

AI-4352

2.A.

Intra Dept. Transfer

CC CONSENT

Date: 06/25/2007

Submitted By: Stephanie Palacios, DISTRICT CLERK

Submitted For: Laura Hinojosa

Department: DISTRICT CLERK

Information

CAPTION

2007 - District Clerk (1100)

BACKGROUND

Fiscal Impact

Attachments

Link: [Intra Dept Transfer](#)

AI-4310

2.B.

Intra Dept. Transfer

CC CONSENT

Date: 06/25/2007
Submitted By: Stephanie Palacios, DISTRICT CLERK
Submitted For: Laura Hinojosa
Department: DISTRICT CLERK
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - District Clerk (1100)

BACKGROUND

Fiscal Impact

Attachments

Link: [Intra Transf.](#)

AI-4339

2.C.

**Intra Transfer
CC CONSENT**

Date: 06/25/2007
Submitted By: Stephanie Palacios, DISTRICT CLERK
Submitted For: Laura Hinojosa
Department: DISTRICT CLERK
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - District Clerk - 1100

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-412-00-090-001-0-664
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
664-->611 \$461.00; Available balance as of 6/21/2007 \$1,707.35

Attachments

Link: [Intra. Trans. 2](#)

AI-4285

2.D.

Sheriff's L.E.O.S.E. Line Item Transfer
CC CONSENT

Date: 06/25/2007
Submitted By: Rosie Hinojosa, SHERIFF DEPT.
Submitted For: Rosie Hinojosa
Department: SHERIFF DEPT.

Information

CAPTION

2007 - Sheriff's L.E.O.S.E. (1220)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 7 ACCT. #: 1220-421-00-280-004-0-
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N

BUDGETARY IMPACT:

339-->583 \$ 300.00 Available balance as of 06/21/07 \$ 300.00
584-->583 \$ 5,000.00 Available balance as of 06/21/07 \$ 10,738.72
603-->583 \$ 66.75 Available balance as of 06/21/07 \$ 66.75

Attachments

Link: [Line Item Transfer](#)

DATE: June 18, 2007

DEPARTMENT HEAD: SHERIFF GUADALUPE "LUPE" TREVINO

DEPARTMENT NAME: SHERIFF'S L.E.O.S.E.

ACCOUNT NUMBER: 7-1220-421-00-280-004-0

SUBJECT: Budget Line-Item Transfer (s)

Honorable Commissioners' Court of Hidalgo County:

I submit for your consideration the following line-item transfers in accordance with Local Government Code, Chapter 111, Subchapter C.:

FROM			TO		
ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME		ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
7-1220-421-00-280-004-0-339	OTHER PROFESSIONAL SERVICES	→	7-1220-421-00-280-004-0-583	OUT OF COUNTY EMPLOYEE TRAVEL	\$ 300.00
7-1220-421-00-280-004-0-584	REGISTRATION FEES	→	7-1220-421-00-280-004-0-583	OUT OF COUNTY EMPLOYEE TRAVEL	5,000.00
7-1220-421-00-280-004-0-603	EDUCATIONAL/INSTRUCTIONAL SUPP	→	7-1220-421-00-280-004-0-583	OUT OF COUNTY EMPLOYEE TRAVEL	66.75
		→			
		→			
		→			
		→			
		→			
		→			
TOTAL					\$ 5,366.75

TOTAL TO INCREASE LINE ITEM FOR ANTICIPATED EXPENSES.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK

AI-4272

2.E.

Line Item Transfer

CC CONSENT

Date: 06/25/2007

Submitted By: Miriam Gonzalez, HUMAN SERVICES

Department: HUMAN SERVICES

Information

CAPTION

2007 - Human Services (1100)

BACKGROUND

Fiscal Impact

Attachments

Link: [Transfer](#)

AI-4214

2.F.

Bioterrorism Grant Line Item Trf

CC CONSENT

Date: 06/25/2007

Submitted By: Dan Beltran, HEALTH & HUMAN SERVICES DEPT.

Department: HEALTH & HUMAN SERVICES DEPT.

Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Health & Human Services Dept. - Bioterrorism Grant (1293)

BACKGROUND

Fiscal Impact

FISCAL YEAR: ACCT. #: 7-1293-441-00-340-013-6-XXX

FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

From 540 & 350 to 584 in the amounts of \$9,170.00 & \$3,900.00 (respectively).

Available balance in 540 is \$90,234.50 & available balance in 350 is \$59,226.00 as of 6/8/07.

Attachments

Link: [HCHD-Bio LIT](#)

AI-4327

2.G.

Ewids Line Item Transfer

CC CONSENT

Date: 06/25/2007

Submitted By: Dan Beltran, HEALTH & HUMAN SERVICES DEPT.

Department: HEALTH & HUMAN SERVICES DEPT.

Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Health & Human Services - EWIDS Grant (1293)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007

ACCT. #: 71293441103400286339

FUNDS AVAILABLE Y/N?: Yes

MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

339-->585 \$25,479.36; 339-->441 \$2,379.24; available balance as of 6/21/2007
\$62,737.36

Attachments

Link: [EWIDS LIT](#)

AI-4282
transfer
CC CONSENT

2.H.

Date: 06/25/2007
Submitted By: Nereida Garza, HUMAN RESOURCES/CIVIL SERVICE
Submitted For: Esther Cortez
Department: HUMAN RESOURCES/CIVIL SERVICE
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Human Resources (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-415-50-190-002-0-601
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

\$3,756.26 available balance as of 6/20/07
\$200.00 from object 601 to 529

Attachments

Link: [transfer](#)

DATE: 06-15-07
DEPARTMENT HEAD: Esther A. Cortez
DEPARTMENT NAME: *HUMAN RESOURCES*
ACCOUNT NUMBER: 7-1100-415-50-190-002-0
SUBJECT: BUDGET LINE-ITEM TRANSFER(S)

Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfers in accordance with Local Government Code: Chapter 111, Subchapter C.:

ACCOUNT NUMBER: 7-1100-415-50-190-002-0

FROM:		TO:			
OBJECT CODE	OBJECT NAME	OBJECT CODE	OBJECT NAME		AMOUNT
601	Office supplies	529	Surety and notary bonds		\$200.00

REASON: for renewal of notary

TOTAL \$200.00

Department Head Signature

Date

Approved Commissioners' Court

Date

Attest County Clerk

AI-4288

2.I.

Line Item Transfer from Obj 341 to 666 & 601 to 666

CC CONSENT

Date: 06/25/2007
Submitted By: Mary Garcia, TAX OFFICE
Submitted For: Armando Barrera Jr RTA
Department: TAX OFFICE
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Tax Office (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-415-15-140-001-0XXX
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

\$5,000.00 available balance as of 6/20/07; \$5,000.00 from object 341 to 666
\$46,395.97 available balance as of 6/20/07; \$5,000.00 from object 601 to 666

Attachments

Link: [line item transfer](#)

AI-4279

2.J.

Constable Pct.5

CC CONSENT

Date: 06/25/2007
Submitted By: Roxanne Elizondo, CONSTABLE PCT. #5
Department: CONSTABLE PCT. #5
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Constable Pct.5 (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-421-00-295-001-0-605
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

\$2,442.00 available balance as of 6/20/07
\$500.00 from object 605 to 604

Attachments

Link: [4279 intra form](#)

BUDGET INTRADEPARTMENTAL TRANSFER REQUEST

DATE: June 15, 2007

DEPARTMENT HEAD:

DEPARTMENT NAME: Constable Pct. 5

ACCOUNT NUMBER: 7-1100-421-00-295-001-0-

SUBJECT: Budget Intradepartmental Transfer in Accordance with Local Government Code, Chapter 111, Subchapter C.

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following Intradepartmental Budget Transfer/s in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM:		TO:		
OBJECT	OBJECT	OBJECT	OBJECT	
CODE	NAME	CODE	NAME	AMOUNT
	605 Clothing&Uniforms		604 chem, drugs, med&lab supp	500.00
			TOTAL	500.00

REASON: need to purchase first aid kits.

EDUARDO BAZAN

 DEPARTMENT HEAD SIGNATURE

 APPROVED COMMISSIONERS COURT

 DATE ATTEST COUNTY CLERK

AI-4208

2.K.

R & M Service Transfer

CC CONSENT

Date: 06/25/2007
Submitted By: Angela Garcia, BUDGET & MANAGEMENT
Department: BUDGET & MANAGEMENT
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Budget & Management (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-415-14-115-001-0-535
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
535 to 431 \$2,000.00; available balance as of 6-8-07 \$3,998.62

Attachments

Link: [Tint Transfer](#)

BUDGET INTRADEPARTMENTAL TRANSFER REQUEST

DATE:06/07/2007

DEPARTMENT HEAD: VALDE GUERRA

DEPARTMENT NAME: BUDGET & MANAGEMENT

ACCOUNT NUMBER: 7-1100-415-14-115-001-0-

SUBJECT: Budget Intradepartmental Transfer in Accordance with Local Government Code, Chapter 111, Subchapter C.

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following Intradepartmental Budget Transfer/s in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM:		TO:		
OBJECT	OBJECT	OBJECT	OBJECT	
CODE	NAME	CODE	NAME	AMOUNT
535	POSTAGE	431	BLDG R & M SERVICE	2,000.00
			TOTAL	2,000.00

REASON: NEED ADDITIONAL FUNDING FOR TINTING OF NEW. ADMINISTRATION BLDG.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS COURT

DATE

ATTEST COUNTY CLERK

AI-4217

2.L.

Blinds Transfer

CC CONSENT

Date: 06/25/2007
Submitted By: Angela Garcia, BUDGET & MANAGEMENT
Department: BUDGET & MANAGEMENT
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Budget & Management(1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-415-14-115-001-0-666
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
666-->431 \$2,000.00; available balance as of 6-8-07 \$4,736.42

Attachments

Link: [Blinds Transfer](#)

AI-4212

2.M.

Furniture Transfer

CC CONSENT

Date: 06/25/2007
Submitted By: Angela Garcia, BUDGET & MANAGEMENT
Submitted For: Damian Carranza
Department: BUDGET & MANAGEMENT
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - 332nd District Court (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-412-00-006-001-0-XXX
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

640-->666 \$500.00; available balance as of 6/8/07 \$1,000.00
665-->666 \$675.30; available balance as of 6/8/07 \$1,196.00
336-->746 \$1,200.00; available balance as of 6/8/07 \$2,000.00

Attachments

Link: [Furniture Transfer](#)

BUDGET INTRADEPARTMENTAL TRANSFER REQUEST

DATE:06/07/2007

DEPARTMENT HEAD: MARIO E. RAMIREZ JR.

DEPARTMENT NAME: 332ND DISTRICT COURT

ACCOUNT NUMBER: 7-1100-412-00-006-001-0

SUBJECT: Budget Intradepartmental Transfer in Accordance with Local Government Code, Chapter 111, Subchapter C.

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following Intradepartmental Budget Transfer/s in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM:		TO:		
OBJECT	OBJECT	OBJECT	OBJECT	
CODE	NAME	CODE	NAME	AMOUNT
640	REF. MATERIALS	666	MINOR OFFICE FURNITURE	500.00
665	MINOR COMP. EQUIPMENT	666	MINOR OFFICE FURNITURE	675.30
336	COMP. SERVICES	746	OFFICE FURNITURE	1,200.00
			<u>TOTAL</u>	<u>2,375.30</u>

REASON: NEED ADDITIONAL FUNDING IN PROPER OBJ. CODES

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS COURT

DATE

ATTEST COUNTY CLERK

AI-4280

2.N.

Budget Line-Item Transfer for Water Permits

CC CONSENT

Date: 06/25/2007
Submitted By: Agapito Vargas, COLONIA ACCESS PROGRAM
Submitted For: Agapito Vargas
Department: COLONIA ACCESS PROGRAM
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Colonia Access Program (1200)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 7 ACCT. #: 1200-431-00-115-042-0-
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N
BUDGETARY IMPACT:
746-->890 \$ 400.00 Available balance as of 06/20/07 \$ 1,300.00

Attachments

Link: [Agenda Request-Colonia Access Program](#)

DATE: June 15, 2007

DEPARTMENT HEAD: Agapito Vargas Jr.

DEPARTMENT NAME: Colonia Access Program

ACCOUNT NUMBER: 7-1200-431-00-115-042-0-XXX

SUBJECT: Budget Line-Item Transfer(s)

Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfers in accordance with Local Government Code Chapter 111, Subchapter C.

FROM		TO		
ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
7-1200-431-00-115-042-0-746	OFFICE FURNITURE	7-1200-431-00-115-042-0-890	OTHER	\$400.00

TOTAL \$400.00

REASON: Transfer needed for expected expenditures for water permits for projects.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

____/____/____
DATE

ATTEST COUNTY CLERK

AI-4314

2.O.

Line Item Transfer Pct # 1 R&B

CC CONSENT

Date: 06/25/2007
Submitted By: Veronica Ramirez, COMM. PCT. #1
Department: COMM. PCT. #1
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Precinct #1- R&B (1201)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1201-431-00-121-005-0-663
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$4,273.71 available balance as of 6/20/07
\$1,320.00 from object 663 to 748

FISCAL YEAR: 2007 ACCT. #: 7-1201-431-00-121-005-0-663
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$4,273.71 available balance as of 6/20/07
\$100.00 from object 663 to 609

FISCAL YEAR: 2007 ACCT. #: 7-1201-431-00-121-005-0-432
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$15,170.68 available balance as of 6/20/07
\$500.00 from object 432 to 671

FISCAL YEAR: 2007 ACCT. #: 7-1201-431-00-121-005-0-434
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$15,933.73 available balance as of 6/20/07
\$1,000.00 from object 434 to 679

FISCAL YEAR: 2007 ACCT. #: 7-1201-431-00-121-005-0-442
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$14,000.00 available balance as of 6/20/07
\$1,000.00 from object 442 to 664

Attachments

Link: [LIT R&B](#)

AI-4299

2.P.

Budget Line-Item Transfer for R&B

CC CONSENT

Date: 06/25/2007
Submitted By: Yolanda Cisneros, COMM. PCT. #2
Submitted For: Yolanda Cisneros
Department: COMM. PCT. #2
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Precinct #2 Road and Bridge (1202)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1202-431-00-122-006-0-333
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$3,000.00 available balance as of 06/20/2007

Attachments

Link: [Agenda Request](#)

DATE: June 19, 2007

DEPARTMENT HEAD: Hector "Tito" Palacios

DEPARTMENT NAME: Hidalgo County Precinct No. 2

ACCOUNT NUMBER: 7-1202-431-00-122-006-0-XXX

SUBJECT: Budget Line-Item Transfer(s)

Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfers in accordance with Local Government Code Chapter 111, Subchapter C.

FROM		TO		
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ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
7-1202-431-00-122-006-0-333	LEGAL SERVICES	7-1202-431-00-122-006-0-890	OTHER	1,500.00

TOTAL \$ 1,500.00

REASON: TRANSFER NEEDED FOR CONTINUE OPERATION OF THE DEPARTMENT

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

____/____/____
DATE

ATTEST COUNTY CLERK

AI-4300

2.Q.

**Budget Line-item Transfer In County Travel
CC CONSENT**

Date: 06/25/2007
Submitted By: Yolanda Cisneros, COMM. PCT. #2
Submitted For: Yolanda Cisneros
Department: COMM. PCT. #2
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Precinct #2 - Community Resource Center (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-466-00-122-018-0-609
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$3,843.86 available balance as of 06/20/2007

Attachments

Link: [Agenda Request](#)

DATE: June 19, 2007

DEPARTMENT HEAD: Hector "Tito" Palacios

DEPARTMENT NAME: Hidalgo County Precinct No. 2

ACCOUNT NUMBER: 7-1100-466-00-122-018-0- XXX

SUBJECT: Budget Line-Item Transfer(s)

Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfers in accordance with Local Government Code Chapter 111, Subchapter C.

FROM	TO
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ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
7-1100-466-00-122-018-0-609	<i>Landscaping Supplies</i>	7-1100-466-00-122-018-0-581	<i>TRAVEL IN COUNTY</i>	\$500.00

TOTAL \$ 500.00

REASON: Transfer needed for expected expenditures for the department.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

____/____/_____
DATE

ATTEST COUNTY CLERK

AI-4301

2.R.

**Budget Line-Item Transfer Parks Department
CC CONSENT**

Date: 06/25/2007
Submitted By: Yolanda Cisneros, COMM. PCT. #2
Submitted For: Yolanda Cisneros
Department: COMM. PCT. #2
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Precinct No. 2 - Parks (1212)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1212-452-00-122-008-0-334
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$10,000.00 available balance as of 06/20/2007

FISCAL YEAR: 2007 ACCT. #: 7-1212-452-00-122-008-0-674
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$1,500.00 available balance as of 06/20/2007

FISCAL YEAR: 2007 ACCT. #: 7-1212-452-00-122-008-0-334
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$10,000.00 available balance as of 06/20/2007

Attachments

Link: [Agenda Request](#)

DATE: June 19, 2007

DEPARTMENT HEAD: Hector "Tito" Palacios

DEPARTMENT NAME: Hidalgo County Precinct No. 2

ACCOUNT NUMBER: 7-1212-452-00-122-008-0- XXX

SUBJECT: Budget Line-Item Transfer(s)

Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfers in accordance with Local 6Government Code Chapter 111, Subchapter C.

