

## United Independent School District AGENDA ACTION ITEM

		Members in re:	: Use of Board Trustees Discretionary
Funds for Various	Projects/Campuses		
SUBMITTED BY: _	Judd Gilpin	OF:	Board President
APPROVED FOR T	RANSMITTAL TO	) SCHOOL F	BOARD:
DATE ASSIGNED F	OR BOARD CON	SIDERATIO	N: July 19, 2017
RECOMMENDATION: It is re: Use of Board of Trustees			Trustees approve Requests from Board Members in ses.
RATIONALE:			,
BUDGETARY INFORMATI	ION:		
POLICY REFERENCE & C	OMPLIANCE:		

Exhibit A



## United Independent School District Board of Trustees Discretionary Funds Request Form Fiscal Year 2016-2017

Requesting Campus: John B. ALexander	High School				
Campus Principal: Ernesto Sandoval, Jr.					
Board Member: Ms. Aliza Flores Oliv	veros				
Board Member:					
Description of Request: ELA Computer Bas	sed Instructional Program				
Estimated Cost of Request \$6,000.00					
Principal or Director Signature:	laoue Date 6/28/17				
Associate Superintendent Approval: Yes					
Associate Superintendent Signature:	Date				
Associate Superintendent Signature: Superintendent Approval:	Date Yes No				
	Yes No				
Superintendent Approval: Superintendent Signature:	Yes No  Date				
Superintendent Approval: Superintendent Signature:	Yes No Yes No				
Superintendent Approval:  Superintendent Signature:  Board Member Approval:  Board Member Signature:  Hs. Aliza Flores-	Yes No Yes No				
Superintendent Approval:  Superintendent Signature:  Board Member Approval:  Board Member Signature:  Hs. Aliza Flores-	Yes No  Yes No  Yes No Yes No Yes No				
Superintendent Approval:  Superintendent Signature:  Board Member Approval:  Board Member Signature:  Board Member Approval:  Board Member Approval:	Yes No				



## **UNITED INDEPENDENT SCHOOL DISTRICT**

PURCHASE REQUISITION

FOR	CHILDRE	X									VENDOR N	IAME AND ADD	DRESS
										No Re	d Ink		
			Prog.	Local	Proj.		Sub						
Fund/YR	Func	Org	Code	Option	Num	Obj.	Object	Amount	۳				
•••	_			<u> </u>					_	350 Bran	nan Suite 350		
	C	zm	aus	Bud	et.			\$ 6,000.00		San Fran	cisco, CA 9410	7	
			_						_	Phone	415-259-8421		
	:	Budget	Code				Accour	nt Code		Campus Date	JB Alexander HS June 28, 2017	Rm #	
Approva	i Code	:				Discount:	:						
Qty		Item					Descrip	tion			Unit Price Per	Discounted Price Per	Extension Unit Total
1			ı	NRI Premium Conventions Writing (sites)						\$7,500.00	\$7,500.00	\$7,500.00	
3			ı	NRI Premium Conventions -Virtual Training						\$500.00	\$500.00	\$1,500.00	
6		NRI Premium Writing-Virtual Training (teacher)						\$500.00	\$500.00	\$3,000.00			
												\$0.00	\$0.00
												\$0.00	\$0.00
			_									\$0.00	\$0.00
												\$0.00	\$0.00
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												\$0.00	\$0.00
												\$0.00	\$0.00
												\$0.00	\$0.00
												\$0.00	\$0.00
Dispositio	n:	Check		Mail	Pi	ckUp		Fax			Page	e Total	\$12,000.00
Remarks						-					Grai	nd Total	\$12,000.00
Miche	le Lo	pez				6/28	/17						
Originator	/	/PRINT	20			Dat		Bud	lget C	Coordinator		Date	
Administr	ator Sig	nature				Dat	0	Oth	er			Date	

Purchasing Dept. 2015

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Customer name: John B Alexander H S TX

Primary contact name: Michele Lopez

**Billing address:** 3600 E DEL MAR LAREDO, TX 78041

Primary contact email: miclop@uisd.net

Service start date: 08-07-2017 Service end date:

06-08-2018

SUMMARY			TOTA
PRODUCT	SALES PRICE	QTY	PRICI
NRI Premium Conventions + Writing (Sites)	\$7,500.00	1	\$7,500.00
NRI Premium Conventions - Virtual Training (Teacher)	\$500.00	3	\$1,500.00
NRI Premium Writing - Virtual Training (Teacher)	\$500.00	6	\$3,000.00
	TOTAL:		\$12,000.00

Contract terms:

This Order Form incorporates and is subject to the Master Services Terms — collectively the "Agreement" — and constitutes a binding contract entered into by and between NoRedInk Corp. ("NoRedInk"), a Delaware corporation with its principal place of business at 118 2nd Street, San Francisco, CA 94105, and the entity listed below as client ("Client"). The Master Services Terms are available at:

https://www.noredink.com/master-services-terms

NoRedInk Corp. Signature	John B Alexander H S TX Signature
Signature:	Signature: MLope Name: miclop@uisd.net
Name:	
Title:	Title: Campus Instruction Coold.
Date:	Date: 6/28/17