

United Independent School District AGENDA ACTION ITEM

TOPIC Approval of Request 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: December 18, 2013
RECOMMENDATION:
It is recommended that the United ISD Board of Trustees approve Request 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:
Campus Principal: Roberto G. Ortiz
Board Member: Mr. Ricardo Molina
Board Member:
Description of Request: Matikalia Realing and Math
will support on instructional goals for this year.
Estimated Cost of Request <u>\$ 2,6 05. 90</u> Principal or Director Signature: <i>[Lalk & Ost Date 12-5-26]</i>
Principal or Director Signature: 12/5 6 25 Date 12-5-61
Associate Superintendent Approval: Yes No
Associate Superintendent Signature: Date
Superintendent Approval: Yes No
Superintendent Signature: Date
Board Member Approval: Yes No
Board Member Signature: /ucardo Malina Date 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 2013-2014

Requesting Campus:
Campus Principal: Roberto G. Ortiz
Board Member: Ricando Holina
Board Member:
Description of Request: This will support weeting am
Fitnes fram goals as stated in on C.I.P. we
amently must borrow this equipment from Kensely-Reports.
Estimated Cost of Request #2,353.51
Principal or Director Signature: Talita G. Comp. Date 12-5-312
Associate Superintendent Approval: Yes No
Associate Superintendent Signature: Date
Superintendent Approval: Yes No
Superintendent Signature: Date
Board Member Approval: Yes No
Board Member Approval: Ves No Board Member Signature: Waide Malina Date 15/13
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.