

No. _____



UNITED INDEPENDENT SCHOOL DISTRICT AGENDA ACTION ITEM

TOPIC Approval of Request for Use of Board of Trustees Discretionary Funds for Malakoff Elementary
For \$15,000, Col. Santos Benavides Elementary for \$10,000, Borchers Elementary for \$10,000 and Matias De
Llano Elementary for \$15,000

SUBMITTED BY: John Bruce **OF:** Board President

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: _____

DATE ASSIGNED FOR BOARD CONSIDERATION: June 18, 2008

RECOMMENDATION:

RATIONALE:

BUDGETARY INFORMATION

BOARD POLICY REFERENCE AND COMPLIANCE



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2007-2008**

Requesting Campus: Dr. M. E. Malakoff Elementary

Campus Principal: Anna R. Torres

Board Member: John Bruce

Board Member: _____

Description of Request: Library books, refrigerator, two way
radios, table cloth with school logo to be
used for awards day and job fairs, and
tables for awards day.

Estimated Cost of Request \$ 15,000.00

Principal Signature: *Anna R. Torres* **Date** 5/14/08

Board Member Approval: Yes No

Board Member Signature: *John Bruce* **Date** 5-14-08

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 2007-2008**

Requesting Campus: Colonel Santos Benavides School

Campus Principal: Dr. Myrtha Villarreal

Board Member: _____

Board Member: John Bruce

Description of Request: To purchase materials
for TAKS preparation in grades 1st-5th.
materials include workbooks and diagnostic
assessments which are valuable tools
in determining the needs of our students.

Estimated Cost of Request \$ 10,000.00

Principal Signature: [Signature] Date 5-14-08

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 2007-2008**

Requesting Campus: Charles Borchers Elementary

Campus Principal: Dinorah Wickstrom

Board Member: John Bruce

Board Member: _____

Description of Request: <u>Eiki light bulbs (250.00 each)</u>	<u>1,250.00</u>
<u>Accelerated Reading tests</u>	<u>2,000.00</u>
<u>Earobics (200.00 each)</u>	<u>2,000.00</u>
<u>Sound System for gym including Microphoes that are hanging from stage and cordless</u>	<u>4,750.00</u>

Estimated Cost of Request 10,000.00

Principal Signature: *D. Wickstrom* **Date** 5/15/08

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.



UNITED INDEPENDENT SCHOOL DISTRICT

Charles Borchers Elementary
Dinorah Wickstrom
Principal

May 14, 2008

Dear Mr. John Bruce:

We at Charles Borchers Elementary are very grateful and honored to be given this opportunity to receive a large amount of money from you to purchase many much needed materials and items our school requires to better service our students. We want to thank you for your gratitude and thoughtfulness!

1. Eiki light bulbs (250.00 each)	1,250.00
2. Accelerated Reading test	2,000.00
3. Earobics (200.00 each)	2,000.00
4. Sound System for gym including microphones that are hanging from stage and cordless.	
	<u>\$4,750.00</u>
	\$10,000.00

Sincerely,
Dinorah Wickstrom
Dinorah Wickstrom
Principal



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2007-2008

Requesting Campus: Matias De Llano, Jr. Elem.

Campus Principal: Maria Elva Campos

Board Member: Mr. John Bruce

Board Member:

Description of Request:

[Blank lines for description of request]

Estimated Cost of Request \$15,000.00

Principal Signature: Maria Elva Campos Date 5/15/08

Board Member Approval: Yes No

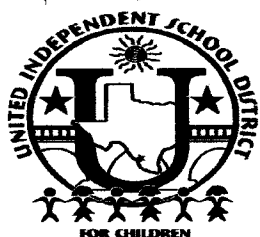
Board Member Signature: John Bruce Date 5-15-08

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.



UNITED INDEPENDENT SCHOOL DISTRICT Purchase Requisition

Vendor Name and Address

Page _____ to _____

GOPHER
220 24TH AVENUE NW

FUND/YR FUNC.	ORG.	PROGRAM CODE	LOCAL OPTION NUMBER	PROJECT NUMBER	OBJECT	SUB OBJECT	AMOUNT
BUDGET CODE					ACCOUNT CODE		

OWTONNA, MN 55060-0998

Phone No: _____

Campus: MATIAS DE LLANO ELEM Rm NO: _____

Date: _____

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
1		NUMBERED BASES (SET OF 4)	41.95	41.95
2		ULTRA COMPLETE ELECTRIC INFLATORS	79.95	159.90
2		TIMER STOP WATCH	29.95	59.90
1		CONE COVERS NUMBERS SET OF 10	15.95	15.95
1		RAINBOW CONES SET OF 6	61.95	61.95
1		NUMBERED PINNIES SET OF 12 ORANGE	34.95	34.95
1		NUMBERED PINNIES SET OF 12 PURPLE	34.95	34.95
1		BALL RACK WITH 4 TIERS	74.95	74.95
1		PUMP UP GOALS (2)	49.95	99.90