FROM	TO
-------------	-----------

ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
7-1212-452-00-122-008-0-334	ENGINEER SERVICES	7-1212-452-00-122-008-0-672	EQUIPT R&M SUPPLY	\$1,000.00
7-1212-452-00-122-008-0-674	PIPES	7-1212-452-00-122-008-0-431	BUILDING R&M SERVIC	500.00
7-1212-452-00-122-008-0-334	ENGINEER SERVICES	7-1212-452-00-122-008-0-671	BLDG R&M SUPPLIES	2,000.00

TOTAL \$ 3,500.00

REASON: Transfer needed for expected expenditures for the Parks Department.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

____/____/_____
DATE

ATTEST COUNTY CLERK

AI-4330

2.S.

Pct #3 Sanitation

CC CONSENT

Date: 06/25/2007

Submitted By: Norma Ceballos, COMM. PCT. #3

Department: COMM. PCT. #3

Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Precinct #3 Sanitation - 1100

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007

ACCT. #: 7-1100-432-00-123-001-0-334

FUNDS AVAILABLE Y/N?: Yes

MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

334-->601 \$50.00; 334-->672 \$11,700.00; Available balance as of 6/21/2007
\$85,578.62

Attachments

Link: [4330](#)

INTRA-DEPARTMENTAL TRANSFER

DATE: June 25, 2007

DEPARTMENT HEAD: Commissioner Joe M. Flores - Pct No. 3

DEPARTMENT NAME: Hidalgo County Precinct #3 Sanitation

ACCOUNT NUMBER: 7-1100-432-00-123-001-0

CONTACT PERSON: Norma Ceballos PHONE: (956)585-4509

SUBJECT: Intra-departmental Transfer

Honorable Commissioners' Court of Hidalgo County:

I submit for your consideration the following Intra-departmental transfer(s) in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
334	Engineer	601	Office Supply	50.00
334	Engineer	672	Equip R&M Supplies	\$11,700.00
TOTAL				\$11,750.00

REASON: 672- for the repair of compactor; 601-office supplies needed.

DEPARTMENT HEAD SIGNATURE

CC DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK

AI-4356

2.T.

Pct #3 Transfer

CC CONSENT

Date: 06/25/2007

Submitted By: Norma Ceballos, COMM. PCT. #3

Department: COMM. PCT. #3

Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007- Precinct #3 C.O., 2006 (1336)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007

ACCT. #: 7-1336-431-00-123-040-0-XXX

FUNDS AVAILABLE Y/N?: Y

MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

742-->741 \$ 109,654.00; Available account balance \$ 871,343.00 as of 06/21/07.

Attachments

Link: [Pct #3 CIP](#)

INTRA-DEPARTMENTAL TRANSFER

DATE: June 25, 2007

DEPARTMENT HEAD: Commissioner Joe M. Flores - Pct No. 3

DEPARTMENT NAME: Pct #3 - CIP (1336)

ACCOUNT NUMBER: 7-1336-431-00-123-040-0-XXX

CONTACT PERSON: Norma Ceballos PHONE: (956)585-4509

SUBJECT: Intra-departmental Transfer

Honorable Commissioners' Court of Hidalgo County:

I submit for your consideration the following Intra-departmental transfer(s) in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
742	Heavy Equipment	741	Vehicles	109,654.00
TOTAL				\$109,654.00

REASON: Purchase one Roll Off Truck w/hoist

DEPARTMENT HEAD SIGNATURE

CC DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK

AI-4332
Pct #3 R&B
CC CONSENT

2.U.

Date: 06/25/2007
Submitted By: Norma Ceballos, COMM. PCT. #3
Department: COMM. PCT. #3
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Pct #3 R&B - 1203

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1203-431-00-123-005-0-890
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
890-->421 \$500.00; Available balance as of 6/21/2007 \$16,291.66

Attachments

Link: [4332](#)

AI-4290

2.V.

Pct. #4 Line-Item Transfer "Parks"

CC CONSENT

Date: 06/25/2007
Submitted By: Jr. Munoz, COMM. PCT. #4
Department: COMM. PCT. #4
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Precinct #4 - Parks (1214)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 7 ACCT. #: 1214-452-00-124-009-0-
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N
BUDGETARY IMPACT:
899-->339 \$ 5000.00 Available balance as of 06/20/07 \$ 214,407.78

Attachments

Link: [Pct # 4 Line Item Transfer - Parks](#)

DATE : JUNE 19, 2007

DEPARTMENT HEAD: COMMISSIONER OSCAR L. GARZA JR.

DEPARTMENT NAME: HIDALGO COUNTY PRECINCT #4

ACCOUNT NUMBER: 7-1214-452-00-124-009-0-XXX - PARKS

SUBJECTS: Budget Line-Item Transfer(s)

Honorable Commissioners' Court of Hidalgo County:

I submit for your consideration the following line-item transfers in accordance with Local Government Code, Chapter 111, Subchapter C.:

FROM		TO		
ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
7-1214-452-00-124-009-0-899	Contingency	7-1214-452-00-124-009-0-339	Other Professional Svs.	\$ 5,000.00
TOTAL				<u>\$ 5,000.00</u>

REASON: For the title and appraisal report on the Hargill Pavillion land.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

____/____/____
DATE

ATTEST COUNTY CLERK

AI-4343

2.W.

**LRGVDC-SOLID WASTE PCT 3 LINE ITEM TRANSFER
CC CONSENT**

Date: 06/25/2007
Submitted By: Kimberly Echavarria, CONSTABLE PCT. #3
Submitted For: Larry Gallardo
Department: CONSTABLE PCT. #3
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Constable Pct. 3 Solid Waste (1285)

BACKGROUND

Fiscal Impact

FISCAL YEAR: ACCT. #: 7-1285-421-00-293-006-7-XXX
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

From 113 to various object codes in the total amount of \$4,592.00. Available balance in object 113 is \$12,452.08 as of 6/21/07. Note fiscal year for grant end 8/31/07.

Attachments

Link: [Solid Waste Grant -
Line Item Transfer](#)

AI-4344

2.X.

**Sheriff's Office--OCDE Grant
CC CONSENT**

Date: 06/25/2007
Submitted By: Emilia Uriegas, SHERIFF DEPT.
Submitted For: Anacleto Martinez
Department: SHERIFF DEPT.
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Sheriff's Office--OCDE Grant (1284)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007	ACCT. #: 1284-421-00-280-037-7
FUNDS AVAILABLE Y/N?: Y	MATCHING FUNDS Y/N?: n
BUDGETARY IMPACT:	
#741 to #611 \$500.00	
#741 to #745 \$4,000.00	
#741 to #748 \$9,000.00	

Attachments

Link: [OCDE.line.item.transf.](#)

DATE: JUNE 20, 2007

DEPARTMENT HEAD: Guadalupe "Lupe" Trevino

DEPARTMENT NAME: OCDE

ACCOUNT NUMBER: 7-1284-421-00-280-037-7

SUBJECT: Budget Line-Item Transfer (s)

Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfers in accordance with Local Government Code, Chapter 111, Subchapter C.:

FROM			TO		
ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME		ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
7-1284-421-00-280-037-7-741	Vehicles	→	7-1284-421-00-280-037-7-611	Police Supplies	500.00
7-1284-421-00-280-037-7-741	Vehicles	→	7-1284-421-00-280-037-7-745	Computer Equipment	4,000.00
7-1284-421-00-280-037-7-741	Vehicles	→	7-1284-421-00-280-037-7-748	Other Equipment	9,000.00
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			
					\$13,500.00

REASON: TO PROVIDE FUNDING FOR THE PURCHASE OF TWO PORTABLE RADIOS; TWO MOBILE RADIOS; CAMERA SUPPLIES; AND ADDITIONAL FUNDING FOR PURCHASE OF COMPUTER EQUIPMENT.

GRANT: ORGANIZED CRIME DRUG ENFORCEMENT TASK FORCE (STRIKE FORCE PROGRAM)

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

_____/_____/_____
DATE

ATTEST COUNTY CLERK

AI-4346

2.Y.

LINE ITEM TRANSFERS

CC CONSENT

Date: 06/25/2007
Submitted By: Monica Hinojosa, SHERIFF DEPT.
Submitted For: Monica Hinojosa
Department: SHERIFF DEPT.
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Sheriff's Department (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-421-00-280-001-0-441
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$19,213.00 available balance as of 6/21/07
\$2,000.00 from object 441 to 350

FISCAL YEAR: 2007 ACCT. #: 7-1100-421-00-280-001-0-611
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$150,536.13 available balance as of 6/21/07
\$5,100.00 from object 611 to 613

FISCAL YEAR: 2007 ACCT. #: 7-1100-421-00-280-001-0-611
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
\$150,536.13 available balance as of 6/21/07
\$800.00 from object 611 to 668

Attachments

Link: [LINE ITEM TRANSFER](#)

DATE: 6/20/2007
 DEPARTMENT HEAD: SHERIFF GUADALUPE "LUPE" TREVINO
 DEPARTMENT NAME: SHERIFF'S OFFICE
 ACCOUNT NUMBER: 7-1100-421-00-280-001-0

SUBJECT: Budget Line-Item Transfer (s)

Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfers in accordance with Local Government Code, Chapter 111, Subchapter C.:

FROM			TO		
ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME		ACCOUNT NUMBER	ACCOUNT (OBJECT)	AMOUNT
7-1100-421-00-280-001-0-441	RENTAL OF LAND & BUILDINGS	→	7-1100-421-00-280-001-0-350	CONTRACTUAL SERVICES	\$2,000.00
7-1100-421-00-280-001-0-611	POLICE & CAMERA SUPPLIES	→	7-1100-421-00-280-001-0-613	SAFETY SUPPLIES	\$5,100.00
7-1100-421-00-280-001-0-611	POLICE & CAMERA SUPPLIES	→	7-1100-421-00-280-001-0-668	POLICE WEAPONS	\$800.00
		→			
		→			
		→			
		→			
		→			
		→			
		→			
TOTAL					\$7,900.00

REASON: TO COVER UNEXPECTED EXPENDITURES.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK

AI-4351

2.Z.

Intradepartmental Transfer

CC CONSENT

Date: 06/25/2007

Submitted By: Rosie Luna, SAFETY/WORKERS' COMP. DIVISION

Department: SAFETY/WORKERS' COMP. DIVISION

Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - D.B.M. Safety Division - 1100

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007

ACCT. #: 7-1100-419-50-115-059-0-583

FUNDS AVAILABLE Y/N?: Yes

MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

583-->584 \$500.00; Available balance as of 6/21/2007 \$4,810.00

Attachments

Link: [Agenda 6/25/07a](#)

AI-4341

2.AA.

Intradepartmental Transfer

CC CONSENT

Date: 06/25/2007

Submitted By: Rosie Luna, SAFETY/WORKERS' COMP. DIVISION

Submitted For: Roy Quintanilha

Department: SAFETY/WORKERS' COMP. DIVISION

Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - D.B.M. Safety Division (1100)

BACKGROUND

Fiscal Impact

Attachments

Link: [June 25th Agenda](#)

AI-4340
line item transfer
CC CONSENT

2.BB.

Date: 06/25/2007
Submitted By: Neilda Cavazos, PURCHASING DEPT.
Submitted For: Marty Salazar
Department: PURCHASING DEPT.
Agenda Area: Intradepartmental Transfers:

Information

CAPTION
2007 - Purchasing Department (1100)
BACKGROUND

Fiscal Impact

Attachments

Link: [6-20-07](#)

AI-4354

2.CC.

398th Intradepartmental Transfer

CC CONSENT

Date: 06/25/2007
Submitted By: Dale Kennan, BUDGET & MANAGEMENT
Submitted For: 398th District Court
Department: BUDGET & MANAGEMENT
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - 398th District Court - 1100

BACKGROUND

Fiscal Impact

FISCAL YEAR: ACCT. #: 7-1100-412-00-009-001-0-XXX

FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

From 602 to 432 in the amount of \$100.00. Available balance in 602 is \$800.00 as of 6/21/07.

FISCAL YEAR: 2007 ACCT. #: 7-1100-412-00-009-001-0-602

FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

602-->432 \$100.00; Available balance as of 6/21/2007 \$800.00

Attachments

Link: [398th LIT](#)

DEPARTMENT HEAD: Aida Salinas Flores
 DEPARTMENT NAME: 398th District Court
 COUNTY NUMBER: 7-1100-412-00-009-001-0

*ATTN:
Priscilla*

SUBJECT: Budget Line-Item Transfer (s)

Honorable Commissioners' Court of Hidalgo County:

I submit to you for consideration the following line-item transfers in accordance with Local Gov Code, Chapter 111, Subchapter C.:

FROM			TO		
ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME		ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
7-1100-412-00-009-001-0-602	Paper Supplies	→	7-1100-412-00-009-001-0-432	Equip R&M Service	\$ 100.00
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			

TOTAL

2007 JUN 15 PM 3 12
 RECEIVED BY
 COUNTY AUDITOR

REASON:
ADDITION MONIES NEEDED FOR THE REPAIR & MAINTANENCE

Aida Salinas Flores
 DEPARTMENT HEAD SIGNATURE

June 14, 2007
 Date

APPROVED COMMISSIONERS' COURT _____ DATE _____ ATTEST COUNTY CLERK _____

COUNTY AUDITOR'S FORM: ARS-CA-017
 REVISED: 1/25/2007

AI-4211

2.DD.

Travel Transfer

CC CONSENT

Date: 06/25/2007
Submitted By: Angela Garcia, BUDGET & MANAGEMENT
Submitted For: Ginna Alvarez
Department: BUDGET & MANAGEMENT
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - 275th District Court (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007 ACCT. #: 7-1100-412-00-005-001-0-890
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

890-->584 \$1,500.00; available balance as of 6/8/07 \$6,178.53
890-->583 \$3,200.00; available balance as of 6/8/07 \$6,178.53

Attachments

Link: [Travel Transfer](#)

BUDGET INTRADEPARTMENTAL TRANSFER REQUEST

DATE:06/07/2007

DEPARTMENT HEAD: JUAN R. PARTIDA

DEPARTMENT NAME: 275TH DISTRICT COURT

ACCOUNT NUMBER: 7-1100-412-00-005-001-0-

SUBJECT: Budget Intradepartmental Transfer in Accordance with Local Government Code, Chapter 111, Subchapter C.

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following Intradepartmental Budget Transfer/s in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM:		TO:		
OBJECT	OBJECT	OBJECT	OBJECT	
CODE	NAME	CODE	NAME	AMOUNT
890	OTHER	584	REGISTRATION	1,500.00
890	OTHER	583	TRAVEL OUT OF COUNTY	3,200.00
			TOTAL	4,700.00

REASON: NEED ADDITIONAL FUNDING IN PROPER OBJ. CODES

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS COURT

DATE

ATTEST COUNTY CLERK

AI-4365

2.EE.

IT Dept. Transf.

CC CONSENT

Date: 06/25/2007
Submitted By: Damaris San Miguel, BUDGET & MANAGEMENT
Submitted For: Renan Ramirez
Department: BUDGET & MANAGEMENT
Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2007 - Computer Department (1100)

BACKGROUND

Fiscal Impact

Attachments

Link: [Transfer](#)

BUDGET INTRA-DEPARTMENTAL TRANSFER REQUEST

DATE: 06/21/2007

DEPARTMENT HEAD: Renan Ramirez

DEPARTMENT NAME: Computer Department

ACCOUNT NUMBER: 7-1100-415-00-200-002-0-xxx

CONTACT PERSON: Ruben Flores PHONE: _____

SUBJECT: Budget Intradepartmental Transfer in Accordance with Local Government Code, Chapter 111, Subchapter C.

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following Intradepartmental Budget Transfer/s in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
745	COMPUTER EQUIPMENT	810	DUES & MEMBERSHIPS	5,000.00
745	COMPUTER EQUIPMENT	534	INTERNET	2,500.00
			TOTAL	7,500.00

REASON: Intradepartmental transfer to correct object code to cover expenses.

DEPARTMENT HEAD SIGNATURE

CC DATE

APPROVED COMMISSIONERS COURT

ATTEST COUNTY CLERK

AI-4228

4.A.

**TAX OFFICE REFUNDS
CC CONSENT**

Date: 06/25/2007
Submitted By: Hilda Fuentes, TAX OFFICE
Submitted For: Hilda Fuentes
Department: TAX OFFICE
Agenda Area: Tax Refunds

Information

CAPTION

Account Number	Taxpayer	Payer	Amount
K2400.00.000.0083.00	SAGE BRUSH DEV	VALLEY LAND	\$4,422.92

BACKGROUND

Fiscal Impact

Attachments

Link: [FRONT PG](#)

Link: [2ND PAGE](#)

Link: [3RD PG VALLEY LAND TITLE](#)

Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr. RTA

ASSESSOR AND COLLECTOR

EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

June 11, 2007

The Honorable J.D Salinas III
Hidalgo County Commissioners
Edinburg, Texas 78539

Re: See attached list

Gentlemen:

As per Section 31.11 of the Property Tax Code, the governing body of each taxing unit must authorize refunds of overpayments or erroneous payments over \$ 2500.00 dollars.

I respectfully request that the Commissioner's Court approve the enclosed application for a tax refund based on an adjustment approved by the Hidalgo County Appraisal District Office.

When completed, please return the attached to this office.

Thanking you for your assistance in this matter, I remain.

Very truly yours,

A handwritten signature in dark ink, appearing to read 'Armando Barrera, Jr.' with a stylized flourish at the end.

