



UNITED INDEPENDENT SCHOOL DISTRICT AGENDA ACTION ITEM

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

Funds for Various Projects/Campuses

SUBMITTED BY: Judd Gilpin **OF:** Board President

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: June 22, 2016

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 for Various Projects/Campuses.

RATIONALE:

BUDGETARY INFORMATION:

Budget Amendment as needed.

BOARD POLICY REFERENCE AND COMPLIANCE:



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016

Requesting Campus: Lyndon B. Johnson High School

Campus Principal: Armando Salazar

Board Member: Javier Montemayor

Board Member: _____

Board Member: _____

Description of Request Field trip for our marachi group attending a TAMU workshop

Estimated Cost of Request \$1650.00

Principal or Director Signature: [Signature] Date 4/11/14

Associate Superintendent Approval: Yes No

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes No

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No

Board Member Signature: _____ Date _____
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.



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016

Requesting Campus: SGMS

Campus Principal: [Signature]

Board Member: Mr. Ricardo Medina

Board Member: _____

Board Member: _____

DESCRIPTION OF REQUEST Championship shirts for soccer players and snakes

Estimated Cost of Request 500.00

Principal or Director Signature: [Signature] Date 5/13/14

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No _____

Board Member Signature: Ricardo Medina Date 5-13-14

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.



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016**

Requesting Campus: Clark Middle School

Campus Principal: Melissa C. Ramirez

Board Member: Javier Montemayor

Board Member: _____

DESCRIPTION OF REQUEST: Paint for School Gym

Estimated Cost of Request: \$1,196.65

Principal or Director Signature: Melissa C. Ramirez Date 6/8/16

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No _____

Board Member Signature: _____ Date _____

Board Member Signature: Yes _____ No _____ 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.

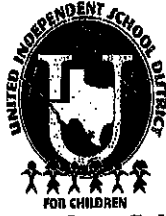


Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016**

Requesting Campus: United Middle School

Campus Principal: Rebecca Coss-Morales

Board Member: Javier Montemayor

Board Member: _____

DESCRIPTION OF REQUEST: PURCHASE PAINT, SUPPLIES AND MATERIALS FOR CAMPUS BEAUTIFICATION

Estimated Cost of Request: \$1,200

Principal or Director Signature: Rebecca Coss-Morales Date 6/8/16

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No _____

Board Member Signature: _____ Date _____

Board Member Signature: _____ Yes _____ No _____ Date _____

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ Date _____

Board Approval: Yes _____ No _____ Date Approved: _____



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016

Requesting Campus: United ISD

Campus Principal: _____

Board Member: JAVIER Montemayor - \$2,600

Board Member: Juan Roberto Ramirez - \$2,600

Description of Request: Heavy Duty Canopy - 10x20

Estimated Cost of Request: \$5,200⁰⁰

Principal or Director Signature: _____ Date _____

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ Date _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ Date _____

Board Member Approval: Yes No _____

Board Member Signature: _____ Date _____

Board Member Signature: Yes _____ No _____ 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.



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2015-2016**

Requesting Campus: Trautmann Middle School

Campus Principal: Leti Menchaca *Leti Menchaca*

Board Member: Javier Montemayor

Board Member: _____

Description of Request: 2-6x8 TMS Banners / TMS Logo Decals / 2-Cameras w/ photo printers

Estimated Cost of Request \$ 1,200.00

Principal or Director Signature: _____ **Date** _____

Associate Superintendent Approval: Yes _____ No _____

Associate Superintendent Signature: _____ **Date** _____

Superintendent Approval: Yes _____ No _____

Superintendent Signature: _____ **Date** _____

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ **Date** _____

Board Member Approval: Yes _____ No _____

Board Member Signature: _____ **Date** _____

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

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