DATE: August 29, 2007

DEPARTMENT HEAD: Eduardo Olivarez, Chief Administrative Officer

DEPARTMENT NAME: Hidalgo County Health Department

ACCOUNT NUMBER: 7-1293-441-00-340-012-8 (Immunization 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 -
7-1293-441-00-340-012-8-113	Salaries - F/T Employees	$ 339,665.00
7-1293-441-00-340-012-8-220	FICA	$ 25,984.37
7-1293-441-00-340-012-8-230	Retirement	$ 30,298.12
7-1293-441-00-340-012-8-250	Unemployment Comp	$ 1,698.33
7-1293-441-00-340-012-8-260	Worker's Comp	$ 11,107.05
7-1293-441-00-340-012-8-211	Health Insurance	$ 22,849.39
7-1293-441-00-340-012-8-212	Life Insurance	$ 367.74
	TOTAL BUDGET	$ 431,970.00

INCREASE REQUEST $

Revenue Account #

REASON: Implement Immunization Grant 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