Armando Barrera, Jr. RTA

Abj:mm

Enclosure

Xc: Hidalgo County Auditor
Raymundo Eufrazio, CPA



Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr. RJA

ASSESSOR AND COLLECTOR

EDINBURG, TEXAS 78540-0178

P.O. Box 178
(956) 318-2160
FAX (956) 318-2733

ACCOUNT NUMBER	TAXPAYER	PAYER	AMOUNT
1. K2400.00.000.0083.00	SAGE BRUSH DEVE	VALLEY LAND TITLE	\$ 4,422.92



APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	Phone (area code and number) (956) 318-2173
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name <i>Payer</i> VALLEY LAND TITLE / Sage Brook Developers Inc.	Owner's name
	Present mailing address (number and street) 2406 W UNIVERSITY DRIVE	
	City, town or post office, state, ZIP code EDINBURG, TX 78539	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **KELLY PHARR TRACT N 15.06AC AN IRR TR-N490'-**

Step 2: Describe the property	W1290' LOT 83	
	Address or location of property:	
	Account number of property: K2400-00-000-0083-00 / R202175	Tax receipt number: OR 9209875

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. GHD	2006	2/28	/ 07	\$ 5259.50
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4422.92

Taxpayer's reason for refund (attach supporting documentation): **OVER PAYMENT**

RB07060A

TR

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature <i>Isabel Vasquez</i>	Date of application for tax refund 3/18/07

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		<i>JE 5-29-07</i> AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: PK 5/23/07
	Authorized officer <i>[Signature]</i>	Date 5/30/07	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)	<i>[Signature]</i>	Date 4/2/07

4-1027

AI-4316

4.B.

Tax Office Refunds

CC CONSENT

Date: 06/25/2007
 Submitted By: Gloria Guerrero, TAX OFFICE
 Submitted For: Gloria Guerrero
 Department: TAX OFFICE
 Agenda Area: Tax Refunds

Information

CAPTION

Acct #	Taxpayer	Payer	Amount
S2950.00.000.0511.00	Alma Tanguma	Lsi Tax Service	14,488.27
T3659.00.000.0018.00	Espinoza, Rolando	Fidelity Natl. Serv.	4,413.45
L3135.05.000.0020.00	Morales, Jose	Land Title USA	3,397.85
B0310.02.000.0017.00	Diaz, Pedro Rafael	Diaz, Pedro Rafael	2,957.01
L0400.00.004.0000.02	Del Bosque, Lionel	Citifinancial	2,559.39
P4325.00.000.0011.00	Luevanos, Hector	Citifinancial	8,818.66
S4848.00.000.0049.00	The Gene/Irma Brown	First American	3,514.32
T2420.00.000.0001.00	Chase Bank of Texas	IBOC Real Estate Co.	7,794.79
H4225.99.000.0005.00	Chillis #707		5,757.28

BACKGROUND

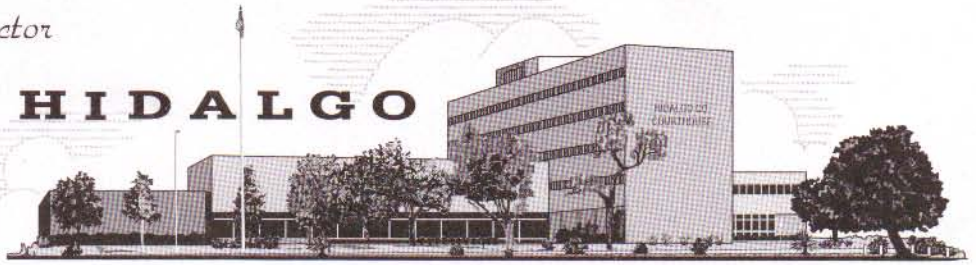
Fiscal Impact

Attachments

- Link: [judge letter](#)
 - Link: [pg 2 agenda judge](#)
 - Link: [#1 alma tanguma](#)
 - Link: [#2 rolando tanguma](#)
 - Link: [#3 jose morales](#)
 - Link: [#4 diaz, pedro rafael](#)
 - Link: [#5 del bosque lionel](#)
 - Link: [#6 luevanos, hector & elvia](#)
 - Link: [#7 the gene & irma brown lvg](#)
 - Link: [#8 chase bank of texas](#)
 - Link: [#9 chillis #707](#)
-
-

Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr. RTA

ASSESSOR AND COLLECTOR

JUNE 20, 2007

EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

The Honorable Ramon Garcia
Hidalgo County Commissioners
Edinburg, Texas 78539

Re: See attached list

Gentlemen:

As per Section 31.11 of the Property Tax Code, the governing body of each taxing unit must authorize refunds of overpayments or erroneous payments over \$ 2500.00 dollars.

I respectfully request that the Commissioner's Court approve the enclosed application for a tax refund based on an adjustment approved by the Hidalgo County Appraisal District Office.

When completed, please return the attached to this office.

Thanking you for your assistance in this matter, I remain.

Very truly yours,

A handwritten signature in blue ink, appearing to read 'Armando Barrera, Jr.', with a long horizontal flourish extending to the right.

Armando Barrera, Jr. RTA

Abj:nl

Enclosure

Xc: Hidalgo County Auditor
Raymundo Eufrazio, CPA



Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr. *RJA*

ASSESSOR AND COLLECTOR

EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

ACCOUNT NUMBER	TAX PAYER	PAYER	AMOUNT
1.S2950.00.000.0511.00	ALMA TANGUMA	LSI TAX SERVICE	\$14,488.27
2.T3659.00.000.0018.00	ESPINOZA, ROLANDO & MA.	FIDELITY NATL.SERV.	\$4,413.45
3.L3135.05.000.0020.00	MORALES, JOSE	LAND TITLE USA	\$3,397.85
4.B0310.02.000.0017.00	DIAZ, PEDRO RAFAEL	DIAZ, PEDRO RAFAEL	\$2,957.01
5.L0400.00.004.0000.02	DEL BOSQUE, LIONEL	CITIFINANCIAL	\$2,559.39
6.P4325.00.000.0011.00	LUEVANOS, HECTOR & ELVIA	CITIFINANCIAL	\$8,818.66
7.S4848.00.000.0049.00	THE GENE & IRMA BROWN LVG	FIRST AMERICAN	\$3,514.32
8.T2420.00.000.0001.00	CHASE BANK OF TEXAS	IBOC REAL ESTATE CO.	\$7,794.79
9.H4225.99.000.0005.00	CHILIS #707	BRINKER INTERNTL, INC.	\$5,757.28



APPLICATION FOR TAX REFUND

Collection office name
HIDALGO COUNTY TAX OFFICE

Present mailing address (number and street)
P O BOX 178

City, town or post office, state, ZIP code
EDINBURG TX 78540-0178

Collecting tax for: (Tax Units)
GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC

Phone (area code and number)
(956) 318-2173

To apply for a tax refund, the taxpayer must complete the following

Step 1:
Owner's name and address

Owner's name
ALMA TANGUMA PAYER: LSI TAX SERVICE

Present mailing address (number and street)
RR 25 BOX 701L

City, town or post office, state, ZIP code
MISSION, TX 78572-9620

Phone (area code and number)

Step 2:
Describe the property

Legal description (or attach copy of the tax bill or tax receipt): **JOHN H SHARY W 5.0AC E 10.0AC LT 511**

Address or location of property:
R282916

Account number of property:
S2950.00.000.0511.00 **R282916** OR

Tax receipt number:

Step 3:
Give the tax payment information

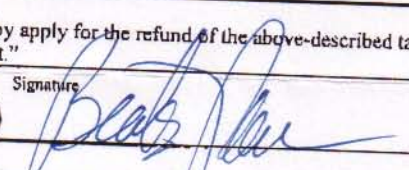
Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2003	10/25 / 2006	\$ 4103.63	\$ 4103.63
2.	2004	10/25 / 2006	\$ 3825.61	\$ 3825.61
3.	2005	10/25 / 2006	\$ 3593.01	\$ 3593.01
4.	2006	10/25 / 2006	\$ 2966.02	\$ 2966.02
5. TOTAL			\$	\$ 14488.27

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR AS PER LSI DIFF IS A REFUND. CORRECT ACCT#S2950.00.000.0511.10 IS ALREADY PAID.**

HF

Step 4:
sign the form

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

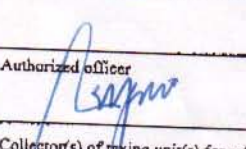
Signature: 

Date of application for tax refund: **3/2/07**

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5:
Tax refund Determination

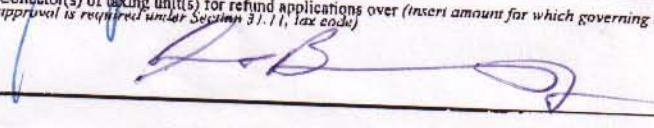
This tax refund is Approved Disapproved

Authorized officer: 

Date: **4/15/07**

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **5-30-07**

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)

sign here: 

Date: **4/13/07**

APPLICATION FOR TAX REFUND

CLAIM FORM LOGGED

Collection office name HIDALGO COUNTY TAX OFFICE	204432 APR 26 2007	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	BY NRP	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178		Phone (area code and number) (956) 318-2173

RECEIVED ON

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name FIDELITY NATIONAL TAX SERVICE	Espinosa, Rolando + MA. APR 16 2007 BY NRP Phone (area code and number) (626) 343-2183
	Present mailing address (number and street) 3100 NEW YORK DRIVE	
	City, town or post office, state, ZIP code PASADENA, CA 91107	

Legal description (or attach copy of the tax bill or tax receipt): THE ROCKS LT 18

Step 2: Describe the property	Address or location of property: R580276	Tax receipt number:
	Account number of property: T3659.00.000.0018.00	OR

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES		2006	03/26 / 2007	\$ 9112.93	\$ 4413.45
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4413.45

Taxpayer's reason for refund (attach supporting documentation): OP
HF

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	Date of application for tax refund 4-26-07
sign here	Signature Cheli Martinez	

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	JE 6-15-07 AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: J.C. 5-31-07	
	sign here	Authorized officer [Signature]	Date 6/18/07
	sign here	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) [Signature]	Date 5/4/07

5-8-07

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2173

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name LANDTITLE USA <i>Jose Morales (owner)</i>
	Present mailing address (number and street) 3900 NORTH 10TH STREET, SUITE 1030 <i>315 E. McIntyre</i>
	City, town or post office, state, ZIP code MCALLEN, TEXAS 78501 <i>Edinburg, TX 78541</i>

Phone (area code and number) *956-383-1656*

Legal description (or attach copy of the tax bill or tax receipt): **LAS BRISAS DEL ORO UT 5 LOT 20**

Step 2: Describe the property	Address or location of property:
	Account number of property:
	Tax receipt number:

L3135.05.000.0020.00 *R395321* OR *9127876*

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested		Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2006	02/09	/ 2007	\$ 6671.34	\$ 3397.85
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5. TOTAL			/	\$	\$ 3397.85

Taxpayer's reason for refund (attach supporting documentation): **OVER PAYMENT**

NB

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature <i>Genie Tanes</i>	Date of application for tax refund <i>5/4/07</i>

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer <i>[Signature]</i>	Date <i>6/15/07</i>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) <i>[Signature]</i>	Date <i>5/8/07</i>

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: *5-31-07*
TF 0-15-07

5-1007

APPLICATION FOR TAX REFUND

Collection office name
HIDALGO COUNTY TAX OFFICE

Present mailing address (number and street)
P O BOX 178

City, town or post office, state, ZIP code
EDINBURG TX 78540-0178

Collecting tax for: (Tax Units)
GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC

Phone (area code and number)
(956) 318-2173

To apply for a tax refund, the taxpayer must complete the following

Step 1:
Owner's name and address

Owner's name
PEDRO RAFAEL DIAZ

Present mailing address (number and street)
2001 CAMELIA

City, town or post office, state, ZIP code
MCALLEN, TX 78502

Phone (area code and number)

Step 2:
Describe the property

Legal description (or attach copy of the tax bill or tax receipt): **BALCONES TRAIL PH 2 LT 17**

Address or location of property:
R582363

Account number of property:
B0310.02.000.0017.00

Tax receipt number:
R582363 OR

Step 3:
Give the tax payment information


Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2006	1/22 / 07	\$ 5813.45	\$ 2957.01
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 2957.01

Taxpayer's reason for refund (attach supporting documentation): **OP**

HF

Step 4:
sign the form

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."


Signature


Date of application for tax refund
5/5/07

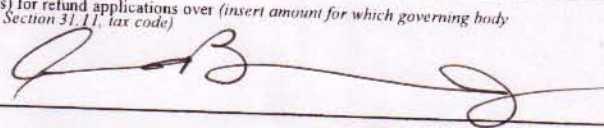
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5:
Tax refund Determination

This tax refund is Approved Disapproved

Authorized officer
 sign here 

Date
6/15/07

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)
 sign here 

Date
5/16/07

JE 6-15-07
 AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: 5-31-07 w3g

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2173

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name DEL BOSQUE, LIONEL & ONELIA M (PAID BY:CITIFINANCIAL)	
	Present mailing address (number and street) 2511 N VICTORIA	
	City, town or post office, state, ZIP code DONNA, TX 78537	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): LA BLANCA "A" E348.5-N301.3 BLK 4 2.41 AC GR	
	2.28 AC NET	
	Address or location of property:	
	Account number of property: L0400.00.004.0000.02 R501710 OR 7635456	

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2003	11/09	/ 2006	\$ 414.83
2.	2004		/	\$ 393.08	\$ 393.08
3.	2005		/	\$ 306.65	\$ 306.65
4.	2006		/	\$.01	\$.01
5. TOTAL			/	\$	\$ 1114.57

Taxpayer's reason for refund (attach supporting documentation): PAID IN ERROR ACC#R501710	
DUE TO TAX-DEFFERAL Total \$ 2,559.39	1,114.57+
NB	1,444.82+
	002

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given is correct."	2,559.39*
--------------------------	--	------------------

sign here	Signature Robert Martinez	Date of application for tax refund 01-22-07
FOR CITIFINANCIAL MORTGAGE COMPANY If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here	Date 6/15/07
	Collectors of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date 2/16/07

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **5-29-07**

4-23-07
2-21-07

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	Phone (area code and number) (956) 318-2173
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name: **LUEVANOS, HECTOR A & ELVIA (PAID BY: CITIFINANCIAL MORTGAGE)**

Present mailing address (number and street): **2321 THUNDERBIRD AVE**

City, town or post office, state, ZIP code: **MCALLEN, TX 78504**

Phone (area code and number):

Legal description (or attach copy of the tax bill or tax receipt): **PARKWAY ESTATES LOT 11**

Step 2: Describe the property

Address or location of property:

Account number of property: **P4325.00.000.0011.00** **R531939** OR **17670261**

Tax receipt number:

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2002	01/25 / 2005	\$ 3985.84	\$ 3985.84
2.	2003	01/25 / 2005	\$ 2674.88	\$ 2674.88
3.	2004	01/25 / 2005	\$ 2157.94	\$ 2157.94
4.		/	\$	\$
5. TOTAL		/	\$	\$ 8818.66

Taxpayer's reason for refund (attach supporting documentation): **MORTGAGE REQUESTING MONEY**

BACK DUE TO TAX-DEFERRAL.

NB

Step 4: sign the form

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

Signature: **Robert Martinez** Date of application for tax refund: **04-10-07**

FOR CITIFINANCIAL MORTGAGE COMPANY

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination

This tax refund is Approved Disapproved

Authorized officer: **[Signature]** Date: **6/15/07**

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code): **[Signature]** Date: **4/26/07**

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 5-30-07

4-26-07

APPLICATION FOR TAX REFUND

Collecting office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2173

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name THE GENE & IRMA BROWN LIVING TRUST PAYER: FIRST AMERICAN
	Present mailing address (number and street) 1418 E 1ST ST
	City, town or post office, state, ZIP code MISSION, TX 78572

Legal description (or attach copy of the tax bill or tax receipt): **SOUTHERN OASIS E 1/2 LOT 49 & 50**

Step 2: Describe the property	Address or location of property: 1416 E. 1st Street
	R613868
	Account number of property: \$4848.00.000.0049.00
	Tax receipt number: R613868

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES		2006	12/27 / 2006	\$ 3514.32
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3514.32

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR. AS PER TAXPAYER NO MORTGAGE CO. TAXPAYERS MONEY IN ESCROW. HF**

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here Brend Wake	Date of application for tax refund 4/26/07

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here [Signature]	Date 6/15/07
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here [Signature]	Date 8/4/07

JE 6-15-07
 AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: 5-30-07

5307

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2173

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name IBOC REAL ESTATE C/O INDUSTRY CONSULTING GROUP <i>Chase Bank of Texas (owner)</i>
	Present mailing address (number and street) PO BOX 8265
	City, town or post office, state, ZIP code WICHITA FALLS, TX 76307
	Phone (area code and number) 940-322-5055

Legal description (or attach copy of the tax bill or tax receipt): **TEXAS COMMERCE BANK MCALLEN NORTH LOT 1**

Step 2:
Describe the property

Address or location of property:

Account number of property: **T2420.00.000.0001.00** *R526270* OR Tax receipt number: **5947529**

Step 3:
Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2006	1/31 / 07	\$ <i>21662.05A</i>	\$ <i>7794.79</i>
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5.		/	\$ TOTAL	\$ <i>7794.79</i>

Taxpayer's reason for refund (attach supporting documentation): **OVERPAYMENT** *\$7,794.79*

0704428A

MM

Step 4:
sign the form

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

sign here **Signature** *Michelle Ruddy* **Date of application for tax refund** **3-9-07**

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5:
Tax refund Determination

This tax refund is approved Disapproved

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
JK 6-9-07
DATE *6-9-07*

sign here **Authorized officer** *[Signature]* **Date** *6/6/07*

sign here **Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)** *[Signature]* **Date** *3/21/07*

3-2607

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2173

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name: **BRINKER INTERNATIONAL, INC. - Tax Dept. DBA: Chili's #707**

Present mailing address (number and street): **6820 LBJ FREEWAY**

City, town or post office, state, ZIP code: **DALLAS, TX 75240**

Phone (area code and number):

Step 2: Describe the property

Legal description (or attach copy of the tax bill or tax receipt): **INVETORY FURNITURE FIXTURES & EQUIPMENT**

AT 1412 WEST EXPRESSWAY 83/ NEW ACCT 2004

Address or location of property:

Account number of property: **H4225.99.000.0005.00** OR **9094649**

Tax receipt number: **P670424**

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2006	02/08 / 2007	\$ 17043.11	\$ 5757.28
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 5757.28

Taxpayer's reason for refund (attach supporting documentation): **OVER PAYMENT**

NB

Step 4: sign the form

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

Signature: *[Handwritten Signature]* Date of application for tax refund: **3/14/2007**

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination

This tax refund is Approved Disapproved

Authorized officer: *[Handwritten Signature]* Date: **6/18/07**

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code): *[Handwritten Signature]* Date: **3/27/07**

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **6-9-07**
[Handwritten Signature]

AI-4336

4.C.

