

Exhibit A

Requesting Campus	: Cherish Center			
Principal/Director:	Joseph Lopez			
Originators Email:	jlopez@uisd.net			
Board Member:	Ramiro Veliz, III/Aliza Flores C	Dliveros		
Board Member:			102	
Board Member:	Francisco ' Frank" Castillo/Jav	ier Montemayor	, Jr./Ric	ardo "Rick" Rodriguez
				o purchase incentives; Thanksgiving,
Christmas & Job S	Sites in Partnership Luncheon ar	nd Materials to f	ulfill IE	P Goals for Daily Living Skills.
				· · · · · · · · · · · · · · · · · · ·
Estimated Cost of R	equest: \$ \$ 5,000.00			
Principal or Directo	r Signature: Joseph (	Spef		Date: 9/05/2024
ASSOCIATE SUPE	RINTENDENT APPROVAL:	Yes	-	No
Signature:			Date:	
SUPERINTENDEN	T 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:	

Exhibit A



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

Requesting Campus:	R. C. CENTENO ELE	EMENTARY		Pile
Principal/Director:	Mrs. Cynthia Sierra			
Originators Email:	csierr97@uisd.net		1	
Board Member:	Mr. Gilberto Aguilar	pp. 9-13-24		
Board Member:	Mr. Ramiro Veliz	UR 9-13-24		
Board Member:				
Description of Request:	Due to the teacher	growth at R. C. Ce	enteno Ele	mentary, we would like to have printers
To meet the day to day	ny expectations for stude	nts and teachers.	We ask th	at you please consider our request!
Thank you in advance	e!			
Estimated Cost of Requ	est: \$ 3,253.50			
Principal or Director S	gnature:	va		Date: 9/13/2024
ASSOCIATE SUPERII	NTENDENT APPROVA	L: Yes	_	No
Signature:			Date:	
SUPERINTENDENT A	APPROVAL:	Yes		No
Signature:			Date:	
BOARD MEMBER AP	PROVAL:	Yes/		No
Signature:			Date:	09/13/24
BOARD MEMBER AF	PROVAL:	Yes/	_	No
Signature:			Date:	09/13/24
BOARD MEMBER AF	PROVAL:	Yes		No
Signature:			Date:	
	POADD ADDDO	WAT DATE.		



32242 Paseo Adelanto, Ste. C. San Juan Capistrano, CA 92675-3610 Phone: 800-805-7720 Fax: 949-388-6304 Quote Good IIII 09.30.24

Number: JR-16868

Date: 09/11/2024

Bill To: Accounts Payable Flores United ISD

201 Lindenwood Drive Laredo, TX 78045 Phone: (956)473-8800 Fax: (956)473-8895 Email: lupitaf@uisd.net Ship To: Lupita Flores Centeno Elementary School 2710 La Pita Mangana Road Laredo, TX 78046

Srl	Part Number	Description	Unit Price	Qty.	Price
1	29\$0100	Lexmark MS431DW Laser Printer - Monochrome - 42 ppm Mono - 2400 dpi Print - Automatic Duplex Print - 100 Sheets Input - Wireless LAN - TAA Compliance	\$ 219.00	3	\$ 657.00
2	55B1H0E	Lexmark Unison Original High Yield Laser Toner Cartridge - Black - 1 Pack - 15000 Pages - TAA Compliance	\$ 179.00	3	\$ 537.00
3	40N9320	LEXMARK Color Laser Printer/CS431DW	\$ 335.00	2	\$ 670.00
4	20N1XK0	Lexmark Original Extra High Yield Laser Toner Cartridge - Black - 1 Each - 6000 Pages - TAA Compliance	\$ 109.75	2	\$ 219.50
5	20N1XC0	Lexmark Unison Original Extra High Yield Laser Toner Cartridge - Cyan - 1 Each - 6700 Pages - TAA Compliance	\$ 195.00	2	\$ 390.00
6	20N1XM0	Lexmark Unison Original Extra High Yield Laser Toner Cartridge - Magenta - 1 Each - 6700 Pages - TAA Compliance	\$ 195.00	2	\$ 390.00
7	20N1XY0	Lexmark Unison Original Extra High Yield Laser Toner Cartridge - Yellow - 1 Each - 6700 Pages - TAA Compliance	\$ 195.00	2	\$ 390.00
		7 item(s)	Sub-Tota	1	\$ 3,253.50
			Tax @ 0%	0	\$ 0.00
		_	Freigh	t	\$ 0.00
		<u> </u>	Tota	1	\$ 3,253.50

#### **Payment Details**

Pay by: Company PO Payment Term: 30 days

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. Pricing 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

**Shipping and Delivery Details** 

Shipping via: UPS Ground





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: 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	No
Signature:	Date:
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date:
BOARD APPROVAL DATE:	
Please return the completed form to the Superinter	dent's Office for final processing.



Exhibit A	
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Requesting Campus: United South Middle School	-		42
Campus Principal/Director: Carlos Valdez			THE RECEIPT OF THE PARTY OF THE
Originators Email: grirodriguez@uisd.net			
Board Member: Ricardo "Rick" Rodriguez			
Board Member: Ramiro Veliz, III			
Board Member:			
Description of Request: For purchase of student a	thletics unifor	ms.	
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:	
SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	08/29/24
BOARD MEMBER APPROVAL:	Yes V		No
Signature:		Date:	08/29/24
	200	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	Vo	WAREHOUSE	DATE	PURCHAS	SE ORDER			TEITHO
D6137354	- 00	OD	2024-07-18					NET 30
Style Code	LINE	ITEM	DESCRIPTION	ORDERED	WAREHOUSE	PRICE	UOM	TOTAL PRICE
Permit	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: julieg

Quoted prices reflect our wholesale, discounted prices for payment by cash, check, or net terms only. Quote does not include freight charges unless specified. Prices quoted are subject to change based on vendor pricing.

Merchandise Total	11,836.80
Tax	0.00
Shipping & Handling	595.00
Total	12,431.8

THIS IS NOT A BILL. DO NOT PAY FROM THIS DOCUMENT.

\$ 6,215.90



## United Independent School District Board of Trustees Discretionary Funds

Exhibit A

Fiscal Year 2024-2025

(Amended 9/11/24)

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" Cast	illo		
Board Member:					
Board Member:					
Description of Request: Funds	are to be used	l to increase	Famil	y and Cor	nmunity Engagement
opportunities suc	h as the Parer	nt Learning S	Summ	it, UCOP	, and other related
events/activities.					
Estimated Cost of Request: \$1,1	500.00				
Principal or Director Signature:	11	Home	<i>-</i>	Date:	9/3/24
ASSOCIATE SUPERINTENDENT	TAPPROVAL:	Yes	-	No	
Signature:			Date:		-
SUPERINTENDENT APPROVAL	A.	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:		
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Exhibit A

Requesting Campus: John B. Alexander High School	Dr.
Campus Principal: Ernesto Sandoval, Jr.	-5,
Originator's Email: esandoval@uisd.net	
Board Member: Mr. Frankcisco Castillo	
Board Member:	
Board Member:	
Description of Request: <u>Cadaver Lab Field Trip transportation</u>	, fees, and meals for students and staff
Estimated Cost of Request: \$4,932	
Principal or Director Signature:	Date: September 9, 2024
ASSOCIATE SUPERINTENDENT APPROVAL: Yes	No
Signature:	Date:
SUPERINTENDENT APPROVAL: Yes	No
Signature:	Date:
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date: 09/11/24
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date:
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date:
BOARD APPROVAL DATE: _	
Please return the completed form to the Superint	endent's Office for final processing.

Revised: September 17, 2019



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Barrior St.	8.8	ж	B.F.	ĸ.	1

Requesting Campus: CHERISH CENTER	<u> </u>
Principal/Director: JOSEPH LOPEZ	
Originators Email: jlopez@uisd.net	
Board Member: Francisco "Frank" Castillo District 7	
Board Member:	
Board Member:	
Description of Request: Student Incentives and recognitions.	
Estimated Cost of Request: \$ 1000.00	
Principal or Director Signature: Joseph Pper	Date: 9-11-2024
ASSOCIATE SUPERINTENDENT APPROVAL: Yes	No
Signature:	Date:
SUPERINTENDENT APPROVAL: Yes	No
Signature:	Date:
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date: 09/11/2024
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date:
BOARD MEMBER APPROVAL: Yes	No
Signature:	Date:
BOARD APPROVAL DATE:	



WALKERHANDE T.W.	$\mathbf{E}\mathbf{x}$	hi	bi	t	A
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Requesting Campus: District 7 Campus Principal/Director: N/A grirodriguez@uisd.net **Originators Email: Board Member:** Francisco "Frank" Castillo **Board Member: Board Member:** Description of Request: For printing process and postage for mail out of the District 7 newsletter. Estimated Cost of Request: \$5,500.00 Principal or Director Signature: Date: ASSOCIATE SUPERINTENDENT APPROVAL: Yes No \_\_\_\_ Date: \_\_\_\_\_ SUPERINTENDENT APPROVAL: No Yes Signature: Date: Yes\_ \(\bullet **BOARD MEMBER APPROVAL:** Date: Signature: No \_\_\_\_ **BOARD MEMBER APPROVAL:** Yes Signature: No\_\_\_\_\_ **BOARD MEMBER APPROVAL:** Yes Signature: Date: \_\_\_\_\_ BOARD APPROVAL DATE:



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

Fax: (956)723-5870

**KKP Estimate** 

No: 16748

Date:

9/12/24

U.I.S.D. 201 Lindenwood Dirve

Laredo TX 78045 Phone: 473-6259 Customer No 308

Quantity	Description		Amount
6,700	(OO) 8.5x11 Newsletters, 4/4, 70# Matte Uncoated Opaque Smooth (OO) Newsletters	Text, folded tri-fold,	\$ 2,666.00
20,100	(OO) Chroma Labels, clear with perforation in middle, sealing brochuplace, for total of 20,100 labels.	re in three different	\$ 1,784.00
-			
			-
		-	
	O. C. T. OHTO.	OUDTOTAL	<b>0.4.450.00</b>
Taken by:	Sofia Wanted: Tue 9/17/24	SUBTOTAL	\$ 4,450.00
		TAX	
		TOTAL	\$ 4,450.00

DIGNICT 7

United States Postal Service

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

## Postage Statement - Nonprofit USPS Marketing Mail

-	Pe	ermit Holde	r Name, Addres	ss, Email, Telephone		ing Agent		it holder)	Mail Owner (# c	other than permit holder)
Mailer	20 LA	NITED INDEPENDI NRIQUE RUBIO 11 LINDENWOOD REEDO, TX 78045- Irique rubio@uisd r		RICT	Name,	Address, Telep	hone		Name, Address	
	1	66-473-7900 PS Nonprofit Auth	No. 260304	3225743					USPS Nonprofit Auth. N	No
_		S Cust. Ref. No.		CRID —	_ CRID		C		CRID For Automation Pieces	
	7804	t Office of Mailing	Processing Category	Mailer's Mailing Date Sep 09, 2024 Parcels-Machinable		Agency Cost Code Pieces in Mailing	Statement Seq. No. 162945 SSF Transaction	n #	Enter Date of Address Matching and Coding	No. & Type of Containers
	IX	Permit Imprint Precanceled	Letters Flats	Parcels-Irregular	5,742	reses in Meining	Jon Manager		09/09/2024 For Carrier Route Pieces	O Sacks
		Stamps Metered	Marketing Parcels	☐ CMM	Total W 82.68		Permit # 757		Enter Date of Address Matching and Coding 09/09/2024	5 1 ft. Letter Trays
Mailing		Mail Enclosed within ther Class	Move Update Method	Alternative Method		of a Single Piece			For Carrier Route Price Pieces Enter Date of	6 2 ft Letter Trays
Σ		Bound Printed Matter	Endorsement  NCOA Link	☐ Multiple ☐ OneCode ACS	_ 1 et	ter-size or flat mai	Ipiece contains [		Carrier Route Sequencing	EMM Letter Trays
	$\Gamma$	ibrary Mail Periodicals	ACS	n/a Alternative Address Format		ampaign Mailing	☐ Yes	I⊠ No	For Pieces Bearing a Simplified Address Enter Date of Delivery Statistics	O Flat Trays
	D ^	Media Mail	Combined Mailing  Mixed Class	Marriage Mail Incentive	Election N	Mail - Official Ballot		⊠ No	File or Alternative Method	O Pallets
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ertification USPS Use	Add For   Post (Pe Post   Post	ditional Postage postage affixed, as permit imprint add strasster: Report Tormit Imprint Only, Estimaster: Report Tormit Only, Estimaster: Report Tormit Only, Estimaster: Report Comprises and fees claimed, a who omits information or vacy Notice: For infinature of Mailer or vacy Notice: F	ge Payment (Stadd additional payment dead additional payment total Postage in AIC excluding Simplified total Postage in AIC (EDDM), Permit Implication of the products at the mailing if made by assessed on this mailing assessed on this formation of the payment o	int to net postage due to total postage.  2 125 Addressing (EDDM))  2 208 print Only)  Ing complies with DMM 703 and services advertised are a voting registration official gif an agent signs this for addition, agents may be as accurate, fruthful and cost not contain any matter pray be subject to criminal our Privacy Policy visit tall Weight  Ital Weight  Ital Postage  Letter of the matter of the post of the privacy policy visit tall weight  Letter of the post of the policy visit tall weight the policy visit	(2) the incor substantially it is required to m. the agent liable for any omplete, that rohibited by liand/or civil pit www.usp	Tot djusted Post me derived from the s related to the nonpro or authorized under th certifies that he or sh deficiencies resulting the mail and support aw or postal regulatio enalties, including fine os.com. Printed Name of ENRIQUE a postage figures a Yes N	Total A ral Adjusted tage Simpli rale of any products fit organization's at e is authorized to s from matters with ing documentation in Lunderstand tha as and imprisonmen Mailler or Agent 3 RUBIO at left adjusted fro o If yes, reason	Adjusted Posta iffied Ad s or services suthorized pure egistration A  sign on behalf in their responsibility with anyone when  the support of	d Postage Affixoge Permit Impri Idressing (EDDI Type of Fee: advertised in the mailing is pose within the meaning of tot 1993, and (4) it will agif of the mailer and that the insibility, knowledge or conall postal standards and that of furnishes false or mislead	ed int M)  Inot subject to the Unrelated (139 U S C 3626()(1)(d)(i)(i) (i) (i) (ii) (ii) (ii) (ii) (





