



UNITED INDEPENDENT SCHOOL DISTRICT AGENDA ACTION ITEM

TOPIC: Approval of Requests from Board Members in re: Use of Board Trustees Discretionary

Funds for Various Projects/Campuses

SUBMITTED BY: Aliza Flores-Oliveros **OF:** Board President

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: _____

DATE ASSIGNED FOR BOARD CONSIDERATION: May 15, 2019

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

RATIONALE:

BUDGETARY INFORMATION:

POLICY REFERENCE & COMPLIANCE:



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2018-2019

Requesting Campus: Salinas Elementary

Campus Principal: Abraham Rodriguez III

Board Member: Ramiro Veliz

Board Member: _____

Board Member: _____

Description of Request: Request \$1,000 for Salinas honor society club members to purchase polo shirts and end of the year medals.

Estimated Cost of Request \$1000.00

Principal or Director Signature: [Signature] Date 4-2-19

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ Date _____

Board Member Approval: Yes ☒ No _____

Board Member Signature: Brusilda Rodriguez for Mr. Ramiro Veliz Date 4-24-19

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ Date _____

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ Date _____

Board Approval: Yes _____ No _____ Date Approved: _____

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

SILK SCREEN & EMBROIDERY

the.sports.center@hotmail.com

SALESMANS ORDER FORM

16732

DATE _____

Customer Signature

Date



**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2018-2019**

Requesting Campus: District 5 Campuses

Campus Principal: _____

Board Member: Javier Montemayor, Jr.

Board Member: _____

Description of Request: EOY 2018-2019, Incentives for Teacher Appreciation Week

Nye, Trautmann, Clark, and A. Gutierrez Elementary Schools. Trautmann, Trautmann 6- Grade,

Clark, and United Middle Schools.

Estimated Cost of Request: \$357.50

Principal or Director Signature: Javier Montemayor, Jr. Date: 05/06/2019

SUPERINTENDENT APPROVAL: Yes _____ No _____

Signature: _____ Date: _____

BOARD MEMBER APPROVAL: Yes ☒ No _____

Signature: Javier Montemayor, Jr. by Griselda Rodriguez Date: 5/06/19

BOARD MEMBER APPROVAL: Yes _____ No _____

Signature: _____ Date: _____

BOARD MEMBER APPROVAL: Yes _____ No _____

Signature: _____ Date: _____

BOARD APPROVAL DATE: _____

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



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2018-2019

Requesting Campus: J.B.J. MULLER ELEMENTARY

Campus Principal: MAYRA N. RAMIREZ

Board Member: ROBERTO RAMIREZ

Board Member: _____

Board Member: _____

Description of Request: Homework planners for students to keep them organized and have communication/
documentation with parents thru the planners since students and parents sign the planner on a daily basis.

Estimated Cost of Request: \$3,232.50

Principal or Director Signature: _____

MAYRA Ramirez

Date: _____

5/3/19

ASSOCIATE SUPERINTENDENT APPROVAL: Yes _____ No _____

Signature: _____

Date: _____

SUPERINTENDENT APPROVAL: Yes _____ No _____

Signature: _____

Date: _____

BOARD MEMBER APPROVAL: Yes ☒ No _____

Signature: Briselda Rodriguez for Juan Roberto Ramirez

Date: 5/08/19

BOARD MEMBER APPROVAL: Yes _____ No _____

Signature: _____

Date: _____

BOARD MEMBER APPROVAL: Yes _____ No _____

Signature: _____

Date: _____

BOARD APPROVAL DATE: _____

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

Page 1 to 1

Date: 5/3/19

19-20 STUDENT PLANNER ORDER FORM

Order online or complete and sign this order form. Phone orders not accepted. Call 800-516-8339 with questions.
Mail order to: P.O. Box 2110, Kearney, NE 68848 or Fax: 800-570-1767 Do NOT fax press-ready material.

For Office Use Only - 1/19 web

Order # _____
Date Rec'd _____

School Name JBS Muller Elementary
District Name Unitelisd
Contact Name Angela Solis Title Secretary
School Mailing Address 4430 Muller Mem. Blvd.
City, State, Zip LDG, TX. 78045
Ship Address (if different, No PO Boxes) _____
Ship City, State, Zip _____
School Ph () 956 473-3900 Fax () 956 473-3999
Home Ph () 956 726-0595 Cell () 956 337-0199
Email (required) _____

Proof Contact (Provide ALL contact info)

Name _____ Fax () _____
Home Ph () _____ Cell () _____
Home Email (required) _____
Work Email (required) _____

Bill Attention to:

☐ PO# (opt.) _____ ☐ Invoice Us
☐ Pay by credit card, go to www.schoolmate.com.
Early Invoice by _____ / _____ / _____ Signature Required Below
☐ Please send me email updates, reminders, and special offers from School Mate®

A CHOOSE PLANNER - Check only 1 product code below. Submit extra order form(s) for additional product(s).										B QUANTITY	
PLANNER TYPE	Kindergarten	Primary	Elementary	Middle School	High School	Updated Agenda	Dated Agenda	Classic	Scholar	# Student Planners	
Value Planners	<input type="checkbox"/> KGA	<input type="checkbox"/> PRA	<input type="checkbox"/> ELA	<input type="checkbox"/> MSA	<input type="checkbox"/> HSA	<input type="checkbox"/> UDA	<input type="checkbox"/> AGA	<input type="checkbox"/> CLA	<input type="checkbox"/> SRA	650	
Custom Planners	<input type="checkbox"/> KGB	<input type="checkbox"/> PRB	<input checked="" type="checkbox"/> ELB	<input type="checkbox"/> MSB	<input type="checkbox"/> HSB	NA	<input type="checkbox"/> AGB	<input type="checkbox"/> CLB	<input type="checkbox"/> SRB		
Custom with Handbooks	<input type="checkbox"/> KGC	<input type="checkbox"/> PRG	<input type="checkbox"/> ELG	<input type="checkbox"/> MSC	<input type="checkbox"/> HSC	NA	<input type="checkbox"/> AGC	<input type="checkbox"/> CLC	<input type="checkbox"/> SRC		
										# Teacher Editions (TE) + ... <small>(NA for Unclassed Agenda (UDA))</small>	-
										# Total Planners (TP) =	650

C VALUE PLANNERS - See Price Chart C p. 2

\$ _____ x Total Planners (TP) (25 min. or less, 60 min. for UDA) ... = \$ _____

KGA PRA ELA MSA HSA UDA AGA CLA SRA

Continue on to sections H and I.

D CUSTOM PLANNERS (with or without Handbooks) - See Price Chart D p. 2

\$ 3.00 x Total Planners (TP) (60 min. or less) ... = \$ _____

KGB KGC PRB PRG ELB ELG MSB MSC HSB HSC AGB AGC CLB CLC SRB SRC

Continue on to sections E, F, G, H, and I.

E COVERS - For Custom Planners only. Select a cover design and complete the Cover Wording (also indicate if years are to be printed) and Mascot below.

1. ☐ Poly-Pro™ Cover with school name/mascot in black ink: Design # P. 805 FREE

2. ☐ Full-Color Agenda Cover - For AGB and AGC only with school name/mascot in black ink: # FC- FREE

3. ☐ Religious Cover with school name/mascot in black ink: # R- FREE

4. ☐ One-Color Cover - Indicate 1 standard ink: FREE

☐ #C _____ ☐ Repeat last year's, change year ☐ Our own design uploaded

5. ☐ Multicolor or Photo Cover - Indicate 2 standard inks: TP x 25c = \$ _____

☐ #T _____ ☐ Repeat last year's, change year ☐ Our own design uploaded

☐ Photo Cover # F _____ ☐ Own photo OR ☐ Photo mascot # _____ ☐ Repeat last year's design, change year

Cover Wording: JBS Muller Elementary ✓ print 2019-2020

Mascot: Online mascot # fat x ☐ Own mascot ☐ Repeat last year's mascot

6. ☐ Custom Back Cover ☐ Our own design uploaded OR ☐ Repeat last year's design TP x 25c = \$ _____

F OPTIONS & TEACHER AIDS - For Custom Planners only. All options ordered will be included in both Student Planners and Teacher Editions.

Only options available for AGB & AGC are 4, 5, and 6. Only option available for CLB, CLC, SRB & SRC is 6.

1. ☐ Hall Pass Sheet ... TP x 12c = _____ 2. ☐ Year-Rnd. Suppl. TP x 25c = _____ → bind in ☐ front of planner ☐ back of planner

3. ☐ Char. Ed. Suppl. ... TP x 25c = _____ 4. ☐ Vinyl Pouch ... TP x 25c = _____ 5. ☐ Planning Stickers ... TP x 20c = _____

6. ☐ Inserts ☐ IN1 ☐ IN2 ☐ IN3 ☐ IN4 # Total Inserts _____ x 25c x TP = \$ _____

Options for Teacher Editions (TE) only - will be placed in all TEs ordered.

☐ Grade Records ... TE x 85c = _____ ☐ Lesson Plans (NA for HSB, HSC, SRB, or SRC) TE x 85c = _____

G HANDBOOK PAGES - For Custom Planners only.

Note: 1 page is 1 side of a sheet of paper. # Total Custom Pages _____ x 4c/page (3c for HSC, SRC & AGC) x TP = \$ _____

☐ Repeat last year's pages ☐ Press-ready pages enclosed ☐ PDF uploaded ☐ Typesetting needed # pages _____ x \$25/page = \$ _____

H EXTRAS - Available for ALL planners & agendas (Value and Custom).

☐ Page Marker Rulers - Must order for all, no partials. TP x 20c = \$ _____

☐ Wall Charts - Case contains 5 wall charts (same level; must order by full case) # cases _____ x \$25 = \$ _____

Order will not be processed without a signature.

Sign Here [Signature] Date 5/3/19

By signing, you agree to School Mate's Terms & Conditions on p. 3.

I SHIPPING & ORDER TOTALS

Subtotal = \$ 1,950.00

☐ RUSH Production - 4 weeks (Custom Planners only) - add 20% (\$75 min.) = \$ _____

Shipping - (AK, HI, APD, FPO call for pricing) 48 states 45c/planner = \$ 292.50

Pretax Total = \$ 2,242.50

State Tax (NE and FL only, if applicable) = \$ _____

Delay Ship (opt.) ☐ Apr 19 ☐ May 31 ☐ June 28 ☐ July 5 ☐ July 12 ☐ July 19 ☐ July 26 ☐ Aug 2 ☐ Aug 9 ☐ Aug 16 ☐ Aug 23 ☐ Aug 30

TOTAL 2,242.50

Special Instructions: NE & FL orders only. In NE, pay sales tax. Nebraska orders must attach if you have any. Submit Form 1.3 and Florida orders must submit Form DR-17 or DR-14.

19-20 STUDENT PLANNER ORDER FORM

Order online or complete and sign this order form. Phone orders not accepted. Call 800-516-8339 with questions.
Mail order to: PO Box 2110, Kearney, NE 68848 or Fax: 800-570-1767 Do NOT fax press-ready material.

For Office Use Only - 1/19 web

Order # _____
Date Rec'd _____

School Name JBJ Muller Elementary
District Name United ISD
Contact Name Angela Solis Title Secretary
School Mailing Address 4430 Muller Mem Blvd
City, State, Zip Ldr. TX 78045
Ship Address (if different, No PO Boxes) _____
Ship City, State, Zip _____
School Ph (954) 473-3900 Fax (954) 473-3999
Home Ph (954) 726-0595 Cell (954) 337-0199
Email (required) ASolis@USD.net

Proof Contact (Provide ALL contact info)

Name _____ Fax (_____) _____
Home Ph (_____) _____ Cell (_____) _____
Home Email (required) _____
Work Email (required) _____

Bill Attention to:

☐ PO# (opt.) _____ ☐ Invoice Us
☐ Pay by credit card, go to www.schoolmate.com.
Early Invoice by _____/_____/_____
☐ Please send me email updates, reminders, and special offers from School Mate®

Signature Required Below

A CHOOSE PLANNER

Check only 1 product code below. Submit extra order form(s) for additional product(s).

PLANNER TYPE	Kindergarten	Primary	Elementary	Middle School	High School	Undated Agenda	Dated Agenda	Classic	Scholar	
Value Planners	<input type="checkbox"/> KGA	<input type="checkbox"/> PRA	<input type="checkbox"/> ELA	<input type="checkbox"/> MSA	<input type="checkbox"/> HSA	<input type="checkbox"/> UDA	<input type="checkbox"/> AGA	<input type="checkbox"/> CLA	<input type="checkbox"/> SRA	# Student Planners <u>275</u>
Custom Planners	<input type="checkbox"/> KGB	<input checked="" type="checkbox"/> PRB	<input type="checkbox"/> ELB	<input type="checkbox"/> MSB	<input type="checkbox"/> HSB	NA	<input type="checkbox"/> AGB	<input type="checkbox"/> CLB	<input type="checkbox"/> SRB	# Teacher Editions (TE) + ... _____
Custom with Handbooks	<input type="checkbox"/> KGC	<input type="checkbox"/> PRC	<input type="checkbox"/> ELG	<input type="checkbox"/> MSC	<input type="checkbox"/> HSC	NA	<input type="checkbox"/> AGC	<input type="checkbox"/> CLC	<input type="checkbox"/> SRC	# Total Planners (TP) = ... <u>275</u>

B QUANTITY

C VALUE PLANNERS

See Price Chart C p. 2.

\$ _____ x Total Planners (TP) (25 min. order 60 min. for UDA) ... = \$ _____
KGA PRA ELA MSA HSA UDA AGA CLA SRA
Continue on to sections H and I.

D CUSTOM PLANNERS

(with or without Handbooks) - See Price Chart D p. 2.

\$ 3.15 x Total Planners (TP) (50 min. order 100 min. for UDA) ... = \$ _____
KGB KGC PRB PRC ELB ELG MSB MSC HSB HSC AGB AGC CLB CLC SRB SRC
Continue on to sections E, F, G, H, and I.

E COVERS

For Custom Planners only. Select a cover design and complete the Cover Wording (also indicate if years are to be printed) and Mascot below.

- ☒ Poly-Pro™ Cover with school name/mascot in black ink: Design # P802 FREE
 - ☐ Full-Color Agenda Cover - For AGB and AGC only with school name/mascot in black ink: # FC FREE
 - ☐ Religious Cover with school name/mascot in black ink: # R FREE
 - ☐ One-Color Cover - Indicate 1 standard ink: _____ FREE
☐ #C _____ ☐ Repeat last year's, change year ☐ Our own design uploaded
 - ☐ Multicolor or Photo Cover - Indicate 2 standard inks: _____ TP x 25c = \$ _____ (\$40 minimum)
☐ #T _____ ☐ Repeat last year's, change year ☐ Our own design uploaded
☐ Photo Cover # F _____ ☐ Own photo OR ☐ Photo mascot # _____ ☐ Repeat last year's design, change year
- Cover Wording: JBJ Muller Elementary ☒ Print 2019-2020
Mascot: Online mascot # Fal 8 ☐ Own mascot ☐ Repeat last year's mascot
- ☐ Custom Back Cover ☐ Our own design uploaded OR ☐ Repeat last year's design TP x 25c = \$ _____ (\$40 minimum)

F OPTIONS & TEACHER AIDS

For Custom Planners only. All options ordered will be included in both Student Planners and Teacher Editions.

- Only options available for AGB & AGC are 4, 5, and 6. Only option available for CLB, CLC, SRB & SRC is 6.
- ☐ Hall Pass Sheet ... TP x 12c = _____
 - ☐ Year-Rnd. Suppl. TP x 25c = _____ → bind in ☐ front of planner ☐ back of planner
 - ☐ Char. Ed. Suppl. ... TP x 25c = _____
 - ☐ Vinyl Pouch ... TP x 25c = _____
 - ☐ Planning Stickers ... TP x 20c = _____ = \$ _____
 - ☐ Inserts ☐ IN1 ☐ IN2 ☐ IN3 ☐ IN4 # Total Inserts _____ x 25c x TP = \$ _____
- Options for Teacher Editions (TE) only - will be printed in all TEs ordered.
☐ Grade Records ... TE x 85c = _____ ☐ Lesson Plans (NA for HSB, HSC, SRB, or SRC) TE x 85c = _____ = \$ _____

G HANDBOOK PAGES

For Custom Planners only.

Note: 1 page is 1 side of a sheet of paper. # Total Custom Pages _____ x 4c/page (3c for HSC, SRC & AGC) x TP = \$ _____
☐ Repeat last year's pages ☐ Press-ready pages enclosed ☐ PDF uploaded ☐ Typesetting needed: # pages _____ x \$25/page = \$ _____

H EXTRAS

Available for ALL planners & agendas (Value and Custom).

- ☐ Page Marker Rulers - Must order for all, no partials TP x 20c = \$ _____
- ☐ Wall Charts - Case contains 5 wall charts (same level; must order by full case) # cases _____ x \$25 = \$ _____

I SHIPPING & ORDER TOTALS

Subtotal = \$ 866.25
☐ RUSH Production - 4 weeks (Custom Planners only) - add 20% (\$75 min.) = \$ 123.75
Shipping - (AK, HI, APD, FPO call for pricing) 48 states 45c/planner = \$ _____
Pre-tax Total = \$ _____
State Tax (NE and FL only, if applicable) = \$ _____
Delay Ship (opt 1): ☐ Apr 19 ☐ May 31 ☐ June 28 ☐ July 5 ☐ July 12 ☐ July 19
☐ July 26 ☐ Aug 2 ☐ Aug 9 ☐ Aug 16 ☐ Aug 23 ☐ Aug 30
990.00
TOTAL

Order will not be processed without a signature.

Sign Here

Angela Solis

Date 5/3/19

By signing, you agree to School Mate's Terms & Conditions on p. 3

Special Instructions: NE & FL orders only. To avoid paying sales tax, Nebraska orders must attach if you have any. Submit Form 13 and Florida orders must submit form CR-17 or CR-14.



United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2018-2019

Requesting Campus: LYNDON B. JOHNSON HIGH SCHOOL

Campus Principal: ARMANDO SALAZAR

Board Member: RAMIRO VELIZ, JR.

Board Member: _____

Board Member: _____

Description of Request: FUNDS WILL BE USED FOR SCHOOL BEAUTIFICATION

Estimated Cost of Request: \$3200.00

Principal or Director Signature: _____

Date: May 9, 2019

ASSOCIATE SUPERINTENDENT APPROVAL: Yes _____

No _____

Signature: _____

Date: _____

SUPERINTENDENT APPROVAL: Yes _____

No _____

Signature: _____

Date: _____

BOARD MEMBER APPROVAL: Yes _____

No _____

Signature: Ramiro Veliz, III

Date: 5/10/19

BOARD MEMBER APPROVAL: Yes _____

No _____

Signature: _____

Date: _____

BOARD MEMBER APPROVAL: Yes _____

No _____

Signature: _____

Date: _____