



# 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:** September 17, 2013

**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:**

**BOARD POLICY REFERENCE AND COMPLIANCE:**



Exhibit A

**United Independent School District  
Board of Trustees Discretionary Funds Request Form  
Fiscal Year 2013-2014**

Requesting Campus: Dr. M.E. Malakoff Elementary @ San Isidro

Campus Principal: Anna R. Martinez

Board Member: Juan Roberto Ramirez - \$7,905<sup>00</sup>

Board Member: Judd Gilpin - \$7,905<sup>00</sup>

Description of Request: I am requesting if possible an electronic marquee. The marquee we presently have has been vandalized (spray painted) due to the height. The time and temperature on the marquee no longer works and the parts are obsolete.

Estimated Cost of Request 15,808.19 for an electronic marquee.

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: Juan Roberto Ramirez Date 9/5/13  
by. Dampor

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 2013-2014**

Requesting Campus: Trautmann Elementary School

Campus Principal: Zaida G. Gonzalez

Board Member: Mr. Javier Montemayor

Board Member: \_\_\_\_\_

Description of Request: EIKI projector needed for conference room.

Estimated Cost of Request \$533.00

Principal or Director Signature: Zaida Gonzalez Date 8/19/13

Associate Superintendent Approval: Yes \_\_\_\_\_ No \_\_\_\_\_

Associate Superintendent Signature: \_\_\_\_\_ Date \_\_\_\_\_

Superintendent Approval: Yes \_\_\_\_\_ No \_\_\_\_\_

Superintendent Signature: \_\_\_\_\_ Date \_\_\_\_\_

Board Member Approval: Yes ☒ No \_\_\_\_\_

Board Member Signature: Javier Montemayor Date 9/5/13

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 2013-2014**

**Requesting Campus:** United Middle School

**Campus Principal:** Rebecca Morales

**Board Member:** Javier Montemayor

**Board Member:**

**Description of Request:** To purchase items for school beautification 2013-2014

**Estimated Cost of Request:** \$500.00

**Principal or Director Signature:** Rebecca Morales **Date** 8/23/13

**Associate Superintendent Approval:** Yes ☐ No ☐

**Associate Superintendent Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Superintendent Approval:** Yes ☐ No ☐

**Superintendent Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Board Member Approval:** Yes ☒ No ☐

**Board Member Signature:** Javier Montemayor **Date** 9/5/13

**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 2013-2014

Requesting Campus: United Middle School

Campus Principal: Rebecca Morales

Board Member: Javier Montemayor

Board Member:

Description of Request: To purchase new school marquee for school beautification and items for student incentives 2013-2014

Estimated Cost of Request: \$10,000.00

Principal or Director Signature: Rebecca Morales Date 8/4/13

Associate Superintendent Approval: Yes ☐ No ☐

Associate Superintendent Signature: \_\_\_\_\_ Date \_\_\_\_\_

Superintendent Approval: Yes ☐ No ☐

Superintendent Signature: \_\_\_\_\_ Date \_\_\_\_\_

Board Member Approval: Yes ☒ No ☐

Board Member Signature: Javier Montemayor Date 9/5/13

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 2013-2014**

**Requesting Campus:** George Washington Middle School

**Campus Principal:** Mrs. Beth Porter

**Board Member:** Mr. Juan Roberto Ramirez

**Board Member:** \_\_\_\_\_

**Description of Request:** Big Ass Fans

**Estimated Cost of Request** \$6600.00

**Principal or Director Signature:** [Signature] **Date** 8/27/2013

**Associate Superintendent Approval:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Associate Superintendent Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Superintendent Approval:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Superintendent Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Board Member Approval:** Yes ☒ No \_\_\_\_\_

**Board Member Signature:** Juan Ramirez **Date** 8-27-2013

**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 2013-2014**

**Requesting Campus:** George Washington Middle School

**Campus Principal:** Mrs. Beth Porter

**Board Member:** Mr. Juan Roberto Ramirez

**Board Member:** \_\_\_\_\_

**Description of Request:** Golden Rule Marquee

**Estimated Cost of Request** \$17,251.60

**Principal or Director Signature:** [Signature] **Date** 8/27/2013

**Associate Superintendent Approval:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Associate Superintendent Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Superintendent Approval:** Yes \_\_\_\_\_ No \_\_\_\_\_

**Superintendent Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Board Member Approval:** Yes ☒ No \_\_\_\_\_

**Board Member Signature:** [Signature] **Date** 8-27-2013

**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 ~~2011-2012~~ 2013-14

Requesting Campus: Lyndon B. Johnson High School

Campus Principal: MR. Armando Salazar

Board Member: Ricardo Molina, Sr - District 1

Board Member: \_\_\_\_\_

Description of Request: Installation : purchase of T.V.'s to enhance  
School culture, communication and supplement instruction

Estimated Cost of Request \$6,655.<sup>00</sup>

Principal or Director Signature: [Signature] Date 6/24/13

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 Molina Date 9/5/13  
[Signature]

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.