

No. _____



UNITED INDEPENDENT SCHOOL DISTRICT AGENDA ACTION ITEM

TOPIC Approval of Requests from Ricardo Rodriguez for Use of Board of Trustees Discretionary Funds
for Antonio Gonzalez Middle School and United South Middle School for \$20,000

SUBMITTED BY: Ricardo Rodriguez **OF:** Board Member

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: _____

DATE ASSIGNED FOR BOARD CONSIDERATION: March 24, 2010

RECOMMENDATION:

It is recommended that the United ISD Board of Trustees approval a requests from Ricardo Rodriguez for Use of Board of Trustees Discretionary for Antonio Gonzalez Middle School and United South Middle School for \$20,000.

RATIONALE:

BUDGETARY INFORMATION

BOARD POLICY REFERENCE AND COMPLIANCE:



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2009-2010**

Requesting Campus: Antonio Gonzalez Middle School
Campus Principal: Adriana P. Ramirez
Board Member: [Signature]
Board Member: [Signature] Ricardo Rick Rodriguez
Description of Request: _____

Estimated Cost of Request 15,000.⁰⁰
Principal Signature: Adriana P. Ramirez Date 2/26/10
Board Member Approval: Yes / No
Board Member Signature: _____ Date _____
Board Member Signature: _____ Date _____
Superintendent Signature: _____ Date _____
Board Approval: Yes No Date Approved: _____

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 2009-2010**

Requesting Campus: United South Middle School

Campus Principal: Mrs. Selma J. Santos

Board Member: Ricardo Rodriguez

Board Member: Ricardo Rodriguez

Description of Request: Our library has original furniture since 1991. Several of our tables and chairs are damaged beyond repair. Therefore, with this allocation, we will be replacing the damaged furniture with new furniture.

Estimated Cost of Request 5,000.00

Principal Signature: S. J. Santos **Date** 3-2-10

Board Member Approval: Yes ☐ No ☐

Board Member Signature: [Signature] **Date** 3/2/10

Board Member Signature: [Signature] **Date** 3/2/10

Superintendent Signature: [Signature] **Date**

Board Approval: Yes ☐ No ☐ **Date Approved:**

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