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 Consultan	ts
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 Superinten	dent's Office for final processing.





Requesting Campus:	Federal and	State Pro	grams		
Campus Principal/Director:	Adriana P.	Ramirez, l	Executiv	e Directo	r
Originators Email:	ramireza@ı	uisd.net			
Board Member:	Aliza Flores	Oliveros			
Board Member:					
Board Member:					
Description of Request: Funds opportunities su					mmunity Engagement , and other related
events/activities.					
Estimated Cost of Request: \$1, Principal or Director Signature:	Adriano	Kami	7	Date:	9/3/24
ASSOCIATE SUPERINTENDE	NT APPROVAL:	Yes	_	No	
Signature:			Date:		
SUPERINTENDENT APPROVA	L;	Yes		No	
Signature:			Date:		<u> </u>
BOARD MEMBER APPROVAL	.:	Yes_	>	No	
Signature:			Date:		
BOARD MEMBER APPROVAL	:	Yes		No	
Signature:			Date:		
BOARD MEMBER APPROVAL	:	Yes		No	
Signature:			Date:		
BC	DARD APPROVAL	L DATE:			



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

Exhibit A

Fiscal Year 2024-2025

equesting Campus: _UNITED MIDDLE SCHOO	DL		14
incipal/Director: ROSANA ARIZOLA		- 1	
riginators Email:alma.villarreal1@uis	sd.net		
pard Member: Aliza Oliveros		=	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
oard Member:		1	
pard Member:			
escription of Request: School Improvement			
rincipal or Director Signature:	Sla		Date: 9/5/24
SSOCIATE SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:	<del></del>	Date:	
JPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
OARD MEMBER APPROVAL:	Yes/		No
Signature:		Date:	09/09/2024
DARD MEMBER APPROVAL:	Yes		No
Signature:	<del></del> ,	Date:	
OARD MEMBER APPROVAL:	Yes		No
Signature:			

Q

What are you looking for today?

Q Laredo Lowe's ∨ Open until 10 PM Delivery to 78041 ~



Prices, Promotions, styles, and availability may vary. Our local stores do not honor online pricing. Prices and availability of products and services are subject to change without notice. Errors will be corrected where discovered, and Lowe's reserves the right to revoke any stated offer and to correct any errors, inaccuracies or omissions including after an order has been submitted.

#### Cart (11)

**Email Cart** 

**Empty Cart** 

#### Pickup at Laredo Lowe's (5)



Spruce - Spruce SDB190 Duct Boost Fan Indoor Hook-up Dryer...

Item #2423630 Model #SDB190T

Details

Save For Later

Details

Save For Later

#### Pickup

Ready by Tue, Sep 10 (Est.) At Laredo Lowe's

#### Delivery to 78041

- Get it by Tue, Sep 10 Ship to Home
- Get it by Thu, Sep 19 Scheduled Delivery (i) Delivery Scheduling in Checkout

\$279.00



Whirlpool - Deep Water Wash 3.5cu ft High Efficiency Agitator Top...

Item #782472 Model #WTW4816FW

Pickup

Delivery to 78041 Get it by Fri, Sep 13 Scheduled Delivery (1) Delivery Scheduling in Checkout

Ready by Tue, Sep 10

At Laredo Lowe's

Check Other Stores

\$438.00



Was \$699.00

Save \$261.00 Ends Sep 11

Add Services and Protection



Required for Use



These items are necessary for your appliance to function.



EASTMAN 2-Pack 6-ft 3/4-in FHT Inlet x 3/4-in FHT Outlet Stainless Steel Washing Machine Connector



	→ Haul Away \$50.00		Н	ow it Works	
	5-Year \$129.97		Terms	& Coverage	
TELES WITH	Southwire - 6-ft 30-Amp 4-Prong Black Dryer Appliance Power Cord Item #3782041 Model #9156SW8808	Pickup  Ready by Thu, Sep 19  At Laredo Lowe's		\$36.98	×
<ul><li>Details</li></ul>	- 1 +	Delivery to 78041  Get it by Wed, Sep 18 Ship to Home			
Save For Later		Get it by Thu, Sep 19 Scheduled Delivery (1) Delivery Scheduling in Checkout			
Delivery (6)					
45.00	<b>Whirlpool</b> - 7-cu ft Vented Electric Dryer (White)	Pickup		\$438.00 Was \$699.00	×
	Item #670009	Ready Today  At Laredo Lowe's		Save \$261.00	

Delivery to 78041

Get it by Fri, Sep 13 (\$29.00) Scheduled Delivery (1)

Delivery Scheduling in Checkout

Model #WED4815EW

Details

Save For Later

Ends Sep 11

#### Add Services and Protection



FREE Installation with \$55.52 Install Kit.

How it Works

	(2) RELIABILT 1-1/2-in to 4-in Galvanized Adjustable Clamp	\$6.56
(0)		Remove
R	Utilitech Appliance Cord 6-ft 30-Amp 3-Prong Gray Dryer Appliance Power	\$27.48
E)	Cord	Remove
1	Utilitech Dryer Power Cord 6-ft 30-Amp 4-Prong Black Dryer Appliance	\$28.98
13	Power Cord	Remove
C	Lambro Rigiflex Semi-Rigid Silver Flexible Duct for Electric and Gas Clothes	\$19.98
3	Dryer Installation	Remove
□ ¾	Haul Away \$50.00	How it Works

Protection Plans

Terms & Coverage



#### **GET ALL YOU NEED**



\$588.00 \$799.00 Save 26%

\* \* \* \* 149

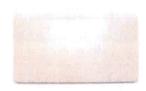
**Whirlpool** 7-cu ft Vented Gas Dryer (White)



\$14.98 \$16.98 Save 11%

\*\*\* 4 46

Arm & Hammer Fresh Burst HE Laundry Detergent (166.5-fl oz)



\$278.00 \$359.00 Save 22%

★ ★ ★ ☆ 233

Whirlpool Universal Laundry Pedestal (White) with Storage Drawer



\$22.58

**★★★★**☆ 15

Tide + Dc Laundry Lowry



Exh	ibit A	
- NOT		
01		
S		

Requesting Campus: Alicia Ruiz Elementary S			
Campus Principal/Director: Monica Zepeda			
Originators Email: monzep@uisd.net		Th	
oard Member: Ramiro Veliz			
Board Member:			
Board Member:			
Description of Request: Classroom printers a	nd toners		
Estimated Cost of Request: \$3,500 Principal or Director Signature:	Spe	da	Date: 9-5-2024
ASSOCIATE SUPERINTENDENT APPROVAL	L: Yes		No
ASSOCIATE SUPERINTENDENT APPROVAL	-		No
ASSOCIATE SUPERINTENDENT APPROVAL  Signature:  SUPERINTENDENT APPROVAL:			
Signature:	Yes	Date:	No
Signature:SUPERINTENDENT APPROVAL: Signature:	Yes	Date:	No
Signature:SUPERINTENDENT APPROVAL: Signature:	Yes	Date:	No
Signature:	Yes	Date:	No
Signature: SUPERINTENDENT APPROVAL: Signature: BOARD MEMBER APPROVAL: Signature:	YesYes	Date:	No
Signature:  SUPERINTENDENT APPROVAL:  Signature:  BOARD MEMBER APPROVAL:  Signature:  BOARD MEMBER APPROVAL:	YesYes	Date:	No



#### UNITED INDEPENDENT SCHOOL DISTRICT

	und/YR	ng 2019 2022 Func		Prog.	Local Option	Proj. Num	Obj.	Sub Object	Amount	Advanta	ge Imaging S	ирріу	
										32242 Pase	eo Adelanto, Ste 0		
											apistrano, CA 92	675-3610	
_			Budget	Codo			_	Accou	int Code	Phone Campus	800-805-7720 Ruiz Elem	Pm #	
										Date	September 5, 2	2024	
urc	nasing Conti	act Appr	oval Co	de:				. D	iscount:				
Co	mmodity Code	It	em#					De	escription		Unit Price Per	Discounted Price Per	Extension Unit Total
		29	S0100	Le	xmark N	/IS431	IDW L	aser Pi	rinter		\$235.00	\$235.00	\$1,880.00
		55E	31H0E	Le	xmark E	Black	toner	cartrid	ge		\$179.00	\$179.00	\$1,611.00
											\$0.00	\$0.00	\$0.00
											\$0.00	\$0.00	\$0.00
				d							\$0.00	\$0.00	\$0.00
											\$0.00	\$0.00	\$0.00
	1 1										\$0.00	\$0.00	\$0.00
	75										\$0.00	\$0.00	\$0.00
											\$0.00	\$0.00	\$0.00
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											\$0.00	\$0.00	\$0.00
C	isposition:	Check		Mail	Picl	kUp _		Fax _				Page Total:	\$3,491.00
	Remarks:											Grand Total:	\$3,491.00
7	epeda						9/	5/24					

Purchasing Dept. 2022



Number: JR-16745

Quotation

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 Fax: (956)473-3399 Ship To: Cindy Hernandez Ruiz Elementary School 1717 Los Presidentes Ave Laredo, TX 78046

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-To	tal	\$ 3,491.00
			Tax @ 0	1%	\$ 0.00
			Freig	ht	\$ 0.00
			То	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. Pricing 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





Requesting Campus:	Federal an	d State Pro	ograms	
Campus Principal/Director:	Adriana P.	Ramirez,	Executiv	e Director
Originators Email:	ramireza@	uisd.net		
Board Member:	Ramiro Ve	liz, III		
Board Member:				
Board Member:				
	uch as the Pare	ent Learnin	ng Summ	y and Community Engagemen it, UCOP, and other related
Estimated Cost of Request: \$1  Principal or Director Signature:	1,500.00	, gamer	)	Date: 9/3/24
ASSOCIATE SUPERINTENDE	NT APPROVAL:	Yes		No
Signature:			Date:	
SUPERINTENDENT APPROVA	AL:	Yes		No
Signature:			Date:	
BOARD MEMBER APPROVAL	L:	Yes_	Ob-	No
Signature:			Date:	9/6/24
BOARD MEMBER APPROVAL	L:	Yes		No
Signature:			Date:	
BOARD MEMBER APPROVAL	L:	Yes		No
Signature:		<u></u>	Date:	
	OARD APPROVA			



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Requesting Campus:	Salinas Elementary School			3
Principal/Director: _	Abraham Rodriguez III			
Originators Email:	abrahamr@uisd.net			
Board Member: Ra	amiro Veliz III			
Board Member:				
Board Member:				
Description of Request classrooms.	: Additional supplies and	materials t	o facilitate si	mall group instruction in Pre-Kinder
Estimated Cost of Req Principal or Director S	0.0.			Date: 9-12-24
	NTENDENT APPROVAL:	Yes		No
SUPERINTENDENT A	APPROVAL:	Yes		No
Signature:			Date:	
BOARD MEMBER A	PPROVAL:	Yes	/	No
Signature:		_	Date:	09/12/2024
BOARD MEMBER A	PPROVAL:	Yes		No
Signature:			Date:	
BOARD MEMBER A	PPROVAL:	Yes	<u> </u>	No
Signature:			Date:	