Tax Office Refunds

CC CONSENT

Date: 06/25/2007
Submitted By: Gloria Guerrero, TAX OFFICE
Submitted For: Gloria Guerrero
Department: TAX OFFICE
Agenda Area: Tax Refunds

Information

CAPTION

Account Number	Tax Payer	Payer	Amount
M2650.00.010.0003.04	Castillo, Francisco J.	Lower Valley Credit Union	\$2,803.32
T6875.99.000.0001.07	Fresco NY Italian Rest.	Fresco NY Italian Rest.	\$2,584.44
W0100.00.031.0010.10	Gutierrez, Hector M.	IBC Bank	\$7,989.45
S2950.00.000.0194.26	Pioneer Farms Equip. Co.	Pioneer Farms Equip. Co.	\$16,957.51

BACKGROUND

Fiscal Impact

Attachments

Link: [#1 co judge letter](#)

Link: [co. judge letter #2](#)

Link: [#1 castillo, francisco](#)

Link: [#2 fresco a ny italian rest.](#)

Link: [#3 gutierrez, hector m](#)

Link: [#4 pioneer farms equip co.](#)

Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr. RTA

ASSESSOR AND COLLECTOR

JUNE 20, 2007

EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

The Honorable Ramon Garcia
Hidalgo County Commissioners
Edinburg, Texas 78539

Re: See attached list

Gentlemen:

As per Section 31.11 of the Property Tax Code, the governing body of each taxing unit must authorize refunds of overpayments or erroneous payments over \$ 2500.00 dollars.

I respectfully request that the Commissioner's Court approve the enclosed application for a tax refund based on an adjustment approved by the Hidalgo County Appraisal District Office.

When completed, please return the attached to this office.

Thanking you for your assistance in this matter, I remain.

Very truly yours,

A handwritten signature in blue ink, appearing to read 'A. Barrera Jr.', with a stylized flourish at the end.

Armando Barrera, Jr. RTA

Abj:nl

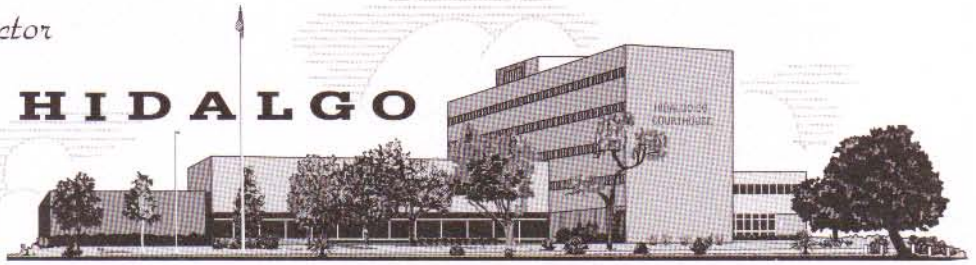
Enclosure

Xc: Hidalgo County Auditor
Raymundo Eufrazio, CPA



Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr. RJA

ASSESSOR AND COLLECTOR

EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

ACCOUNT NUMBER	TAX PAYER	PAYER	AMOUNT
1.M2650.00.010.0003.04	CASTILLO, FRANCISCO J.	LOWER VALLEY CEUM	\$2,803.32
2.T6875.99.000.0001.07	FRESCO A NY ITALIAN REST.	FRESCO A NY. ITALIAN R	\$2,584.44
3.W0100.00.031.0010.10	GUTIERREZ, HECTOR M.	IBC BANK	\$7,989.45
4.S2950.00.000.0194.26	PIONEER FARMS EQUIP. CO.	PIONEER FARMS EQUIP.	\$16,957.51



APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2173

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name CASTILLO, FRANCISCO J	<i>Payer: Lower Valley Credit Union</i>	
	Present mailing address (number and street) 18104 N 1469 PR NW		
	City, town or post office, state, ZIP code PROSSER, WA 99350-7524	Phone (area code and number)	

Legal description (or attach copy of the tax bill or tax receipt): **MCCOLL TRACT 25AC S OF LEVEE-3 BLK 10**

Step 2: Describe the property	Address or location of property:	
	R231293	
	Account number of property:	Tax receipt number:
	M2650.00.010.0003.04	R231293 OR

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2006	1/31 / 2007	\$ 3216.93	\$ 2803.32
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2803.32
Taxpayer's reason for refund (attach supporting documentation): CLERICAL ERRORS WRONG LAND					
RATE APPLIED SUPP#9					
HF					

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here	Date of application for tax refund
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here	Date 6/12/07
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date 5/22/07

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **6-8-07**
JE6-15-07

615102

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	Phone (area code and number) (956) 318-2173
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name FRESCO A NEW YORK ITALIAN REST.
	Present mailing address (number and street) 7017 N. 10TH STE. R
	City, town or post office, state, ZIP code MCALLEN, TX. 78504
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIP.**

Step 2: Describe the property	NORTH TENTH STE. R
	Address or location of property: P683329
	Account number of property: T6875.99.000.0001.07
	Tax receipt number: P683329 OR

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2006	04/19	/ 2007	\$ 948.47
2.	2006	04/27	/ 2007	\$ 1635.97	\$ 1635.97
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2584.44

Taxpayer's reason for refund (attach supporting documentation): **SUPP #9 VALUE DECREASED**

GG

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here	Date of application for tax refund
	If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.	

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized officer sign here	Date 6/18/07
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date 5/22/07

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **6-13-07**
JE 6-15-07

1015107

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DRI-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2173

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name GUTIERREZ, HECTOR M	Payer: IBC Bank
Present mailing address (number and street) PO BOX 279	
City, town or post office, state, ZIP code MISSION, TX 78573-0005	
Phone (area code and number)	

Step 2: Describe the property

Legal description (or attach copy of the tax bill or tax receipt): **WEST ADDN TO SHARYLAND**

Address or location of property:
R579968

Account number of property: **W0100.00.031.0010.10** Tax receipt number:
R579968 OR

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2006	12/12 / 2006	\$ 8018.00	\$ 7989.45
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 7989.45

Taxpayer's reason for refund (attach supporting documentation): **IMPROVEMENT DBL ASSESSED WITH W0100.00.031.0010.09 SUPP#9 HF**

Step 4: sign the form

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

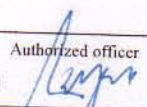
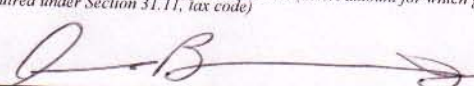
Signature: _____ Date of application for tax refund: _____

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination

This tax refund is Approved Disapproved

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **6-19-07**

Authorized officer sign here 	Date 6/19/07
Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here 	Date 5/22/07

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2173

To apply for a tax refund, the taxpayer must complete the following


Step 1: Owner's name and address	Owner's name PIONEER FARMS EQUIPMENT CO
	Present mailing address (number and street) 2589 N AIR FRESNO DR STE 109
	City, town or post office, state, ZIP code FRESNO, CA 93727-1554
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **JOHN H SHARY N8.75AC LOT 194**

Step 2: Describe the property	Address or location of property:
	R281058
	Account number of property: 22950 00 000 0194 26 R281058 OR Tax receipt number:

Step 3: Give the tax payment information	Name of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1 ALL ENTITIES	2006	1/31 / 2007	\$ 66978.40	\$ 16957.51
<i>paid</i>			/	\$	\$
<i>Ref. log.</i>			/	\$	\$
<i>002</i>			/	\$	\$
<i>And Due New Value</i>	5 TOTAL		/	\$	\$ 16957.51
	50,020.88*				
Taxpayer's reason for refund (attach supporting documentation): NON-CLERICAL ERROR; SECTION					
	50,020.88*				
	25.25(0) LATE CORRECTION PENALTY				
	0.1 =				
<i>25.254</i>	5,002.09*				

Step 4: Sign the refund application	of the above-described taxes and certify that the information I have given on this form is true and
<i>Ref. log.</i>	16,957.51+
<i>25.25</i>	5,002.09-
002	
<i>Amount req.</i>	11,955.42*
	ment on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <i>6-8-07</i> <i>SF 6-15-07</i>
	sign here 	Date <i>6/18/07</i>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)	Date <i>5/22/07</i>

6/5/07

AI-4237
Home Rehab
CC CONSENT

5.A.

Date: 06/25/2007
Submitted By: Estella Webber, URBAN COUNTY
Department: URBAN COUNTY
Agenda Area: Urban County

Information

CAPTION

Requesting approval to enter into the Urban County Program Housing Loan Agreement with Charito Alonzo in the amount of \$32,000.00

BACKGROUND

The applicant was approved for assistance under the HOME Homeowner Occupied Housing Rehabilitation Program classified as emergency case by the County Commissioner s Court on October 10, 2006. The HOME Division Staff s recommendation is to provide the Alonzo family with a four (4) bedroom home in the amount of \$32,000.00.

(See Attachments)

Fiscal Impact

Attachments

Link: [Home Rehab](#)

URBAN COUNTY PROGRAM

Hidalgo County Commissioner's Court Consent Agenda Request Form

No. _____

Date: June 11, 2007

Meeting Date Request: June 26, 2007

Deadline for Action: A.S.A.P

Contact Person: DIANA R. SERNA, DIRECTOR

Department: HOME Program

Phone: (956) 787-8127 Fax: (956) 787-5291

Diana R. Serna, Urban County Director 

Caption




Requesting approval to enter into the Urban County Program Housing Loan Agreement with Charito Alonzo in the amount of \$32,000.00.

Background:

The applicant was approved for assistance under the HOME-Homeowner Occupied Housing Rehabilitation Program classified as emergency case by the County Commissioner's Court on October 10, 2006. The HOME Division Staff's recommendation is to provide the Alonzo family with a four (4) bedroom home in the amount of \$32,000.00

<u>APPLICANT</u>	<u>CASE NUMBER</u>	<u>CITY</u>	<u>FUNDING YEAR</u>	<u>LOCATION OF PROPERTY</u>
Charito Alonzo Reconstruction Loan 50% - Deferred 50%	CW 85-06-28	Countywide Precinct #4	HOME 2005	Lot 51, ALBERTA MEADOWS, an addition to the city of Edinburg, Hidalgo County, Texas, according to map thereof recorded in Volume 29, page 105, map records of Hidalgo County, Texas.

Please initial for approval:

Deputy Director 
Finance Manager 
HOME Manager 

Legal Council _____ Budget _____ Human Resources _____

Dept./Fund No. _____ Amt. Expended: \$ _____ Funds/ Staffing Budgeted: Yes _____ No _____
Amount Code: _____ Impact on Future Budget: Yes _____ No _____

Comments:

Action taken by Commissioner's Court:

Approved _____ Tabled _____ Denied _____ Motion made by _____ Seconded _____ Vote _____

Housing Rehab Program

ENTITY: Countywide

PROJECT: Approval for assistance under the HOME Homeowner Occupied Housing Rehabilitation Program

FUNDING YEAR: HOME 2005

SYNOPSIS:

The family is recommended for applicant approval under the HOME Homeowner Occupied Housing Rehabilitation Program. The applicant has met all program requirements for assistance under the Housing Rehabilitation Program as an emergency case due to catastrophic loss - fire. The following is a profile of the family.

Charito Alonzo: Family of six (6)
Applicant's age is 34, daughters' ages are 16, 13, 3 & 1 and son age is 8.

Title Search:	No Abstract & Liens
Flood Zone:	No
Insurance:	N/A
Structures:	1
Taxes:	current
Assets & Deposits:	N/A
Debt to Income:	19%
Pay Back:	Yes; 50%
Total annual household income:	\$ 17,064.00
HUD Income Limits (family of 6):	\$ 40,000.00

Loan 50%; 50% will be deferred.

Existing Dwelling: 2 bedroom frame home, built in 1989.

RECOMMENDATION:

The HOME Staff recommends approval for assistance under the Housing Rehabilitation Program by the County Commissioner's Court.

AI-4292

5.B.

Homebuyer Asst. Prog.

CC CONSENT

Date: 06/25/2007
Submitted By: Estella Webber, URBAN COUNTY
Department: URBAN COUNTY
Agenda Area: Urban County

Information

CAPTION

Request aproval to enter into one (1) "Homebuyer Assistance Program" Contract under the Home Program.

BACKGROUND

The applicant below has been found eligible to receive closing cost/down payment assistance under the HOME - Homebuyer Assistance Program. Approval is being requested to enter into a contract with the following family:

Applicant: Martin Martinez
Grant Amount \$ 5,000
Lender USDA
Funding Year 2004 - \$5,000
Legal Description Lot 6 Cripple Creek Subdivision Unit # 2 Alamo, Tx.

Fiscal Impact

Attachments

No file(s) attached.

AI-4236
Home Rehab
CC CONSENT

5.C.

Date: 06/25/2007
Submitted By: Estella Webber, URBAN COUNTY
Department: URBAN COUNTY
Agenda Area: Urban County

Information

CAPTION

Request for approval of one (1) applicant in the City of Mercedes and one (1) applicant in the Countywide area under the HOME Homeowner Occupied Housing Rehabilitation Program.

BACKGROUND

The following families are being recommended for approval to receive assistance under the HOME Homeowner Occupied Housing Rehabilitation Program:

(See Attachments)

Fiscal Impact

Attachments

Link: [Home Rehab](#)

URBAN COUNTY PROGRAM

Hidalgo County Commissioner's Court Consent Agenda Request Form

No. _____

Date: June 11, 2007

Meeting Date Request: June 26, 2007

Deadline for Action: A.S.A.P

Contact Person: DIANA R. SERNA, DIRECTOR

Department: HOME Program

Phone: (956) 787-8127 Fax: (956) 787-5291

Diana R. Serna, Urban County Director 

Caption:

Request for approval of one (1) applicant in the City of Mercedes and one (1) applicant in the Countywide area under the HOME Homeowner Occupied Housing Rehabilitation Program.

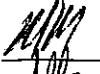


Background:

The following families are being recommended for approval to receive assistance under the HOME Homeowner Occupied Housing Rehabilitation Program:

<u>APPLICANT</u>	<u>CASE NUMBER</u>	<u>CITY</u>	<u>FUNDING YEAR</u>	<u>LOCATION OF PROPERTY</u>
Eva E. Cortez Reconstruct Deferred Loan – Elderly	ME 50-07-01	Mercedes Precinct #1	HOME 2006	All of Lot two (2), Block E, Ebony Park Subdivision to the City of Mercedes, Hidalgo County, Texas.
Salvador Ledesma Consuelo Villalon Reconstruct Deferred Loan -Elderly	CW 85-07-08	Countywide Precinct #1	HOME 2006	A 0.33 acre tract of land being part of the West Twenty (20) acres and the West Twenty Feet (20') of the East Twenty (20) acres of Farm Tract 581, Block 153, West tract subdivision, Hidalgo County, Texas.

The amount of assistance to the family will be determined after receipt of bids through the procurement process. Thereafter, selection of bidders will be presented to County Commissioner's Court. Funding is available through the HOME 2006 Budget. The Urban County Program staff recommends approval of applicant's.

Please initial for approval:

Deputy Director 
HOME Manager 
Finance Manager 

Legal Council _____ Budget _____ Human Resources _____

Dept./Fund No. _____ Amt. Expended: \$ _____ Funds/ Staffing Budgeted: Yes _____ No _____

Amount Code: _____ Impact on Future Budget: Yes _____ No _____

Comments:

Action taken by Commissioner's Court:

Approved _____ Tabled _____ Denied _____ Motion made by _____ Seconded _____ Vote _____

Housing Rehab Program

ENTITY: Countywide

PROJECT: Approval for Assistance under the HOME Homeowner Occupied Housing Rehabilitation Program.

FUNDING YEAR: HOME 2006

SYNOPSIS:

The family is being recommended for applicant approval under the HOME Homeowner Occupied Housing Rehabilitation Program. The applicant has been on the Countywide Waitlist since July 2004, and has met all of the program requirements for assistance under the HOME Homeowner Housing Rehabilitation Grant Program. The following is a profile of the project:

Eva E. Cortez

Family of one (1)	
Applicant's age is 73.	
Title Search:	No Abstract & Liens
Flood Zone:	No
Insurance:	N/A
Structures:	1
Taxes:	current
Assets & Deposits:	\$1,924.98
Debt to Income Ratio:	N/A
Pay Back:	No
Number of Bedrooms:	1
Square Feet:	819
Total annual household income:	\$ 11,185.00
HUD Income Limits (family of 1):	\$ 24,150.00
Deferred Loan-Elderly	

Existing Dwelling: 2 bedrooms frame home, built in 1963.