DISPOSITION: Pick-up Mail Check FAX # _____ PAGE TOTAL 584.40

REMARK: EQUIPMENT NEEDED IN P.E. GRAND TOTAL 584.40

ORIGINATOR (PRINT) _____ DATE _____

BUDGET COORDINATOR _____ DATE _____

ADMINISTRATOR SIGNATURE _____ DATE _____

OTHER _____ DATE _____



UNITED INDEPENDENT SCHOOL DISTRICT

Purchase Requisition

Page ____ to ____

Vendor Name and Address

FUND/YR FUNC.	ORG.	PROGRAM LOCAL PROJECT CODE OPTION NUMBER	SUB OBJECT	OBJECT	AMOUNT

GOPHER
 220 24TH AVENUE NW
 OWTONNA, MN 55060-0998
 Phone No: _____
 Campus: MATIAS DE LLANO ELEM Rm NO: _____
 Date: _____

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
1	SET	HOP ALONG BOUNCERS SMALL (SET OF 6)	109.00	109.00
1	SET	HOP ALONG BOUNCERS MED (SET OF 6)	129.00	129.00
1	SET	JUMP ROPE SYSTEM SET	239.00	239.00
1		RAINBOW FOOTBALLS OFFICIAL SIZE	79.95	79.95
1	SET	RESISTANCE TUBINA SET (SET OF 6)	44.95	44.95
1		BASKETBALL SIZE 5 (SET OF 6)	56.95	56.95
1		BASKETBALL SIZE 6 (SET OF 6)	59.95	59.95
1		BASKETBALL SIZE 7 (SET OF 6)	62.95	62.95
1		PLAYGROUND BALLS 8.5 DIA	49.95	49.95
1		SOCCER BALLS SIZE 5 (SET OF 6)	59.95	59.95
3		SOCCER BALLS SIZE 5	10.95	32.85
1		SOFT PLAY FOOTBALLS SIZE 4 SET OF 6	30.95	30.95
1		HULA HOOPS 24" DIA (SET OF 12)	59.95	59.95
1		PLASTIC DISC SET OF 6	15.95	15.95
4		LAZER PUK	4.95	19.80
10		BASKEBALL NETS (6)OUTSIDE (4) INSIDE	6.50	65.00

DISPOSITION: Pick-up Mail Check FAX # _____ PAGE TOTAL 1,116.15

REMARK: EQUIPMENT NEEDED IN P.E. GRAND TOTAL 1,116.15

ORIGINATOR (PRINT)	DATE	BUDGET COORDINATOR	DATE
ADMINISTRATOR SIGNATURE	DATE	OTHER	DATE



UNITED INDEPENDENT SCHOOL DISTRICT Purchase Requisition

Page ___ to ___

Vendor Name and Address

BEST BUY

FUND/YR FUNC. ORG. PROGRAM LOCAL PROJECT SUB
CODE OPTION NUMBER OBJECT OBJECT AMOUNT

BUDGET CODE

ACCOUNT CODE

LAREDO, TEXAS

Phone No: _____

Campus: MATIAS DE LLANO ELEM Rm NO: _____

Date: _____

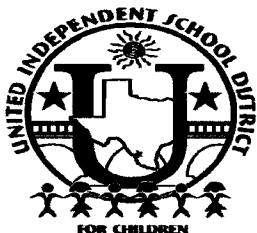
QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
1		I POD		300.00
1		I POD BSE		150.00

DISPOSITION: Pick-up Mail Check FAX # PAGE TOTAL 450.00

REMARK: NEEDED FOR P.E. GRAND TOTAL 450.00

ORIGINATOR (PRINT) _____ DATE _____
ADMINISTRATOR SIGNATURE _____ DATE _____

BUDGET COORDINATOR _____ DATE _____
OTHER _____ DATE _____



UNITED INDEPENDENT SCHOOL DISTRICT Purchase Requisition

Page _____ to _____

Vendor Name and Address

FUND/YR FUNC. ORG. PROGRAM LOCAL PROJECT SUB
CODE OPTION NUMBER OBJECT OBJECT AMOUNT

WAL-MART

LAREDO, TEXAS

Phone No: _____

Campus: MATIAS DE LLANO ELEM Rm NO: _____

Date: _____

BUDGET CODE

ACCOUNT CODE

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
2		ICE COOLERS	39.95	79.90
100		NERF BLS	3.99	399.00

UNITED PRICE WITH DISCOUNT EXTENSION

DISPOSITION: Pick-up Mail Check FAX # _____

PAGE TOTAL 478.90

REMARK: NEEDED FOR P.E.

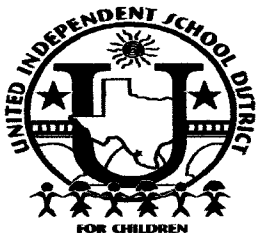
GRAND TOTAL 478.90

ORIGINATOR (PRINT) _____ DATE _____

BUDGET COORDINATOR _____ DATE _____

ADMINISTRATOR SIGNATURE _____ DATE _____

OTHER _____ DATE _____



UNITED INDEPENDENT SCHOOL DISTRICT Purchase Requisition

Page ____ to ____

Vendor Name and Address

FUND/YR FUNC.	ORG.	PROGRAM LOCAL PROJECT CODE	OPTION NUMBER	SUB OBJECT	OBJECT	OBJECT	AMOUNT
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SAMS

BUDGET CODE

ACCOUNT CODE

LABEDO TEXAS

Phone No: _____

Campus: MATIAS DE LLANO ELEM Rm NO: _____

Date: _____

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
15	908973	LIGHT WHITE FOLDING TABLES 8"	72.78	1,091.70
4	992135	LIGHT WHITE FOLDING TABLES 4"	43.86	175.44

DISPOSITION: Pick-up Mail Check FAX # _____

PAGE TOTAL 1,267.14

REMARK: _____

GRAND TOTAL 1,267.14

ORIGINATOR (PRINT) _____

DATE _____

BUDGET COORDINATOR _____

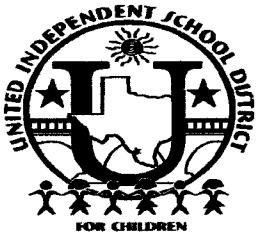
DATE _____

ADMINISTRATOR SIGNATURE _____

DATE _____

OTHER _____

DATE _____



UNITED INDEPENDENT SCHOOL DISTRICT Purchase Requisition

Page ____ to ____

Vendor Name and Address

FUND/YR FUNC.	ORG.	PROGRAM LOCAL PROJECT CODE OPTION NUMBER	OBJECT	OBJECT	AMOUNT	SUB		

USI, INC
98 FORT PATH RD

MADISON, CT 06443

Phone No: _____

Campus: MATIAS DE LLANO ELEM Rm NO: _____

Date: _____

BUDGET CODE

ACCOUNT CODE

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
12		E 36-0327 12" LAMINATING FILM	12.49	149.88
		SOURCE CODE # EC 36HAB2		

DISPOSITION: Pick-up Mail Check FAX # _____ PAGE TOTAL 149.88

REMARK: _____ GRAND TOTAL 149.88

ORIGINATOR (PRINT) _____ DATE _____

BUDGET COORDINATOR _____ DATE _____

ADMINISTRATOR SIGNATURE _____ DATE _____

OTHER _____ DATE _____



UNITED INDEPENDENT SCHOOL DISTRICT
Purchase Requisition

Page ____ to ____

Vendor Name and Address

FUND/YR FUNC. ORG. PROGRAM LOCAL PROJECT CODE OPTION NUMBER OBJECT OBJECT AMOUNT SUB

DELL MARKETING L P
ONE DELL WAY

ROUND ROCK TX 78622

Phone No: _____

Campus: MATIAS DE LLANO ELEM **Rm NO:** _____

Date: _____

BUDGET CODE

ACCOUNT CODE

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
2		NOTEBOOK W SERVICES (LAP TOPS)	1,328.28	2656.56
		RFP 007-2007		

DISPOSITION: Pick-up Mail Check FAX # _____ **PAGE TOTAL** 2,656.56

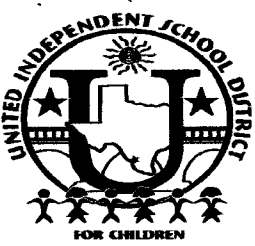
REMARK: _____ **GRAND TOTAL** 2,656.56

ORIGINATOR (PRINT) _____ DATE _____

BUDGET COORDINATOR _____ DATE _____

ADMINISTRATOR SIGNATURE _____ DATE _____

OTHER _____ DATE _____



UNITED INDEPENDENT SCHOOL DISTRICT Purchase Requisition

Page _____ to _____

Vendor Name and Address

FUND/YR FUNC. ORG. PROGRAM LOCAL PROJECT SUB
CODE OPTION NUMBER OBJECT OBJECT AMOUNT

AUDIO VISUAL AIDS
2903 N. FLORES

SAN ANTONIO, TEXAS

Phone No: _____

Campus: MATIAS DE LLANO ELEM Rm NO: _____

Date: _____

BUDGET CODE

ACCOUNT CODE

UNITED PRICE WITH DISCOUNT EXTENSION

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
3		LC-XB24 LCD PROJECTOR 2500 LUM XGA	870.00	2,610.00
3		AVERVISION 300 AF AVER MEDIA DOCUMENT CAMERA	657.00	1,971.00
		QUOTE # 00570		

DISPOSITION: Pick-up Mail Check FAX # _____ PAGE TOTAL 4,581.00

REMARK: NEW TEACHERS (GROWTH) GRAND TOTAL 4,581.00

ORIGINATOR (PRINT) _____ DATE _____

BUDGET COORDINATOR _____ DATE _____

ADMINISTRATOR SIGNATURE _____ DATE _____

OTHER _____ DATE _____



UNITED INDEPENDENT SCHOOL DISTRICT Purchase Requisition

Page ____ to ____

Vendor Name and Address

METEX AUDIO

FUND/YR FUNC. ORG. PROGRAM LOCAL PROJECT SUB
CODE OPTION NUMBER OBJECT OBJECT AMOUNT

BUDGET CODE

ACCOUNT CODE

Phone No: _____

Campus: MATIAS DE LLANO ELEM Rm NO: _____

Date: _____

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
1		SOUND SYSTEM		2,202.00
		RECOMMENDED BY MR. JAVIER VERA, DIRECTOR OF FINE ARTS		

DISPOSITION: Pick-up Mail Check FAX # _____ PAGE TOTAL 2,202.00

REMARK: _____ GRAND TOTAL 2,202.00

ORIGINATOR (PRINT) _____ DATE _____

BUDGET COORDINATOR _____ DATE _____

ADMINISTRATOR SIGNATURE _____ DATE _____

OTHER _____ DATE _____



UNITED INDEPENDENT SCHOOL DISTRICT Purchase Requisition

Page ___ to ___

Vendor Name and Address

FUND/YR FUNC. ORG. PROGRAM LOCAL PROJECT SUB
CODE OPTION NUMBER OBJECT OBJECT AMOUNT

BUDGET CODE

ACCOUNT CODE

USI _____

Phone No: _____

Campus: MATIAS DE LLANO ELEM Rm NO: _____

Date: _____

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
1		LAMINATING MACHINE, TABLE AND FILM (KIT)		1,299.00
		QUOTE # 3449533		

UNITED PRICE WITH DISCOUNT EXTENSION

DISPOSITION: Pick-up Mail Check FAX # _____ PAGE TOTAL 1,299.00

REMARK: _____ GRAND TOTAL 1,299.00

ORIGINATOR (PRINT)	DATE	BUDGET COORDINATOR	DATE
ADMINISTRATOR SIGNATURE	DATE	OTHER	DATE

U.I.S.D. FORM 905-001
8-1-99



UNITED INDEPENDENT SCHOOL DISTRICT Purchase Requisition

Page ___ to ___

Vendor Name and Address

U.I.S.D. INVENTORY _____

FUND/YR FUNC. ORG. PROGRAM LOCAL PROJECT SUB
CODE OPTION NUMBER OBJECT OBJECT AMOUNT

BUDGET CODE

ACCOUNT CODE

LAREDO, TEXAS 78041

Phone No: _____

Campus: MATIAS DE LLANO ELEM Rm NO: _____

Date: _____

QTY	ITEM #	DESCRIPTION	UNITED PRICE WITH DISCOUNT	EXTENSION
15	1190	LAMINATING FILM	13.34	200.10
30	1295	# 2 PENCILS	.47	14.10

DISPOSITION: Pick-up Mail Check FAX # _____ PAGE TOTAL 214.20

REMARK: _____ GRAND TOTAL 214.20

ORIGINATOR (PRINT) _____ DATE _____

BUDGET COORDINATOR _____ DATE _____

ADMINISTRATOR SIGNATURE _____ DATE _____

OTHER _____ DATE _____