

MEMORANDUM

FEB 04 2009
P. B. 2:28 PM

To: Eduardo Olivares, Director
Health & Human Services

Attn: Josie Escalante via e-mail: josie.escalante@hchd.org

From: Yolanda Velasquez
Purchasing Dept., Buyer

Date: January 22, 2009

Re: Bid No. 2009-014-00-00 YV Approval of Specifications/Requirements for
HIDALGO COUNTY-HEALTH DEPARTMENT "Oral Contraceptives"

Please review the following **SPECIFICATIONS** and verify if all requirements are met by signing below and indicating **APPROVE** (or) **DISAPPROVE**. If specification is **not** met, make any and all modifications necessary and return the revised copy to the designated Buyer in the Purchasing Department.

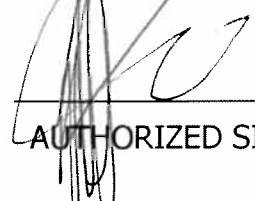
If you have any questions, please call me at (956) 318-2626 ext# 4881.

| | |
|---|-------------------------------------|
| APPROVE <input type="checkbox"/> | DISAPPROVE <input type="checkbox"/> |
| APPROVED WITH MODIFICATIONS <input checked="" type="checkbox"/> | |

FUNDS AVAILABILITY: Yes / No /

Other (specify) 9-1100-441-00-340-001-0-604

BUDGET ACCOUNT#: 9-1100-441-00-340-001-0-604



Eduardo Olivares

AUTHORIZED SIGNATURE

PRINTED NAME

DATE

name change from
"Oral Contraceptives"
to Contraceptives
and Add
① Patch, ② Injections
and ③ Pill
④ Current pill on contract
2/2/09

**SUBMIT THIS FORM TO THE HIDALGO COUNTY PURCHASING DEPARTMENT,
VIA FAX TO (956) 318-2629 or E-mail: yolanda.velasquez@co.hidalgo.tx.us
no later than WEDNESDAY, February 11, 2009 by 12:00P.M.**

Enclosures