APPROVAL DATE:



Exhibit A	Ex	hi	bi	t A
-----------	----	----	----	-----

5 23 2 3 X

Requesting Campus: United South Middle School				6,
Campus Principal/Director: Carlos Valdez				
Originators Email: grirodriguez@uisd.net				
Board Member: Ricardo "Rick" Rodriguez				
Board Member:				
Board Member:				
Description of Request: Coaches athletic uniforms			73.8	
Estimated Cost of Request: \$3,504.00				0/24/24
Principal or Director Signature:				Date: 8/21/24
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes_			No
Signature:			Date:	
SUPERINTENDENT APPROVAL:	Yes _		10,15	No
Signature:			Date:	
BOARD MEMBER APPROVAL:	Yes _	V		No
Signature:			Date:	08/26/24
BOARD MEMBER APPROVAL:	Yes _			No
Signature:			Date:	
	*7			No
BOARD MEMBER APPROVAL:	Yes _		_	-110

QUOTE No	WAREHOUSE	DATE	PURCHASE ORDER	TERMS
D6153540 - 00	OD	2024-08-23		NET 30

ADDITIONAL COMMENTS:

- ID8812 BLK MEN'S ULTRABOOST ALL SIZES AVAIL @ ADIDAS 9.20.24.
 ID8947 BLK WOMEN'S ULTRABOOST ALL SIZES AVAIL @ ADIDAS 9.11.24.
 IQ2957 BLK MEN'S PANTS 42/30 AVAIL @ ADIDAS 10.31.24.
 EMAIL JULIE LOCKER ROOM PO, IT4450 W BLACK JACKET.

ID: 106976 24 USMS US

Art	Art ID Version	Method	Location	Color Scheme
TEF	15829.3 US LOGO	Embroidery	Left Chest	Default

Art approval is pending, the pricing in not finalized.

Style Code	LINE	ITEM	DESCRIPTION	ORDERED	WAREHOUSE	PRICE	MOU	TOTAL PRICE
	1	IS1103-001-20	ADIDAS MENS COACH SS POLO BLACK M	1	HD	50.00	EA	50.00
	2	IS1103-001-26	ADIDAS MENS COACH SS POLO BLACK L	4	HD	50.00	EA	200.00
	3	IS1103-001-32	ADIDAS MENS COACH SS POLO BLACK XL	1	HD	50.00	EA	50.00
	4	IS1103-001-38	ADIDAS MENS COACH SS POLO BLACK 2XL	3	HD	50.00	EA	150.00
	5	IS1100-001-14	ADIDAS WOMENS COACH SS POLO BLACK S	2	HD	50.00	EA	100.00
	6	IS1100-001-20	ADIDAS WOMENS COACH SS POLO BLACK M	1	HD	50.00	EA	50.00
	7	181100-001-26	ADIDAS WOMENS COACH SS POLO BLACK L	2	HD	50.00	EA	100.00
	8	IS1100-001-38	ADIDAS WOMENS COACH SS POLO BLACK 2XL	1	HD	50.00	EA	50.00
Style Code	LINE	ITEM	DESCRIPTION	ORDERED	WAREHOUSE	PRICE	UOM	TOTAL PRICE
	9	ID8812-001-50	ULTRABOOST LIGHT 2.0 BLACK 9	1	MF	125.00	EA	125.00

Page 1 of 2

Style Code	LINE	ITEM	DESCRIPTION	ORDERED	WAREHOUSE	PRICE	HOM	TOTAL PRICE
	10	ID8812-001-51	ULTRABOOST LIGHT 2.0 BLACK 9.5	1	MF	125.00	EA	125.00
	11	ID8612-001-54	ULTRABOOST LIGHT 2.0 BLACK 11	3	MF	125.00	EA	375.00
	12	ID8812-001-55	ULTRABOOST LIGHT 2.0 BLACK 11.5	1	MF	125.00	EA	125.00
	13	ID8812-001-56	ULTRABOOST LIGHT 2.0 BLACK 12	1	MF	125.00	EA	125.00
	14	ID8812-001-58	ULTRABOOST LIGHT 2.0 BLACK 13	1	MF	125.00	EA	125.00
	15	ID8847-001-44	ULTRABOOST LIGHT 2.0 W BLACK 6	1	MF	125.00	EA	125.00
	16	ID8847-001-45	ULTRABOOST LIGHT 2.0 W BLACK 6.5	1	MF	125.00	EA	125.00
	17	ID8847-001-47	ULTRABOOST LIGHT 2.0 W BLACK 7.5	1	MF	125.00	EA	125.00
	18	ID8847-001-49	ULTRABOOST LIGHT 2.0 W BLACK 8.5	3	MF	125.00	EA	375.00
	19	IQ2957-001-122	ULTIMATE365 GOLF PANTS BLACK 3234	1	MF	58.50	EA	58.50
	20	IQ2957-001-170	ULTIMATE365 GOLF PANTS BLACK 3430	- 1	MF	58.50	EA	58.50
	21	IQ2957-001-178	ULTIMATE365 GOLF PANTS BLACK 3432	2	MF	58.50	EA	117.00
	22	IQ2957-001-238	ULTIMATE365 GOLF PANTS BLACK 3632	1	MF	58.50	EA	58.50
	23	IQ2957-001-290	ULTIMATE365 GOLF PANTS BLACK 3832	1	MF	58.50	EA	58.50
	24	IQ2957-001-330	ULTIMATE365 GOLF PANTS BLACK 4032	1	MF	58.50	EA	58.5

