DATE: August 29, 2007

DEPARTMENT HEAD: Eduardo Olivarez, Chief Administrative Officer

DEPARTMENT NAME: Hidalgo County Health Department

ACCOUNT NUMBER: 7-1293-441-00-340-008-8 (TB Control Grant Contract)

SUBJECT: Budget Amendments (Increases) in Accordance with Local Government Code, Chapter 111, Subchapter C

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following amendments (increase) to my department budget in accordance with Local Government Code, Chapter 111, Subchapter C.

INCREASE OBJECT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT -
7-1293-441-00-340-008-8-434	R&M Services - Vehicles	$ 1,000.00
7-1293-441-00-340-008-8-550	Printing & Binding	$ 2,000.00
7-1293-441-00-340-008-8-604	Drugs & Medicines	$ 20,849.00
	TOTAL BUDGET	$ 23,849.00

INCREASE REQUEST $

Revenue Account #

REASON: Implement TB Control Program Income Budget for the period 9/1/2007 - 8/31/2008.

There are no areas in my current budget to reduce in order to fund the above mentioned items.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONER'S COURT DATE ATTEST CO. CLERK