

No. _____



UNITED INDEPENDENT SCHOOL DISTRICT AGENDA ACTION ITEM

TOPIC Approval of Requests for Use of Board of Trustees Discretionary Funds for Perez

Elementary for \$4,758.00 and Lyndon B. Johnson High School for \$3,404.00

SUBMITTED BY: Juan Antonio Molina, Jr. **OF:** Board Member

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: _____

DATE ASSIGNED FOR BOARD CONSIDERATION: July 22, 2009

RECOMMENDATION:

It is recommended that the United ISD Board of Trustees approve requests from Juan A. Molina, Jr. for Use of Discretionary Funds for Perez Elementary for \$4,758.00 and Lyndon B. Johnson High School for \$3,404.00.

RATIONALE:

BUDGETARY INFORMATION

BOARD POLICY REFERENCE AND COMPLIANCE:



Exhibit A

**United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2008-2009**

Requesting Campus: Dr. S. Perez Elementary

Campus Principal: Maria de Lourdes Vilajao

Board Member: Mr. Juan Molina

Board Member: _____

Description of Request: 6 picnic tables for playground area. The tables are needed to enhance school grounds and increase parental involvement during school parental activities and functions.

Estimated Cost of Request \$ 4758 00

Principal Signature: [Signature] Date 6/9/09

Board Member Approval: Yes No

Board Member Signature: [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

Purchase Requisition

Page 1 to 1

Vendor Name and Address

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

Miracle Recreation Equip. Co./Park Place Recreation Designs, Inc.

P.O.Box 18186 - San Antonio, Texas 78218

Phone No: 210-821-5878 / 1-800-626-0238

Campus: Dr. S. Perez Elem. **Rm NO:** Office

Date: 6-15-09

| QTY | ITEM # | DESCRIPTION | UNITED PRICE WITH DISCOUNT | EXTENSION |
|-----|--------|--------------------------------------|----------------------------|------------|
| 6 | P358P | 46" square table perforated portable | \$683.00 | \$4,098.00 |
| 1 | | SHIPPING | \$660.00 | \$660.00 |
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DISPOSITION: Pick-up Mail Check **FAX #** 210-832-0115 **PAGE TOTAL** \$4,758.00

REMARK: _____ **GRAND TOTAL** \$4,758.00

| | |
|---|--|
| MARIA DE LOURDES VILORIA 6-15-09 | _____ |
| ORIGINATOR (PRINT) DATE | BUDGET COORDINATOR DATE |
| ADMINISTRATOR SIGNATURE DATE | _____ |
| _____ DATE | OTHER DATE |



PARK PLACE
RECREATION DESIGNS, INC.
The Fun Starts Here!



Miracle Recreation Equip. Co.
c/o Park Place Recreation Designs
www.buyboard.com

June 12, 2009

United ISD - DR PEREZ ELEM.
Laredo TX
Attn: Lourdes Viloria
FAX# 956-473-3699

Park Environments - Site Amenities

| QTY | DESCRIPTION | UNIT Price | TOTAL Price |
|-----|---|------------|--------------------|
| 6 | #P358P 46" Square Table perforated portable | \$ 683.00 | \$ 4,098.00 |
| 1 | Shipping | | \$ 660.00 |
| | Subtotal | | \$ 4,758.00 |
| | Sales Tax (0% is non-taxable entity) | 0.000% | \$ - |
| | TOTAL | | \$ 4,758.00 |

Prices are good for 30 days after which they are subject to change

If liftgate is required at time of delivery, additional charges of \$140 will apply. Customer is responsible for this charge

Please allow 4 weeks for delivery - Need PO # & Color Choices to Place Order

TABLES: Burgundy

FULL PAYMENT REQUIRED AT TIME OF ORDER

Please issue all purchase orders and payments to: **Miracle Recreation Equip. Co.**
c/o Park Place Recreation Designs, Inc

Please fax a copy of the purchase order to (210) 832-0115

AUTHORIZATION TO PURCHASE:

I authorize the purchase of the above equipment and/or services.

Signature & Date

www.miracleparkplace.com
Representing Miracle Recreation Equipment Company
P.O. Box 18186 - San Antonio, Texas 78218
210/821-5878 800/6260238 Fax: 210/832-0115



Exhibit A

United Independent School District
Board of Trustees Discretionary Funds Request Form
Fiscal Year 2009-2010

Requesting Campus: LYNDON B. JOHNSON HS

Campus Principal: MS. MAGGIE MARTINEZ

Board Member: MR. JUAN MOLINA

Board Member:

Description of Request: FUNDS REQUESTED FOR 2 CHARTER BUSES FROM DAISY TOURS SAN ANTONIO TO ATTEND DRUM CORP INTERNATIONAL (DCI) SOUTHWEST CHAMPIONSHIP SERIES, MARCHING BAND CONTEST ON JULY 18, 2009 AT THE ALAMODOME

Estimated Cost of Request \$3,404.00

Principal Signature: [Signature] Date 7/1/09

Board Member Approval: Yes No

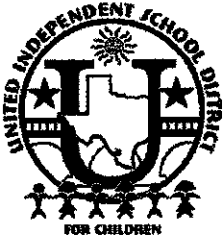
Board Member Signature: [Signature] Date 7-1-2009

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

Page ___ of ___

Vendor Name and Address

Daisy Tours/Conventions San Antonio

1505 East Houston Street

San Antonio, Texas 78202

Phone No. 1-800-285-8601 Fax# 210-225-8617

Campus: LBJHS Rm. No: Band

Date: 7/16/09

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

| QTY | ITEM# | DESCRIPTION | UNITED PRICE WITH DISCOUNT | EXTENSION |
|--|-------|--------------------------|----------------------------|-------------|
| 1 | | 57 Passenger Charter Bus | | |
| | | 35 Passenger Charter Bus | | |
| | | | | \$3,404.00 |
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| DISPOSITION: <input type="checkbox"/> Pick-up <input type="checkbox"/> Mail <input type="checkbox"/> Check <input checked="" type="checkbox"/> Fax # <u>210-225-8617</u> | | | PAGE TOTAL | \$ 3,404.00 |
| | | | GRAND TOTAL | \$3,404.00 |

REMARK: ATTN: _____

Eliseo Morales
 ORIGINATOR (PRINT) *[Signature]* DATE 7/16/09
 ADMINISTRATOR SIGNATURE *[Signature]* DATE 7/16/09

BUDGET COORDINATOR _____ DATE _____
 OTHER _____ DATE _____