

United Independent School District AGENDA ACTION ITEM

TOPIC	Approval of Requests from I	Board Members in re:	Use of Board of Trustees Discretionary	
Funds for Var	rious Projects/Campuses			
SUBMITTE	D BY: Judd Gilpin	OF:	Board President	
APPROVED	FOR TRANSMITTAL TO	SCHOOL BOARD:	February 20, 2013	
RECOMME	NDATION:			
It is recommended Board of Trus	nded that the United ISD Boar tees Discretionary Funds for V	rd of Trustees approve /arious Projects/Camp	Requests from Board Members in re: Use buses.	e of
RATIONALI	E :			
BUDGETARY INFORMATION:				
BOARD POLICY REFERENCE AND COMPLIANCE:				





United Independent School District Board of Trustees Discretionary Funds Request Form

Fiscal Year 2012-2013

Requesting Campus: Paciano Prada Elementary	×
Campus Principal: Gilbert Castro	· · · · · · · · · · · · · · · · · · ·
Board Member: Ricardo Molina	
Board Member:	
Description of Request:	
2 I Pads, 6 white boards, 2 Avermedia Document Camaras, Paint, 2 LG1080 TVs (for cafeteria-instructional videos), EIKI Lamps.	
Estimated Cost of Request \$5,288.24	Ĭ.
Principal or Director Signature; Shut In Date 01/11/2013	1851
Associate Superintendent Approvat: Yes No No	*
Associate Superintendent Signature: Date	
Superintendent Approval: Yes No	
Superintendent Signature: Date	
Board Member Approval: Yes No	
Board Member Signature: Picardo Malina Date 2/4/13 As per telephone Conversation	De ha
Board Member Approval: Yes No	Mangar
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 Board of Trustees Discretionary Funds Request Form Fiscal Year 2011-2012

Requesting Campus: Pregnancy, Education and Parenting (PEP) Program			
Campus Principal: Annette Winch			
Board Member: Ricardo Rodriguez	****		
Board Member:			
Description of Request: Funds for annual P. E	F.P. Conference.		
<u></u>			
			
Estimated Cost of Request 1,590.00	,		
Principal or Director Signature: <u>awww.</u> Date 1-14-13			
Associate Superintendent Approval: Yes	No		
Associate Superintendent Signature:	Date		
Superintendent Approval: Yes	No		
Superintendent Signature:	Date		
Board Member Approval: Yes	No		
Board Member Signature:	Date		
Board Member Approval: Yes	No		
Board Member Approval: Board Member Signature: Ves	Date 14/13 en Allephone Convergation		
Board Approval: Yes No Date A	approved: Dlompor		

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 2011-2012

Requesting Campus: Pregnancy, Education and Parenting (PEP) Program
Campus Principal: Annette Winch
Board Member: Ramiro Veliz
Board Member:
Description of Request: Funds for annual P.E.P. Conference.
Principal or Director Signature: <u>QWmik</u> Date 1.14.13
Principal or Director Signature:
Associate Superintendent Approval: Yes No
Associate Superintendent Signature: Date
Superintendent Approval: Yes No
Superintendent Signature: Date
Board Member Approval: Yes No
Board Member Signature: Date
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 Board of Trustees Discretionary Funds Request Form Fiscal Year 2012-2013

Requesting Campus: United South Middle School		
Campus Principal: B. Porter		
Board Member: Ramiro Veliz III		
Board Member:		
Description of Request: Music stands	for Band	
	A	
Estimated Cost of Request \$ 1,392.00		_
Principal or Director Signature:	Stata	Date 1/18/13
Associate Superintendent Approval:	Yes No_	
Associate Superintendent Signature:	ET 1 0 000 000 00 100	Date
Superintendent Approval:	Yes	No
Superintendent Signature:		Date
Board Member Approval:	Yes	No
Board Member Signature:		Date
Board Member Approval:	Yes	No
Board Member Signature:		Date
Board Approval: Yes	No Date	e Approved:



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

Requesting Campus: Lyndo B. Johnson High School
Campus Principal: Maggie Martinez
Board Member: Ramiro Veliz, III
Board Member:
Description of Request: Audio System for Cafeteria
Estimated Cost of Request \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Principal or Director Signature: Mague Martine Date 11 5 12
Associate Superintendent Approval: Yes No
Associate Superintendent Signature: Date
Superintendent Approval: Yes No
Superintendent Signature: Date
Board Member Approval: Yes No
Board Member Signature: Date
Board Member Approval: Yes No
Board Member Signature: Date
Board Approval: Yes No Date Approved:
Please zeturn the completed form to the Superintendent's Office for final processing



United Independent School District Board of Trustees Discretionary Funds Request Form Fiscal Year 2012–2013

Requesting Campus:	Andrew Trautmann	Elementary	
Campus Principal:	Kristina Y. Chapa		
Board Member:	Mr. Javier Monten	nayor	
Board Member:		x	
Description of Request	i	<u>. </u>	
		NA-	
Pupil Kits	s for Kinder student	s needed for o	daily instruction.
Estimated Cost of Req	uest \$12,34	1.35	
Principal or Director S		hapa	Date 10 03 12
Associate Superintende		Yes	No
Associate Superintende	ent Signature:		Date
Superintendent Appro	val:	Yes	No
Superintendent Signat	ure:		Date
Board Member Appro	val:	Yes	No
Board Member Signat	ure:		Date
Board Member Appro	val:	Yes	No
Board Member Signat	ure:		Date
Board Approval:	Yes No	Date A	pproved:
Please return the comp	oleted form to the Sup	erintendent's C	Office for final processing.



United Independent School District Board of Trustees Discretionary Funds Request Form Fiscal Year 2012-2013

Requesting Campus: <u>Dr. Henry Cuellar Elementary</u>	
Campus Principal: Melissa S. Shinn	
Board Member: Pat Campos	
Board Member:	
Description of Request: Funds to assist in continuing to imp	olement the Leader in Me school
wide initiative Year I and Year II goals. Funds to include to	rainer of trainers training in the
Spring and materials to continue the initiative.	
Estimated Cost of Request \$5,000 Principal or Director Signature:	
Associate Superintendent Approvai. 1 es No	
Associate Superintendent Signature:	Date
Superintendent Approval: Yes	No
Superintendent Signature:	Date
Board Member Approval: Yes	No
Board Member Signature:	Date
Board Member Approval: Yes	No
Board Member Signature:	Date
Board Approval: Yes No Date A	
Please return the completed form to the Superintendent's C	Office for final processing.