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

BOARD APPROVAL DATE:



117			
$\mathbf{E}\mathbf{x}$	23 8	111	- 79
History Ann		.,	/-9

Requesting Campus: CHERISH CENTER		
Principal/Director: JOSEPH LOPEZ		
Originators Email: jlopez@uisd.net		
Board Member: Ramiro Veliz III, Distric	t 4	
Board Member:		
Board Member:		
Description of Request: Teacher and studen	nt Incentives and rec	cognitions.
Estimated Cost of Request: \$ 1500.00		
Principal or Director Signature:	pl Oper	Date: 9-11-2024
ASSOCIATE SUPERINTENDENT APPROV	AL: Yes	No
Signature:		Date:
SUPERINTENDENT APPROVAL:	Yes	No
Signature:		Date:
BOARD MEMBER APPROVAL:	Yes	No
Signature:		Date: 09/11/24
BOARD MEMBER APPROVAL:	Yes	No
Signature:		Date:
BOARD MEMBER APPROVAL:	Yes	No
Signature:		Date:

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

BOARD APPROVAL DATE: \_\_\_\_\_

Exhibit A



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

All D					
Adriana P.	Ramirez,	Executive	e Directo	1*	
ramireza@ı	uisd.net				
Gilbert Agu	ilar, Jr.				
Odrians	Ham	4	Date:	9/3/24	
APPROVAL:	Yes		No		
		Date:			
:	Yes		No		
		Date:			
	Yes	Date:			
	Ves				
	Yes		No		
		Date:			
	Gilbert Agu  are to be used has the Paren  Oo.oo  Adrian  APPROVAL:	ramireza@uisd.net  Gilbert Aguilar, Jr.  are to be used to increa h as the Parent Learnin  O0.00  Adrian Dam  APPROVAL: Yes  Yes  Yes  Yes	ramireza@uisd.net  Gilbert Aguilar, Jr.  are to be used to increase Family has the Parent Learning Summ  O0.00  Adrian Dame  APPROVAL: Yes  Date:  Yes  Date:  Yes  Date:  Yes  Date:  Yes  Date:	ramireza@uisd.net  Gilbert Aguilar, Jr.  are to be used to increase Family and Contact the Parent Learning Summit, UCOP  O0.00  Adrian Date:  PAPPROVAL: Yes No  Date:  Yes No  Date:	ramireza@uisd.net  Gilbert Aguilar, Jr.  are to be used to increase Family and Community Engager h as the Parent Learning Summit, UCOP, and other relate  00.00  Arian Plant Date: 9/3/24  TAPPROVAL: Yes No  Date:  Yes No  Date:  Yes No  Date:  Yes No  Date:  Date:  Yes No  Date:  Date:





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

Form Fiscal Year 2024-2025

Requesting Campus:	_UNITED HIGH SCHOOL		<u> </u>	
Campus Principal:	JESSICA C. SALAZAR			
Originators Email:	JCSALAZAR@UISD.NET			
Board Member: G	Gilbert Aguilar – District 1 Boa	ard Member		
Board Member:				
Board Member:				
Description of Reques	st: ATTENDANCE AND IN			
Estimated Cost of Rec	quest: \$ 2,500.00	/		
Principal or Director	Signature:	Hogu		Date: 8 20/14
ASSOCIATE SUPER	INTENDENT APPROVAL:	Yes		No
Signature:			Date:	
SUPERINTENDENT	APPROVAL:	Yes	_	No
Signature:			Date:	
BOARD MEMBER A	APPROVAL:	Yes		No
Signature:			Date:	
BOARD MEMBER A	APPROVAL:	Yes		No
Signature: _			Date:	
BOARD MEMBER A	APPROVAL:	Yes	_	No
Signature: _			Date:	
	BOARD APPROVA	L 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. 1.		
Originators Email:	kgarza@uisd.net			
Board Member: 0	Gilbert Aguilar, Jr.			
Board Member:	1 1 1 1 1 1 1 1 1			
Board Member:				
Description of Reques	t: For Wall Decals to displ	ay UISD's 2024-	2025 Vi	ision and Mission Statements
Estimated Cost of Rec	quest: \$ 1,100.00			
Principal or Director	Signature: Karla Gar	za		Date: 08/21/2024
	INTENDENT APPROVAL:	Yes		No
Signature:			Date:	
SUPERINTENDENT	APPROVAL:	Yes	_	No
Signature:			Date:	
BOARD MEMBER A	PPROVAL:	Yes	_	No
Signature:	1		Date:	
BOARD MEMBER A	PPROVAL:	Yes	_	No
Signature:			Date:	
BOARD MEMBER A	PPROVAL:	Yes		No
Signature:		<u> </u>	Date:	

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

**BOARD APPROVAL DATE:** 

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



**Estimate** 

Estimate No:

1286

Date:

08/12/2024

For: USHS 9Th Grade Campus

kgarza@uisd.net,

karlagarza6047@gmail.com

Code	Description		Quantit	y Rate	Amount
Perforate	d 8 Perforated Windows/E	Door With Custom Design for Vice Princi	pal 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.





Incentives.
Date: 08/21/2024
No
Date:





Date: 08/21/2024
No
Date:





Requesting Campus: Juarez-Lincoln Elementary S	School	· · · · · · · · · · · · · · · · · · ·
ampus Principal: Robert Ortiz		
riginators Email: rortiz@uisd.net		
oard Member: Gilbert Aguilar, Jr.		
oard Member:		
oard Member		
Description of Request: Student and Staff Incent	ives	
	**	i .
Estimated Cost of Request:	000	
		D
rincipal or Director Signature: Robert Ortiz	<u> </u>	Date: 08/21/2024
SSOCIATE SUPERINTENDENT APPROVAL:	Yes	No
Signature:		Date:
UPERINTENDENT APPROVAL:	Yes	No
Signature:		Date:
		/
OARD MEMBER APPROVAL:	Yes	No
Signature:		Date:
OARD MEMBER APPROVAL:	Yes	No
Signature:		Date:
OARD MEMBER APPROVAL:	Yes	No





Requesting Campus: Veterans Memorial Element	ary School		
Campus Principal: Luz Serna Ramirez			
Originators Email: <u>luzserna@uisd.net</u>			
Board Member: Gilbert Aguilar, Jr.			
Board Member:			
oard Member:			
Description of Request: Student and Staff Incent	ives		
Estimated Cost of Request: # 15	2000		
Estimated Cost of Request: # 15	00:		
Principal or Director Signature: Luz Senna R	Camirez		Date: 08/21/2024
SSOCIATE SUPERINTENDENT APPROVAL:	Yes	s. ]	No
Signature:		Date:	
UPERINTENDENT APPROVAL:	Yes/	_	No
Signature:		Date:	
BOARD MEMBER APPROVAL;	Yes		No
Signature:		Date:	
SOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
SOARD MEMBER APPROVAL:	Yes		No



B 3 1			
Ex	hil	hii	ΙД
	LAA	OIL	177

DN 8/21/24

Requesting Campus: Kennedy Zapata F	Elementary School			7
Campus Principal: Yolanda Mauricio				
Originators Email: <u>ymauricio@uisd.n</u>	et crodriguez@uisd.net		: [	
Board Member: Gilbert Aguilar, Jr.				
Board Member:				
Roard Mombors				133
Description of Request: Student and St	toff Incontinue			
Estimated Cost of Dogwood	4 150000			
Estimated Cost of Request:				
Principal or Director Signature: <u>Yold</u>	anda Mauricio		Date: 08/21/2024	<u> </u>
ASSOCIATE SUPERINTENDENT APPI	ROVAL: Yes		No	
Signature:	· · · · · · · · · · · · · · · · · · ·			<u> </u>
0				<del>-                                    </del>
SUPERINTENDENT APPROVAL:	Yes	_	No	
SUPERINTENDENT APPROVAL: Signature:		Date:	No	11
		Date:	No	
Signature:		Date:		
Signature:  BOARD MEMBER APPROVAL:  Signature:		Date:	No	
Signature:  BOARD MEMBER APPROVAL:  Signature:	YesYes	Date:	No	<u> </u>
Signature:  BOARD MEMBER APPROVAL:  Signature:  BOARD MEMBER APPROVAL:	YesYes	Date:	No	<u> </u>





Requesting Campus: Arndt Elementary School			
Campus Principal: Griselda Flores-Ibarra			1
Originators Email: gflores@uisd.net			·
Board Member: Gilbert Aguilar, Jr.			
Board Member:			
Roard Mambary			
Description of Request: Student and Staff Incent	ives		
Estimated Cost of Request:	3,50000		, <u>k</u>
Principal or Director Signature: Griselda Flo	res-Ibarra		Date: 08/21/2024
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:	<u>- , - · · · · · · · · · · · · · · · · · </u>
BOARD MEMBER APPROVAL:	Yes	_	No
Signature:		Date:	
BOARD APPROVA	L DATE:		





Requesting Campus:	Lyndon B. Johnson H. S.			
Campus Principal:	Armando Salazar			Leady Establish
Originators Email:	asalazar1@uisd.net jpalon	no@uisd.net		
Board Member: G	ilbert Aguilar, Jr.			
Board Member:				
Board Member:				
Description of Request	: Students and Staff Inc	centives, Camp	us Improvement/Be	autification, and
Student Attendance I	ncentives.			
Estimated Cost of Requ			4,000.	/Attendance-\$2,000.00)
Total # 13,000.º Principal or Director S		Salazar	Date:	: 08/21/2024
ASSOCIATE SUPERI	NTENDENT APPROVAL	: Yes	No	
Signature:			Date:	
SUPERINTENDENT A	APPROVAL:	Yes	No	
Signature:			Date:	<u> </u>
BOARD MEMBER AI	PPROVAL:	Yes	No_	
Signature:	(H		Date:	
BOARD MEMBER AI	PPROVAL:	Yes	No	
Signature:		<del>-</del>	Date:	
BOARD MEMBER AI	PPROVAL:	Yes	No	
Cianoturos			Date:	. T.

BOARD APPROVAL DATE:





equesting Campus: Salvador Car			
ampus Principal/Director: Dr. Jon a Han	Martin	er	
Originators Email: grirodriguez@uisd.net			
Soard Member: Gilbert Aguilar, Jr.			
Board Member:			
Board Member:			
Description of Request: attendance	e Ince	ntives	
Estimated Cost of Request: \$2,000,00			
	7 41 7 7		D
Principal or Director Signatures			Data:
Principal or Director Signature:	63346		Date:
	Yes		No
	Yes		
ASSOCIATE SUPERINTENDENT APPROVAL: Signature:	Yes	Date:	No
ASSOCIATE SUPERINTENDENT APPROVAL:  Signature:  SUPERINTENDENT APPROVAL:	Yes	Date:	No
ASSOCIATE SUPERINTENDENT APPROVAL:  Signature:  SUPERINTENDENT APPROVAL:  Signature:	Yes	Date:	No
ASSOCIATE SUPERINTENDENT APPROVAL:  Signature:  SUPERINTENDENT APPROVAL:  Signature:  BOARD MEMBER APPROVAL:	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:	YesYesYes	Date:	No No 09/06/24
ASSOCIATE SUPERINTENDENT APPROVAL:  Signature:  SUPERINTENDENT APPROVAL:  Signature:  BOARD MEMBER APPROVAL:  Signature:	YesYesYes	Date:  Date:	No No No No No





Requesting Campus: Lamar Bruni V	<i>l</i> .	<u> </u>
Campus Principal/Director: Clase Flore:	3	
Originators Email: grirodriguez@uisd.net		
Board Member: Gilbert Aguilar, Jr.		
Board Member:		
Board Member:		
Description of Request: Attendance &	clucentives	
Estimated Cost of Request: #1,500,00		
Principal or Director Signature:		Date:
	Yes	No
Signature:	Date:	
SUPERINTENDENT APPROVAL:	Yes	No
Signature:	Date:	
BOARD MEMBER APPROVAL:	Yes	No
Signature:	Date:	- lactors
BOARD MEMBER APPROVAL:	Yes	No
Signature:	Date:	
BOARD MEMBER APPROVAL:	Yes	No
Signature:	Date:	