\$3,504.00



Exhibit A

FOR CHILDREN	Fiscal Year 202	4-2025	Ry
Requesting Campus: _CHERISH CI	ENTER	<u> </u>	K
Principal/Director: jOSEPH LOPEZ	Z		
Originators Email:jlopez@i	uisd.net		
Board Member: Ricardo Rick Roo	driguez		
Board Member:			
Poard Mambou			
Description of Request: Field Trip t			
3.41 . 1.62 . 6D			
Estimated Cost of Request: \$ 3000.0	7 - 1	/	
Principal or Director Signature:	Joseph Opel		Date: 9/05/2024
ASSOCIATE SUPERINTENDENT A	APPROVAL: Yes		No
Signature:		Data	No
Signature.		Date.	
SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:		Date:	الأحباب المساليات
BOARD MEMBER APPROVAL:	Yes V		No
Signature:		Date:	09/06/2024
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
	Voc		No
BOARD MEMBER APPROVAL:	Yes		

BOARD APPROVAL DATE:

Exhibit A



United Independent School District Board of Trustees Discretionary Funds Request Form Fiscal Year 2024-2025

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Requesting Campus: Step Academy	<u> </u>		
Campus Principal: Mr. Ydrogo			
Originators Email: matias.ydrogo@uisd.net		3. W	
Board Member: Ricardo "Rick" Rodriguez			
Board Member:			
Board Member:			
Description of Request: Teacher/Staff Appreciati			t Incentives PBIS
			,
Estimated Cost of Request: \$1,500			
Principal or Director Signature: Matia	s Ydrogo		Date: 09/5/24
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes		No
Signature:	-1	Date:	
SUPERINTENDENT APPROVAL:	Yes	J'	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes/		No
Signature:		Date:	Sept. 4, 2024
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No

Please return the completed form to the Superintendent's Office for final processing: boardagenda@uisd.net

Revised: July 13, 2022

Exhibit A



United Independent School District Board of Trustees Discretionary Funds Fiscal Year 2024-2025

Requesting Campus:	Federal and	State Pro	grams	
Campus Principal/Director:	Adriana P.	Ramirez, I	Executiv	e Director
Originators Email:	ramireza@1	uisd.net		
Board Member:	Ricardo "R	ick" Rodri	guez	
Board Member:				
Board Member:				
Description of Request: Funds	are to be used	to increas	e Family	y and Community Engagement
opportunities suc	ch as the Parer	t Learnin	g Summ	it, UCOP, and other related
events/activities.				
Estimated Cost of Request: \$1,5	500.00 febrian	Lipam	\	Date: 9/3/24
ASSOCIATE SUPERINTENDEN	T APPROVAL:	Yes		No
Signature:			Date:	
SUPERINTENDENT APPROVA	L:	Yes	_	No
Signature:			Date:	
BOARD MEMBER APPROVAL:		Yes_	To	No
Signature:			Date:	9/6/24
BOARD MEMBER APPROVAL	_	Yes		No
Signature:			Date:	
BOARD MEMBER APPROVAL		Yes		No
Signature:			Date:	



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Requesting Campus: Alicia Ruiz Elementary			
Campus Principal/Director: Monica Zepeda	<u> </u>		
Originators Email: monzep@uisd.net			
Board Member: Ricardo Rodriguez			
Board Member:			
Board Member:			
Description of Request: Dance Team Uniforms			
	. 2		
Estimated Cost of Request: \$3,750 Principal or Director Signature:	Pund	2.	Date: 9-52024
1,00	Spice		
	Yes		No
			No
ASSOCIATE SUPERINTENDENT APPROVAL: Signature:		Date:	
ASSOCIATE SUPERINTENDENT APPROVAL: Signature: SUPERINTENDENT APPROVAL:	Yes	Date:	
ASSOCIATE SUPERINTENDENT APPROVAL: Signature: SUPERINTENDENT APPROVAL: Signature:	Yes	Date:	No
ASSOCIATE SUPERINTENDENT APPROVAL: Signature: SUPERINTENDENT APPROVAL: Signature:	Yes	Date:	No
ASSOCIATE SUPERINTENDENT APPROVAL: Signature: SUPERINTENDENT APPROVAL: Signature: BOARD MEMBER APPROVAL: Signature:	Yes	Date:	No
ASSOCIATE SUPERINTENDENT APPROVAL: Signature: SUPERINTENDENT APPROVAL: Signature: BOARD MEMBER APPROVAL: Signature:	YesYes	Date:	No
ASSOCIATE SUPERINTENDENT APPROVAL: Signature: SUPERINTENDENT APPROVAL: Signature: BOARD MEMBER APPROVAL: Signature:	YesYes	Date: Date:	No



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all	

questing Campus: Alicia Ruiz Elementary	1961 11
mpus Principal/Director:Monica Zepeda	
iginators Email: monzep@uisd.net	
ard Member: Ricardo Rodriguez	
ard Member:	
ard Member:	
scription of Request: Teacher/Staff Incentives	
timated Cost of Request: \$6,250	
	da Date: 9-5-2024
SOCIATE SUPERINTENDENT APPROVAL: Yes_	No
Signature:	Date:
PERINTENDENT APPROVAL: Yes_	No
Signature:	Date:
ARD MEMBER APPROVAL: Yes	No
Signature:	Date: 09/04/2024
ARD MEMBER APPROVAL: Yes	No
Signature:	Date:
ARD MEMBER APPROVAL: Yes	No
Signature:	Date: