

**AI-11829**  
**Hurricane Dolly LIT**  
**CC CONSENT**

**2.A.**

Date: 10/28/2008  
Submitted By: Erika Reyna, BUDGET & MANAGEMENT  
Department: BUDGET & MANAGEMENT  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION  
2008 - DBM Hurricane Dolly (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-415-00-115-072-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:  
BUDGETARY IMPACT:  
Obj. code 334 Available balance as of 10/21/08 \$40,000.00

-->442 \$29,515.00  
-->613 \$25.00  
-->664 \$40.00

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/21/2008 02:00 PM	APRV
2	Ana Galvan	Anna Galvan	10/22/2008 02:42 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 11:41 AM	APRV
4	Court Administrator	Angela Garcia	10/23/2008 11:51 AM	APRV

Form Started By: Erika Reyna  
Started On: 10/21/2008 01:29 PM

Final Approval Date: 10/23/2008

---

# INTRA-DEPARTMENTAL TRANSFER

DATE: October 21, 2008

DEPARTMENT HEAD: Valde Guerra

DEPARTMENT NAME: DBM for Hurricane Dolly

ACCOUNT NUMBER: 8-1100-415-00-115-072-0-XXX

CONTACT PERSON: Erika Reyna PHONE: ext. 5414

SUBJECT: Intra-departmental Transfer

Honorable Commissioners' Court of Hidalgo County:

I submit for your consideration the following Intra-departmental transfer(s) in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
334	Engineer & Architect Srv	442	Equip & Vehicle Rentals	\$ 29,515.00
334	Engineer & Architect Srv	613	Safety Supplies	\$25.00
334	Engineer & Architect Srv	664	Other Minor Equipment	40.00
<b>TOTAL</b>				<b>\$ 29,580.00</b>

**REASON:** Additional funding is being transferred to cover expenditures resulting from Hurricane Dolly.

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
CC DATE

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT

\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11813**

**2.B.**

**Line Item Transfer**

**CC CONSENT**

**Date:** 10/28/2008  
**Submitted By:** Rachel Segura, COUNTY COURT #4  
**Submitted For:** Rachel Segura  
**Department:** COUNTY COURT #4  
**Agenda Area:** Intradepartmental Transfers:

---

**Information**

**CAPTION**

2008 - CCL # 4 (1100)

**BACKGROUND**

NEED TO TRANSFER MONEY INTO OBJ. CODE 664 TO COVER THE COST OF CORPORATE EXPRESS

---

**Fiscal Impact**

**FISCAL YEAR:** 2008                      **ACCT. #:** 8-1100-412-00-024-001-0-XXX  
**FUNDS AVAILABLE Y/N?:** Y              **MATCHING FUNDS Y/N?:**

**BUDGETARY IMPACT:**

Available account balance as of 10-23-08

---

**Attachments**

Link: [Line Item Transfer](#)

---

**Form Routing/Status**

<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Budget & Management	Veronica Lopez	10/21/2008 08:03 AM	APRV
2	Veronica Ortiz		10/24/2008 08:32 AM	PEND
3	Auditor's Office	Becky Morales	10/23/2008 02:26 PM	APRV
4	Purchasing Department	Marty Salazar	10/24/2008 08:24 AM	APRV
5	Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

Form Started By: Rachel Segura

Started On: 10/20/2008 02:39 PM

Final Approval Date: 10/24/2008

---

## INTRA-DEPARTMENTAL TRANSFER

DATE: October 20, 2008

DEPARTMENT HEAD: Judge Fred Garza

DEPARTMENT NAME: County Court at Law No. 4

ACCOUNT NUMBER: 8-1100-412-00-024-001-0

CONTACT PERSON: Rachael Segura PHONE: 956-318-2390

SUBJECT: Intra-departmental Transfer

Honorable Commissioners' Court of Hidalgo County:

I submit for your consideration the following Intra-departmental transfer(s) in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
831	COURT COSTS & INV.	664	OTHER MINOR EQUIPMENT	\$111.65
TOTAL				\$ 111.65

**NEED TO TRANSFER MONEY INTO OBJECT CODE 664 TO COVER THE COST OF PURCHASE  
FROM CORPORATE EXPRESS**

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
CC DATE

\_\_\_\_\_  
APPROVED COMMISSIONERS COURT

\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11903**

**2.C.**

**Paper transfer  
CC CONSENT**

Date: 10/28/2008  
Submitted By: Angela Garcia, BUDGET & MANAGEMENT  
Submitted For: Lydia Barrientos  
Department: BUDGET & MANAGEMENT  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Probate Court (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-412-00-023-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-23-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/23/2008 11:51 AM	APRV
2	Veronica Ortiz	Veronica Ortiz	10/23/2008 02:33 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 05:20 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:33 AM	APRV

Form Started By: Angela Garcia Started On: 10/23/2008 09:20 AM

Final Approval Date: 10/24/2008

---

BUDGET INTRADEPARTMENTAL TRANSFER REQUEST

DATE: 10/23/08

DEPARTMENT HEAD: JUDGE HOMERO GARZA

DEPARTMENT NAME: PROBATE COURT

ACCOUNT NUMBER: 8-1100-412-00-023-001-0-XXX

SUBJECT: Budget Intradepartmental Transfer in Accordance with Local Government Code, Chapter 111, Subchapter C.

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following Intradepartmental Budget Transfer/s in accordance with Local Government Code, Chapter 111, Subchapter C.

<b>FROM:</b>		<b>TO:</b>		
<b>OBJECT</b>	<b>OBJECT</b>	<b>OBJECT</b>	<b>OBJECT</b>	
<b>CODE</b>	<b>NAME</b>	<b>CODE</b>	<b>NAME</b>	<b>AMOUNT</b>
890	OTHER	602	PAPER SUPPLIES	\$300.00
			<b>TOTAL</b>	<b>300.00</b>

REASON: NEED FUNDS TO PURCHASE COPY PAPER

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
APPROVED COMMISSIONERS COURT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11840**  
**Travel Transfer**  
**CC CONSENT**

**2.D.**

Date: 10/28/2008  
Submitted By: Angela Garcia, BUDGET & MANAGEMENT  
Submitted For: Lydia Barrientos  
Department: BUDGET & MANAGEMENT  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Probate Court (1243)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1243-412-00-023-002-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-23-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Budget & Management	Veronica Lopez	10/22/2008 09:25 AM	APRV
2		Veronica Ortiz	Veronica Ortiz	10/23/2008 02:26 PM	APRV
3		Auditor's Office	Becky Morales	10/23/2008 02:29 PM	APRV
4		Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

Form Started By: Angela Garcia

Started On: 10/22/2008 08:39 AM

Final Approval Date: 10/24/2008

---

BUDGET INTRADEPARTMENTAL TRANSFER REQUEST

DATE: 10/08/08

DEPARTMENT HEAD: HOMERO GARZA

DEPARTMENT NAME: PROBATE COURT

ACCOUNT NUMBER: 8-1243-412-00-023-002-0-XXX

SUBJECT: Budget Intradepartmental Transfer in Accordance with Local Government Code,  
Chapter 111, Subchapter C.

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following Intradepartmental Budget Transfer/s in accordance with  
Local Government Code, Chapter 111, Subchapter C.

<b>FROM:</b>		<b>TO:</b>		
<b>OBJECT</b>	<b>OBJECT</b>	<b>OBJECT</b>	<b>OBJECT</b>	
<b>CODE</b>	<b>NAME</b>	<b>CODE</b>	<b>NAME</b>	<b>AMOUNT</b>
831	COURT COSTS	581	TRAVEL IN COUNTY	\$1,000.00
831	COURT COSTS	583	TRAVEL OUT OF COUNTY	1,000.00
			<b>TOTAL</b>	<b>2,000.00</b>

REASON: CURRENT & FUTURE EXPENDITURES.

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
APPROVED COMMISSIONERS COURT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ATTEST COUNTY CLERK



**AI-11912**  
**LIT**  
**CC CONSENT**

**2.E.**

Date: 10/28/2008  
Submitted By: Veronica Ortiz, BUDGET & MANAGEMENT  
Submitted For: Dora L Munoz  
Department: BUDGET & MANAGEMENT  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION  
2008 - HIDTA Task Force (1252)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1252-412-00-270-012-0-XXX  
FUNDS AVAILABLE Y/N?: y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:  
Available account balance as of 10-23-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/23/2008 02:22 PM	APRV
2	Ana Galvan	Anna Galvan	10/24/2008 11:45 AM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 12:06 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 01:08 PM	APRV

Form Started By: Veronica Ortiz  
Started On: 10/23/2008 12:52 PM

Final Approval Date: 10/24/2008

---

DATE: October 22, 2008  
 DEPARTMENT HEAD: Dora L. Munoz, H.I.D.T.A. Task Force Commander  
 DEPARTMENT NAME: Hidalgo County HIDTA Task Force  
 ACCOUNT NUMBER: 8-1252-412-00-270-012-0-xxx (U.S. Dept of Treasury)  
 SUBJECT: Budget Line-Item Transfers (s)

Transfer Number: 8



Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfer (s) in accordance with Local Government Code, Chapter 111, Subchapter C.:

<i>FROM</i>		<i>TO</i>		
<i>ACCOUNT NO.(S)</i>	<i>ACCOUNT NAME</i>	<i>ACCOUNT NO.(S)</i>	<i>ACCOUNT NAME</i>	<i>AMOUNT</i>
8-1252-412-00-270-012-0- 890	Other	8-1252-412-00-270-012-0- 350	Contractual Services	2,000.00
8-1252-412-00-270-012-0- 890	Other	8-1252-412-00-270-012-0- 432	Equip R&M Service	1,000.00
<b>TOTAL</b>				<b>3,000.00</b>

REASON: TO FUND UNANTICIPATED EXPENDITURES

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Dora L. Munoz DATE  
 H.I.D.T.A. Task Force Commander

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Attest County Clerk DATE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Budget Officer DATE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Approved Commissioners' Court DATE

**AI-11902**  
**HIDTA Task Force**  
**CC CONSENT**

**2.F.**

Date: 10/28/2008  
Submitted By: Nelda Olivarez, HIDTA  
Submitted For: Dora L. Munoz, Commander  
Department: HIDTA  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - HIDTA Task Force (1291)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1291-412-00-270-003-7-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-23-08

---

Attachments

Link: [2007 Grant](#)

---

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Budget & Management	Veronica Lopez	10/23/2008 11:51 AM	APRV
2		Veronica Ortiz	Veronica Ortiz	10/23/2008 02:32 PM	APRV
3		Auditor's Office	Becky Morales	10/23/2008 05:22 PM	APRV
4		Court Administrator	Angela Garcia	10/24/2008 08:33 AM	APRV

Form Started By: Nelda Olivarez

Started On: 10/23/2008 08:59 AM

Final Approval Date: 10/24/2008

---

DATE:  
 DEPARTMENT HEAD: Dora L. Munoz, H.I.D.T.A. Task Force Commander  
 DEPARTMENT NAME: Hidalgo County HIDTA Task Force / Grant Funds  
 ACCOUNT NUMBER: 8-1291-412-00-270-003-7-xxx (Grant 2007)  
 SUBJECT: Budget Line-Item Transfers (s)

Transfer Number: 5



Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfer (s) in accordance with Local Government Code, Chapter 111, Subchapter C.:

<i>FROM</i>		<i>TO</i>		
<i>ACCOUNT NO.(S)</i>	<i>ACCOUNT NAME</i>	<i>ACCOUNT NO.(S)</i>	<i>ACCOUNT NAME</i>	<i>AMOUNT</i>
8-1291-412-00-270-003-7- 342	Information & Credit	8-1291-412-00-270-003-7- 682	Fuel	95.75
8-1291-412-00-270-003-7- 431	Bldg R&M Service	8-1291-412-00-270-003-7- 682	Fuel	455.20
8-1291-412-00-270-003-7- 432	Equip R&M Service	8-1291-412-00-270-003-7- 682	Fuel	117.97
8-1291-412-00-270-003-7- 583	Travel-Out of County	8-1291-412-00-270-003-7- 682	Fuel	809.94
<b>TOTAL</b>				<b>1,478.86</b>

REASON: TO FUND UNANTICIPATED EXPENDITURES

Dora L. Munoz H.I.D.T.A. Task Force Commander	_ / _ / _ DATE	Attest County Clerk	_ / _ / _ DATE
Budget Officer	_ / _ / _ DATE	Approved Commissioners' Court	_ / _ / _ DATE

**AI-11831**  
**LINE TRANSFER**  
**CC CONSENT**

**2.G.**

**Date:** 10/28/2008  
**Submitted By:** Alice Garces, MASTER COURT #1  
**Submitted For:** Alice Garces  
**Department:** MASTER COURT #1  
**Agenda Area:** Intradepartmental Transfers:

---

**Information**

**CAPTION**

2008 - Master Court #1 (1100)

**BACKGROUND**

---

**Fiscal Impact**

**FISCAL YEAR:** 2008                      **ACCT. #:** 8-1100-412-00-031-001-0-XXX  
**FUNDS AVAILABLE Y/N?:** Y              **MATCHING FUNDS Y/N?:** N

**BUDGETARY IMPACT:**

665-->601 \$ 300.00; Available balance as of 10/23/08 \$ 968.28

---

**Attachments**

Link: [Line Item Transfer](#)

---

**Form Routing/Status**

<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Budget & Management	Veronica Lopez	10/21/2008 03:17 PM	APRV
2	Ana Galvan	Anna Galvan	10/23/2008 10:01 AM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 02:14 PM	APRV
4	Purchasing Department	Marty Salazar	10/23/2008 02:15 PM	APRV
5	Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

Form Started By: Alice Garces

Started On: 10/21/2008 02:53 PM

Final Approval Date: 10/24/2008

---



**AI-11898**  
**Intra Dept. Transfer**  
**CC CONSENT**

**2.H.**

Date: 10/28/2008  
Submitted By: Stephanie Palacios, DISTRICT CLERK  
Department: DISTRICT CLERK  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION  
2008 - District Clerk (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-412-00-090-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N  
BUDGETARY IMPACT:  
746-->666 \$ 5,000.00; Available balance as of 10/24/08 \$ 7,145.90  
746-->604 \$ 25.79; Available balance as of 10/24/08 \$ 7,145.90

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/23/2008 07:52 AM	APRV
2	Ana Galvan	Anna Galvan	10/24/2008 09:07 AM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 09:13 AM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 09:58 AM	APRV

Form Started By: Stephanie Palacios  
Started On: 10/22/2008 05:37 PM  
Final Approval Date: 10/24/2008

---





**AI-11807**

**2.I.**

**Line Item Transfer**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Sandra Garcia, RIGHT OF WAY DEPT.  
Submitted For: Joe Pena  
Department: RIGHT OF WAY DEPT.  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Right of Way (1200)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1200-431-00-260-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-23-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/21/2008 01:57 PM	APRV
2	Veronica Ortiz	Veronica Ortiz	10/23/2008 02:19 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 02:23 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

Form Started By: Sandra Garcia Started On: 10/20/2008 08:54 AM

Final Approval Date: 10/24/2008

---

DATE: October 20, 2008  
 DEPARTMENT HEAD: Jose N. Pena  
 DEPARTMENT NAME: Right Of Way  
 ACCOUNT NUMBER: 8-1200-431-00-260-001-0

SUBJECT: BUDGET LINE-ITEM TRANSFER (S)

Honorable Commissioners' Court Of Hidalgo County:

I submit to you for your consideration the following line item transfers in accordance with Local Government: Code, Chapter 111, Subchapter C.:

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

Account Number

OBJECT CODE	OBJECT NAME	OBJECT CODE	OBJECT NAME	AMOUNT
<u>661</u>	<u>Minor Office Equipment</u>	<u>746</u>	<u>Office Furniture</u>	<u>3200.00</u>
<u>550</u>	<u>Printing &amp; Binding</u>	<u>584</u>	<u>Registration Fees</u>	<u>2500.00</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
			TOTAL -->	<u>5700.00</u>

REASON: To meet Expenses  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK

**AI-11812**  
**LINE ITEM TRANSFER**  
**CC CONSENT**

**2.J.**

Date: 10/28/2008  
Submitted By: Esther Cantu, 398TH DISTRICT COURT  
Department: 398TH DISTRICT COURT

---

Information

CAPTION  
2008 - 398th District Court (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-412-00-009-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N  
BUDGETARY IMPACT:  
583-->585 \$ 600.00; Available balance as of 10/22/08 \$ 1,935.52

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/21/2008 08:02 AM	APRV
2	Ana Galvan	Anna Galvan	10/22/2008 08:36 AM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 09:08 AM	APRV
4	Court Administrator	Angela Garcia	10/23/2008 09:25 AM	APRV

Form Started By: Esther Cantu  
Started On: 10/20/2008 02:30 PM  
Final Approval Date: 10/23/2008

---

DATE: October 20, 2008

DEPARTMENT HEAD: Aida Salinas Flores

DEPARTMENT NAME: 398th District Court

ACCOUNT NUMBER: 8-1100-412-00-009-001-0

**SUBJECT: Budget Line-Item Transfer (s)**

Honorable Commissioners' Court of Hidalgo County:

I submit to you for consideration the following line-item transfers in accordance with Local Government Code, Chapter 111, Subchapter C.:

FROM			TO		
ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME		ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
8-1100-412-00-009-001-0-583	TRAVEL OUT OF COUNTY	→	8-1100-412-00-009-001-0-585	NON EMPLOYEE TRAVEL	\$ 600.00
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			
<b>TOTAL</b>					<b>\$600.00</b>

REASON: ADDITIONAL MONIES NEEDED.

DEPARTMENT HEAD SIGNATURE

ATTEST COUNTY CLERK

APPROVED COMMISSIONERS' COURT

DATE

**AI-11868**  
**LINEITEM TRANFER TO 601**  
**CC CONSENT**

**2.K.**

**Date:** 10/28/2008  
**Submitted By:** Esther Cantu, 398TH DISTRICT COURT  
**Department:** 398TH DISTRICT COURT

---

**Information**

**CAPTION**

2008 - 398th District Court (1100)

**BACKGROUND**

---

**Fiscal Impact**

**FISCAL YEAR:** 2008                      **ACCT. #:** 8-1100-412-00-009-001-0-XXX  
**FUNDS AVAILABLE Y/N?:** Y              **MATCHING FUNDS Y/N?:**

**BUDGETARY IMPACT:**

Available account balance as of 10-23-08

---

**Attachments**

Link: [LINE ITEM TRANSFER 601](#)

---

**Form Routing/Status**

<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Budget & Management	Veronica Lopez	10/22/2008 04:37 PM	APRV
2	Veronica Ortiz	Veronica Ortiz	10/23/2008 02:29 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 02:34 PM	APRV
4	Purchasing Department	Marty Salazar	10/24/2008 08:27 AM	APRV
5	Court Administrator	Angela Garcia	10/24/2008 08:32 AM	APRV

Form Started By: Esther Cantu                      Started On: 10/22/2008 02:42 PM

Final Approval Date: 10/24/2008

---

DATE: October 22, 2008

DEPARTMENT HEAD: Aida Salinas Flores

DEPARTMENT NAME: 398th District Court

ACCOUNT NUMBER: 8-1100-412-00-009-001-0

**SUBJECT: Budget Line-Item Transfer (s)**

Honorable Commissioners' Court of Hidalgo County:

I submit to you for consideration the following line-item transfers in accordance with Local Government Code, Chapter 111, Subchapter C.:

FROM			TO		
ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME		ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
8-1100-412-00-009-001-0-746	OFFICE FURNITURE	○	8-1100-412-00-009-001-0-601	OFFICE SUPPLIES	\$ 600.00
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			
<b>TOTAL</b>					<b>\$600.00</b>

REASON:  
ADDITION MONIES NEEDED

---



---

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE 10/22/2008  
Date

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT DATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11870**  
**LINE ITEM TRANSFER 605**  
**CC CONSENT**

**2.L.**

**Date:** 10/28/2008  
**Submitted By:** Esther Cantu, 398TH DISTRICT COURT  
**Department:** 398TH DISTRICT COURT

---

**Information**

**CAPTION**

2008 - 398th District Court (1100)

**BACKGROUND**

---

**Fiscal Impact**

**FISCAL YEAR:** 2008                      **ACCT. #:** 8-1100-412-00-009-001-0-XXX  
**FUNDS AVAILABLE Y/N?:** Y              **MATCHING FUNDS Y/N?:** N

**BUDGETARY IMPACT:**

831-->605 \$ 400.00; Available balance as of 10/24/08 \$ 400.00

---

**Attachments**

Link: [Line Item Transfer](#)

---

**Form Routing/Status**

<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Budget & Management	Veronica Lopez	10/22/2008 04:42 PM	APRV
2	Ana Galvan	Anna Galvan	10/24/2008 10:54 AM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 11:18 AM	APRV
4	Purchasing Department	Marty Salazar	10/24/2008 11:25 AM	APRV
5	Court Administrator	Angela Garcia	10/24/2008 01:08 PM	APRV

Form Started By: Esther Cantu                      Started On: 10/22/2008 02:53 PM

Final Approval Date: 10/24/2008

---

DATE: October 22, 2008

DEPARTMENT HEAD: Aida Salinas Flores

DEPARTMENT NAME: 398th District Court

ACCOUNT NUMBER: 8-1100-412-00-009-001-0-XXX

**SUBJECT: Budget Line-Item Transfer (s)**

Honorable Commissioners' Court of Hidalgo County:

I submit to you for consideration the following line-item transfers in accordance with Local Government Code, Chapter 111, Subchapter C.:

FROM			TO		
ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME		ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
8-1100-412-00-009-001-0-831	COURT COST & INVESTIGATIONS	→	8-1100-412-00-009-001-0-605	CLOTHING & UNIFORMS	\$ 400.00
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			
		→			
<b>TOTAL</b>					<b>\$ 400.00</b>

REASON: ADDITIONAL MONIES NEEDED.

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT

\_\_\_\_\_  
ATTEST COUNTY CLERK



**AI-11809**

**2.M.**

**Line Item Transfer**

**CC CONSENT**

Date: 10/28/2008  
 Submitted By: Esther Contreras, 370TH DISTRICT COURT  
 Submitted For: Noe Gonzalez, Judge Presiding  
 Department: 370TH DISTRICT COURT  
 Agenda Area: Intradepartmental Transfers:

Information

CAPTION

2008 - 370th District Court (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-412-00-007-001-0-XXX  
 FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N

BUDGETARY IMPACT:

665-->745 \$ 655.37; Available balance as of 10/21/08 \$ 2,008.88  
 810-->745 \$ 145.00; Available balance as of 10/21/08 \$ 145.00  
 890-->745 \$ 466.67; Available balance as of 10/21/08 \$ 4,216.97

Attachments

Link: [LINETRANSFER](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/21/2008 07:56 AM	APRV
2	Ana Galvan	Anna Galvan	10/21/2008 01:44 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 09:37 AM	APRV
4	Court Administrator	Angela Garcia	10/23/2008 11:33 AM	APRV

Form Started By: Esther Contreras  
 Started On: 10/20/2008 09:25 AM

Final Approval Date: 10/23/2008

DATE: October 20, 2008

DEPARTMENT HEAD: Noé Gonzalez

DEPARTMENT NAME: 370<sup>th</sup> District Court

ACCOUNT NUMBER: 8-1100-412-00-007-001-0-

SUBJECT: Budget Line-Item Transfer(s)

Honorable Commissioners= Court of Hidalgo County:

I submit to you for your consideration the following line-item transfers in accordance with Local Government; Code, Chapter 111, Subchapter C.;

FROM		TO		
OBJECT CODE	OBJECT NAME	OBJECT CODE	OBJECT NAME	AMOUNT
665	MINOR COMPUTER EQUIPMENT	745	COMPUTER EQUIPMENT	\$ 655.37
810	DUES & MEMBERSHIPS	745	COMPUTER EQUIPMENT	\$ 145.00
890	OTHER	745	COMPUTER EQUIPMENT	\$ 466.67
TOTAL:				\$1,267.04

REASON: Current and future expenditures.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
APPROVED COMMISSIONERS= COURT      DATE      ATTEST COUNT CLERK

**AI-11882**

**2.N.**

**Intra departmental transfer  
CC CONSENT**

Date: 10/28/2008  
Submitted By: Sandra De Leon, COUNTY JUDGE  
Submitted For: Sandra De Leon  
Department: COUNTY JUDGE  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - County Judge's Office (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-413-00-110-006-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N  
BUDGETARY IMPACT:  
743-->661 \$ 850.00; Available balance as of 10/24/08 \$ 1,500.00

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/22/2008 04:39 PM	APRV
2	Ana Galvan	Anna Galvan	10/24/2008 11:25 AM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 12:01 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 01:08 PM	APRV

Form Started By: Sandra De Leon  
Started On: 10/22/2008 03:37 PM

Final Approval Date: 10/24/2008

---



**AI-11819**  
**11819 10-20-08**  
**CC CONSENT**

**2.O.**

Date: 10/28/2008  
Submitted By: Mary Garcia, TAX OFFICE  
Submitted For: Armando Barrera Jr., Rta  
Department: TAX OFFICE  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Tax Office (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008

ACCT. #: 8-1100-415-15-140-001-0-XXX

FUNDS AVAILABLE Y/N?: Y

MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-23-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Budget & Management	Veronica Lopez	10/21/2008 03:15 PM	APRV
2		Veronica Ortiz	Veronica Ortiz	10/23/2008 02:23 PM	APRV
3		Auditor's Office	Becky Morales	10/23/2008 02:27 PM	APRV
4		Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

Form Started By: Mary Garcia

Started On: 10/20/2008 04:55 PM

Final Approval Date: 10/24/2008

---

DATE: October 22, 2008

DEPARTMENT HEAD: Armando Barrera Jr.

DEPARTMENT NAME: Hidalgo County Tax Office

ACCOUNT NUMBER: 8-1100-415-15-140-001-0xxx

SUBJECT: **Intra-departmental Transfer/s (increase/decrease) in Accordance with Local Government Code, Chapter 111, Subchapter C, Section 111.070, Subsection C.**

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Intra-departmental transfer/s (increase/decrease) in accordance with Local Government Code, Chapter 111, Subchapter C Section 111.070, Subsection C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
432	Equip R&M Supplies	745	Computer Equipment	\$8,000.00
432	Equip R&M Supplies	665	Minor Computer Equipment	\$8,000.00
432	Equip R&M Supplies	743	Office Equipment	\$8,500.00
432	Equip R&M Supplies	550	Printing and Binding	\$500.00
432	Equip R&M Supplies	747	Software	\$2,000.00
432	Equip R&M Supplies	664	Other Minor Equipment	\$500.00
442	Equip & Vehicle Rental	747	Software	\$3,000.00
602	Paper Supplies	550	Printing and Binding	\$2,000.00
602	Paper Supplies	747	Software	\$3,000.00
671	Bldg R&M Supplies	747	Software	\$1,046.65
640	Reference Material	747	Software	\$1,168.09
746	Office Furniture	666	Minor Office Furniture	\$4,000.00
746	Office Furniture	550	Printing and Binding	\$600.00
746	Office Furniture	665	Minor Computer Equipment	\$1,000.00
TOTAL				\$43,314.74

REASON: **To purchase necessary items to operate County office.**

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11872**

**2.P.**

**Line Item Transfer**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Alma Ybarra, GEN. GOVT. BLDGS.  
Submitted For: Alma Ybarra  
Department: GEN. GOVT. BLDGS.  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Buildings & Grounds (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-419-40-220-002-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-23-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Budget & Management	Veronica Lopez	10/22/2008 04:41 PM	APRV
2		Veronica Ortiz	Veronica Ortiz	10/23/2008 02:30 PM	APRV
3		Auditor's Office	Becky Morales	10/23/2008 02:46 PM	APRV
4		Court Administrator	Angela Garcia	10/24/2008 08:32 AM	APRV

Form Started By: Alma Ybarra

Started On: 10/22/2008 02:53 PM

Final Approval Date: 10/24/2008

---

**BUDGET INTRA-DEPARTMENTAL TRANSFER REQUEST**

**DATE:** October 14, 2008

**DEPARTMENT HEAD:** DANIEL FLORES

**DEPARTMENT NAME:** BUILDINGS & GROUNDS

**ACCOUNT NUMBER:** 8-1100-419-40-220-002-0-

**CONTACT PERSON:** DANIEL FLORES **PHONE:** 956-289-7850

**SUBJECT: Budget Intradepartmental Transfer**

Honorable Commissioner's Court of Hidalgo County:

I submit to you for your consideration following Intradepartmental Budget Transfer/s in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM		TO		
OBJECT CODE	OBJECT NAME	OBJECT CODE	OBJECT NAME	
664	OTHER MINOR EQUIPMENT	663	SMALL TOOLS	1,500.00
			OTHER	
			<b>TOTAL</b>	<b>\$1,500.00</b>

REASON: OBJECT CODE LOW IN FUNDS

---



---



---



---

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
CC DATE

\_\_\_\_\_  
APPROVED COMMISSIONERS COURT

\_\_\_\_\_  
ATTEST COUNTY CLERK



**AI-11873**

**2.Q.**

**Line Item Transger**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Alma Ybarra, GEN. GOVT. BLDGS.  
Submitted For: Alma Ybarra  
Department: GEN. GOVT. BLDGS.  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Buildings & Grounds (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-419-40-220-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-23-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Budget & Management	Veronica Lopez	10/22/2008 04:41 PM	APRV
2		Veronica Ortiz	Veronica Ortiz	10/23/2008 02:31 PM	APRV
3		Auditor's Office	Becky Morales	10/23/2008 02:48 PM	APRV
4		Court Administrator	Angela Garcia	10/24/2008 08:32 AM	APRV

Form Started By: Alma Ybarra

Started On: 10/22/2008 02:57 PM

Final Approval Date: 10/24/2008

---



**AI-11864**

**2.R.**

**Line\_Item-Transer\_Receipt boxes**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Robert Leal, J.P. 4, 2  
Submitted For: Robert Leal  
Department: J.P. 4, 2  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - J.P. Pct. 4, PL. 2 (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-412-00-068-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N

BUDGETARY IMPACT:

601-->550 \$ 700.00; Available balance as of 10/24/08 \$ 1,845.18

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/22/2008 04:36 PM	APRV
2	Ana Galvan	Anna Galvan	10/24/2008 09:18 AM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 09:36 AM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 09:58 AM	APRV

Form Started By: Robert Leal

Started On: 10/22/2008 02:28 PM

Final Approval Date: 10/24/2008

---



**AI-11833**

**2.S.**

**Internal Line Item Transfer**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Irma Castillo, PLANNING DEPT.  
Submitted For: Irma Castillo  
Department: PLANNING DEPT.  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Planning Dept. (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-419-10-210-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N

BUDGETARY IMPACT:

346-->584 \$15.00; Available balance as of 10/23/08 \$ 50.00

---

Attachments

Link: [amended Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/22/2008 07:45 AM	APRV
2	Ana Galvan	Anna Galvan	10/23/2008 10:13 AM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 02:19 PM	APRV
4	Ana Galvan	Anna Galvan	10/23/2008 04:11 PM	APRV
5	Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

Form Started By: Irma Castillo

Started On: 10/21/2008 03:56 PM

Final Approval Date: 10/24/2008

---



**PLANNING DEPARTMENT**  
County Of Hidalgo

Raul E. Sesin, P.E.  
Planning Administrator

Date

DATE: October 21, 2008

DEPARTMENT HEAD: Raul E. Sesin, P.E.

DEPARTMENT NAME: Planning Department

ACCOUNT NUMBER: 8-1100-419-10-210-001-0.

SUBJECT: BUDGET LINE ITEM TRANSFER(S)

Submit to you for your consideration the following line-item transfer(s) in accordance with Local Government Code, Chapter III, Subchapter C.

FROM ACCOUNT NUMBER	ACCOUNT NAME		TO ACCOUNT NUMBER	ACCOUNT NAME	AMOUNT
8-1100-419-10-210-001-0-346	Hauling & Freight Services	→	8-1100-419-10-210-001-0-584	Registration Fees	\$ 15.00
				<b>TOTAL</b>	<b>\$ 15.00</b>

Reason: Need monies pay registration fees to Texas Floodplain Management Association for the attendance of Jorge Garcia Conference of Nov 4<sup>th</sup>-6<sup>th</sup>, 2008 as a non-member.

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Approved Commissioners' Court

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attest County Clerk

LIT102808B

**AI-11815**

**2.T.**

**Line Item Transfer**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Aleida Lopez, J.P. 4, 1  
Submitted For: Aleida Lopez  
Department: J.P. 4, 1  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - J.P. Pct. 4, Pl. 1 (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-412-00-067-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N

BUDGETARY IMPACT:

602-->584 \$ 275.00; Available balance as of 10/22/08 \$ 556.30  
581-->601 \$ 100.00; Available balance as of 10/22/08 \$ 500.00  
640-->601 \$ 258.00; Available balance as of 10/22/08 \$ 258.00  
661-->666 \$ 700.00; Available balance as of 10/22/08 \$ 883.82  
432-->550 \$ 325.00; Available balance as of 10/22/08 \$ 339.90

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/21/2008 08:07 AM	APRV
2	Ana Galvan	Anna Galvan	10/22/2008 01:43 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 09:44 AM	APRV
4	Court Administrator	Angela Garcia	10/23/2008 11:33 AM	APRV

Form Started By: Aleida Lopez  
Started On: 10/20/2008 02:56 PM

Final Approval Date: 10/23/2008

---





**AI-11863**  
**Budget Line Item Transfer**  
**CC CONSENT**

**2.U.**

Date: 10/28/2008  
Submitted By: Ruben Flores, IT DEPARTMENT  
Submitted For: Renan Ramirez  
Department: IT DEPARTMENT  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION  
2008 - IT Dept (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-415-00-200-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:  
Available account balance as of 10-23-08

---

Attachments

Link: [Intra-Trf](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/22/2008 04:36 PM	APRV
2	Veronica Ortiz	Veronica Ortiz	10/23/2008 02:28 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 02:39 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:32 AM	APRV

Form Started By: Ruben Flores

Started On: 10/22/2008 02:28 PM

Final Approval Date: 10/24/2008

---



**AI-11913**  
**2008 - Pct. # 1 Adm. (1201)**  
**CC CONSENT**

**2.V.**

Date: 10/28/2008  
Submitted By: Robert Elizondo, COMM. PCT. #1  
Department: COMM. PCT. #1  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION  
2008 - Pct. #1 Adm. (1201)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1201-431-00-121-004-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:  
BUDGETARY IMPACT:  
Available account balance as of 10-23-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/23/2008 02:22 PM	APRV
2	Veronica Ortiz	Veronica Ortiz	10/23/2008 02:42 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 05:39 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:33 AM	APRV

Form Started By: Robert Elizondo  
Started On: 10/23/2008 01:21 PM

Final Approval Date: 10/24/2008

---





**AI-11907**  
**2008 PCT # (1211) PKS**  
**CC CONSENT**

**2.W.**

Date: 10/28/2008  
Submitted By: Robert Elizondo, COMM. PCT. #1  
Submitted For: JOSHUA L MEDRANO  
Department: COMM. PCT. #1  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION  
2008 - Pct. #1 Parks (1211)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1211-452-00-021-013-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N  
BUDGETARY IMPACT:  
609-->431 \$ 300.00; Available balance as of 10/24/08 \$ 41,027.33

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/23/2008 11:49 AM	APRV
2	Ana Galvan	Anna Galvan	10/24/2008 11:42 AM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 12:05 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 01:08 PM	APRV

Form Started By: Robert Elizondo Started On: 10/23/2008 11:14 AM  
Final Approval Date: 10/24/2008

---



**AI-11860**

**2.X.**

**Budget Line-Item Transfer for Playground Equipment  
CC CONSENT**

Date: 10/28/2008  
Submitted By: Yolanda Cisneros, COMM. PCT. #2  
Submitted For: Yolanda Cisneros  
Department: COMM. PCT. #2  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Pct. #2 Parks (1212)

BACKGROUND

Transfer is to cover the cost of PlayWell Group Quote #028927 which was approved on CCM of 10/21/2008, but will be requesting reimbursement from Urban Count Program as soon as P.O. is issued.

Requisition #142145

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1212-452-00-122-008-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N  
BUDGETARY IMPACT:  
890-->739 \$ 150,000.00; Available balance as of 10/23/08 \$ 234,607.52

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/22/2008 04:35 PM	APRV
2	Ana Galvan	Anna Galvan	10/23/2008 11:05 AM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 02:37 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:32 AM	APRV

Form Started By: Yolanda Cisneros Started On: 10/22/2008 01:53 PM  
Final Approval Date: 10/24/2008

---



**DATE:** October 22, 2008

**2008**  
Transfer



**DEPARTMENT HEAD:** Hector "Tito" Palacios

**DEPARTMENT NAME:** Hidalgo County Precinct No. 2

**ACCOUNT NUMBER:** 8-1212-452-00-122-008-0 Parks & Recreation

**Contact Person:** Yoli Cisneros, Administrative Assistant II

**Ph#:** (956) 787-1891 Ext. 2002

**SUBJECT:** **Intradepartmental transfer(s)** (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Intradepartmental transfer(s) (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

<b>FROM</b> <small>OBJECT CODE</small>	<b>OBJECT DESCRIPTION</b>	<b>TO</b> <small>OBJECT CODE</small>	<b>OBJECT DESCRIPTION</b>	<b>AMOUNT</b>
890	OTHER	739	OTHER STRUCTURES	\$150,000.00
<b>TOTAL</b>				<b>\$150,000.00</b>

**REASON:**  
Transfer needed to cover the cost of the Community Resource Center playground equipment. Urban County will reimburse the Precinct in the amount of \$128,236.64.

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT

\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11828**

**2.Y.**

**Line Item Transfer for office supplies**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Marcie Jackson, COLONIA ACCESS PROGRAM  
Submitted For: Agapito Vargas  
Department: COLONIA ACCESS PROGRAM  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Pct. #2 C.A.P. (1200)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1200-431-00-115-042-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-23-08

---

Attachments

Link: [LIT office supplies](#)

---

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Budget & Management	Veronica Lopez	10/21/2008 02:00 PM	APRV
2		Veronica Ortiz	Veronica Ortiz	10/23/2008 02:25 PM	APRV
3		Auditor's Office	Becky Morales	10/23/2008 02:33 PM	APRV
4		Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

Form Started By: Marcie Jackson

Started On: 10/21/2008 11:29 AM

Final Approval Date: 10/24/2008

---



**AI-11918**

**2.Z.**

**Budget Line-Item Transfer for Natural Gas  
CC CONSENT**

Date: 10/28/2008  
Submitted By: Yolanda Cisneros, COMM. PCT. #2  
Submitted For: Yolanda Cisneros  
Department: COMM. PCT. #2  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Pct. #2 CWS (1200)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1200-431-00-122-004-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N

BUDGETARY IMPACT:

890-->621 \$ 160.00; Available balance as of 10/24/08 \$ 14,062.82  
890-->663 \$ 1,000.00; Available balance as of 10/24/08 \$ 14,062.82  
890-->664 \$ 1,000.00; Available balance as of 10/24/08 \$ 14,062.82

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management		10/24/2008 05:29 PM	PEND
2	Ana Galvan	Anna Galvan	10/24/2008 01:21 PM	APRV
3	Auditor's Office		10/24/2008 05:29 PM	NEW

Form Started By: Yolanda Cisneros  
Started On: 10/23/2008 04:11 PM  
Final Approval Date: 10/24/2008

---

AI-11918

DATE: October 23, 2008

**2008**  
Transfer

DEPARTMENT HEAD: Hector "Tito" Palacios



DEPARTMENT NAME: Hidalgo County Precinct No. 2

ACCOUNT NUMBER: 8-1200-431-00-122-004-0 County Wide Shop

Contact Person: Yoli Cisneros, Administrative Assistant II

Ph#: (956) 787-1891 Ext. 2002

SUBJECT: **Intradepartmental transfer(s) (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).**

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Intradepartmental transfer(s) (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

FROM OBJECT CODE	OBJECT DESCRIPTION	TO OBJECT CODE	OBJECT DESCRIPTION	AMOUNT
890	OTHER	621	<del>NATURAL GAS</del> NATURAL GAS	\$160.00
890	OTHER	663	SMALL TOOLS	\$1,000.00
890	OTHER	664	OTHER MINOR EQUIPMENT	\$1,000.00
<b>TOTAL</b>				<b>\$2,160.00</b>

REASON:  
Transfer needed to cover the end of the year charges.

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

10/24/2008  
DATE

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT

\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11844**  
**Pct #3 Transfer**  
**CC CONSENT**

**2.AA.**

Date: 10/28/2008  
Submitted By: Norma Ceballos, COMM. PCT. #3  
Department: COMM. PCT. #3  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION  
2008 - Pct. #3 C.O. 2006 (1336)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1336-431-00-123-040-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:  
BUDGETARY IMPACT:  
Available account balance as of 10-23-08

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/22/2008 01:16 PM	APRV
2	Veronica Ortiz	Veronica Ortiz	10/23/2008 02:27 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 02:31 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:32 AM	APRV

Form Started By: Norma Ceballos  
Started On: 10/22/2008 09:33 AM

Final Approval Date: 10/24/2008

---

# INTRA-DEPARTMENTAL TRANSFER

DATE: October 28, 2008

DEPARTMENT HEAD: Commissioner Joe M. Flores - Pct No. 3

DEPARTMENT NAME: Pct #3 - CIP (1336)

ACCOUNT NUMBER: 8-1336-431-00-123-040-0-XXX

CONTACT PERSON: Norma Ceballos PHONE: (956)585-4509

SUBJECT: Intra-departmental Transfer

Honorable Commissioners' Court of Hidalgo County:

I submit for your consideration the following Intra-departmental transfer(s) in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
890	CO 2006 Pct 3 Other	742	CO 2006 Pct 3 Heavy Equipment	373,796.00
<b>TOTAL</b>				<b>\$373,796.00</b>

REASON: Purchase 2 Motor Graders

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
CC DATE

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT

\_\_\_\_\_  
ATTEST COUNTY CLERK

# **INTRA-DEPARTMENTAL TRANSFER**



**AI-11793**  
**Pct #3 Transfer**  
**CC CONSENT**

**2.BB.**

Date: 10/28/2008  
Submitted By: Norma Ceballos, COMM. PCT. #3  
Department: COMM. PCT. #3  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION  
2008 - Pct. #3 San. (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-432-00-123-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N  
BUDGETARY IMPACT:  
334-->607 \$ 100.00; Available balance as of 10/21/08 \$ 17,139.79  
334-->626 \$ 6,000.00; Available balance as of 10/21/08 \$ 17,139.79

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/17/2008 10:13 AM	APRV
2	Ana Galvan	Anna Galvan	10/21/2008 01:21 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 09:24 AM	APRV
4	Court Administrator	Angela Garcia	10/23/2008 09:25 AM	APRV

Form Started By: Norma Ceballos  
Started On: 10/17/2008 09:15 AM  
Final Approval Date: 10/23/2008

---

# INTRADEPARTMENTAL TRANSFER

DATE: October 17, 2008

DEPARTMENT HEAD: Commissioner Joe M. Flores

DEPARTMENT NAME: Hidalgo County Precinct #3 Sanitation

ACCOUNT NUMBER: 8-1100-432-00-123-001-0-XXX

CONTACT PERSON: Norma Ceballos PHONE: (956)585-4509

SUBJECT: Intradepartmental Transfer

Honorable Commissioners' Court of Hidalgo County:

I submit for your consideration the following Intradepartmental transfer(s) in accordance with Local Government Code, Chapter 111, Subchapter C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
334	Engineering & Architect	607	Cleaning & Sanitation	\$ 100.00
334	Engineering & Architect	626	Gasoline/Diesel	\$ 6,000.00
<b>TOTAL</b>				<b>\$ 6,100.00</b>

REASON: To cover expected expenses.

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
CC DATE

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT

\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11824**

**2.CC.**

**Pct. #4 Landfill Transfer**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Jr. Munoz, COMM. PCT. #4  
Department: COMM. PCT. #4  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Pct. #4 Landfill (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-432-00-124-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N  
BUDGETARY IMPACT:  
679-->550 \$ 500.00; Available balance as of 10/22/08 8,185.78

---

Attachments

Link: [Line Item Transfer\\_Landfill](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/21/2008 01:59 PM	APRV
2	Ana Galvan	Anna Galvan	10/22/2008 02:31 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 02:20 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

Form Started By: Jr. Munoz Started On: 10/21/2008 10:16 AM

Final Approval Date: 10/24/2008

---



**AI-11810**

**2.DD.**

**Line Item Transfers**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Patti Loya, TEXAS COOP. EXTENSION  
Submitted For: Brad Cowan  
Department: TEXAS COOP. EXTENSION  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Texas Coop Extension (1100)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-461-00-380-001-0-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-23-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Budget & Management	Veronica Lopez	10/21/2008 07:57 AM	APRV
2		Veronica Ortiz	Veronica Ortiz	10/23/2008 02:20 PM	APRV
3		Auditor's Office	Becky Morales	10/23/2008 02:24 PM	APRV
4		Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

Form Started By: Patti Loya

Started On: 10/20/2008 10:56 AM

Final Approval Date: 10/24/2008

---



**AI-11914**

**2.EE.**

**WIC**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Margarita Gonzalez, WIC  
Submitted For: Norma L. Longoria  
Department: WIC  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - WIC (1292)

BACKGROUND

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1292-441-00-350-001-8-XXX  
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Available account balance as of 10-24-08

---

Attachments

Link: [LIT](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management		10/24/2008 11:07 AM	PEND
2	Veronica Ortiz	Veronica Ortiz	10/24/2008 08:59 AM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 09:44 AM	APRV
4	Mike Escaname	Mike Escaname	10/24/2008 10:32 AM	APRV
5	Linda Fong	Linda Fong	10/24/2008 10:51 AM	APRV
6	Veronica Lopez	Veronica Lopez	10/24/2008 10:55 AM	APRV
7	Veronica Ortiz	Veronica Ortiz	10/24/2008 11:02 AM	APRV
8	Court Administrator	Angela Garcia	10/24/2008 11:07 AM	APRV

Form Started By: Margarita Gonzalez Started On: 10/23/2008 02:21 PM

Final Approval Date: 10/24/2008

---

DATE: 10/23/08  
WIC DIRECTOR: NORMA LONGORIA  
DEPARTMENT NAME: HIDALGO COUNTY WIC PROGRAM  
ACCOUNT NUMBER: 8.1292.441.00.350.001.8.-WIC  
SUBJECT: BUDGET LINE ITEM TRANSFER

Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfer(s) in accordance with the Local Government Code Chapter 111, Subchapter C.

FROM		TO		
ACCOUNT NUMBER	Account Name	ACCOUNT NO.(S)	ACCOUNT NAME	AMOUNT
8.1292.441.00.350.001.8.	114 P/T Employees	8.1292.441.00.350.001.8	220 FICA	1,900.00
8.1292.441.00.350.001.8.	114 P/T Employees	8.1292.441.00.350.001.8	260 Workers Comp.	124.00
8.1292.441.00.350.001.8.	114 P/T Employees	8.1292.441.00.350.001.8	421 Disposal	51.00
8.1292.441.00.350.001.8.	114 P/T Employees	8.1292.441.00.350.001.8	432 Equip. R&M Serv	2,115.00
Total:				4,190.00

REASON: To close out FY 08 Grant

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
APPROVED COMMISSIONERS COURT

\_\_\_\_\_  
/ /  
Date

\_\_\_\_\_  
ATTEST COUNTY CLERK



**AI-11919**

**2.FF.**

**Line Item Transfer**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Veronica Lopez, BUDGET & MANAGEMENT  
Submitted For: Valde Guerra  
Department: BUDGET & MANAGEMENT  
Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - Court of Civil Appeals (1100)

BACKGROUND

Transfer needed to classify expenditure in correct object code.

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-412-00-040-001-0-XXX  
FUNDS AVAILABLE Y/N?: Yes MATCHING FUNDS Y/N?:  
BUDGETARY IMPACT:  
743 --> 661 \$1,500.00  
Available balance as of 10-23-08 \$1,500.00

---

Attachments

Link: [Line Item Transfer](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/23/2008 04:35 PM	APRV
2	Veronica Ortiz	Veronica Ortiz	10/24/2008 08:57 AM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 10:42 AM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 10:49 AM	APRV

Form Started By: Veronica Lopez  
Started On: 10/23/2008 04:19 PM

Final Approval Date: 10/24/2008

---

DATE: October 23, 2008

**2008**

Transfer

DEPARTMENT HEAD: Valde Guerra

AI-11919

DEPARTMENT NAME: Department of Budget & Management for  
Crt of Civil Appeals



ACCOUNT NUMBER: 8-1100-412-00-040-001-0-XXX

Contact Person: Veronica L. Nixon

Ph#: (956) 292-7025 Ext. 5416

SUBJECT: **Intradepartmental transfer(s)** (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Intradepartmental transfer(s) (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

FROM OBJECT CODE	OBJECT DESCRIPTION	TO OBJECT CODE	OBJECT DESCRIPTION	AMOUNT
743	Crt of Civ App- Office Equipment	661	Crt of Civ App- Minor Office Equipment	\$1,500.00
<b>TOTAL</b>				<b>1,500.00</b>

REASON: Transfer needed to classify expenditure in correct object code.

\_\_\_\_\_  
Approved by

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT

\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11941**

**2.GG.**

**transfer of funds - DPS**

**CC CONSENT**

Date: 10/28/2008

Submitted By: Monica Badillo, BUDGET & MANAGEMENT

Department: BUDGET & MANAGEMENT

Agenda Area: Intradepartmental Transfers:

---

Information

CAPTION

2008 - DPS H/P (1100)

BACKGROUND

---

Fiscal Impact

---

Attachments

Link: [transfer](#)

---

Form Routing/Status

Form Started By: Monica Badillo

Started On: 10/24/2008 04:52  
PM

Final Approval Date: 10/24/2008

---

**DATE:** October 24, 2008

**DEPARTMENT HEAD:** \_\_\_\_\_

**DEPARTMENT NAME:** DPS-HIGHWAY PATROL

**ACCOUNT NUMBER:** 8-1100-421-00-115-027-0-

**SUBJECT:** **Intra-departmental Transfer/s (increase/decrease) in Accordance with Local Government Code, Chapter 111, Subchapter C, Section 111.070, Subsection C.**

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Intra-departmental transfer/s (increase/decrease) in accordance with Local Government Code, Chapter 111, Subchapter C Section 111.070, Subsection C.

<b>FROM</b> OBJECT CODE	OBJECT DESCRIPTION	<b>TO</b> OBJECT CODE	OBJECT DESCRIPTION	<b>AMOUNT</b>
<b>601</b>	OFFICE SUPPLIES	<b>855</b>	LATE FEES	<b>200.00</b>
			TOTAL	<b>200.00</b>

**REASON:** TO PAY FOR LATE FEES ON RENTAL PAYMENTS TO SIESTA VILLAGE.  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
APPROVED COMMISSIONERS' COURT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ATTEST COUNTY CLERK

**AI-11811**  
**County Clerk's Monthly Reports**  
**CC CONSENT**

**4.A.**

Date: 10/28/2008  
Submitted By: Delia Rodriguez, COUNTY CLERK  
Submitted For: Delia Rodriguez  
Department: COUNTY CLERK  
Agenda Area: Monthly Fee Reports

---

Information

CAPTION

County Clerk:  
Monthly Court Costs & Fee Reports for September 2008

BACKGROUND

---

Fiscal Impact

---

Attachments

Link: [check off list](#)

Link: [Coversheet](#)

Link: [Sept 2008 Fee Report](#)

Link: [Sept. 2008 Court Costs](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/21/2008 08:09 AM	APRV
2	Dale Kennan	Dale Kennan	10/21/2008 09:37 AM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 09:33 AM	APRV
4	Dina Trevino		10/24/2008 05:29 PM	NEW

Form Started By: Delia Rodriguez

Started On: 10/20/2008 11:55 AM

Final Approval Date: 10/24/2008

---

**September 2008 MONTHLY REPORTS**

<b>COURT COST</b>	<b>1 PAGE</b>
<b>FEE</b>	<b>1 PAGE</b>

<b>COVER SHEET</b>	<b>1 PAGE</b>
<b>CHECK OFF LIST</b>	<b>1 PAGE</b>

<b>TOTAL</b>	<b>4 PAGES</b>
--------------	----------------

**PLEASE REVISE THAT YOU HAVE RECEIVED A TOTAL OF FOUR PAGES.  
PLEASE CALL ME AT EXT 6185 TO CONFIRM.**

**THANKS  
BERSAIDA SANCHEZ**

TO: Monica Badillo, Agenda Coordinator  
FROM: Arturo Guajardo, Jr., County Clerk  
DATE: October 20, 2008  
SUBJECT: Commissioners' Court Consent Agenda

I am hereby requesting that you please place the following item on the Commissioners' Court Consent Agenda set for October 28<sup>th</sup>, 2008

**COURT COST AND FEE MONTHLY REPORTS FOR SEPTEMBER, 2008**

If you have any questions please do not hesitate to contact me at ext. 6185.

AG/bs

**COUNTY CLERK MONTHLY FEE REPORT**

SEPTEMBER  
2008

\*\*\*\*COUNTY CLERK FEE ACCOUNT\*\*\*\*

RECORDING FEES/LGC118.013,118.011,212.004,BCC36.10.....		\$130,956.90	
MARRIAGE LICENSES/LGC118.018 (TOTAL).....		\$9,235.00	
STATE COMPTROLLER			
MARRIAGE LICENSE.....	# Filed 303.1667	\$9,095.00	
BIRTH CERTIFICATES.....	# Filed 561	\$1,009.80	
BIRTH DSHS.....	# Filed 18	\$32.94	
DECLARATION OF INFORMAL MARRIAGE.....	# Filed 12	\$150.00	
UCC-FINANCING STATEMENTS/BCC9.403.....		\$1,181.00	
LAMINATION.....		\$124.00	
VITAL STATISTICS/LGC 118.015.....			
CERTIFIED COPIES/LGC 118.014.....		\$25,756.76	
RETURNED CHECK CHARGE/LGC 118.0215.....		\$10.00	
REFUNDS.....		\$3,522.60	
BEER & WINE PERMITS/ABC 61.31.....		\$0.00	
PRINTER FEES/ABC 61.38.....		\$937.60	
RECEIVED ON ACCOUNT.....		\$64,898.50	
RCRDS MGMT & PRESERVATION PRGM/LGC 118.0216.....		\$45,673.00	
DIGITAL IMAGE FEES		\$6,000.00	
CC RECORDS ARCHIVES FEE LGC 118.025.....		\$49,210.00	
COURTHOUSE SECURITY FUND/LGC 291.008.....		\$9,465.00	
VITAL ARCHIVE FEE HSC 191.0045(h).....		\$1,196.00	
OVER/(SHORT).....		\$15.00	
INTEREST EARNED.....		\$29.46	
ADJUSTMENTS.....		\$0.00	
TOTAL CHARGES AND COLLECTIONS.....			\$358,498.56
LESS:			
CHARGES ON ACCOUNT.....			\$62,237.50
TOTAL DEPOSITED IN BANK.....			\$296,261.06
LESS:			
PRINTERS FEES/ABC 61.38.....		\$937.60	
BIRTH DSHS.....		\$32.94	
REFUNDS.....		\$3,522.60	
OVER/(SHORT).....		\$15.00	
SUBTOTAL			\$4,508.14
DUE TO TREASURER.....			\$291,752.92
DISTRIBUTION:			
COUNTY CLERK FEES.....	1100-341-10-180-002-0-000	\$169,924.66	
INTEREST EARNED.....	1100-361-11-000-006-0-000	\$29.46	
RCRDS MGMT & PRESERVATION PRGRM/LGC 118.0216....	1237-341-10-180-000-0-000	\$45,673.00	
DIGITAL IMAGE FEES	1100-341-10-180-013-0-000	\$6,000.00	
CC RECORDS ARCHIVE FEE LGC 118.025.....	1100-341-10-180-005-0-000	\$49,210.00	
COURTHOUSE SECURITY FUND/LGC 291.008.....	1241-341-10-180-001-0-000	\$9,465.00	
COMPTR OF PUBLIC ACCTS-MARR FEES (MONTHLY)/LGC 118.022(a).....	1100-207-20-000-040-0-000	\$9,095.00	
COMPTR OF PUBLIC ACCTS-BIRTH/DEATH CERT (QUARTERLY)/LGC 118.015(b).....	1100-207-20-000-039-0-000	\$1,009.80	
COMPTR OF PUBLIC ACCTS-DECLARATION OF INFORMAL MARRIAGE/LGC 118.022(a).....	1100-207-20-000-041-0-000	\$150.00	
PRESERVATION OF VITAL STATISTICS HSC 191.0045(h).....	1100-341-10-180-010-0-000	\$1,196.00	
DISTRIBUTION TOTAL:		\$291,752.92	\$291,752.92
COUNTY AUDITOR'S FORM: ARS-CC-002, PART I			
Rivised 1/21/04			



COUNTY CLERK MONTHLY FEE REPORT  
PART II

FOR THE MONTH OF: SEPTEMBER 2008

\*\*COUNTY CLERK COURT COST ACCOUNT\*\*

County Clerk/CCP102.005,LGC118.052,LGC118.015 .....	1100-341-10-180-002-0-000	\$27,818.07
Sheriff/CCP 102.011 .....	1100-342-10-180-001-0-000	\$7,877.21
County Judge/LGC 118.101.....	1100-341-10-180-001-0-000	\$288.00
District Attorney/CCP 102.008.....	1100-341-10-180-009-0-000	\$4,728.04
Fines/LGC 113.004 .....	1200-351-10-180-000-0-000	\$45,239.47
Trial Fees/CCP 102.003.....	1100-341-10-180-006-0-000	\$0.00
Library/LGC 323.023.....	1247-341-10-180-001-0-000	\$7,320.00
Stenographer/GC 25.1102f.....	1100-341-10-180-006-0-000	\$9,670.84
Crim Just.Plan.Fd./CCP 102.051 MISD @ \$ 5.00, @ \$10.00.....	1100-207-20-000-003-0-000	\$10.01
L.E.O.S.E/GC415.082 .. MISD @ \$1.00, @ \$1.50, @ \$3.50.....	1100-207-20-000-011-0-000	\$3.51
Comp. To Victims Of Crime Fd./CCP 56.55 MISD @ \$3.00, @ \$10.00, @ \$12.50, @ \$15.00, @ \$35.00 (CVC).....	1100-207-20-000-017-0-000	\$101.39
Arrest Fees - State Agency/CCP 102.011		
D.P.S. MISD @ \$3.00, @ \$5.00, @ \$12.00, @ \$35.00.....	1100-207-20-000-019-0-000	\$172.67
T.A.B.C. MISD @ \$3.00, @ \$5.00, @ \$12.00, @ \$35.00.....	1100-207-20-000-020-0-000	\$42.14
P. & W.L. MISD @ \$3.00, @ \$5.00, @ \$12.00, @ \$35.00.....	1100-207-20-000-021-0-000	\$0.00
Jury Fees/CCP102.004-5,CP RULE 216,GC51.60A.....	1100-341-10-180-008-0-000	\$1,078.00
Jury Service Fee.....	1100-207-20-000-053-0-000	\$733.58
Jury - County Clerk.....	1100-341-10-180-008-0-000	\$22.00
Jud. & Crt. Personnel Tr. Fd./GC56.001 MISD @ \$1.00 .....	1100-207-20-000-027-0-000	\$4.79
Probate Judge Education Fd/LGC 118.064 .....	1100-341-10-180-007-0-000	\$171.00
Video (DWI)/CCP 102.017 .....	1100-342-10-000-000-0-000	\$0.00
General Fund Miscellaneous Revenues .....	1100-360-00-000-000-0-000	\$0.00
Indigent Civil Legal Services/G.C. 51.901 @ \$5.00 & \$10.00... ..	#Cases 244 1100-207-20-000-048-0-000	\$1,220.00
Probate Indigent Civil Legal Services/G.C. 51.901 @ \$5.00 & ..	#Cases 57 1100-207-20-000-047-0-000	\$285.00
Court Reporter Service Fee/GC51.601.....	1239-341-10-180-001-0-000	\$3,660.00
Crime Stoppers Assistance Fund/CCP102.013.....	1100-207-20-000-014-0-000	\$1.99
Bond Forfeitures/CCP22.16.....	1200-352-10-180-001-0-000	\$5,301.70
State General Revenue/CCP102.015.....MISD @ \$2.50 .....	1100-207-20-000-010-0-000	\$2.49
Comp. Rehab Fund/CCP 102.081 MISD @ \$5.00, @ \$25.00 .....	1100-207-20-000-008-0-000	\$0.00
Breath Alcohol Testing/CCP102.016 .....	1100-207-20-000-006-0-000	\$0.00
County Records Mgmt Preservation/LGC118.0546, 118.052, CCP102.005		
MISD @ \$5.00, @ \$10.00 .....	1238-341-20-180-001-0-000	\$5,715.95
Records Management Preservation - CC .....	1237-341-10-180-000-0-000	\$458.76
Courthouse Security Fund/LGC 291.007 MISD @ \$1.00, @ \$3.00, @ \$5.00 .....	1241-341-10-180-001-0-000	\$2,069.95
Judicial Fund/Criminal CC Stat./GC51.702.....	# Cases 182 1100-207-20-000-046-0-000	\$2,821.65
Judicial Fund/Civil CC Stat./GC51.702.....	# Cases 244 1100-207-20-000-043-0-000	\$9,760.00
Judicial Fund - Civil Support .....	# Cases 197 1100-207-20-000-055-0-000	\$10,149.00
Judicial Fund/Civil CC Stat. Probate/GC51.702.....	# Cases 57 1100-207-20-000-042-0-000	\$2,280.00
Judicial Fund - Probate Support .....	# Cases 56 1100-207-20-000-055-0-000	\$1,100.00
Consolidated Court Cost(CCC) CCP 102.075 MISD A,B @ \$40.00/C @ \$17.00.....	1100-207-20-000-015-0-000	\$15,420.57
Fugitive Apprehension Fund (FA)/CCP 102.019 @ \$5.00 .....	1100-207-20-000-009-0-000	\$9.48
Correctional Management Institute (CMI).....	1100-207-20-000-029-0-000	\$0.44
Appellate Judicial System Fund GC 22.2141.....	1100-207-20-000-001-0-000	\$1,505.00
LAB FEE.....		\$0.00
DNA TESTING FEE /CCP 102.020.....	1100-207-20-000-030-0-000	\$0.00
DDCF - Drug Court Fund .....		\$5,067.38
Juvenile Crime & Delinquency(JCD)/CCP 102.75(m) @ \$0.25.....	1100-207-20-000-007-0-000	\$0.70
Time Payment/GC 51.921 @ \$12.50.....	1100-207-20-000-005-0-000	\$1,747.16
Time Payment/GC 51.921 @ \$10.00 Appropriation.....	1100-341-10-180-002-0-000	\$1,397.70
Time Payment/GC 51.921 @ \$2.50 Admin. Of Justice.....	1100-341-10-180-003-0-000	\$349.34
District Attorney Bond Forfeitures Commission .....	1100-341-10-080-011-0-000	\$500.20
Juvenile Delinquency Prevention Fund/CCP 102.0171 (Graffiti Eradication).....	1240-341-10-180-001-0-000	\$0.00
Delinquent Fee.....		\$502.98
Registry Administration Fee/LGC 117.055.....	1100-341-10-180-002-0-000	\$2,627.34
Local Transaction Fee .....	1100-341- 10-180-004-0-000	\$1,056.06
Non-Disclosure Fee / GC 411.081(d).....	# Cases 0 1100-207-20-000-037-0-000	\$0.00
EMS Trauma Fund/CCP102.0185 .....	1100-207-20-000-038-0-000	\$8,074.49
Public Defense Attorney/CCP26 (Court Ordered Restitu .....	1100-351-20-180-001-0-000	\$6,589.53
Interest Earnings.....	1100-361-11-000-006-0-000	\$333.32
Registry Administration Interest/LGC 117.054.....	1100-341-10-180-002-0-000	\$665.33
SJFC.....	1100-341-10-180-012-0-000	\$109.08
SJFS.....	1100-207-20-000-054-0-000	\$881.00
RFC.....		\$0.00
IDR - Indigent Defense Fund .....		\$260.43
E-File Fee.....	6-1100-341-10-180-002-0-000	\$292.00
P.A.U.....	1100-207-20-000-023-0-000	
Child Safety/CCP 102.01 @ 20.00 .....	1100-341-10-080-005-0-000	
Constable/CCP 102.011 .....	1100-342-10-291-000-0-000	
SUBTOTAL COURT COSTS.....		\$197,496.74
Law Enforcement Crime Lab Costs/CCP 42.12 Sec 11,HSC 481.160.....		\$0.00
LESS: L.E.C.L.C .... (Check # .....		\$0.00
TOTAL DUE TO TREASURER (COURT COSTS) .....		\$197,496.74
Cost Deposits .....		\$0.00
Refunds on Probate, etc. ....		\$1,244.80
Attorney Ad Litem Fees/CP RULE 308a .....		\$0.00
Other.... SHORT .....		\$157.00
SUBTOTAL .....		\$1,401.80
TOTAL COUNTY CLERK COLLECTIONS .....		\$198,898.54
LESS PREVIOUS DEPOSITS .....		\$0.00
BANK CASH DEPOSITS .....		\$198,898.54
TO TREASURER FEE ACCT. \$ 291,752.92 COURT COST \$197,496.74 .....		\$ 489,249.66

\* Offenses Committed Prior To Sept. 1, 1997

**AI-11808**  
**Pipeline Permits**  
**CC CONSENT**

**5.A.**

Date: 10/28/2008  
Submitted By: Sandra Garcia, RIGHT OF WAY DEPT.  
Submitted For: Joe Pena  
Department: RIGHT OF WAY DEPT.  
Agenda Area: Right of Way

---

Information

CAPTION

1. Juan Jose Pena, Jr. (Carolina Subdivision No.2)
  - a. Will construct seven (7) 4" PVC bores across Mile 4 Road for water service connections. The first bore to be 220' east of Texan Road and the remaining six to be spaced easterly at 180 feet.
  - b. Will bore across Texan Road along the south right of way of Mile 4 North with 16" steel casing.
  
2. North Alamo Water Supply:
  - a. Approximately 52' on the west side of Palm St south of Magnolia St- Line Ext.- Maria Del Carmen Cepeda; 3/4" service connection (Heidelberg Subd.)
  
3. Rio-Tech:
  - a. Install a 4"sewer line along "I" Rd, West to East; between Alberta and Trenton Rd.

BACKGROUND

---

Fiscal Impact

---

Attachments

Link: [Pipeline Permits](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/22/2008 04:28 PM	APRV
2	Dale Kennan	Dale Kennan	10/22/2008 04:35 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 09:02 AM	APRV
4	Court Administrator	Angela Garcia	10/23/2008 09:25 AM	APRV

Form Started By: Sandra Garcia  
Started On: 10/20/2008 09:22 AM  
Final Approval Date: 10/23/2008

---

THE STATE OF TEXAS §

COUNTY OF HIDALGO §

That the County of Hidalgo, Texas, acting by and through its Commissioners' Court, by virtue of motion and resolution introduced and adopted by said Commissioners' Court on the 28th day of October, 2008 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

Juan Jose Pena, Jr.(Carolina Subdivision No.2) hereinafter called Permittee, of the County of Hidalgo, Texas, the Right, Privilege and Authority to construct, reconstruct, lay and maintain a 2 inch water gas/ sewer/ irrigation line; said line to be constructed of PVC material along the following public road easement held by the Hidalgo County of Hidalgo, Texas upon the conditions, obligations, and requirements as hereinafter set forth, said public road upon which said water/ gas/ sewer/ irrigation line is to be constructed, reconstructed, laid and maintained, **described as follows:**

- 1. Will construct seven (7) 4" PVC bores across Mile 4 Road for water service connections. The first bore to be 220' east of Texan Road and the remaining six to be spaced easterly at 180 feet.

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a 2" water line along the above described public road being conditioned that Permittee agrees that:

1. The Permittee will install and shall maintain said pipeline so that the top of the line will always be at least at the minimum depth of forty (40) inches below the flow line of the ditches on either side of said roadway when the pipeline is to be constructed, the Permittee shall contact the Commissioner in the Precinct in which the construction project is located and obtain written instructions, signed by said Commissioner, concerning the location and depth of said line. In this connection, it is agreed and understood that the Permittee will not cut the surface in any manner said public road or any roadway, without first obtaining the written permission of the Commissioners' Court of Hidalgo County, Texas.
2. The Permittee will employ a competent person or firm to do such installation and complete it in accordance with the covenants and conditions herein set forth.
3. Permittee shall stake its line on the location approved by the Commissioner in whose precinct the work is to be done well in advance of beginning its work. Permittee shall contact Commissioner before commencing any work.
4. The Permittee will use all proper caution in performing the work to prevent injury to all persons and property and it will indemnify Hidalgo County against all damages that may be assessed against the County by reasons of the work here permitted and the maintenance of such pipeline.
5. Notwithstanding any provision in this Agreement to the contrary, Permittee recognizes that the paramount purpose of the easement and dedication for the said public road is to provide for the establishment and operation of a roadway for the public. Recognizing this as the paramount purpose of the easement and dedication, Permittee agrees that Permittee has the unlimited and unrestricted right to establish, construct, reconstruct and maintain the said public road and to conduct all maintenance for the roadway and all related structures (including but not limited to the maintenance, construction and reconstruction of ditches, drainage pipes, bridges and paving surfaces) without incurring any liability, obligation or duty to Permittee.

THE STATE OF TEXAS §

COUNTY OF HIDALGO §

That the County of Hidalgo, Texas, acting by and through its Commissioners' Court, by virtue of motion and resolution introduced and adopted by said Commissioners' Court on the 28th of October, 2008 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

Juan Jose Pena, Jr. (Carolina Subdivision No.1) hereinafter called Permittee, of the County of Hidalgo, Texas, the Right, Privilege and Authority to construct, reconstruct, lay and maintain a 8 inch water/ gas/ sewer/ irrigation line; said line to be constructed of PVC material along the following public road easement held by the Hidalgo County of Hidalgo, Texas upon the conditions, obligations, and requirements as hereinafter set forth, said public road upon which said water/ gas/ sewer/ irrigation line is to be constructed, reconstructed, laid and maintained, **described as follows:**

- 2. Will bore across Texan Road along the south right of way of Mile 4 North with 16" steel casing.

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a 8" water line along the above described public road being conditioned that Permittee agrees that:

1. The Permittee will install and shall maintain said pipeline so that the top of the line will always be at least at the minimum depth of forty (40) inches below the flow line of the ditches on either side of said roadway when the pipeline is to be constructed, the Permittee shall contact the Commissioner in the Precinct in which the construction project is located and obtain written instructions, signed by said Commissioner, concerning the location and depth of said line. In this connection, it is agreed and understood that the Permittee will not cut the surface in any manner said public road or any roadway, without first obtaining the written permission of the Commissioners' Court of Hidalgo County, Texas.
2. The Permittee will employ a competent person or firm to do such installation and complete it in accordance with the covenants and conditions herein set forth.
3. Permittee shall stake its line on the location approved by the Commissioner in whose precinct the work is to be done well in advance of beginning its work. Permittee shall contact Commissioner before commencing any work.
4. The Permittee will use all proper caution in performing the work to prevent injury to all persons and property and it will indemnify Hidalgo County against all damages that may be assessed against the County by reasons of the work here permitted and the maintenance of such pipeline.
5. Notwithstanding any provision in this Agreement to the contrary, Permittee recognizes that the paramount purpose of the easement and dedication for the said public road is to provide for the establishment and operation of a roadway for the public. Recognizing this as the paramount purpose of the easement and dedication, Permittee agrees that Permittee has the unlimited and unrestricted right to establish, construct, reconstruct and maintain the said public road and to conduct all maintenance for the roadway and all related structures (including but not limited to the maintenance, construction and reconstruction of ditches, drainage pipes, bridges and paving surfaces) without incurring any liability, obligation or duty to Permittee.

THE STATE OF TEXAS §

COUNTY OF HIDALGO §

That the County of Hidalgo, Texas, acting by and through its Commissioners' Court, by virtue of motion and resolution introduced and adopted by said Commissioners' Court on the 28th day of October, 2008 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

North Alamo Water Supply Corporation hereinafter called Permittee, of the County of Hidalgo, Texas, the Right, Privilege and Authority to construct, reconstruct, lay and maintain a 2 inch /water/ gas/ sewer/ irrigation line; said line to be constructed of PVC material along the following public road easement held by the Hidalgo County of Hidalgo, Texas upon the conditions, obligations, and requirements as hereinafter set forth, said public road upon which said water/ gas/ sewer/ irrigation line is to be constructed, reconstructed, laid and maintained, **described as follows:**

- 3. Approximately 52' on the west side of Palm St south of Magnolia St- Line Ext.- Maria Del Carmen Cepeda; ¾" service connection (Heidelberg S/D)

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a water line along the above described public road being conditioned that Permittee agrees that:

1. The Permittee will install and shall maintain said pipeline so that the top of the line will always be at least at the minimum depth of forty (40) inches below the flow line of the ditches on either side of said roadway when the pipeline is to be constructed, the Permittee shall contact the Commissioner in the Precinct in which the construction project is located and obtain written instructions, signed by said Commissioner, concerning the location and depth of said line. In this connection, it is agreed and understood that the Permittee will not cut the surface in any manner said public road or any roadway, without first obtaining the written permission of the Commissioners' Court of Hidalgo County, Texas.
2. The Permittee will employ a competent person or firm to do such installation and complete it in accordance with the covenants and conditions herein set forth.
3. Permittee shall stake its line on the location approved by the Commissioner in whose precinct the work is to be done well in advance of beginning its work. Permittee shall contact Commissioner before commencing any work.
4. The Permittee will use all proper caution in performing the work to prevent injury to all persons and property and it will indemnify Hidalgo County against all damages that may be assessed against the County by reasons of the work here permitted and the maintenance of such pipeline.
5. Notwithstanding any provision in this Agreement to the contrary, Permittee recognizes that the paramount purpose of the easement and dedication for the said public road is to provide for the establishment and operation of a roadway for the public. Recognizing this as the paramount purpose of the easement and dedication, Permittee agrees that Permitter has the unlimited and unrestricted right to establish, construct, reconstruct and maintain the said public road and to conduct all maintenance for the roadway and all related structures (including but not limited to the maintenance, construction and reconstruction of ditches, drainage pipes, bridges and paving surfaces) without incurring any liability, obligation or duty to Permittee.

THE STATE OF TEXAS §

COUNTY OF HIDALGO §

That the County of Hidalgo, Texas, acting by and through its Commissioners' Court, by virtue of motion and resolution introduced and adopted by said Commissioners' Court on the 28th day of October, 2008 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

Rio-Tech hereinafter called Permittee, of the County of Hidalgo, Texas, the Right, Privilege and Authority to construct, reconstruct, lay and maintain a 4 inch /water/ gas/ sewer/ irrigation line; said line to be constructed of    material along the following public road easement held by the Hidalgo County of Hidalgo, Texas upon the conditions, obligations, and requirements as hereinafter set forth, said public road upon which said water/ gas/ sewer/ irrigation line is to be constructed, reconstructed, laid and maintained, **described as follows:**

- 4. Install a 4" sewer line along "I" Rd, West to East; between Alberta and Trenton Rd.

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a 4" line along the above described public road being conditioned that Permittee agrees that:

1. The Permittee will install and shall maintain said pipeline so that the top of the line will always be at least at the minimum depth of forty (40) inches below the flow line of the ditches on either side of said roadway when the pipeline is to be constructed, the Permittee shall contact the Commissioner in the Precinct in which the construction project is located and obtain written instructions, signed by said Commissioner, concerning the location and depth of said line. In this connection, it is agreed and understood that the Permittee will not cut the surface in any manner said public road or any roadway, without first obtaining the written permission of the Commissioners' Court of Hidalgo County, Texas.
2. The Permittee will employ a competent person or firm to do such installation and complete it in accordance with the covenants and conditions herein set forth.
3. Permittee shall stake its line on the location approved by the Commissioner in whose precinct the work is to be done well in advance of beginning its work. Permittee shall contact Commissioner before commencing any work.
4. The Permittee will use all proper caution in performing the work to prevent injury to all persons and property and it will indemnify Hidalgo County against all damages that may be assessed against the County by reasons of the work here permitted and the maintenance of such pipeline.
5. Notwithstanding any provision in this Agreement to the contrary, Permittee recognizes that the paramount purpose of the easement and dedication for the said public road is to provide for the establishment and operation of a roadway for the public. Recognizing this as the paramount purpose of the easement and dedication, Permittee agrees that Permittee has the unlimited and unrestricted right to establish, construct, reconstruct and maintain the said public road and to conduct all maintenance for the roadway and all related structures (including but not limited to the maintenance, construction and reconstruction of ditches, drainage pipes, bridges and paving surfaces) without incurring any liability, obligation or duty to Permittee.

**AI-11892**

**6.A.**

**Investment Report - 3rd Qtr ending sept. 30 2008**

**CC CONSENT**

Date: 10/28/2008

Submitted By: Fred Zamarripa, TREASURER'S OFFICE

Submitted For: Norma Garcia

Department: TREASURER'S OFFICE

---

Information

**CAPTION**

Approval of the 3rd Qtr. Hidalgo County Investment Report ending September 30, 2008.

**BACKGROUND**

---

Fiscal Impact

FISCAL YEAR:

ACCT. #:

FUNDS AVAILABLE Y/N?:

MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

No Budgetary impact.

---

Attachments

Link: [Cover Sheet](#)

Link: [Summary](#)

Link: [Legend](#)

Link: [Report](#)

---

Form Routing/Status

<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Budget & Management	Veronica Lopez	10/23/2008 07:51 AM	APRV
2	Manuel Chapa	Manuel Chapa	10/23/2008 04:34 PM	APRV
3	Auditor's Office	Linda Fong	10/24/2008 09:18 AM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 09:58 AM	APRV

Form Started By: Fred Zamarripa

Started On: 10/22/2008 04:53 PM

Final Approval Date: 10/24/2008

---

.....  
Hidalgo County

# Quarterly Investment Report



*Quarter ending September 30, 2008*

Norma G Garcia, Hidalgo County Treasurer



# Quarterly Investment Report

## For the quarter ending September 30, 2008

This report is made in accordance with provisions of Government Code 2256, The Public Funds Investment Act, which requires quarterly reporting of investment transactions for county funds to the Commissioners' Court. The investments held in Hidalgo County's portfolio comply with the Public Funds Investment Act and with the County's investment policy and strategies.

### Cash Availability

Cash balances are monitored with First National Bank on a daily basis, in which available cash is determined for investments to be made by 9:30 a.m. of the next working day.

### Summary

The total interest earned for the **Third Quarter** ending September 30, 2008 - **\$ 617,553.27**

First Quarter 2008	0.00
Second Quarter 2008	72,493.15
Third Quarter 2008	617,553.27
Fourth Quarter 2008	
	<hr/>
	\$ 690,046.42

Prepared by:

Norma G. Garcia, CIO  
Hidalgo County Treasurer

## **County of Hidalgo Investment Activity Legend**

### **Legend by type:**

FNMA	Federal National Mortgage Association
FNDN	Federal National Discount Note
FMAC	Federal Mortgage Association Corporation
FNMD	Federal National Mortgage Discount Note
FHLDN	Federal Home Loan Discount Note
FRMC	Federal Reserve Mortgage Corporation
FMCDN	Federal Mortgage Corporation Discount
FHLNB	Federal Home Loan Bank
FCDN	Farm Credit Discount Note
FFCB	Federal Farm Credit Bank
FHLMC	Federal Home Loan Mortgage Corporation
CD	Certificate of Deposit
REPO	Repurchase Agreement
T-BILL	U.S. Treasury bill
PL	Investment Pools

Hidalgo County Treasurer's Office  
 Financial Investment Report  
 For the quarter ending September 30, 2008

09/30/08

Type	Fund Name	Fund #	Investment Number	Purchase Date	Maturity Date	Term	Days in Term	Days till Mat.	Par	WAM	Interest Rate	Accrued Int in qtr	Yield	Book Value	Market Value	Institution
CD	General Fund	1100	8005000438	06/13/08	12/17/08	187	110	77	15,000,000.00	1,155,000,000.00	2.45%	92,630.14	188,280.82	15,000,000.00	15,092,630.14	First National Bank
CD	General Fund	1100	8005000446	06/13/08	12/22/08	192	110	82	15,000,000.00	1,230,000,000.00	2.45%	92,630.14	193,315.07	15,000,000.00	15,092,630.14	First National Bank
CD	General Fund	1100	8005000453	06/13/08	12/29/08	199	110	89	15,000,000.00	1,335,000,000.00	2.45%	92,630.14	200,363.01	15,000,000.00	15,092,630.14	First National Bank
PL	General Fund	1100	56688062	08/22/08	10/15/08	54	40	14	2,000,000.00	28,000,000.00	2.46%	5,391.78	7,278.90	2,000,000.00	2,005,391.78	Texas CLASS
PL	General Fund	1100	56910901	09/05/08	10/15/08	40	26	14	15,000,000.00	210,000,000.00	2.46%	26,284.93	40,438.36	15,000,000.00	15,026,284.93	Texas CLASS
PL	Special Revenue	---	56688061	08/22/08	10/15/08	54	40	14	2,000,000.00	28,000,000.00	2.46%	5,391.78	7,278.90	2,000,000.00	2,005,391.78	Texas CLASS
PL	Special Revenue	---	56910927	09/05/08	10/15/08	40	26	14	8,500,000.00	119,000,000.00	2.46%	14,894.79	22,915.07	8,500,000.00	8,514,894.79	Texas CLASS
PL	Debt Service	---	56910926	09/05/08	10/15/08	40	26	14	3,080,000.00	43,120,000.00	2.46%	5,397.17	8,303.34	3,080,000.00	3,085,397.17	Texas CLASS
PL	Capital Projects	---	56688060	08/22/08	10/15/08	54	40	14	2,000,000.00	28,000,000.00	2.46%	5,391.78	7,278.90	2,000,000.00	2,005,391.78	Texas CLASS
PL	Capital Projects	---	56910925	09/05/08	10/15/08	40	26	14	15,000,000.00	210,000,000.00	2.46%	26,284.93	40,438.36	15,000,000.00	15,026,284.93	Texas CLASS
PL	Proprietary	---	56688059	08/22/08	10/15/08	54	40	14	2,000,000.00	28,000,000.00	2.46%	5,391.78	7,278.90	2,000,000.00	2,005,391.78	Texas CLASS
PL	Proprietary	---	56910931	09/05/08	10/15/08	40	26	14	10,000,000.00	140,000,000.00	2.46%	17,523.29	26,958.90	10,000,000.00	10,017,523.29	Texas CLASS
TOTALS									104,580,000.00	4,554,120,000.00		389,842.65	750,128.55	104,580,000.00	104,969,842.65	

--- - Indicates more than one account number for that fund  
 PL - Investments are On Demand (Maturity Date is provided to estimate interest earned)

**Avg. yield**  
2.46%

**WAM**  
43.55

**AI-11818**  
**TAX OFFICE REFUNDS**  
**CC CONSENT**

**7.A.**

Date: 10/28/2008  
Submitted By: Hilda Fuentes, TAX OFFICE  
Submitted For: Hilda Fuentes  
Department: TAX OFFICE  
Agenda Area: Tax Refunds

---

Information

CAPTION

ACCT#	PROPERTY OWNER	PAYER	AMT
J4220.02.000.0039.00	Maria G Ramos	HSBC	\$5883.26
K2400.93.000.0031.02	JB Forklift	JB Forklift	\$6854.82
M3710.02.000.0073.00	Orlando & Yadira Gonzalez	HSBC	\$3218.91

BACKGROUND

---

Fiscal Impact

---

Attachments

Link: [First Page](#)  
Link: [Accounts](#)  
Link: [Maria](#)  
Link: [JB Forklift](#)  
Link: [Orlando](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/21/2008 08:08 AM	APRV
2	Erika Reyna	Erika Reyna	10/23/2008 08:51 AM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 05:40 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:31 AM	APRV

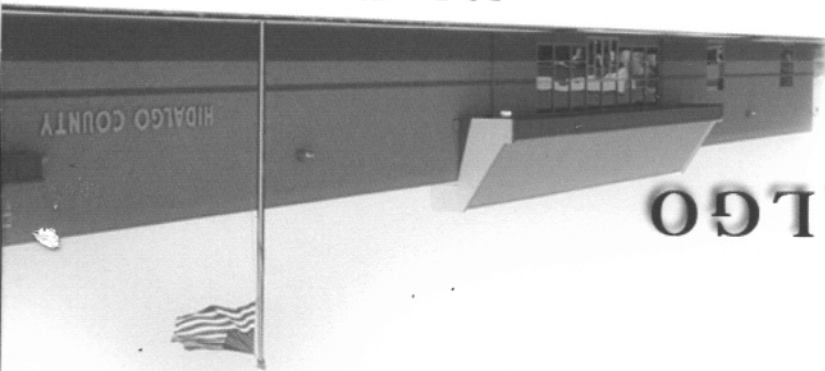
Form Started By: Hilda Fuentes

Started On: 10/20/2008 04:40 PM

Final Approval Date: 10/24/2008

---

Office of Tax Assessor-Collector  
COUNTY of HIDALGO



P.O. Box 178  
Edinburg, Texas 78540-0178  
(956) 318-2157 • Fax (956) 318-2733

October 20, 2008

The Honorable J.D. Salinas III  
Hidalgo County Commissioners  
Edinburg, Texas 78539

Re: See attached list

Gentlemen:

As per Section 31.11 of the Property Tax Code, the governing body of each taxing unit must authorize refunds of overpayments or erroneous payments over \$ 2500.00 dollars.

I respectfully request that the Commissioner's Court approve the enclosed application for a tax refund based on an adjustment approved by the Hidalgo County Appraisal District Office.

When completed, please return the attached to this office.

Thanking you for your assistance in this matter, I remain.

Very truly yours,

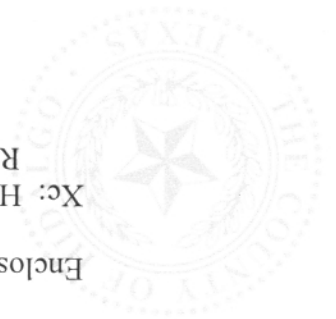
Armando Barrera, Jr. RTA

Abj:mm

Enclosure

Xc: Hidalgo County Auditor  
Raymundo Eufrazio, CPA

2804 S. Bus. Hwy 281 • Edinburg, TX 78539





2804 S. Bus. Hwy 281 • Edinburg, TX 78539

ACCOUNT NUMBER	PROPERTY OWNER	PAYER	AMOUNT
1. J4220.02.000.0039.00	MARIA G RAMOS	HSBC	\$ 5,883.26
2. K2400.93.000.0031.02	JB FORKLIFT	JB FORKLIFT	\$ 6,854.82
3. M3710.02.000.0073.00	ORLANDO & YADIRA GONZALEZ	HSBC	\$ 3,218.91

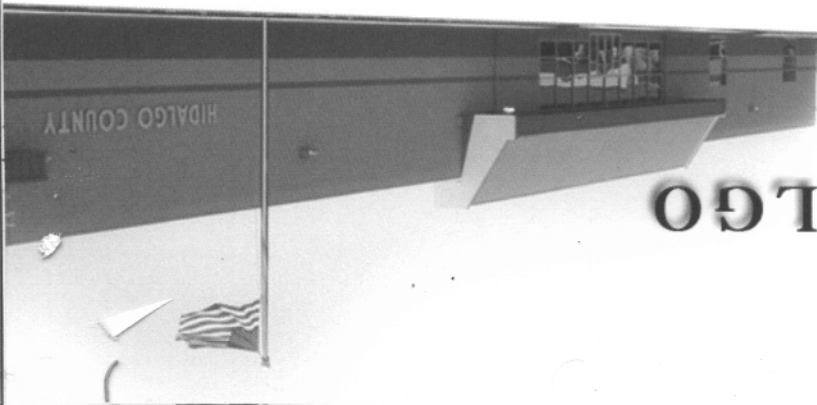
P.O. Box 178  
Edinburg, Texas 78540-0178  
(956) 318-2157 • Fax (956) 318-2733

Assessor and Collector

*Armando Barrera Jr., PTA*

COUNTY of HIDALGO

Office of Tax Assessor - Collector



8/22/08  
a/10

**APPLICATION FOR TAX REFUND**

Collection office name: HIDALGO COUNTY TAX OFFICE  
 Present mailing address (number and street): P O BOX 178  
 City, town or post office, state, ZIP code: EDINBURG TX 78540-0178  
 Phone (area code and number): (956) 318-2173

To apply for a tax refund, the taxpayer must complete the following:

Step 1: Owner's name and address  
 Owner's name: HSBC +  
 Present mailing address (number and street): 452 5<sup>TH</sup> AVE  
 City, town or post office, state, ZIP code: NEW YORK, NY 10018  
 Pasadenia GA 91107  
 Phone (area code and number):  
 Legal description (or attach copy of the tax bill or tax receipt): JARDIN DEL VALLE APARTMENTS PH 2 LOT 39

Step 2: Describe the property  
 Address or location of property:  
 Account number of property: R687812  
 Tax receipt number: LN# 5118 / 001089595P  
 12041057 OR

Step 3: Give the tax payment information  
 Name of Taxing Unit from Which Refund is Requested: ALL ENTITIES  
 Year for Which Refund is Requested: 2007  
 Date of the Tax Payment: 06/30  
 Amount of Taxes Paid: \$ 6318.50 \*  
 Amount of Tax Refund Requested: \$ 5983.36 \*  
 (Taxpayer's reason for refund (attach supporting documentation): OVERPAYMENT

0818209C  
 NB

Step 4: Sign the form  
 I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct.  
 Signature: [Signature]  
 Date of signature for tax refund: 8/18/08

Step 5: Tax refund Determination  
 This tax refund is  Approved  Disapproved  
 AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: 10-15-08  
 Signature: [Signature]  
 Date: 10/17/08  
 Sign here  
 Sign here

**APPLICATION FOR TAX REFUND**

HIDALGO COUNTY TAX OFFICE  
Collection office name

Present mailing address (number and street)  
P O BOX 178  
EDINBURG TX 78540-0178

City, town or post office, state, ZIP code  
EDINBURG TX 78540-0178

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name

J B FORKLIFT

Owner's name

Present mailing address (number and street)

PO BOX 1296

City, town or post office, state, ZIP code

EDINBURG, TX 78540

Phone (area code and number)

(956) 318-2157

Step 2: Describe the property

Legal description (or attach copy of the tax bill or tax receipt): SPECIAL INVENTORY AT 3724 S EXPY

Address or location of property:

P635149

Account number of property:

K2400.93.000.0031.02

OR

Tax receipt number:

Step 3: Give the tax payment information

Name of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2007	05/16	\$ 6864.89	\$ 6854.82
2.				
3.				
4.				
5. TOTAL				\$ 6854.82

Taxpayer's reason for refund (attach supporting documentation): SUBMITTED/ENTERED WRONG

FAILURE TO PLACE DECIMAL POINT IN ITS ALLOCATED PLACE

HF

Step 4: Sign the form

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

Signature

Date of application for tax refund

Step 5: Tax refund Determination

This tax refund is  Approved  Disapproved

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
DATE: 10-15-08

sign here

Authorized officer

sign here

Approval is required under Section 31.11, tax code (insert amount for which governing body approval is required)

Date 10/17/08  
Date 9/11/08



To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address  
 Owner's name: **HSBC & Owner: Orlando & Yadira Gonzalez**  
 Present mailing address (number and street): **452 5TH AVE.**  
 City, town or post office, state, ZIP code: **NEW YORK, NY 10018**  
 Phone (area code and number):

Step 2: Describe the property  
 Legal description (or attach copy of the tax bill or tax receipt): **MESQUITE ESTATES #2 LOT 73&74**  
 Address or location of property:  
 Account number of property: **R523862**  
 Tax receipt number: **M3710-02-000-0073-00** OR **12041228**

Step 3: Give the tax payment information

Year	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2007 / 06/30 / 08	\$ 5753.47	\$ 3218.91
2.			
3.			
4.			
5.			

Taxpayer's reason for refund (attach supporting documentation): **OVERPAYMENT**

0818205C Ln#0011492873 NB

Step 4: Sign the form

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

Signature: *[Signature]*  
 Date of application for tax refund: **8/7/08**

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination

This tax refund is  Approved  Disapproved

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: **JE 10-15-08**

Authorized officer: *[Signature]*  
 Date: **10/17/08**

Collector of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 3.11, tax code): *[Signature]*  
 Date: **8/14/08**

AI-11854

7.B.

Tax Office Refunds

CC CONSENT

Date: 10/28/2008  
 Submitted By: Norma Briones, TAX OFFICE  
 Submitted For: Norma Briones  
 Department: TAX OFFICE  
 Agenda Area: Tax Refunds

Information

CAPTION

Account Number	Property Owner	Payer	Amount
A4700.99.000.0000.96	Transport International pool Inc.	Transport Int'l pool Inc.	\$6,852.43
B5185.00.000.0016.00	Jose S & Linda Palomo	Citimortgage	\$3,055.07
C1298.99.000.0002.05	Junior Supermaket#4	Junior Supermarket#4	\$2,973.00
E5660.00.000.0013.00	Ismael & Debra Flores	First American	\$4,709.07
E5670.00.000.0025.00	Guadalupe Javier Cavazos	GMAC Mortgage	\$16,684.26
K2400.00.000.0068.00	Charlotte Bennett	Richard S. Talbert	\$4,359.98
K2400.00.000.0084.01	Bobob LLC	Bobob LLC	\$3,490.05
K2740.99.000.0001.01	K-line Logistic Inc.	Margaret Kent	\$3,807.19
L2690.00.000.000A.00	Bobob LLC	Bobob LLC	\$2,883.40
L3385.00.000.0002.00	Sergio & Blanca Munoz	Countrywide	\$3,369.60
L6225.03.000.0088.00	KB Home Lone Star LP	KB Home	\$4,153.34
M1950.99.000.0011.91	Area Logistics Inc.	Area Logistics Inc.	\$10,204.69
M1950.99.000.0011.91	Area Logistics Inc.	Area Logistics Inc.	\$3,367.01
M1950.99.037.0005.09	Zobra Outlet	Zobra Outlet	\$8,035.59
R2730.04.000.000A.00	Jorge & De Saussure Trevino	Espana Construction & Dev.	\$5,472.74
S6208.00.000.0006.00	Esponjas LLC.	Bank Of America	\$4,802.81
T2100.00.277.0005.00	George & Lupita Saenz	George & Lupita Saenz & Sadco	\$2,895.79
V0123.00.000.0091.00	Jose Jaime Guerra	Land America	\$2,937.85
W0100.99.014.0001.04	Meadow Creek In the Valley	MIGM Enterprises	\$6,754.62

W3800.00.219.0000.08	Jose Jr. & Carmen De Leon	First America Real Estate	\$2,814.17
----------------------	---------------------------	---------------------------	------------

**BACKGROUND**

---

**Fiscal Impact**

---

**Attachments**

Link: [Backup](#)

---

**Form Routing/Status**

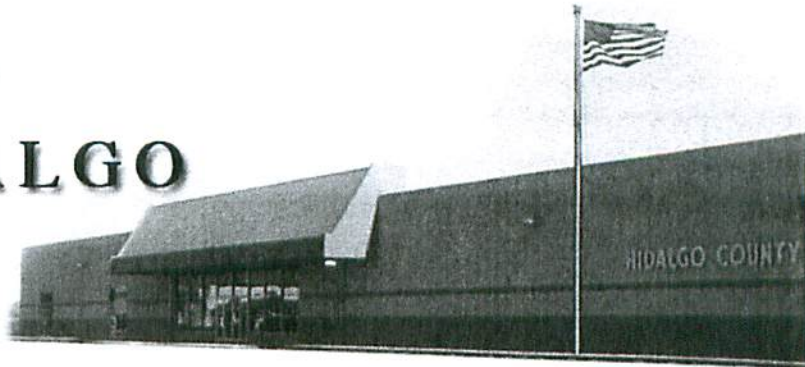
<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Budget & Management		10/24/2008 08:32 AM	PEND
2	Erika Reyna	Erika Reyna	10/23/2008 02:57 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 05:40 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:32 AM	APRV

Form Started By: Norma Briones  
 Started On: 10/22/2008 12:15 PM

Final Approval Date: 10/24/2008

---

Office of Tax Assessor-Collector  
**COUNTY of HIDALGO**



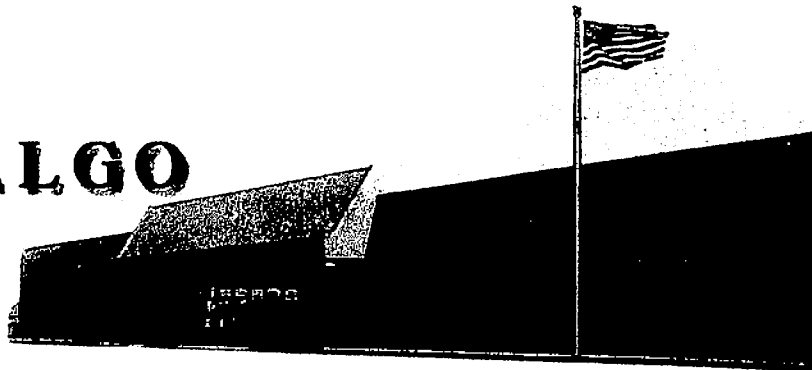
*Armando Barrera Jr., R7A*  
 Assessor and Collector

P.O. Box 178  
 Edinburg, Texas 78540-0178  
 (956) 318-2157 • Fax (956) 318-2733

ACCOUNT NUMBER	PROPERTY OWNER	PAYER	AMOUNT
1. A4700.99.000.0000.96	TRANSPORT INTERNATIONAL POOL INC	TRANSPORT INT'L POOL INC	\$ 6,852.43
2. B5185.00.000.0016.00	JOSE S & LINDA PALOMO	CITIMORTGAGE	\$ 3,055.07
3. C1298.99.000.0002.05	JUNIOR SUPERMARKET #4	JUNIOR SUPERMARKET #4	\$ 2,973.00
4. E5660.00.000.0013.00	ISMAEL & DEBRA FLORES	FIRST AMERICAN	\$ 4,709.07
5. E5670.00.000.0025.00	GUADALUPE JAVIER CAVAZOS	GMAC MORTGAGE	\$ 16,684.26
6. K2400.00.000.0068.00	CHARLOTTE BENNETT	RICHARD S TALBERT	\$ 4,359.98
7. K2400.00.000.0084.01	BOBOB LLC	BOBOB LLC	\$ 3,490.05
8. K2740.99.000.0001.01	K-LINE LOGISTIC INC	MARGARET KENT	\$ 3,807.19
9. L2690.00.000.000A.00	BOBOB LLC	BOBOB LLC	\$ 2,883.40
10. L3385.00.000.0002.00	SERGIO & BLANCA MUNOZ	COUNTRYWIDE	\$ 3,369.60
11. L6225.03.000.0008.00	KB HOME LONE STAR LP	KB HOME	\$ 4,153.34
12. M1950.99.000.0011.91	AREA LOGISTICS INC	AREA LOGISTICS INC	\$ 10,204.69
13. M1950.99.000.0011.91	AREA LOGISTICS INC	AREA LOGISTICS INC	\$ 3,367.01
14. M1950.99.037.0005.09	ZOBRA OUTLET	ZOBRA OUTLET	\$ 8,035.59
15. R2730.04.000.000A.00	JORGE & DE SAUSSURE TREVINO	ESPANA CONSTRUCTION & DEV.	\$ 5,472.74
16. S6208.00.000.0006.00	ESPONJAS LLC	BANK OF AMERICA	\$ 4,802.81
17. T2100.00.277.0005.00	GEORGE & LUPITA SAENZ	GEORGE & LUPITA SAENZ & SADCO	\$ 2,895.79
18. V0123.00.000.0091.00	JOSE JAIME GUERRA	LAND AMERICA	\$ 2,937.85
19. W0100.99.014.0001.04	MEADOW CREEK IN THE VALLEY	MIGM ENTERPRISES	\$ 6,754.62
20. W3800.00.219.0000.08	JOSE JR & CARMEN DE LEON	FIRST AMERICA REAL ESTATE	\$ 2,814.17

Office of Tax Assessor-Collector

**COUNTY of HIDALGO**



*Armando Barrera Jr., RTA*

Assessor and Collector

P.O. Box 178

Edinburg, Texas 78540-0178

(956) 318-2157 • Fax (956) 318-2733

October 23, 2008

The Honorable J.D Salinas III  
Hidalgo County Commissioners  
Edinburg, Texas 78539

Re: See attached list

Gentlemen:

As per Section 31.11 of the Property Tax Code, the governing body of each taxing unit must authorize refunds of overpayments or erroneous payments over \$ 2500.00 dollars.

I respectfully request that the Commissioner's Court approve the enclosed application for a tax refund based on an adjustment approved by the Hidalgo County Appraisal District Office.

When completed, please return the attached to this office.

Thanking you for your assistance in this matter, I remain.

Very truly yours,

Armando Barrera, Jr. RTA

Abj:mm

Enclosure

Xc: Hidalgo County Auditor  
Raymundo Eufrazio, CPA

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

**To apply for a tax refund, the taxpayer must complete the following**

<b>Step 1:</b> Owner's name and address	Owner's name <b>TRANSPORT INTERNATIONAL POOL INC. †</b>	
	Present mailing address (number and street) <b>530 E. SWEESFORD RD STE 300</b>	
	City, town or post office, state, ZIP code <b>WAYNE, PA 19087-1607</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ZERO 2007 DAW A4700.99.000.0000-C6/ LEASED**


<b>Step 2:</b> Describe the property	<b>VECHICLES AT SHARYLAND SCHOOL &amp; MCALLEN CITY</b>	
	Address or location of property: <b>P689566 †</b>	
	Account number of property: <b>A4700.99.000.0000.96 †</b>	Tax receipt number: <b>OR 10183034</b>

<b>Step 3:</b> Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007 †	12/17 / 2007	\$ 6852.43 †	\$ 6852.43 †
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 6852.43 †

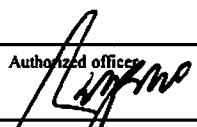
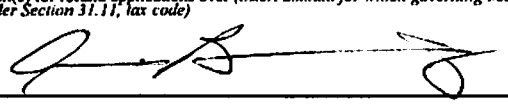
Taxpayer's reason for refund (attach supporting documentation): **SUPP#14**

**MULTIPLE APPRAISAL ( VALUE DECREASED)**

**NB**

<b>Step 4:</b> sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here 	Date of application for tax refund

**If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.**

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-15-08</u>
	Authorized officer sign here 	Date <u>10/17/08</u>	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval required under Section 31.11, tax code) sign here 	Date <u>10/14/08</u>	

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

<b>Step 1:</b> Owner's name and address	Owner's name <b>PALOMO JOSE S &amp; LINDA A (PAID BY: CITIMORTGAGE)</b>
	Present mailing address (number and street) <b>6608 N. 32<sup>ND</sup> ST</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78504</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **BUGANVILLA ESTATES "AMENDED" LOT 16**

<b>Step 2:</b> Describe the property	Address or location of property:
	<b>R693368</b>
	Account number of property:
	<b>B5185.00.000.0016.00</b>
	Tax receipt number:
	<b>OR 12033269/10445552</b>

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007	06/30	/ 2008	\$ 3818.86
2.	2007	12/31	/ 2007	\$ 531.19	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ 4350.05	\$ 3055.07

Taxpayer's reason for refund (attach supporting documentation): **SUPP #14**

**CLERICAL ERRORS (VALUE DECREASED)**

**NB**

<b>Step 4:</b> sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here	Date of application for tax refund

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>JE 10-15-08</b>
	Authorized officer sign here	Date <b>10/17/08</b>

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date <b>10/14/08</b>
--	-------------------------

0115  
2011

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name <b>JUNIOR SUPERMARKET # 4 FE-MA ENTERPRISESES INC.</b>	
	Present mailing address (number and street) <b>700 E. RIDGE RD</b>	
	City, town or post office, state, ZIP code <b>PHARR, TX 78577</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE FIXTURES & EQUIPMENT**

Step 2: Describe the property	<b>AT 108 EAST FM 495/ NEW ACCT 2006</b>	
	Address or location of property:	
	<b>P687476</b>	
	Account number of property: <b>C1298.99.000.0002.05</b>	Tax receipt number: <b>OR 10486482</b>

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007	12/31 / 2007	\$ 21621.00	\$ 2973.00
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2973.00
Taxpayer's reason for refund (attach supporting documentation): <b>SUPP#14</b>					
<b>CLERICAL ERRORS (VALUE DECREASED)</b>					
<b>NB</b>					


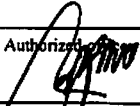
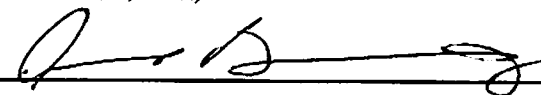
Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here	Date of application for tax refund
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-15-08</u>
	Authorized Officer sign here	Date	<b>10/17/08</b>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date	<b>10/14/08</b>

10/14



# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>		Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC					
Present mailing address (number and street) <b>P O BOX 178</b>		Phone (area code and number) <b>(956) 318-2157</b>					
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>							
<b>To apply for a tax refund, the taxpayer must complete the following</b>							
<b>Step 1:</b> Owner's name and address	Owner's name <b>FLORES, ISMAEL &amp; DEBRA (PAID BY:FIRST AMERICAN)†</b>						
	Present mailing address (number and street) <b>400 W CHAMPION LN</b>						
	City, town or post office, state, ZIP code <b>MISSION, TX 78572</b>		Phone (area code and number)				
Legal description (or attach copy of the tax bill or tax receipt): <b>ENCATADO LOT 13</b>							
<b>Step 2:</b> Describe the property	Address or location of property: <b>R585095 †</b>						
	Account number of property: <b>E5660.00.000.0013.00 †</b>		Tax receipt number: <b>OR 10445579</b>				
<b>Step 3:</b> Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested		Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested	
	1. ALL ENTITIES		2007	12/31	/ 2007	\$ <del>7877.53</del>	\$ 4709.07 †
	2.				/	\$ 4709.07	\$
	3.				/	\$	\$
	4.				/	\$	\$
	5. TOTAL				/	\$	\$ 4709.07 †
	Taxpayer's reason for refund (attach supporting documentation): <b>SUPP#14</b> <i>Tax office error, removed entire value instead of 15%</i>						
<b>GRANT HS FILED LATE (VALUE DECREASED) apply back to Lg Joya</b>							
<b>NB † refund diff. Apply \$4521.27 to Acct and refund \$187.80</b>							
<b>Step 4:</b> sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."						
	Signature sign here 				Date of application for tax refund		
	<b>If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.</b>						
<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved			AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>JE 10-15-08</b>			
	Authorized sign here 				Date <b>10/17/08</b>		
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here 				Date <b>10/14/08</b>		

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name <b>CAVAZOS, GUADALUPE JAVIER ( PAID BY: GMAC MORTGAGE)</b>
	Present mailing address (number and street) <b>5103 ELK LN</b>
	City, town or post office, state, ZIP code <b>EDINBURG, TX 78539</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ENCANTO RIDGE LOT 25**

Step 2: Describe the property	Address or location of property: <b>R561412</b>
	Account number of property: <b>E5670.00.000.0025.00</b>
	Tax receipt number: <b>OR 12131404/10803909</b>

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007	01/22	/ 2008	\$ 1881.05
2.	2007	08/27	/ 2008	\$ 18765.58	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ 20646.63	\$ 16684.26

Taxpayer's reason for refund (attach supporting documentation): **SUPP #14**

**OMITTED PROPERTIES ( VALUE DECREASED)**

**NB**

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here	Date of application for tax refund

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-15-08</u>	
	Authorized sign sign here	Date <b>10/17/08</b>

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)

sign here

Date  
**10/14/08**

01/15  
2/14

# APPLICATION FOR TAX REFUND

Collecting office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2173</b>

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name <b>D M ROTH INC</b> PAYER: RICHARD S TALBERT A owner: Charlotte Bennett
	Present mailing address (number and street) <b>5820 N CAGE BLVD</b>
	City, town or post office, state, ZIP code <b>PHARR, TX 78577</b>

Legal description (or attach copy of the tax bill or tax receipt): **KELLY PHARR TRACT 1.25AC BEING AN IRR TR**

Step 2: Describe the property	<b>BEING AN IRR TRACT-W424.82'-S330'-N494' LOT 68 1.25AC NET</b>	
	Address or location of property: <b>R202057</b>	
	Account number of property: <b>K2400.00.000.0068.00</b>	Tax receipt number: <b>OR</b>

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2002	11/30	/ 2005	\$ 2259.46
2. ALL ENTITIES	2003	11/30	/ 2005	\$ 2141.44	\$ 2121.81
3.			/	\$	\$
4.			/	\$	\$ 4359.98
5. TOTAL			/	\$	\$ 4306.75

Taxpayer's reason for refund (attach supporting documentation): **GRANT AG USE 2002-2005 AS PER R1 SUPP#36 &26 HF**

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature <b>sign here</b>	Date of application for tax refund

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-14-08</u>
	Authorized officer <b>sign here</b>	Date <b>10/17/08</b>	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) <b>sign here</b>	Date <b>5/15/08</b>	

1090  
C122

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CA CLV-CMS-CPN-CPO-CWL-SEB-S SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

<b>Step 1:</b> Owner's name and address	Owner's name <b>BOBOB, LLC</b>	
	Present mailing address (number and street) <b>5510 N CAGE BLVD BLDG J</b>	
	City, town or post office, state, ZIP code <b>PHARR, TX 78577</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **KELLY PHARR TRACT N429' S1089' W264'**

<b>Step 2:</b> Describe the property	E990' LT 84 2.60AC	
	Address or location of property: <b>R202177</b>	
	Account number of property: <b>K2400.00.000.0084.01</b>	Tax receipt number:
	<b>OR</b>	

<b>Step 3:</b> Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested		Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007	1/31	/	2008	\$ 10870.33
2.			/		\$	\$
3.			/		\$	\$
4.			/		\$	\$
5. TOTAL			/		\$	\$ 3490.05

Taxpayer's reason for refund (attach supporting documentation): **SUBMITTED/ENTERED WRONG**

**HF**

<b>Step 4:</b> sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here	Date of application for tax refund
	If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.	

<b>Step 5:</b> Tax refund Determination	This tax refund is <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	Authorized Officer sign here	Date <b>10/17/08</b>
	Collectors of taxing unit(s) for refund applications over (insert amount for which governing body approves as required under Section 31.11, Tax code) sign here	Date <b>9/11/08</b>

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following


Step 1: Owner's name and address	Owner's name <b>K-LINE LOGISTIC INC<sup>+</sup> PAYER: MARGARET KENT AND KENT HONEYBEES</b>	
	Present mailing address (number and street) <b>11224 BRYAN RD</b>	
	City, town or post office, state, ZIP code <b>MISSION, TX 78573</b>	Phone (area code and number)

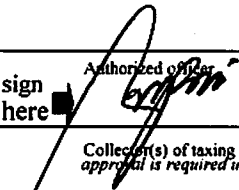
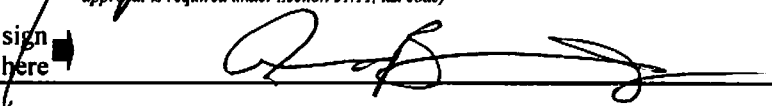
Legal description (or attach copy of the tax bill or tax receipt): **ZERO 2007 GONE 12/31/06**

Step 2: Describe the property	Address or location of property:	
	<b>P679586 <sup>+</sup></b>	
	Account number of property: <b>K2740.99.000.0001.01 <sup>+</sup></b>	Tax receipt number:
	<b>OR</b>	

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007	04/30/04/23 / 2008	\$ 4180.09 <sup>+</sup>	\$ 3807.19 <sup>+</sup>
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3807.19 <sup>+</sup>

Taxpayer's reason for refund (attach supporting documentation): **CLERICAL ERRORS INCLUSION OF PROPERTY NON-EXISTENT HF**

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature <b>sign here</b> 	Date of application for tax refund
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-14-08</u>	
	Authorized officer <b>sign here</b> 	Date <b>10/17/08</b>
Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) <b>sign here</b> 	Date <b>9/11/08</b>	

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

<b>Step 1:</b> Owner's name and address	Owner's name <b>BOBOB, LLC †</b>	
	Present mailing address (number and street) <b>5510 N CAGE BLVD BLDG J</b>	
	City, town or post office, state, ZIP code <b>PHARR, TX 78577</b>	Phone (area code and number)


Legal description (or attach copy of the tax bill or tax receipt): **LANDMARK MOBILE HOMES LT A**

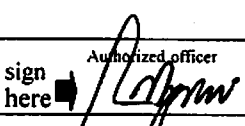
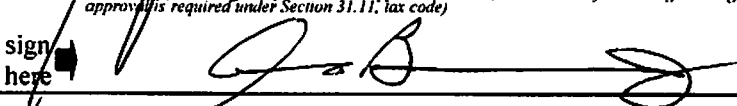
<b>Step 2:</b> Describe the property	Address or location of property:	
	<b>R591131 †</b>	
	Account number of property: <b>L2690.00.000.000A.00 †</b>	Tax receipt number:
	<b>OR</b>	

<b>Step 3:</b> Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007 †	01/31 / 2008	\$ 9790.79 †	\$ 2883.40 †
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2883.40 †



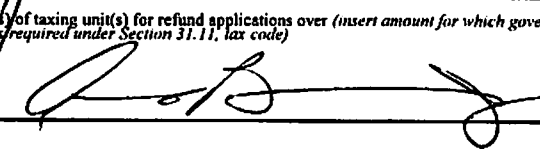
Taxpayer's reason for refund (attach supporting documentation): **SUBMITTED/ENTERED WRONG**

**HF**

<b>Step 4:</b> Give the tax sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here 	Date of application for tax refund
	If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.	

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-14-08</u>
	Authorized officer sign here 	Date <u>10/14/08</u>	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approvals required under Section 31.11, tax code) sign here 	Date <u>9/11/08</u>	

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>		Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC				
Present mailing address (number and street) <b>P O BOX 178</b>		Phone (area code and number) <b>(956) 318-2157</b>				
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>						
<b>To apply for a tax refund, the taxpayer must complete the following</b>						
<b>Step 1: Owner's name and address</b>	Owner's name <b>MUNOZ, SERGIO &amp; BLANCA E ( PAID BY:COUNTRY WIDE) †</b>					
	Present mailing address (number and street) <b>REYNOSA TAMPS 87710</b>					
	City, town or post office, state, ZIP code <b>MEXICO, 00000-0000</b>		Phone (area code and number)			
Legal description (or attach copy of the tax bill or tax receipt): <b>LAS VINAS LOT 2</b>						
<b>Step 2: Describe the property</b>	Address or location of property:					
	<b>R670109 †</b>					
	Account number of property:		Tax receipt number:			
	<b>L3385.00.000.0002.00 †</b>		<b>OR 10379855</b>			
<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested		Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES		2007 †	12/31 / 2007	\$ 8269.83 †	\$ 3369.60 †
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5. TOTAL			/	\$	\$ 3369.60 †
Taxpayer's reason for refund (attach supporting documentation): <b>SUPP#14</b>						
<b>SUBMITTED/ENTERED WRONG (VALUE DECREASED)</b>						
<b>NB</b>						
<b>Step 4: sign the form</b>	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."					
	Signature sign here 					Date of application for tax refund
<b>If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.</b>						
<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved			AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-15-08</u>		
	Authorized officer sign here 					Date <u>10/17/08</u>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here 					Date <u>10/14/08</u>

10/14

**APPLICATION FOR TAX REFUND**

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2173</b>

**To apply for a tax refund, the taxpayer must complete the following**

<b>Step 1: Owner's name and address</b>	Owner's name <b>KB HOME LONE STAR LP</b>	
	Present mailing address (number and street) <b>1800 S. MAIN ST STE 850</b>	
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78503</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LOS LAGOS PH 3 LOT 88**

<b>Step 2: Describe the property</b>	Address or location of property:	
	Account number of property: <b>L6225.03.000.0088.00</b>	Tax receipt number: <b>R673555 OR 7069857</b>

<b>Step 3: Give the tax payment information</b>	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2005	03/19	/ 2006	<del>\$ 4153.34</del>
2.			/	\$ 5,468.54	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4153.34

Taxpayer's reason for refund (attach supporting documentation): **SUPP#6**

**NB**

<b>Step 4: sign the form</b>	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here	Date of application for tax refund

**If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.**

<b>Step 5: Tax refund Determination</b>	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>JE 10-14-08</b>
	Authorized officer sign here	Date <b>10/17/08</b>	
	Collector(s) of taxing unit(s) for refund applications over approval required under Section 31.11, tax code sign here	Date <b>5-1-06</b>	

1-11-08  
5/1



# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>


To apply for a tax refund, the taxpayer must complete the following

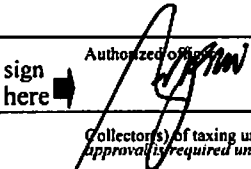
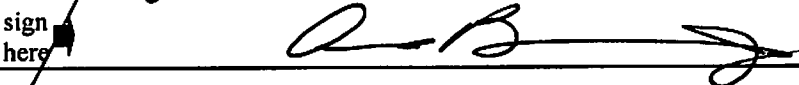
Step 1: Owner's name and address	Owner's name <b>AREA LOGISTICS INC ↗</b>
	Present mailing address (number and street) <b>P O BOX 52757</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78505</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ZERO 2005 GONE 12-31-04/VEHICLES & TRAILERS**

Step 2: Describe the property	<b>AT MCALLEN SCHOOL &amp; CITY</b>	
	Address or location of property:	
	<b>P679875 ↗</b>	
	Account number of property: <b>M1950.99.000.0011.91 ↗</b>	Tax receipt number: <b>OR</b>

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2005 ↗	2/1-2/23 / 2006	\$ 10204.69 ↗	\$ 10204.69 ↗
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 10204.69 ↗
Taxpayer's reason for refund (attach supporting documentation): <b>SUPP 31 - DELETE DUE TO CLERICAL ERRORS Apply to R516374</b>					
<b>TR</b>					

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here 	Date of application for tax refund
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-14-08</u>
	Authorized officer sign here 	Date	<u>10/17/08</u>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here 	Date	<u>9/30/08</u>

10-10

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-ICC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name <b>AREA LOGISTICS INC</b>	
	Present mailing address (number and street) <b>P O BOX 52757</b>	
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78505</b>	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ZERO 2005 GONE 12-31-04/VEHICLES & TRAILERS**

Step 2: Describe the property	<b>AT MCALLEN SCHOOL &amp; CITY</b>	
	Address or location of property:	
	<b>P679875</b>	
	Account number of property: <b>M1950.99.000.0011.91</b>	Tax receipt number: <b>OR</b>

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. COUNTY & DR1	2006	8/23	/ 2007	\$ 3367.01
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3367.01

Taxpayer's reason for refund (attach supporting documentation): **SUPP 23 - DELETE DUE TO CLERICAL ERRORS**  
*Apply to R 516374*  
**TR**

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here	Date of application for tax refund
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-14-08</u>
	Authorized officer sign here	Date <b>10/17/08</b>	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here	Date <b>9/30/08</b>	

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

<b>Step 1:</b> Owner's name and address	Owner's name <b>ZORBA OUTLET</b>
	Present mailing address (number and street) <b>414 S MAIN ST</b>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78501</b>
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **ZERO 2007 RELOCATED TO M1950.99.044.0002.06**

<b>Step 2:</b> Describe the property	Address or location of property:
	<b>P622001</b>
	Account number of property: <span style="float: right;">Tax receipt number:</span>
	<b>M1950.99.037.0005.09</b> <span style="float: right;"><b>OR</b></span>

<b>Step 3:</b> Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested		Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007	04/22	/ 2008	\$ 9036.46	\$ 8035.59
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5. TOTAL			/	\$	\$ 8035.59

Taxpayer's reason for refund (attach supporting documentation): **PERSONAL PROPERTY NOT**

**TAXABLE JAN 1ST Prior Refund \$1,000.87**

**HF**

<b>Step 4:</b> sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature <b>sign here</b>	Date of application for tax refund
	<b>If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.</b>	

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <b>JE 10-14-08</b>
	Authorized officer <b>sign here</b>	Date <b>10/17/08</b>	
	Collectors of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) <b>sign here</b>	Date <b>9/11/08</b>	

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following


Step 1: Owner's name and address	Owner's name <i>Payor</i> <b>ESPAÑA CONSTRUCTION &amp; DEVELOPMENT*</b> <i>owner: Trevino, Jorge H &amp; De Saussure</i>
	Present mailing address (number and street) <b>917 E ESPERANZA</b> <i>3200 Scenic Way Ave</i>
	City, town or post office, state, ZIP code <b>MCALLEN, TX 78501</b> <i>McAllen Tx 78503</i>

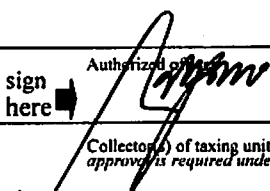
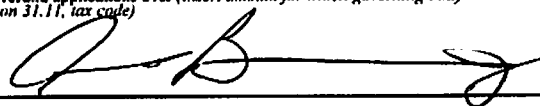
Legal description (or attach copy of the tax bill or tax receipt): **RIDGEVIEW PLACE #4 LOT A**

Step 2: Describe the property	Address or location of property:
	<b>R270033*</b>
	Account number of property: <b>R2730.04.000.000A.00*</b> <i>OR</i>
	Tax receipt number:

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007*	1/31 / 2008	\$ 16173.18*	\$ 5472.74*
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 5472.74*

Taxpayer's reason for refund (attach supporting documentation): **SUPP #14 - CHANGE, DUE TO CLERICAL ERRORS**  
**TR**

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here 	Date of application for tax refund
	If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.	

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <i>JE 10-15-08</i>	
	Authorized sign here 	Date <i>10/17/08</i>
Collectors of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)	sign here 	Date <i>10/14/08</i>

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name <b>ALVAREZ, ROOSEVELT C &amp; BIANCA . PAYOR: BANK OF AMERICA ↗</b>
	Present mailing address (number and street) <b>501 JAMES ST owner: Esponjas LLC</b>
	City, town or post office, state, ZIP code <b>SAN JUAN, TX 78589 810 W Ferguson St Pharr Tx 78577</b>


Legal description (or attach copy of the tax bill or tax receipt): **STEWART PLACE ESTATES LOT 6**



Step 2: Describe the property	Address or location of property:
	<b>R694461 ↗</b>
	Account number of property: <b>S6208.00.000.0006.00 ↗</b>
	Tax receipt number: <b>OR</b>

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007 ↗	9/11 / 2008	\$ 4802.81 ↗	\$ 4802.81 ↗
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 4802.81 ↗

Taxpayer's reason for refund (attach supporting documentation): **SUPP#14 - CHANGE, DUE TO CLERICAL ERRORS**

**TR**

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here 	Date of application for tax refund
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.		

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-15-08</u>
	Authorized officer sign here 	Date <u>10/17/08</u>	
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here 	Date <u>10/14/08</u>	

01/15  
2/14

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2173</b>

To apply for a tax refund, the taxpayer must complete the following

**Step 1:** Owner's name and address

Owner's name: **GEORGE L & LUPITA U SAENZ / Sadeo Inc.**

Present mailing address (number and street): **PO BOX 1083**

City, town or post office, state, ZIP code: **PREMONT, TX 78375**

Phone (area code and number):

Legal description (or attach copy of the tax bill or tax receipt): **TEX-MEX SURVEY-N626.13' S729.08 E208.71**

**Step 2:** Describe the property

**W288.71 LOT 5 SEC 277 3.0AC NET**

Address or location of property:

**R297452**

Account number of property: **T2100.00.277.0005.00 / R297452** OR Tax receipt number:

**Step 3:** Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2002	/	\$ 745.62	\$ 2754.76
2.		/	\$	\$ 2,895.79
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$

Taxpayer's reason for refund (attach supporting documentation): **SUPP#37-CLERICAL ERROR**

**SUBMITTED/ENTERED WRONG** *Check will be mm*

**HF** *applicable to both payers*

**Step 4:** sign the form

"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."

Signature: *[Signature]* Date of application for tax refund:

**If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.**

**Step 5:** Tax refund Determination

This tax refund is  Approved  Disapproved

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
DATE: **JE 10-14-08**

Authorized officer: *[Signature]* Date: **10/17/07**

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code): *[Signature]* Date: **6/12/06**

*10/20*

**APPLICATION FOR TAX REFUND**

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

To apply for a tax refund, the taxpayer must complete the following


Step 1: Owner's name and address	Owner's name <b>GAMINO, MARIA D</b> PAYOR: LAND AMERICA <sup>↑</sup>
	Present mailing address (number and street) <b>1200 E 7<sup>TH</sup> ST</b> owner: Jose Jaime Guerra
	City, town or post office, state, ZIP code <b>SAN JUAN, TX 78589</b> 9915 Hannan Dr Houston, TX 77040
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): <b>VIP EAST LOT 91</b>
	Address or location of property:
	<b>R686228 ↑</b>
	Account number of property: <b>V0123.00.000.0091.00 ↑</b> Tax receipt number:

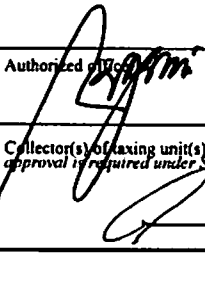
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2007 ↑	12/26	/ 2007	\$ 3413.56 ↑
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2937.85 ↑

Taxpayer's reason for refund (attach supporting documentation): **SUPP #14 - CHANGE, DUE TO CLERICAL ERRORS**

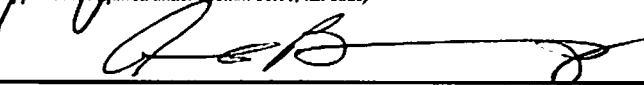
**TR**

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature sign here 	Date of application for tax refund

**If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.**

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-15-08</u>	
	Authorized sign here 	Date <b>10/17/08</b>

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)

sign here 	Date <b>10/14/08</b>
--	-------------------------

# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	Phone (area code and number) <b>(956) 318-2157</b>
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	

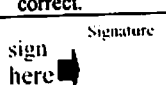
To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address	Owner's name <b>MEADOW CREEK IN THE VALLEY +</b> <i>Payer: MIGA Enterprises</i>
	Present mailing address (number and street) <b>1300 CIRCLE DR</b>
	City, town or post office, state, ZIP code <b>MISSION, TX 78572</b>

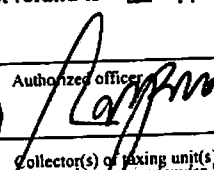
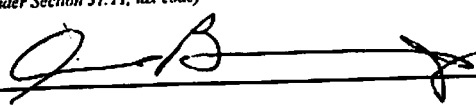
Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): <b>ZERO 2007 DAW M3170.99.000.0000.11/ INVENTORY</b>
	<b>SUPPLIES FURNITURE FIXTURES EQUIPMENT &amp; VEHICLES AT 1300 CIRCLE DRIVE</b>
	Address or location of property: <b>P692475 +</b>
	Account number of property: <b>W0100.99.014.0001.04 +</b> OR Tax receipt number:

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1.	ALL ENTITIES	2007 +	1/31 / 2008	\$ 6754.62 +	\$ 6754.62 +
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5.	TOTAL		/	\$	\$ 6754.62 +

Step 3: Give the tax payment information	Taxpayer's reason for refund (attach supporting documentation): <b>SUPP #14 - DELETE, DUE TO MULTIPLE APPRAISALS</b>
	<b>TR</b>

Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct." Signature	Date of application for tax refund
	sign here 	

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-15-08</u>
	Authorized officer sign here 	Date	<u>10/17/08</u>
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) sign here 	Date	<u>10/14/08</u>



# APPLICATION FOR TAX REFUND

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2173</b>

To apply for a tax refund, the taxpayer must complete the following

<b>Step 1:</b> Owner's name and address	Owner's name <b>JOSE JR &amp; CARMEN DE LEON</b> <i>payer: First American Real Estate Tax Service</i>
	Present mailing address (number and street) <b>RR 1 BOX 525A</b>
	City, town or post office, state, ZIP code <b>WESLACO, TX 78596-9801</b>

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **WEST TRACT N130.84' AN IRR TR FT 2 5AC 4.93AC**

<b>Step 2:</b> Describe the property	Address or location of property:
	Account number of property: <b>W3800.00.219.0000.08 &amp; R561763</b> OR <b>411793</b>
	Tax receipt number:

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested		Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1.	ALL ENTITIES	2004	5/17	/ 05	\$ 4,474.78
2.				/	\$	\$ 2,814.17
3.				/	\$	\$
4.				/	\$	\$
5.				/	\$ TOTAL	\$ 3005.58 <i>2,814.17</i>

Taxpayer's reason for refund (attach supporting documentation): **2004 ADJUSTMENT CLERICAL**

**ERRORS** *(apply 13% P&I to account)* <sup>191.04</sup>

MM

<b>Step 4:</b> sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
	Signature <b>sign here</b>	Date of application for tax refund

If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	
	AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE DATE: <u>JE 10-14-08</u>	
	Authorized officer <b>sign here</b>	Date <b>10/17/08</b>

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)	Date
<b>sign here</b>	<b>11-17-09</b>

11-08

**AI-11817**

**8.A.**

**Home Rehab applicants  
CC CONSENT**

Date: 10/28/2008  
Submitted By: Estella Webber, URBAN COUNTY  
Department: URBAN COUNTY  
Agenda Area: Urban County

---

Information

**CAPTION**

Request for approval of one (1) applicant in the City of Donna and one (1) in the Countywide area under the HOME Homeowner Occupied Housing Rehabilitation Program.

**BACKGROUND**

The following families are being recommended for approval to receive assistance under the HOME Homeowner Occupied Housing Rehabilitation Program:

(See attachments)

---

Fiscal Impact

---

Attachments

---

Link: [rehab applicants](#)

---

Form Routing/Status

<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Budget & Management	Veronica Lopez	10/21/2008 08:04 AM	APRV
2	Veronica Lopez	Veronica Lopez	10/22/2008 10:03 AM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 09:03 AM	APRV
4	Court Administrator	Angela Garcia	10/23/2008 09:25 AM	APRV

Form Started By: Estella Webber  
Started On: 10/20/2008 04:13 PM

Final Approval Date: 10/23/2008

---

# URBAN COUNTY PROGRAM

**Hidalgo County Commissioner's Court  
Consent Agenda Request Form**


No. \_\_\_\_\_

Date: October 20, 2008

Meeting Date Request: October 28, 2008

Deadline for Action: A.S.A.P

Contact Person: DIANA R. SERNA, DIRECTOR

Department: HOME Program  
*Diana R. Serna, Urban County Director* 

Phone: (956) 787-8127 Fax: (956) 787-5291

**Caption:**

Request for approval of one (1) applicant in the City of Donna and one (1) in the Countywide area under the HOME Homeowner Occupied Housing Rehabilitation Program.


**Background:**

The following families are being recommended for approval to receive assistance under the HOME Homeowner Occupied Housing Rehabilitation Program:

<u>APPLICANT</u>	<u>CASE NUMBER</u>	<u>CITY</u>	<u>FUNDING YEAR</u>	<u>LOCATION OF PROPERTY</u>
Alejandro Olivo Deferred Loan – Elderly Reconstruct	DO 15-08-02	Donna Precinct #1	HOME 2007	Lot 1 & 2 in Block 7, COLONIA PLAZA an addition to the City of Donna, Hidalgo Hidalgo County, Texas
Otilia Rodriguez Deferred Loan - Elderly Reconstruct	CW 85-08-08	Countywide Precinct #1	HOME 2007	Lot 24 Block 1, AGUA DULCE HOME- SITE, Hidalgo County, Texas.

The amount of assistance to the family will be determined after receipt of bids through the procurement process. Thereafter, selection of bidders will be presented to County Commissioner's Court. Funding is available through the HOME 2007 Budget. The Urban County Program staff recommends approval of applicant's.

Please initial for approval:

HOME Manager   
Finance \_\_\_\_\_

Legal Council \_\_\_\_\_ Budget \_\_\_\_\_ Human Resources \_\_\_\_\_ Dept./Fund No. \_\_\_\_\_ Amt. \_\_\_\_\_  
Expended: \$ \_\_\_\_\_ Funds/ Staffing Budgeted: Yes \_\_\_\_\_ No \_\_\_\_\_ Amount Code: \_\_\_\_\_ Impact on Future Budget: Yes \_\_\_\_\_ No \_\_\_\_\_

**Comments:**

**Action taken by Commissioner's Court:**

Approved \_\_\_\_\_ Tabled \_\_\_\_\_ Denied \_\_\_\_\_ Motion made by \_\_\_\_\_ Seconded \_\_\_\_\_ Vote \_\_\_\_\_

## Housing Rehab Program

**ENTITY:** City of Donna

**PROJECT:** Approval for Assistance under the HOME Homeowner Occupied Housing Rehabilitation Program.

**FUNDING YEAR:** HOME 2007

**SYNOPSIS:**

The family is being recommended for applicant approval under the HOME Homeowner Occupied Housing Rehabilitation Program. The applicant has been on the Countywide Waitlist since July 2006, and has met all of the program requirements for assistance under the HOME Homeowner Housing Rehabilitation Grant Program. The following is a profile of the project

**Alejandro Olivo**

Family of three (3)	
Applicant's age is 73, daughter's age is 45 and son's age is 37	
Title Search:	No Abstract & Liens
Flood Zone:	No
Insurance:	N/A
Structures:	1
Taxes:	current
Assets & Deposits:	\$5.08
Debt to Income Ratio:	N/A
Pay Back:	No
Number of Bedrooms:	2
Square Feet:	864
Total annual household income:	\$ 14,620.80
HUD Income Limits (family of 3):	\$ 31,400.00
Deferred Loan-Elderly	

Existing Dwelling: 3 bedrooms frame home, built in 1940.

**RECOMMENDATION:**

The HOME Staff recommends approval for assistance under the Housing Rehabilitation Program by the County Commissioner's Court.

## Housing Rehab Program

**ENTITY:** Countywide

**PROJECT:** Approval for Assistance under the HOME Homeowner Occupied Housing Rehabilitation Program.

**FUNDING YEAR:** HOME 2007

**SYNOPSIS:**

The family is being recommended for applicant approval under the HOME Homeowner Occupied Housing Rehabilitation Program. The applicant has been on the Countywide Waitlist since March 2007, and has met all of the program requirements for assistance under the HOME Homeowner Housing Rehabilitation Grant Program. The following is a profile of the project

**Otilia Rodriguez**

Family of One (1)	
Applicant's age is 71	
Title Search:	No Abstract & Liens
Flood Zone:	No
Insurance:	N/A
Structures:	1
Taxes:	current
Assets & Deposits:	N/A
Debt to Income Ratio:	N/A
Pay Back:	No
Number of Bedrooms:	2
Square Feet:	864
Total annual household income:	\$ 14,620.80
HUD Income Limits (family of 3):	\$ 31,400.00
Deferred Loan-Elderly	

Existing Dwelling: 4 bedrooms frame home, built in 1968.

**RECOMMENDATION:**

The HOME Staff recommends approval for assistance under the Housing Rehabilitation Program by the County Commissioner's Court.

**AI-11768**

**9.A.**

**Approval of the Monthly Financial Report for the month of September 2008.**

**CC CONSENT**

Date: 10/28/2008  
Submitted By: Angelica Tapia, AUDITOR'S OFFICE  
Submitted For: Ray Eufracio  
Department: AUDITOR'S OFFICE  
Agenda Area: Auditor's Office

---

Information

**CAPTION**

Approval of the Monthly Financial Report for the month of September 2008.

**BACKGROUND**

Attachment will be distributed at Commissioner's Court.

---

Fiscal Impact

---

Attachments

*No file(s) attached.*

---

Form Routing/Status

<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Budget & Management	Veronica Lopez	10/16/2008 01:33 PM	APRV
2	Veronica Lopez	Veronica Lopez	10/16/2008 03:29 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 09:02 AM	APRV
4	Court Administrator	Angela Garcia	10/23/2008 09:25 AM	APRV

Form Started By: Angelica Tapia  
Started On: 10/16/2008 10:05 AM

Final Approval Date: 10/23/2008

---

AI-11877

10.A.

**Certification of Workers' Compensation Claims paid by Tristar Risk Management**

**CC CONSENT**

Date: 10/28/2008

Submitted By: Flora Vazquez, WORKERS' COMPENSATION

Department: WORKERS' COMPENSATION

Agenda Area: Budget and Management

---

Information

CAPTION

Self-Insured Workers' Compensation (2202):

Requesting approval of reimbursement of the Hidalgo County Workers' Compensation Claims paying account for claims paid by Tristar Risk Management in the amount of \$ 54,074.54 for the period of 09/16-30/2008 and requesting approval of wire transfer.

BACKGROUND

---

Fiscal Impact

---

Attachments

Link: [Breakdown by Organization](#)

Link: [Certification](#)

Link: [Invoice](#)

---

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Budget & Management	Veronica Lopez	10/22/2008 04:40 PM	APRV
2		Dale Kennan	Dale Kennan	10/23/2008 08:18 AM	APRV
3		Auditor's Office	Becky Morales	10/23/2008 09:27 AM	APRV
4		Court Administrator		10/23/2008 11:33 AM	NEW

Form Started By: Flora Vazquez

Started On: 10/22/2008 03:12 PM

Final Approval Date: 10/23/2008

---

# Custom Payment Total

Hidalgo County WC - Losses Paid 9/16 - 9/30/08

Processed	Check Date	Chk/Vchr #	Claim Number	Claimant	Incident	Transaction Type	Payee	Dates of Service	Method	Amount
<b>Alternate Organization 1 : Community Service</b>										
<b>Alternate Organization 1 Total:</b>									4	54.66
<b>Alternate Organization 1 : Headstart</b>										
<b>Alternate Organization 1 Total:</b>									70	6,345.66
<b>Alternate Organization 1 : Hidalgo County</b>										
<b>Alternate Organization 1 Total:</b>									379	47,674.22
<b>Grand Total:</b>									453	54,074.54



HIDALGO COUNTY BUDGET OFFICE/WORKERS' COMPENSATION DIVISION  
CERTIFICATION OF WORKERS' COMP. CLAIMS PAID BY TRISTAR RISK MANAGEMENT  
FOR THE PERIOD OF: September 16-30 2008.

Hidalgo County's Self-Funded Workers' Compensation, Third Party Administrator (TPA) TRISTAR RISK MANAGEMENT, has submitted to my office a request to reimburse the County's CLAIMS PAYING ACCOUNT in the amount of \$ 54,074.54.

TRISTAR is certifying to my office that it has paid Workers' Compensation Claims (Check # 322320-322503) on behalf of injured employees from 09/16/2008 to 09/30/2008 :

- |     |                                     |                     |
|-----|-------------------------------------|---------------------|
| 1). | Hidalgo County                      | \$ <u>47,674.22</u> |
| 2). | Hidalgo County Headstart Program    | \$ <u>6,345.66</u>  |
| 3). | Community Service Agency            | \$ <u>54.66</u>     |
| 4). | Hidalgo County Urban County Program | \$ <u>00.00</u>     |
| 5). | Drainage District #1                | \$ <u>00.00</u>     |

Total Reimbursement Requested by TRISTAR RISK MANAGEMENT \$ 54,074.54  
Dept. of Budget & Management/Employee Benefits Section is requesting approval of this payment on the Commissioners' Court Agenda of October 28, 2008.

Initial amount advanced by Commissioner's Court to TRISTAR RISK MANAGEMENT to pay claims: \$ < 200,000.00 >

Balance left in the Hidalgo County Workers' Compensation Fund at Mellon Bank in California. (estimate) \$ 145,925.46

I hereby approve this reimbursement and certify that I and/or my staff have reviewed each claim included on the attached check register to ensure that:

- All the claimants are in fact employees of Hidalgo County, Drainage District No. 1, Hidalgo County Headstart Program, Community Service Agency, or Hidalgo County Urban Program.
- All fees to vendors are appropriate for the type of service provided.
- All fees paid to Hidalgo County for salary continuation were in fact received by Hidalgo County, and have been received by my department and deposited with the Hidalgo County Treasurer's Office and credited to the corresponding salary account. I have forwarded a copy of the Treasurer's receipts for each check shown as issued to Hidalgo County.
- All types of expenditures reflected on this claim report are appropriate for the Hidalgo County Workers' Compensation Fund (Escrow Fund).
- The Office of the County Auditor will receive a copy of the monthly bank statement for the Hidalgo County Workers' Compensation Bank Account (held at Mellon Bank in California) no later than the 10<sup>th</sup> day of the following month.

Gloria Vazquez  
Employee Benefits Manager

10/22/2008  
Date

\_\_\_\_\_  
Dept. of Budget & Management Chief Administrator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Commissioner's Court Approval

\_\_\_\_\_  
Date

**Tristar Risk Management**  
**100 Oceangate Suite #700**  
**Long Beach, CA 90802**  
**(562) 495-6600**  
**TIN: 95-2791831**

October 1, 2008

Hidalgo County Workers Compensation Fund  
2818 S. Bus Hwy. 281  
Edinburg, TX 78539  
Flora Vazquez  
Director of Risk Management

L HIDAL.WC  
Invoice Number: 25795

---

---

Loss Replenishment

Re: Workers Compensation

---

Tristar Risk Management hereby certifies that the attached billings for losses paid 9/16 54,074.54  
- 9/30/08 (Check# 322320-322503) are in accordance with our contract with Hidalgo County  
Exhibit A, dated July 1st.

---

**TOTAL CURRENT CHARGES** \$ 54,074.54

---

Previous Balance Due \$ 37,531.07

---

Total Balance Due \$ 91,605.61

---

Due Upon Receipt

---

If you have any questions or need wire instructions, please call:  
(562) 495-6600 ext 1048

**AI-11911**

**10.B.**

**Blue Cross Blue Shield Health Insurance Claims  
CC CONSENT**

Date: 10/28/2008

Submitted By: Flora Vazquez, WORKERS' COMPENSATION

Department: WORKERS' COMPENSATION

Agenda Area: Budget and Management

---

Information

CAPTION

1. Approval to transfer \$404,227.61 to Hidalgo County Health Insurance Claims bank account for Blue Cross/Blue Shield Health Insurance claims periods:

09/20/08 to 09/26/08	\$ 354,137.25
09/27/08 to 09/30/08	50,090.36
Total:	\$ 404,227.61

2. Approval to wire transfer to cover claims paid.

BACKGROUND

---

Fiscal Impact

---

Attachments

Link: [09/20-26/2008](#)

Link: [09/27-30/2008](#)

Link: [Certification](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	10/23/2008 02:21 PM	APRV
2	Dale Kennan	Dale Kennan	10/23/2008 04:09 PM	APRV
3	Auditor's Office	Becky Morales	10/23/2008 05:43 PM	APRV
4	Court Administrator	Angela Garcia	10/24/2008 08:33 AM	APRV

Form Started By: Flora Vazquez

Started On: 10/23/2008 12:15 PM

Final Approval Date: 10/24/2008

---









HIDALGO COUNTY BUDGET OFFICE/WORKERS' COMPENSATION DIVISION  
CERTIFICATION OF MEDICAL INSURANCE CLAIMS  
PAID BY BLUE CROSS BLUE SHIELD OF TEXAS

FOR THE PERIOD OF: September 20, thru September 30, 2008.

Hidalgo County's Self-Funded Health Insurance, Third Party Administrator (TPA) Blue Cross Blue Shield of Texas, has submitted to my office a request to reimburse the County's CLAIMS PAYING ACCOUNT in the amount of \$ 404,227.61.

- 1). Hidalgo County
- 2). Hidalgo County Headstart Program
- 3). Hidalgo County Community Service Agency
- 4). Hidalgo County Urban County Program
- 5). Hidalgo County Drainage District #1
- 6). Hidalgo County Appraisal District

Total Reimbursement Requested by Blue Cross Blue Shield of Texas for dates 9/20/08 to 9/30/08 is \$ 404,227.61.

Dept. of Budget & Management/Employee Benefits Section is requesting approval of this payment on the Commissioners' Court Agenda of October 28, 2008.

I hereby approve this reimbursement and certify that I and/or my staff have reviewed each claim included on the attached check register to ensure that:

- All the claimants are in fact employees of Hidalgo County, Drainage District No. 1, Hidalgo County Headstart Program, Hidalgo County Community Service Agency, Hidalgo County Urban Program and Hidalgo County Appraisal District.
- All fees to vendors are appropriate for the type of service provided.
- All insurance premiums paid to Hidalgo County for Health Insurance Self-Funded Account were received by my department and deposited to the Hidalgo County Treasurer's Office and credited to the corresponding salary account.
- All types of expenditures reflected on this claim report are appropriate for the Hidalgo County Health Insurance Self Funded Account.

*Mona Vazquez*  
Employee Benefits Manager

10/22/2008  
Date

\_\_\_\_\_  
Dept. of Budget & Management Chief Administrator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Commissioner's Court Approval

\_\_\_\_\_  
Date



**Request for Comdata Fuel Credit Cards  
CC CONSENT**

Date: 10/28/2008  
Submitted By: Ovidio Gonzalez, PURCHASING DEPT.  
Submitted For: Marty Salazar  
Department: PURCHASING DEPT.  
Agenda Area: Purchasing Department

---

Information

CAPTION

1. Presentation for discussion, consideration and approval of application requests for Fleet Fueling Cards through our participation with Texas Procurement and Support Services (TPASS) contract with Comdata Corporation/Transmontaigne Product Services, Inc. (awarded vendor of State Council on Competitive Government) submitted by Elected Officials/Department Heads/Agency and/or Program Directors detailing holders and users as attached hereto, including but limited to the following and subject to the newly adopted and approved Hidalgo County Fuel Credit Card Policies and Procedures:

- a. DBM - Safety Division
- b. Division of Emergency Services
- c. Health and Human Services
- d. Fire Marshal, and, if applicable;
- e. Elections Dept.

2. Requesting authority to cancel all existing/current Fleet Fueling System cards (i.e. Arguindegui Oil Co., Comdata, and commercial fuel credit cards- Conoco, Exxon, Shell & Valero) upon receipt, activation and distribution of new cards with confirmation of applicable/required training;

BACKGROUND

Please see attached Comdata Fuel card Application/Request forms submitted by Department(s).

---

Fiscal Impact

FISCAL YEAR: 2008 ACCT. #: 8-1100-419-50-115-059-0-682  
FUNDS AVAILABLE Y/N?: MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

DBM - Safety Division - Amount available in PO # 596470 \$5,971.88 for Transmontaigne Product Services, Inc.  
Available Account Balance as of 10-23-08 \$50.89

FISCAL YEAR: 2008 ACCT. #: 8-1100-429-00-300-023-0-682

FUNDS AVAILABLE Y/N?:                      MATCHING FUNDS Y/N?:

**BUDGETARY IMPACT:**

Division of Emergency Services - Amount available in PO # 608713 \$3,455.60 for Transmontaigne Product Services, Inc.

Available Account Balance as of 10-23-08 \$9,009.38

FISCAL YEAR: 2008

ACCT. #: 8-1100-441-00-340-001-0-682

FUNDS AVAILABLE Y/N?:

MATCHING FUNDS Y/N?:

**BUDGETARY IMPACT:**

Health and Human Services - Amount available in PO #'s 602922 & 597491 \$16,505.94 & 161.58, respectively for Transmontaigne Product Services, Inc. & Arguindegui Oil Co, respectively.

Available Acct Balance as of 10-23-08 \$2,578.74.

FISCAL YEAR: 2008

ACCT. #: 8-1100-422-10-300-001-0-682

FUNDS AVAILABLE Y/N?:

MATCHING FUNDS Y/N?:

**BUDGETARY IMPACT:**

Fire Marshal - Amount available in PO # 596874 \$2,446.96 for Transmontaigne Product Services, Inc.

Available Account Balance as of 10-23-08 \$7,078.90

All funding sources were giving by departments.

---

Attachments

Link: [DBM Safety 10.28.08](#)

Link: [Emergency Services](#)

Link: [HHS 10.28.08](#)

Link: [Fire Marshal](#)

---

Form Routing/Status

<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Purchasing Department	Marty Salazar	10/22/2008 04:56 PM	APRV
2	Budget & Management	Veronica Lopez	10/23/2008 07:44 AM	APRV
3	Manuel Chapa	Manuel Chapa	10/23/2008 03:10 PM	APRV
4	Auditor's Office	Becky Morales	10/23/2008 05:43 PM	APRV
5	Court Administrator	Angela Garcia	10/24/2008 08:32 AM	APRV

Form Started By: Ovidio Gonzalez

Started On: 10/22/2008 01:16 PM

Final Approval Date: 10/24/2008

---









**Computer & Peripherals Purchases & Copier Leases & Agreements  
CC CONSENT**

Date: 10/28/2008  
 Submitted By: Matilde Faz, PURCHASING DEPT.  
 Submitted For: Marty Salazar  
 Department: PURCHASING DEPT.  
 Agenda Area: Purchasing Department

Information

CAPTION

1. Requesting authority to purchase computer equipment, software and/or peripherals through our membership/participation with (DIR) Department of Information Resource with the following awarded vendors.

Requisition	Vendor	Department	Amount	Account Number
141498	CDW	Tax Office	\$452.00	81100415151400010665
141804	CDW	Tax Office	\$299.00	81100415151400010661
141860	Dell	370th District Court	\$1,353.51	81100412000070010745
141884	Dell	Tax Office	\$4,473.04	81100415151400010745
142081	CDW	I. T.	\$291.00	81100415002000010601
142120	CDW	Tax Office	\$452.00	81100415151400010665
142121	CDW	Tax Office	\$452.00	81100415151400010665
141718	Dell	Treasurer's Office	\$4,592.00	81100415161500010745
142122	Dell	HIDTA	\$1,393.00	81252412002700120745

2. Requesting authority to purchase computer equipment, software and/or peripherals through our membership/participation with (TCPN) The Cooperative Purchasing Network with the following awarded vendors.

141763	CDW	Human Services	\$538.99	81100444002400010665
141489	CDW	Tax Office	\$401.24	81100415151400010667
142018	CDW	Tax Office	\$3,812.85	81100415151400010665
142014	CDW	Tax Office	\$4,063.50	81100415151400010665
141719	DELL	370th District Court	\$2,534.08	81100412000070010745

3. Requesting authority to enter into a 48-month (2) two new copier lease with Xerox contract #072391200 for the Treasurer's Office requisition # for the amount of \$266.60/month & \$209.23/month. Effective: Upon approval (81100423212800020780);

4. Requesting authority to enter into a 36-month (1) one new copier lease with Xerox contract #072391200 for the Health Department requisition # for the amount of \$851.82/month. Effective: Upon approval

5. Requesting authority to enter into a 12-month copier service agreement for a canon/IR-c4080i with Copy Graphics, Inc. for the Adult Probation Department requisition #141760 for the amount of \$375.00/year. Effective: 10/14/08 - 10/13/09 (8-1297-423-00-320-002-9-432)

6. Requesting authority to enter into a 12-month copier service agreement for a

canon/IR-5050 with Copy Graphics, Inc. for the Adult Probation Department requisition #141757 for the amount of \$2,900.00/year. Effective: 11/21/08 - 11/20/09 (8-1297-423-00-320-002-9-432)

**BACKGROUND**

---

**Fiscal Impact**

FISCAL YEAR: 2008 ACCT. #: Various  
FUNDS AVAILABLE Y/N?: Yes/LIT MATCHING FUNDS Y/N?:  
BUDGETARY IMPACT:

---

**Attachments**

Link: [DIR Gral. Consent](#)  
Link: [TCPN Gral. Purchase](#)  
Link: [Copier Leases](#)  
Link: [AP Copier Agreements](#)  
Link: [370th District Court](#)

---

**Form Routing/Status**

<b>Route Seq</b>	<b>Inbox</b>	<b>Approved By</b>	<b>Date</b>	<b>Status</b>
1	Purchasing Department	Marty Salazar	10/23/2008 01:56 PM	APRV
2	Budget & Management	Veronica Lopez	10/23/2008 02:16 PM	APRV
3	Dale Kennan		10/23/2008 02:16 PM	NEW
4	Auditor's Office		10/23/2008 02:16 PM	
5	Court Administrator		10/23/2008 02:16 PM	

Form Started By: Matilde Faz  
Started On: 10/22/2008 01:44 PM  
Final Approval Date: 10/23/2008

---



# Requisition

Req # 00141498

PO #

Date: 10/14/08

*Amount  
# 11858  
10/28/08*

Bill To: x  
x

Vendor: 153915  
CDW GOVERNMENT, INC.  
230 N. MILWAUKEE AVENUE  
VERNON HILLS IL 60061

Ship To: TAX ASSESSOR-COLLECTOR  
2804 S. BUS. HWY 281  
EDINBURG TX 78539-6243

Contact: FRAUD DEPT  
956-289-7472

Contract No:

Special Instructions:

F-12

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DO NOT DUPLICATE ORDER		
1	EACH	844592 HP LJ 3600 N 17/17PP, 8.5 X 14 MFG: H P -	452.00	452.00
0	EACH	Q5987A#ABA DIR SDD-223		
		COLOR PRINTER FOR THE FRAUD DEPT AT 2804 S BUS HWY 281	.00	.00
		Account No _____	Encumbrance	
		8-1100-415-15-140-001-0-665 /	452.00	
			Freight	.00
			Total	452.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

*DIR*

Authorized By: \_\_\_\_\_

*alln, Mati*

*Reg# 141498*



**The Right Technology.  
Right Away.™**

www.CDWG.com  
800-808-4239

# SALES QUOTATION

QUOTE NO.	ACCOUNT NO.	DATE
MCH2627	6324564	10/09/2008

MARY GARCIA  
B | 2804 S BUSINESS HWY 281  
L  
L HIDALGO COUNTY TAX OFFICE  
T EDINBURG, TX 78539  
O

HIDALGO COUNTY TAX OFFICE  
S | 2804 S BUSINESS HWY 281  
H  
I  
P MARY GARCIA  
T EDINBURG, TX 78539  
O Contact: MARY GARCIA 956-289-7472

Customer Phone# 9562897472

Customer P.O.# HP3600N

QUOTE

ACCOUNT MANAGER	SHIPPING METHOD	TERMS	EXEMPTION CERTIFICATE
JAY CARLILE 866-224-6448	FEDEX Ground	Request Terms	GOVT-EXEMPT

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1	844592	HP LJ 3600N 17/17PPM 8.5x14 Mfg#: H-P- Q5987A#ABA Contract: STATE OF TX DIR/ HP CONTRACT DIR SDD-223	452.00	452.00
			<b>SUBTOTAL</b>	452.00
			<b>FREIGHT</b>	.00
			<b>SALES TAX</b>	.00

**BUY WITH CONFIDENCE. CDW IS A FORTUNE 500 COMPANY.**

<b>TOTAL</b> ▾	US Currency 452.00
----------------	-----------------------

CDW Government, Inc.  
230 North Milwaukee Ave.  
Vernon Hills, IL 60061  
General Phone: 847-371-5000 Fax: 847-419-6200  
Account Manager's Direct Fax: 312-705-9492

Please remit payment to:  
CDW Government, Inc.  
75 Remittance Drive  
Suite 1515  
Chicago, IL 60675-1515

attn: Mati

Reg# 141498



The Right Technology. Right Away.™

www.CDWG.com  
800-808-4239

# SALES QUOTATION

QUOTE NO.	ACCOUNT NO.	DATE
MCH2627	6324564	10/09/2008

BILLO  
 MARY GARCIA  
 2804 S BUSINESS HWY 281  
 HIDALGO COUNTY TAX OFFICE  
 EDINBURG, TX 78539

attn: Jay

SHP  
 HIDALGO COUNTY TAX OFFICE  
 2804 S BUSINESS HWY 281  
 MARY GARCIA  
 EDINBURG, TX 78539  
 Contact: MARY GARCIA 956-289-7472

Customer Phone # 9562897472

Customer P.O. # HP3600N QUOTE

ACCOUNT MANAGER	SHIPPING METHOD	TERMS	EXEMPTION CERTIFICATE
JAY CARLILE 866-224-6448	FEDEX Ground	Request Terms	GOVT-EXEMPT

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1	844592	HP LJ 3600N 17/17PPM 8.5X14 Mfg#: H-P- Q5987A#ABA Contract: STATE OF TX DIR/ HP CONTRACT DIR SDD-223	452.00	452.00
		SUBTOTAL		452.00
		FREIGHT		.00
		SALES TAX		.00

OCT 22 2008  
 By Ed J. 20

2 of these  
 TAKS -

BUY WITH CONFIDENCE. CDW IS A FORTUNE 500 COMPANY.

TOTAL	US Currency
	452.00

CDW Government, Inc.  
 230 North Milwaukee Ave.  
 Vernon Hills, IL 60061  
 General Phone: 847-371-5000 Fax: 847-419-6200  
 Account Manager's Direct Fax: 312-705-9492

Please remit payment to:  
 CDW Government, Inc.  
 75 Remittance Drive  
 Suite 1515  
 Chicago, IL 60675-1515

# Requisition

Req # 00141804

PO #

Date: 10/16/08

*Consent # 10/28/08*

Bill To: x  
x

Vendor: 153915  
CDW GOVERNMENT, INC.  
230 N. MILWAUKEE AVENUE  
VERNON HILLS IL 60061

Ship To: TAX ASSESSOR-COLLECTOR  
2804 S. BUS. HWY 281  
EDINBURG TX 78539-6243

Contact: TAX COLLECTION  
956-289-7472

Contract No:

Special Instructions:  
C-245

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1	EACH	DIR SDD-223 DO NOT DUPLICATE ORDER		
0	EACH	1422504 HP LJ M1522NF MFP 24PPM 600 DPI USB MFG: h-p-cb534a#abaH-P-CB534A#ABA PRINTER/COPIER/FAX FOR THE TAX COLLECTIONS DEPT AT 2804 S BUS HWY 281 (MARY G)	299.00 .00	299.00 .00
		Account No 8-1100-415-15-140-001-0-661	Encumbrance 299.00	
			Freight	.00
			Total	299.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

*DIR*

Authorized By: \_\_\_\_\_

Attn: Tonya Regt (41804



The Right Technology. Right Away.™

www.CDWG.com 800-808-4239

SALES QUOTATION

QUOTE NO.	ACCOUNT NO.	DATE
MDM6053	6324564	10/16/2008

MARY GARCIA  
 B 2804 S BUSINESS HWY 281  
 L  
 L HIDALGO COUNTY TAX OFFICE  
 T EDINBURG, TX 78539  
 O

HIDALGO COUNTY TAX OFFICE  
 S 2804 S BUSINESS HWY 281  
 H  
 I  
 P MARY GARCIA  
 T EDINBURG, TX 78539  
 O Contact: MARY GARCIA 956-289-7472

Customer Phone # 9562897472

Customer P.O. # HP1522NF

QUOTE

ACCOUNT MANAGER	SHIPPING METHOD	TERMS	EXEMPTION CERTIFICATE
JAY CARLILE 866-224-6448	FEDEX Ground	Request Terms	GOVT-EXEMPT

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1	1422504	HP LJ M1522NF MFP 24PPM 600 DPI USB Mfg#: H-P-CB534A#ABA Contract: STATE OF TX DIR/ HP CONTRACT DIR SDD-223	299.00	299.00
		SUBTOTAL		299.00
		FREIGHT		.00
		SALES TAX		.00

BUY WITH CONFIDENCE. CDW IS A FORTUNE 500 COMPANY.

TOTAL	US Currency
	299.00

CDW Government, Inc.  
 230 North Milwaukee Ave.  
 Vernon Hills, IL 60061  
 General Phone: 847-371-5000 Fax: 847-419-6200  
 Account Manager's Direct Fax: 312-705-9492

Please remit payment to:  
 CDW Government, Inc.  
 75 Ramittance Drive  
 Suite 1515  
 Chicago, IL 60675-1515

# Requisition

Req # 00141860

PO #

Date: 10/17/08

Amount  
\$ 10/28/08

Bill To: x  
x

Vendor: 178136  
DELL MARKETING L.P.  
ONE DELL WAY  
RR1 MAILSTOP 8035  
ROUND ROCK TX 78682  
FAX (800)433-9527

Ship To: 370TH DISTRICT COURT  
100 N. CLOSNER, 2ND FL  
EDINBURG TX 78539

Contact: 956-318-2280

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1	EACH	DO NOT DUPLICATE ORDER		
1		LATITUDE E6500, INTEL CORE 2 DUO P8400, 2.26 GHZ,	1,353.51	1,353.51
		<u>Account No</u>	<u>Encumbrance</u>	.00
		8-1100-412-00-007-001-0-745	1,353.51	
			Freight	.00
			Total	1,353.51
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

DIR

Authorized By: \_\_\_\_\_

7628... 171020

Requisition: 141860



QUOTATION 370th

QUOTE #: 454755105

Customer #: 17927132

Contract #: 9913578

Customer Agreement #: DIR-SDD-192

Quote Date: 10/16/08

Date: 10/16/08 5:43:38 PM

Customer Name: HIDALGO COUNTY

TOTAL QUOTE AMOUNT:	\$1,353.51		
Product Subtotal:	\$1,353.51		
Tax:	\$0.00		
Shipping & Handling:	\$0.00		
Shipping Method:	Ground	Total Number of System Groups:	1

GROUP: 1	QUANTITY: 1	SYSTEM PRICE: \$1,353.51	GROUP TOTAL: \$1,353.51
Base Unit:	Latitude E6500, Intel Core 2 Duo P8400, 2.26GHz, 1066MHz 3M L2 Cache, Dual Core (223-9149)		
Memory:	2.0GB, DDR2-800 SDRAM, 1 DIMM for Latitude (311-9218)		
Keyboard:	Internal English Keyboard for Latitude E (330-0836)		
Keyboard:	Documentation (English) Latitude E-Family/Mobile Precision (330-1652)		
Video Card:	Intel Integrated Graphics Media Accelerator 4500MHD Latitude E6500 (320-6724)		
Hard Drive:	160GB Hard Drive 9.5MM,5400RPMfor Latitude E6X00 (341-6965)		
Hard Drive Controller:	No Fingerprint Reader for Latitude E6X00 (311-8819)		
Floppy Disk Drive:	15.4 inch Wide Screen WXGA LCDfor Latitude E6500 (320-6726)		
Floppy Disk Drive:	Black 15.4 inch Wide Screen WXGA LCD for Latitude E6500 (320-6729)		
Floppy Disk Drive:	No web cam w/ microphone for WXGA LCD for Latitude E6500 (313-6479)		
Operating System:	Windows XP PRO SP3 with Windows Vista Business LicenseEnglish,Dell Latitude (420-9610)		
TBU:	90W 3-Pin, AC Adapter for Latitude E-Family (330-0876)		
TBU:	US - 3-FT, 3-Pin Flat E-FamilyPower Cord for Latitude E-Family (330-0879)		
CD-ROM or DVD-ROM Drive:	8X DVD+/-RW for Latitude E-Family (313-6513)		
CD-ROM or DVD-ROM Drive:	Cyberlink Power DVD 8.0 Playback Software WITH Media Dell Latitude/Mobile Precision (420-8667)		
CD-ROM or DVD-ROM Drive:	Roxio Creator Dell Edition,9.0Dell Latitude/Mobile Precision (420-8010)		
Sound Card:	No web cam w/ microphone for Latitude E6500 (320-7004)		
Processor Cable:	Dell WLAN 1397 (802.11b/g) 1/2MiniCard for Latitude E/MobilePrecision (430-3085)		
Documentation Diskette:	No Intel vPro Technologys advanced management features for Latitude, Mobile Precision (330-0884)		
Bundled Software:	Intel Core 2 Duo Processor (310-8319)		
Factory Installed Software:	Resource DVD with Diagnostics and Drivers for Latitude E6500Notebook (330-0863)		
Feature	6-Cell/54-WHr Battery for Latitude E/Mobile Precision (312-0729)		
Feature	Nylon Deluxe Top Load CarryingCase 15.4 inch for Latitude E/Mobile Precision (330-0858)		
Service:	ProSupport for IT: 7x24 Technical Support for certified IT Staff, Initial (984-3990)		
Service:	Dell Hardware Limited Warranty Plus Onsite Service Initial Year (991-3367)		
Service:	ProSupport for IT: Next Business Day Parts and Labor Onsite Response Initial Year (989-5590)		
Service:	Info, Complete Care (988-7689)		
Service:	Dell Hardware Limited Warranty Plus Onsite Service Extended Year(s) (991-3368)		

Service:	ProSupport for IT: Next Business Day Parts and Labor Onsite Response 2 Year Extended (989-2882)
Service:	ProSupport for IT: 7x24 Technical Support for certified IT Staff, 2 Year Extended (983-7582)
Service:	Thank you choosing Dell ProSupport. For tech support, visit <a href="http://support.dell.com/ProSupport">http://support.dell.com/ProSupport</a> or call 1-866-516-31 (989-3449)
Service:	CompleteCare Accidental Damage Protection, 3 Year (989-3252)
Installation:	Standard On-Site Installation Declined (900-9987)
Misc:	Vista Premium Downgrade Relationship Notebook (310-9160)

SALES REP:	Tiffany Washington	PHONE:	1-800-576-6038
Email Address:	tiffany_washington@dell.com	Phone Ext:	7241768

For your convenience, your sales representative, quote number and customer number have been included to provide you with faster service when you are ready to place your order. Orders may be faxed to the attention of your sales representative to 1-866-607-6914. You may also place your order online at [www.dell.com/qto](http://www.dell.com/qto)

This quote is subject to the terms of the agreement signed by you and Dell, or absent such agreement, to Dell's Terms of Sale.

Prices and tax rates are valid in the U.S. only and are subject to change.

**\*\*Sales/use tax is a destination charge, i.e. based on the "ship to" address on your purchase order. Please indicate your taxability status on your PO. If exempt, please fax exemption certificate to Dell Tax Department at 888-863-8778, referencing your customer number. If you have any questions regarding tax please call 800-433-9019 or email Tax\_Department@dell.com. \*\***

All product and pricing information is based on latest information available. Subject to change without notice or obligation.

LCD panels in Dell products contain mercury, please dispose properly. Please contact Dell Financial Services' Asset Recovery Services group for EPA compliant disposal options at [US\\_Dell\\_ARS\\_Requests@dell.com](mailto:US_Dell_ARS_Requests@dell.com). Minimum quantities may apply.

Shipments to California: For certain products, a State Environmental Fee Of Up to \$10 per item may be applied to your invoice as early as Jan 1, 2005. Prices in your cart do not reflect this fee. More Info: or refer to URL [www.dell.com/environmentalfee](http://www.dell.com/environmentalfee)



# Requisition

Req # 00141884

PO #

Date: 10/17/08

Amount  
#  
10/28/08

Bill To: x  
x

**Vendor:** 178136  
DELL MARKETING L.P.  
ONE DELL WAY  
**RR1 MAILSTOP 8035**  
ROUND ROCK TX 78682  
FAX (800)433-9527

**Ship To:** TAX ASSESSOR-COLLECTOR  
2804 S. BUS. HWY 281  
EDINBURG TX 78539-6243

**Contact:** AUTO-EDBG  
956-289-7472

**Contract No:**

**Special Instructions:**  
M-246

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DIR-SDD-192 DO NOT DUPLICATE ORDER		
4	EACH	BASE UNIT OPTI 360, DESKTOP BSE (224-0473)	790.04	3,160.16
4	EACH	PROCESSOR DUAL CORE E2220/2.40GHZ 1M800FSB (311-9074)	.00	.00
4	EACH	MEMORY 1.0GB, NON-ECC 800MHZ DDR2 1X1GB OPTIPLEX 360 (311-9081)	.00	.00
4	EACH	KEYBOARD PALMREST FOR ENTRY KEYBOARD BLACK DELL OPTIPLEX 33	.00	.00
4	EACH	KEYBOARD DELL USB KEYBOARD NO HOT KEYS ENGLISH BLACK OPTIPLEX (330-1987)	.00	.00
4	EACH	MONITOR DELL ULTRASHARP 1708FP FLAT PANEL WITH HEIGHT ADJUSTABLE STAND 17.0 INCH VBIS, OPTIPLEX PRECISION AND LATITUDE (320-5291)	.00	.00
4	EACH	VIDEO CARD INTREGRATED VIDEO GMA3100 DELL OPTIPLEX 330 (320-5766)	.00	.00
4	EACH	HARD DRIVE 80GB SATA, 7200 RPM HARD DRIVE WITH DATA BURST CASHE DELL OPTIPLEX 745 AND 330 (341-2961)	.00	.00
4	EACH	FLOPPY DISK DRIVE NO FLOPPY DRIVE WITH OPTICAL FILLER PANEL DELL OPTIPLEX 320 AND 330 DESKTOP (341-3838)	.00	.00
4	EACH	OPERATING SYSTEM WINDOWS XP PRO SP3 WITH WINDOWS VISTA BUSINESS LICENSE ENGLISH DELL OPTIPLEX (420-9570)	.00	.00
4	EACH	OPERATING SYSTEM VISTA BASIC DOWNGRADE RELATIONSHIP DESKTOP (310-9162)	.00	.00
4	EACH	MOUSE DELL USB 2 BUTTON OPTICAL MOUSE WITH SCROLL, BLACK OPTIPLEX (330-2733)	.00	.00
4	EACH	CD-ROM OR DVD-ROM DR 48X32 CDRW/DVD COMBO, DELL OPTIPLEX 330 DESKTOP OR MINITOWER (313-5550)	.00	.00
4	EACH	CD-ROM OR DVD-ROM DR CYBERLINK POWER DVD 8.0,NO, MEDIA, DELL OPTIPLEX (420-8847)	.00	.00
4	EACH	CD ROM OR DVE-ROM DR COMPACT DISKETTE FOR CYBERLINK POWER DVD 8.0 DELL OPTIPLEX (420-8830)	.00	.00
4	EACH	CD-ROM OR DVE-ROM DR ROXIO CREATOR DELL EDIDION 9.0 DELL OPTIPLEX (420-7963)	.00	.00
4	EACH	SOUND CARD OPTI 360 HEAT SINK DESKTOP (330-2080)	.00	.00
4	EACH	SPEAKERS NO SPEAKER OPTIPLEX (313-4825)	.00	.00
4	EACH	CABLE OPTIPLEX 360 DESKTOP CHASSIS WITH STANDARD POWER SUPPLY (330-2078)	.00	.00
4	EACH	DOCUMENTATION DISKET DOCUMENTATION ENGLISH DELL OPTIPLEX (330-1710)	.00	.00
4	EACH	DOCUMENTATION DISKET POWER CORD 125V 2M C13 DELL OPTIPLEX (330-1711)	.00	.00

DIR

**Authorized By:** \_\_\_\_\_

# Requisition

Req # 00141884

PO #

Date: 10/17/08

*Amount # 10/28/08*

Bill To:   x  
              x

Vendor : 178136  
DELL MARKETING L.P.  
ONE DELL WAY  
**RR1 MAILSTOP 8035**  
ROUND ROCK TX 78682  
FAX (800)433-9527

Ship To: TAX ASSESSOR-COLLECTOR  
2804 S. BUS. HWY 281  
EDINBURG TX 78539-6243

Contact:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
4	EACH	FACTORY INSTALLED SO ENERGY SMART SETTINGS DELL OPTIPLEX (310-8344)	.00	.00
4	EACH	FEATURE RESOURCE DVD CONTAINS DIAGNOSTICS AND DRIVERS FOR DELL OPTIPLEX 360 VISTA (330-1189)	.00	.00
4	EACH	SERVICE BASIC SUPPORT: NEXT BUS DAY PARTS AND LABOR ONSITE RESPONSE 2 YR EXT (990-7672)	.00	.00
4	EACH	SERVICE BASIC SERVICE: NEXT BUS DAY PARTS AND LABOR ONSITE RESPONSE INITIAL YTEAR (990-9710)	.00	.00
4	EACH	SERVICE DELL HARDWARE LIMITED WARRANTY PLUS ONSITE SERVICE EXTENDED YEAR(S) (992-1818)	.00	.00
4	EACH	SERVICE DELL HJARDWARE LIMITED WARRRANTY PLUS ONSITE SERVICE INITIAL YEAR (992-1817)	.00	.00
4	EACH	INSTALLATION STANDARD ON SITE INSTALLATION DECLINED (900-9987)	.00	.00
4	EACH	MISC READYWARE INSTALLATION FEE (365-1234)	.00	.00
4	EACH	MISC MOUSE PAD (310-3559)	.00	.00
4	EACH	MISC SHIPPING MATERIAL FOR SYSTEM NEO DESKTOP DELL OPTIPLEX 360 DESKTOP (330-1187)	.00	.00
4	EACH	MISC SHIPPING MATERIAL FOR SYSTEM NEO DESKTOP DELL OPTIPLEX 360 DEKTOP (330-1187) THIS COMPLETES THE COMPUTER EQUIPMENT FOR THE AUTO LICENSE DEPT AT 2804 S BUS HWY 281	.00	.00
4	EACH	PERFORMANCE SURGEARREST 11OUT NEMA 8FT CORD 120 V (A1741023)	35.19	140.76
4	EACH	OFFICE SMALL BUSINESS 2007 ENGL OLP NL LOCL GOV'T (A0767043)	293.03	1,172.12
Account No			<u>Encumbrance</u>	
8-1100-415-15-140-001-0-745			4,473.04	
			Freight	.00
			Total	4,473.04
REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233				

Authorized By: \_\_\_\_\_



ATTN: Tanya Regal 141884  
**QUOTATION**

**QUOTE #: 454856351**

**Customer #: 27957357**

**Contract #: 9913578**

**Customer Agreement #: DIR-SDD-192**

**Quote Date: 10/17/08**

**Date: 10/17/08 1:06:05 PM**

**Customer Name: COUNTY OF HIDALGO TAX OFFICE**

<b>TOTAL QUOTE AMOUNT:</b>	<b>\$4,473.04</b>		
<b>Product Subtotal:</b>	<b>\$4,473.04</b>		
<b>Tax:</b>	<b>\$0.00</b>		
<b>Shipping &amp; Handling:</b>	<b>\$0.00</b>		
<b>Shipping Method:</b>	<b>Ground</b>	<b>Total Number of System Groups:</b>	<b>1</b>

<b>GROUP: 1</b>	<b>QUANTITY: 4</b>	<b>SYSTEM PRICE: \$790.04</b>	<b>GROUP TOTAL: \$3,160.16</b>
<b>Base Unit:</b>	Opti 360, Desktop Base (224-0473)		
<b>Processor:</b>	Dual Core E2220/ 2.40GHz, 1M 800FSB (311-9074)		
<b>Memory:</b>	1.0GB,Non-ECC,800MHz DDR2 1x1GB,OptiPlex 360 (311-9081)		
<b>Keyboard:</b>	Palmrest for Entry Keyboard Black,Dell OptiPlex (310-7993)		
<b>Keyboard:</b>	Dell USB Keyboard,No Hot Keys English,Black,Optiplex (330-1987)		
<b>Monitor:</b>	Dell UltraSharp 1708FP Flat Panel with Height Adjustable Stand,17.0 Inch VIS,OptiPlex Precision and Latitude (320-5291)		
<b>Video Card:</b>	Integrated Video,GMA3100,Dell OptiPlex 330 (320-5766)		
<b>Hard Drive:</b>	80GB SATA, 7200 RPM Hard Drivewith Data Burst Cache,Dell OptiPlex 745 and 330 (341-2961)		
<b>Floppy Disk Drive:</b>	No Floppy Drive with Optical Filler Panel,Dell OptiPlex 320and 330 Desktop (341-3838)		
<b>Operating System:</b>	Windows XP PRO SP3 with Windows Vista Business LicenseEnglish,Dell Optiplex (420-9570)		
<b>Operating System:</b>	Vista Basic Downgrade Relationship Desktop (310-9162)		
<b>Mouse:</b>	Dell USB 2 Button Optical Mouse with Scroll,Black OptiPlex (330-2733)		
<b>CD-ROM or DVD-ROM Drive:</b>	48X32 CDRW/DVD Combo,Dell OptiPlex 330 Desktop or Minitower (313-5550)		
<b>CD-ROM or DVD-ROM Drive:</b>	Cyberlink Power DVD 8.0,No Media,Dell OptiPlex (420-8847)		
<b>CD-ROM or DVD-ROM Drive:</b>	Compact Diskette for CyberlinkPower DVD 8.0,Dell OptiPlex (420-8830)		
<b>CD-ROM or DVD-ROM Drive:</b>	Roxio Creator Dell Edidion,9.0Dell OptiPlex (420-7963)		
<b>Sound Card:</b>	Opti 360 Heat Sink, Desktop (330-2080)		
<b>Speakers:</b>	No Speaker, OptiPlex (313-4825)		
<b>Cable:</b>	OptiPlex 360 Desktop Chassis with Standard Power Supply (330-2078)		
<b>Documentation Diskette:</b>	Documentation,English,Dell OptiPlex (330-1710)		
<b>Documentation Diskette:</b>	Power Cord,125V,2M,C13,Dell OptiPlex (330-1711)		
<b>Factory Installed Software:</b>	Energy Smart Settings,Dell OptiPlex (310-8344) ✓		
<b>Feature</b>	Resource DVD contains Diagnostics and Drivers for Dell OptiPlex 360 Vista (330-1189)		
<b>Service:</b>	Basic Support: Next Business Day Parts and Labor Onsite Response 2 Year Extended (990-7672)		
<b>Service:</b>	Basic Support: Next Business Day Parts and Labor Onsite Response Initial Year (990-9710)		
<b>Service:</b>	Dell Hardware Limited Warranty Plus Onsite Service Extended Year(s) (992-1818)		
<b>Service:</b>	Dell Hardware Limited Warranty Plus Onsite Service Initial Year (992-1817)		
<b>Installation:</b>	Standard On-Site Installation Declined (900-9987)		
<b>Misc:</b>	Readyware Installation Fee (365-1234)		
<b>Misc:</b>	Mouse Pad (310-3559)		
<b>Misc:</b>	Shipping Material for System Neo Desktop,Dell OptiPlex 360 Desktop (330-1187)		
<b>Misc:</b>	Shipping Material for System Neo Desktop,Dell OptiPlex 360 Desktop (330-1187)		

141884

SOFTWARE & ACCESSORIES			
Product	Quantity	Unit Price	Total
PERFORMANCE SURGEARREST 110OUT NEMA 8FT CORD 120V (A1741023)	4	\$35.19	\$140.76
OFFICE SMALL BUSINESS 2007 ENG OLP NL LOCL GOVT (A0767043)	4	\$293.03	\$1,172.12
Number of S & A Items: 2		S&A Total Amount: \$1,312.88	

COMMENTS
RUDY.FLORES@TAXOF
FICE.CO.HIDALGO.T
TX.US
RUDY FLORES

<b>SALES REP:</b> Tiffany Washington	<b>PHONE:</b> 1-800-576-6038
<b>Email Address:</b> tiffany_washington@dell.com	<b>Phone Ext:</b> 7241768

For your convenience, your sales representative, quote number and customer number have been included to provide you with faster service when you are ready to place your order. Orders may be faxed to the attention of your sales representative to 1-866-607-6914. You may also place your order online at [www.dell.com/qto](http://www.dell.com/qto)

This quote is subject to the terms of the agreement signed by you and Dell, or absent such agreement, to Dell's Terms of Sale.

Prices and tax rates are valid in the U.S. only and are subject to change.

*\*Sales/use tax is a destination charge, i.e. based on the "ship to" address on your purchase order. Please indicate your taxability status on your PO. If exempt, please fax exemption certificate to Dell Tax Department at 888-863-8778, referencing your customer number. If you have any questions regarding tax please call 800-433-9019 or email Tax\_Department@dell.com. \*\**

All product and pricing information is based on latest information available. Subject to change without notice or obligation.

CD panels in Dell products contain mercury, please dispose properly. Please contact Dell Financial Services' Asset Recovery Services group for EPA compliant disposal options at [US\\_Dell\\_ARS\\_Requests@dell.com](mailto:US_Dell_ARS_Requests@dell.com). Minimum quantities may apply.

Shipments to California: For certain products, a State Environmental Fee Of Up to \$10 per item may be applied to your invoice as early as Jan 1, 2005. Prices in your cart do not reflect this fee. More Info: or refer to URL [www.dell.com/environmentalfee](http://www.dell.com/environmentalfee)

# Requisition

Req # 00142081

PO #

Date: 10/21/08

*Comment  
# 11858  
10/28/08*

Bill To: x  
x

Vendor: 153915  
CDW GOVERNMENT INC.  
75 REMITTANCE DRIVE  
**SUITE 1515**  
CHICAGO IL 60675-1515

Ship To: INFORMATION TECHNOLOGY DEPARTMENT  
100 E. CANO, 4TH FLOOR  
EDINBURG TX 78540

Contact: RUBEN  
956-292-7010

Contract No: DIR SDD-223

Special Instructions:  
211008-01

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		IT DEPT, QUOTE# MCW6227 DO NOT DUPLICATE ORDER		
3	EACH	HP LJ 1000 BLK TONER (533900)	63.00	189.00
1	EACH	HP JETDIRECT 175X ETHERNET PRINT (760048)	102.00	102.00
		<u>Account No</u>	<u>Encumbrance</u>	
		8-1100-415-00-200-001-0-601	291.00	
			Freight	.00
			Total	291.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

*DIR*

Authorized By: \_\_\_\_\_

RED BOOK



The Right Technology.  
Right Away.™

www.CDWG.com  
800-808-4239

# SALES QUOTATION

QUOTE NO	ACCOUNT NO.	DATE
MCW6227	4180795	10/13/2008

RENAN RAMIREZ  
 B 100 E CANO  
 I 4TH FL  
 L HIDALGO COUNTY  
 EDINBURG, TX 78539  
 T  
 O

HIDALGO COUNTY  
 S 100 E CANO ST  
 H 4TH FL  
 I  
 P RENAN RAMIREZ  
 EDINBURG, TX 78539-4582  
 T  
 O Contact: RENAN RAMIREZ 956-318-2151

Customer Phone # 9563182151

Customer P.O. # JETDIRECT QUOTE

ACCOUNT MANAGER	SHIPPING METHOD	TERMS	EXEMPTION CERTIFICATE
JAY CARLILE 866-224-6448	UPS Ground	Request Terms	GOVT-EXEMPT

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
3	533900	HP LJ 1000 3000 TONER BLK Mfg#: HPS-Q2612A Contract: STATE OF TX DIR/ HP CONTRACT DIR SDD-223	63.00	189.00
1	760048	HP JETDIRECT 175X ETHERNET PRINT Mfg#: H-P-J6035G#ABA Contract: STATE OF TX DIR/ HP CONTRACT DIR SDD-223	102.00	102.00
			SUBTOTAL	291.00
			FREIGHT	.00
			SALES TAX	.00

TOTAL	US Currency 291.00
-------	-----------------------

CDW Government, Inc.  
 230 North Milwaukee Ave.  
 Vernon Hills, IL 60061  
 General Phone: 847-371-5000 Fax: 847-419-6200  
 Account Manager's Direct Fax: 312-705-9492

Please remit payment to:  
 CDW Government, Inc.  
 75 Remittance Drive  
 Suite 1515  
 Chicago, IL 60675-1515



*Attn: Mati Reg# 142120*



**The Right Technology.  
Right Away.™**

www.CDWG.com  
800-808-4239

# SALES QUOTATION

QUOTE NO.	ACCOUNT NO.	DATE
MCH2627	6324564	10/09/2008

MARY GARCIA  
B 2804 S BUSINESS HWY 281  
L HIDALGO COUNTY TAX OFFICE  
T EDINBURG, TX 78539  
O

*Attn: Jay*

S HIDALGO COUNTY TAX OFFICE  
H 2804 S BUSINESS HWY 281  
I  
P MARY GARCIA  
T EDINBURG, TX 78539  
O Contact: MARY GARCIA 956-289-7472

Customer Phone # 9562897472

Customer P.O. # HP3600N QUOTE

ACCOUNT MANAGER	SHIPPING METHOD	TERMS	EXEMPTION CERTIFICATE
JAY CARLILE 866-224-6448	FEDEX Ground	Request Terms	GOVT-EXEMPT

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1	844592	HP LJ 3600N 17/17PPM 8.5X14 Mfg#: H-P- Q5987A#ABA Contract: STATE OF TX DIR/ HP CONTRACT DIR SDD-223	452.00	452.00
			SUBTOTAL	452.00
			FREIGHT	.00
			SALES TAX	.00

OCT 22 2008  
*E. J. 20*

*2 of these  
TAKS -*

**BUY WITH CONFIDENCE. CDW IS A FORTUNE 500 COMPANY.**

<b>TOTAL</b> ▶	US Currency 452.00
----------------	-----------------------

CDW Government, Inc.  
230 North Milwaukee Ave.  
Vernon Hills, IL 60061  
General Phone: 847-371-5000 Fax: 847-419-6200  
Account Manager's Direct Fax: 312-705-9492

Please remit payment to:  
CDW Government, Inc.  
75 Remittance Drive  
Suite 1515  
Chicago, IL 60675-1515



# Requisition

Req # 00142121

PO #

Date: 10/22/08

*Consent*  
*10/22/08*  
*# 11858*

Bill To: x  
 x

Vendor: 153915  
 CDW GOVERNMENT, INC.  
 230 N. MILWAUKEE AVENUE  
 VERNON HILLS IL 60061

Ship To: TAX ASSESSOR-COLLECTOR  
 2804 S. BUS. HWY 281  
 EDINBURG TX 78539-6243

Contact: MCALLEN AUTO  
 956-289-7472

Contract No:

Special Instructions:  
 M-87

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1	EACH	DIR SDD-223 DO NOT DUPLICATE ORDER 844592 HP LJ 3600N 17/17PPM 8.5 X14 MFG: H-P- Q5987A#ABA COLOR PRINTER FOR THE MCALLEN AUTO LICENSE DEPT AT 300 E HACKBERRY Account No _____  REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	452.00   Encumbrance  Freight .00 Total 452.00	452.00          DIR

Authorized By: \_\_\_\_\_

Attn: Tanya Reg# 142121



The Right Technology. Right Away.™

www.CDWG.com  
800-808-4239

# SALES QUOTATION

QUOTE NO.	ACCOUNT NO.	DATE
MCH2627	6324564	10/09/2008

BILLO  
 MARY GARCIA  
 2804 S BUSINESS HWY 281  
 HIDALGO COUNTY TAX OFFICE  
 EDINBURG, TX 78539

Attn: Jay

SHIP  
 HIDALGO COUNTY TAX OFFICE  
 2804 S BUSINESS HWY 281  
 MARY GARCIA  
 EDINBURG, TX 78539  
 Contact: MARY GARCIA 956-289-7472

Customer Phone # 9562897472

Customer P.O. # HP3600N

QUOTE

ACCOUNT MANAGER	SHIPPING METHOD	TERMS	EXEMPTION CERTIFICATE
JAY CARLILE 866-224-6448	FEDEX Ground	Request Terms	GOVT-EXEMPT

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1	844592	HP LJ 3600N 17/17PPM 8.5X14 Mfg#: H-P- Q5987A#ABA Contract: STATE OF TX DIR/ HP CONTRACT DIR SDD-223	452.00	452.00
			SUBTOTAL	452.00
			FREIGHT	.00
			SALES TAX	.00

OCT 22 2008  
 C. J. VO

2 of these  
 TAKS -

BUY WITH CONFIDENCE. CDW IS A FORTUNE 500 COMPANY.

TOTAL US Currency 452.00

CDW Government, Inc.  
 230 North Milwaukee Ave.  
 Vernon Hills, IL 60061  
 General Phone: 847-371-5000 Fax: 847-419-6200  
 Account Manager's Direct Fax: 312-705-9492

Please remit payment to:  
 CDW Government, Inc.  
 75 Remittance Drive  
 Suite 1515  
 Chicago, IL 60675-1515

*Armando  
Nobuy*

**AI-11819**  
**11819 10-20-08**  
**CC CONSENT**

**2.0.0.**

Date: 10/28/2008  
Submitted By: Mary Garcia, TAX OFFICE  
Submitted For: Armando Barrera Jr., Rta  
Department: TAX OFFICE  
Agenda Area: Intradepartmental Transfers:

OCT 22 2008  
*Call 2:20pm*

---

Information

CAPTION  
2008 Tax - Office (1100)  
BACKGROUND

---

Fiscal Impact

---

Attachments

Link: [11819 10-21-08](#)

---

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
	(Originator)	Mary Garcia	10/20/2008 04:55 PM	CREATED
1	Budget & Management			NEW
2	Auditor's Office			
3	Court Administrator			
Form Started By: Mary Garcia		Started On: 10/20/2008 04:55 PM		

*Armando*  
*These are the Reg #'s*

- 1) 141990 - Obj- 745 (Dedo)
- 2) 142014 Obj- 665 (CDW)
- 3) 142018 Obj- 665 (CPW)
- 4) 142010 Obj- 743 (CPW)
- 5) 141613 Obj- 666 (CDW)
- 6) 142120 Obj- 665 (CPW)
- 7) 142121 Obj- 665 (CPW)

*Reg# 142126*  
*Reg# 142128*

OCT 22 2008

*Cal Johnson*

DATE: October 22, 2008

DEPARTMENT HEAD: Armando Barrera Jr.

DEPARTMENT NAME: Hidalgo County Tax Office

ACCOUNT NUMBER: 8-1100-415-15-140-001-0xxx

SUBJECT: **Intra-departmental Transfer/s (increase/decrease) in Accordance with Local Government Code, Chapter 111, Subchapter C, Section 111.070, Subsection C.**

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Intra-departmental transfer/s (increase/decrease) in accordance with Local Government Code, Chapter 111, Subchapter C Section 111.070, Subsection C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
432	Equip R&M Supplies	745	Computer Equipment	\$8,000.00
432	Equip R&M Supplies	665	Minor Computer Equipment	\$8,000.00
432	Equip R&M Supplies	743	Office Equipment	\$8,500.00
432	Equip R&M Supplies	550	Printing and Binding	\$500.00
432	Equip R&M Supplies	747	Software	\$2,000.00
432	Equip R&M Supplies	664	Other Minor Equipment	\$500.00
442	Equip & Vehicle Rental	747	Software	\$3,000.00
602	Paper Supplies	550	Printing and Binding	\$2,000.00
602	Paper Supplies	747	Software	\$3,000.00
671	Bldg R&M Supplies	747	Software	\$1,046.65
640	Reference Material	747	Software	\$1,168.09
746	Office Furniture	666	Minor Office Equipment	\$4,000.00
746	Office Furniture	550	Printing and Binding	\$600.00
746	Office Furniture	665	Minor Computer Equipment	\$1,000.00
TOTAL				\$43,314.74

REASON: **To purchase necessary items to operate County office.**



DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK



FAXED OCT 22 2008



*Reg 1/4/17/18*

**QUOTATION**

QUOTE #: 453870593  
 Customer #: 17927132  
 Contract #: 9913578

Customer Agreement #: DIR-SDD-192

Quote Date: 10/10/08

Date: 10/10/08 4:59:20 PM

Customer Name: HIDALGO COUNTY

TOTAL QUOTE AMOUNT:	\$4,592.00		
Product Subtotal:	\$4,592.00		
Tax:	\$0.00		
Shipping & Handling:	\$0.00		
Shipping Method:	Ground	Total Number of System Groups:	1

GROUP: 1	QUANTITY: 4	SYSTEM PRICE: \$1,148.00	GROUP TOTAL: \$4,592.00
Base Unit:	OptiPlex 755 Ultra Small Form Factor,Core 2 Duo E6550/2.33GHz,4M,VT,1333FSB (223-0637)		
Processor:	NTFS File System,Factory Install (420-3699)		
Memory:	2GB,Non-ECC,667MHz DDR2,2X1GB OptiPlex 740 (311-7440)		
Keyboard:	Bluetooth Keyboard and Mouse Black,English,Dell OptiPlex (310-7987)		
Monitor:	Dell 17 Inch UltraSharp 1708FPFlat Panel and All in One Stand,OptiPlex 755 Ultra SmallForm Factor (320-5745)		
Video Card:	Integrated Video,GMA3100,Dell OptiPlex 755 (320-5642)		
Hard Drive:	80GB SATA 3.0Gb/s and 8MB DataBurst Cache,Dell OptiPlex 755 (341-5472)		
Floppy Disk Drive:	No Floppy Drive, Dell OptiPlex745 and 755 Ultra Small Form Factor (341-3912)		
Operating System:	Windows XP PRO SP2 with Windows Vista Business LicenseDell OptiPlex,English,Factory Install (420-6972)		
Mouse:	Mouse included with Keyboard purchase (310-1966)		
TBU:	vPro Secure Advanced Hardware Enabled Systems Management Dell OptiPlex (310-9491)		
CD-ROM or DVD-ROM Drive:	24X CD-ROM,EIDE,D-Module,Dell OptiPlex 755 Ultra Small Form Factor (313-5403)		
Speakers:	No Speaker, OptiPlex (313-4825)		
Documentation Diskette:	Resource DVD contains Diagnostics and Drivers for Vista Dell OptiPlex (310-8762)		
Bundled Software:	You have chosen a vPro System (310-9490)		
Factory Installed Software:	Energy Smart,Energy Star,EIST for OptiPlex (if applicable) (310-9504)		
Service:	ProSupport for End Users: 7x24 Technical Support and assistance for end-users, 2 Year Extended (983-9982)		
Service:	ProSupport for End Users: Next Business Day Parts and Labor Onsite Response Initial Year (985-5920)		
Service:	Dell Hardware Limited Warranty Plus Onsite Service Initial Year (989-1567)		
Service:	Dell Hardware Limited Warranty Plus Onsite Service Extended Year(s) (989-1568)		
Service:	ProSupport for End Users: Next Business Day Parts and Labor Onsite Response 2 Year Extended (985-0472)		
Service:	ProSupport for End Users: 7x24 Technical Support and assistance for end-users, Initial (984-6620)		
Service:	Thank you choosing Dell ProSupport. For tech support, visit <a href="http://support.dell.com/ProSupport">http://support.dell.com/ProSupport</a> or call 1-866-516-31 (989-3449)		
Installation:	Standard On-Site Installation Declined (900-9987)		

Misc:	Shipping Material for System Trinity Ultra Small Form Factor, Dell OptiPlex (310-9333)
Misc:	WINDOWS XP STICKER, OPTI/PWS/LAT/INSP/DIM (466-2909)
	Vista Premium Downgrade Relationship Desktop (310-9161)
	Keep Your Hard Drive, 3 Year (984-0092)

SALES REP:	MARK CRIPPEN	PHONE:	1888-977-3355
Email Address:	Mark_Crippen@Dell.com	Phone Ext:	726-4957

For your convenience, your sales representative, quote number and customer number have been included to provide you with faster service when you are ready to place your order. Orders may be faxed to the attention of your sales representative to 1-866-607-6914. You may also place your order online at [www.dell.com/qto](http://www.dell.com/qto)

This quote is subject to the terms of the agreement signed by you and Dell, or absent such agreement, to Dell's Terms of Sale.

Prices and tax rates are valid in the U.S. only and are subject to change.

*\*\*Sales/use tax is a destination charge, i.e. based on the "ship to" address on your purchase order. Please indicate your taxability status on your PO. If exempt, please fax exemption certificate to Dell Tax Department at 888-863-8778, referencing your customer number. If you have any questions regarding tax please call 800-433-9019 or email [Tax\\_Department@dell.com](mailto:Tax_Department@dell.com). \*\**

All product and pricing information is based on latest information available. Subject to change without notice or obligation.

LCD panels in Dell products contain mercury, please dispose properly. Please contact Dell Financial Services' Asset Recovery Services group for EPA compliant disposal options at [US\\_Dell\\_ARS\\_Requests@dell.com](mailto:US_Dell_ARS_Requests@dell.com). Minimum quantities may apply.

Shipments to California: For certain products, a State Environmental Fee Of Up to \$10 per item may be applied to your invoice as early as Jan 1, 2005. Prices in your cart do not reflect this fee. More Info: or refer to URL [www.dell.com/environmentalfee](http://www.dell.com/environmentalfee)





**DELL****QUOTATION**

QUOTE #: 455516580

Customer #: 94455874

Contract #: 9913578

Customer Agreement #: DIR-SDD-192

Quote Date: 10/22/08

Date: 10/22/08 9:49:01 AM

Customer Name: HIDALGO COUNTY HIDTA TASK FRC

TOTAL QUOTE AMOUNT:	\$1,393.00		
Product Subtotal:	\$1,393.00		
Tax:	\$0.00		
Shipping & Handling:	\$0.00		
Shipping Method:	Ground	Total Number of System Groups:	1

GROUP: 1	QUANTITY: 1	SYSTEM PRICE: \$1,393.00	GROUP TOTAL: \$1,393.00
Base Unit:	✓	Dell Precision T3400 Convertible MiniTower Processor Q6600, 2.40GHz, 10662X4MB L2, 375W (223-1743)	
Processor:	✓	Mini-Tower Chassis Configuration, Dell Precision T3400 (311-7463)	
Memory:		2GB, 667MHz, DDR2 ECC SDRAM Memory, 2X1GB, Dell Precision T3400 (311-7475)	
Keyboard:		Entry Level, USB, No Hot Keys keyboards, Dell Precision Workstations (310-7949)	
Monitor:		Dell E198FP, Wide, 19 Inch Flat Panel 19.0 Inch Viewable ImageSize, OptiPlex, Precision and Latitude (320-5580)	
Video Card:		nVidia, Quadro FX 570, 256MB dual DVI, Graphics Card, Dell Precision T3400 (320-5865)	
Hard Drive:		80GB SATA 3.0Gb/s with NCQ and 8MB DataBurst Cache Dell Precision T3400 (341-5235)	
Hard Drive Controller:		C1, All SATA, NO RAID for 1 Hard Drive (341-5209)	
Floppy Disk Drive:		No Floppy Drive, Dell Precision (341-5255)	
Operating System:		WINDOWS XP PRO SP2 with Windows Vista Business License Dell Precision, English, Factory Install (420-6978)	
Mouse:		Dell USB 2-Button Entry Mouse with Scroll for Dell Precision (310-7959)	
CD-ROM or DVD-ROM Drive:		16X DVD+/-RW, Data Only, Dell Precision T3400 (313-5709)	
CD-ROM or DVD-ROM Drive:		Roxio Creator Dell Edition, 9.0 Dell Precision (420-7980)	
CD-ROM or DVD-ROM Drive:		Cyberlink Power DVD 8.0, with Media, Dell Precision (420-8857)	
Sound Card:		Sound Blaster X-Fi XtremeMusic(D), w/Dolby Digital 5.1 for Vista, Dell Precision 390 (313-5284)	
Speakers:		Dell AX210 two piece stereo Speakers (Black) for Latitude OptiPlex, Precision (313-6515)	
Documentation Diskette:		Resource DVD contains Diagnostics and Drivers Dell Precision T3400 (310-9544)	
Factory Installed Software:		McAfee Security 9, English, 15 Month, Dell OptiPlex, Precision and Latitude (410-1154)	
Service:		Basic Support: Next Business Day Parts and Labor Onsite Response 2 Year Extended (986-6092)	
Service:		Dell Hardware Limited Warranty Plus Onsite Service Initial Year (989-3727)	
Service:		Dell Hardware Limited Warranty Plus Onsite Service Extended Year(s) (989-3728)	
Service:		Basic Support: Next Business Day Parts and Labor Onsite Response Initial Year (986-1460)	
Installation:		Standard On-Site Installation Declined (900-9987)	
Misc:	✓	Dell E198FP, Wide, 19 Inch Flat Panel 19.0 Inch Viewable ImageSize, OptiPlex, Precision and Latitude (320-5580)	
		Vista Premium Downgrade Relationship Desktop (310-9161)	

SALES REP:	Scott Chan **FAX PO 512-283-3274**	PHONE:	1-800-981-3355
Email Address:	Scott_Chanthavong@dell.com	Phone Ext:	72-87169

For your convenience, your sales representative, quote number and customer number have been included to provide you with faster service when you are ready to place your order. Orders may be faxed to the attention of your sales representative to 1-866-607-6914. You may also place your order online at [www.dell.com/qto](http://www.dell.com/qto)

This quote is subject to the terms of the agreement signed by you and Dell, or absent such agreement, to Dell's Terms of Sale.

Prices and tax rates are valid in the U.S. only and are subject to change.

*\*\*Sales/use tax is a destination charge, i.e. based on the "ship to" address on your purchase order. Please indicate your taxability status on your PO. If exempt, please fax exemption certificate to Dell Tax Department at 888-863-8778, referencing your customer number. If you have any questions regarding tax please call 800-433-9019 or email [Tax\\_Department@dell.com](mailto:Tax_Department@dell.com). \*\**

All product and pricing information is based on latest information available. Subject to change without notice or obligation.

LCD panels in Dell products contain mercury, please dispose properly. Please contact Dell Financial Services' Asset Recovery Services group for EPA compliant disposal options at [US\\_Dell\\_ARS\\_Requests@dell.com](mailto:US_Dell_ARS_Requests@dell.com). Minimum quantities may apply.

Shipments to California: For certain products, a State Environmental Fee Of Up to \$10 per Item may be applied to your invoice as early as Jan 1, 2005. Prices in your cart do not reflect this fee. More Info: or refer to URL [www.dell.com/environmentalfee](http://www.dell.com/environmentalfee)

**Requisition**

Req # 00141763

PO #

Date: 10/16/08

*Amount  
# 11858  
10/28/08*

Bill To: x  
x

**Vendor :** 153915  
CDW GOVERNMENT, INC.  
230 N. MILWAUKEE AVENUE  
VERNON HILLS IL 60061

**Ship To:** HUMAN SERVICES  
1304 S. 25TH AVE.  
EDINBURG TX 78539

**Contact:** DAIREN S  
956-318-2011

**Contract No:**

**Special Instructions:**

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1		HP LASERJET P3005 LASER PRINTER TCPN CONTRACT R4713	538.99	538.99
		Account No _____	Encumbrance	
		8-1100-444-00-240-001-0-665	538.99	
			Freight	.00
			Total	538.99

*TCPN*

**Authorized By:** \_\_\_\_\_



800.581.4239

00141763

**Quote Information**

**Quote #:** U176279

**Status:** Open

**Quote Date:** 10/16/2008

**Contact:** RIGO HINOJOSA

**Description:** HUMAN SERVICES PRINT

**Need Help?**



**Contact**  
**Jay Carille**  
Phone: (866) 224-6448  
Fax: (312) 705-9492  
Email: jaycar@cdwg.com

**Billed From Address**

CDW Government Inc.  
230 N. Milwaukee Ave  
Vernon Hills, IL 60061

(800) 594-4239

**Billing Address**

RIGO HINOJOSA  
ATTN: HIDALGO COUNTY  
1304 S. 25TH AVE  
EDINBURG , TX 78542-7205

(956) 383-6221

**Shipping Address**

HIDALGO COUNTY HEALTH DEPT.  
ATTN: RIGO HINOJOSA  
1304 S. 25TH AVE.  
EDINBURG , TX 78539

**Payment Method**

Select payment method during checkout.

**Shipping Method**

FedEx Ground

Product	Contract	CDW	Mfg Part #	Qty	Price	Ext. Price
HP LaserJet P3005 Laser Printer	Tcon Contract # r4713	1062735	Q7812A#201	1	\$538.99	\$538.99
<b>Sub-Total</b>						\$538.99
Shipping:						\$0.00
<b>Grand Total</b>						\$538.99

# Requisition

Req # 00141489

PO #

Date: 10/10/08

*Amount # 10/28/08*

Bill To: x  
x

Vendor : 153915  
CDW GOVERNMENT, INC.  
230 N. MILWAUKEE AVENUE  
VERNON HILLS IL 60061

Ship To: TAX ASSESSOR-COLLECTOR  
2804 S. BUS. HWY 281  
EDINBURG TX 78539-6243

Contact: EDBG-AUTO  
956-289-7472

Contract No:

Special Instructions:  
M-82

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1	EACH	DO NOT DUPLICATE ORDER 1303858 INTUIT QUICKBOOKS PRO 2008 3U MFG# INU-404141 TCPN CONTRACT # R4713`	401.24	401.24
0	EACH	THIS VERSIOIN OF QUICKBOOKS IS FOR SANTO, VERONICA AND JULIE AT THE EDINBURG AUTO DEPT 2804 S BUS HWY 281  Account No _____ 8-1100-415-15-140-001-0-667	.00  Encumbrance 401.24	.00
			Freight	.00
			Total	401.24
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

*TCPN*

Authorized By: \_\_\_\_\_

Reg# 141489



**The Right Technology.  
Right Away.™**

www.CDWG.com  
800-808-4239

# SALES QUOTATION

QUOTE NO.	ACCOUNT NO.	DATE
MCH2669	6324564	10/09/2008

MARY GARCIA  
B 2804 S BUSINESS HWY 281  
L HIDALGO COUNTY TAX OFFICE  
T EDINBURG, TX 78539  
O  
Customer Phone # 9562897472

HIDALGO COUNTY TAX OFFICE  
S 2804 S BUSINESS HWY 281  
L  
P MARY GARCIA  
T EDINBURG, TX 78539  
O Contact: MARY GARCIA 956-289-7472  
Customer P.O. # QUICKBOOKS QUOTE

ACCOUNT MANAGER	SHIPPING METHOD	TERMS	EXEMPTION CERTIFICATE
JAY CARLILE 866-224-6448	DHL Ground	Request Terms	GOVT-EXEMPT

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1	1303858	INTUIT QUICKBOOKS PRO 2008 3U Mfg#: INU-404141 Contract: TCPN CONTRACT #R4713 R4713	401.24	401.24
		SUBTOTAL		401.24
		FREIGHT		.00
		SALES TAX		.00

**BUY WITH CONFIDENCE. CDW IS A FORTUNE 500 COMPANY.**

<b>TOTAL</b> ➔	US Currency 401.24
----------------	-----------------------

CDW Government, Inc.  
230 North Milwaukee Ave.  
Vernon Hills, IL 60061  
General Phone: 847-371-5000 Fax: 847-419-6200  
Account Manager's Direct Fax: 312-705-9492

*Please remit payment to:  
CDW Government, Inc.  
75 Remittance Drive  
Suite 1515  
Chicago, IL 60675-1515*

# Requisition

Req # 00142018

PO #

Date: 10/21/08

*Account # 11858  
10/28/08*

Bill To: x  
x

Ship To: TAX ASSESSOR-COLLECTOR  
2804 S. BUS. HWY 281  
EDINBURG TX 78539-6243

Vendor: 153915  
CDW GOVERNMENT INC.  
75 REMITTANCE DRIVE  
SUITE 1515  
CHICAGO IL 60675-1515

Contact: AUTO EDINBURG  
956-289-7472

Contract No:

Special Instructions:

M-87

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DO NOT DUPLICATE ORDER		
15	EACH	1062813 HP LJ P2015 27PPM 8.5X15 MFG#: H-P CB366A#ABA	248.99	3,734.85
		CONTRACT TCPN # r4713 (COMPUTERS FOR THE AUTO LICENSE)		
15	EACH	246534 APC USB A/B CABLE 10FT CLEAR MFG#: APC-1900CL-10	5.20	78.00
		TCPN CONTRACT # R4713		
		Account No _____	Encumbrance	
		8-1100-415-15-140-001-0-665	3,812.85	
			Freight	.00
			Total	3,812.85
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

*TCPN*

Authorized By: \_\_\_\_\_

10/22/08

Att: Tonya Reg # 142018



The Right Technology.  
Right Away.™  
www.CDWG.com  
800-808-4239

# SALES QUOTATION

QUOTE NO.	ACCOUNT NO.	DATE
MFH2908	6324564	10/21/2008

MARY GARCIA  
 B 2804 S BUSINESS HWY 281  
 I  
 L  
 L HIDALGO COUNTY TAX OFFICE  
 T EDINBURG, TX 78539  
 O

HIDALGO COUNTY TAX OFFICE  
 S 2804 S BUSINESS HWY 281  
 H  
 I  
 P MARY GARCIA  
 EDINBURG, TX 78539  
 T Contact: MARY GARCIA 956-289-7472  
 O

Customer Phone # 9562897472 *Computers*

Customer P.O. # HP PRINT QUOTE

ACCOUNT MANAGER	SHIPPING METHOD	TERMS	EXEMPTION CERTIFICATE
JAY CARLILE 866-224-6448	FEDEX Ground	Request Terms	GOVT-EXEMPT

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
15	1062813	HP LJ P2015 27PPM 8.5X14 Mfg#: H-P-CB366A#ABA Contract: TCPN CONTRACT #R4713 R4713 **this pricing expires 10/31	248.99	3734.85
15	246534	APC USB A/B CABLE 10FT CLEAR Mfg#: APC-19000CL-10 Contract: TCPN CONTRACT #R4713 R4713	5.20	78.00
			SUBTOTAL	3812.85
			FREIGHT	.00
			SALES TAX	.00

OCT 22 2008  
*C. J. 20*

TOTAL US Currency  
3,812.85

CDW Government, Inc.  
 230 North Milwaukee Ave.  
 Vernon Hills, IL 60061  
 General Phone: 847-371-5000 Fax: 847-419-6200  
 Account Manager's Direct Fax: 312-705-9492

Please remit payment to:  
 CDW Government, Inc.  
 75 Remittance Drive  
 Suite 1515  
 Chicago, IL 60675-1515



# Requisition

Req # 00142014

PO #

Date: 10/21/08

*Comment # 11858 10/28/08*

Bill To: x  
x

Vendor: 153915  
CDW GOVERNMENT, INC.  
230 N. MILWAUKEE AVENUE  
VERNON HILLS IL 60061

Ship To: TAX ASSESSOR-COLLECTOR  
2804 S. BUS. HWY 281  
EDINBURG TX 78539-6243

Contact: **ASSESSING**  
956-289-7472

Contract No:

Special Instructions:

A-29

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		TCPN CONTRACT # DO NOT DUPLICATE ORDER		
14	EACH	1382353 SAMSUNG 943BX 19" DVI HA MFG#: SAM-943BX TCPN CONTRACT # R4713 (MONITORS)	251.56	3,521.84
14	EACH	849770 LOGITECH WRLS DESKTOP EX110 MFG#: LOG-967561-0403 TCPN CONTRACT # R4713	38.69	541.66
0	EACH	THESE MONITORS ARE FOR THE ASSESSING DEPT AT 2804 S BUS HWY 281	.00	.00
		<u>Account No</u>	<u>Encumbrance</u>	
		8-1100-415-15-140-001-0-665	4,063.50	
			Freight	.00
			Total	4,063.50
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

*TCPN*

Authorized By: \_\_\_\_\_

10/22/08

Attn: Tanya Reg # 142014



The Right Technology. Right Away.™

www.CDWG.com  
800-808-4239

# SALES QUOTATION

QUOTE NO.	ACCOUNT NO.	DATE
MFH3096	6324564	10/21/2008

MARY GARCIA  
 B 2804 S BUSINESS HWY 281  
 L  
 L HIDALGO COUNTY TAX OFFICE  
 T EDINBURG, TX 78539  
 O

S HIDALGO COUNTY TAX OFFICE  
 H 2804 S BUSINESS HWY 281  
 I  
 P MARY GARCIA  
 EDINBURG, TX 78539  
 T Contact: MARY GARCIA 956-289-7472  
 O

Customer Phone # 9562897472 *monitors*

Customer P.O. # SAMSUNG QUOTE

ACCOUNT MANAGER	SHIPPING METHOD	TERMS	EXEMPTION CERTIFICATE
JAY CARLILE 866-224-6448	FEDEX Ground	Request Terms	GOVT-EXEMPT

QTY	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
14	1382353	SAMSUNG 943BX 19" DVI HA Mfg#: SAM-943BX Contract: TCPN CONTRACT #R4713 R4713	251.56	3521.84
14	849770	LOGITECH WRLS DESKTOP EX110 Mfg#: LOG-967561-0403 Contract: TCPN CONTRACT #R4713 R4713	38.69	541.66
			SUBTOTAL	4063.50
			FREIGHT	.00
			SALES TAX	.00

OCT 22 2008  
*[Signature]*

TOTAL US Currency  
4,063.50

CDW Government, Inc.  
 230 North Milwaukee Ave.  
 Vernon Hills, IL 60061  
 General Phone: 847-371-5000 Fax: 847-419-6200  
 Account Manager's Direct Fax: 312-705-9492

Please remit payment to:  
 CDW Government, Inc.  
 75 Remittance Drive  
 Suite 1515  
 Chicago, IL 60675-1515



**Lease Pricing PROPOSAL**

Presented to HIDALGO COUNTY TREASURES

By Damaris Morales

On 10/17/2008

**SSPA**  
**EXCELLENCE**  
IN SERVICE OPERATIONS  
**2008**



Certified Three Consecutive Years!