Requesting Campus: K. Molina		<u></u>	
Campus Principal/Director: Alfredo Po	alapa		
Originators Email: <u>grirodriguez@uisd.net</u>			
Board Member: Gilbert Aguilar, Jr.			
Board Member:			
Board Member:			
Description of Request:	e Inem	tive	2/ Staff incentives
Estimated Cost of Request: 42,000.00		Ţř.	
Principal or Director Signature:			Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	09/06/27
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	Water Land Company of the Company of
Signature:BOARD MEMBER APPROVAL:	Yes	Date:	No





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drogo		
Stoff -	Incentive	
<i>p v</i>		
	Date:	
Yes	No	
	Date:	
		+
Yes	No	
	Date:	
Yes V	No	
	Date: 09/06/24	
Vas	NIo	
	Date:	
Yes	No	
	YesYes	Date:   Date:   No   Date:   No   Date:   No   Date:   No   Date:   Date:



Exhibit A

of anoth

Requesting Campus: Lyndon B. Joh	nson High School		12/2
Campus Principal/Director: Armano	lo Salazar		
Originators Email: jpalomo@uisd.i	net		
Board Member: Gilbert Aguilar, J	r.		
Board Member:			
Board Member:			
Description of Request: Faculty and	staff meeting incentives.	8/26/24	
Estimated Cost of Request: \$722.30  Principal or Director Signature:	Julay	Date:	2/10/21
ASSOCIATE SUPERINTENDENT AP Signature:		No Date:	
SUPERINTENDENT APPROVAL:	Yes	No_	
Signature:	7	Date:	
BOARD MEMBER APPROVAL: Signature:	Yes_ \(\nu\)	No	0/24
BOARD MEMBER APPROVAL:	Yes	No	
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	No	
	<u> </u>		<del>-</del>

## 

WELCOME - MR. ARMANDO SALAZAR & MRS. VERONICA A. GARZA

EARLY COLLEGE - MS. YESENIA SANDOVAL

ATTENDANCE - MR. RAUL NUNO & MR. EDUARDO DAVILA

SAFETY MR. TIMOTHY MCHUGH & MRS. MARIBEL GARCIA PBIS - DR. THELMA SOLIS & MRS. MARIBEL GARCIA GRADING GUIDELINES/TUTORIAL LOGS -

MS. PAULA RAMIREZ

ALPHA WOLVES-STARS and STRIPES -MRS. EMILY GUZMAN, MRS. RAQUEL RAMON & MRS. ANALINE JOHNSON

MAINTENANCE- MRS. GIGI AYALA

TESTING - MS. BRISEIDA MENDOZA, MRS. ALBA RAMOS & MRS. DEBRA HINOJOSA

LIBRARY ANNOUNCEMENTS - MRS. RAQUEL RAMON & MRS. ANALINE JOHNSON

Ms. Diana Morales - Community in Schools.

STUDENT ACTIVITIES - MRS. ROSIE SANTOS

AUGUST 25, 202



Faculty Meeting of TEA "A" Rated:

Lyndon B. Johnson High School

1000 TANA

Peter Piper Pizza! Store #576 4411 HWY 83 S (956) 523-0987

 Host: Phone
 08/26/2024

 LBJ MAIN CAMPUS
 2:46 PM

 REPRINT# 2
 30027

Order Type: Take Out

1 - 4		
50 LSM Large Pizza (08.69)		434.50
(50)Pepperoni		
20 LG Werx (\$17.99)		359.80
(20) Tomato Sauce		
(20)Lrg Original		
	<i>f</i>	
01o-B060 1/2 Off	1	-9.00
	, _	
01o-B0G0 1/2 Off	3	-9.00
	.8	
01o-B060 1/2 Off	OR.	-9.00
	65	
01o-B0G0 1/2 Cff	1000	-9.00
	nyo,	
01o-8060 1/2 Off	60	-9.00
2. E.K., I.		0.00
01o-B060 1/2 Off	A T	-9.00
01 0000 470 055	2	0.00
01o-B0G0 1/2 Off	G .	-9.00
01o-B0G0 1/2 Off	1	-9.00
010-0000 1/2 UTT		3.00

\*\*\*\*\*\* Get \$2 Off LG Pizza \*\*\*\*\*\*

We value your feedback!

Please answer 2 quick questions about!
your recent experience within 7 days!
of 08/26/2024 and receive \$2 off
your next LG/XLG pizza.
Limit one per order.

Go to

| http://www.peterpiperpizza.com/survey| | and enter the 20 digit code below. |

\*

#### | 045 018 300 060 210 776 62 |

Subtotal 722.30
Tax Exempt #UNIIS1 0.00

Take Out Total 722.30

House Acc #UNIIS1

722.30

A TYPING TO

SIGNATURE :\_

Auth/

#### DATE:

### SPED

Name	Signature	Lyndon B. Johnson High School
Charles, Ruby	120	
Cuevas, Mariana		
Escareno, Roxanna	DE	
Garcia, Belinda	(A)	
Garcia, Yaraniz	MA	
Guzman, Elizabeth	a Sincer	
Laurel, Sarah		
Macias, Graciela	15 mains	1
Maldonado, Jennifer	10011	
Martinez, Saul	SIMP	
Morales, Jazmine	2 m	
Ramos, Griselda	0000	
Rodriguez, Alejandra	China Da	Call Value
Wong, Cindy	CVD	
Zambanini, Arek	A) ~	
	117	
	W Part 1 1/ part	
		5 7 7
	The state of the s	
<b>N</b>		

DATE:

## Math

	AVAICE COLD
Name	Signature
Cadena, Abigail	TELLICON.
Fernandez, Gamaliel	reference
Gamboa, Manuel	Mach
Guerrero, Jorge	///
Hernandez, Marisol	malls
Hernandez, Michelle	Michight 17.
Herrera, Jackie	The state of the s
Hinojosa, Luis	Im Abus
Loa, Jonathan	
Lopez, Blanca	
Lopez, Victor	alma 1
Mendez, Daniel	
Minas, Mary	at the
Pacheco, Jose	I COMPTE
Rios, Diana	1
Rizzi, Stefanie	Stelle
	Variable Market
The state of the s	VULVES TO
	TM TM
1980	

## SCIENCE

Amaya, Frieda Camero, Priscilla Chavez, Patricia Clizondo, Agustin Espino, Melissa Gonzalez, Karina Gonzalez, Ritzuko Gutierrez, Jose Lugo, Andrea	Stille 2. Va 2. Egg Wh. Ciu	We see		
Chavez, Patricia Clizondo, Agustin Cspino, Melissa Gonzalez, Karina Gonzalez, Ritzuko Gutierrez, Jose	S. Ora ap Egg Wh. Gu	L ve		
Elizondo, Agustin Espino, Melissa Gonzalez, Karina Gonzalez, Ritzuko Gutierrez, Jose	S. Cla ap Egg Wh. Gu	UG S		
Espino, Melissa  Gonzalez, Karina  Gonzalez, Ritzuko  Gutierrez, Jose	SHUWED			
Gonzalez, Karina Gonzalez, Ritzuko Gutierrez, Jose	the die			
Gonzalez, Ritzuko Gutierrez, Jose	SHURO		A STATE OF THE PARTY OF THE PAR	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT
Gutierrez, Jose	SHUKE	<i>A</i>	A.	
			7,11	
ugo, Andrea	716		WA F	
6	02			
Munoz, Melissa	a Remore		The state of the s	
alacios, Veronica	2			All the second
alcon, Adrianna		A TE ON		A Albania
Renteria, Elizabeth	Cells al-	A		
Rodriguez, Rene	19/2	ALA		
antos, Linda M	u des	Inl	This	
ilva, Cynthia	7413			
ijerina, David		C. Jan		
azquez, Aldo	MAN	\/ F=		
	Total Box			TM
	A CANAL TO HAVE A TO THE			
			T	

#### DATE:

## S.S

Name	Signature
Alvarado, Juan	an Alas Satt
Bondoc, Monica	
Camina, Matthew	With the state of
Carvajal, Ruth	P.C.
De Leon, Sandra	TAA ()
Fernandez, Fabiola	Durp marles
Garcia, Alan	de Atubello
Henry, Lizette	Partles Var
Llamas, Joshua	10/192
Martinez, Esmeralda	
Moreland, Loretta	2ml
Patterson, Ana	A Dala
Rojas, Deyanira	DEC.
Romeo, Enrique	9 BUILDING
Rubio, Chris	COA
Salinas, Trinidad	APPLIES S
Sanchez, Juan	TM
Torres, Ricardo	
Vargas, Victor	20621
×	

	Lyndon B. Johnson High Sch
Name	Signature / //
Arista, Dinorah	Dunda Hita
Alfaro, Tanya	Day
Arwood, Kimberlee	
Castro, Melissa	me
Cruz, Selene	The same of the sa
De la Cruz, Elizabeth	80-6
Gallegos, Lucero	
Garcia, Yadira	3-2
Garza, Elsa	Elga R. Agroser
Garza, Juan	12
Garza, Elizabeth	93H6
Gignac, Melissa	Why had a second
Giron, Gracie	and a
Gonzalez, Laura	The state of the s
Guerrero, Giovanni	
Gutierrez, Samantha 🖊	GM/19/F
Martinez, Gloria	ON TAM
Peche, Devenny	(1) Ceche
Rios, Araceli	
Rodriguez, Jason	
Rodriguez, Maria	6 2
Santos, Sara	MA
Santos, Debra	UJ V
Vigil, Erika	

Name	Signature
Benavides, Gildardo	2727
Buckley, George	G8 3
Camarillo, Estevan	
Carrillo, Michael	11111
Coronado, Roberto	22
Flores, Anthony	THE STATE OF THE S
Galindo, Elena	
Gonzalez, Cristina	Ca Clan
Guerra, Desiree	100
Kaiser-Lopez, Amanda	
Lara, Sabine	Sundan 1
Lozano, Alexis	A COLONIA
Luera, Josue	
Maldonado, Jorge	and the same of th
Martinez- Perez, Sandra	2 No
Martinez, Miguel	
Mendoza, Victor	17 July 19 19 19 19 19 19 19 19 19 19 19 19 19
Moore, Maria del Rocio	Row Move
Nava, Patrick	
Nieto, Alondra	CHA
Prado, Carolina	
Raymond, Brandon	
Segura, Jose	
Silva Eduardo	3.50
Trevino, Gustavo	A CONTRACTOR OF THE PROPERTY O
Velazquez, Diana	19
Zavala, Norberto	

## ELECTIVES

Name	Signature
Brito, Anabel	alknik
Diaz, Martha	11112
Faz, Arlene	C5.0
Flynn, Ryan	
Garcia, Maria	
Garcia, Erik	
Gonzalez, Kevin	a Vicenia
Gonzalez, Sonia	Cont 98
Llano, Cesar	CAGAD
Macias, Oscar	OM
Martinez, Humberto	
Medellin, Ivan	
Montante, Gabriela	
Pena, Rene	
Perez Hernandez, Amanda	Mous
Rodriguez, Andrew	
Rodriguez, Gabriel \	CLVEE
Rodriguez, Emmanuel	TM TM
Rodriguez, Raymond	
Ruiz, Janeth	Janes Di
Swain, Brian	The state of the s
Trevino, Jose	
Tobias, Javier	700
Valencia Salinas, Ana	al Salin
Valenzuela, Jose	X Valny
Waldo, Enrique	U T

# Lyndon B. Johnson High School

### LBJ HIGH SCHOOL ANNEX FACULTY MEETING 8-26-24

-	A	-	-	_
-13	Δ	u	П	-
-				_

· 第二、《新聞歌》》以及《文文···································	7412	DATE	
ALGEBRA	Initial	CTE	Initial
Castillo, Dalila	(S)	Camarillo, Jennifer	Ø
Erazo, Angela		Canales, Cassandra	0
Garza, Maury	W)	Martinez, Erika	10
Mendoza, Vanessa	CM	Brewster, Jennifer	1
Hawkins, Edna	EHA	Flores, Anthony	1
Martinez, Joshua	MINIM	, Gonzalez, Edna	EN
Montemayor, Erika	CAN	Hernandez, Ruby	PH
Montemayor, Lizette	D	Montemayor, Alfredo	
	1	Nava, Adalberto	
		Rendon, Cynthia	a
BIOLOGY	Initial	Ramos, Cesar	
Cantu, Rosemary	Re	FINE ARTS	Initial
Delgado, Alitzah		Barrera-Angco, Jason	B
Herrera, Gilberto		Diaz, Joseph	9
Gidwani, Kavita	X6	Jimenez, Daniela	DA
Lopez, Saul	80	Sandoval Benavides, Krizia	18
Silva, Luis			1
Uribe, Briana	BU		
	0	SPECIAL ED	Initial
ENGLISH	Initial	Flores, Nelda	
Aleman, Paola	PA	Garza, Jose	
Cantu, Angela	PC.	Medina, Mireyda	
Lara, Anna		Rodriguez, Oscar	
Martinez, Jorge	SH	HEALTH & BETTON	
Gonzalez, Ernesto	101	Dupuis, Whitney	w
Prado, Daniela		Gonzalez, Isaac	
Santos, Catherine	0	Martinez, Alejandro	

Sepulveda, Rebecca		Martinez, Gabriella	1
Sosa-Eguia, Camilla	02	Rodriguez, Ramon	
Vela-Garcia, Stephanie	8	Rodriguez, Raymond	
WORLD GEOGRAPHY	Initial	Foreign Language	Initial
Arreazola, Gregorio	GA.	Arzola, Elvia	Eno
Igbokwe, Jenneth	0	Quintanilla, Carolina	COX
Rodriguez, Leticia		Romo, Norma	conf.
Sauceda, Cindy			
Villarreal, Ashly	AMV.		

