DATE: July 28, 2008

DEPARTMENT HEAD: Eduardo Olivarez, Chief Administrative Officer

DEPARTMENT NAME: Hidalgo County Health Department

ACCOUNT NUMBER: 8-1293-441-00-340-012-9 (Immunization Grant Program Income)

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 441-00-340-012-9-211	Health Insurance	$ 19,053.00
8 1293-441-00-340-012-9-601	Office Supplies	$ 26,714 00
8 1293-441-00-340-012-9-603	Educational/Instructional Supplies	$ 20,000 00
8-1293-441 00-340-012-9-604	Chem. Drugs, Meds. lab Supplies	$ 20,000 00
8 1293-441-00-340-012-9-540	Advertising	$ 8,000 00
8 1293 441-00-340-012-9-550	Printing & Binding	$ 4,000 00
8 1293 441-00-340-012-9-581	Travel In County	$ 5,000.00
8-1293-441-00-340-012-9-583	Travel Out Of County	$ 10,000 00
8-1293-345-40-340-012-9-000	Immunization PI-Grant Revenue	112,767.00
	TOTAL BUDGET	$ 112,767 00

INCREASE REQUEST $

Revenue Account #

REASON Implement Immuniation Grant Budget for the period 9/1/2008 - 8/31/2009

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