DATE: July 21, 2008

DEPARTMENT HEAD: Eduardo Olicarez - Chief Administrative **AI#10265**

DEPARTMENT NAME:
Hidalgo County Health Department

ACCOUNT NUMBER: 8-1293-441-00-340-006-9-XXX (RLSS-(

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

Honorable Commissioners' Court of Hidalgo County:

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

INCREASE ACCOUNT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT
8-1293-441-00-340-006-9-113	Salaries - F/T Employees	82,609.00
8-1293-441-00-340-006-9-220	FICA	6,319.59
8-1293-441-00-340-006-9-230	Retirement	7,368.72
8-1293-441-00-340-006-9-250	Unemployment Compensation	413.05
8-1293-441-00-340-006-9-260	Worker's Compensation	2,701.31
8-1293-441-00-340-006-9-211	Health Insurance	13,491.33
8-1293-441-00-340-006-9-212	Life Insurance	150.00
8-1293-441-00-340-006-9-581	Travel In County	500.00
8-1293-441-00-340-006-9-583	Travel Out of County	1,000.00
8-1293-441-00-340-006-9-603	Educational/Instructional Supplies	11,871.00
8-1293-334-10-340-006-9-000	RLSS - OPHP Revenue	126,424.00
	TOTAL BUDGET INCREASE (DECREASE)	$ 126,424.00

REASON: Implement RLSS/OPHP Grant Budget for the period 9/1/08 to 8/31/09

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

__/__/__
DATE

ATTEST COUNTY CLERK