Maria Some Some Source Sunds.

Vernica A. Gara usgange

Deemorales CIS del



**UISD District 1** 

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

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

Requesting Campus: UISD District 1			W.
Campus Principal/Director: N/A			
Originators Email: <u>grirodriguez@uisd.net</u>	1.5.2		
Board Member: Gilbert Aguilar, Jr.			
Board Member:	7 1		
Board Member:		W 17	
Description of Request: To process, print and ma	il out the Dis	trict 1 New	sletter.
Estimated Cost of Request: \$4,459.05		i Wil	
Principal or Director Signature:	- +		Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes	1.	No
Signature:		Date:	<u> </u>
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	09/10/24
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD APPROVAL	L DATE:		

United States Postal Service

District 1

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

#### Postage Statement - Nonprofit USPS Marketing Mail

	Pe	rmit Holde	r Name, Addres	ss, Email, Telephon		ing Agent		nit holder)	Mail Owner de	ther than permit holder)
Mailer	EN 20 LA	NITED INDEPENDI IRIQUE RUBIO 1 LINDENWOOD REDO, TX 78045- rique rubio@uisd r		TRICT	Name,	Address, Telep	onone		Name, Address	
	10900	6-473-7900 S Nonprofit Auth	No 260304						USPS Nonprofit Auth, N	lo.
5	EPS	Cust Ref No.		CRID 3225743	_ GRID		ologica de la compansión de la compansió		CRID	
	10000	t Office of Mailing 11-9998		Mailer's Mailing Date	Federal	Agency Cost Code	Statement Seq N 143730	0	For Automation Pieces, Enter Date of Address	No. & Type of
		of Postage Permit Imprint	Processing Category	*1achinable	Total # of I	Pieces in Mailing	SSF Transaction	n#	Matching and Coding 08/28/2024	Containers
	1000	Precanceled	Letters Flats	Parcels-Irregular	4,6	160			For Carrier Route Pieces	0 Sacks
	Silve.	Stamps	Marketing	☐ CMM	Total W	10 10	Permit #		Enter Date of Address Matching and Coding	3 1 ft.
0	-	Metered Mail Enclosed within	Parcels  Move Update Method		Woight	of a Single Piece	757		08/28/2024	Letter Trays 2 2 ft.
Mailing	Anot	her Class	Ancillary Service	Alternative Method	1	0.0144 pounds			For Carrier Route Price Pieces, Enter Date of	Letter Trays
2	□ B	lound Printed Matter	Endorsement	Multiple	-	tter-size or flat ma	ilniece contains	DVD/CD	Carrier Route Sequencing	0 Letter Trays
		ibrary Mail	□ NCOA Link	OneCode ACS		other disk.	iipicoc containo	0.00	For Pieces Bearing a	0 Flat Trays
	□ P	'eriodicals	ACS	Address Format	Political Co	ampaign Mailing	☐ Yes	No ⊠ No	Simplified Address Enter Date of Delivery Statistics	
		Media Mail	Combined Mailing  Mixed Class	Marriage Mail Incentive	Election M	Mail - Official Ballo	ts 🗆 Yes	No ⊠ No	File or Alternative Method	0 Pallets
	un's		Single Class	Catalogs	Election N	Mail - Non-Ballot M	laterials  Yes	No No		O Other
	Par	ts Completed	Select all that a	pply): 🖾 A 🖾	B 🗆 C	OD OE O			IL OS ONSA	
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	5	Permit #				Net F	ostage Du	e (Line	1 +/- Lines 2, 3,	4) 805
>			ge Payment (St					William		APPRINT
e Only			dd additional payme additional payment	ent to net postage due to total postage.			Total /	Adjuste	ed Postage Affix	ed
. Us	Pos	tmaster: Report To	otal Postage in AI	C 125		To	tal Adiuste	d Post	age Permit Impri	int
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	100000	centive/Discount C mailer's signature cer		ing complies with DMM 703	3. (2) the inco	me derived from the	sale of any product	s or service	Type of Fees advertised in the mailing is	not subject to the Unrelated
Certification	and any certificential price or wi	26 U.S.C. 513(A) (3) revenue deficiencies fication and agrees to fies that all informations and fees claimed, a ho omits information.	the mailing if made by assessed on this mailir pay any deficiencies in furnished on this form and that the mailing do- requested on this form	r a voting registration official ng If an agent signs this for In addition, agents may be mis accurate, truthful and o	al is required of the second in the agent liable for any complete, that combited by I and/or civil p	or authorized under to certifies that he or so deficiencies resulting the mail and support law or postal regulation renalties, including fir	he National Voter F he is authorized to g from matters with rting documentation on. I understand the	Registration a sign on behalin their resp is comply with at anyone w	Act of 1993, and (4) it will agi alf of the mailer, and that the consibility, knowledge, or con-	trol. The mailer hereby at the mailing qualifies for the
	-	nature of Mailer or	THE RESERVE OF THE PARTY OF THE	out rivacy rolley via			Mailer or Agent RUBIO	Signing Fo		elephone 956-473-7900
-	us.	Weight of a Single	e Piece To	otal Weight	Ari	e postage figures	at left adjusted for	rom mailer		tound Stamp (Required)
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	Mone	Total Pieces	To	otal Postage						
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1	COL	(3) proper comp	letion of postage sta		Ву	(Initials)	I	ime	AM PM	
	To be	(4) payment of a (5) sufficient fun	innual fee; and ds on deposit (if req	nuired)						
		USPS Employee'			Pr	int USPS Employe	ee's Name	-		
3-10		THE RESERVE OF THE PARTY OF THE				Selling to the				



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

Fax: (956)723-5870

**KKP Estimate** 

No: 16739

Date:

9/10/24

Customer No 308

U.I.S.D. 201 Lindenwood Dirve Laredo TX 78045 E-Mail: parcos@uisd.net

Quantity	Description		Amount
4,800	(OO) 8.5x11 Newsletters, 4/4, 70# Matte Uncoated Opaque Smooth (OO) Newsletters	Text, folded tri-fold,	\$ 1,926.05
7,050	(OO) Chroma Labels, clear with perforation in middle, sealing brochur place, for total of 20,100 labels.	re in three different	\$ 1,728.00
			5-1
			1 1 1
	*		
			-
		-	4
		,-	
Takes by	Wented: Sun 0/45/04	CLIDTOTAL	\$ 3,654.05
Taken by	: Sofia Wanted: Sun 9/15/24	SUBTOTAL	\$ 3,054.05
		TAX	¢ 0.654.05
		TOTAL	\$ 3,654.05



#### United Independent School District Board of Trustees Discretionary Funds Request Form

Exhibit A

Fiscal Year 2024-2025

Requesting Campus:	UNITED HIGH SCHO	OOL		
Campus Principal:	JESSICA C. SALAZAR			
Originators Email:	JC SALAZAR@UISD.N	<u>et</u>	t e	
Board Member: J	avier Montemayor – Dist	rict 5 Board Mem	ber	
Board Member:				
Board Member:				
Description of Reques	t: Miscellaneous E	expenses (6499) fo	r Teachers and Staff P	rofessional Development
Estimated Cost of Rec		Drew	Date:	8/20/24
	INTENDENT APPROVA	· ·	No Date:	
SUPERINTENDENT	APPROVAL:	Yes	No	
Signature:			Date:	
BOARD MEMBER A	APPROVAL:	Yes	No	
BOARD MEMBER A	APPROVAL:	Yes	No	, , , , , , , , , , , , , , , , , , , ,
				<del>-</del> .
BOARD MEMBER A	APPROVAL:	Yes	No	
				<u> </u>

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

Exhibit A



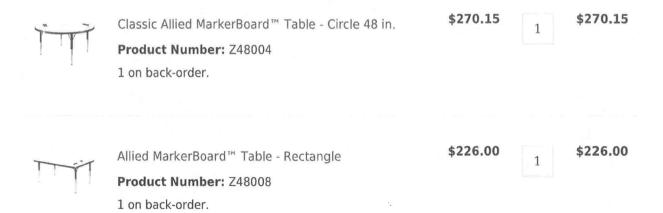
#### United Independent School District Board of Trustees Discretionary Funds Request Form Fiscal Year 2024-2025

Requesting Campus: _	Clark Middle School	ol		
Campus Principal:	Michelle Gomez			
Originator's Email:	mcgomez@uisd.net			
Board Member:	Javier Montemayor	-		
Board Member:				
Board Member:		7		
Description of Request:	Instructional tables fo	r unit, fans for	athleti	cs, media backdrop and
tablecloth for campu	s use.			<i>50</i>
Estimated Cost of Reque	71/11	1.1		Date: 8/28/24
ASSOCIATE SUPERIN	TTENDENT APPROVAL:	Yes	_	No
Signature:			Date:	
SUPERINTENDENT A	PPROVAL:	Yes	_	No
Signature:			Date:	
BOARD MEMBER API	PROVAL:	Yes_		No
Signature:	FREPL		Date:	
BOARD MEMBER API	PROVAL:	Yes	_	No
Signature:			Date:	
BOARD MEMBER API	PROVAL:	Yes	_	No
Signature:			Date:	
	BOARD APPROVAL	L DATE:		

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



#### Cart



Subtotal

\$496.15

Notifications		My Lists Sign In Car
What are you looking for today?		Q
Q Laredo Lowe's ∨		Delivery to
Open until 10 PM		78041 ~
LOWE'S and av	Promotions, styles, and availability may vary. Our local storallability of products and services are subject to change we discovered, and Lowe's reserves the right to revoke any storacies or omissions including after an order has been subtractions.	without notice. Errors will be corrected ated offer and to correct any errors,
Cart (2)		
Email Cart Empty Cart		
Pickup at Laredo Lowe's (2)  Dial Manufacturing -	5300-CFM Pickup	\$1,196.00
3-Speed Indoor/Outd Item #1093193 Model #81070		\$1,170.00
	Delivery to 78041	
— 2 + S598.00/ea	Get it Today Same-Day Delivery ① Order by 2 p.m.	
Save For Later	Get it by Thu, Aug 29 Scheduled Delivery ① Delivery Scheduling in Checkout	
Add a Protection Plan	n	
Protection P	lans	Terms & Coverage
FREE & Easy Returns View Returns Poli	icy	
Lowest Price Guarantee View Details		
Estrastifice oddidities View Details		

https://www.lowes.com/cart

Pickup & Delivery Options View Details

Enter keyword or product number

All. Back to School Buy Again Today's Deats

Account for United Indepen...

Price

\$273.08

Typical price: \$352.09

\$79.01 (22%)

**Educator Price** 

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

TO	P			
FABRIC ACCENT 1	VICTORY WHITE			
FABRIC ACCENT 2	VICTORY GRAY		AA	
FABRIC PRODUCT COLOR	VICTORY NAVY	HUSKIES ( ) HUSKIES		
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



Size	Тор	Bottom	
10x8	1	0	
Total	1	0	

#### Names and Numbers

Туре	Name	#	Size	QTY	SKU
ТОР			10x8	1	CBNMBASS



T 1			
14 157	21	2112	/%
Exl	ш		1-1

Requesting Campus. Doard District 5			<del></del>
Campus Principal/Director: N/A			
Originators Email: <u>grirodriguez@uisd.net</u>			
Board Member: Javier Montemayor			
Board Member:			
Board Member:			. 1
Description of Request: To process, print and ma	ail out the Distri	ct 5 Nev	vsletter.
Estimated Cost of Request: \$3,389.69			
Principal or Director Signature:			Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	_	No
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:	
BOARD 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: 16704

Date:

8/28/24

Customer No 308

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

E-Mail: parcos@uisd.net

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	
			4
Taken by:	Sofia Wanted: Mon 9/2/24	SUBTOTAL	\$ 2,885.00
		TAX	
		TOTAL	\$ 2,885.00



District 5

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

#### Postage Statement - Nonprofit USPS Marketing Mail

Permit Holder Name, Address, Email, Te				ss, Email, Telephon					Mail Owner (If other than permit holder)		
Mailer	20 L/	NITED INDEPEND NRIQUE RUBIO 01 LINDENWOOD AREDO, TX 78045- nrique.rubio@uisd.r		TRICT	Name, Address, Telephone			Name, Address			
	US	66-473-7900 PS Nonprofit Auth.	No. 260304	3225743					USPS Nonprofit Auth.	No	
		S Cust. Ref. No.		CRID —	_ CRID				CRID		
	780	t Office of Mailing 41-9998 e of Postage	Processing Category	Mailer's Mailing Date Aug 28, 2024  Parcels-Machinable		Agency Cost Code Pieces in Mailing	Statement Seq N 143410 SSF Transaction		For Automation Pieces, Enter Date of Address Matching and Coding	No. & Type of Containers	
	Permit Imprint Precanceled Stamps Metered		mit Imprint	2,889	2 889		08/28/2024 For Carrier Route Pieces,	0 Sacks			
			Marketing Parcels	СММ	100000000000000000000000000000000000000	Total Weight			Enter Date of Address Matching and Coding 08/28/2024	3 1 ft. Letter Trays	
Mailing	E M 2 E 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Alternative Method	Weight of a Single Piece			For Carrier Route Price	4 2 ft. Letter Trays			
Ma	Bound Printed Matter  NCOA Link OneCode / n/a Alterna				0.0144 pounds	Injece contains	DVD/CD	Pieces, Enter Date of Carrier Route Sequencing			
			OneCode ACS  n/a Alternative Address Format	Letter-size or flat mailpiece contains DVD/CD or other disk.			For Pieces Bearing a	O Flat Trays			
		Periodicals Media Mail	Combined Mailing	Address Format		Campaign Mailing	☐ Yes		Simplified Address Enter Date of Delivery Statistics File or Alternative Method		
	Γ.	nona man		Marriage Mail Incentive Catalogs		Mail - Official Ballot Mail - Non-Ballot M				0 Other	
_	Pai	rts Completed (	Select all that a		В□С				IL OS ONS	SA	
	1			, pp. 17.			Subtotal				
age	2 Price at Which Postage Affixed (Check one) Correct Lowest N Complete if mailing includes pieces bearing metered/PC Postage or precancele						pcs. x \$		= Postage Affix		
Postage	3 Incentive/Discount Flat Dollar Amou							unt -			
	4							Fee F	lat Dollar Amo	unt +	
	5	Permit #				Net P	ostage Du	e (Line	1 +/- Lines 2, 3	, 4) \$504.69	
^	Ad	ditional Postag	ge Payment (St	ate reason)							
e Only	For postage affixed, add additional payment to net postage due for permit imprint add additional payment to total postage.			Total Adjusted Postage Affi					ced		
PS Use	Postmaster: Report Total Postage in AIC 125 (Permit Imprint Only, Excluding Simplified Addressing (EDDM))					Tot	rint				
ns	Destructor Report Total Postage in AIC 200				Total A	djusted Pos	tage Simpl	ified A	ddressing (EDD	OM)	
		centive/Discount CI							Type of Fee:		
Certification	Busi and any certi certi price or w Priv	ness Income Tax (UB 26 U.S.C. 513(A), (3) revenue deficiencies a fication and agrees to fies that all information as and fees claimed, a the omits information re acy Notice: For Info	IT) and any products a the mailing if made by assessed on this mailing pay any deficiencies. In furnished on this form and that the mailing do equested on this form ormation regarding	and services advertised are a voting registration official ag. If an agent signs this for In addition, agents may be an is accurate, truthful and of	substantiall il is required rm, the agen liable for an complete, that rohibited by and/or civil p	y related to the nonpro or authorized under that it certifies that he or shy y deficiencies resulting at the mail and support law or postal regulation penalties, including fine ps.com.	offit organization's a lie National Voter R lie is authorized to a from matters with ling documentation on. I understand that as and imprisonme	uthorized put legistration A sign on beha in their respo comply with at anyone whent.	urpose within the meaning act of 1993, and (4) it will a lif of the mailer, and that the onsibility, knowledge, or co all postal standards and the no furnishes false or mislea	ntrol. The mailer hereby nat the mailing qualifies for the iding information on this form	
	Sigi	nature of Mailer or A	Agent			Printed Name of ENRIQUE		Signing Fo	orm	Telephone 956-473-7900	
	w	Weight of a Single Piece Total Weight			Ar	Are postage figures at left adjusted from mailer's entries?				Round Stamp (Required)	
	site	and the same of	oounds		pri all [	Yes No If yes, reason:		market and the	Payment Date		
	stalOne	Total Pieces	To	otal Postage							
Only	od-uoi	Presort Verification Performed? (If required) Yes N			No Di	No Date Mailer Notified   Contact					
USPS Use Only	led in	required:									
USP	пріє	pounds  Total Pieces  Total Postage  Presort Verification Performed? (If required)  I CERTIFY that this melling has been inspected for each item below if required: (1) eligibility for postage prices claimed; (2) proper preparation (and presort where required); (3) proper completion of postage statement; (4) payment of annual fee, and			By (Initials) Time			AM			
į.	pe coi				By	by (muais)		110	PM		
	Tob	윤 (4) payment of annual fee; and 은 (5) sufficient funds on deposit (if required)									
		USPS Employee's	Signature		Pr	Print USPS Employee's Name					
-								2000	0 110		



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29.9.24

Requesting Campus:	Federal and	I State Prog	grams	br
Campus Principal/Director:	Adriana P.	Ramirez, E	ecutiv	e Director
Originators Email:	ramireza@	uisd.net		Description of the second seco
Board Member:	Javier Mon	temayor, J	r.	
Board Member:				
Board Member:				
Description of Request: Fund	s are to be used	l to increas	e Famil	y and Community Engagement
opportunities su	ich as the Parei	nt Learning	g Summ	it, UCOP, and other related
events/activities				
Estimated Cost of Request: \$1  Principal or Director Signature:	11.	Pame	7	Date: 9/3/24
ASSOCIATE SUPERINTENDE	NT APPROVAL:	Yes		No
Signature:			Date:	<del></del>
SUPERINTENDENT APPROVA	AL:	Yes		No
Signature:			Date:	
BOARD MEMBER APPROVAL	L:	Yes		No
Signature:			Date:	09/09/2024
BOARD MEMBER APPROVAL	L:	Yes		No
Signature:			Date:	
BOARD MEMBER APPROVAL	L:	Yes		No
Signature:			Date:	





Requesting Campus: Board District o	to to		
Campus Principal/Director: N/A			
Originators Email: <u>grirodriguez@uisd.net</u>			
Board Member: Michelle Molina			
Board Member:			A
Board Member:			
Description of Request: To process, print and ma	il out the Distric	et 6 New	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 Moline	_=	Date:	09/03/24
BOARD MEMBER APPROVAL:	Yes	_	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	<u> </u>	No
Signature:		Date:	·
BOARD 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

Quantity	Description		Amount
2,350	(OO) 8.5x11 Newsletters, 4/4, 70# Matte Uncoated Opaque Smooth (OO) Newsletters	Text, folded tri-fold,	\$ 1,386.18
7,050	(OO) Chroma Labels, clear with perforation in middle, sealing brochuplace, for total of 20,100 labels.	re in three different	\$ 846.00
			,
-			
F			
-		OURTOTAL	<b># 0.000.40</b>
Taken by:	Sofia Wanted: Mon 9/2/24	SUBTOTAL TAX	\$ 2,232.18
		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

Mailing Agent (If other than permit holder) Permit Holder Name, Address, Email, Telephone Mail Owner (If other than permit holder) 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 CRID EPS Cust. Ref. No. CRID CRID Statement Seq. No. For Automation Pieces Post Office of Mailing Mailer's Mailing Date Federal Agency Cost Code No. & Type of Enter Date of Address 78041-9998 Aug 28, 2024 143730 Matching and Coding Containers Parcels-Machinable rocessing Category Total # of Pieces in Mailing SSF Transaction # Type of Postage 08/28/2024 Permit Imprint 0 Sacks Letters. Parcels-Irregular 2.150 Precanceled Stamps For Carrier Route Pieces Flats Enter Date of Address ☐ CMM 3 1 ft. Total Weight Permit # Marketing Matching and Coding Letter Trays Metered 30.9600 Parcels 08/28/2024 For Mail Enclosed within 2 2 ft. Move Update Method Weight of a Single Piece For Carrier Route Price Alternative Method Another Class Letter Trays Pieces, Enter Date of Ancillary Service 0.0144 pounds **EMM** ☐ Multiple Carrier Route Sequencing Endorsement Bound Printed Matter O Letter Trays Letter-size or flat mailpiece contains DVD/CD NCOA Link OneCode ACS or other disk Library Mail n/a Alternative
Address Format For Pieces Bearing a O Flat Trays T ACS Simplified Address Enter Political Campaign Mailing X No Periodicals ☐ Yes Date of Delivery Statistics Combined Mailing 0 Pallets File or Alternative Method Media Mail X No ☐ Yes Mixed Class Marriage Mail Incentive Election Mail - Official Ballots ☐ Yes 0 Other X No Election Mail - Non-Ballot Materials Single Class ☐ Catalogs Parts Completed (Select all that apply): MA MB OC OD DE OF Subtotal Postage (Add parts totals) \$376.12 Price at Which Postage Affixed (Check one) Correct Lowest Neither Postage Affixed pcs. x \$ Complete if mailing includes pieces bearing metered/PC Postage or precanceled stamps 3 Incentive/Discount Flat Dollar Amount Fee Flat Dollar Amount 4 Net Postage Due (Line 1 +/- Lines 2, 3, 4) \$376.12 Permit # 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** Yes No If yes, reason: Total Pieces Total Postage Presort Verification Performed? (If required) Yes **Date Mailer Notified** Contact Use I CERTIFY that this mailing has been inspected for each item below 5 (1) eligibility for postage prices claimed; (2) proper preparation (and presort where required); By (Initials) Time AM (3) proper completion of postage statement; PM (4) payment of annual fee; and (5) sufficient funds on deposit (if required) Print USPS Employee's Name USPS Employee's Signature





Requesting Campus: <u>UNITED HIGH SCHOOL</u>			<u> </u>
Campus Principal: <u>JESSICA C. SALAZAR</u>	14 152		
Originators Email: <u>JCSALAZAR@UISD.NET</u>			4.50
Board Member: Michelle Molina – District 6 Bo	ard Secretary		
Board Member:			
Board Member:			
Description of Request: Teacher Discretionary In	centive		
Estimated Cost of Request: \$ 5350.00			04 -
Principal or Director Signature:	eger .		Date: 8 20 24
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	_	No
Signature: Milkelle Moline		Date:	<del></del>
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	_	No
Signature:	<del>1111</del>	Date:	<del></del>
BOARD APPROVAL	L DATE:		

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



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

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		Date:		
Yes		No		
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Yes		No		
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Yes		No		
	Date:			
Yes		No		
	Date:			_
	Yes Yes Yes	Yes	Date:	Date:





Finely Elementary School

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Campus Principal/Director: Imelda Flores			
Originators Email: <u>imeldaf@uisd.net</u>			
Board Member: Michelle Molina			
Board Member:			
Board Member:		4	
Description of Request: Teachers classroom supp	lies and mater	ials, incent	ives, etc.
			v
Estimated Cost of Request: \$1,950.00			
Principal or Director Signature:			Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:		Date: _	
SUPERINTENDENT APPROVAL:	Yes	-	No
Signature:		Date:	<del></del>
BOARD MEMBER APPROVAL:	Yes	_	No
Signature:	- i - i - i -	Date:	9/13/24
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	<del></del>
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	-
BOARD APPROVA	I. DATE:		

BUARD APPROVAL DATE: \_\_\_\_\_





An	

requesting campus. Tasken Elementary School		
Campus Principal/Director: Liliana Barragan	. '' <u> </u>	
Originators Email: <u>lbarra54@uisd.net</u>		
Board Member: Michelle Molina		
Board Member:	1 56	
Board Member:		
Description of Request: Teachers classroom supp	lies and materia	als, incentives, etc.
		<u></u>
Estimated Cost of Request: \$2,250.00		
Principal or Director Signature:		
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	No
Signature:		Date:
BOARD MEMBER APPROVAL:	Yes	No
Signature:		Date:
ROADD APPROVAL	I DATE.	





FOR CHILDREN				Wr
	Washington Middle School			<b>y</b>
Campus Principal/Di	rector: David Guzman			
Originators Email:	dguzman@uisd.net			
Board Member:	Michelle Molina			
Board Member:				
Board Member:				
Description of Reque	st: Teachers classroom supp	lies and mate	erials, incen	tives, etc.
Estimated Cost of Re	quest. \$1,950.00			
Estimated Cost of Re	quest. \$1,930.00			
Principal or Director	Signature:			Date:
ASSOCIATE SUPER	RINTENDENT APPROVAL:	Yes		No
Signature: _			Date:	
SUPERINTENDENT	APPROVAL:	Yes		No
Signature: _			Date:	
BOARD MEMBER A	APPROVAL:	Yes		No
Signature: _			Date:	9/13/24
BOARD MEMBER A		Yes		No
BOARD MEMBER A	APPROVAL:	Yes	_	No
Signature: _		<del></del>	Date:	

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

**BOARD APPROVAL DATE:** 



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

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lies and mater	ials, incer	ntives, etc.
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		Date:
		! - '
		No
	Date:	
Yes		No
	Date:	
Yes		No
	Date:	9/13/2024
Ves	7	No
	Date:	
Yes	_	No
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	YesYesYesYesYesYes	Yes Date: Yes Date: Yes Date: Yes Date: Yes Date:





Requesting Campus: Kazen Elementary			J.
Campus Principal/Director: Monica Arriaga			
Originators Email: <u>marriaga@uisd.net</u>			
Board Member: Michelle Molina			
Board Member:			
Board Member:			
Description of Request: Teachers classroom supp	lies and materia	ls, incer	
Estimated Cost of Request: \$1,450.00			
Principal or Director Signature:			Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes	-	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	_	No
Signature:		Date:	9/13/2024
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:	<u></u>	Date:	
ROARD APPROVAL	L DATE:	11111	<u> </u>





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Requesting Campus:	United High School			P
Campus Principal/Dir	rector: Jessica Salazar			
Originators Email:	jcsalazar@uisd.net			
Board Member:	Michelle Molina			
Board Member:				
Board Member:				
Description of Reques	t: Teachers classroom supp	lies and mater	rials, incen	tives, etc.
1. 1. 17				
Estimated Cost of Rec	quest: \$3,875.00			
Principal or Director	<del> </del>			Date:
ASSOCIATE SUPER	INTENDENT APPROVAL:	Yes		No
Signature:			Date:	<del></del>
SUPERINTENDENT	APPROVAL:	Yes		No
Signature:			Date:	<u> - 1                                  </u>
BOARD MEMBER A	PPROVAL:	Yes_		No
Signature:			Date:	09/13/24
BOARD MEMBER A	PPROVAL:	Yes		No
Signature:			Date:	
BOARD MEMBER A	PPROVAL:	Yes		No
Signature:	· ·		Date:	

BOARD APPROVAL DATE:





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Requesting Campus: United High 9th School			b.
Campus Principal/Director: Jessica Salazar / Maria	a T. Lopez		
Originators Email: <u>jcsalazar@uisd.net</u> <u>mtlopez</u>	@uisd.net		71. 100p
Board Member: Michelle Molina			
Board Member:			
Board Member:	F-7	14.44	The Control of the Control
Description of Request: Teachers classroom supp	olies and mater	rials, incentives, etc.	
Estimated Cost of Request: \$1,240.00			
Principal or Director Signature:			
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	No	
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes	No	
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	No	
Signature:		Date:	1/13/24
BOARD MEMBER APPROVAL:	Yes	No	
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	No	<u> </u>
Signature:		Date:	·
BOARD APPROVA	L DATE:		

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ith focus on	closing the	GAP for student academic success.
	1 1	
		Date:
Yes		No
	Date:	
Yes		No
	Date:	
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Yes		No
	Date:	9/13/2024
Yes		No
	Date:	
Yes		No
	Date:	
	Yes Yes Yes	Yes Date: Yes Date: Yes Date: Yes Date: Yes Date:



Exhibit A

Requesting Campus: Finley Elementary		
Campus Principal/Director: Imelda Flores		
Originators Email: <u>imeldaf@uisd.net</u>		
Board Member: Michelle Molina		
Board Member:		
Board Member:	* 1	
Description of Request: Supplies and Materials w	ith focus on clos	sing the GAP for student academic success.
*		
Estimated Cost of Request: \$2,000.00		
Principal or Director Signature:		Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	No
Signature:		Date:
SUPERINTENDENT APPROVAL:	Yes	No
Signature:		Date:
BOARD MEMBER APPROVAL:	Yes	No
Signature:		Date: 9/13/2024
BOARD MEMBER APPROVAL:	Yes	No
Signature:		Date:
BOARD MEMBER APPROVAL:	Yes	No
Signature:		Date:
BOARD APPROVAI	L DATE:	



u. I iliana Dannagan			by.
re Liliana Rarragan			
A. Linana Darragan	1	-	
arra54@uisd.net			
nelle Molina		_	
r .		14	
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t: \$2,000.00			
nature:			Date:
ENDENT APPROVAL:	Yes		No
***		Date:	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
PROVAL:	Yes		No
		Date:	
ROVAL:	Yes		No
		Date:	9/13/2024
ROVAL:	Yes		No
		Date:	
ROVAL:	Yes		No
		Date:	
	Supplies and Materials west: \$2,000.00 nature: PROVAL: ROVAL: ROVAL:	Supplies and Materials with focus of st: \$2,000.00	Supplies and Materials with focus on closing the object: \$2,000.00  nature:  TENDENT APPROVAL: Yes  Date:  PROVAL: Yes  ENOVAL: Yes  Date:  ROVAL: Yes  Date:  ROVAL: Yes



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

Requesting Campus: Washington Middle School		Y*
Campus Principal/Director: David Guzman		
Originators Email: dguzman@uisd.net		
Board Member: Michelle Molina		
Board Member:		
Board Member:		
Description of Request: Supplies and Materials w	ith focus on clo	osing the GAP for student academic success.
Estimated Cost of Request: \$2,000.00		
Principal or Director Signature:		Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	No
Signature:		Date:
SUPERINTENDENT APPROVAL:	Yes	No
Signature:		Date:
BOARD MEMBER APPROVAL:	Yes	No
Signature:	165	Date: 09/13/2024
Signature.		Date
BOARD MEMBER APPROVAL:	Yes	No
Signature:		Date:
BOARD MEMBER APPROVAL:	Yes	No
Signature:		Date:
DOADD ADDDOXA	I DATE:	
BOARD APPROVAL	LDAIL:	





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<b>Requesting Campus:</b>	Juan R. Ramirez Middle Sch	hool		
Campus Principal/Dir	rector: Johnny Herrera, Jr.			
Originators Email:	jherre03@uisd.net			
Board Member:	Michelle Molina			1 19
Board Member:				
Board Member:	. 4			
Description of Reques	st: Supplies and Materials w	ith focus	on closing the	GAP for student academic success.
Estimated Cost of Rec Principal or Director				Date:
ASSOCIATE SUPER	INTENDENT APPROVAL:	Yes_		No
Signature:			Date:	
SUPERINTENDENT	APPROVAL:	Yes		No
Signature: _			Date:	
BOARD MEMBER A	PPROVAL:	Yes		No
Signature:			Date:	9/13/2024
BOARD MEMBER A	PPROVAL:	Yes		No
Signature:			Date:	
BOARD MEMBER A	PPROVAL:	Yes	- 1	No
Signature:			Date:	
	ROARD APPROVAL	( DATE.		





Requesting Campus: Kazen Elementary			P
Campus Principal/Director: Monica Arriaga			
Originators Email: <u>marriaga@uisd.net</u>			
Board Member: Michelle Molina			
Board Member:			
Board Member:	31		
Description of Request: Supplies and Materials w	ith focus on	closing the	GAP for student academic success.
Estimated Cost of Request: \$2,000.00			
Principal or Director Signature:			Date:
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	1	No
Signature:	<u> </u>	Date:	9/13/2024
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No





Requesting Campus: United High School			
Campus Principal/Director: Jessica Salazar			
Originators Email: jcsalazar@uisd.net	17.		
Board Member: Michelle Molina			
Board Member:			
Board Member:			
Description of Request: Supplies and Materials w			
Estimated Cost of Request: \$2,000.00  Principal or Director Signature:			Date:
ASSOCIATE SUPERINTENDENT APPROVAL:			No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	9/13/2024
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
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a T. Lopez	
@uisd.net	
ith focus on clo	sing the GAP for student academic success.
	Date:
Yes	No
	Date:
Yes	No
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Yes	No
	Date: 9/13/2024
Yes	No
	Date:
Yes	No
	YesYesYes



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equesting Campus. Onice South Winder School			
Campus Principal/Director: Carlos Valdez			
Originators Email: grirodriguez@uisd.net			
Board Member: Ricardo "Rick" Rodriguez			
Board Member:			
Board Member:			
Description of Request: Coaches athletic uniform	ns.		
Estimated Cost of Request: \$3,504.00			
Principal or Director Signature:	-		Date: 8/21/24
ASSOCIATE SUPERINTENDENT APPROVAL:	Voc		No
Signature:	Yes	Date:	No
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Date.	
SUPERINTENDENT APPROVAL:	Yes	-	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	08/26/24
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
			No
BOARD MEMBER APPROVAL:	Yes		No

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



- ID8812 BLK MEN'S ULTRABOOST ALL SIZES AVAIL @ ADIDAS 9.20.24.
   ID8847 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
Zer.	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	IS1100-001-26	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	MOU	TOTAL PRICE
	10	ID8812-001-51	ULTRABOOST LIGHT 2.0 BLACK 9.5	1	MF	125.00	EA	125.00
	11	ID8812-001-54	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	ME	58.50	EA	58.50
	24	IQ2957-001-330	ULTIMATE365 GOLF PANTS BLACK 4032	1	MF	58.50	EA	58.50

\$3,504.00



Exhibit A

FOR CHILDREN				Mr	
Requesting Campus:	CHERISH CENTER			k	
Principal/Director: jC	OSEPH LOPEZ				
Originators Email:	jlopez@uisd.net	<u></u>			
Board Member: Ri	icardo Rick Rodriguez	- :			
Board Member:					
Board Member:					
Description of Request	t: Field Trip to Main Ev	ent (\$ 2000.00) a	nd Student	t/Staff Incentives (\$ 1000.00)	
			uh.i.		
Estimated Cost of Req	uest: \$ 3000.00				
Principal or Director S		- Ope		Date: 9/05/2024	
ASSOCIATE SUPERI	NTENDENT APPROVAL	: Yes		No	
Signature:			Date:		
SUPERINTENDENT.	APPROVAL:	Yes		No	
Signature:			Date:		
BOARD MEMBER A	PPROVAL:	Yes		No	
Signature:			Date:	09/06/2024	
BOARD MEMBER A	PPROVAL:	Yes		No	
Signature:			Date:		
	DDDOVAL	Yes		No	
BOARD MEMBER A	PPROVAL:	163		No	

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			
Campus Principal: Mr. Ydrogo			
Originators Email: matias.ydrogo@uisd.net	<u>نىدائىن</u>	n.ir	
Board Member: Ricardo "Rick" Rodriguez	The second		
Board Member:			
Board Member:			
Description of Request: Teacher/Staff Appreciat	ion Week and fo	r Studen	t Incentives PBIS
Estimated Cost of Request: \$1,500			
Principal or Director Signature: Matia	s Ydrogo		Date: 09/5/24
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	_ 141	No
Signature:		Date:	
SUPERINTENDENT APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes V		No
Signature:		Date:	Sept. 4, 2024
BOARD MEMBER APPROVAL:	Yes		No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes	- T	No

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

Revised: July 13, 2022





rederar and St	ate Program	3	
Adriana P. Ra	mirez, Execu	tive Director	
ramireza@uis	d.net		M*-
Ricardo "Rick	" Rodriguez		
00.00 Julian	Pamy	Date:	9/3/24
APPROVAL: Y	es	No	1 2 5
*	Da	te:	
Y	es	No	_
	Da	te:	
Y	es_	No	
	_ Da	te: 9/6/2	24
Y	es	No	
	_ Da	te:	
Y	es	No	
	Da	ite:	
	Adriana P. Ra ramireza@uise Ricardo "Rick are to be used to h as the Parent I  O0.00 APPROVAL: Y  Y  Y	Adriana P. Ramirez, Execuramireza@uisd.net  Ricardo "Rick" Rodriguez  are to be used to increase Farma as the Parent Learning Sum  O0.00  APPROVAL: Yes  Da  Yes  Da  Yes  Da  Yes  Da	Adriana P. Ramirez, Executive Director ramireza@uisd.net  Ricardo "Rick" Rodriguez  are to be used to increase Family and Come as the Parent Learning Summit, UCOP,  00.00    Date:



