DATE: July 7, 2008

DEPARTMENT HEAD: Eduardo Olivarez, Chief Administrative Officer

DEPARTMENT NAME: Hidalgo County Health Department

ACCOUNT NUMBER: 8-1293-441-00-340-018-8 (SDI Grant Contract)

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

Honorable Commissioner's Court of Hidalgo County

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 |
|---|---|---|
| 8-1293-441-00-340-018-8-601 | Office Supplies | $ 5,107.00 |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Revenue Account # 8-1293-334-10-340-018-8-000 | SDI Revenues | $ 5,107.00 |
| | | |
| | | |
| | | |
| | TOTAL BUDGET | $ 5,107.00 |

INCREASE REQUEST $

Revenue Account #

REASON Implement amended SDI 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