RECOMMENDATION:

The HOME Staff recommends approval for assistance under the Housing Rehabilitation Program by the County Commissioner's Court.

Housing Rehab Program

ENTITY: Countywide

PROJECT: Approval for Assistance under the HOME Homeowner Occupied Housing Rehabilitation Program.

FUNDING YEAR: HOME 2006

SYNOPSIS:

The family is being recommended for applicant approval under the HOME Homeowner Occupied Housing Rehabilitation Program. The applicant has been on the Countywide Waitlist since September 1998, and has met all of the program requirements for assistance under the HOME Homeowner Housing Rehabilitation Grant Program. The following is a profile of the project:

Salvador Ledesma & Consuelo Villalon	Family of two (2) Applicant's age is 57, spouse age is 63. Title Search: No Abstract & Liens Flood Zone: No Insurance: N/A Structures: 1 Taxes: current Assets & Deposits: \$2,454.78 (saving) Debt to Income Ratio: N/A Pay Back: No Number of Bedrooms: 1 Square Feet: 819 Total annual household income: \$ 23,587.00 HUD Income Limits (family of 2): \$ 27,600.00 Deferred Loan-Elderly
---	--

Existing Dwelling: 2- bedroom manufactured home, built in 1996.

RECOMMENDATION:

The HOME Staff recommends approval for assistance under the Housing Rehabilitation Program by the County Commissioner's Court.

AI-4291

6.A.

**Pipeline Permit
CC CONSENT**

Date: 06/25/2007
Submitted By: Sandra Garcia, RIGHT OF WAY DEPT.
Submitted For: Joe Pena
Department: RIGHT OF WAY DEPT.
Agenda Area: Right of Way

Information

CAPTION

1. HESCO Gathering Company, L.L.C.

* To lay a 8" gas line crossing Puerto Rico Rd, located approximately 6,625' (1.25 miles) east of the intersection of FM 1017 and Puerto Rico Rd. - BORE-

2. NORTH ALAMO WATER SUPPLY:

* Approximately 500' going north from the intersection of Mile 17N and Mile 6W on the East side - BORE- Manuela G. Rodriguez (3/4" meter installation)

* Approximately 1/4 mile west of Val Verde Rd on the south side of Wisconsin - BORE- Roger Brostowicz (relocating current service. 3/4" meter installation)

* Approximately 500' East of Tower Rd on the south side of Curry Rd - BORE- Maria G. Enriquez

* Approximately 221/2'S of Vaughn St on Midway Rd- BORE- 16" casing/8" waterline (Shawnee Village Ph 1)

* Approximately 221/2'N of Stite Rd on Midway Rd.- BORE - 16" casing/8" waterline

* Approximately 669.02'S of Vaughn St going 929.77'S on WS of Midway on 3' ROW w/ 8"waterline (line extension Shawnee Village Ph 1)

* Approximately 140'N of Stite Rd going 440'S on ES of Midway Rd on 3' ROW w/ 8"waterline (line extension Shawnee Village Ph 1)

3. SHARYLAND WATER SUPPLY

* A 6" PVC waterline to begin 20ft South of the centerline of the intersection of Lanford Rd. & Bentsen Palm Drive, then to go South for a distance of approximately 3000'. Waterline to be located 5 ft. West of East ROW line of Bentsen Palm Drive.

BACKGROUND

Fiscal Impact

Attachments

Link: [Pipeline Permits](#)

THE STATE OF TEXAS §

COUNTY OF HIDALGO §

That the County of Hidalgo, Texas, acting by and through its Commissioners' Court, by virtue of motion and resolution introduced and adopted by said Commissioners' Court on the 25th day of June, 2007 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

HESCO Gathering Company, L.L.C. hereinafter called Permittee, of the County of Hidalgo, Texas, the Right, Privilege and Authority to construct, reconstruct, lay and maintain a 8" water/gas/sewer/irrigation line; said line to be constructed of material along the following public road easement held by the Hidalgo County of Hidalgo, Texas upon the conditions, obligations, and requirements as hereinafter set forth, said public road upon which said water/ gas/ sewer/ irrigation line is to be constructed, reconstructed, laid and maintained, **described as follows:**

To lay an 8" pipeline crossing Puerto Rico Road, located approximately 6,625' (1.25 miles) east of the intersection of FM 1017 and Puerto Rico Road. –BORE-

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a 8" line along the above described public road being conditioned that Permittee agrees that:

1. The Permittee will install and shall maintain said pipeline so that the top of the line will always be at least at the minimum depth of forty (40) inches below the flow line of the ditches on either side of said roadway when the pipeline is to be constructed, the Permittee shall contact the Commissioner in the Precinct in which the construction project is located and obtain written instructions, signed by said Commissioner, concerning the location and depth of said line. In this connection, it is agreed and understood that the Permittee will not cut the surface in any manner said public road or any roadway, without first obtaining the written permission of the Commissioners' Court of Hidalgo County, Texas.
2. The Permittee will employ a competent person or firm to do such installation and complete it in accordance with the covenants and conditions herein set forth.
3. Permittee shall stake its line on the location approved by the Commissioner in whose precinct the work is to be done well in advance of beginning its work. Permittee shall contact Commissioner before commencing any work.
4. The Permittee will use all proper caution in performing the work to prevent injury to all persons and property and it will indemnify Hidalgo County against all damages that may be assessed against the County by reasons of the work here permitted and the maintenance of such pipeline.
5. Notwithstanding any provision in this Agreement to the contrary, Permittee recognizes that the paramount purpose of the easement and dedication for the said public road is to provide for the establishment and operation of a roadway for the public. Recognizing this as the paramount purpose of the easement and dedication, Permittee agrees that Permitter has the unlimited and unrestricted right to establish, construct, reconstruct and maintain the said public road and to conduct all maintenance for the roadway and all related structures (including but not limited to the maintenance, construction and reconstruction of ditches, drainage pipes, bridges and paving surfaces) without incurring any liability, obligation or duty to Permittee.

THE STATE OF TEXAS §

COUNTY OF HIDALGO §

That the County of Hidalgo, Texas, acting by and through its Commissioners' Court, by virtue of motion and resolution introduced and adopted by said Commissioners' Court on the 25th day of June, 2007 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

North Alamo Water Supply hereinafter called Permittee, of the County of Hidalgo, Texas, the Right, Privilege and Authority to construct, reconstruct, lay and maintain a 2" water/gas/sewer/irrigation line; said line to be constructed of PVC material along the following public road easement held by the Hidalgo County of Hidalgo, Texas upon the conditions, obligations, and requirements as hereinafter set forth, said public road upon which said water/ gas/ sewer/ irrigation line is to be constructed, reconstructed, laid and maintained, **described as follows:**

- Approximately 500' going North from the intersection of Mile 17N and Mile 6W on the East side – BORE- Manuela G. Rodriguez (3/4" meter installation)
- Approximately 1/4 mile West of Val Verde Rd on the South side of Wisconsin- BORE- Roger Brostowicz (relocating current service. 3/4" meter installation)
- Approximately 500' east of Tower Rd on the south side of Curry Rd- BORE- Maria G. Enriquez (3/4" meter installation)

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a water line along the above described public road being conditioned that Permittee agrees that:

1. The Permittee will install and shall maintain said pipeline so that the top of the line will always be at least at the minimum depth of forty (40) inches below the flow line of the ditches on either side of said roadway when the pipeline is to be constructed, the Permittee shall contact the Commissioner in the Precinct in which the construction project is located and obtain written instructions, signed by said Commissioner, concerning the location and depth of said line. In this connection, it is agreed and understood that the Permittee will not cut the surface in any manner said public road or any roadway, without first obtaining the written permission of the Commissioners' Court of Hidalgo County, Texas.
2. The Permittee will employ a competent person or firm to do such installation and complete it in accordance with the covenants and conditions herein set forth.
3. Permittee shall stake its line on the location approved by the Commissioner in whose precinct the work is to be done well in advance of beginning its work. Permittee shall contact Commissioner before commencing any work.
4. The Permittee will use all proper caution in performing the work to prevent injury to all persons and property and it will indemnify Hidalgo County against all damages that may be assessed against the County by reasons of the work here permitted and the maintenance of such pipeline.
5. Notwithstanding any provision in this Agreement to the contrary, Permittee recognizes that the paramount purpose of the easement and dedication for the said public road is to provide for the establishment and operation of a roadway for the public. Recognizing this as the paramount purpose of the easement and dedication, Permittee agrees that Permittee has the unlimited and unrestricted right to establish, construct, reconstruct and maintain the said public road and to conduct all maintenance for the roadway and all related structures (including but not limited to the maintenance, construction and reconstruction of ditches, drainage pipes, bridges and paving surfaces) without incurring any liability, obligation or duty to Permittee.

THE STATE OF TEXAS §

COUNTY OF HIDALGO §

That the County of Hidalgo, Texas, acting by and through its Commissioners' Court, by virtue of motion and resolution introduced and adopted by said Commissioners' Court on the 25th day of June, 2007 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

North Alamo Water Supply hereinafter called Permittee, of the County of Hidalgo, Texas, the Right, Privilege and Authority to construct, reconstruct, lay and maintain a 8" water/gas/sewer/irrigation line; said line to be constructed of material along the following public road easement held by the Hidalgo County of Hidalgo, Texas upon the conditions, obligations, and requirements as hereinafter set forth, said public road upon which said water/ gas/ sewer/ irrigation line is to be constructed, reconstructed, laid and maintained, **described as follows:**

- Approximately 221/2'S of Vaughn St on Midway Rd – BORE- 16" casing
- Approximately 221/2'N of Stite Rd on Midway Rd- BORE- 16" casing
- Approximately 669.02'S of Vaughn St going 929.77'S on WS of Midway on 3'ROW
- Approximately 140'N of Stite Rd going 440'S on ES of Midway Rd on 3'ROW.

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a water line along the above described public road being conditioned that Permittee agrees that:

1. The Permittee will install and shall maintain said pipeline so that the top of the line will always be at least at the minimum depth of forty (40) inches below the flow line of the ditches on either side of said roadway when the pipeline is to be constructed, the Permittee shall contact the Commissioner in the Precinct in which the construction project is located and obtain written instructions, signed by said Commissioner, concerning the location and depth of said line. In this connection, it is agreed and understood that the Permittee will not cut the surface in any manner said public road or any roadway, without first obtaining the written permission of the Commissioners' Court of Hidalgo County, Texas.
2. The Permittee will employ a competent person or firm to do such installation and complete it in accordance with the covenants and conditions herein set forth.
3. Permittee shall stake its line on the location approved by the Commissioner in whose precinct the work is to be done well in advance of beginning its work. Permittee shall contact Commissioner before commencing any work.
4. The Permittee will use all proper caution in performing the work to prevent injury to all persons and property and it will indemnify Hidalgo County against all damages that may be assessed against the County by reasons of the work here permitted and the maintenance of such pipeline.
5. Notwithstanding any provision in this Agreement to the contrary, Permittee recognizes that the paramount purpose of the easement and dedication for the said public road is to provide for the establishment and operation of a roadway for the public. Recognizing this as the paramount purpose of the easement and dedication, Permittee agrees that Permitter has the unlimited and unrestricted right to establish, construct, reconstruct and maintain the said public road and to conduct all maintenance for the roadway and all related structures (including but not limited to the maintenance, construction and reconstruction of ditches, drainage pipes, bridges and paving surfaces) without incurring any liability, obligation or duty to Permittee.

THE STATE OF TEXAS §

COUNTY OF HIDALGO §

That the County of Hidalgo, Texas, acting by and through its Commissioners' Court, by virtue of motion and resolution introduced and adopted by said Commissioners' Court on the 25th day of June, 2007 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

Sharyland Water Supply hereinafter called Permittee, of the County of Hidalgo, Texas, the Right, Privilege and Authority to construct, reconstruct, lay and maintain a 6" water/gas/sewer/irrigation line; said line to be constructed of material along the following public road easement held by the Hidalgo County of Hidalgo, Texas upon the conditions, obligations, and requirements as hereinafter set forth, said public road upon which said water/ gas/ sewer/ irrigation line is to be constructed, reconstructed, laid and maintained, **described as follows:**

* To lay a 6" PVC waterline to begin 20ft South of the centerline of the intersection of Lanford Rd and Bentsen Palm Drive, then to go south for a distance of approximately 3000'. Waterline is to be located 5 ft. west of east ROW line of Bentsen Palm Drive.

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a 6" line along the above described public road being conditioned that Permittee agrees that:

1. The Permittee will install and shall maintain said pipeline so that the top of the line will always be at least at the minimum depth of forty (40) inches below the flow line of the ditches on either side of said roadway when the pipeline is to be constructed, the Permittee shall contact the Commissioner in the Precinct in which the construction project is located and obtain written instructions, signed by said Commissioner, concerning the location and depth of said line. In this connection, it is agreed and understood that the Permittee will not cut the surface in any manner said public road or any roadway, without first obtaining the written permission of the Commissioners' Court of Hidalgo County, Texas.
2. The Permittee will employ a competent person or firm to do such installation and complete it in accordance with the covenants and conditions herein set forth.
3. Permittee shall stake its line on the location approved by the Commissioner in whose precinct the work is to be done well in advance of beginning its work. Permittee shall contact Commissioner before commencing any work.
4. The Permittee will use all proper caution in performing the work to prevent injury to all persons and property and it will indemnify Hidalgo County against all damages that may be assessed against the County by reasons of the work here permitted and the maintenance of such pipeline.
5. Notwithstanding any provision in this Agreement to the contrary, Permittee recognizes that the paramount purpose of the easement and dedication for the said public road is to provide for the establishment and operation of a roadway for the public. Recognizing this as the paramount purpose of the easement and dedication, Permittee agrees that Permitter has the unlimited and unrestricted right to establish, construct, reconstruct and maintain the said public road and to conduct all maintenance for the roadway and all related structures (including but not limited to the maintenance, construction and reconstruction of ditches, drainage pipes, bridges and paving surfaces) without incurring any liability, obligation or duty to Permittee.

Computers, Lease & Maintenance Agreements

CC CONSENT

Date: 06/25/2007
 Submitted By: Matilde Faz, PURCHASING DEPT.
 Submitted For: Marty Salazar
 Department: PURCHASING DEPT.
 Agenda Area: Purchasing Department

Information

CAPTION

1. Requesting authority to purchase computer equipment and peripherals from State awarded Vendors through our participation with TBPC Cooperative Purchasing Program for the following.

Requisition	Vendor	Department	Amount	Account Number
112290	CDW	Jail	\$783.90	7-1100-423-21-280-002-0-665
112380	CDW	Health	\$87.78	7-1100-441-00-340-003-0-665
112585	CDW	Precinct 1	\$159.99	7-1201-431-00-121-004-0-665
112586	CDW	Precinct 1	\$1,307.84	7-1201-431-00-121-004-0-667
112624	CDW	I. T.	\$80.17	7-1100-415-00-200-002-0-667
112752	CDW	I. T.	\$87.94	7-1100-415-00-200-002-0-665

112495	CDW DIR-SDD-223	Election	\$3,727.99	7-1100-414-00-130-001-0-745
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2. Requesting authority to purchase computer equipment and peripherals from awarded vendor through our participation with TCPN Cooperative Purchasing Program

TECH DEPOT - R4716 (I. T.) Requisition #112523 for the total of \$148.55
 TECH DEPOT - R4716 (I. T.) Requisition #112814 for the total of \$798.00

3. Requesting authority to enter into a 36-months copier lease agreement from State awarded vendor through our participation with TBPC for the following:

Requisition	Vendor	Department	Amount	Account Number
111984	Xerox	County Clerk	\$444.01/mo.	7-1237-415-40-180-003-0-442

4. Requesting authority to purchase (8) "Kenwood Star Net" passport portable handheld 2-way radios from State awarded vendor (CISV) through our participation with Cooperative Program.

Requisition	Vendor	Department	Amount	Account Number
111670	Rio Radio Supply	Precinct 3 (4)	\$399.00 ea.	7-1203-431-00-123-005-0-664
112981	Rio Radio Supply	Precinct 4 (2)	\$549.00 ea.	7-1204-431-00-124-007-0-664
112982	Rio Radio Supply	Precinct 4 (2)	\$549.00 ea.	7-1214-452-00-124-009-0-664

5. Requesting authority to enter into a (1) year maintenance agreement with COBRA SOLUTIONS, INC. for (Budget Office) requisition # 112234 in the amount of \$375.00/yr. starting 07/01/07 ending 06/30/08;

6. Requesting authority to enter into a (1) year maintenance agreement from state awarded vendor through our participation with Cooperative Program TASB-Buyboard #231-05 "IKON OFFICE SOLUTIONS" for (206th District Court) requisition #112782 in the amount of 415.20/year from 6-19-07 to 06-19-08

7. Requesting authority to enter into a (1) year maintenance agreements for (Tax Office) with;

JONES & COOK STATIONERS requisition #112865 for the total of \$195.00/yr.
6/18/07-6/18/08

JONES & COOK STATIONERS requisition #112867 for the total of \$195.00/yr.
6/18/07-6/18/08

JONES & COOK STATIONERS requisition #112849 for the total of \$195.00/yr.
6/18/07-6/18/08

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2007

ACCT. #: various

FUNDS AVAILABLE Y/N?: Yes

MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Funding available for pending requisitions as of 06/21/07.

Attachments

Link: [Computer Purchase](#)

**Requisition
HIDALGO COUNTY JAIL**

Req # 00112290

PO #

Date: 06/08/07

*Consent
#4252
6/25/07*

Bill To: x
x

Vendor : 153915
CDW GOVERNMENT, INC.
230 N. MILWAUKEE AVENUE
VERNON HILLS IL 60061

Ship To: HIDALGO COUNTY JAIL
701 EL CIBOLO RD
EDINBURG Tx 78539

Contact: ALEX CARDENAS
956-393-6023

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
10	EACH	TCPN CONTRACT #R4713 DO NOT DUPLICATE ORDER EPSON SYLUS C88+ PC COLOR PRINTER Account No _____ 7-1100-423-21-280-002-0-665 REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	78.39 Encumbrance 783.90 Freight Total	783.90 783.90
			<i>466x</i>	
		<i>@15V Consent</i>		

Authorized By: _____

Requisition

Req # 00112380

PO #

Date: 06/11/07

Bill To: x
x

Vendor : 153915
CDW GOVERNMENT, INC.
230 N. MILWAUKEE AVENUE
VERNON HILLS IL 60061

Ship To: HEALTH DEPARTMENT
1304 S. 25TH
EDINBURG TX 78539

Contact: JOSIE ESCALANT
956-383-6221

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DO NOT DUPLICATE ORDER		
1	EACH	TOSHIBA NOTEBOOK POWER ADAPTER, ITEM #1036849	79.79	79.79
1		shipping	7.99	7.99
		Account No _____	Encumbrance	
		7-1100-441-00-340-003-0-665	87.78	
			Freight	.00
			Total	87.78
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		
		<i>015V Consent</i>		

Authorized By: _____

Requisition

Req # 00112585

PO #

Date: 06/13/07

Bill To: x
x

Vendor : 153915
CDW GOVERNMENT INC.
75 REMITTANCE DRIVE
SUITE 1515
CHICAGO IL 60675-1515

Ship To: HIDALGO CO. PCT 1
1902 Joe Stephens Ave
WESLACO TX 78596

Contact: VERONICA/MARY
956-968-8733

Contract No:

Special Instructions:

A98

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1	EACH	QISV DO NOT DUPLICATE ORDER HP OFFICEJET PRO K550 PRINTER, CDW PART#822822, MFG. PART#C8157A#201 <u>Account No</u> 7-1201-431-00-121-004-0-665 REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	159.99 <u>Encumbrance</u> 159.99 Freight Total	159.99 159.99

Authorized By: _____

Requisition

Req # 00112586

PO #

Date: 06/13/07

Bill To: x
x

Vendor : 153915
CDW GOVERNMENT INC.
75 REMITTANCE DRIVE
SUITE 1515
CHICAGO IL 60675-1515

Ship To: HIDALGO CO. PCT 1
1902 Joe Stephens Ave
WESLACO TX 78596

Contact: VERONICA/NOE
956-968-8733

Contract No:

Special Instructions:

A96

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
4	EACH	QISV DO NOT DUPLICATE ORDER MICROSOFT OFFICE PROFESSIONAL PLUS 2007-LICENSE, GSA SCHEDULE, CDW#1068836, MFG PART#79P-01207 Account No _____ 7-1201-431-00-121-004-0-667 REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	326.96 <u>Encumbrance</u> 1,307.84 Freight .00 Total 1,307.84	1,307.84 1,307.84

@15/07
 Consent

Authorized By: _____

Requisition

Req # 00112624

PO #

Date: 06/14/07

Bill To: x
x

Vendor: 153915
CDW GOVERNMENT INC.
75 REMITTANCE DRIVE
SUITE 1515
CHICAGO IL 60675-1515

Ship To: INFORMATION TECHNOLOGY DEPARTMENT
100 N. CLOSNER, 1ST FL
EDINBURG TX 78539

Contact: RUBEN
956-292-7010

Contract No: TCPN R4713

Special Instructions:
140607-01

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1	EACH	IT DEPT, QUOTE# P781345 DO NOT DUPLICATE ORDER THUMBSPLUS PRO (705833)	80.17	80.17
		Account No _____	Encumbrance	
		7-1100-415-00-200-002-0-667	80.17	
		<i>Software</i>	Freight	.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	Total	80.17

Authorized By: _____

Requisition

Req # 00112752

PO #

Date: 06/15/07

Bill To: x
x

Vendor : 153915
CDW GOVERNMENT INC.
75 REMITTANCE DRIVE
SUITE 1515
CHICAGO IL 60675-1515

Ship To: INFORMATION TECHNOLOGY DEPARTMENT
100 N. CLOSNER, 1ST FL
EDINBURG TX 78539

Contact: EDNA KIRBY
956-292-7010

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		COUNTY WIDE QUOTE: GPC7568 DO NOT DUPLICATE ORDER		
2	EACH	External USB 17-in-1 Memory Card Reader	34.70	69.40
1	EACH	Belkin Hi-Speed USB 2.0 5-Port PCI Card - USB adapter - 5 ports	18.54	18.54
		Account No _____	Encumbrance	
		7-1100-415-00-200-002-0-665	87.94	
			Freight	.00
			Total	87.94
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____

Requisition

Req # 00112495

PO #

Date: 06/13/07

Bill To: x
x

Vendor: 153915
CDW GOVERNMENT, INC.
230 N. MILWAUKEE AVENUE
VERNON HILLS IL 60061

Ship To: ELECTIONS
101 S. 10TH AVENUE
EDINBURG TX 78539

Contact: PATTY ZAPATA
956-318-2570

Contract No:

Special Instructions:
REQ# 260

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DO NOT DUPLICATE ORDER		
1	EACH	PNB-CF-30CTSAZBM PAN TB 30 CL2400 80GB 1 GB XPP	3,717.00	3,717.00
1	EACH	SHIPPING & HANDLING	10.99	10.99
		<u>Account No</u>	<u>Encumbrance</u>	
		7-1100-414-00-130-001-0-745	3,727.99	
			Freight	.00
			Total	3,727.99
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		
		<i>Consent</i>		

Authorized By: _____

Requisition

Req # 00112523

PO #

Date: 06/13/07

Bill To: x
x

Vendor: 325767
TECH DEPOT
P.O. BOX 33074
HARTFORD CT 06150-3074
FAX (316) 630-4609

Ship To: INFORMATION TECHNOLOGY DEPARTMENT
100 N. CLOSNER, 1ST FL
EDINBURG TX 78539

Contact: RUBEN
956-292-7010

Contract No: TCPN R4716

Special Instructions:
130607-02

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
5	EACH	IT DEPT, QUOTE# B070613945 DO NOT DUPLICATE ORDER D-LINK PERSONAL AIR (S2111155)	29.71	148.55
		Account No	Encumbrance	
		7-1100-415-00-200-002-0-665	148.55	
			Freight	.00
			Total	148.55
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		
		<i>server to which computers connect to Corralen</i>	<i>to have</i>	<i>internet access</i>

Authorized By: _____

Requisition

Req # 00112814

PO #

Date: 06/18/07

Bill To: x
x

Vendor : 325767
TECH DEPOT
P.O. BOX 33074
HARTFORD CT 06150-3074
FAX (316)630-4609

Ship To: INFORMATION TECHNOLOGY DEPARTMENT
100 N. CLOSNER, 1ST FL
EDINBURG TX 78539

Contact: EDNA KIRBY
956-292-7010

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
2		COUNTY WIDE QUOTE #: B07061190 DO NOT DUPLICATE ORDER QuickBooks Pro 2007 Account No _____ 7-1100-415-00-200-002-0-667 REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	399.00 <u>Encumbrance</u> 798.00 Freight Total	798.00 798.00

TCR

Authorized By: _____

Requisition

Req # 00111984

PO #

Date: 06/05/07

Bill To: x
 x

Vendor : 42129
XEROX CORPORATION
P.O. BOX 650361
PNC BANK
1200 E CAMPBELL, STE 108
RICHARDSON TX 75081


Ship To: COUNTY CLERK
100 N. CLOSNER, 1ST FL
EDINBURG TX 78539

Contact: LIL HERNANDEZ
956-318-2100

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1 7		STATE CONTRACT 985-A3 ***NOTE*** UPON DELIVERY OF NEW MACHINE PICKUP THE FOLLOWING TRADE UNIT: (NWL023433) DO NOT DUPLICATE ORDER *NEW COPIER LEASE* 985-26-23400-4 UNIT COMMODITY CODE 36 MONTHS LEASE 985-26-23430-1 NEW COPIER MONTHLY LEASE (INCLUDES 60,000 COPIES/MO. 60,001 + AT \$.015 EA. INCLUDES ALL EXCEPT PAPER) <u>Account No</u> 7-1237-415-40-180-003-0-442 REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	.00 444.01 <u>Encumbrance</u> 3,108.07 Freight Total	.00 3,108.07 .00 3,108.07



Authorized By: _____

Requisition

Req # 00111670

PO #

Date: 05/30/07

Bill To: x
x

Vendor : 31208
RIO RADIO SUPPLY INC
P.O. BOX 1808
MCALLEN TX 78505-1808

Ship To: HIDALGO CO. PCT 3
724 N. Breyfogle
MISSION TX 78574

Contact: SAUL RAMIREZ
956-585-4509

Contract No:

Special Instructions:
REQ# 580

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		APPROVED BY DOMINGO VILLARREAL JR. DO NOT DUPLICATE ORDER		
4	EACH	ICOM F43TR UHF "STAR NET" PASSPORT PORTABLE WITH: ANTENNA, BATTERY, CHARGER.	399.00	1,596.00
4	EACH	REPEATER ACTIVATION FEE	15.00	60.00
		Account No _____	<u>Encumbrance</u>	
		7-1203-431-00-123-005-0-536	60.00	
		7-1203-431-00-123-005-0-664	1,596.00	
			Freight	.00
			Total	1,656.00
		FOR USE AT PRECINCT#3 FOR PORTABLE HANDHELD RADIOS		
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		
		<i>Best Order Application</i> ✓		
		<i>Consent</i>		

Authorized By: _____

Requisition

Req # 00112981

PO #

Date: 06/19/07

Bill To: x
x

Vendor: 31208
RIO RADIO SUPPLY INC
P.O. BOX 1808
MCALLEN TX 78505-1808

Ship To: HIDALGO CO. PCT 4
1102 N. DOOLITTLE RD.
EDINBURG TX 78539

Contact: MUNOZ JR
956-383-3112

Contract No:

Special Instructions:

PCT. REQ. #776

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DO NOT DUPLICATE ORDER		
2	EACH	KENWOOD TK-880 STAR NET MOBILE RADIO TO INCLUDED ACTIVATION & PROGRAMING	549.00	1,098.00
2	EACH	LARNMO4503C/S KUD PL259 ROOF TOP ANTENA	49.00	98.00
2	EACH	INSTALLATION	50.00	100.00
1	EACH	SERVICE CALL	50.00	50.00
		<u>Account No</u>	<u>Encumbrance</u>	
		7-1204-431-00-124-007-0-434	150.00	
		7-1204-431-00-124-007-0-664	1,196.00	
			Freight	.00
			Total	1,346.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

@15V

Authorized By: _____

Requisition

Req # 00112982

PO #

Date: 06/19/07

Bill To: x
x

Vendor : 31208
RIO RADIO SUPPLY INC
P.O. BOX 1808
MCALLEN TX 78505-1808

Ship To: HIDALGO CO. PCT 4
1102 N. DOOLITTLE RD.
EDINBURG TX 78539

Contact: MUNOZ JR
956-383-3112

Contract No:

Special Instructions:
PCT. REQ. #777

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DO NOT DUPLICATE ORDER		
2	EACH	KENWOOD TK-880 STAR NET MOBILE RADIO TO INCLUDED ACTIVATION & PROGRAMING	549.00	1,098.00
2	EACH	LARNMO4503C/S KUD PL259 ROOF TOP ANTENNA	49.00	98.00
2	EACH	INSTALLATION	50.00	100.00
		<u>Account No</u>	<u>Encumbrance</u>	
		7-1214-452-00-124-009-0-434	100.00	
		7-1214-452-00-124-009-0-664	1,196.00	
			Freight	.00
			Total	1,296.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

@15V

Authorized By: _____

**Requisition
BUDGET OFFICER**

Req # 00112234

PO #

Date: 06/07/07

Bill To: x
x

Vendor: 220396
COBRA SOLUTIONS INC.
4500 S. LAKESHORE DR
STE. 420
TEMPE AZ 85282

Ship To: BUDGET OFFICER
100 E. CANO, 1ST FL
EDINBURG TX 78539

Contact: Angela Garcia
956-292-7025

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1	EACH	DO NOT DUPLICATE ORDER ANNUAL MAINTENANCE AGREEMENT- THE ANNUAL MAINTENANCE AGREEMENT ENTITLE THE USER OF THE COBRA ADMINISTRATION MANAGER SOFTWARE TO ALL UPDATES/UPGRADES TO MAINTAIN COMPLIANCE WITH THE CONSOLIDATED OMNIBUS BUDGET RECONCILIATION ACT OF 1985 AND ITS AMMENDMENTS 07/01/2007-06/30/2008 Account No _____ 7-2201-415-00-115-009-0-432 REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	375.00 375.00 Freight Total	375.00 375.00 00 375.00

Consent

Authorized By: _____

COBRA Solutions, Inc.

Software Maintenance and Support Agreement

THIS SOFTWARE MAINTENANCE AND SUPPORT AGREEMENT ("Agreement") is made and entered into as of 09/01/2001 (the "Effective Date"), by and between COBRA Solutions, Inc., an Arizona corporation having a principal place of business at 4500 South Lakeshore Drive, Suite 420, Tempe, AZ 85282 ("COBRA Solutions"), and County Of Hidalgo, the authorized owner ("Licensee") of described software product(s) ("Software").

This Agreement governs the following Software offered by COBRA Solutions:

COBRA Administration Manager

NOW, THEREFORE, in consideration of the premises set forth above and the mutual covenants contained herein, and intending to be legally bound hereby, the parties agree as follows:

1. **Maintenance Services.** During the Term (as defined herein) of this Agreement, COBRA Solutions will furnish the following maintenance, support and other services ("Services") for the Licensed Software:
 - 1.1. All updates, enhancements, upgrades or releases of the Licensed Software and related information and documentation ("Updates") may be downloaded via internet;
 - 1.2. Updates to provided notifications as required by law changes and distribution of new notifications when applicable to remain compliant with the law shall be downloaded via the internet, and
 - 1.3. Reasonable access by telephone and/or e-mail to COBRA Solutions' technical staff for consultation in the use and operation of the Licensed Software.
2. **Maintenance Fee.** In consideration for the Services, Licensee shall pay COBRA Solutions an annual fee of \$375 ("Maintenance Fee"). COBRA Solutions will send via US Postal Services, an annual invoice. Licensee shall pay COBRA Solutions the Maintenance Fee on or before the first day of the Renewal Date. COBRA Solutions shall have the right to change the Maintenance Fee upon no less than thirty (30) days prior written notice to Licensee
3. **Term.** The initial term ("Initial Term") of this Agreement shall be for a period of twelve (12) months commencing on 09/01/2001. After the Initial Term, Licensee shall have the option of renewing this Agreement for additional one (1) year term ("Renewal Term"). The renewal date ("Renewal Date") will be the first day of the Renewal Term. COBRA Solutions may terminate this Agreement immediately upon breach of this Agreement by Licensee, which breach remains uncured fifteen (15) days after written notice thereof from COBRA Solutions, or upon no less than ninety (90) days prior written notice to Licensee.
4. **License.** All Services provided to Licensee hereunder shall be deemed to be a part of the Licensed Software and the terms and conditions of the License Agreement not inconsistent with the express provisions of this Agreement shall be applicable to such Services, including without limitation those relating to use, copying, return of materials, assignments, ownership, copyright, trade secret and patent protection and applicable law.
5. **Limited Warranty.** COBRA Solutions offers a sixty (60) day "money back" warranty on the software and prepaid Maintenance Fees. Payment, less applicable shipping fees will be reimbursed upon return of entire software package, including but not limited to the distribution media, manual and box along with a written explanation for the return. If Licensee has not paid software and Maintenance Fees, this Agreement will be automatically terminated. If Licensee has paid fees, COBRA Solutions will issue a refund check within thirty-one (31) days from receipt of returned software. Any implied warranties are limited to the duration of the express warranties stated in this Section 5. COBRA Solutions does not warrant that: (a) operation of any of the Updates shall be uninterrupted or error free, (b) that functions contained in the Updates shall

operate in combinations which may be selected for use by Licensee or meet Licensee's requirements, or (c) that the Updates will detect all viruses, Trojan horses, worms or other software routines or hardware components designed to permit unauthorized access to or to disable, erase or otherwise harm any software, hardware or data

THE FOREGOING EXPRESS LIMITED WARRANTIES ARE IN LIEU OF AND, TO THE MAXIMUM EXTENT PERMITTED BY APPLICABLE LAW, COBRA SOLUTIONS SPECIFICALLY DISCLAIMS ANY AND ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING BUT NOT LIMITED TO IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, WITH REGARD TO THE SERVICES AND THE PROVISION OF OR FAILURE TO PROVIDE SUCH SERVICES.

TO THE MAXIMUM EXTENT PERMITTED BY APPLICABLE LAW, IN NO EVENT WILL COBRA SOLUTIONS OR ITS DISTRIBUTORS OR DEALERS BE LIABLE FOR SPECIAL, INCIDENTAL, INDIRECT OR CONSEQUENTIAL DAMAGES WHATSOEVER (INCLUDING, WITHOUT LIMITATION, DAMAGES FOR LOSS OF INCOME, PROFITS, USE OF INFORMATION OR ANY OTHER PECUNIARY LOSS) ARISING OUT OF OR IN CONNECTION WITH THE SERVICES OR THE USE OF OR INABILITY TO USE ANY UPDATE, EVEN IF COBRA SOLUTIONS HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. COBRA SOLUTIONS' ENTIRE LIABILITY UNDER ANY PROVISION OF THIS AGREEMENT SHALL BE LIMITED TO THE MAINTENANCE FEES PAID BY LICENSEE HEREUNDER.

6. **U.S. Government Restricted Rights.** The Services are provided with RESTRICTED RIGHTS. Use, duplication or disclosure by the Government is subject to restrictions as set forth in subparagraph (c)(1)(ii) of the Rights in Technical Data and Computer Software clause at DFARS 252.227-7013 or subparagraphs (c)(1) and (2) of the Commercial Computer Software - - Restricted Rights at 48 CFR 52.227-19, as applicable. Manufacturer is COBRA Solutions, 4500 South Lakeshore Drive, Suite 420, Tempe, AZ 85282.
7. **Force Majeure.** COBRA Solutions shall not be liable to Licensee for any failure or delay caused by events beyond COBRA Solutions' reasonable control, including, without limitation, Licensee's failure to furnish necessary information; sabotage; failure or delays in transportation or communication; failures or substitutions of equipment; labor disputes; accidents; shortages of labor, fuel, raw materials or equipment; or technical failures.
8. **Non-Assignment.** Licensee shall have the right to assign this Agreement to a successor by merger or a purchaser of all or substantially all of its assets relating to the business of which the use or sale of the Licensed Software are a part if the successor agrees in writing to be bound by this license. COBRA Solutions shall have the right to assign this Agreement, in whole or in part, and/or to subcontract its performance obligations hereunder, at any time and from time to time in its sole discretion.
9. **Entire Agreement.** This Agreement, together with the License Agreement and any and all exhibits, schedules and appendices attached hereto and thereto, constitute the entire agreement between the parties and supersede all prior oral or written representations, agreements, promises, or other communications, which pertain to the covered subject matter. This Agreement may not be amended or modified except by a written agreement signed by authorized representatives of each party.
10. **Governing Law.** This Agreement is made under and shall be governed by and construed in accordance with the laws of Arizona. Any dispute arising out of, or in connection with this Agreement shall be adjudicated exclusively in the state or federal courts of Arizona, and all parties consent to personal jurisdiction and venue therein.
11. **Notices.** Any notice required under this Agreement shall be given in writing and delivered personally or by telecopy (with transmission confirmed), registered or certified mail, return receipt requested, or overnight delivery service to the parties at their addresses noted above or such other addresses as shall have been designated to each other in writing

12. Severability. If any provision of this Agreement shall be held unenforceable or invalid, the remaining parts shall remain in full force and effect.
13. Enforcement. The failure of either party in any one or more instances to insist upon strict performance of any of the terms or provisions of this Agreement shall not be construed as a waiver or relinquishment, to any extent, of the right to assert or rely upon any such terms or provisions on any future occasion. The headings are for convenience only and do not affect the meaning of this Agreement.
14. Counterparts. The parties may execute this Agreement in one or more counterpart copies, each of which shall be deemed an original.

Requisition

Req # 00112782

PO #

Date: 06/15/07

Bill To: x
x

Vendor : 223751
IKON OFFICE SOLUTIONS
P.O. BOX 650016
DALLAS TX 75265-0016
FAX (478)471-2311

Ship To: 206TH DISTRICT COURT
100 N CLOSNER, 2ND FL
EDINBURG TX 78539

Contact: Delma
956-318-2265

Contract No:

Special Instructions:

18

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1	YEAR	DO NOT DUPLICATE ORDER Maintenance agreement contract for Canon, IR2105 Copier/Service Agreement-Annual Maintenance Agreement Annual OOG Meter INCL. labor, parts, BOK, supplies, duration; serial number NPR01713 Equipment ID: 10366164 Contracted Copies: 15,000 Overage Rate: .02406 <u>Account No</u> 7-1100-412-00-004-001-0-432 REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	415.20 <u>Encumbrance</u> 415.20 Freight .00 Total 415.20	415.20 415.20
		<i>+ Owns machine</i>		

Authorized By: _____



Document Efficiency
At Work.™

Master Maintenance & Sale Agreement

Customer Information:

STX Hidalgo County - 206th District Court
 Full Legal Name
 100 N Closner 2nd Fl
 Customer Location Address
 Edinburg TX 78539
 City County State Zip

Customer Billing Contact: Delma Silva

956-318-2265 delma.silva@co.hidalg
 Phone Extn. Fax/Email
 100 N Closner 2nd Fl
 Customer Billing Address (if different)
 Edinburg TX 78539
 City County State Zip

Customer acknowledges that the undersigned is duly authorized to sign this Master Maintenance & Sale Agreement ("Agreement") and acknowledges receipt and acceptance of the terms and conditions of this Agreement, which consists of 3 pages and includes this cover page and Exhibit A.

CUSTOMER

IKON OFFICE SOLUTIONS, INC.

Authorized Signature: _____ Authorized Signature: _____
 Signer's Printed Name: _____ Signer's Printed Name: _____
 Title: _____ Title: _____
 Date: _____ Date: _____

Check if Sales Tax Exempt (*Must attach valid Exemption Certificate)

Initial Order

(Use the spaces provided below to identify the initial order of Products and/or Services to be purchased under this Agreement.)

Product Description:

Quantity	Make, Model, Serial Number	Purchase	Service	Quantity	Make, Model, Serial Number	Purchase	Service
1	Canon IR210S NPR01713	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

Check if additional Product Description page(s) attached

Product Charges:

Total Product Charges: _____
 Check if Professional Service fees included
 Excludes Taxes

Services & Service Charges:

Minimum Term (mos)	Cost Per Image	Service Charges Total Amount	Meter Read/Billing For Additional Images
<input type="checkbox"/> 36 Months		<input type="checkbox"/> Monthly _____	<input type="checkbox"/> Monthly
<input type="checkbox"/> 48 Months		<input type="checkbox"/> Quarterly _____	<input type="checkbox"/> Quarterly
<input checked="" type="checkbox"/> Other 12		<input checked="" type="checkbox"/> Other \$415.20	<input checked="" type="checkbox"/> Other
Cost of Additional Images	Guaranteed Minimum Monthly/Quarterly/Other Images	Service Level	
<u>\$0.0241</u>	<input type="checkbox"/> Monthly _____ <input type="checkbox"/> Quarterly _____ <input checked="" type="checkbox"/> Other 15000	<input type="checkbox"/> Gold : Includes all supplies and staples. Excludes paper. <input checked="" type="checkbox"/> Silver : Includes all supplies. Excludes paper and staples. <input type="checkbox"/> Bronze: Parts & Labor only. Excludes paper, staples and supplies.	

Additional Provisions:
 maintenance & sale agreement shall be between 6/19/07 to 6/19/08



EXHIBIT A TO MASTER MAINTENANCE & SALE AGREEMENT

This Agreement sets forth the specific terms and conditions under which IKON agrees to sell the specific products identified on a Sales Order (defined below) entered into hereunder ("Products") and/or provide maintenance services for the specific items of equipment identified on a Service Order (defined below) entered into hereunder ("Services") to Customer from time to time. Either party may terminate the "master" arrangement contemplated by this Agreement at any time upon prior written notice to the other. Termination of this Agreement shall not, however, alter or otherwise modify the rights or obligations of the parties with respect to any Sales Order or Service Order placed and accepted prior to such termination.

The following terms shall apply to all Service transactions:

1. **Services.** (a) In order to obtain Services from IKON hereunder, Customer will either (i) execute a Service Order (in a form to be provided and executed by IKON) referencing this Agreement, or (ii) issue a valid and signed purchase order to IKON (each referred to in this Agreement as a "Service Order"). Each Service Order must identify the specific equipment to be serviced, the term of the Service engagement, the location at which Services shall be performed and the applicable Service charges for such order. The cover page to this Agreement may serve as an initial Service Order.
(b) As part of its Services, IKON will repair or replace in accordance with the terms and conditions of this Agreement any part of the serviced equipment that becomes unserviceable due to normal usage (other than consumable supplies). Replacement parts will be furnished on an exchange basis and will be new, reconditioned or used. All parts removed due to replacement will become the property of IKON.
(c) The Services provided by IKON under this Agreement and each Service Order will not include the following: (i) Repairs resulting from misuse (including without limitation improper voltage or the use of supplies that do not conform to the manufacturer's specifications); (ii) Repairs made necessary by service performed by persons other than IKON representatives; (iii) Service calls or work which the Customer requests to be performed outside of regular IKON business hours (unless covered under an extended hour service contract) and Service calls or work which the Customer requests to be performed on IKON holidays; (iv) Removable cassette, copy cabinet, exit trays, or any item not related to the mechanical or electrical operation of the serviced equipment; (v) Consumable supplies such as paper or staples, unless expressly provided for in the Service Order; (vi) Repairs and/or service calls resulting from attachments not purchased from IKON; (vii) Any software, system support or related connectivity unless specified in writing by IKON; (viii) Parts no longer available from the applicable manufacturer; (ix) Electrical work external to the serviced equipment, including problems resulting from overloaded or improper circuits; and (x) Charges for installation of the serviced equipment or de-installation and/or movement of the serviced equipment from one location to another. Damage to serviced equipment or parts arising from causes beyond the control of IKON are not covered by this Agreement or any Service Order. IKON may terminate its Service obligations under this Agreement or any Service Order with respect to any item of serviced equipment that has been modified, damaged, altered or serviced by personnel other than those employed by IKON. Additionally, service necessitated as a result of inadequate key operator involvement, operator caused damage, lack of recommended service, or use of inadequate or incompatible supplies may result in Service being rendered on a time-and-material basis in addition to the Charges.
2. **Service Calls.** Service calls will be made during normal business hours at the installation address shown on the applicable Service Order. Service does not include coverage on IKON holidays. Travel and labor-time for the service calls after normal hours, on weekends and on holidays, if and when available and only in the event and to the extent that IKON agrees to provide such non-standard coverage, will be charged at overtime rates in effect at the time the service call is made. IKON representatives will not handle, disconnect or repair unauthorized attachments or components. Customer is responsible for disconnecting and re-connecting unauthorized attachments or components. Customer shall hold IKON and its employees and representatives harmless from and against damages to any unauthorized parts, components or accessories as well as any claims arising therefrom.
3. **Reconditioning.** Reconditioning and similar major overhauls may be covered by applicable manufacturer warranties, but are not covered by this Agreement or any Service Order. If IKON determines that such actions may be necessary as a result of normal wear and tear of materials and age factors caused by normal usage in order to keep the serviced equipment in working condition, IKON will submit to Customer an estimate of the needed repairs and the cost for such repairs (which costs will be in addition to the charges payable under the applicable Service Order). If the Customer does not authorize such reconditioning, IKON may, at its option: (i) discontinue service of such serviced equipment under the applicable Service Order and refund any unused portion of the Service Charges (as defined below) applicable to such serviced equipment, or (ii) refuse to renew such Service Order for such serviced equipment upon its expiration. After any such termination, IKON will make service available on a "Per Call" basis at IKON's then-prevailing rates at the time of service.
4. **Term.** Each Service Order shall become effective on the effective date of the Service Order and shall continue for the term identified in the Service Order. At the expiration of the initial term or any extended term of any Service Order, it will automatically, subject to applicable law and without further action required by either party, renew for an additional twelve (12) month period, provided that the Customer is not then in default and subject to applicable law. The contracted rate will be adjusted to IKON's then-prevailing rates, to be reflected in an automatic increase as of the renewal date.
5. **Service Charges.** Service charges ("Service Charges") will be set forth on the Service Order and will be payable by the Customer in advance. Service Charges will not include any charges for repairs or Service that are otherwise covered by the applicable manufacturer's limited warranty during the period covered by any such warranty, to the extent IKON has agreed with such manufacturer not to charge a customer for any such charges. Customer acknowledges and agrees that: (i) alterations, attachments, specification changes, or use by Customer of sub-standard supplies that cause excessive service calls may require an increase in Service Charges; (ii) the transfer of the serviced equipment from the location indicated on the applicable Service Order may result in an increase of Service Charges or the termination of the applicable Service Order; and (iii) the Toner Inclusive Program (if applicable) is based on manufacturer supply consumption rates. Delivery of supplies will not exceed agreed upon usage or applicable manufacturer supply consumption rates. IKON reserves the right to assess freight and shipping charges for all parts and supply deliveries. Consumption of covered supply products varying significantly from expected usage may result in additional charges for supplies. Customer agrees to pay when due, all taxes, where applicable, related to this Agreement and/or any Service Order, excluding taxes on the income of IKON. Service Charges are based on standard 8.5x11 images. IKON reserves the right to assess additional images charges for non-standard images, including 11x17 images. If the term of any Service Order exceeds 12 months, the Cost Per Image and the Cost of Additional Images may be increased by IKON up to 5% annually for each year beyond the initial 12-month period.
6. **Default.** If Customer does not pay all Service Charges or other charges owing under this Agreement or any Service Order promptly when due, IKON may (i) refuse to further service the serviced equipment until such default is fully cured, or (ii) furnish Service on a C.O.D. "Per Call" basis at IKON's then-prevailing rates, at the time of Service. Except as expressly permitted by this Agreement, no refund or credit will be given for any early termination of any Service Order or any renewal thereof. If Customer defaults in its obligations hereunder, IKON may require Customer to immediately pay to IKON all past due payments under all Service Orders, and the early termination fee described in Section 9 below.
7. **Use Of Recommended Supplies; Meter Readings.** If the Customer uses other than manufacturer-recommended supplies, including paper, developer, toner, and fuser oil, and if such supplies are defective or not acceptable for use on the serviced equipment or cause abnormally frequent service calls or service problems, then IKON may, at its option, assess a surcharge or terminate the applicable Service Order with respect to such items of serviced equipment. If so terminated, Customer will be offered service on a "Per Call" basis at IKON's then-prevailing rates. It is not a condition of this Agreement that the Customer use only IKON-provided supplies. If we determine that you have used more than the manufacturer's recommended specifications for supplies provided by IKON you will pay reasonable charges for those excess supplies and/or we may refuse additional supply shipments. Customer agrees to provide IKON true and accurate meter readings by submitting meter reads to IKON through the IKON automated meter read program, or in any other reasonable manner requested by IKON, whether via telephone, email or otherwise. If accurate meter readings are not provided on a timely basis, IKON reserves the right to estimate the meter readings from previous meter readings. Appropriate adjustments will be made to subsequent billing cycles following receipt of actual and accurate meter readings. As part of its Services, Customer acknowledges and agrees that IKON may place automatic meter reading units on imaging devices at your location in order to facilitate the timely and efficient collection of accurate meter read data on a monthly, quarterly or annual basis. IKON agrees that such units will be used by IKON solely for such limited purpose. Once transmitted, all meter read data shall become the sole property of IKON and will be utilized for billing purposes.



8. **Customer Obligations.** Customer agrees to provide a proper place for the use of the serviced equipment, including electric service as specified by the manufacturer. Customer will provide adequate facilities (at no charge) for use by IKON representatives in connection with the Service of the serviced equipment hereunder within a reasonable distance of the serviced equipment. Customer agrees to provide "360 degree" service access to the serviced equipment. Customer will provide a key operator for the serviced equipment and will make operators available for instruction in use and care of the serviced equipment. Unless otherwise agreed upon by IKON in writing or designated in the applicable Service Order, all supplies for use with the serviced equipment will be provided by the Customer and will be available "on site" for servicing. Customer agrees that any systems utilizing similar supplies must be covered under similar inclusive service programs.

9. **Early Termination.** Customer may terminate any Service Order under this Agreement prior to its maturity so long as Customer is not then in default and provide: IKON at least thirty (30) days prior written notice. In addition, for each Service Order having an initial term of at least 36 months, Customer shall pay to IKON, as liquidated damages and not as a penalty, the following early termination fee: (i) if the termination occurs in months 1 through 12 of the term of such Service Order, an amount equal to 12 times the base monthly Service Charge payable under such Service Order; (ii) if the termination occurs in months 13 through 24, an amount equal to 9 times the base monthly Service Charge; and (iii) if the termination occurs anytime after the 24th month, an amount equal to the lesser of 6 times the base monthly Service Charge or the number of months remaining under the then current term of such Service Order. For each Service Order having an initial term of less than 36 months, Customer shall pay to IKON, as liquidated damages and not as a penalty, an early termination fee equal to the lesser of 6 times the base monthly Service Charge or the number of months remaining under the initial term of such Service Order.

The following terms shall apply to all Product sale transactions:

10. **Order, Delivery and Acceptance.** In order to purchase Products from IKON hereunder, Customer will either (i) execute a Sales Order (in a form to be provided and executed by IKON) referencing this Agreement, or (ii) issue a valid and signed purchase order to IKON (each referred to in this Agreement as a "Sales Order"). Each Sales Order must identify the Products, the Product delivery location and the applicable Product charges for such order. The cover page to this Agreement may serve as an initial Sales Order. Unless otherwise agreed upon by both parties in writing, (a) delivery of Products to common carrier or, in the case of an arranged delivery by a local IKON installation vehicle, actual delivery by such vehicle to Customer shipping point, shall constitute delivery to Customer, and (b) Customer shall be responsible for all installation, transportation and rigging expenses. Customer agrees to confirm delivery of all Products covered by this Agreement when the same is delivered by signing a delivery and acceptance certificate or written delivery acknowledgement. Orders shall not be cancelable by the Customer following acceptance by IKON. IKON reserves the right to make Product deliveries in installments. All such installments shall be separately invoiced and paid for when due, without regard to subsequent deliveries. Delay in delivery of any installment shall not relieve Customer of its obligation to accept remaining installments and remit payments as invoiced by IKON. IKON reserves the right at any time to revoke any credit extended to Customer because of Customer's failure to pay for any Products when due or for any other similar credit reason.

11. **Returns: Damaged Products.** No Products may be returned without IKON's prior written consent. Only consumable goods invoiced within sixty days will be considered for return. On authorized returns, Customer agrees to pay a restocking charge equivalent to 30% of the purchase price. Merchandise returned without written authorization may not be accepted at the receiving dock and is the sole responsibility of the Customer. All non-saleable merchandise (that has been opened or partially used) will be deducted from any credit due to the Customer. All claims for damaged Products or delay in delivery shall be deemed waived unless made in writing, delivered to IKON within three days after receipt of Products.

The following terms shall apply to all transactions:

12. **Warranty.** IKON agrees to perform its Services in a professional manner, consistent with applicable industry standards. IKON is not the manufacturer of any of the Products. However, IKON shall transfer to Customer any Product warranties made by the applicable Product manufacturer, to the extent transferable and without recourse. EXCEPT AS EXPRESSLY SET FORTH IN THIS AGREEMENT, IKON DISCLAIMS ALL WARRANTIES AND REPRESENTATIONS, EXPRESS OR IMPLIED, OF ANY NATURE WHATSOEVER, INCLUDING BUT NOT LIMITED TO, ANY IMPLIED WARRANTIES OF MERCHANTABILITY, FITNESS FOR USE, OR FITNESS FOR A PARTICULAR PURPOSE. IKON SHALL NOT BE RESPONSIBLE AND SHALL HAVE NO LIABILITY FOR ANY DIRECT, INCIDENTAL OR CONSEQUENTIAL DAMAGES, INCLUDING BUT NOT LIMITED TO DAMAGES ARISING OUT OF THE USE OR PERFORMANCE OF THE EQUIPMENT OR THE LOSS OF USE OF THE EQUIPMENT. IKON'S TOTAL AGGREGATE LIABILITY TO CUSTOMER, IF ANY, UNDER ANY SALES ORDER OR SERVICE ORDER, SHALL IN NO EVENT EXCEED THE TOTAL FEES PAID TO IKON THEREUNDER. Customer must comply with any applicable license agreement or license terms relating to intangible property or associated services included in any Products, such as periodic software licenses and/or prepaid data base subscription rights ("Software License"), whether pursuant to written, click-through, shrink-wrap or other agreements for such purpose, with the supplier of the Software ("Software Supplier"). IKON has no right, title or interest in any Software. Customer is solely responsible for entering into Software Licenses with the applicable Software Supplier.

13. **Payment; Risk of Loss; Taxes.** Payment terms are net ten days. If invoices are unpaid and overdue, Customer agrees to pay IKON a late charge of 1.5% per month on any unpaid amounts or the maximum allowed by law, whichever is less, and in addition shall pay IKON all costs and expenses of collection, or in the enforcement of IKON's rights hereunder, including, but not limited to, reasonable internal and external legal costs, whether or not suit is brought. All remedies hereunder or at law are cumulative; provided, however, that the sole remedy of Customer for any Services not performed in accordance with the Service standards set forth in this Agreement shall be the prompt and proper re-performance of such services at no additional charge. Unless otherwise agreed upon by both parties in writing, Customer assumes all risk of theft, loss or damage, no matter how occasioned, to all Products covered by this Agreement following delivery by IKON to common carrier or, in the case of an arranged delivery by a local IKON installation vehicle, delivery by such vehicle to Customer shipping point. Except to the extent of any applicable and validated exemption, Customer agrees to pay any applicable taxes that are levied on or payable as a result of the use, sale, possession or ownership of the Products and/or Services covered hereunder, other than income taxes of IKON.

14. **Assignment; Force Majeure.** Customer shall neither assign any right or interest arising under this Agreement nor delegate any obligations hereunder without the prior written consent of IKON. Any such attempted assignment or delegation shall be void. IKON shall not be liable for failure to deliver or delays in delivery or Products or Services occasioned by causes beyond IKON's control, including without limitation strikes, lockout, fires, embargoes, war or other outbreak of hostilities, inability to obtain materials or shipping space, receipt of orders in excess of IKON's or its supplier's then-scheduled production capacity, machinery breakdowns, delays of carrier or suppliers, governmental acts and regulations or other causes beyond IKON's control.

15. **Governing Law; Entire Agreement.** This Agreement shall be governed by and construed and interpreted in accordance with the laws of the State of Georgia. The parties hereto also agree to submit to the non-exclusive jurisdiction of the courts of the State of Georgia to resolve any action under this Agreement. This Agreement constitutes the entire agreement between the parties and may not be amended except in writing signed by an officer or authorized representative of IKON. All Sales Orders and Service Orders shall be governed solely by the terms and conditions of this Agreement, notwithstanding the inclusion of any additional or different terms and conditions in any order document of any kind issued by Customer at any time. PURCHASE ORDERS ISSUED BY CUSTOMER FOR PRODUCTS AND/OR SERVICES FROM IKON, EVEN IF THEY DO NOT EXPRESSLY REFERENCE OR INCORPORATE THIS AGREEMENT, SHALL BE SUBJECT TO THIS AGREEMENT AND SERVE ONLY TO IDENTIFY THE PRODUCTS AND/OR SERVICES ORDERED AND SHALL NOT BE DEEMED TO ALTER OR OTHERWISE MODIFY THE TERMS AND CONDITIONS OF THIS AGREEMENT. IKON may accept or reject any order in the exercise of its discretion and may rely upon each order submitted by Customer as a binding commitment. No local, general or trade custom or usage or course of prior dealings between the parties shall be relevant to supplement or explain any term used herein. This Agreement and any Sales Orders or Service Orders may be executed in one or more counterparts which, taken together, shall constitute one and the same original document.



Southwest CCC
810 Gears Rd.
Houston, TX 77067



COPY

The Way Business
Gets Communicated™

Friday, June 08, 2007

Attention: *Delma Silva*
Company: *Hidalgo County*
Fax/Phone: *956-318-2005*

Fax/Phone: (832) 348-2767 / 1(888) 456-6457 ext. 40216
From: *Rosie Salinas*
rsalinas@ikon.com

Maintenance Agreement Quote

Equip ID#: 10366164

Model: Canon IR210S

Contracted Copies: **15,000**

Frequency: **Annual**

Base Rate: **\$415.20**

Overage Rate: **.02406**

Supplies **Yes X** No

Includes Parts, Labor, and all supplies (excluding staples and paper)

Here is the quote you requested for 15,000 copies. Please let me know if this is suitable for you. This quote is good for 10 days from today.

Thank you, and have a great day!

Rosie Salinas

A large, stylized handwritten signature in black ink, appearing to be "Rosie Salinas".

*approved
6/15/07*

Requisition

Req # 00112865

PO #

Date: 06/18/07

Consent
4252
6/25/07

Bill To: x
x

Vendor : 190403
JONES & COOK STATIONERS
919 W HIGHWAY
PHARR TX 78577
FAX (956) 686-0274

Ship To: TAX ASSESSOR-COLLECTOR
100 E. CANO, 1ST FL
EDINBURG TX 78539

Contact: MARY GARCIA
956-318-2159

Contract No:

Special Instructions:

C-108

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		LOCATION: SAN JUAN SUB-STATION 509 E EARLING RD DO NOT DUPLICATE ORDER		
1	YEAR	MAINTENANCE CONTRACT AGREEMENT ON ELECTRIC CASH REGISTER SAMSUNG MODEL #ER-550 SERIAL #9703100277	195.00	195.00
0	EACH	PRINTER EPSON MODEL PS-180 SERIAL#D4LZCO9643	.00	.00
0	EACH	PRINTER MODEL #TM-U295 SERIAL# A8DO166306	.00	.00
1		EFFECTIVE JUNE 18, 2007 THRU JUNE 18, 2008		.00
		Account No _____	Encumbrance	
		7-1100-415-15-140-001-0-432	195.00	
			Freight	.00
			Total	195.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____

Req# 112865

CUSTOMER SERVICE PLAN

Jones & Cook
STATIONERS

919 W. Highway 83
Pharr, Texas 78577
Ph. (210) 787-3233
1-800-292-1199
Fax (210) 787-2834

This is a Customer Service Plan between HIDALGO COUNTY TAX ASSESSOR

P.O. BOX 178, EDINBURG, TX 78540 (509 E. EARLING, SAN JUAN, TX 78589)
(name and address)

(hereinafter "customer") and Jones & Cook Stationers, 919 West Highway, Pharr, Texas (hereinafter "dealer") wherein customer orders and dealer agrees to furnish, on a year to year basis, maintenance service in accordance with the terms and conditions herein specified:

1. The payment of \$ 195.00 shall be due on a C.O.D. basis and this plan shall not become effective until said payment is received by Dealer.
2. Dealer will repair, without additional charge for labor, any unit which has failed due to defects in material or workmanship, or which has failed through normal operation. Dealer will furnish all parts.
3. This agreement does not include repairs made necessary by or through damage by fire, water, accident, abuse or acts of God, repair to units altered or repaired by someone other than the dealer, or major overhauls.
4. For each customer's unit which is to be repaired and which can reasonably be expected to be out of service for more than 24 hours, the dealer will supply to customer a loan machine, if requested and if available, until repairs of said machine are effected.
5. This agreement is not transferable and shall terminate on any unit which is sold.
6. Dealer shall not be responsible for failure to render service hereunder for causes beyond its control, including, without limitation, strikes and labor disputes.
7. This agreement is cancellable by either party by giving 30 days notice prior to the anniversary date of the agreement.
8. This instrument contains the entire agreement between the parties and there are no promises, representations or warranties, express or implied, other than as set forth herein.

Jones & Cook Stationers _____

By ABEL RAMIREZ _____

By _____

Effective Date: June 18, 2007 thru June 18, 2008

The units covered by this plan are as follows:

Make	Model	Serial No.	Rate	
SAMSUNG	ER-550	9703100277		THE TOTAL PRICE INCLUDES ALL THE COMPONENTS AS A PACKAGE. \$ <u>195.00</u> Total
EPSON	PS-180	D4LZC09643		
EPSON	TM-U295	A0D0166306		

PLEASE SIGN AND RETURN THIS COPY TO DEALER

Requisition

Req # 00112867

PO #

Date: 06/18/07

*Account
#4252
6/25/07*

Vendor : 190403
 JONES & COOK STATIONERS
 919 W HIGHWAY
 PHARR TX 78577
 FAX (956)686-0274

Bill To: x
x

Ship To: TAX ASSESSOR-COLLECTOR
 100 E. CANO, 1ST FL
 EDINBURG TX 78539

Contact: MARY GARCIA
 956-318-2159

Contract No:

Special Instructions:

C-109

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		LOCATION: WESLACO SUB-STATON 1902 JOE STEPHENS DR DO NOT DUPLICATE ORDER		
1	YEAR	MAINTENANCE CONTRACT AGREEMENT ELECTRIC CASH REGISTER SAMSUNG MODEL #ER-550 SERIAL#9703100434	195.00	195.00
0	EACH	PRINTER EPSON MODEL #PS-180 SERIAL #D4LZCO9647	.00	.00
0	EACH	PRINTER EPSON MODEL #TM-U295 SERIAL#ABD0162082	.00	.00
1		EFFECTIVE JUNE18, 2007 THRU JUNE 18, 2008		.00
		<u>Account No</u>	<u>Encumbrance</u>	
		7-1100-415-15-140-001-0-432	195.00	
			Freight	.00
			Total	195.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____

Req# 112867

CUSTOMER SERVICE PLAN



Jones & Cook
STATIONERS

919 W. Highway 83
Pharr, Texas 78577
Ph. (210) 787-3233
1-800-292-1199
Fax (210) 787-2834

This is a Customer Service Plan between HIDALGO COUNTY TAX ASSESSOR

P.O. BOX 178, EDINBURG, TX 78540 (1902 JOE STEPHENS DRIVE, WESLACO, TX 78596
(name and address)

(hereinafter "customer") and Jones & Cook Stationers, 919 West Highway, Pharr, Texas (hereinafter "dealer") wherein customer orders and dealer agrees to furnish, on a year to year basis, maintenance service in accordance with the terms and conditions herein specified:

1. The payment of \$ 195.00 shall be due on a C.O.D. basis and this plan shall not become effective until said payment is received by Dealer.
2. Dealer will repair, without additional charge for labor, any unit which has failed due to defects in material or workmanship, or which has failed through normal operation. Dealer will furnish all parts.
3. This agreement does not include repairs made necessary by or through damage by fire, water, accident, abuse or acts of God, repair to units altered or repaired by someone other than the dealer, or major overhauls.
4. For each customer's unit which is to be repaired and which can reasonably be expected to be out of service for more than 24 hours, the dealer will supply to customer a loan machine, if requested and if available, until repairs of said machine are effected.
5. This agreement is not transferable and shall terminate on any unit which is sold.
6. Dealer shall not be responsible for failure to render service hereunder for causes beyond its control, including, without limitation, strikes and labor disputes.
7. This agreement is cancellable by either party by giving 30 days notice prior to the anniversary date of the agreement.
8. This instrument contains the entire agreement between the parties and there are no promises, representations or warranties, express or implied, other than as set forth herein.

Jones & Cook Stationers _____

By ABEL RAMIREZ

By _____

Effective Date: June 18, 2007 thru June 18, 2008

The units covered by this plan are as follows:

Make	Model	Serial No.	Rate	
SAMSUNG	ER550	9703100434		THE TOTAL PRICE INCLUDES ALL THE COMPONENTS AS A PACKAGE. \$ 195.00 Total
EPSON	PS-180	D4LZC09647		
EPSON	TM-U295	ABD0162082		

PLEASE SIGN AND RETURN THIS COPY TO DEALER

Requisition

Req # 00112849

PO #

Date: 06/18/07

Consent
#4250
6/25/07

Bill To: x
x

Vendor : 190403
JONES & COOK STATIONERS
919 W HIGHWAY
PHARR TX 78577
FAX (956)686-0274

Ship To: TAX ASSESSOR-COLLECTOR
100 E. CANO, 1ST FL
EDINBURG TX 78539

Contact: MARY GARCIA
956-318-2159

Contract No:

Special Instructions:
C-107

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		LOCATION MISSION SUB-STATION 722 N BREYFOGLE DO NOT DUPLICATE ORDER		
1	YEAR	MAINTENANCE CONTRACT AGREEMENT ELECTRIC CASH REGISTER SAMSUNG MODEL#ER-215 SERIAL# 0306530165	195.00	195.00
0	EACH	PRINTER EPSON PS-180 SERIAL#D4LZD28024	.00	.00
0	EACH	PRINTER EPSON TM-U295 SERIAL#A8D0183436	.00	.00
0	EACH	EFFECTIVE JUNE 18, 2007 THRU JUNE 18, 2008	.00	.00
		Account No _____	<u>Encumbrance</u>	
		7-1100-415-15-140-001-0-432	195.00	
			Freight	.00
			Total	195.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____

Reg # 112844

CUSTOMER SERVICE PLAN

Jones & Cook Stationers

919 W. Highway 83 Pharr, Texas 78577 Ph. (210) 787-3233 1-800-292-1199 Fax (210) 787-2834

This is a Customer Service Plan between HIDALGO COUNTY TAX ASSESSOR

P.O. BOX, 178, EDINBURG, TX 78540 (722 BREV. FOGLE, PALMVIEW, TX 78574) (name and address)

(hereinafter "customer") and Jones & Cook Stationers, 919 West Highway, Pharr, Texas (hereinafter "dealer") wherein customer orders and dealer agrees to furnish, on a year to year basis, maintenance service in accordance with the terms and conditions herein specified:

- 1. The payment of \$ 195.00 shall be due on a C.O.D. basis and this plan shall not become effective until said payment is received by Dealer.
2. Dealer will repair, without additional charge for labor, any unit which has failed due to defects in material or workmanship, or which has failed through normal operation. Dealer will furnish all parts.
3. This agreement does not include repairs made necessary by or through damage by fire, water, accident, abuse or acts of God, repair to units altered or repaired by someone other than the dealer, or major overhauls.
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8. This instrument contains the entire agreement between the parties and there are no promises, representations or warranties, express or implied, other than as set forth herein.

Jones & Cook Stationers

By ABEL RAMIREZ

By

Effective Date: June 18, 2007 thru June 18, 2008

The units covered by this plan are as follows:

Table with 5 columns: Make, Model, Serial No., Rate, and Total Price. Rows include SAMSUNG ER215, EPSON PS-180, and EPSON TM-U295. Total price is \$ 195.00.

PLEASE SIGN AND RETURN THIS COPY TO DEALER