FIXED PRICE LEASE \$505.89 WITH SUPPLIES

CASH PRICE \$22,8398.40

Negotiated Contract : 072391200

**Solution**

Item	Product Description	Agreement Information		Trade Information	Requested Install Date
<b>1. W5632P (W5632 PRINTER/2T)</b>	<ul style="list-style-type: none"> <li>- Basic Ofc Finisher</li> <li>- S08 C-p-scan Cntrlr</li> <li>- Scan To Pc Dtop Se25</li> <li>- Customer Ed</li> <li>- Analyst Services</li> </ul>	Lease Term:	48 months	- Xerox CC123 S/N TFW079658	11/7/2008
		Purchase Option:	FMV	Trade-In as of Payment 29	
<b>2. WC4150X (WC4150-PRNT/SCAN/FAX)</b>	<ul style="list-style-type: none"> <li>- Net Scan Enable</li> <li>- 4150 Stand</li> <li>- Scan To Pc Dtop Se-5</li> <li>- Customer Ed</li> <li>- Analyst Services</li> </ul>	Lease Term:	48 months	- Xerox CC123 S/N TFW079711	11/7/2008
		Purchase Option:	FMV	Trade-In as of Payment 29	

**Monthly Pricing**

Item	Lease Minimum Payment	Print Charges			Maintenance Plan Features
		Meter	Volume Band	Per Print Rate	
1. W5632P	\$266.60	1: Total	1 - 5,000 5,001+	Included \$0.0090	- Consumable Supplies Included for all prints
2. WC4150X	\$209.23	1: Total	1 - 5,000 5,001+	Included \$0.0105	- Consumable Supplies Included for all prints
<b>Total</b>	<b>\$475.83</b>	<b>Minimum Payments (Excluding Applicable Taxes)</b>			

All information in this proposal is considered confidential and is for the sole use of HIDALGO COUNTY TREASURES.

If you would like to acquire the solution described in this proposal, we would be happy to offer a Xerox order agreement. Pricing is subject to credit approval and is valid until 11/16/2008.

For any questions, please contact me at (956)682-1820



# XEROX®

RECEIVED  
 OCT 22 2008  
 4:05 pm

## Lease Pricing PROPOSAL

Presented to HIDALGO COUNTY HEALTH DEPARTMENT

By Damaris Morales

On 10/1/2008



CASH OPTION \$30,665.52  
 FIXED PRICE OPTION \$931.52 WITH 50,000 PRINTS INCLUDED  
 Negotiated Contract : 072391200

Solution			
Item	Product Description	Agreement Information	Trade Information
1. W5665PT (W5665 PRINTER/4T)	<ul style="list-style-type: none"> <li>- Office Finisher</li> <li>- S08 C-p-scan Cntrlr</li> <li>- 3-hole - Ofcfin Only</li> <li>- Customer Ed</li> <li>- Analyst Services</li> </ul>	Lease Term: 36 months Purchase Option: FMV	- Xerox WCP65 S/N MRN026353 Trade-In as of Payment 36
			Requested Install Date: 10/22/2008

Monthly Pricing					
Item	Lease Minimum Payment	Print Charges			Maintenance Plan Features
		Meter	Volume Band	Per Print Rate	
1. W5665PT	\$851.82	1: Total	1 - 50,000 50,001+	Included \$0.0066	- Consumable Supplies Included for all prints - Pricing Fixed for Term
Total	\$851.82	Minimum Payments (Excluding Applicable Taxes)			

*This option includes the scanning feature.*

All information in this proposal is considered confidential and is for the sole use of HIDALGO COUNTY HEALTH DEPARTMENT. If you would like to acquire the solution described in this proposal, we would be happy to offer a Xerox order agreement. Pricing is subject to credit approval and is valid until 10/31/2008.

For any questions, please contact me at (956)682-1820



# Requisition

Req # 00141760

PO #

Date: 10/16/08

Account # 11858  
10/28/08

Bill To:   x  
              x

**Vendor :** 78174  
COPY GRAPHICS, INC  
221 NORTH 10TH  
MCALLEN TX 78501  
FAX (956) 630-2628

**Ship To:** ADULT PROBATION  
3100 S BUSINESS HWY 281  
EDINBURG TX 78539

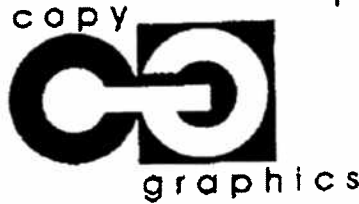
**Contact:** D.SOLIS 4413

**Contract No:**

**Special Instructions:**  
REQ.#169

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DO NOT DUPLICATE ORDER		
1	EACH	30,000 BLACK/WHITE COPIES PER YEAR OVERAGES @.0125 PER COPY. MAINTENANCE AGREEMENT ON COPY MACHINE CANON IR-C4080i, SERIAL THQ01969 COVERAGE PERIOD 10/14/08 THRU 10/13/09.	375.00	375.00
1	EACH	20,000 COLOR COPIES PER YEAR OVERAGES @.08 PER COP	1,600.00	1,600.00
		Account No _____	<u>Encumbrance</u>	
		8-1297-423-00-320-002-9-432	1,975.00	
			Freight	.00
			Total	1,975.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

**Authorized By:** \_\_\_\_\_



*Reg #  
141760*

221 North Tenth St • McAllen, Texas 78501  
 Phone (956) 631-0205 Fax (956) 630-2628 1-800-894-0133

**COPIER SERVICE AGREEMENT - SCAN**

This agreement is between Copy Graphics, Inc. and:

Company Name Hidalgo County Adult Probation Dept Cust# 10217

Physical Address 3100 S Business 281 Billing Address PO BOX 970

City/State/Zip Edinburg, TX 78539 City/State/Zip Edinburg, TX 78539

Phone/Fax 956-587-6004 / 956-318-2488 Phone/Fax \_\_\_\_\_ / \_\_\_\_\_

**EQUIPMENT COVERED**

Model: Canon/IR-C4080I Options: \_\_\_\_\_ Serial: THQ01969

Starting Meter: Copy/Print Clicks: B/W: 327 Scan: \_\_\_\_\_

Cost: \$ 375.00 for 30,000 Color: 2,127 black & white copies. Rate: .0125 per copy.

Cost: \$ 1,600.00 for 20,000 color copies. Rate: .08 per copy.

*All scans will be charged at \$.0025 per scan when scans exceed service agreement minimums or actual print usage. Scan meters will be checked every anniversary date of the contract and billed yearly.*

Effective dates of agreement from October 14, 2008 to October 13, 2009 or copies specified.

Contract to be billed:  Yearly  Quarterly  Monthly  Included in Lease

**[Contract includes black and color toners.]**

I have read and agree to the terms and conditions of coverage on the reverse side of this service agreement. These conditions constitute the entire understanding between Copy Graphics, Inc. and the company I represent or myself. No other written or oral representations by any party shall be binding upon Copy Graphics, Inc. Prices are subject to change from year to year without notice. All charges and costs for which Copy Graphics, Inc. sends an invoice to Customer shall be due and payable, in full, thirty (30) days from the date of the invoice. Copy Graphics, Inc. may either suspend service OR charge service on an hourly basis (plus parts and mileage) until all outstanding, overdue invoices are paid in full.

\_\_\_\_\_  
 Authorized Signature

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Print Name

*Laura Garza*  
 Copy Graphics, Inc. Representative

October 15, 2008  
 Date

## DIGITAL TOTAL B/W & Color TERMS AND CONDITIONS

**ACCEPTANCE:** Copy Graphics, Inc. (Seller) agrees to provide and the Customer agrees to accept maintenance service on equipment listed at charges indicated in accordance with Seller's service policies. Seller shall have full and free access to the equipment to provide service thereon.

**TERM:** This Agreement will automatically be renewed unless previously cancelled in writing and accepted by Seller's Service Manager (30) thirty days prior to expiration of contract.

**SERVICE AVAILABILITY:** Service will be rendered under this Agreement only during normal business hours of Seller (Monday through Friday 8 a.m. to 5 p.m. except national holidays).

**INCLUSIONS:** Digital Total service plan includes on-site remedial maintenance, lubrication, cleaning, adjustments and the replacement of unserviceable parts except integrated circuit boards, unless equipment is protected by Seller approved power protection device. Plan also includes consumable supplies such as drum, developer, black toner, and color toners not to exceed \_\_\_\_\_ per contract period. ~~This contract does not include any color toners.~~ If the Customer has more than one unit that uses the same consumable supplies, all units must be placed under the same type of service plan. The unserviceability of parts will solely be determined by Seller, and replaced on an exchange basis. Replaced parts will become the property of Seller.

**EXCLUSIONS:** Service and maintenance support to be provided under this Agreement does not include repairs, replacement of parts and labor caused by, arising from, related to or made necessary by: a) use of equipment in a manner not recommended by OEM; b) failure to continually provide a suitable installation environment, including but not limited to, adequate electrical power, air conditioning or humidity control; c) Customer's improper use, management, or supervision of covered equipment; d) accident and disaster, including but not limited to, fire, flood, water, wind or lightning; e) electrical work, devices, cables, etc., external to the equipment; f) the maintenance of accessories, alterations, attachments or other devices not covered by this agreement; g) excessive electrostatic discharge, improper grounding, improper power line protection; h) failure of Customer to perform OEM recommended daily/weekly maintenance and cleaning as described in the manufacturer's operator manuals; i) service providers and parts installers other than the Seller; j) improperly trained and inexperienced operators; k) service related to relocation of equipment; l) all consumable items not specifically listed in inclusions; m) connected products such as computer, printer, software or network-related failures.

**EQUIPMENT OVERHAUL:** In the event that Equipment requires repairs beyond the limits of regular service and maintenance, such as, but not limited to, excessive wear and tear, age, long-term use, excessive use or other similar causes, an overhaul, as determined by Seller, may be required. Said overhauls are not covered by this Agreement. In such event an estimate of repairs shall be submitted by Seller to Customer detailing the cost of an overhaul. If Customer does not authorize said overhaul, Seller may discontinue service of the equipment without refund of the unused portion of this Agreement. Seller may refuse to renew this Agreement upon expiration.

**ASSIGNMENT:** This Agreement is not assignable to a third party without written permission from Seller, such permission not to be unreasonably withheld, and any attempt by Customer to assign any rights, duties, or obligations which arise under this Agreement without such permission shall be void. This contract is not refundable. If the equipment is traded in on new Seller equipment, any unused portion of the yearly contract charge will be prorated and applied towards the maintenance of the new equipment.

**LIMITED WARRANTY:** Seller warrants that services will be performed hereunder in a workmanlike manner in accordance with reasonable commercial standards. Parts are warranted against defects solely to the extent of the manufacturer's warranty, if any.

**DISCLAIMER OF WARRANTY:** EXCEPT FOR THE LIMITED WARRANTY SET FORTH ABOVE, REPLACEMENT PARTS, LABOR AND SERVICES ARE PROVIDED "AS IS". SELLER SPECIFICALLY DISCLAIMS ALL OTHER WARRANTIES, EXPRESSED OR IMPLIED, INCLUDING BUT NOT LIMITED TO THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE.

**HAZARDOUS PRODUCTS:** Customer acknowledges that there may be products covered under this agreement that may be or become, considered as hazardous materials under various laws and regulations. Seller agrees to make available to Customer, safety information concerning said products. Customer agrees to disseminate such information, so as to give warning of possible hazards to persons who Customer can reasonably foresee may be exposed to such hazards, including but not limited to Customer's employees, agents, contractors and customers. If Customer fails to disseminate such warnings and information, Customer shall defend and indemnify Seller against any and all liability arising out of such failure.

**LIMITATION OF LIABILITY:** SELLER SHALL NOT BE HELD RESPONSIBLE FOR SELLER'S INABILITY TO PROVIDE TIMELY SERVICE DUE TO DELAYS. IN NO EVENT WILL SELLER, OR ITS DIRECTORS, OFFICERS, EMPLOYEES, AGENTS, OR AFFILIATES, BE LIABLE TO CUSTOMER FOR ANY CONSEQUENTIAL, INCIDENTAL, INDIRECT, SPECIAL OR EXEMPLARY DAMAGES, INCLUDING, WITHOUT LIMITATION, LOSS OF BUSINESS PROFITS, BUSINESS INTERRUPTION, LOSS OF DATA OR BUSINESS INFORMATION, LIABILITY TO THIRD PARTIES, AND THE LIKE, ARISING OUT OF THE USE OR INABILITY TO USE THE EQUIPMENT. SELLER'S LIABILITY TO CUSTOMER (IF ANY) FOR ACTUAL DIRECT DAMAGES FOR ANY CAUSE WHATSOEVER, AND REGARDLESS OF THE FORM OF THE ACTION, WILL BE LIMITED TO, AND IN NO EVENT EXCEED THE AMOUNT PAYABLE BY CUSTOMER FOR SERVICE AND MAINTENANCE SUPPORT ON THE UNIT OF EQUIPMENT INVOLVED FOR THE THREE (3) MONTHS IMMEDIATELY PRECEDING THE EVENT WHICH ALLEGEDLY GAVE RISE TO THE DAMAGES.

**GOVERNING LAW:** This contract shall be governed by and construed according to the laws of the State of Texas.

# Requisition

Req # 00141757

PO #

Date: 10/16/08

*Contract # 11858 10/28/08*

Bill To: x  
x

Vendor: 78174  
COPY GRAPHICS, INC  
221 NORTH 10TH  
MCALLEN TX 78501  
FAX (956) 630-2628

Ship To: ADULT PROBATION  
3100 S BUSINESS HWY 281  
EDINBURG TX 78539

Contact: D.SOLIS 4413

Contract No:

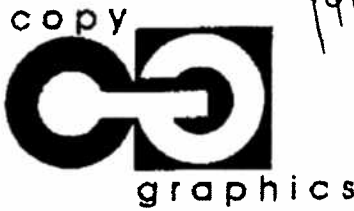
Special Instructions:  
REQ.#171

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1	YEAR	DO NOT DUPLICATE ORDER MAINTENANCE AGREEMENT ON COPY MACHINE CANON IR-5050. SERIAL #CHE06340 500,000 COPIES/YR OVERAGES @.0059 COVERAGE PERIOD 11/21/08 THRU 11/20/09 FOR COVERAGE AFTER 90 DAY WARRANTY. THAT WILL EXPIRE 11/20/08.  Account No ----- 8-1297-423-00-320-002-9-432	2,900.00	2,900.00
			<u>Encumbrance</u>	
			2,900.00	
			Freight	.00
			Total	2,900.00
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: \_\_\_\_\_



*Rep # 41757*



www.copyg.com

221 North Tenth St • McAllen, Texas 78501

Phone (956) 631-0205

Fax (956) 630-2628

1-800-894-0133

**COPIER SERVICE AGREEMENT - SCAN**

This agreement is between Copy Graphics, Inc. and:

Company Name Hidalgo Co Adult Probation Cust# 10217  
 Physical Address 1000 "M" Road Billing Address PO BOX 970  
 City/State/Zip Edinburg, TX 78539 City/State/Zip Edinburg, TX 78540  
 Phone/Fax 956-318-2920 / 956-380-3324 Phone/Fax 956-587-6000 / 956-318-2488

**EQUIPMENT COVERED**

Model: Canon/IR-5050 Options: \_\_\_\_\_ SN: CHE06340

Starting Meters: Copy/Print Clicks: \_\_\_\_\_ Scan: \_\_\_\_\_

Rate: \$ 2,900.00 for 500,000 clicks. Overage Rate: .0059 per click.

*All scans will be charged at \$.0025 per scan when scans exceed service agreement minimums or actual print usage. Scan meters will be checked every anniversary date of the contract and billed yearly.*

Effective dates of agreement from November 21, 2008 to November 20, 2009 or clicks specified.

Contract to be billed:  Yearly  Quarterly  Monthly  Included in Lease

I have read and agree to the terms and conditions of coverage on the reverse side of this service agreement. These conditions constitute the entire understanding between Copy Graphics, Inc. and the company I represent or myself. No other written or oral representations by any party shall be binding upon Copy Graphics, Inc. Prices are subject to change from year to year without notice. All charges and costs for which Copy Graphics, Inc. sends an invoice to Customer shall be due and payable, in full, thirty (30) days from the date of the invoice. Copy Graphics, Inc. may either suspend service OR charge service on an hourly basis (plus parts and mileage) until all outstanding, overdue invoices are paid in full.

Authorized Signature \_\_\_\_\_

Title \_\_\_\_\_

Print Name \_\_\_\_\_

*Laura Larza*  
Copy Graphics, Inc. Representative

October 15, 2008  
Date

## DIGITAL TOTAL TERMS AND CONDITIONS

**ACCEPTANCE:** Copy Graphics, Inc. (Seller) agrees to provide and the Customer agrees to accept maintenance service on equipment listed at charges indicated in accordance with Seller's service policies. Seller shall have full and free access to the equipment to provide service thereon.

**TERM:** This Agreement will automatically be renewed unless previously cancelled in writing and accepted by Seller's Service Manager (30) thirty days prior to expiration of contract.

**SERVICE AVAILABILITY:** Service will be rendered under this Agreement only during normal business hours of Seller (Monday through Friday 8 a.m. to 5 p.m. except national holidays).

**INCLUSIONS:** Digital Total service plan includes on-site remedial maintenance, lubrication, cleaning, adjustments and the replacement of unserviceable parts except integrated circuit boards, unless equipment is protected by Seller approved power protection device. Plan also includes consumable supplies such as drum, developer and toner, not to exceed 13 per contract period. If the Customer has more than one unit that uses the same consumable supplies, all units must be placed under the same type of service plan. The unavailability of parts will solely be determined by Seller, and replaced on an exchange basis. Replaced parts will become the property of Seller.

**EXCLUSIONS:** Service and maintenance support to be provided under this Agreement does not include repairs, replacement of parts and labor caused by, arising from, related to or made necessary by: a) use of equipment in a manner not recommended by OEM; b) failure to continually provide a suitable installation environment, including but not limited to, adequate electrical power, air conditioning or humidity control; c) Customer's improper use, management, or supervision of covered equipment; d) accident and disaster, including but not limited to, fire, flood, water, wind or lightning; e) electrical work, devices, cables, etc., external to the equipment; f) the maintenance of accessories, alterations, attachments or other devices not covered by this agreement; g) excessive electrostatic discharge, improper grounding, improper power line protection; h) failure of Customer to perform OEM recommended daily/weekly maintenance and cleaning as described in the manufacturer's operator manuals; i) service providers and parts installers other than the Seller; j) improperly trained and inexperienced operators; k) service related to relocation of equipment; l) all consumable items not specifically listed in inclusions; m) connected products such as computer, printer, software or network-related failures.

**EQUIPMENT OVERHAUL:** In the event that Equipment requires repairs beyond the limits of regular service and maintenance, such as, but not limited to, excessive wear and tear, age, long-term use, excessive use or other similar causes, an overhaul, as determined by Seller, may be required. Said overhauls are not covered by this Agreement. In such event an estimate of repairs shall be submitted by Seller to Customer detailing the cost of an overhaul. If Customer does not authorize said overhaul, Seller may discontinue service of the equipment without refund of the unused portion of this Agreement. Seller may refuse to renew this Agreement upon expiration.

**ASSIGNMENT:** This Agreement is not assignable to a third party without written permission from Seller, such permission not to be unreasonably withheld, and any attempt by Customer to assign any rights, duties, or obligations which arise under this Agreement without such permission shall be void. This contract is not refundable. If the equipment is traded in on new Seller equipment, any unused portion of the yearly contract charge will be prorated and applied towards the maintenance of the new equipment.

**LIMITED WARRANTY:** Seller warrants that services will be performed hereunder in a workmanlike manner in accordance with reasonable commercial standards. Parts are warranted against defects solely to the extent of the manufacturer's warranty, if any.

**DISCLAIMER OF WARRANTY:** EXCEPT FOR THE LIMITED WARRANTY SET FORTH ABOVE, REPLACEMENT PARTS, LABOR AND SERVICES ARE PROVIDED "AS IS". SELLER SPECIFICALLY DISCLAIMS ALL OTHER WARRANTIES, EXPRESSED OR IMPLIED, INCLUDING BUT NOT LIMITED TO THE IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE.

**HAZARDOUS PRODUCTS:** Customer acknowledges that there may be products covered under this agreement that may be or become, considered as hazardous materials under various laws and regulations. Seller agrees to make available to Customer, safety information concerning said products. Customer agrees to disseminate such information, so as to give warning of possible hazards to persons who Customer can reasonably foresee may be exposed to such hazards, including but not limited to Customer's employees, agents, contractors and customers. If Customer fails to disseminate such warnings and information, Customer shall defend and indemnify Seller against any and all liability arising out of such failure.

**LIMITATION OF LIABILITY:** SELLER SHALL NOT BE HELD RESPONSIBLE FOR SELLER'S INABILITY TO PROVIDE TIMELY SERVICE DUE TO DELAYS. IN NO EVENT WILL SELLER, OR ITS DIRECTORS, OFFICERS, EMPLOYEES, AGENTS, OR AFFILIATES, BE LIABLE TO CUSTOMER FOR ANY CONSEQUENTIAL, INCIDENTAL, INDIRECT, SPECIAL OR EXEMPLARY DAMAGES, INCLUDING, WITHOUT LIMITATION, LOSS OF BUSINESS PROFITS, BUSINESS INTERRUPTION, LOSS OF DATA OR BUSINESS INFORMATION, LIABILITY TO THIRD PARTIES, AND THE LIKE, ARISING OUT OF THE USE OR INABILITY TO USE THE EQUIPMENT. SELLER'S LIABILITY TO CUSTOMER (IF ANY) FOR ACTUAL DIRECT DAMAGES FOR ANY CAUSE WHATSOEVER, AND REGARDLESS OF THE FORM OF THE ACTION, WILL BE LIMITED TO, AND IN NO EVENT EXCEED THE AMOUNT PAYABLE BY CUSTOMER FOR SERVICE AND MAINTENANCE SUPPORT ON THE UNIT OF EQUIPMENT INVOLVED FOR THE THREE (3) MONTHS IMMEDIATELY PRECEDING THE EVENT WHICH ALLEGEDLY GAVE RISE TO THE DAMAGES.

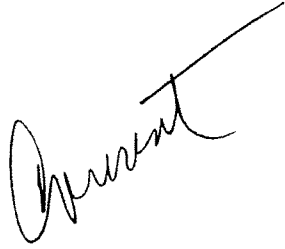
**GOVERNING LAW:** This contract shall be governed by and construed according to the laws of the State of Texas.

# Requisition

Req # 00141719

PO #

Date: 10/16/08



Bill To: x  
x

Vendor : 178136  
DELL MARKETING L.P.  
ONE DELL WAY  
RR1 MAILSTOP 8035  
ROUND ROCK TX 78682  
FAX (800)433-9527

Ship To: 370TH DISTRICT COURT  
100 N. CLOSNER, 2ND FL  
EDINBURG TX 78539

Contact: 956-318-2280

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
2.00	EACH	DO NOT DUPLICATE ORDER OPTIPLEX 755 MINITOWER, CORE 2 DUO E6550/2.33GHz, Account No _____ 8-1100-412-00-007-001-0-745  REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233	1,267.04 <u>Encumbrance</u> 2,534.08  Freight  Total	2,534.08     2,534.08

Authorized By: \_\_\_\_\_

DATE: October 20, 2008

DEPARTMENT HEAD: Noé Gonzalez

DEPARTMENT NAME: 370<sup>th</sup> District Court

ACCOUNT NUMBER: 8-1100-412-00-007-001-0-

SUBJECT: Budget Line-Item Transfer(s)

Honorable Commissioners' Court of Hidalgo County:

I submit to you for your consideration the following line-item transfers in accordance with Local Government; Code, Chapter 111, Subchapter C.;

FROM		TO		
OBJECT CODE	OBJECT NAME	OBJECT CODE	OBJECT NAME	AMOUNT
ACCOUNT NUMBER: 8-1100-412-00-007-001-0-				
<u>665</u>	<u>MINOR COMPUTER EQUIPMENT</u>	<u>745</u>	<u>COMPUTER EQUIPMENT</u>	<u>\$ 655.37</u>
<u>810</u>	<u>DUES &amp; MEMBERSHIPS</u>	<u>745</u>	<u>COMPUTER EQUIPMENT</u>	<u>\$ 145.00</u>
<u>890</u>	<u>OTHER</u>	<u>745</u>	<u>COMPUTER EQUIPMENT</u>	<u>\$ 466.67</u>

TOTAL: \$1,267.04

REASON: Current and future expenditures.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNT CLERK

Req 141719

**DELL**

**QUOTATION**

QUOTE #: 455824955

Customer #: 17927132

Contract #: 9913578

Customer Agreement #: DIR-SDD-192

Quote Date: 10/23/08

Date: 10/23/08 4:04:12 PM

Customer Name: HIDALGO COUNTY

<b>TOTAL QUOTE AMOUNT:</b>		<b>\$2,534.08</b>	
Product Subtotal:	\$2,534.08		
Tax:	\$0.00		
Shipping & Handling:	\$0.00		
Shipping Method:	Ground	Total Number of System Groups:	1

GROUP: 1	QUANTITY: 2	SYSTEM PRICE: \$1,267.04	GROUP TOTAL: \$2,534.08
Base Unit:	OptiPlex 755 Minitower,Core 2 Duo E6550/2.33GHz,4M,VT 1333FSB (223-0592)		
Processor:	NTFS File System,Factory Install (420-3699)		
Memory:	4GB,Non-ECC,667MHz DDR2,2X2GB OptiPlex 755 (311-7492)		
Keyboard:	Dell USB Keyboard,No Hot Keys English,Black,Optiplex (310-8010)		
Monitor:	Dell 22 in Widescreen E2209W Analog Flat Panel, Optiplex Precision and Latitude (320-7183)		
Video Card:	256MB ATI RADEON HD 2400 XT Graphics Dual Monitor VGA (TV-out),Full Height,Dell OptiPlex (320-5741)		
Hard Drive:	160GB SATA 3.0Gb/s and 8MB Data Burst Cache,Dell OptiPlex755 (341-5473)		
Floppy Disk Drive:	3.5 inch,1.44MB,Floppy Drive Dell OptiPlex 740,755 and 330 (341-4005)		
Floppy Disk Drive:	Cable for 3.5IN,1.44MB Floppy Drive, Dell OptiPlex Minitower (330-0474)		
Operating System:	Windows XP PRO SP2 with Windows Vista Business LicenseDell OptiPlex,English,Factory Install (420-6972)		
Mouse:	Dell USB 2 Button Optical Mouse with Scroll,Black OptiPlex (310-9627)		
TBU:	vPro Secure Advanced Hardware Enabled Systems Management Dell OptiPlex (310-9491)		
CD-ROM or DVD-ROM Drive:	16X DVD+/-RW and 16X DVD,Dell OptiPlex 755 Minitower (313-5430)		
CD-ROM or DVD-ROM Drive:	Roxio Creator Dell Edidion,9.0Dell OptiPlex (420-7963)		
CD-ROM or DVD-ROM Drive:	Cyberlink Power DVD 8.1,with Media,Dell OptiPlex/Precision (420-9179)		
Speakers:	Internal Chassis Speaker Option,Dell OptiPlex Minitower (313-3350)		
Documentation Diskette:	Resource DVD contains Diagnostics and Drivers for Vista Dell OptiPlex (310-8762)		
Bundled Software:	You have chosen a vPro System (310-9490)		
Factory Installed Software:	Dell Energy Smart Power Management Settings Enabled OPTIPLEX (310-9504)		
Service:	ProSupport for IT: Next Business Day Parts and Labor Onsite Response Initial Year (985-5930)		
Service:	Dell Hardware Limited Warranty Plus Onsite Service Extended Year(s) (989-1568)		
Service:	ProSupport for IT: 7x24 Technical Support for certified IT Staff, Initial (984-6640)		
Service:	ProSupport for IT: 7x24 Technical Support for certified IT Staff, 2 Year Extended (984-0002)		
Service:	Dell Hardware Limited Warranty Plus Onsite Service Initial Year (989-1567)		
Service:	ProSupport for IT: Next Business Day Parts and Labor Onsite Response 2 Year Extended (985-0482)		

Service:	Thank you choosing Dell ProSupport. For tech support, visit <a href="http://support.dell.com/ProSupport">http://support.dell.com/ProSupport</a> or call 1-866-516-31 (989-3449)
Installation:	Standard On-Site Installation Declined (900-9987)
Misc:	Shipping Material for System Smith Minitower, Dell OptiPlex (310-9330)
Misc:	Vista Premium Downgrade Relationship Desktop (310-9161)
	Keep Your Hard Drive, 3 Year (984-0092)

SALES REP:	Tiffany Washington	PHONE:	1-800-576-6038
Email Address:	tiffany_washington@dell.com	Phone Ext:	7241768

For your convenience, your sales representative, quote number and customer number have been included to provide you with faster service when you are ready to place your order. Orders may be faxed to the attention of your sales representative to 1-866-607-6914. You may also place your order online at [www.dell.com/qto](http://www.dell.com/qto)

This quote is subject to the terms of the agreement signed by you and Dell, or absent such agreement, to Dell's Terms of Sale.

Prices and tax rates are valid in the U.S. only and are subject to change.

***\*\*Sales/use tax is a destination charge, i.e. based on the "ship to" address on your purchase order. Please indicate your taxability status on your PO. If exempt, please fax exemption certificate to Dell Tax Department at 888-863-8778, referencing your customer number. If you have any questions regarding tax please call 800-433-9019 or email Tax\_Department@dell.com. \*\****

All product and pricing information is based on latest information available. Subject to change without notice or obligation.

LCD panels in Dell products contain mercury, please dispose properly. Please contact Dell Financial Services' Asset Recovery Services group for EPA compliant disposal options at [US\\_Dell\\_ARS\\_Requests@dell.com](mailto:US_Dell_ARS_Requests@dell.com). Minimum quantities may apply.

Shipments to California: For certain products, a State Environmental Fee Of Up to \$10 per item may be applied to your invoice as early as Jan 1, 2005. Prices in your cart do not reflect this fee. More Info: or refer to URL [www.dell.com/environmentalfee](http://www.dell.com/environmentalfee)