Exh	ibit A	
100	1	-
DAV		

Requesting Campus: Alicia Ruiz Elementary		
Campus Principal/Director: Monica Zepeda		
Originators Email: monzep@uisd.net		<u> </u>
Board Member: Ricardo Rodriguez		
Board Member:	- L	
Board Member:	1	
Description of Request: Dance Team Uniforms		
	. }	
Estimated Cost of Request: \$3,750  Principal or Director Signature:	D. O.	Date: 9-5-2024
The part of Director Signature.	Sprace	
	Yes	No
ASSOCIATE SUPERINTENDENT APPROVAL: Signature:		No
ASSOCIATE SUPERINTENDENT APPROVAL: Signature:		No
ASSOCIATE SUPERINTENDENT APPROVAL:  Signature:  SUPERINTENDENT APPROVAL:  Signature:		No
ASSOCIATE SUPERINTENDENT APPROVAL:  Signature:  SUPERINTENDENT APPROVAL:  Signature:	Yes	No  Date:  No  Date:
ASSOCIATE SUPERINTENDENT APPROVAL:  Signature:  SUPERINTENDENT APPROVAL:  Signature:  BOARD MEMBER APPROVAL:  Signature:	Yes	No  Date:  No  Date:  No  Date:  O 9 / 0 4 / 20 24
ASSOCIATE SUPERINTENDENT APPROVAL:  Signature:  SUPERINTENDENT APPROVAL:  Signature:  BOARD MEMBER APPROVAL:  Signature:	YesYes	No  Date:  No  Date:  No  Date:  O 9 / 0 4 / 20 24
ASSOCIATE SUPERINTENDENT APPROVAL:  Signature:  SUPERINTENDENT APPROVAL:  Signature:  BOARD MEMBER APPROVAL:  Signature:	YesYes	



Exhibit	A	
No.		
		•

Requesting Campus: Alicia Ruiz Elementary			1
Campus Principal/Director: Monica Zepeda			
Originators Email: monzep@uisd.net			
Board Member: Ricardo Rodriguez			and the second second
Board Member:			
Board Member:			
Description of Request: Teacher/Staff Incentives			
Estimated Cost of Request: \$6,250	7.14.		
	Λ <i>1</i>		G C 2001
Principal or Director Signature: Manual	Spide		Date: 9-5-2024
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes	_	No
Signature:	<u> </u>	Date:	
WIDDINGS TO FAUT A BOD ON A I	V		Nr.
SUPERINTENDENT APPROVAL:	Yes	-	No
Signature:		Date:	
BOARD MEMBER APPROVAL:	Yes/	_	No
Signature:		Date:	09/04/2024
BOARD MEMBER APPROVAL:	Vac	-	No
	Yes		No
Signature:		Date:	41
			/
BOARD MEMBER APPROVAL:	Yes	147	No



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

Fiscal Year 2024-2025

	Ex	hibit	A
L	20	+	
2	1		

equesting Campus:	Zaffirini Elementa	ry		
rincipal/Director:	Claudia Y. Benavides			
riginators Email:	cbenavid@uisd.net			
oard Member:	Rick Rodriguez			
oard Member:				
oard Member:				South and side dismissal area. Will
escription of Reque assist in ensur	est: Purchase of canopies ang that our staff and stud	ents are prote	ur outdoor) ected from t	front and side dismissal area. Will the weather conditions -excessive
heat and rain.				
Estimated Cost of Re	11/2 1	a JBe	nml	Date: 9/9/2024
	RINTENDENT APPROVAL			No
				No
SUPERINTENDEN	T APPROVAL:	Yes		No
SUPERINTENDEN Signature:	T APPROVAL:		Date:	N0
Signature:BOARD MEMBER	APPROVAL:	Yes	Date:	
Signature:BOARD MEMBER Signature:	APPROVAL:	Yes	Date:	No
Signature: BOARD MEMBER Signature: BOARD MEMBER	APPROVAL:	Yes	Date:	No
BOARD MEMBER Signature: BOARD MEMBER	APPROVAL:	Yes	Date:	No 09/09/2024 No

BOARD APPROVAL DATE:



Exhibit A

or sel

Requesting Campus: A	ntonio Gonzalez Midd	le School			by	
Principal/Director: Arac	eli Garza					
Originators Email: a	racelig@uisd.net mon	ica.segura@uisd	.net			
Board Member: Ricar	do "Rick" Rodriguez					
Board Member:						
Board Member:						
Description of Request:	Campus Faculty & St	aff Incentive				
A STATE OF THE STA						Y
Estimated Cost of Reques	M	up .		Date:	9/24	
ASSOCIATE SUPERINT	ENDENT APPROVAL	L: Yes		No		37.
Signature:			Date:	A Trickery		
SUPERINTENDENT API	PROVAL:	Yes		No		
Signature:			Date:		et et i	
BOARD MEMBER APPR	OVAL:	Yes V	/	No		
Signature:			Date:	09/0	79/24	_
OARD MEMBER APPR	OVAL:	Yes	3, 7	No		
Signature:			Date:			_
OARD MEMBER APPR	OVAL:	Yes		No		

#### INVOICE 771

550" Manherson perodriguest@live.com "187-47 From

Print Name

Part Kindrague: 950-04-45"5

Date

Friday.			40.0	141 6 90
Print to the second second	The second	STREET, STREET		100 643 100
F T LELVE A T	2. A. P. A.	E. L. C. C. F.	100 100 100	

Tel Cel 956-473-7001 GONZALEZ MIDDLE SCHOOL Customer Email MONICA SEGURA Contact Pick up: Event Time: 10:30 AM Delivery Guests. Serving Time Unit Price [otal Description Quantity 7.00 \$ 805.00 CHICKEN BREAST W POBLANO SAUCE 113 POBLANO PASTA AND MEDLEY VEGIES DISPOSABLE PLATES AND CUTERY 55.00 S SERVING, SET UP, CLEAN UP Sub Total 8 Balance \$80,00 Tax Dep.1 Dep 2 Delivery SC Dep 3 Grand Total \$ Dep 4 860.00

Please be aware that our food may contain or come into contact with common allergens

Signature

All events require a 100% 30 days before event. Rodriguez Catering Co. is not responsible

for food left unattended at home business or on the outside of any premises. 3% Charge on credit cards will be applied. I have understood all regulations and by signing below acknowledge. (Deposit not refundable)



### United Independent School District Board of Trustees Discretionary Funds Request Form

Exhibit A

Fiscal Year 2024-2025

equesting Campus: Antonio Gonzalez I	Widdle School	×	
Principal/Director: Araceli Garza			
Originators Email: <u>aracelig@uisd.net</u>	monica.segura@ui	d.net	
Board Member: Ricardo "Rick" Rodrig	guez		
Soard Member:			
oard Member:			
Description of Request: Security Camera	s for improved cam	pus security	
stimated Cost of Request: \$ \$4,254.00	\ \	1.1	
rincipal or Director Signature:	Lava	Date: 992	-
	90		
SSOCIATE SUPERINTENDENT APPRO	OVAL: Yes	No	
Signature:		Date:	
UPERINTENDENT APPROVAL:	Yes	No	ij
Signature:	affilia e	Date:	
OARD MEMBER APPROVAL:	Yes	No	
Signature:		Date: 09/09/24	
		Date	
OARD MEMBER APPROVAL:	Yes	No	
Signature:		Date:	
DARD MEMBER APPROVAL:	Yes	No	



Quote expires in 30 days.

**QUOTE # Q24-0210** 

Page 1 of 1

To: United Isd Attn: Casey King Of: (956) 473-6249 Cel: (956) 286-6454

Date: September 4, 2024 Email: cking@uisd.net

Ref: Guadalupe Lopez- Cam 32mp For Gym

Loc: Antonio Gonzalez Middle School - 5208 Santa Claudia Ln. Laredo, Tx 78043

Quantity	Description	Unit Price	Amount
1	AVIGILON 32C-H5-A-4MH 4X8MP 3.3-5.7MM ANALYTIC'S CAMERA MODULE	\$ 2,695.00	\$ 2,695.00
1	AVIGILON H5AMH-AD-PEND1 ADAPTER PENDANT MOUNT H5MH	\$ 150.00	\$ 150.00
1	AVIGILON H5AMH-DO-COVR1 SURFACE / PENDANT MOUNT H5MH	\$ 150.00	\$ 150.00
1	AVIGILON WLMT-1001 WALL MOUNT FOR LARGE PENDENT CAMERA	\$ 89.00	\$ 89.00
1	AVIGILON H4AMH-AD-IRIL1 ACCESSORY, IR RING, H4MH	\$ 295.00	\$ 295.00
1	AVIGILON H4-MT-CRNR1 CORNER H4A H4SL H4PTZ H3MH MOUNT	\$ 150.00	\$ 150.00
1	INSTALLATION & CONFIGURATION OF CAMERAS.	\$ 400.00	\$ 400.00
1	CAT. 6 PLENUM CABLE RUN <300' INTERIOR: INCLUDES 2 ATLAS JACKS, 1-PORT LEVITON SURFACE MOUNT BOX W/RACEWAY, LABEL, TESTED.	\$ 325.00	\$ 325.00
state and local made in writing responsible for	and workmanship furnished under this proposal shall comply with the rules set forth by the regulations governing such work. Any changes made in the specifications above shall be prior to start of job and as evidence of the agreement. M1 Networks, Inc. shall not be held any loss, damage or delay due to causes beyond M1 Networks, Inc. control. M1 Networks will eneral liability as set forth by the State and Local Government and agreement between M1	Subtotal	\$ 4,254.00
Networks, Inc. a Sincerely,		Total	\$ 4,254.00

M1 Networks



Exhibit A

Super,

Requesting Campus.	United South Middle School		100	
Campus Principal/Di	rector: <u>Carlos Valdez</u>			
Originators Email:	carlosv@uisd.net			
Board Member:	Ricardo "Rick" Rodriguez			
Board Member:				
Board Member:				
Description of Requ 2023-2024 projected	est: These monies will he A rating and to get broadcaste	e used for tea rs for our footb	cher inc	entives that will help us celebrate our s at the SAC and/or Kruger Field.
Estimated Cost of Re	quest: \$4,500.00	/		
Principal or Director	Signature:			Date: 9/10/24
ASSOCIATE SUPER	RINTENDENT APPROVAL:	Yes		No
Signature: _			Date:	
SUPERINTENDENT	APPROVAL:	Yes		No
Signature: _			Date:	
BOARD MEMBER A	APPROVAL:	Yes		No
Signature: _			Date:	09/10/24
BOARD MEMBER A	APPROVAL:	Yes		No
Signature: _			Date:	
BOARD MEMBER A	APPROVAL:	Yes		No
Signature: _			Date:	
	BOARD APPROVAL	L DATE:		



Exhibit A

equesting Campus: United South Middle School				
Campus Principal/Director: <u>Carlos Valdez</u>	1404			1/5
Originators Email: agarza29@uisd.net				
Board Member: Ricardo "Rick" Rodriguez				
Board Member:				
Board Member:	90-1			
Description of Request:To purchase footballs an	d caps fo	or studen	its.	
This and Control Downston at 2 000 00				
Estimated Cost of Request: \$2,000.00				0/11/2
Principal or Director Signature:				Date: 9/10/2024
ASSOCIATE SUPERINTENDENT APPROVAL:	Yes			No
Signature:			Date:	
	2000			
SUPERINTENDENT APPROVAL:	Yes			No
Signature:			Date:	
BOARD MEMBER APPROVAL:	Yes _	V		No
Signature:			Date:	9/10/24
BOARD MEMBER APPROVAL:	Vos			No
			Data	No
Signature:			E B SA E CO *	
Signature:			Date	
Signature: BOARD MEMBER APPROVAL:	Yes _		Date	No



Exhibit	A	
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guez		
ing printers and toner for tea	m leaders and school cou	nselor.
00.00		
81)	Date: <u>%</u>	10/19
APPROVAL: Yes	No	
: Yes	No	_
	Date:	
Yes	No	
	Date:09/	10/24
Yes	No	_
	Date:	
Yes	No	_
	Date:	
	ing printers and toner for tea	Date: 9/   Date: 9/   Date: 9/       Date: 9/     Date: