

AI-15193

2.A.

398th District Court - Line Item Transfer

CC CONSENT

Date: 04/28/2009
Submitted By: Sylvia Solis, BUDGET & MANAGEMENT
Submitted For: 398th DC
Department: BUDGET & MANAGEMENT
Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - 398th District Court (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1100-412-00-009-001-0-XXX
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
583 --> 117 \$111.00; funds available as of 04/24/09.

Attachments

Link: [LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Sylvia Solis	Sylvia Solis	04/24/2009 04:24 PM	APRV
2	Budget & Management		04/24/2009 05:21 PM	NEW

Form Started By: Sylvia Solis
Started On: 04/24/2009 01:21 PM
Final Approval Date: 04/24/2009

AI-15184

2.B.

**2009 Pct. 1 R & B LIT for Closner Construction PO #616234
CC CONSENT**

Date: 04/28/2009
Submitted By: Ivan Cantu, BUDGET & MANAGEMENT
Department: BUDGET & MANAGEMENT
Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - Pct. 1 R & B (1201)

BACKGROUND

To fund PO #616234 for Closner Construction pending interdept transfer AI #15146 and reclassification to program no. 005 by Auditor's office.

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1201-431-00-121-005-0-XXX
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

funds available as of 4-24-09. To fund PO #616234 for Closner Construction, pending reclassification by Auditor's office.

Attachments

Link: [Pct. 1 R & B LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Ivan Cantu (Originator)	Ivan Cantu	04/24/2009 10:56 AM	APRV
2	Budget & Management	Veronica Lopez	04/24/2009 11:01 AM	APRV
3	Noe Cavazos	NOE CAVAZOS	04/24/2009 12:56 PM	APRV
4	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Ivan Cantu Started On: 04/24/2009 09:31 AM
Final Approval Date: 04/24/2009

AI-15107

2.C.

Health Division - Immunization Grant Line Item Trf

CC CONSENT

Date: 04/28/2009
 Submitted By: Dan Beltran, HEALTH & HUMAN SERVICES DEPT.
 Department: HEALTH & HUMAN SERVICES DEPT.
 Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - Health & Human Services Department - Imm (1293)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1293-441-00-340-012-9-XXX
 FUNDS AVAILABLE Y/N?: y MATCHING FUNDS Y/N?:
 BUDGETARY IMPACT:
 Available account balance as of 04/17/2009. 604-->601 ; 661-->601 ; 664 --> 601

Attachments

Link: [Imm LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/17/2009 01:06 PM	APRV
2	JC Carreon	JC Carreon	04/17/2009 03:09 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Dan Beltran Started On: 04/17/2009 01:04 PM

Final Approval Date: 04/24/2009

AI-15179

2.D.

93rd District Court - Line Item Transfer

CC CONSENT

Date: 04/28/2009
 Submitted By: Sylvia Solis, BUDGET & MANAGEMENT
 Submitted For: 93rd District Court
 Department: BUDGET & MANAGEMENT
 Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - 93rd District Court (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 9 ACCT. #: 9-1100-412-00-002-001-0-XXX
 FUNDS AVAILABLE Y/N?: y MATCHING FUNDS Y/N?:
 BUDGETARY IMPACT:
 funs available as of 4-24-09

Attachments

Link: [LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Sylvia Solis	Sylvia Solis	04/23/2009 03:40 PM	APRV
2	Budget & Management	Veronica Lopez	04/23/2009 03:43 PM	APRV
3	Noe Cavazos	NOE CAVAZOS	04/24/2009 09:52 AM	APRV
4	Auditor's Office		04/24/2009 05:21 PM	NEW
Form Started By: Sylvia Solis			Started On: 04/23/2009 03:30 PM	
Final Approval Date: 04/24/2009				

AI-15118

2.E.

Line Item Transfer

CC CONSENT

Date: 04/28/2009
 Submitted By: Esther Contreras, 370TH DISTRICT COURT
 Submitted For: Noe Gonzalez, Judge Presiding
 Department: 370TH DISTRICT COURT
 Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - 370th District Court (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1100-412-00-007-001-0-XXX
 FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N
 BUDGETARY IMPACT:
 890-->640 \$ 55.00; funds available as of 04/21/09

Attachments

Link: [Line Item Transfer](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/20/2009 03:17 PM	APRV
2	Ana Galvan	Anna Galvan	04/21/2009 03:59 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Esther Contreras Started On: 04/20/2009 09:04 AM

Final Approval Date: 04/24/2009

DATE: April 20, 2009

DEPARTMENT HEAD: Noé Gonzalez

DEPARTMENT NAME: 370th District Court

ACCOUNT NUMBER: 9-1100-412-00-007-001-0-

SUBJECT: Intradepartmental Transfer

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, Subchapter C Section 111.07, Subsection C.

FROM OBJECT CODE	OBJECT DESCRIPTION	TO OBJECT CODE	OBJECT DESCRIPTION	AMOUNT
890	OTHER	640	REFERENCE MATERIALS	\$55.00
			TOTAL:	\$55.00

REASON: Transfer of funds to cover current and future expenditures.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNT CLERK

AI-15119

2.F.

Sheriffs Office - Line Item Transfer

CC CONSENT

Date: 04/28/2009
Submitted By: Sylvia Solis, BUDGET & MANAGEMENT
Submitted For: Sheriffs Dept.
Department: BUDGET & MANAGEMENT
Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - Sheriffs Office (1284)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1284-421-00-280-022-0-XXX
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
Funds available as of 04/21/09.

Attachments

Link: [LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/20/2009 03:18 PM	APRV
2	JC Carreon	JC Carreon	04/21/2009 08:29 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Sylvia Solis
Started On: 04/20/2009 09:58 AM

Final Approval Date: 04/24/2009

Intradepartmental Transfers

CC CONSENT

Date: 04/28/2009
 Submitted By: Irma Castillo, PLANNING DEPT.
 Submitted For: Irma Castillo
 Department: PLANNING DEPT.
 Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - Planning Dept. (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1100-419-10-210-001-0-XXX
 FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
 BUDGETARY IMPACT:
 Available account balance as of 04-24-09

Attachments

Link: [revised transfer](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/21/2009 10:48 AM	APRV
2	Veronica Ortiz	Veronica Ortiz	04/24/2009 10:44 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Irma Castillo
 Started On: 04/21/2009 09:49 AM

Final Approval Date: 04/24/2009



Raul E. Sesein, P.E., C.F.M.
 Planning Administrator

**HIDALGO COUNTY
 PLANNING DEPT.**

DATE: April 20, 2009

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

**AMENDED
 REVISED 04/22/09**

DEPARTMENT NAME: Planning Department

ACCOUNT NUMBER: 9-1100-419-10-210-001-0-XXX

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
9-1100-419-10-210-001-0-672	R&M Supplies-Equip & Veh	→	9-1100-419-10-210-001-0-550	Printing & Binding	\$245.00
9-1100-419-10-210-001-0-640	Reference Materials	→	9-1100-419-10-210-001-0-550	Printing & Binding	\$567.40
9-1100-419-10-210-001-0-631	Bottled Water	→	9-1100-419-10-210-001-0-550	Printing & Binding	\$398.30
9-1100-419-10-210-001-0-442	Rental of Equip & Veh.	→	9-1100-419-10-210-001-0-613	Safety Supplies	\$369.36
9-1100-419-10-210-001-0-442	Rental of Equip & Veh.	→	9-1100-419-10-210-001-0-855	Late Fees, penalties and Finance Charges	\$150.00
					\$1,730.06

Reason: Need to print receipt books and order two safety signs "Survey Crew Ahead" for surveying crew when out working out in the field (for safety precaution) Need to have monies on object 855 to pay any late fees if needed.

 Department Head Signature

 Approved Commissioners' Court

____/____/____
 Date

 Attest County Clerk

LIT042809B

AI-15170

2.H.

Late Fees transfer

CC CONSENT

Date: 04/28/2009
Submitted By: Angela Garcia, BUDGET & MANAGEMENT
Department: BUDGET & MANAGEMENT
Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - DBM Worker's Comp. Division (2202)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-2202-419-50-115-065-0-XXX
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
Available account balance as of 04-24-09

Attachments

Link: [LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/23/2009 01:45 PM	APRV
2	JC Carreon	Veronica Ortiz	04/24/2009 03:16 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Angela Garcia
Started On: 04/23/2009 01:40 PM
Final Approval Date: 04/24/2009

BUDGET INTRADEPARTMENTAL TRANSFER REQUEST

DATE: 04/23/09

DEPARTMENT HEAD: RAUL SILGUERO JR.

DEPARTMENT NAME: DBM-WORKERS COMP. DIVISION

ACCOUNT NUMBER: 9-2202-419-50-115-065-0-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.

FROM:		TO:		
OBJECT	OBJECT	OBJECT	OBJECT	
CODE	NAME	CODE	NAME	AMOUNT
661	MINOR OFFICE FURNITURE	855	LATE FEES	\$50.00
			TOTAL	50.00

REASON: TO PAY LATE FEES ON RENTAL INVOICE.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS COURT

DATE

ATTEST COUNTY CLERK

Line Item Transfer

CC CONSENT

Date: 04/28/2009
 Submitted By: Yolanda Orozco, EMERGENCY SERVICES DIVISION
 Submitted For: A.A. Tony Pena, Jr.
 Department: EMERGENCY SERVICES DIVISION
 Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - Emergency Services Division, Fire Marshal's Department - (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1100-422-10-300-001-0-XXX
 FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N

BUDGETARY IMPACT:

- 584-->619 \$ 500.00; funds available as of 04/22/09
- 584-->613 \$ 2,500.00; funds available as of 04/22/09
- 583-->613 \$ 1,000.00; funds available as of 04/22/09
- 583-->664 \$ 2,000.00; funds available as of 04/22/09
- 668-->667 \$ 600.00; funds available as of 04/22/09
- 532-->664 \$ 2,000.00; funds available as of 04/22/09
- 640-->613 \$ 1,500.00; funds available as of 04/22/09

Attachments

Link: [Line Item Transfer](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/22/2009 08:14 AM	APRV
2	Ana Galvan	Anna Galvan	04/22/2009 10:58 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Yolanda Orozco
 Started On: 04/21/2009 03:01 PM

Final Approval Date: 04/24/2009

AI-15138

2.J.

Line Item Transfer

CC CONSENT

Date: 04/28/2009
 Submitted By: Blanca Sanchez, CONSTABLE PCT. #1
 Submitted For: Blanca Sanchez
 Department: CONSTABLE PCT. #1
 Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - Constable Pct. 1 (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1100-421-00-291-001-0-XXX
 FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N
 BUDGETARY IMPACT:
 672-->748 \$ 1,000.00; funds available as of 04/22/09

Attachments

Link: [line item](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/22/2009 08:15 AM	APRV
2	Ana Galvan	Anna Galvan	04/22/2009 11:41 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Blanca Sanchez

Started On: 04/21/2009 07:55 PM

Final Approval Date: 04/24/2009

AI-15156

2.K.

2009 - PCT# 1 PARKS (1211)

CC CONSENT

Date: 04/28/2009
Submitted By: JOANN GONZALEZ, COMM. PCT. #1
Department: COMM. PCT. #1
Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - PCT# 1 PARKS (1211)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1211-452-00-121-013-0-XXX
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
Available account balance as of 04-24-09

Attachments

Link: LIT

Form Routing/Status

Table with 5 columns: Route Seq, Inbox, Approved By, Date, Status. Contains routing history for Budget & Management, Veronica Ortiz, and Auditor's Office.

AI-15155

2.L.

2009 - PCT #1 SANITATION (1100)

CC CONSENT

Date: 04/28/2009
 Submitted By: JOANN GONZALEZ, COMM. PCT. #1
 Department: COMM. PCT. #1
 Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - Pct. 1 Sanitation (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1100-432-00-121-001-0-XXX
 FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?: N

BUDGETARY IMPACT:

441-->671 \$ 1,070.00; Funds available as of 04/24/09
 672-->431 \$ 1,000.00; Funds available as of 04/24/09
 679-->431 \$ 1,000.00; Funds available as of 04/24/09

Attachments

Link: [Line Item Transfer](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/23/2009 07:47 AM	APRV
2	Ana Galvan	Anna Galvan	04/24/2009 11:54 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW
Form Started By: JOANN GONZALEZ			Started On: 04/22/2009 04:10 PM	
Final Approval Date: 04/24/2009				

AI-15152

2.M.

2009 Pct#1 R&B (1201)

CC CONSENT

Date: 04/28/2009
Submitted By: Jorge Flores, COMM. PCT. #1
Department: COMM. PCT. #1
Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 Pct#1 R&B (1201)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 9 ACCT. #: 9-1201-431-00-121-005-0-XXX
FUNDS AVAILABLE Y/N?: y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
funds available as of 4-24-09

Attachments

Link: [2009 Pct#1 R&B \(1201\)](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/23/2009 07:46 AM	APRV
2	Noe Cavazos	NOE CAVAZOS	04/24/2009 09:50 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Jorge Flores

Started On: 04/22/2009 03:45 PM

Final Approval Date: 04/24/2009

AI-15137

2.N.

**Pct. No. 2 BCAP Transfer Eldora Gardens Subdivision
CC CONSENT**

Date: 04/28/2009
Submitted By: Marcie Jackson, COLONIA ACCESS PROGRAM
Submitted For: Agapito Vargas
Department: COLONIA ACCESS PROGRAM
Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - Pct. #2 Border Colonia Access Program (1311)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1311-431-00-122-252-0-XXX
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
841-->733; \$2,492.61

Available balance of \$10,720.96 as of 04/23/09.

Attachments

Link: [LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Roland Garcia	Rolando Garcia	04/23/2009 05:19 PM	APRV
2	Budget & Management	Veronica Lopez	04/24/2009 08:02 AM	APRV
3	Ana Galvan	Anna Galvan	04/24/2009 01:24 PM	APRV
4	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Marcie Jackson
Started On: 04/21/2009 03:55 PM
Final Approval Date: 04/24/2009

AI-15166

2.0.

Pct. No. 2 BCAP Transfer Red Barn

CC CONSENT

Date: 04/28/2009
 Submitted By: Marcie Jackson, COLONIA ACCESS PROGRAM
 Submitted For: Agapito Vargas
 Department: COLONIA ACCESS PROGRAM
 Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009 - Pct. #2 Border Colonia Access Program (1311)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1311-431-00-122-605-1-XXX
 FUNDS AVAILABLE Y/N?: y MATCHING FUNDS Y/N?:
 BUDGETARY IMPACT:
 Available account balance as of 04/23/2009

Attachments

Link: [LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/23/2009 07:54 AM	APRV
2	JC Carreon	JC Carreon	04/23/2009 10:58 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Marcie Jackson Started On: 04/22/2009 05:32 PM
 Final Approval Date: 04/24/2009

AI-15124

2.P.

Pct #3 Transfer

CC CONSENT

Date: 04/28/2009
Submitted By: Norma Ceballos, COMM. PCT. #3
Department: COMM. PCT. #3
Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009-Pct #3 Sanitation (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 9 ACCT. #: 9-1100-432-00-123-001-0-XXX
FUNDS AVAILABLE Y/N?: y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
funds available as of 4-21-09

Attachments

Link: [LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/20/2009 03:19 PM	APRV
2	Noe Cavazos	NOE CAVAZOS	04/21/2009 04:19 PM	APRV
3	Auditor's Office	Monica Badillo	04/24/2009 05:21 PM	APRV

Form Started By: Norma Ceballos

Started On: 04/20/2009 02:57 PM

Final Approval Date: 04/24/2009

INTRA-DEPARTMENTAL TRANSFER

DATE: April 28, 2009

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

DEPARTMENT NAME: Hidalgo County Precinct #3 Sanitation

ACCOUNT NUMBER: 9-1100-432-00-123-001-0

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
672	Sanitation Pct 3 Eq & Veh R&M Supplies	673	Sanitation Pct 3 R&M Supplies	\$ 5,000.00
TOTAL				\$ 5,000.00

REASON: To cover expected expenses.

DEPARTMENT HEAD SIGNATURE

CC DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK

AI-15151

2.Q.

Pct #3 Transfer

CC CONSENT

Date: 04/28/2009
Submitted By: Norma Ceballos, COMM. PCT. #3
Department: COMM. PCT. #3
Agenda Category: 2009 Intradepartmental Transfers

Information

CAPTION

2009-Pct #3 Sanitation (1100)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1100-432-00-123-001-0-XXX
FUNDS AVAILABLE Y/N?: y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
Available account balance as of 04/23/2009

Attachments

Link: [LIT](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/22/2009 03:41 PM	APRV
2	JC Carreon	JC Carreon	04/23/2009 11:06 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Norma Ceballos

Started On: 04/22/2009 03:40 PM

Final Approval Date: 04/24/2009

INTRA-DEPARTMENTAL TRANSFER

DATE: April 28, 2009

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

DEPARTMENT NAME: Hidalgo County Precinct #3 Sanitation

ACCOUNT NUMBER: 9-1100-432-00-123-001-0

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
432	Sanitation Pct 3 Equip R&M Service	431	Pct 3 Sanitation-Bldg & Other Struc R	\$ 1,000.00
TOTAL				\$ 1,000.00

REASON: To cover expected expenses.

DEPARTMENT HEAD SIGNATURE

CC DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK

AI-15161

4.A.

Investment Report-Jan, Feb. & March 2009

CC CONSENT

Date: 04/28/2009

Submitted By: Fred Zamarripa, TREASURER'S OFFICE

Submitted For: Norma Garcia

Department: TREASURER'S OFFICE

Information

CAPTION

County Treasurer:

Approval of the Hidalgo County Monthly Investment Report for the months of January, February, and March 2009.

BACKGROUND

Fiscal Impact

FISCAL YEAR:

ACCT. #:

FUNDS AVAILABLE Y/N?:

MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

No fiscal impact.

Attachments

Link: [Jan Investment Report](#)

Link: [Feb. Investment Report](#)

Link: [March Investment Report](#)

Link: [Jan Investment Report Worksheet](#)

Link: [Feb. Invest Report Worksheet](#)

Link: [March Investment Report Worksheet](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/23/2009 07:50 AM	APRV
2	Ivan Cantu	Ivan Cantu	04/23/2009 02:51 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW
Form Started By: Fred Zamarripa			Started On: 04/22/2009 04:50 PM	
Final Approval Date: 04/24/2009				

Monthly Investment Report

For the month ending January 31, 2009

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 accrued interest for the month ending January 31, 2009 - \$ **32,851.05**

2009	January	32,851.05
2009	February	
2009	March	
2009	April	
2009	May	
2009	June	
2009	July	
2009	August	
2009	September	
2009	October	
2009	November	
2009	December	
	Total	32,851.05

Prepared by:

Norma G. Garcia, CIO
Hidalgo County Treasurer

Monthly Investment Report

For the month ending February 28, 2009

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 accrued interest for the month ending February 28, 2009 - \$ **56,917.08**

2009	January	32,851.05
2009	February	56,917.08
2009	March	
2009	April	
2009	May	
2009	June	
2009	July	
2009	August	
2009	September	
2009	October	
2009	November	
2009	December	
	Total	89,768.13

Prepared by:

Norma G. Garcia, CIO
Hidalgo County Treasurer

Monthly Investment Report

For the month ending March 31, 2009

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 accrued interest for the month ending March 31, 2009 - \$ **342,810.93**

2009	January	32,851.05
2009	February	56,917.08
2009	March	342,810.93
2009	April	
2009	May	
2009	June	
2009	July	
2009	August	
2009	September	
2009	October	
2009	November	
2009	December	
	Total	432,579.06

Prepared by:

Norma G. Garcia, CIO
Hidalgo County Treasurer

Hidalgo County, Texas
Hidalgo County Treasurer's Office
Summary Report on Investments
For the month ending January 31, 2009

FUND	BOOK VALUE	MARKET VALUE
Ending Values		
General	10,000,000.00	10,008,767.12
Special Revenue	7,545,000.00	7,551,614.79
Debt Service	3,953,717.00	3,957,183.27
Capital Projects	8,575,000.00	8,582,517.81
Proprietary	6,220,000.00	6,225,453.15
Trust & Agency	1,177,006.79	1,178,038.69
	<hr/>	<hr/>
Total Ending Values	37,470,723.79	37,503,574.83
	<hr/> <hr/>	<hr/> <hr/>

Beginning Values		
General	-	-
Special Revenue	-	-
Debt Service	-	-
Capital Projects	-	-
Proprietary	-	-
Trust & Agency	-	-
	<hr/>	<hr/>
Total Beginning Values	-	-
	<hr/> <hr/>	<hr/> <hr/>

Change in Values		
General	10,000,000.00	10,008,767.12
Special Revenue	7,545,000.00	7,551,614.79
Debt Service	3,953,717.00	3,957,183.27
Capital Projects	8,575,000.00	8,582,517.81
Proprietary	6,220,000.00	6,225,453.15
Trust & Agency	1,177,006.79	1,178,038.69
	<hr/>	<hr/>
Total Change in Values	37,470,723.79	37,503,574.83
	<hr/> <hr/>	<hr/> <hr/>

Weighted Average Maturity in Days	49.38
Interest Earned this Month	<hr/> 32,851.05
Overall Yield of Portfolio	<hr/> 2.00%
Interest Received this Month	<hr/> 21,381.08
Average Benchmark Yield (1 Year Treasury Bill)	<hr/> 0.42%
Accrued Interest at the End of Month	<hr/> 32,851.05

Hidalgo County, Texas
Hidalgo County Treasurer's Office
Summary Report on Investments
For the month ending February 28, 2009

FUND	BOOK VALUE	MARKET VALUE
Ending Values		
General	110,000,000.00	110,425,315.04
Special Revenue	15,235,000.00	15,248,682.74
Debt Service	-	-
Capital Projects	30,875,000.00	30,894,265.75
Proprietary	16,420,000.00	16,432,337.53
Trust & Agency	1,177,006.79	1,178,812.61
	<hr/>	<hr/>
Total Ending Values	173,707,006.79	174,179,413.67
	<hr/> <hr/>	<hr/> <hr/>
Beginning Values		
General	10,000,000.00	10,008,767.12
Special Revenue	7,545,000.00	7,551,614.79
Debt Service	3,953,717.00	3,957,183.27
Capital Projects	8,575,000.00	8,582,517.81
Proprietary	6,220,000.00	6,225,453.15
Trust & Agency	1,177,006.79	1,178,038.69
	<hr/>	<hr/>
Total Beginning Values	37,470,723.79	37,503,574.83
	<hr/> <hr/>	<hr/> <hr/>
Change in Values		
General	100,000,000.00	100,416,547.92
Special Revenue	7,690,000.00	7,697,067.95
Debt Service	(3,953,717.00)	(3,957,183.27)
Capital Projects	22,300,000.00	22,311,747.94
Proprietary	10,200,000.00	10,206,884.38
Trust & Agency	-	773.92
	<hr/>	<hr/>
Total Change in Values	136,236,283.00	136,675,838.84
	<hr/> <hr/>	<hr/> <hr/>

Weighted Average Maturity in Days	55.05
Interest Earned this Month	<hr/> 56,917.08
Overall Yield of Portfolio	<hr/> 2.00%
Interest Received this Month	<hr/> 38,692.33
Average Benchmark Yield (1 Year Treasury Bill)	<hr/> 0.61%
Accrued Interest at the End of Month	<hr/> 84,352.08

Hidalgo County, Texas
Hidalgo County Treasurer's Office
Summary Report on Investments
For the month ending March 31, 2009

FUND	BOOK VALUE	MARKET VALUE
Ending Values		
General	130,000,000.00	130,209,863.01
Special Revenue	27,615,000.00	27,646,924.12
Debt Service	5,204,557.07	5,212,542.15
Capital Projects	48,400,000.00	48,476,180.82
Proprietary	17,860,000.00	17,882,381.37
Trust & Agency	1,177,006.79	1,179,006.09
	<hr/>	<hr/>
Total Ending Values	230,256,563.86	230,606,897.56
	<hr/> <hr/>	<hr/> <hr/>
Beginning Values		
General	110,000,000.00	110,425,315.04
Special Revenue	15,235,000.00	15,248,682.74
Debt Service	-	-
Capital Projects	30,875,000.00	30,894,265.75
Proprietary	16,420,000.00	16,432,337.53
Trust & Agency	1,177,006.79	1,178,812.61
	<hr/>	<hr/>
Total Beginning Values	173,707,006.79	174,179,413.67
	<hr/> <hr/>	<hr/> <hr/>
Change in Values		
General	20,000,000.00	19,784,547.97
Special Revenue	12,380,000.00	12,398,241.38
Debt Service	5,204,557.07	5,212,542.15
Capital Projects	17,525,000.00	17,581,915.07
Proprietary	1,440,000.00	1,450,043.84
Trust & Agency	-	193.48
	<hr/>	<hr/>
Total Change in Values	56,549,557.07	56,427,483.89
	<hr/> <hr/>	<hr/> <hr/>
Weighted Average Maturity in Days		<u>32.03</u>
Interest Earned this Month		<u>342,810.93</u>
Overall Yield of Portfolio		<u>2.00%</u>
Interest Received this Month		<u>86,267.91</u>
Average Benchmark Yield (1 Year Treasury Bill)		<u>0.63%</u>
Accrued Interest at the End of Month		<u>350,333.70</u>

AI-15108

4.B.

County Clerks Monthly Reports

CC CONSENT

Date: 04/28/2009
Submitted By: Delia Rodriguez, COUNTY CLERK
Submitted For: Delia Rodriguez
Department: COUNTY CLERK
Agenda Category: Monthly Fee Reports

Information

CAPTION

County Clerk:
Approval of monthly fees & court costs reports for the month of March 2009.

BACKGROUND

Fee Account
Criminal Court Costs
Civil & Probate Court Costs

Fiscal Impact

FISCAL YEAR: ACCT. #:
FUNDS AVAILABLE Y/N?: MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
No fiscal impact.

Attachments

Link: [Monthly Reports](#)

Form Routing/Status


Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/17/2009 01:55 PM	APRV
2	Ivan Cantu	Ivan Cantu	04/17/2009 02:07 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Delia Rodriguez
Started On: 04/17/2009 01:19 PM

Final Approval Date: 04/24/2009



ARTURO GUAJARDO, JR.
HIDALGO COUNTY CLERK

TO: Monica Badillo, Agenda Coordinator
FROM: Arturo Guajardo, Jr., County Clerk 
DATE April 16, 2009
SUBJECT: Commissioners' Court Consent Agenda

I am hereby requesting that you please place the following item on the Commissioners' Court Consent Agenda set for April 28, 2009.

**FEE AND COURT COST MONTHLY REPORTS FOR MARCH, 2009
AS FOLLOWS:**

FEE ACCOUNT	\$ 303,157.25
CRIMINAL COURT COST	\$ 166,196.63
CIVIL & PROBATE COURT	<u>\$ 105,384.51</u>
TOTALS MARCH 2009 COLLECTIONS	<u>\$ 574,738.39</u>

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

AG/bs

**COUNTY CLERK MONTHLY FEE REPORT
MARCH 2009**

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

RECORDING FEES/LGC118.013,118.011,212.004,BCC36.10.....		\$130,487.30	
MARRIAGE LICENSES/LGC118.018 (TOTAL).....		\$14,142.50	
STATE COMPROLLER			
MARRIAGE LICENSE.....	# Filed	466	\$13,980.00
BIRTH CERTIFICATES.....	# Filed	1186	\$2,134.80
BIRTH DSHS.....	# Filed	32	\$58.56
DECLARATION OF INFORMAL MARRIAGE.....	# Filed	13	\$182.50
UCC-FINANCING STATEMENTS/BCC9.403.....		\$1,150.00	
LAMINATION.....		\$134.00	
VITAL STATISTICS/LGC 118.015.....			
CERTIFIED COPIES/LGC 118.014.....		\$38,829.64	
RETURNED CHECK CHARGE/LGC 118.0215.....		\$20.00	
REFUNDS.....		\$1,348.80	
BEER & WINE PERMITS/ABC 61.31.....		\$0.00	
PRINTER FEES/ABC 61.38.....		\$4,219.20	
RECEIVED ON ACCOUNT.....		\$43,205.00	
RCRDS MGMT & PRESERVATION PRGM/LGC 118.0216.....		\$48,580.00	
DIGITAL IMAGE FEES.....		\$1,500.00	
CC RECORDS ARCHIVES FEE LGC 118.025.....		\$51,825.00	
COURTHOUSE SECURITY FUND/LGC 291.008.....		\$10,102.00	
VITAL ARCHIVE FEE HSC 191.0045(h).....		\$2,055.00	
OVER/(SHORT).....		\$14.50	
INTEREST EARNED.....		\$8.51	
ADJUSTMENTS.....		\$0.00	
TOTAL CHARGES AND COLLECTIONS.....			\$363,957.31
LESS:			
CHARGES ON ACCOUNT.....			\$55,159.00
TOTAL DEPOSITED IN BANK.....			\$308,798.31
LESS:			
PRINTERS FEES/ABC 61.38.....		\$4,219.20	
BIRTH DSHS.....		\$58.56	
REFUNDS.....		\$1,348.80	
OVER/(SHORT).....		\$14.50	
SUBTOTAL.....			\$5,641.06
DUE TO TREASURER.....			\$303,157.25
DISTRIBUTION:			
COUNTY CLERK FEES.....	1100-341-10-180-002-0-000	\$172,809.44	
INTEREST EARNED.....	1100-361-11-000-006-0-000	\$8.51	
RCRDS MGMT & PRESERVATION PRGM/LGC 118.0216....	1237-341-10-180-000-0-000	\$48,580.00	
DIGITAL IMAGE FEES.....	1100-341-10-180-013-0-000	\$1,500.00	
CC RECORDS ARCHIVE FEE LGC 118.025.....	1100-341-10-180-005-0-000	\$51,825.00	
COURTHOUSE SECURITY FUND/LGC 291.008.....	1241-341-10-180-001-0-000	\$10,102.00	
COMPTR OF PUBLIC ACCTS-MARR FEES (MONTHLY)/LGC 118.022(a).....	1100-207-20-000-040-0-000	\$13,980.00	
COMPTR OF PUBLIC ACCTS-BIRTH/DEATH CERT (QUARTERLY)/LGC 118.015(b).....	1100-207-20-000-039-0-000	\$2,134.80	
COMPTR OF PUBLIC ACCTS-DECLARATION OF INFORMAL MARRIAGE/LGC 118.022(a).....	1100-207-20-000-041-0-000	\$182.50	
PRESERVATION OF VITAL STATISTICS HSC 191.0045(h).....	1100-341-10-180-010-0-000	\$2,055.00	
DISTRIBUTION TOTAL:		\$0.00	\$303,157.25
COUNTY AUDITOR'S FORM: ARS-CC-002, PART I			

**HIDALGO COUNTY CLERK
CRIMINAL COURT COST
FOR THE MONTH OF MARCH 2009**

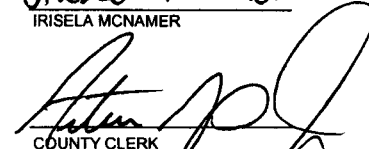
County Clerk/CCP102.005,LGC118.052,LGC118.015	1100-341-10-180-002-0-000	\$10,328.71
Sheriff/CCP 102.011	1100-342-10-180-001-0-000	\$3,570.76
District Attorney/CCP 102.008	1100-341-10-180-009-0-000	\$6,457.96
Fines/LGC 113.004	1200-351-10-180-000-0-000	\$71,224.05
Trial Fees/CCP 102.003	1100-341-10-180-006-0-000	\$10.00
Stenographer/GC 25.11021	1100-341-10-180-006-0-000	\$5,136.93
Crim.Just.Plan.Fd./CCP 102.051 MISD @ \$ 5.00, @ \$10.00	1100-207-20-000-003-0-000	\$10.00
L.E.O.S.E/GC415.082 . MISD @ \$1.00, @ \$1.50, @ \$3.50	1100-207-20-000-011-0-000	\$1.50
Comp. To Victims Of Crime Fd./CCP 56.55 MISD @ \$3.00, @ \$5.00 @ \$10.00, @ \$12.50, @ \$15.00, @ \$35.00 (CVC)	1100-207-20-000-017-0-000	\$85.00
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	\$270.11
T.A.B.C. MISD @ \$3.00, @ \$5.00, @ \$12.00, @ \$35.00	1100-207-20-000-020-0-000	\$26.32
Jury Service Fee	1100-207-20-000-053-0-000	\$996.87
Jury - County Clerk	1100-341-10-180-008-0-000	\$22.00
Jud. & Cr. Personnel Tr. Fd./GC56.001 MISD @ \$1.00	1100-207-20-000-027-0-000	\$5.00
Probate Judge Education Fd/LGC 118.064	1100-341-10-180-007-0-000	\$0.00
Crime Stoppers Assistance Fund/CCP102.013	1100-207-20-000-014-0-000	\$2.00
State General Revenue/CCP102.015	1100-207-20-000-010-0-000	\$2.50
Comp. Rehab Fund/CCP 102.081 MISD @ \$5.00, @ \$25.00	1100-207-20-000-008-0-000	\$25.00
Breath Alcohol Testing/CCP102.016	1100-207-20-000-006-0-000	\$30.00
County Records Mgmt Preservation/LGC118.0546, 118.052, CCP102.005 MISD @ \$5.00, @ \$10.00	1238-341-20-180-001-0-000	\$5,769.83
Records Management Preservation - CC	1237-341-10-180-000-0-000	\$622.96
Courthouse Security Fund/LGC 291.007 MISD @ \$1.00, @ \$3.00, @ \$5.00	1241-341-10-180-001-0-000	\$769.21
Judicial Fund/Criminal CC Stat./GC51.702	# Cases <u>242</u> 1100-207-20-000-046-0-000	\$3,852.28
Consolidated Court Cost(CCC) CCP 102.075 MISD A,B @ \$40.00/C @ \$17.00	1100-207-20-000-015-0-000	\$21,215.39
Fugitive Apprehension Fund (FA)/CCP 102.019 @ \$5.00	1100-207-20-000-009-0-000	\$10.00
Correctional Management Institute (CMI)	1100-207-20-000-029-0-000	\$1.00
LAB FEE		\$0.00
DDCF-Drug Court Fund/CCP Art.102.0178 GC Art.102.0215 @ \$50	1100-207-20-000-058-0-000	\$7,205.98
DNA TESTING FEE /CCP 102.020	1100-207-20-000-030-0-000	\$13.13
Juvenile Crime & Delinquency(JCD)/CCP 102.75(m) @ \$0.25	1100-207-20-000-007-0-000	\$1.00
Time Payment/GC 51.921 @ \$12.50	1100-207-20-000-005-0-000	\$2,674.12
Time Payment/GC 51.921 @ \$10.00 Appropriation	1100-341-10-180-002-0-000	\$2,139.29
Time Payment/GC 51.921 @ \$2.50 Admin. Of Justice	1100-341-10-180-003-0-000	\$534.85
Juvenile Delinquency Prevention Fund/CCP 102.0171 (Graffiti Eradication)	1240-341-10-180-001-0-000	\$50.00
Delinquent Fee	1100-202-00-000-004-0-000	\$462.40
Local Transaction Fee	1100-341-10-180-004-0-000	\$1,506.35
Nondisclosure Fee	# Cases <u>-</u> 1100-207-20-000-037-0-000	\$0.00
EMS Truama Fund/CCP102.0185	1100-207-20-000-038-0-000	\$12,418.95
Public Defense Attorney/CCP26 (Court Ordered Restitution)	1100-351-20-180-001-0-000	\$6,857.31
SJFC	1100-341-10-180-012-0-000	\$147.58
SJFS	1100-207-20-000-054-0-000	\$1,288.67
IDR	1100-207-20-000-059-0-000	\$451.62
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		\$166,196.63
Refunds on Probate, etc.		\$93.00
Attorney Ad Litem Fees/CP RULE 308a		\$0.00
OVER (SHORT)		\$0.00
SUBTOTAL		\$93.00
TOTAL COUNTY CLERK COLLECTIONS		\$166,289.63

PREPARED BY:


IRISELA MCNAMER

04/16/09
DATE

APPROVAL:


COUNTY CLERK

04/16/09
DATE

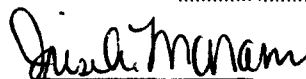
**HIDALGO COUNTY CLERK
CIVIL AND PROBATE COURT COST
MONTHLY REPORT
MARCH 2009**

County Clerk/CCP102.005,LGC118.052,LGC118.015	1100-341-10-180-002-0-000	<u>\$23,699.00</u>
Sheriff/CCP 102.011	1100-342-10-180-001-0-000	<u>\$10,290.00</u>
County Judge/LGC 118.101	1100-341-10-180-001-0-000	<u>\$354.00</u>
Library/LGC 323.023	1247-341-10-180-001-0-000	<u>\$8,610.00</u>
Stenographer/GC 25.1102f	1100-341-10-180-006-0-000	<u>\$7,160.00</u>
Jury Fees/CCP102.004-5,CP RULE 216,GC51.60A	1100-341-10-180-008-0-000	<u>\$2,200.00</u>
Jury - County Clerk	1100-341-10-180-008-0-000	<u>\$0.00</u>
Jud. & Crt. Personnel Tr. Fd./GC56.001 MISD @ \$1.00	1100-207-20-000-027-0-000	<u>\$0.00</u>
Probate Judge Education Fd/LGC 118.064	1100-341-10-180-007-0-000	<u>\$231.00</u>
General Fund Miscellaneous Revenues	1100-360-00-000-000-0-000	<u>\$0.00</u>
Indigent Civil Legal Services/G.C. 51.901 @ \$5.00 & \$10.00	#Cases <u>286</u> 1100-207-20-000-048-0-000	<u>\$1,430.00</u>
Probate Indigent Civil Legal Services/G.C. 51.901 @ \$5.00 & \$10	#Cases <u>78</u> 1100-207-20-000-047-0-000	<u>\$390.00</u>
Court Reporter Service Fee/GC51.601	1239-341-10-180-001-0-000	<u>\$4,305.00</u>
Bond Forfeitures/CCP22.16	1200-352-10-180-001-0-000	<u>\$6,017.12</u>
County Records Mgmt Preservation/LGC118.0546, 118.052, CCP102.005 MISD @ \$5.00, @ \$10.00	1238-341-20-180-001-0-000	<u>\$1,820.00</u>
Courthouse Security Fund/LGC 291.007 MISD @ \$1.00, @ \$3.00, @ \$5.00	1241-341-10-180-001-0-000	<u>\$1,820.00</u>
Judicial Fund/Civil CC Stat./GC51.702	# Cases <u>286</u> 1100-207-20-000-043-0-000	<u>\$11,440.00</u>
Judicial Fund - Civil Support	# Cases <u>287</u> 1100-207-20-000-055-0-000	<u>\$11,997.00</u>
Judicial Fund/Civil CC Stat. Probate/GC51.702	# Cases <u>78</u> 1100-207-20-000-042-0-000	<u>\$3,120.00</u>
SCIG-Probate Filing Fee	# Cases <u>77</u> 1250-341-10-180-001-0-000	<u>\$1,460.00</u>
Appellate Judicial System Fund GC 22.2141	1100-207-20-000-001-0-000	<u>\$1,820.00</u>
District Attorney Bond Forfeitures Commission	1100-341-10-080-011-0-000	<u>\$707.65</u>
Registry Administration Fee/LGC 117.055	1100-341-10-180-002-0-000	<u>\$5,909.97</u>
Non-Disclosure Fee / GC 411.081(d)	# Cases <u>206</u> 1100-207-20-000-037-0-000	<u>\$140.00</u>
Interest Earnings	1100-361-11-000-006-0-000	<u>\$3.77</u>
E-File Fee	1100-341-10-180-002-0-000	<u>\$460.00</u>

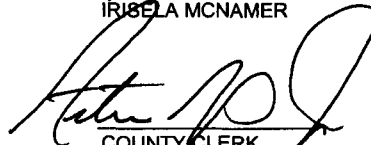
TOTAL DUE TO TREASURER \$105,384.51

Refunds Due \$1,256.00
OVER (SHORT) \$0.00
SUBTOTAL \$1,256.00
TOTAL COUNTY CLERK COLLECTIONS \$106,640.51

PREPARED BY:


IRISELA MCNAMER _____
DATE

APPROVAL:



COUNTY CLERK _____
DATE

AG

AI-15120

5.A.

Pipeline Permits

CC CONSENT

Date: 04/28/2009
Submitted By: Sandra Garcia, RIGHT OF WAY DEPT.
Submitted For: Joe Pena
Department: RIGHT OF WAY DEPT.
Agenda Category: Right of Way

Information

CAPTION

- 1. El Paso E & P Company, L.P.:
 - a. Crossing unnamed County Road running N & S between blocks 94 & 95, Valley Farm Subd. beginning on the East side of said road 1176' North of FM 490, then NW diagonally 61' across said road, exiting on its W.bdy, with 2" XH CW steel line.

- 2. North Alamo Water Supply:
 - a. Salazar Subd L2 & L3 (495 NS/E CCHVZ)- Juan Garza- Dual Bore- Two 3/4" service connections.

BACKGROUND

Fiscal Impact

Attachments

Link: [Pipeline Permits](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/22/2009 08:13 AM	APRV
2	Dale Kennan	Dale Kennan	04/22/2009 02:46 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Sandra Garcia
Started On: 04/20/2009 10:01 AM

Final Approval Date: 04/24/2009

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 April, 2009 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

El Paso E & P Company L.P. 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 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. Crossing unnamed County Road running N & S between Blks. 94 & 95, Valley Farms Subd. Beginning on the East side of said road 1176' N. of FM road 490 then, NW diagonally 61' across said road, exiting on it's W. bdy; with 2" XH CW steel line.

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a 2" 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 April, 2009 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

The 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 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. Salazar Subd L2 & L3 (495 NS/E CCHVZ)- Juan Garza- Dual Bore- two ¾" service connections.

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 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-15140
Pipeline Permit
CC CONSENT

5.B.

Date: 04/28/2009
Submitted By: Sandra Garcia, RIGHT OF WAY DEPT.
Submitted For: Joe Pena
Department: RIGHT OF WAY DEPT.
Agenda Category: Right of Way

Information

CAPTION

3F Utility Construction, Inc.:

1. Propose 2" PVC casing Bore w/ 1" service main for a 3/4" water meter, on Cuevitas, Texas Hidalgo County; 1/8 mile West from Guadalupe Rd on Military Road.

BACKGROUND

Fiscal Impact

Attachments

Link: [Pipeline Permit](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/22/2009 01:26 PM	APRV
2	Dale Kennan	Dale Kennan	04/23/2009 07:52 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Sandra Garcia
Started On: 04/22/2009 08:41 AM

Final Approval Date: 04/24/2009

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 April, 2009 does by these presents **GRANT, GIVE AND RELINQUISH TO:**

3F Utility Construction, Inc. hereinafter called Permittee, of the County of Hidalgo, Texas, the Right, Privilege and Authority to construct, reconstruct, lay and maintain a 1 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:**

- 1. Propose 2" PVC casing Bore w/1" service main for a ¾" water meter in Cuevitas, Texas Hidalgo County; 1/8 mile West from Guadalupe Rd on Military Road.

The granting, giving and authorizing of permission for the said aforementioned Permittee to so construct, reconstruct, lay and maintain a 1" 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.

AI-15130

6.A.

TAX OFFICE REFUNDS

CC CONSENT

Date: 04/28/2009
 Submitted By: Hilda Fuentes, TAX OFFICE
 Submitted For: Hilda Fuentes
 Department: TAX OFFICE
 Agenda Category: Tax Refunds

Information

CAPTION

ACCT#	PROPERTY OWNER	PAYER	AMT
B4235.01.000.0036.00	Obra Homes	Chase Home Finance	\$3141.80
L0200.00.000.0004.06	Santiago O & Azaneth Alanis	A2z Liquors Llc	\$3384.95
M2400.99.000.000A.87	Univision Radio Broadcasting	Univision Management Co	\$18605.07
M2650.00.005.0004.30	Tari, Inc	Tari Inc	\$11011.77
M3870.99.000.0017.05	Keithly-Williams Seeds	Keithly-Williams Seeds	\$7181.32
S2950.00.000.0246.10	Talal N & Patricia F Elhaj Md	Talal N & Patricia F Elhaj Md	\$4000.00
S3975.10.000.0036.00	Nations Direct Loan	Land Title Usa	\$3718.77
S6660.99.000.0001.00	Savannah Studio Partnership	Savannah Studio 6 Motel	\$2954.14
T2100.00.241.0003.07	South Texas Electric Cooperative	South Texas Electric	\$2609.50
W0100.00.031.0010.00	Valley West Plaza	lbc	\$2644.74

BACKGROUND

Fiscal Impact

FISCAL YEAR: ACCT. #:
 FUNDS AVAILABLE Y/N?: MATCHING FUNDS Y/N?:
 BUDGETARY IMPACT:
 No fiscal impact.

Attachments

- Link: [frt page](#)
- Link: [accts pg](#)
- Link: [obra](#)
- Link: [a2z](#)
- Link: [univision](#)
- Link: [tari](#)
- Link: [seeds](#)
- Link: [talal](#)
- Link: [nations](#)
- Link: [savannah](#)

Link: [south](#)

Link: [valley](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/21/2009 02:10 PM	APRV
2	Ana Galvan	Anna Galvan	04/21/2009 02:13 PM	APRV
3	Ivan Cantu	Ivan Cantu	04/21/2009 02:36 PM	APRV
4	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Hilda Fuentes

Started On: 04/21/2009 01:38 PM

Final Approval Date: 04/24/2009

Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr. RTA

ASSESSOR AND COLLECTOR

EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

April 20, 2009

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,

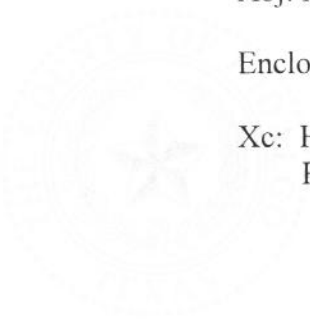
A handwritten signature in black ink, appearing to read 'Armando Barrera Jr. RTA'.

Armando Barrera, Jr. RTA

Abj: mm

Enclosure

Xc: Hidalgo County Auditor
Raymundo Eufrazio, CPA



Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr. *RTA*

ASSESSOR AND COLLECTOR

EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

ACCOUNT NUMBER	PROPERTY OWNER	PAYER	AMOUNT
1. B4235.01.000.0036.00	OBRA HOMES	CHASE HOME FINANCE	\$ 3,141.80
2. L0200.00.000.0004.00	SANTIAGO O & AZANETH ALANIS	A 2 Z LIQUOURS LLC	\$ 3,384.95
3.M2400.99.000.000A.87	UNIVISION RADIO BROADCASTING	UNIVISION MANAGEMENT CO	\$ 18,605.07
4.M2650.00.005.0004.30	TARI, INC	TARI, INC	\$ 11,011.77
5.M3870.99.000.0017.05	KEITHLY-WILLIAMS SEEDS	KEITHLY-WILLIAMS SEEDS	\$ 7,181.32
6.S2950.00.000.0246.10	TALAL N & PATRICIA F ELHAJ, MD	TALAL N & PATRICIA F ELHAJ MD	\$ 4,000.00
7.S3975.10.000.0036.00	NATIONS DIRECT LOAN	LAND TITLE USA	\$ 3,718.77
8.S6660.99.000.0001.00	SAVANNAH STUDIO PARTNERSHIP	SAVANNAH STUDIO 6 MOTEL	\$ 2,954.14
9.T2100.00.241.0003.07	SOUTH TEXAS ELECTRIC COOPERATIVE	SOUTH TEXAS ELECTRIC	\$ 2,609.50
10.W0100.00.031.0010.00	VALLEY WEST PLAZA	IBC	\$ 2,644.74



APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE		Collecting tax for: (Tax Units) GHD-SST-DRI-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWL-JCC					
Present mailing address (number and street) P O BOX 178		Phone (area code and number) (956) 318-2157					
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 and address	Owner's name OBRA HOMES * <i>paid: Chase Home Finance</i>						
	Present mailing address (number and street) PO BOX 3008						
	City, town or post office, state, ZIP code MCALLEN, TX 78502	Phone (area code and number)					
Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): BRIAR GROVE UT 1 LT 36						
	Address or location of property R697216 *						
	Account number of property: B4235.01.000.0036.00 *	Tax receipt number:					
	OR						
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	\$ 3141.80 *	\$ 3141.80 *
	2.					\$	\$
	3.					\$	\$
	4.					\$	\$
	5. TOTAL					\$	\$ 3141.80 *
Taxpayer's reason for refund (attach supporting documentation): AS PER CHASE RECEIVED INCORRECT INFORMATION THAT CAUSED THEM TO INADVERTENTLY PAY INCORRECT ACCOUNT							
HF Account paid already							
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 Priscilla D. Clift	Date of application for tax refund 2-27-09					
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: JE 3-30-09				
	Authorized officer sign here [Signature]	Date 4/18/09					
	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 [Signature]	Date 3/13/09					

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address

Owner's name *Payer*
A 2 Z LIQUORS LLC * *owner: Santiago O + Azareth Alois*

Present mailing address (number and street)
1217 E FERGUSON

City, town or post office, state, ZIP code
PHARR, TX 78577

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **L R BELL**

Step 2: Describe the property

Address or location of property:
R205753 *

Account number of property:
L0200.00.000.0004.00⁶ OR Tax receipt number:

MAR 17 2009

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	2008	12/24 / 08	\$2780.92	\$ 3384.95 +
2.		/	\$ 6165.87	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 3384.95 +

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

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: *A. Alois* Date of application for tax refund: **3-10-09**

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: **JF 3-30-09**

Authorized officer: *[Signature]* Date: **4/2/09**

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: **3/26/09**

3/27

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE		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) P O BOX 178		City, town or post office, state, ZIP code EDINBURG TX 78540-0178				
		Phone (area code and number) (956) 318-2157				
To apply for a tax refund, the taxpayer must complete the following						
Step 1: Owner's name and address	Owner's name <i>payer</i> UNIVISION MANGEMENT CO *		<i>owner: Univision Radio Broadcasting</i>			
	Present mailing address (number and street) 200 S 10TH ST STE 600					
	City, town or post office, state, ZIP code MCALLEN, TX 78501			Phone (area code and number) 956-631-5499		
Legal description (or attach copy of the tax bill or tax receipt): SUPPLIES FURNITURE						
Step 2: Describe the property	Address or location of property:					
	P669313 †					
	Account number of property:			Tax receipt number:		
	M2400.99.000.000A.87 †			OR		
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	
	1. ALL ENTITIES		2008		1/30 / 2009	
	2.				/	
	3.				/	
	4.				/	
	5. TOTAL				/	
				Amount of Taxes Paid	Amount of Tax Refund Requested	
				\$ 18,605.07	\$ 18605.07 †	
				\$	\$	
				\$	\$	
				\$	\$	
				\$	\$ 18605.07 †	
Taxpayer's reason for refund (attach supporting documentation): QP Duplicate						
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."					
	sign here	Signature <i>[Signature]</i>			Date of application for tax refund 3/17/09	
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: JE 3-30-09	
	sign here	Authorized officer <i>[Signature]</i>			Date 3/18/09	
	sign here	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) <i>[Signature]</i>			Date 3/26/09	

3/27

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name TARI, INC *	
	Present mailing address (number and street) 426 S STAPLES	
	City, town or post office, state, ZIP code CORPUS CHRISTI, TX 78401	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **MCCOLL TRACT**

Step 2: Describe the property	Address or location of property:	
	R231071 *	
	Account number of property: M2650.00.005.0004.30 *	Tax receipt number:

OR

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		2008	1/30 / 2009	\$ 11,011.77
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 11011.77 *

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

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 sign here [Signature]	Date of application for tax refund 3/9/09

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: JE 3-30-09
	Authorized officer sign here [Signature]	Date 4/18/09	
	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 [Signature]	Date 3/23/09	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name KEITHLY-WILLIAMS SEEDS *
	Present mailing address (number and street) PO BOX 177
	City, town or post office, state, ZIP code HOLTVILLE, CA 92250

Phone (area code and number)

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


Step 2: Describe the property	Address or location of property: P696052 *
	Account number of property: M3870.99.000.0017.05 *
	Tax receipt number:
	OR

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	2008	1/12	/ 09	\$ 1795.33
2.			/	\$ 8976.65	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 7181.32 +

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

HF

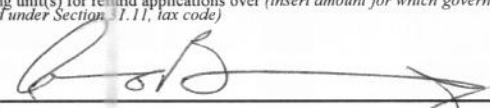
Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."
----------------------------------	--

Signature sign here 	Date of application for tax refund 3/9/09
---	---

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: JE 3-30-09
---	--	--

Authorized officer sign here 	Date 4/8/09
---	-----------------------

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 3/26/09
---	------------------------

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name TALAL N & PATRICIA ELHAJ, MD
	Present mailing address (number and street) 2606 E GRIFFIN PKWY
	City, town or post office, state, ZIP code MISSION, TX 78572
	Phone (area code and number) 956. 583-0182

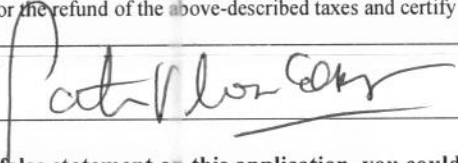
Legal description (or attach copy of the tax bill or tax receipt): **JOHN H SHARY**

Step 2: Describe the property	Address or location of property:
	R281246
	Account number of property: S2950.00.000.0246.10
	Tax receipt number: OR

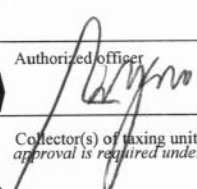
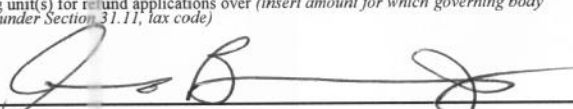
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2008	1/22	/ 2009	\$ 4000.00
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4000.00

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

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 3-6-09

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: JE 3-30-09
	Authorized officer 	Date 4/8/09	
	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 3/13/09	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	Phone (area code and number) (956) 318-2157
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 and address	Owner's name NATIONS DIRECT LOAN SERVICING PAID BY: LAND TITLE USA ← <i>Send refund to:</i>
	Present mailing address (number and street) PO BOX 3008 <i>318 E McINTURE EDINBURG TX 78541</i>
	City, town or post office, state, ZIP code MCALLEN, TX 78502 Phone (area code and number) 383-1656 DIANA

Legal description (or attach copy of the tax bill or tax receipt): **SOL BRILLA UT 10 LOT 36**

**Step 2:
Describe the
property**

Address or location of property:
R645325

Account number of property: **S3975.10.000.0036.00** OR **12626526** 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	2008	12/16 / 08	\$ 1737.86	\$ 1737.86
2. ALL ENTITIES	2007	12/16 / 08	\$ 1980.91	\$ 1980.91
3.		/	\$	\$
4.		/	\$	\$
5.		/	\$ TOTAL	\$ 3718.77

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR. APPLY TO ACCT#**
C9387.00.000.0060.00 GF#41850 R643101
MM

**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: *[Handwritten Signature]* Date of application for tax refund: **03/10/09**

sign here → **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 Approved Disapproved

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: **JE 3-27-09**

Authorized officer: *[Handwritten Signature]* Date: **4/8/09**

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): *[Handwritten Signature]* Date: **3/12/09**

sign here → **sign here**

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name <i>payer</i> SAVANNAH STUDIO 6 MOTEL C/O W.L.S INTEREST INC <i>owner: Savannah Studio Partnership LTD</i>
	Present mailing address (number and street) 3401 ALLEN PARKWAY STE 200
	City, town or post office, state, ZIP code HOUSTON, TX 77019

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): FURNITURE FIXTURES & EQUIP	
	Address or location of property:	
	P649831 +	
	Account number of property: S6660.99.000.0001.00 +	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	2008	1/20 / 2009	\$ 2954.14	\$ 2954.14 +
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 2954.14 +
Taxpayer's reason for refund (attach supporting documentation): OR Duplicate					
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 sign here <i>Stacy Mena</i>	Date of application for tax refund 3-10-09
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: JE 3-30-09
	Authorized officer sign here <i>[Signature]</i>	Date 4/8/09	
	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 <i>[Signature]</i>	Date 3/26/09	

3/27

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name SOUTH TEXAS ELECTRIC COOPERATIVE, INC[†]
	Present mailing address (number and street) PO BOX 119
	City, town or post office, state, ZIP code NURSERY, TX 77976
	Phone (area code and number) 361-575-6491 Karen Terry

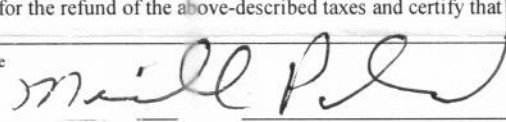
Legal description (or attach copy of the tax bill or tax receipt): **TEX MEX SURVEY**



Step 2: Describe the property	Address or location of property:
	R638094 †
	Account number of property: T2100.00.241.0003.07 †
	Tax receipt number: OR

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	2008	1/20	/ 2009	\$ 1722.50
2.			/	\$ 4332.00	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2609.50 †

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

HF

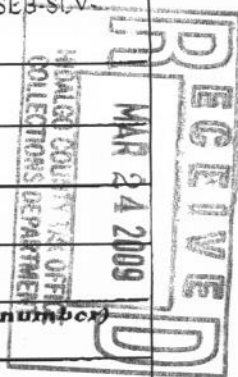
Step 4: sign the form	"I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct."	
sign here	Signature 	Date of application for tax refund 3/9/09
If you make a false statement on this application, you could be found guilty 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 3-20-09</u>
	sign here	Authorized officer 	Date 4/8/09
	sign here	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 3/26/09

3/27

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSI-SWL-ICC
Present mailing address (number and street) P O BOX 178	Phone (area code and number) (956) 318-2157
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 and address
 Owner's name: **VALLEY WEST PLAZA PAID BY: IBC**
 Present mailing address (number and street): **7208 W EXPWY 83**
 City, town or post office, state, ZIP code: **MISSION, TX 78572-0000**
 Phone (area code and number):

Legal description (or attach copy of the tax bill or tax receipt): **WEST ADDN TO SHARYLAND N330' W 528' LOT 3**

Step 2:
Describe the property
 1-10 4.0AC NET
 Address or location of property:
R317503
 Account number of property: **W0100.00.031.0010.00** OR **12616936**
 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	2008	12/15 / 08	\$ 2644.74 *	\$ 2644.74 *
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5.		/	\$ TOTAL	\$ 2644.74 *

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR. REFUND DUE BACK TO MORTGAGE.**
MM

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."

sign here **Signature** *Cristina Martinez* **Date of application for tax refund** **3/20/09**

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 3-30-09**

sign here **Authorized officer** *[Signature]* **Date** **4/8/09**

sign here **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** **3/29/09**

3/27

AI-15143

6.B.

TAX OFFICE REFUNDS

CC CONSENT

Date: 04/28/2009
 Submitted By: Hilda Fuentes, TAX OFFICE
 Submitted For: Hilda Fuentes
 Department: TAX OFFICE
 Agenda Category: Tax Refunds

Information

CAPTION

ACCT#	PROPERTY OWNER	PAYER	AMT
B2550.00.000.0057.00	Ochoa, Rafael & Elia	Rafael or Elia Ochoa	\$3162.62
C4145.00.000.0001.00	Parr William S	Access Mini Storage	\$12996.11
C7883.99.000.0004.21	Conn Applicances	Conn's	\$3379.55
C8230.04.011.0001.00	RD3J	Raul Marquez Md Pa	\$7538.24
J7650.00.000.0001.01	Clearview Weslaco	Clearview Weslaco	\$7185.58
K2400.00.000.0032.00	Rock Leasing Ltd	Rock Leasing	\$6662.74
L1721.00.000.0001.00	Plata Properties Inc	Plata Properties	\$4327.53
M1950.99.042.0007.00	Mendiola Investments Inc	Edwards Abstract	\$4106.90
M2400.99.000.000A.53	Tower Club McAllen Inc	Ofsman E Quitana	\$4221.81
M2650.00.004.0007.06	The Practice Tee Driving	The Practice Tee	\$10449.74
M2650.00.004.0007.06	The Practice Tee Driving	The Practice Tee	\$10114.24
M2650.00.004.0007.06	The Practice Tee Driving	The Practice Tee	\$9142.19
O6500.00.000.0016.00	Sweeney Francis	Cantu Alonzo	\$5825.01
P6400.99.000.0000.36	Lamar Advertising	The Lamar Co	\$3468.11
P7455.00.000.000E.00	Jaime Medrano Properties	Jaime Medrano Md Pa	\$4850.08
S2950.00.000.0495.30	SW 11 International LLC	Secundino de Lama	\$2504.37
S4764.00.000.0002.00	De Dios Angelito & Maria	Angelito De Dios & Maria	\$4835.59
T3405.00.000.0024.00	Escamilla Henry & Katy	Escamilla Henry & Katy	\$2645.98
W4260.99.000.0003.17	Aaron's Rental Purchase	Aaron's Rental	\$5193.76

BACKGROUND

Fiscal Impact

Attachments

- Link: [frnt pg](#)
- Link: [accts](#)
- Link: [OCHOA](#)
- Link: [PARR](#)
- Link: [CONN](#)
- Link: [RD3J](#)
- Link: [CLEARVIEW](#)

Link: [ROCK](#)

Link: [PLATA](#)

Link: [MENDIOLA](#)

Link: [TOWER](#)

Link: [PRACTICE](#)

Link: [PRACTICE TEE](#)

Link: [PRACTICE TEE DRIVING](#)

Link: [SWEENEY](#)

Link: [LAMAR](#)

Link: [JAIME](#)

Link: [SW 11](#)

Link: [DE DIOS](#)

Link: [ESCAMILLA](#)

Link: [AARON'S](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/22/2009 03:09 PM	APRV
2	Perla Lopez	Perla Lopez	04/22/2009 05:07 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

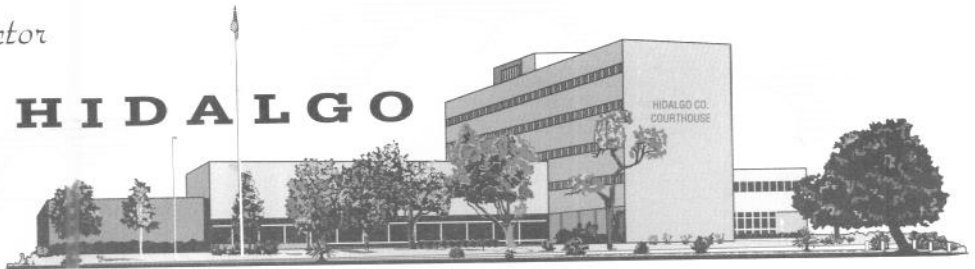
Form Started By: Hilda Fuentes

Started On: 04/22/2009 01:28 PM

Final Approval Date: 04/24/2009

Office of Tax Assessor-Collector

COUNTY of HIDALGO



EDINBURG, TEXAS 78540-0178

P.O. Box 178

(956) 318-2160

FAX (956) 318-2733

Armando Barrera Jr. RTA

ASSESSOR AND COLLECTOR

April 22, 2009

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,

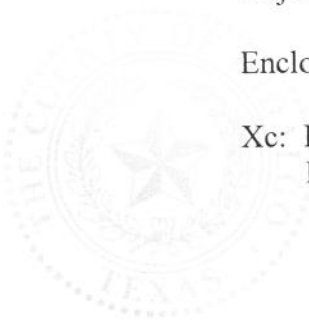
A handwritten signature in black ink, appearing to read 'Armando Barrera, Jr.' with a stylized flourish at the end.

Armando Barrera, Jr. RTA

Abj: mm

Enclosure

Xc: Hidalgo County Auditor
Raymundo Eufrazio, CPA



Office of Tax Assessor-Collector

COUNTY of HIDALGO



Armando Barrera Jr. *RTJA*

ASSESSOR AND COLLECTOR

EDINBURG, TEXAS 78540-0178

P.O. Box 178
(956) 318-2160
FAX (956) 318-2733

ACCOUNT NUMBER	PROPERTY OWNER	PAYER	AMOUNT
1. B2550.00.000.0057.00	OCHOA, RAFAEL & ELIA	RAFAEL OR ELIA OCHOA	\$ 3,162.62
2. C4145.00.000.0001.00	PARR, WILLIAM STEVE	ACCESS MINI STORAGE	\$ 12,996.11
3. C7883.99.000.0004.21	CONN APPLICANCES	CONN'S	\$ 3,379.55
4. C8230.04.011.0001.00	RD3J	RAUL MARQUEZ MD PA	\$ 7,538.24
5. J7650.00.000.0001.01	CLEARVIEW WESLACO	CLEARVIEW WESLACO	\$ 7,185.58
6. K2400.00.000.0032.00	ROCK LEASING LTD	ROCK LEASING	\$ 6,662.74
7. L1721.00.000.0001.00	PLATA PROPERTIES INC	PLATA PROPERTIES	\$ 4,327.53
8. M1950.99.042.0007.00	MENDIOLA INVESTMENTS INC	EDWARDS ABSTRACT	\$ 4,106.90
9. M2400.99.000.000A.53	TOWER CLUB MCALLEN INC	OFSMAN E QUITANA	\$ 4,221.81
10. M2650.00.004.0007.06	THE PRACTICE TEE DRIVING RANGE	THE PRACTICE TEE	\$ 10,449.74
11. M2650.00.004.0007.06	THE PRACTICE TEE DRIVING RANGE	THE PRACTICE TEE	\$ 10,114.24
12. M2650.00.004.0007.06	THE PRACTICE TEE DRIVING RANGE	THE PRACTICE TEE	\$ 9,142.19
13. O6500.00.000.0016.00	SWEENEY FRANCIS	CANTU ALONZO	\$ 5,825.01
14. P6400.99.000.0000.36	LAMAR ADVERTISING OF BROWNSVILLE	THE LAMAR COMPANIES	\$ 3,468.11
15. P7455.00.000.000E.00	JAIME MEDRANO PROPERTIES LLC	JAIME MEDRANO MD PA	\$ 4,850.08
16. S2950.00.000.0495.30	SW 11 INTERNATIONAL LLC	SECUNDINO DE LAMA SUAREZ	\$ 2,504.37
17. S4764.00.000.0002.00	DE DIOS ANGELITO & MARIA S FAMILY	ANGELITO DE DIOS & MARIA SOCORI	\$ 4,835.59
18. T3405.00.000.0024.00	ESCAMILLA HENRY & KATY	ESCAMILLA HENRY & KATY	\$ 2,645.98
19. W4260.99.000.0003.17	AARON'S RENTAL PURCHASE	AARON'S RENTAL	\$ 5,193.76



APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name OCHOA, RAFAEL & ELIA PAYER: RAFAEL OR ELIA OCHOA
	Present mailing address (number and street) RR 29 BOX 555
	City, town or post office, state, ZIP code MISSION, TX 78572
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **BENTSEN GROVES ALL LT 57 & S2.67 AC LT 59**

Step 2: Describe the property	Address or location of property:
	R123954
	Account number of property:
	B2550.00.000.0057.00
	Tax receipt number:
	OR

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	2006	1/30	/ 2007	\$ 3754.30
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3162.62
Taxpayer's reason for refund (attach supporting documentation): SUPP#27					
CORRECTION FROM N TO Y ON IMPS					
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 sign here	Date of application for tax refund
<p>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.</p>		

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>SE 4-17-09</u>
	Authorized officer sign here		Date 4/21/09
	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 4/20/09

s/b 4.2.09

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157


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

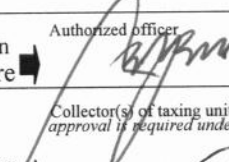
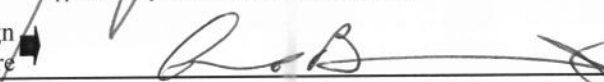
Step 1: Owner's name and address	Owner's name PARR, WILLIAM STEVE † PAYER: WILLIAM STEVE PARR ACCESS MINI STORAGE †
	Present mailing address (number and street) 2701 W UNIVERSITY DR
	City, town or post office, state, ZIP code EDINBURG, TX 78539
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **CHEYENNE COMMERCIAL PARK LT 1**

Step 2: Describe the property	Address or location of property:
	R638483 †
	Account number of property: Tax receipt number:
	C4145.00.000.0001.00 † OR

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	2008 †	2/27 / 2009	\$ 12996.13 †	\$ 12996.11 †
	2.		1/30 / 2009	\$ 25,142.05	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 12996.11 †
Taxpayer's reason for refund (attach supporting documentation): SUPP#6					
THIS IS AN INCORRECT APPRAISAL ERROR FOR 2008 YEAR SECTION 25.25(H)					
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 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 4-17-09</u>
	Authorized officer sign here 	Date <u>4/20/09</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>4/20/09</u> S/b 4-2-09	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157


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

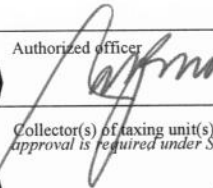

Step 1: Owner's name and address	Owner's name CONN APPLICANCES #41 † PAYER:CONN'S †
	Present mailing address (number and street) 3295 COLLEGE STE STE A
	City, town or post office, state, ZIP code BEAUMONT, TX 77701
	Phone (area code and number)

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

Step 2: Describe the property	Address or location of property: P684492 †
	Account number of property: C7883.99.000.0004.21 †
	Tax receipt number: OR

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	2008 †	1/30 / 2009	\$ 37174.99 †	\$ 3379.55 †
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3379.55 †
Taxpayer's reason for refund (attach supporting documentation): SUPP#6					
SUBMITTED/ENTERED WRONG GRANTED 2008 10% RENDITION PENALTY WAIVED					
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 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: JF 4-17-09
	Authorized officer sign here 	Date 4/21/09	
	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 4/20/09 s/b 4-2-09	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name RD3J + PAYER: RAUL MARQUEZ MD PA +
	Present mailing address (number and street) 2402 CORNERSTONE BLVD
	City, town or post office, state, ZIP code EDINBURG, TX 78539
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **CORNERSTONE MEDICAL PARK PH 4 LT 1**


Step 2: Describe the property	Address or location of property:
	R652753 +
	Account number of property:
	C8230.04.011.0001.00 +
	Tax receipt number:
	OR

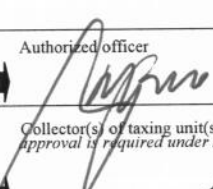

Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2008 +	1/23	/ 2009	\$ 23117.23 +
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 7538.24 +

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

THIS IS AN INCORRECT APPRAISAL ERROR FOR 2008 YEAR SECTION 25.25(H)

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 sign here 	Date of application for tax refund
<p>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.</p>		

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 4-17-09</u>
	Authorized officer sign here 	Date	<u>4/21/09</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>4/21/09</u>

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name CLEARVIEW WESLACO LLP ✦ PAYER: CLEARVIEW WESLACO CP ✦
	Present mailing address (number and street) 2311 CEDAR SPRINGS RD STE 100
	City, town or post office, state, ZIP code DALLAS, TX 75201

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **JONES-DAVIS -HARREN**


Step 2: Describe the property	Address or location of property:
	R719831 ✦
	Account number of property: Tax receipt number:
	J7650.00.000.0001.01 ✦ OR

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	2008 ✦	1/30	/ 2009	\$ 7185.58 ✦	\$ 7185.58 ✦
	2.			/	\$	\$
	3.			/	\$	\$
	4.			/	\$	\$
	5. TOTAL			/	\$	\$ 7185.58 ✦

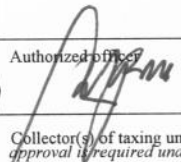

Taxpayer's reason for refund (attach supporting documentation): **SUPP#7**

REF ACCT-ALL PROPERTY DBL APPRAISED W/J7650.00.000.0001.00 - Taxes due

HF Apply to R520325 full amount with 1-30-09 date

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: JE 4-17-09
	Authorized officer sign here 	Date 4/21/09	
	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 4/2/09	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name ROCK LEASING LTD † PAYER:ROCK LEASING †
	Present mailing address (number and street) PO BOX 2553
	City, town or post office, state, ZIP code MCALLEN, TX 78502
	Phone (area code and number)

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


Step 2: Describe the property	Address or location of property: R201876 †
	Account number of property: K2400.00.000.0032.00 †
	Tax receipt number:
	OR

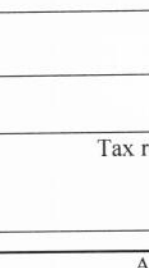
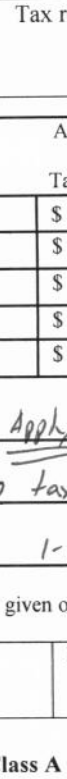
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested		Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2008 †	1/30	/	2009	\$ 39548.25 †
2.			/		\$	\$
3.			/		\$	\$
4.			/		\$	\$
5. TOTAL			/		\$	\$ 6662.74 †

Taxpayer's reason for refund (attach supporting documentation): **SUPP#6** *Apply full amount to 2007*

OMITTED IMPS *TAXES due taxes R201876 with*

HF *1-30-09 date*

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 4-17-09</u>
	Authorized officer sign here 	Date 4/21/09	
	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 4/20/09 5/10 4-2-09	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157


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

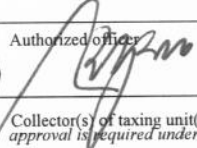

Step 1: Owner's name and address	Owner's name PLATA PROPERTIES INC †
	Present mailing address (number and street) 1220 CASTILLE CT
	City, town or post office, state, ZIP code EDINBURG, TX 78539
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LA PLAZITA SEE LT 1 THRU 10**

Step 2: Describe the property	Address or location of property:
	R696122 †
	Account number of property: Tax receipt number:
	L1721.00.000.0001.00 † OR

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	2008 †	1/30 / 2009	\$ 19255.19 †	\$ 4327.53 †
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 4327.53 †
Taxpayer's reason for refund (attach supporting documentation): SUPP#7					
INCL OF SOME PROP NON EXISTENT IMPS ARE @ 70% COMP AS PER PHYSICAL INSPECTION					
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 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: JE 4-17-09
	Authorized officer sign here 	Date 4/21/09	
	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 4/2/09	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name MENDIOLA INVESTMENTS INC † (PAYER:EDWARDS ABSTRACT) †
	Present mailing address (number and street) 501 S 17TH ST
	City, town or post office, state, ZIP code MCALLEN, TX 78501

Legal description (or attach copy of the tax bill or tax receipt): **ZERO 2008 GONE 12/31/07 INVENTORY FURN**


Step 2: Describe the property	Address or location of property:	
	P655532 †	
	Account number of property:	Tax receipt number:
	M1950.99.042.0007.00 †	OR

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	2008 †	12/05	/ 2008	\$ 4106.90 †
2.		12/31	/ 2008	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4106.90 †


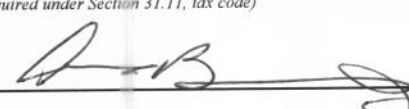
Taxpayer's reason for refund (attach supporting documentation): **SUPP#6**

SUBMITTED/ENTERED WRONG

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 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 4-17-09</u>
	Authorized officer sign here 	Date 4/21/09	
	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 4/21/09	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name TOWER CLUB MCALLEN, INC + PAYER: TOWER CLUB & OFSMAN E QUITANA +
	Present mailing address (number and street) 200 S 10TH ST STE 1700
	City, town or post office, state, ZIP code MCALLEN, TX 78501


Phone (area code and number)

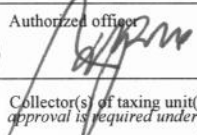
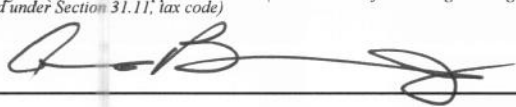
Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY FURNITURE**

Step 2: Describe the property	Address or location of property:
	P615403 +
	Account number of property: M2400.99.000.000A.53 +
	Tax receipt number: OR

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 ENTITES	2006 +	/	\$ 9,373.88	\$ 4221.81 +
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 4221.81 +

Taxpayer's reason for refund (attach supporting documentation): **SUPP #28 1st & 2nd payments by Tower club, SUBMITTED/ENTERED WRONG 3^d payment by Quintana, 1st & 2nd funds paid receive new HF taxes due; refund \$4,221.81 to Quintana**

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 4-17-09</u>
	Authorized officer sign here 	Date <u>4/20/09</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>4/2/09</u>

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name THE PRACTICE TEE DRIVING RANGE * PAYER: THE PRACTICE TEE Driving Range + Golf + Learning Center LLC
	Present mailing address (number and street) 1100 W NOLANA
	City, town or post office, state, ZIP code PHARR, TX 78577
	Phone (area code and number) 702-9600 Martha

Legal description (or attach copy of the tax bill or tax receipt): **MCCOLL TRACT**

Step 2: Describe the property

Address or location of property:
R669533 +

Account number of property: **M2650.00.004.0007.06 +** Tax receipt number: **OR**


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 +	1/27 & 28 / 2006	\$ 24320.82 +	\$ 10449.74 +
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 10449.74 +

Taxpayer's reason for refund (attach supporting documentation): **SUPP#36 Apply full amount to SUBMITTED/ENTERED WRONG 2008 R669533 with 1-31-09 date 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."

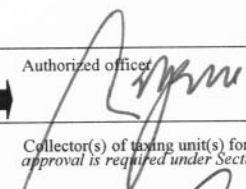
Signature:  Date of application for tax refund: _____

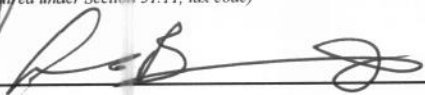
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.10.

Step 5: Tax refund Determination

This tax refund is Approved Disapproved

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: JE 4-17-09

Authorized officer:  Date: **4/21/09**

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: **4/21/09**

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address

Owner's name: **THE PRACTICE TEE DRIVING RANGE † PAYER: THE PRACTICE TEE Driving Range & Golf Learning center LLC**

Present mailing address (number and street): **1100 W NOLANA**

City, town or post office, state, ZIP code: **PHARR, TX 78577**

Phone (area code and number):

Legal description (or attach copy of the tax bill or tax receipt): **MCCOLL TRACT**

Step 2: Describe the property

Address or location of property:

R669533 †

Account number of property: **M2650.00.004.0007.06 †**

Tax receipt number:

OR

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	2006 †	1/27 & 28 / 2006	\$ 23516.67 †	\$ 10114.24 †
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 10114.24 †

Taxpayer's reason for refund (attach supporting documentation): **SUPP#28 Apply full amount to SUBMITTED/ENTERED WRONG 2008 R669533 with 1-31-09 date**

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: **sign here** [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 4-17-09**

Authorized officer: **sign here** [Signature] Date: **4/21/09**

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** [Signature] Date: **4/2/09**

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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


Step 1: Owner's name and address	Owner's name THE PRACTICE TEE DRIVING RANGE* PAYER: THE PRACTICE TEE Driving Range Golf
	Present mailing address (number and street) 1100 W NOLANA Learning
	City, town or post office, state, ZIP code PHARR, TX 78577

Legal description (or attach copy of the tax bill or tax receipt): **MCCOLL TRACT**

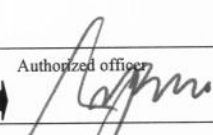
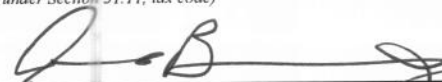
Step 2: Describe the property	Address or location of property:
	R669533 +
	Account number of property: M2650.00.004.0007.06 +
	Tax receipt number: OR

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 +	1/29&30 / 2008	\$ 22098.37 +	\$ 9142.19 +
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 9142.19 +

Taxpayer's reason for refund (attach supporting documentation): **SUPP#19 Apply \$ 7,142.55 to 2008**
SUBMITTED/ENTERED WRONG taxes with 1-31-09 date;
HF refund diff of \$ 1,999.64

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: JE 04-17-09
	Authorized officer sign here 	Date	4/21/09
	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	4/2/09

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE		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) P O BOX 178		Phone (area code and number) (956) 318-2157				
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 and address	Owner's name Francis SWEENEY, FRNACIS M MD PAYER: CANTU, ALONZO +					
	Present mailing address (number and street) PO BOX 2436					
	City, town or post office, state, ZIP code MCALLEN, TX 78502		Phone (area code and number)			
Legal description (or attach copy of the tax bill or tax receipt): ORANGEWOOD EAST LT 16 & LT 17						
Step 2: Describe the property	Address or location of property:					
	R562713 +					
	Account number of property:		Tax receipt number:			
	O6500.00.000.0016.00 +		OR			
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	2008 +	12/31 / 2008	\$ 19011.41 +	\$ 5825.01 +	
	2.		/	\$	\$	
	3.		/	\$	\$	
	4.		/	\$	\$	
	5. TOTAL		/	\$	\$ 5825.01 +	
Taxpayer's reason for refund (attach supporting documentation): SUPP#7						
THIS IS AN INCORRECT APPRAISAL ERROR FOR 2008 YEAR SECTION 25.25(H)						
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 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 4-17-09</u>		
	Authorized officer sign here				Date <u>4/21/09</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>4/21/09</u>	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name LAMAR ADVERTISING of Broussard Inc * PAYER: THE LAMAR COMPANIES +
	Present mailing address (number and street) 2001 INDUSTRIAL WAY
	City, town or post office, state, ZIP code SAN BENITO, TX 78586

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LEASED OUTDOOR ADVERTISING**


Step 2: Describe the property	Address or location of property:
	P259830 +
	Account number of property: P6400.99.000.0000.36 +
	Tax receipt number: OR

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	2008 +	1/29	/ 2009	\$ 38149.23+
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 3468.11 +

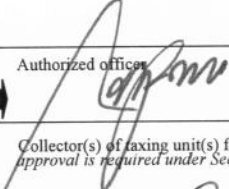
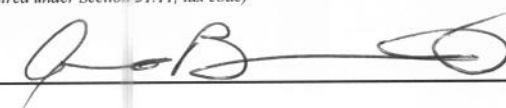
Taxpayer's reason for refund (attach supporting documentation): **SUPP#6**

SUBMITTED/ENTERED WRONG GRANTED 10% RENDITION PENALTY WAIVED

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 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: JE 4-17-09
	Authorized officer sign here 	Date 4/21/09	
	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 4/20/09	

s/b 4-2-09

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name JAIME MEDRANO PROPERTIES LLC[†] PAYER: JAIME MEDRANO PROPERTIES MD. P.A[†]
	Present mailing address (number and street) 2804 SANTA OLIVIA
	City, town or post office, state, ZIP code MISSION, TX 78572

Legal description (or attach copy of the tax bill or tax receipt): **PLAZA EL DABINAL CONDO**


Step 2: Describe the property	Address or location of property: R717538[†]
	Account number of property: P7455.00.000.000E.00[†]
	Tax receipt number: OR

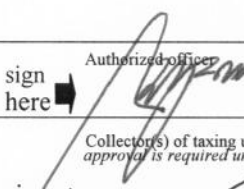
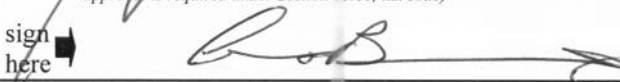
Step 3: Give the tax payment information	Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
	1. ALL ENTITIES	2008 [†]	12/24	/ 2008	\$ 14014.18 [†]
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 4850.08 [†]

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

WRONG LAND RATE APPLIED

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 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 4-17-09</u>
	Authorized officer sign here 	Date 4/20/09
	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 4/20/09


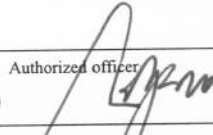
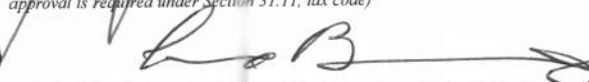
s/b 4-2-09

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE		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) P O BOX 178		Phone (area code and number) (956) 318-2157				
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 and address	Owner's name SW 11 INTERNATIONAL LLC † PAYER: SW 11 INTERNATIONAL LLC Secundino De-Lana - Suarez					
	Present mailing address (number and street) 2204 MONACO DR					
	City, town or post office, state, ZIP code MISSION, TX 78573		Phone (area code and number)			
Legal description (or attach copy of the tax bill or tax receipt): JOHN H SHARY						
Step 2: Describe the property	Address or location of property: R282834 †					
	Account number of property: S2950.00.000.0495.30 †		Tax receipt number:			
	OR					
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	2008 †	1/23 / 09	\$ 2520.94 †	\$ 2504.37 †	
	2.		/	\$	\$	
	3.		/	\$	\$	
	4.		/	\$	\$	
	5. TOTAL		/	\$	\$ 2504.37 †	
	Taxpayer's reason for refund (attach supporting documentation): SUPP#7					
GRANT AH USE WAS REMOVED WITHOUT NOTICE						
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 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 4-17-09</u>		
	Authorized officer sign here				Date 4/20/09	
	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 4/21/09	

4/7

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE		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) P O BOX 178		Phone (area code and number) (956) 318-2157				
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 and address	Owner's name DE DIOS, ANGELITO & MARIA S FAMLY LP ← PAYER: DE DIOS, ANGELITO					
	Present mailing address (number and street) 3807 EL JARDIN CT					
	City, town or post office, state, ZIP code MISSION, TX 78572		Phone (area code and number)			
Legal description (or attach copy of the tax bill or tax receipt): SOUTH TEXAS MEDICAL PARK LT 2						
Step 2: Describe the property	Address or location of property:					
	R287808 *					
	Account number of property:		Tax receipt number:			
	S4764.00.000.0002.00 *		OR			
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	2008 *	1/30 / 2009	\$ 34690.15 *	\$ 4835.59 *	
	2.		/	\$	\$	
	3.		/	\$	\$	
	4.		/	\$	\$	
	5. TOTAL		/	\$	\$ 4835.59 *	
Taxpayer's reason for refund (attach supporting documentation): SUPP#6						
CORRECTION DUE TO FAILURE TO SEND REEQUIRED NOTICE SECTION 41.411						
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 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					
	Authorized officer sign here 				Date 4/20/09	
	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 4/20/09	

s/b 4.2.09

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name ESCAMILLA HENRY & KATY[†] PAYER: ESCAMILLA HENRY & Katy[†]
	Present mailing address (number and street) 3605 LAS COLINAS LN
	City, town or post office, state, ZIP code MISSION, TX 78573

Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **THE HIGHLANDS LT 24**

Step 2: Describe the property	Address or location of property:
	R672509[†]
	Account number of property:
	T3405.00.000.0024.00[†]

Tax receipt number:


OR

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	2008 [†]	1/28	/ 2009	\$ 10528.48 [†]
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 2645.98 [†]



Taxpayer's reason for refund (attach supporting documentation): **SUPP#7**

SUBMITTED/ENTERED WRONG

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 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 4-17-09</u>
	Authorized officer sign here 	Date <u>4/21/09</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>4/21/09</u>	

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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) P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone (area code and number) (956) 318-2157

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

Step 1: Owner's name and address	Owner's name AARON'S RENTAL PURCHASE* PAYER: AARON'S RENTAL*
	Present mailing address (number and street) 1015 COBB PLACE BLVD NW
	City, town or post office, state, ZIP code KENNESAW, GA 30144

Phone (area code and number)

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


Step 2: Describe the property	Address or location of property:
	P668000 *
	Account number of property: W4260.99.000.0003.17 *
	Tax receipt number: OR

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	2008 *	1/30	/ 2009	\$ 20114.63*
2.			/	\$	\$
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 5193.76 *


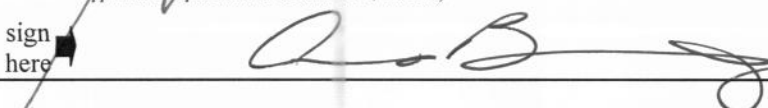
Taxpayer's reason for refund (attach supporting documentation): **SUPP#7**

FAILURE TO RECEIVE NOTICE CORRECTION BASED ON FAILURE TO GIVE DUE PROCESS

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 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 4-17-09</u>
	Authorized officer sign here 	Date <u>4/21/09</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>4/2/09</u>

**Homebuyer Assistance Program Contract
CC CONSENT**

Date: 04/28/2009
 Submitted By: Estella Webber, URBAN COUNTY
 Department: URBAN COUNTY
 Agenda Category: Urban County

Information

CAPTION

Request approval to enter into ONE (1) "Homebuyer Assistance Program" Contract under the Home Program.

BACKGROUND

The applicant below has been found eligible to receive closing cost/down payment assistance under the HOME - Homebuyer Assistance Program. Approval is being requested to enter into contract with the following family:

APPLICANT	FUNDING YEAR	GRANT AMOUNT	LENDER	LEGAL DESCRIPTION
Jose & Maria Hernandez	FY 2005	\$5,000	USDA	Lot 82 Quail Hollow North Weslaco, Texas

Fiscal Impact

Attachments

No file(s) attached.

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/21/2009 10:47 AM	APRV
2	Veronica Lopez	Veronica Lopez	04/21/2009 03:14 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW
Form Started By: Estella Webber			Started On: 04/21/2009 09:34 AM	
Final Approval Date: 04/24/2009				

**Amendment of Homebuyer Assistance Program contract
CC CONSENT**

Date: 04/28/2009
 Submitted By: Estella Webber, URBAN COUNTY
 Department: URBAN COUNTY
 Agenda Category: Urban County

Information

CAPTION

Request approval to amend ONE (1) "Homebuyer Assistance Program " Contract for a client previously approved under the Home Program.

BACKGROUND

The Hidalgo County Commissioners' Court approved Mr. Victor Yanez for a closing cost/down payment assistance grant in the amount of \$7,500 on January 6, 2009. Since then, Mr. Yanez was able to acquire a loan with a lower interest rate and payment through AA Genesis Investments. The Urban County Program processed a re-certification on April 16, 2009 due to the change in loan terms. Recently, the U.S. Department of Housing and Urban Development (HUD) released new income limits for fiscal year 2009. Due to this change, it has been determined that Mr. Yanez now qualifies for a deferred grant amount of \$10,000.

The Urban County Program respectfully requests approval to amend contract with the new deferred grant amount.

APPLICANT	FUNDING YEAR	GRANT AMOUNT	LENDER	LEGAL DESCRIPTION
VICTOR YANEZ	FY 2005	\$10,000	FNB/Donna Housing Authority	LOT 114 WEST DONNA ESTATES NO 2 DONNA TX

Fiscal Impact

Attachments

No file(s) attached.

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/21/2009 02:07 PM	APRV
2	Veronica Lopez	Veronica Lopez	04/21/2009 03:15 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Estella Webber
 Started On: 04/21/2009 01:48 PM
 Final Approval Date: 04/24/2009

AI-15123

8.A.

Monthly Financial Report for the Month of March 2009.

CC CONSENT

Date: 04/28/2009
Submitted By: Becky Morales, AUDITOR'S OFFICE
Submitted For: Ray Eufrazio
Department: AUDITOR'S OFFICE
Agenda Category: Auditor's Office

Information

CAPTION

Approval of Monthly Financial Report for the Month of March 2009

BACKGROUND

Reports will be distributed before Commissioners' Court meeting.

Fiscal Impact

Attachments

No file(s) attached.

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/20/2009 03:19 PM	APRV
2	Veronica Lopez	Veronica Lopez	04/20/2009 03:40 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Becky Morales
Started On: 04/20/2009 11:11 AM
Final Approval Date: 04/24/2009

AI-15115

9.A.

**"As Built" drawings of the existing Courthouse to include annexes
CC CONSENT**

Date: 04/28/2009
Submitted By: Ramon Vela, PURCHASING DEPT.
Submitted For: Marty Salazar
Department: PURCHASING DEPT.
Agenda Category: Budget and Management

Information

CAPTION

Presentation for discussion, consideration, acceptance and approval of request for payment #3 for Invoice # 012-1668 (dated 03/31/09) in the total amount of \$ 25,000.00 as submitted by ERO Architects subject to County Auditor's's review and completion of processing procedures with authority for County Treasurer issue payment/check in connection with Contract # C-08-113-12-23 (PO # 619286) for: "As Built drawings of the existing Courthouse to includes Annexes and the surrounding Parking Areas & Sidewalks Project" (Phase II B: Needs Analysis and Programming).

BACKGROUND

Fiscal Impact

FISCAL YEAR: ACCT. #: 9-1100-415-00-115-002-0-334
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:
BUDGETARY IMPACT:
PO# 619286 has \$200,000.00 available as of 4/20/09.

Attachments

Link: [ERO Phase II Needs Anaysis and Programming](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/17/2009 04:20 PM	APRV
2	Dale Kennan	Dale Kennan	04/20/2009 02:00 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Ramon Vela
Started On: 04/17/2009 03:52 PM
Final Approval Date: 04/24/2009



300 S. 8th Street
 McAllen, TX 78501
 Tel.#956-661-0400 Fax#956-661-0401

Invoice

Date	Invoice #
3/31/2009	012-1668

APR 17 2009

C. J. [Signature]

Bill To
County of Hidalgo Attn: Ramon Vela Executive Officer to Commissioner's Court 2812 S. Business Hwy 281 Edinburg, TX 78539

P.O. No.	Terms	Project
	Net 30	09005-Hidalgo Courthouse Condition Assess

Phase II - Parts A & B = \$220,000 Contract Fee

Project Phase	Fee by Pha...	Prev. Billed	% Prev. Bill...	% This Bill	Total % Billed	Inv. Amt.
Phase II - A: Property Condition Assessment: Environmental Assessment	95,000.00	62,700.00	66.00%	0.00%	66.00%	0.00
Phase II - B: Needs Analysis and Programming	125,000.00	50,000.00	40.00%	20.00%	60.00%	25,000.00

Total	\$25,000.00
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AI-15134

9.B.

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

Date: 04/28/2009
Submitted By: Flora Vazquez, WORKERS' COMPENSATION
Department: WORKERS' COMPENSATION
Agenda Category: 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 and requesting approval of wire transfer for the period of:

03/01-15/2009	\$ 27,779.73
03/16-31/2009	\$ 62,732.71
TOTAL DUE:	\$ 90,512.44

BACKGROUND

Fiscal Impact

Attachments

- Link: [Inv 3/01-15/09](#)
- Link: [By Org 3-01-15-09](#)
- Link: [Certification 3-01-15-09](#)
- Link: [Inv 3-16-31-09](#)
- Link: [By Org 3-16-31-09](#)
- Link: [certification 03-16-31-2009](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/22/2009 08:14 AM	APRV
2	Dale Kennan	Dale Kennan	04/22/2009 04:25 PM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW
Form Started By: Flora Vazquez			Started On: 04/21/2009 02:46 PM	
Final Approval Date: 04/24/2009				

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

March 16, 2009

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

L HIDAL.WC
Invoice Number: 43865

Loss Replenishment

Re: Workers Compensation

Tristar Risk Management hereby certifies that the attached billings for losses paid 27,779.73
3/1-3/15/09 (Check#324156-324264) are in accordance with our contract with Hidalgo County
Exhibit A, dated July 1st

TOTAL CURRENT CHARGES \$ 27,779.73

Previous Balance Due \$112,560.71

Payments and Credits

03/04/09 Payment received - thank you 67,860.02CR

Total Payments and Credits \$ 67,860.02CR

Total Balance Due \$ 72,480.42

Due Upon Receipt

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

Custom Payment Total

Hidalgo County WC losses paid 3/1-3/15/09

Processed	Check Date	Chk/Vchr #	Claim Number	Claimant	Incident	Transaction Type	Payee	Dates of Service	Method	Amount
Alternate Organization 1 : Headstart										
Alternate Organization 1 Total:									50	5,674.84
Alternate Organization 1 : Hidalgo County										
Alternate Organization 1 Total:									147	22,104.89
Grand Total:									197	27,779.73

HIDALGO COUNTY BUDGET OFFICE/WORKERS' COMPENSATION DIVISION
CERTIFICATION OF WORKERS' COMP. CLAIMS PAID BY TRISTAR RISK MANAGEMENT
FOR THE PERIOD OF: March 1- 15, 2009

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 \$ 27,779.73.

TRISTAR is certifying to my office that it has paid Workers' Compensation Claims (Check # 324156-324264) on behalf of injured employees from 03/01/2009 to 03/15/2009:

- | | | |
|-----|-------------------------------------|---------------------|
| 1). | Hidalgo County | \$ <u>22,104.89</u> |
| 2). | Hidalgo County Headstart Program | \$ <u>5,674.84</u> |
| 3). | Community Service Agency | \$ <u>00.00</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 \$ 27,779.73.
Dept. of Budget & Management/Employee Benefits Section is requesting approval of this payment on the Commissioners' Court Agenda of April 28, 2009.

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) \$ 172,220.27

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 10th day of the following month.

Dilora Vazquez
Employee Benefits Manager

04/21/2009
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

April 1, 2009

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

L HIDAL.WC
Invoice Number: 44425

Loss Replenishment

Re: Workers Compensation

Tristar Risk Management hereby certifies that the attached billings for losses paid 62,732.71
3/16-3/31/09 (Check#324265-324464) are in accordance with our contract with Hidalgo
County Exhibit A, dated July 1st

TOTAL CURRENT CHARGES \$ 62,732.71

Previous Balance Due \$ 72,480.42

Payments and Credits

03/20/09 Payment received - thank you 44,700.69CR

Total Payments and Credits \$ 44,700.69CR

Total Balance Due \$ 90,512.44

Due Upon Receipt

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

Custom Payment Total

Hidalgo County WC losses paid 3/16-3/31/09

Processed	Check Date	Chk/Vchr #	Claim Number	Claimant	Incident	Transaction Type	Payee	Dates of Service	Method	Amount	
Alternate Organization 1 : Headstart											
Alternate Organization 1 Total:										120	19,283.23
Alternate Organization 1 : Hidalgo County											
Alternate Organization 1 Total:										315	43,449.48
Grand Total:										435	62,732.71

HIDALGO COUNTY BUDGET OFFICE/WORKERS' COMPENSATION DIVISION
CERTIFICATION OF WORKERS' COMP. CLAIMS PAID BY TRISTAR RISK MANAGEMENT
FOR THE PERIOD OF: March 16-31, 2009

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 \$ 62,732.71.

TRISTAR is certifying to my office that it has paid Workers' Compensation Claims (Check # 324265-324464) on behalf of injured employees from 03/16/2009 to 03/31/2009:

- | | | |
|-----|-------------------------------------|---------------------|
| 1). | Hidalgo County | \$ <u>43,449.48</u> |
| 2). | Hidalgo County Headstart Program | \$ <u>19,283.23</u> |
| 3). | Community Service Agency | \$ <u>00.00</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 \$ 62,732.71.
Dept. of Budget & Management/Employee Benefits Section is requesting approval of this payment on the Commissioners' Court Agenda of April 28, 2009.

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) \$ 137,267.29

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 10th day of the following month.

Julora Vazquez
Employee Benefits Manager

4/21/2009
Date

Dept. of Budget & Management Chief Administrator

Date

Commissioner's Court Approval

Date

**BLUE CROSS BLUE SHIELD HEALTH INSURANCE CLAIMS
CC CONSENT**

Date: 04/28/2009
Submitted By: Flora Vazquez, WORKERS' COMPENSATION
Department: WORKERS' COMPENSATION
Agenda Category: Budget and Management

Information

CAPTION

1. Approval to transfer \$814,965.41 to Hidalgo County Health Insurance bank account for Blue Cross Blue Shield of Texas Health Insurance Claims for periods:

03/07/09 - 03/13/09	\$ 199,982.14
03/14/09 - 03/20/09	\$ 322,251.12
03/21/09 - 03/27/09	\$ 210,952.66
03/28/09 - 03/31/09	\$ 81,779.49
TOTAL:	\$ 814,965.41

2. Requesting approval of wire transfer to cover claims paid.

BACKGROUND

Fiscal Impact

Attachments

Link: [03-07-2009 03-13-2009](#)

Link: [03-14-09 03-20-09](#)

Link: [03-21-09 03-27-09](#)

Link: [03-28-09 03-31-09](#)

Link: [Certification](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Budget & Management	Veronica Lopez	04/24/2009 08:03 AM	APRV
2	Dale Kennan	Dale Kennan	04/24/2009 11:05 AM	APRV
3	Auditor's Office		04/24/2009 05:21 PM	NEW
Form Started By: Flora Vazquez			Started On: 04/23/2009 04:39 PM	
Final Approval Date: 04/24/2009				



**BlueCross BlueShield
of Texas**

Group # 021185

Settlement ID:

Processed Date

Period

HIDALGO COUNTY

TX433010006

03/07/2009 thru 03/13/2009

SECTION

0001-0011	HIDALGO COUNTY	\$	144,796.46
0002-0012	HEADSTART	\$	33,058.31
0003-0013	APPRAISAL DISTRICT	\$	12,220.99
0004-0014	COMMUNITY SERVICE	\$	846.50
0005-0015	DRAINAGE DISTRICT	\$	3,424.10
9001-9002	COBRA	\$	231.79
0006-0016	RETIREE	\$	5,403.99

TOTALS

\$ 199,982.14



**BlueCross BlueShield
of Texas**

Group # 021185

Settlement ID:

Processed Date

Period

HIDALGO COUNTY

TX433010006

03/21/2009 thru 03/27/2009

SECTION

0001-0011	HIDALGO COUNTY	\$	171,972.51
0002-0012	HEADSTART	\$	21,644.85
0003-0013	APPRAISAL DISTRICT	\$	4,266.52
0004-0014	COMMUNITY SERVICE	\$	1,321.37
0005-0015	DRAINAGE DISTRICT	\$	4,224.08
9001-9002	COBRA	\$	1,865.36
0006-0016	RETIREE	\$	5,657.97

TOTALS

\$ 210,952.66



**BlueCross BlueShield
of Texas**

Group # 021185

Settlement ID:

Processed Date

Period

HIDALGO COUNTY

TX433010006

03/28/2009 thru 03/31/2009

SECTION

0001-0011	HIDALGO COUNTY	\$	56,952.29
0002-0012	HEADSTART	\$	18,287.16
0003-0013	APPRAISAL DISTRICT	\$	492.28
0004-0014	COMMUNITY SERVICE	\$	137.81
0005-0015	DRAINAGE DISTRICT	\$	1,237.65
9001-9002	COBRA	\$	1,258.34
0006-0016	RETIREE	\$	3,413.96

TOTALS

\$ 81,779.49

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

FOR THE PERIOD OF: March 7 – 31, 2009.

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 \$ 814,965.41.

- 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 03/07/09 to 03/31/09 is \$ 814,965.41.

Dept. of Budget & Management/Employee Benefits Section is requesting approval of this payment on the Commissioners' Court Agenda of April 28, 2009.

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.

Milora Vazquez
Employee Benefits Manager

04/24/2009
Date

Dept. of Budget & Management Chief Administrator

Date

Commissioner's Court Approval

Date

Hidalgo County Precinct No. 2 -"Waste Collection Services for South Tower CRC"

CC CONSENT

Date: 04/28/2009
Submitted By: Olga Montero, PURCHASING DEPT.
Submitted For: Marty Salazar
Department: PURCHASING DEPT.
Agenda Category: Purchasing Department

Information

CAPTION

Requesting authority to advertise request for bids with approval of procurement packet (i.e. specifications, legal notice and draft contract) as attached hereto for: "Waste Collection Services for South Tower CRC". RFB No. 2009-147-05-20-otm

BACKGROUND

PROPOSED ADVERTISEMENT DATES:

1st ad- May 02, 2009
2nd ad - May 09, 2009

Bid Opening Date: May 20, 2009

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1212-452-00-122-008-0-421
FUNDS AVAILABLE Y/N?: MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Funding for this item will be determined at the time of bid award and contract execution.

Attachments

- Link: [DRAFT CONTRACT](#)
- Link: [DRAFT LEGAL NOTICE](#)
- Link: [DRAFT SPECS AND RECOMMENDATION LETTER FOR APPROVAL OF SPECS](#)

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Purchasing Department	Marty Salazar	04/22/2009 02:09 PM	APRV
2		Budget & Management	Veronica Lopez	04/22/2009 03:07 PM	APRV
3		Roland Garcia	Rolando Garcia	04/24/2009 01:21 PM	APRV
4		Auditor's Office		04/24/2009 05:21 PM	NEW
Form Started By: Olga Montero				Started On: 04/21/2009 01:42 PM	

with the Specifications within **Hidalgo County** following a request for Services by the Hidalgo County Precinct No. 2 or his designated agent(s). Company agrees in performing the Services that it will use proper professional standards, comply with any and all appropriate laws and regulations in providing the Services, and devote such time as is necessary to safely and efficiently provide the Services.

3. This Contract shall be for a period beginning _____, **2009** and ending _____, **2010** and may be extended at the sole discretion of County for an additional one (1) year period, unless this Contract is terminated pursuant to the provisions herein, whichever occurs first. County also reserves the right to continue this bid for an additional sixty (60) day Grace Period, under the same rates terms and conditions.

4. As a condition of this Contract, Company shall hold and maintain throughout the term of this Contract all licenses and permits required, or which may be required by any authority during the term hereof to provide the Services.

5. All trucks or vehicles operated by the Company to perform the Services shall contain all equipment required by any authority to operate on streets and roads and all persons in the employ of Company who operate such trucks or vehicles shall have the required licenses, qualifications, skill and expertise to perform such Services and shall comply with all laws, rules and regulations prescribed by any agency or authority having jurisdiction with regard to the operation of such trucks or vehicles in providing the Services.

6. As consideration for rendering the Service provided for in this Contract, the County agrees to pay Company the amounts specified in Exhibit "B" attached hereto payable against written invoice submitted by Company.

7. Company shall provide insurance in force on all its vehicles and all persons connected with providing services under this Contract naming County as an additional insured (with the coverages and in the amounts described on Exhibit "C" attached hereto and incorporated herein at this point for all purposes), and shall furnish to County certificates of such insurance coverage.

8. Company shall provide a sufficient number of trucks, vehicles, personnel and equipment available to safely and efficiently provide the Services.

9. Company shall indemnify and hold harmless County, its elected officials, employees and agents from any and all claims, damages, losses, and expenses including attorney's fees for the defense of any action against County arising out of, resulting from, or connected with the provision of the Service by Company under this Contract. Said indemnity shall cover any act or failure to act by the Company, its agents or employees.

10. This Contract shall not be assignable in whole or in part by either party without prior written consent of the other party.

11. It is expressly agreed that this Contract and the performance by the parties hereunder does not create any agency relationship or master-servant relationship, that County has no supervision of the performance of the Services provided by Company, and that Company is an independent contractor under this Contract.

12. Any notice required or permitted to be given hereunder shall be in writing and shall be delivered personally or sent by certified mail, postage prepaid, as set forth below:

If to County:

**The County of Hidalgo
Attn: County Judge
100 E. Cano
Edinburg, Texas 78539**

If to Company

Attn: _____

13. In case any one or more of the provisions contained in this Agreement shall for any reason be held to be invalid, illegal or unenforceable in any respect, such invalidity, illegality, or unenforceability shall not affect any other provision thereof and this Agreement shall be construed as if such invalid, illegal, or unenforceable provision had never been contained herein.

14. Any contract award to a successful bidder will be in effect until (a) the contract expires, (b) delivery and acceptance of products, and/or performance of services ordered, or (c) terminated by County with thirty day's written notice prior to cancellation.

15. This Agreement shall be binding upon and inure to the benefit of and be enforceable by the parties hereto and their respective heirs, executors, administrators, legal representatives, successors, and assigns where permitted by this Agreement.

16. This Agreement shall be governed by and construed in accordance with the laws of the State of Texas and shall be performable in Hidalgo County.

WITNESS our hands in duplicate originals this ____ day of _____, 2009.

COUNTY OF HIDALGO

ATTEST:

By: _____
Juan D. Salinas, III, County Judge

Arturo Guajardo, Jr. County Clerk

COMPANY: _____

By: _____

Printed Name: _____

Title: _____

Approved by Commissioners Court on:

APPROVED AS TO FORM:
Atlas & Hall, L.L.P.

By: _____

EXHIBIT "A" SPECIFICATIONS

EXHIBIT "B" VENDOR'S BID

EXHIBIT “C” INSURANCE REQUIREMENTS

Bid No: 2009-147-00-00	Buyer: Olga T. Montero	Tel. No: (956) 292-7000 x-4859
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REQUEST FOR BIDS

HIDALGO COUNTY PRECINCT NO. 2 “WASTE COLLECTION SERVICES FOR SOUTH TOWER CRC”

BID OPENING DATE:

_____, **2009**

Contact Person:

Martha L. Salazar, CPPB, Purchasing Agent
Hidalgo County Purchasing Department
2812 So. Business 281 - New Administration Building
Edinburg, Texas 78539

956 318-2626

Form HCPD-03

1. Sealed bids will be received for **“ HIDALGO COUNTY PRECINCT NO. 2– WASTE COLLECTION SERVICES FOR SOUTH TOWER CRC”** in accordance with the specifications attached as Exhibit "A" hereto. Bids should address all specifications set forth. Bidders may suggest substitutions of features which they feel would be in the best interest of Hidalgo County ("County"). Strong rationale must be presented for any deviation from the specifications. Hidalgo County reserves the right to reject the deviation and its effect on the overall bid.
2. One (1) original and Three (3) copies of all bids are required with the bidders name and return address clearly typed/printed on upper left hand corner and the proper notation clearly typed/printed on the lower left hand corner of the envelope and/or package: **“BID-2009-013-03-11-otm HIDALGO COUNTY PRECINCT NO. 2 - HIDALGO COUNTY PRECINCT NO. 2– WASTE COLLECTION SERVICES FOR SOUTH TOWER CRC”** and in County's Purchasing Department, 2812 So. Business 281, New Administration Building, Edinburg, Texas, **on or before 9:30 a.m., WEDNESDAY, , 2009. NO FACSIMILES OR LATE ARRIVALS WILL BE ACCEPTED. ANY RFB RECEIVED AFTER THAT TIME WILL NOT BE OPENED AND WILL BE RETURNED. OVERNIGHT MAIL MUST ALSO BE PROPERLY LABELED ON THE OUTSIDE OF EXPRESS ENVELOPE OR PACKAGE WITH REFERENCE TO REQUEST FOR BIDS-2009-147-00-00-otm- RFB- HIDALGO COUNTY PRECINCT NO. 2– WASTE COLLECTION SERVICES FOR SOUTH TOWER CRC”** . Hidalgo County reserves the right to refuse and reject any/all RFB and to waive any/all formalities or technicalities, or to accept the RFB considered the best and most advantageous to Hidalgo County Hidalgo County reserves the right to refuse and reject any/all bids and to waive any/all formalities or technicalities, or to accept the bid considered the best and most advantageous to Hidalgo County
3. Hidalgo County reserves the right to: A. separate and accept, or eliminate any item(s) listed under this bid that it deems necessary to accommodate budgetary and/or operational requirements; B. reject any or all bids submitted and further reserves the right to design the evaluation criteria to be used in selecting the lowest and best bid for approval; and C. award the bid to one bidder or to multiple bidders if the County determines it is in its best interest to do so.”
4. The Bidder shall not substitute items named in the bid without the express written consent of Hidalgo County. Failure of the delivered item(s) to perform as specified, or failure to meet the stated delivery schedule shall release Hidalgo County from all obligations to the contracting party with regard to the item(s) in question. In such event, County may elect to award the contract to the next-lowest responsible bidder, or to reject all bids and re-advertise.
5. For work to be performed at a County owned or operated location, each bidder shall, in its sole discretion, visit the job site before preparing the bid and thoroughly familiarize himself/herself with existing conditions. Bidder should take field dimensions and note all circumstances which affect the dollar amount of the bid.

6. Descriptive specifications are referenced in this document to indicate the general kind and quality of equipment desired by Hidalgo County. Due to various styles and models of equipment, bidders are required to include illustrations, specifications, explanation of warranties, and service data with their bid including catalogue numbers and any necessary references.
7. No bid may be withdrawn within thirty (30) days from the scheduled time to open bids.
8. Proposed prices are to remain firm for a minimum of ninety (90) days after bid opening.
9. Any interpretations, amendments, corrections or changes to this bid document must be in a written addendum and signed by the County Judge or his designee. Addenda will be mailed to all who are known to have received a copy of the Request for Bids. Bidders shall acknowledge receipt of all addenda as a part of their bid.
10. County reserves the right to accept or reject any or all bids.
11. Costs are to be net F.O.B., County Prepaid.
12. County is exempt from Federal Excise Tax, State Tax and Local Tax. Do Not include tax in cost figure. If it is determined that tax was included in the cost figures it will not be included in the tabulation of any awards. Tax exemption certificates will be furnished upon request.
13. Funds for this procurement have been provided through the County budget for this fiscal year only. County, on an annual basis, has the right to reconsider a contract during the budget process for ensuing years if financial resources of County are insufficient to meet the liabilities of said contract. The award of a bid or contract hereunder will not be construed to create a debt of the County which is payable out of funds beyond the current fiscal year.
14. Upon award and prior to execution of a contract, Sole Proprietorships are required to submit a copy of their social security cards to the Hidalgo County Auditor's Office in order to establish an account with the County. All awarded vendors must submit a completed W-9 and a copy of their Federal ID Number Certificate.
15. DELIVERY INSTRUCTIONS:
 - . No deliveries accepted after 3:00 P.M., Monday-Friday.
 - . At least seventy two (72) hours prior notice of delivery must be given to Martha L. Salazar, Purchasing Agent before delivery will be accepted.
 - . If you need additional information call the office listed below:

Hidalgo County Purchasing Department
Martha L. Salazar, Purchasing Agent
(956) 318-2626

16. BILLING AND PAYMENT INSTRUCTIONS:

- . Invoices must include:
 - a) Name and address of successful bidder
 - b) Name and address of receiving department or official
 - c) Purchase Order Number (if any)
 - d) Notation - **HIDALGO COUNTY PRECINCT NO. 2 – “HIDALGO COUNTY PRECINCT NO. 2– WASTE COLLECTION SERVICES FOR SOUTH TOWER CRC”** Descriptive information as to the items or services delivered, including product code, item number, quantity, etc.

- . Discount payments will be considered when offered.

- . Contact person for Billing and Payment questions:
Hidalgo County Auditor’s Office
Ray Eufrazio, Auditor
2808 South Business Hwy 281
Edinburg, Texas 78539
ATTN.: Accounts Payable (956) 318-2511

17. Schedule of Events

Bid Opening, 9:30 AM	_____	, 2009
Award of Contract	_____	, 2009
Commence Work or Deliver Products	_____	, 2009

18. Bid or Performance Bond and Debarment Certification; Payment Under Contract:

. If the contract proposed is for the construction of public works or is for a contract for goods & services exceeding \$100,000, all bidders shall furnish a good and sufficient bid bond in the amount of five percent of the total contract price. A bid bond must be executed with a surety company authorized to do business in Texas. All bidders are also required to furnish a certification or acknowledgment stating that the contractor or vendor is free from suspension or debarment pursuant to federal regulation 45CFR Part 76.

. Together with the signing of a contract or issuance of a purchase order following the acceptance of a bid, and prior to commencement of the actual work, the bidder shall furnish a performance bond to the County for the full amount of the contract, if that contract exceeds \$50,000.

. If the contract is for \$50,000 or less, no money will be paid to the contractor until completion and acceptance of the work or the fulfillment of the purchase obligation to the County, and, if applicable, the receipt by County of satisfactory evidence that all subcontractors and material men have been paid.

. If a contract is for the construction, alteration or repair of public buildings or public works, the contractor *shall* provide a payment bond for a contract in excess of Twenty Five Thousand Dollars (\$25,000.00), as required by Tex. Govt. Code Ch. 2253.

. For requirements contracts, bond requirements are determined by applying the proposed unit price to the estimated quantities included in the specifications.

19. Ethical Standards:

. It shall be a breach of ethics to offer, give or agree to give any elected official, department head or employee, or former elected official, department head or employee, of the County, or for any elected official, department head or employee or former elected official, department head or employee of the County, to solicit, demand, accept or agree to accept from another person, entity or organization, a gratuity or an offer of employment in connection with any decision, approval, disapproval, recommendation, preparation or any part of a program requirement or purchase request, influencing the content of any specification or procurement standard, rendering of advice, investigation, auditing, or in any other advisory capacity in any proceeding or application, request for ruling, determination, claim or controversy, or other particular matter pertaining to any program requirement or a contract or subcontract, or to any solicitation or proposal therefore pending before any department or agency of the County.

. It shall be a breach of ethics for any payment, gratuity or offer of employment to be made by or on behalf of a subcontractor under a contract to the prime contractor or higher tier subcontractor for any contract for the County, or any person associated therewith, as an inducement for the award of a subcontract or order.

. No public official shall have an interest in a contract awarded hereunder except in accordance with Tex. Loc. Govt. Code Chapter 171.

20. Disclosure of Conflict of Interest

. Effective January 1, 2006, Chapter 176 of the Texas Local Government Code requires that any vendor, person, consultant or contractor considering doing business with Hidalgo County (“the County”) to disclose in the Conflict of Interest Questionnaire (the “CIQ”) attached as Exhibit D, the vendor, person, consultant or contractor’s affiliation or business relationship that might cause a conflict of interest with the County. By law, the CIQ must be filed with the Hidalgo County Clerk’s Office no later than the seventh business day after the date the person becomes aware of facts that require that statement to be filed. The disclosure requirement applies to a person or business who contracts or seeks to contract with Hidalgo County for the sale or purchase of property, goods or service. Any purchase order or contract resulting from this process shall be considered null and void if the successful bidder fails to comply with Texas Local

Government Code Chapter 176. Vendors, consultants, contractors and others who desire to conduct business with Hidalgo County are encouraged to refer to Texas Local Government Code Chapter 176 for the details of this law. An offense under Texas Local Government Code Chapter 176 is a Class C Misdemeanor.

Please Submit completed CIQ forms to the Hidalgo County Clerk's Office located at 100 N. Closner, Edinburg, Texas 78539-Hidalgo County Courthouse
COMPLETION AND SUBMISSION OF FORM CIQ IS THE SOLE RESPONSIBILITY OF THE PROSPECTIVE BIDDER.

21. If, during the life of any contract or bid awarded, the successful bidder's net prices generally available to other customers for items awarded herein are reduced below the contracted price, it is understood and agreed that the benefits of such reduction shall be extended to County.
22. Bids, and all goods and services provided thereunder, shall comply with all federal, state and local laws concerning this type(s) of goods and/or services.
23. Minimum Standards For Responsible Prospective Bidders: A prospective bidder must affirmatively demonstrate bidder's responsibility. A prospective bidder, by submitting a bid, represents to County that it meets the following requirements:
 - . Possess or is able to obtain adequate financial resources as required to perform under the bid;
 - . Be able to comply with the required or proposed delivery schedule;
 - . Have a satisfactory record of performance;
 - . Have a satisfactory record of integrity and ethics;
 - . Be otherwise qualified and eligible to receive an award.
24. Successful bidder will pay or cause to be paid, without cost or expenses to County, all FICA, FUTA/SUTA and Federal Income Withholding Taxes of all employees, and all wages and benefits as required by Federal or State law. Successful bidder's officers, agents and/or employees will not be entitled to any benefits of an employee or elected official of County, including, but not limited to, benefits associated with County's civil service system.
25. Any contract award to a successful bidder will be in effect until (a) the contract expires, (b) delivery and acceptance of products, and/or performance of services ordered, or (c) terminated by County with thirty day's written notice prior to cancellation.
26. County reserves the right to enforce performance of any contract awarded hereunder in any manner prescribed by law or deemed to be in the best interest of the County in the event of breach or default by successful bidder; County reserves the right to terminate any contract immediately in the event a successful bidder fails to:

- A. Meet schedules;
 - B. Pay any required fees or taxes; or
 - C. Otherwise perform in accordance with the specifications.
27. Successful bidder shall defend, indemnify and save harmless County and all its elected officials, officers, agents and employees from all suits, actions, or other claims of any character, name and description brought for or on account of any injuries or damages received or sustained by any person, persons, or property on account of any negligent act or fault of the successful bidder, or of any agent, employee, subcontractor or supplier of successful bidder in the execution of, or performance under, any contract which may result from bid award or which arises from any event or casualty happening on or within County premises themselves or happening upon or in any halls, elevators, entrances, stairways or approaches of or to such County facilities. Successful bidder shall pay any judgement with costs which may be obtained against County growing out of such injury or damages, and shall, upon request, provide a defense to County by counsel reasonably acceptable to County. Successful bidder's indemnity hereunder shall include, but is not limited to, claims relating to patent, copyright or trademark infringement, and the like, arising out of the goods and services provided by successful bidder.
28. Successful bidder shall warrant that all items/services shall conform with the specifications and/or all warranties provided under the Uniform Commercial Code and be free from all defects in material, workmanship and the like. Items supplied under a contract pursuant to this Request for Bids shall be subject to County's approval. Items found to be defective or not meeting specifications shall be replaced by successful bidder within two business days at no expense to County. Items not picked up within one (1) week after notification shall be deemed a donation to County and may be used or disposed of at County's discretion and without waiver of any other rights of County as to the item's nonconformity.
29. This document and any disputes arising hereunder shall be governed and construed according to the laws of the State of Texas, and will be performable exclusively in Hidalgo County, Texas.
30. The successful bidder shall not assign, sell, transfer or convey its rights under any awarded contract, in whole or in part, without the prior written consent of County.

Bid
for
HIDALGO COUNTY PRECINCT NO. 2
“WASTE COLLECTION SERVICES FOR SOUTH TOWER CRC”
BID NO.: 2009-147-00-00-otm

To: Martha L. Salazar, CPPB, Purchasing Agent
Hidalgo County Purchasing Department
2812 So. Business 281 – New Administration Building
Edinburg, Texas 78539

In accordance with the Specifications, and subject to all laws and regulations of the United States and state and local laws, the undersigned bidder proposes and commits to furnish all labor, equipment, material, software and services as set forth in the documents hereinbefore mentioned. The undersigned bidder further agrees, upon acceptance of its bid, to execute a contract and/or Purchase Order issued by Hidalgo County for performing and completing the work described in the Specifications within the time stated and for the prices proposed in the documents attached hereto and made a part hereof.

Bidder acknowledges receipt of all of the pages of the documents referenced in the Invitation to Bid Checklist presented in connection with this procurement. Bidder understands that Hidalgo County reserves the right to reject any or all bids and further reserves the right to design the evaluation criteria to be used in selecting the lowest and best bid.

Bidder agrees that this bid shall be good and may not be withdrawn for a period of ninety (90) calendar days after the scheduled closing time for receiving bids, as contained in the Specifications.

Respectfully submitted,

Bidder:

Address:

By:

Printed Name:

Title:



PURCHASING DEPARTMENT
County Of Hidalgo

M E M O R A N D U M

TO: HON. HECTOR "TITO" PALACIOS
HIDALGO COUNTY PRECINCT NO. 2
ATTN: YOLI CISNEROS

FROM: OLGA MONTERO, BUYER II *OM*
HIDALGO COUNTY PURCHASING DEPARTMENT

DATE: FRIDAY, MARCH 03, 2009

RE: APPROVAL OR DISAPPROVAL OF MODIFIED SPECIFICATIONS FOR:
"WASTE COLLECTION SERVICES FOR SOUTH TOWER CRC"
RFB. NO. 2009-147-00-00-otm

Please review the following SPECIFICATIONS and indicate if they meet all your requirements by marking Approve (or) Disapprove, signing below and submitting as soon as possible so we can proceed with the project.

If your answer is DISAPPROVE, please make any modifications needed to the specifications and return to designated Buyer in the Purchasing Department.

Please forward any documentation via email to: olga.montero@co.hidalgo.tx.us.

APPROVE

DISAPPROVE

BUDGET:

DO YOU CURRENTLY HAVE FUNDS AVAILABLE FOR THE ABOVE MENTIONED SERVICES?

YES X NO _____

ACCOUNT NUMBER: 9-1212-452-00-122-008-0-421

ACCOUNT NUMBER: _____

DEPARTMENT NAME: Hidalgo County Precinct 2

Ricardo Cuellar
AUTHORIZED SIGNATURE

Ricardo Cuellar
PRINTED NAME

4-7-09
DATE

EXHIBIT A
SPECIFICATIONS/REQUIREMENTS

HIDALGO COUNTY PRECINCT No. 2

“WASTE COLLECTION SERVICES
FOR SOUTH TOWER CRC”

RFB NO: 2009-147-00-00-otm

Exhibit "A"
Hidalgo County Precinct No. 2
"Waste Collection Services for South Tower CRC"
Bid No. 2009-147-00-00-otm

SPECIFICATIONS/REQUIREMENTS, TERMS AND CONDITIONS

The following are the minimum requirements and/or specifications that will be acceptable to the County. These requirements and/or specifications may be equal or better. Any bid that does not meet the minimum requirements and/or specifications will be rejected.

Hidalgo County Precinct No. 2 is seeking a qualified vendor to provide "Waste Collection Services for South Tower CRC".

1. All services will be done on an "As Needed Basis".
2. Bidder must identify the landfill site to which solid waste material are to be delivered to.
3. In the event Bidder is not the owner or operator of the landfill site, bidder shall provide Hidalgo County with copies of documents authorizing Bidder to dispose of solid waste material in such landfill.
4. Bidder shall provide a current permit for the landfill size issued by the Texas Natural Resource Conservation Commission evidencing authorization for the disposal of waste products.
5. In addition, Bidder shall present evidence that it possesses all other federal, state and local permits which may be necessary and proper to the conduct of a solid waste collection/disposal business.
6. Bidder will be required to provide one (1)-eight cubic yard bin with lid and to collect all solid waste materials generated by Hidalgo County Precinct No. 2-South Tower CRC at the following locations:
 - a. 1429 S. Tower Road, Alamo, Texas (once per week)
7. Bidder should specify the following in the bid:
 - Size and Description of containers to be provided by Bidder.
 - Collection schedule proposed by Bidder.
 - Charge per collection, including basis for such charge (i.e. container size, volume of materials actually collected, etc.)
 - Additional fees such landfill charges, transportation charges, etc.
8. Cost for Land Filing will be on per ton basis.

9. Bidders shall describe any tracking and manifest documentation procedures and certify that the same are in compliance with state and federal regulations relating to bio-hazardous waste disposal. Upon acceptance of any waste products by the successful bidder and execution of any request manifest or other document, the successful bidder shall be all right, title and interest in the waste. Procedures subsequent to the acceptance of the waste will comply with all applicable regulations regarding the handling and disposition of waste.
10. The successful bidder will maintain liability insurance accident and natural disaster, as described and listed in: Insurance Requirements (See Exhibit "C").
11. The successful bidder will indemnify and hold harmless Hidalgo County, its officers, officials, employees, agent and attorneys for any and all claims and expenses arising out of or related to the performance of the contract awarded pursuant hereto.
12. Hidalgo County upon request, shall be furnished with samples of all proposed containers, together with written construction specifications for the same.
13. Bidders prior to the award of contract and the successful bidder thereafter, will notify County immediately upon termination, cancellation, revocation or suspension of such permits or licenses, in which event Hidalgo County may in its sole discretion, declare to consider such party's bid or if a contract has been awarded, immediately terminate such contract.
14. Each bidder further represents and warrants that there are not current pending legal or administrative proceeding relating to its conduct of a solid waste collection, transport disposal operation which will be utilized in performing on a contract awarded hereunder. Prior to award of contract, each bidder and thereafter, the successful Bidder will notify Hidalgo County within three (3) business days of the filing of any legal or administrative proceedings affecting or in any manner related to its operation of a solid waste collection, transport and disposal operation which is or will be utilized in performing on a contract awarded hereunder.
15. If a Local Declaration of Disaster is declared by the Hidalgo County Judge, special rates will apply for the following categories of waste:
 - Construction Debris
 - Furniture / Mattresses
 - Flammable / Hazardous Material
 - Batteries
 - White goods transported to metal recycle
16. Bidder should designate which categories of waste your firm can transport or accept for waste storage.
17. Site locations will vary depending on event, to be discussed at initial waste removal planning meeting at the time of event and upon the discretion of Hidalgo County Precinct No. 2.
18. Hidalgo County reserves the right to reject any/all bids, to waive any/all formalities, technicalities or to accept the bid considered the best and most advantageous to the County. Hidalgo County reserves the right to hold the bids for a period of ninety (90) days without taking action hereon. In cases of discrepancy between unit price and extension, the unit price shall govern.

19. Any contract award to a successful bidder will be in effect until (a) the contract expires, (b) delivery and acceptance of products, and/or performance of services ordered, or (c) terminated by County with thirty (30) day's written notice prior to cancellation.
20. The term of the contract shall be for a period of one (1) year with the County's option to renew for an additional one (1) year under the same rates, terms and conditions. Hidalgo County reserves the right to extend the bid award for an additional sixty (60) day grace period at the end of the contract term due to unforeseen delay in the award of the new bid contract term.
21. Further information required for this project can be addressed to, Olga T. Montero, Buyer II - Hidalgo County Purchasing Department (956) 318-2626. Hidalgo County is requesting that any and all questions, inquiries and clarifications regarding this bid be addressed to Martha L. Salazar, Purchasing Agent, 2812 South Business Hwy 281, Edinburg, Texas 78539. TELEPHONE INQUIRIES WILL NOT BE ACCEPTED.

ALL WRITTEN INQUIRIES WILL BE ACCEPTED VIA FACSIMILE (956) 318-2629 OR EMAIL: olga.montero@co.hidalgo.tx.us, no later than _____ . Responses will be sent to all applicants by no later than Friday, _____ by 5:00 p.m.

EXHIBIT "B"

BID PAGE

HIDALGO COUNTY PRECINCT No. 2
 "WASTE COLLECTION SERVICES FOR SOUTH TOWER CRC"
 RFB No. 2009-147-00-00

DESCRIPTION	RESPONSE
PRICE PER HAUL FOR ONE (1), EIGHT (8) CU. YD. CONTAINER WITH LID TO BE SERVICED ONCE A WEEK	TOTAL MONTHLY RATE AT: \$
COST FOR LAND FILLING (TIPPING CHARGE):	\$ / TON
LANDFILL SITE ADDRESS TO WHICH SOLD WASTE MATERIAL WILL BE DELIVERED IF BIDDER IS NOT OWNER OF THE LANDFILL SITE:	
BIDDER WILL PROVIDE ONE (1) - EIGHT (8) CUBIC YARD BINS WITH LIDS LOCATED AT THE PAVILION	<input type="checkbox"/> YES <input type="checkbox"/> NO
DOES BIDDER POSSESS ALL PERMITS NECESSARY TO CONDUCT A SOLID WASTE COLLECTION & DISPOSAL BUSINESS:	<input type="checkbox"/> YES <input type="checkbox"/> NO
PROPOSED COLLECTION SCHEDULE: SPECIFY COLLECTION DAY OF THE WEEK	

BIDDER / COMPANY NAME:	
ADDRESS:	
CITY / STATE / ZIP CODE:	
PHONE & FAX No.'S:	
SIGNATURE:	
PRINTED NAME:	
TITLE:	
DATE:	
Bidder acknowledges and commits to the bid price, requirements, terms and conditions.	_____ Authorized Signature Date
<input type="checkbox"/> YES <input type="checkbox"/> NO	_____ Printed Name

Fuel Credit Cards

CC CONSENT

Date: 04/28/2009
 Submitted By: Ovidio Gonzalez, PURCHASING DEPT.
 Submitted For: Marty Salazar
 Department: PURCHASING DEPT.
 Agenda Category: Purchasing Department

Information

CAPTION

1. Presentation for discussion, consideration and approval of Comdata Corporation/Transmontaigne Product Services, Inc. request form(s) submitted by Elected Officials/Department Heads/Agency and/or Program Directors:
- a. Building and Grounds
 - b. Constable Pct. 3
 - c. Elections
 - d. Tax Office

2. If applicable, 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).

Funding sources provided by department(s).

Fiscal Impact

FISCAL YEAR: ACCT. #: Various
 FUNDS AVAILABLE Y/N?: MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

For Various Departments as follows:

Department	Account Number	Available As of 4/23/09
Buildings & Grounds	9-1100-419-40-220-001-0-626	\$49,957.13
Constable Pct. 3	9-1100-421-00-293-001-0-626	\$50,008.02
Elections	9-1100-414-00-130-001-0-626	\$10,000.00
Tax Office	9-1100-415-15-140-001-0-626	\$11,250.00

Attachments

Link: [bg 04.28.09](#)

Link: [const pct 3 04.28.09](#)

Link: [elec 04.28.09](#)

Link: [tax 04.28.09](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Purchasing Department	Marty Salazar	04/22/2009 04:12 PM	APRV
2	Budget & Management	Veronica Lopez	04/23/2009 07:45 AM	APRV
3	Dale Kennan	Dale Kennan	04/23/2009 09:06 AM	APRV
4	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Ovidio Gonzalez

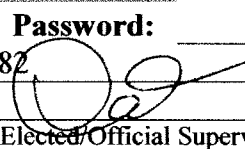
Started On: 04/22/2009 02:50
PM

Final Approval Date: 04/24/2009

COMDATA FUEL CARD REQUEST FORM

Purpose: This form will be used by Hidalgo County Purchasing Department to request a fuel card for County business use only. The Requestor must be authorized to sign for the billing account number provided by the department.

Add Vehicle Card
 Add Driver Pin
 Delete Cancel Card
 Delete/Cancel Driver

Department:	BUILDINGS & GROUNDS
Billing Address:	P.O.BOX 1356 EDINBURG, TX 78439
Fuel Card Manager:	ALMA R. YBARRA
	This person can not have use of the fuel card
Phone Number:	956-289-7851
County Email:	ALMA.YBARRA@CO.HIDALGO.TX.US
Web user Name:	Password: _____
Hidalgo Co Acct Number:	9-1100-419-40—220-001-0-682
Requested By:	DANIEL FLORES
	 Sign & Print Elected/Official Supervisor/Director

On behalf of my department, I hereby request fuel cards for the following department vehicles. I understand that there will be one fuel card per requested vehicle. I understand that each card is to be used for the purpose of obtaining fuel for the designated Hidalgo County vehicle for which the card is issued.

For Purchasing Department Use Only

Approved by Commissioners Court On: _____

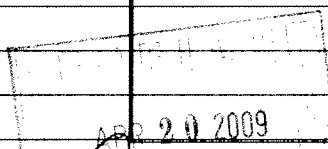
Reviewed by Fuel Card Administrator: _____

Cards Received by Dept on: _____ Date Returned/Cancelled: _____

Fuel Cards Received by Department: _____

Sign & Print Authorized Elected Official/Supervisor/Director

Vehicle Plate No	Vehicle Description	VIN Number	Purchasing Dept Only Card Number
106-2074	FORD E-250	IFTNE24W09DA55992	
106-2073	FORD E-250	IFTNE24W69DA55995	


 . 9:53AM

FUEL CREDIT CARD REQUEST FORM

Use: This form will be used by Hidalgo County Purchasing Department to request a fuel card for County business only. The Requestor must be authorized to sign for the billing account number provided by the department.

Add Vehicle Card
 Add Driver Pin
 Delete/ Cancel Card
 Delete/Cancel Driver

Department:	Hidalgo County Constable Pct. 3		
Billing Address:	730 N. Brayfoyle Rd. Ste. B.		
Fuel Card Manager:	Raquel V. Cavazos		
Phone Number:	956-205-7031	County Email: Raquel.Cavazos@co.hidalgo.tx.us	
Web user Name:	CCAVAZOS	Password: ' '	
Hidalgo Co Acct Number:	9-1100-421-00-293-001-0-026		
Requested By:	Jesus Cruz (Chief Deputy)		
On behalf of my department, I hereby request fuel cards for the following department vehicles. I understand that there will be one fuel card per requested vehicle. I understand that each card is to be used for the purpose of obtaining fuel for the designated Hidalgo County vehicle for which the card is issued.			

For Purchasing Department Use Only

Approved by Commissioners Court On: _____

Revised by Fuel Card Administrator: _____

Cards Received by Dept on: _____ Date Returned/Cancelled: _____

Fuel Cards Received by Department: _____

Sign & Print Authorized Elected Official/Supervisor/Director

Vehicle Plate No. (N/A = Non-vehicle)	Description (Vehicle or Non-vehicle Equip.)	VIN Number (N/A = Non-vehicle)	Purchasing Dept. Use Only Card Number

List all names of drivers who will fuel a Hidalgo County vehicle. Drivers who have not submitted their driver's information to Department of Budget Management Safety Division (DBM) will not be allowed a Pin number to fuel up. All Drivers must submit all proper documentation requested by DBM before driving a Hidalgo County vehicle.

User Name	DOB	User ID (6 digits)	DBM Use Only License Verification	Purchasing Dept. Use Only Training Date & Signed Fuel Policy
Don M. Brayles	10-22-1962	001031		

FUEL CREDIT CARD REQUEST FORM

Purpose: This form will be used by Hidalgo County Purchasing Department to request a fuel card for County business use only. The Requestor must be authorized to sign for the billing account number provided by the department.

Add Vehicle Card
 Add Driver Pin
 Delete/ Cancel Card
 Delete/Cancel Driver

Department:	ELECTIONS DEPARTMENT		
Billing Address:	PO BOX 659 EDINBURG, TX 78540-0659		
Fuel Card Manager:	YVONNE RAMON		
Phone Number:	(956) 318-2570	This person can not have use of the fuel card	
Web user Name:		County Email:	yvonne.ramon@co.hidalgo.tx.us
Hidalgo Co Acct Number:	9-1100-414-00-130-001-0-682	Password:	
Requested By:	<i>Yvonne Ramon</i>	YVONNE RAMON	
Sign & Print Elected/Official Supervisor/Director			

On behalf of my department, I hereby request fuel cards for the following department vehicles. I understand that there will be one fuel card per requested vehicle. I understand that each card is to be used for the purpose of obtaining fuel for the designated Hidalgo County vehicle for which the card is issued.

For Purchasing Department Use Only

Approved by Commissioners Court On: _____

Reviewed by Fuel Card Administrator: _____

Cards Received by Dept on: _____ Date Returned/Cancelled: _____

Fuel Cards Received by Department: _____

Sign & Print Authorized Elected Official/Supervisor/Director

Vehicle Plate No (N/A = Non-vehicle)	Description (Vehicle or Non-vehicle Equip.)	VIN Number (N/A = Non-vehicle)	Purchasing Dept Use Only Card Number
CAR 1	RENTAL CAR		
CAR 2	RENTAL CAR		
TRUCK 1	RENTAL TRUCK		
TRUCK 2	RENTAL TRUCK		

List all names of drivers who will fuel a Hidalgo County vehicle. Drivers who have not submitted their driver's information to Department of Budget Management Safety Division (DBM) will not be allowed a Pin number to fuel up. All Drivers must submit all proper documentation requested by DBM before driving a Hidalgo County vehicle.

User Name	DOB	User ID (6 digits)	DBM Use Only License Verification	Purchasing Dept Use Only Training Date & Signed Fuel Policy

AI-15133

10.C.

**Payment No. 2 for New Administration Offices
CC CONSENT**

Date: 04/28/2009
Submitted By: Yolanda Cisneros, COMM. PCT. #2
Submitted For: Yolanda Cisneros
Department: COMM. PCT. #2
Agenda Category: Purchasing Department

Information

CAPTION

Precinct No. 2
Approval of Request for Payment #2 in the amount of \$136,348.32 from V-A Architecture, contracted architect for the design and construction of New Precinct Administration Offices under contract No. C-09-037-01-13 with authority for County Treasurer to issue payment/check after Auditor's review and processing procedures completed.

BACKGROUND

PO #617618

Fiscal Impact

FISCAL YEAR: 2009 **ACCT. #:** 9-1334-431-00-122-021-0-720
FUNDS AVAILABLE Y/N?: Y **MATCHING FUNDS Y/N?:**
BUDGETARY IMPACT:
PO#617618 funding available in the amount \$115,429.29.

Attachments

Link: [Payment No. 2](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Purchasing Department	Marty Salazar	04/22/2009 02:30 PM	APRV
2	Budget & Management	Veronica Lopez	04/22/2009 03:07 PM	APRV
3	Roland Garcia	Rolando Garcia	04/24/2009 02:38 PM	APRV
4	Auditor's Office		04/24/2009 05:21 PM	NEW


Form Started By: Yolanda Cisneros Started On: 04/21/2009 02:40 PM
Final Approval Date: 04/24/2009

V·A Architecture

**B.
Review and Approval by Hidalgo County Precinct 2
of Architect's Request for Payment**

Project	New Administration Offices for Hidalgo County Pct. 2 and Other County Offices
Contract #	09-037-01-13
PO#	617618
Requests for Payment:	#2 (A-E)
In the total Amount of:	\$136,348.32
A. New Pct. 2 Administration	\$13,967.53
B. Health Clinic	\$52,640.69
C. WIC Clinic	\$17,298.67
D. Tax Assessor Office	\$22,684.91
E. Justice of the Peace Office	\$29,756.52
Submitted by:	V·A Architecture
For Period to:	March 27, 2009

Reviewed and Approved by:


 Héctor "Tito" Palacios, Commissioner
 Hidalgo County Pct. 2

617618

9-1334-431-00-122-021-0-720

Req. #149224

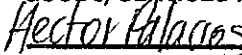
Vargas & Associates
 2029 Industrial Drive
 McAllen, Texas 78504
 (956) 631-2242

Date:

INVOICE RECEIVED BY:

 ON 3/20/09

GOODS/SERVICES RECEIVED BY:

 ON 3/27/09

V·A Architecture

REQUEST FOR PAYMENT NO: Two-A

Project Name: New Pct. 2 Administration Office & Other County Offices: Pct. 2 Offices
for Hidalgo County, Pharr, Texas No. 08-1016

Architetur al Firm: V-A Architecture Contract No 09-037-01-13
P.O. # 617618

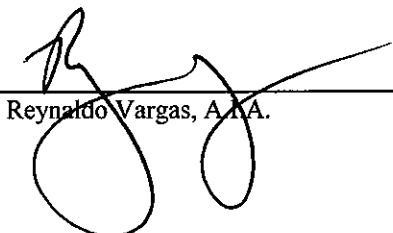
Address: 2029 Industrial Drive

City/State McAllen, Texas 78504

Project Budget:		\$613,957.44		Arch % Rate:		6.5% *\$		Max. Contract Amt.		\$39,907.23	
Scope of Services		Estimated Budget		% Completed To Date		Total Due		Less Prev. Payments		Amount Due This Request	
Schematic Design											
A/E Fee	15%	*\$	5,986.09	100%	*\$	5,986.09	*\$	0.00	*\$	5,986.09	
Design Development											
A/E Fee	20%	*\$	7,981.45	100%	*\$	7,981.45	*\$	0.00	*\$	7,981.45	
Constr. Doc. Phase											
A/E Fee	40%	*\$	15,962.89	0%	*\$	0.00	*\$	0.00	*\$	0.00	
Bidding Phase											
A/E Fee	5%	*\$	1,995.36	0%	*\$	0.00	*\$	0.00	*\$	0.00	
Construction Adm.											
A/E Fee	20%	*\$	7,981.45	0%	*\$	0.00	*\$	0.00	*\$	0.00	
Reimbursables											
		*\$	0.00	0%	*\$	0.00	*\$	0.00	*\$	0.00	
TOTALS		*\$	39,907.23		*\$	13,967.53	*\$	0.00	*\$	13,967.53	
Total Amount This Request										*\$	13,967.53

I certify that the above is true and correct to the best of my knowledge.

VA Architecture March 26, 2008
Architect Date


Reynaldo Vargas, A.A.A.

ANY AND ALL QUESTIONS PERTAINING TO THIS INVOICE SHALL BE ADDRESSED ONLY TO SONIA INFANTE AT 956-631-2242

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

V·A Architecture

**STATEMENT OF PROBABLE CONSTRUCTION COST FOR NEW PCT. 2 ADMINISTRATION OFFICES
FOR HIDALGO COUNTY, PHARR, TEXAS**

#08-1016

A.	BUILDING SQUARE FOOT	4601	39829
	SCHEDULED VALUE	PRICE/SQ FT	SYSTEM COST
1.	Mobilization	3.36	15459.36
2.	Betterment Allowance	\$0.13	\$598.13
3.	Landscaping Allowance	\$0.00	\$0.00
4.	Lawn Sprinkler Allowance	\$0.00	\$0.00
5.	HVAC Allowance	\$0.00	\$0.00
6.	Plumbing Allowance	\$0.00	\$0.00
7.	Electrical Allowance	\$0.00	\$0.00
8.	Dirtwork	\$4.39	\$20,198.39
9.	Concrete Foundation	\$7.98	\$36,715.98
10.	Concrete Columns	\$1.31	\$6,027.31
11.	Concrete Walks	\$1.15	\$5,291.15
12.	Masonry	\$19.05	\$87,649.05
13.	Structural Steel	\$12.07	\$55,534.07
14.	Millwork	\$3.18	\$14,631.18
15.	Roofing	\$13.98	\$64,321.98
16.	Flashing & Damproofing	\$0.98	\$4,508.98
17.	Cavity Insulation	\$0.49	\$2,254.49
18.	Waterproofing	\$0.22	\$1,012.22
19.	HM Doors and Frames	\$1.66	\$7,637.66
20.	Wood Doors	\$1.25	\$5,751.25
21.	Finish Hardware	\$2.35	\$10,812.35
22.	Glass & Glazing	\$2.49	\$11,456.49
23.	Plaster	\$2.10	\$9,662.10
24.	Drywall & Metal Studs	\$3.75	\$17,253.75
25.	Acoustical Ceilings	\$2.63	\$12,100.63
26.	Ceramic Tile	\$1.89	\$8,695.89
27.	Resilient Flooring	\$2.62	\$12,054.62
28.	painting	\$3.59	\$16,517.59
29.	Visual Display Boards	\$0.36	\$1,656.36
30.	Toilet Partitions	\$1.08	\$4,969.08
31.	Flagpole	\$0.15	\$690.15
32.	Signage	\$0.38	\$1,748.38
33.	Fire Extinguishers	\$0.15	\$690.15
34.	Folding Partition	\$0.87	\$4,002.87
35.	Toilet Accessories	\$0.53	\$2,438.53
36.	Projection Screens	\$0.55	\$2,530.55
37.	Plumbing	\$8.91	\$40,994.91
38.	Fire Sprinkler System	\$2.59	\$11,916.59
39.	HVAC	\$9.68	\$44,537.68
40.	Electrical	\$15.57	\$71,637.57
		\$133.44	\$613,957.44

TOTAL PROBABLE CONSTRUCTION COST

\$613,957.44

B. Professional Services

1.	Architectural/Engineering Fees	6.50% of Construction Cost	\$39,907.23
2.	Document Reproduction	0.25% of Construction Cost	\$1,534.89
3.	Constr. Materials Testing	0.25% of Construction Cost	\$1,534.89
4.	Texad Dept. of Licensing & Regulation Review and Inspection		\$1,240.00

TOTAL A/E PROFESSIONAL SERVICES

\$44,217.02

TOTAL PROBABLE PROJECT 'TURN-KEY' COST

\$658,174.46

Vargas & Associates
2029 Industrial Drive
McAllen, TX. 78504
(956) 631-2242

V·A Architecture

REQUEST FOR PAYMENT NO: Two-B

Project Name: New Pct. 2 Administration Office & Other County Offices: **Health Clinic** No. 08-1016
for Hidalgo County, Pharr, Texas

Architeturual Firm: V-A Architecture Contract No 09-037-01-13
P.O. # 617618

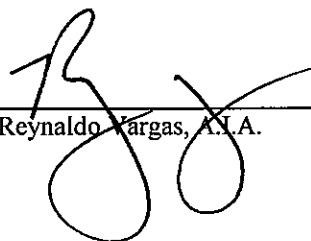
Address: 2029 Industrial Drive

City/State McAllen, Texas 78504

Project Budget:		\$2,042,249.00	Arch % Rate:	6.5% *\$	Max. Contract Amt	\$132,746.19
Scope of Services	Estimated Budget	% Completed To Date	Total Due	Less Prev. Payments	Amount Due This Request	
Schematic Design A/E Fee 15%	*\$ 19,911.93	100%	*\$ 19,911.93	*\$ 19,911.93	*\$ (0.00)	
Design Development A/E Fee 20%	*\$ 26,549.24	100%	*\$ 26,549.24	*\$ 457.78	*\$ 26,091.46	
Constr. Doc. Phase A/E Fee 40%	*\$ 53,098.47	50%	*\$ 26,549.24	*\$ 0.00	*\$ 26,549.24	
Bidding Phase A/E Fee 5%	*\$ 6,637.31	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
Construction Adm. A/E Fee 20%	*\$ 26,549.24	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
Reimbursables	*\$ 0.00	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
TOTALS	*\$ 132,746.19		*\$ 73,010.40	*\$ 20,369.71	*\$ 52,640.69	
Total Amount This Request					*\$ 52,640.69	

I certify that the above is true and correct to the best of my knowledge.

VA Architecture March 26, 2008
Architect Date


Reynaldo Vargas, AIA.

ANY AND ALL QUESTIONS PERTAINING TO THIS INVOICE SHALL BE ADDRESSED ONLY TO SONIA INFANTE AT 956-631-2242

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

V·A Architecture

STATEMENT OF PROBABLE CONSTRUCTION COST FOR THE NEW PHARR CLINIC
PHARR, TEXAS #08-1016

A. BUILDING SQUARE FOOTAGE 11,978		02/17/09	
	SCHEDULED VALUE	PRICE/SQ FT	SYSTEM COST
1.	Mobilization	\$4.20	\$50,307.6
2.	Betterment Allowance	\$2.10	\$25,153.8
3.	Dirtwork	\$5.49	\$65,729.3
4.	Concrete Foundation	\$9.98	\$119,480.6
5.	Concrete Columns	\$1.64	\$19,614.0
6.	Concrete Walks	\$1.44	\$17,218.4
7.	Masonry	\$23.81	\$285,226.1
8.	Structural Steel	\$15.09	\$180,718.1
9.	Millwork	\$3.98	\$47,612.6
10.	Roofing	\$17.48	\$209,315.6
11.	Flashing & Damproofing	\$1.23	\$14,673.1
12.	Cavity Insulation	\$0.61	\$7,336.5
13.	Waterproofing	\$0.28	\$3,294.0
14.	HM Doors and Frames	\$2.08	\$24,854.4
15.	Wood Doors	\$1.56	\$18,715.6
16.	Finish Hardware	\$2.94	\$35,185.4
17.	Glass & Glazing	\$3.11	\$37,281.5
18.	Plaster	\$2.63	\$31,442.3
19.	Drywall & Metal Studs	\$4.69	\$56,146.9
20.	Acoustical Ceilings	\$3.29	\$39,377.7
21.	Ceramic Tile	\$2.36	\$28,298.0
22.	Resilient Flooring	\$3.28	\$39,228.0
23.	painting	\$4.49	\$53,751.3
24.	Visual Display Boards	\$0.45	\$5,390.1
25.	Toilet Partitions	\$1.35	\$16,170.3
26.	Flagpole	\$0.19	\$2,245.9
27.	Signage	\$0.48	\$5,689.6
28.	Fire Extinguishers	\$0.19	\$2,245.9
29.	Toilet Accessories	\$0.66	\$7,935.4
30.	Projection Screens	\$0.69	\$8,234.9
31.	Plumbing	\$11.14	\$133,405.0
32.	Fire Sprinkler System	\$3.24	\$38,778.8
33.	HVAC	\$12.10	\$144,933.8
34.	Electrical	\$19.46	\$233,121.8
35.	Generator	\$2.85	\$34,137.3
		\$170.50	\$2,042,249.00
TOTAL PROBABLE CONSTRUCTION COST			\$2,042,249.00
B. Professional Services			
1.	Architectural/Engineering Fees	6.50% of Actual Constr. Cost	\$132,746.19
2.	Reproduction		\$15,000.00
3.	Construction Materials Testing		\$15,000.00
4.	TDLR Review and Inspection		\$2,000.00
TOTAL PROFESSIONAL SERVICES			\$164,746.19
TOTAL PROBABLE TURN KEY COST			\$2,206,995.19

Vargas & Associates
 2029 Industrial Drive
 McAllen, Texas 78504
 (956) 631-2242

V·A Architecture

REQUEST FOR PAYMENT NO: Two-C

Project Name: New Pct. 2 Administration Office & Other County Offices:WIC
for Hidalgo County, Pharr, Texas No. 08-1016

Architeturual Firm: V-A Architecture Contract No 09-037-01-13
P.O. # 617618

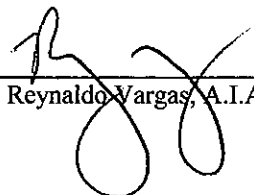
Address: 2029 Industrial Drive

City/State McAllen, Texas 78504

Project Budget:		\$483,879.00	Arch % Rate:	6.5% *\$	Max. Contract Amt	\$31,452.14
Scope of Services	Estimated Budget	% Completed To Date	Total Due	Less Prev. Payments	Amount Due This Request	
Schematic Desgign A/E Fee	15% *\$ 4,717.82	100%	*\$ 4,717.82	*\$ 0.00	*\$ 4,717.82	
Design Development A/E Fee	20% *\$ 6,290.43	100%	*\$ 6,290.43	*\$ 0.00	*\$ 6,290.43	
Constr. Doc. Phase A/E Fee	40% *\$ 12,580.85	50%	*\$ 6,290.43	*\$ 0.00	*\$ 6,290.43	
Bidding Phase A/E Fee	5% *\$ 1,572.61	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
Construction Adm. A/E Fee	20% *\$ 6,290.43	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
Reimbursables	*\$ 0.00	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
TOTALS	*\$ 31,452.14		*\$ 17,298.67	*\$ 0.00	*\$ 17,298.67	
Total Amount This Request					*\$ 17,298.67	

I certify that the above is true and correct to the best of my knowledge.

VA Architecture March 26, 2008
Architect Date


Reynaldo Vargas, A.I.A.

ANY AND ALL QUESTIONS PERTAINING TO THIS INVOICE SHALL BE ADDRESSED ONLY TO SONIA INFANTE AT 956-631-2242

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

V·A Architecture

**STATEMENT OF PROBABLE CONSTRUCTION COST FOR THE WIC CLINIC
PHARR, TEXAS**

#08-1016

A.	BUILDING SQUARE FOOTAGE	2,838	02/17/09
	SCHEDULED VALUE	PRICE/SQ FT	SYSTEM COST
1.	Mobilization	\$4.20	\$11,919.6
2.	Betterment Allowance	\$2.10	\$5,959.8
3.	Dirtwork	\$5.49	\$15,573.5
4.	Concrete Foundation	\$9.98	\$28,309.1
5.	Concrete Columns	\$1.64	\$4,647.2
6.	Concrete Walks	\$1.44	\$4,079.6
7.	Masonry	\$23.81	\$67,579.9
8.	Structural Steel	\$15.09	\$42,818.3
9.	Millwork	\$3.98	\$11,281.1
10.	Roofing	\$17.48	\$49,594.1
11.	Flashing & Damproofing	\$1.23	\$3,476.6
12.	Cavity Insulation	\$0.61	\$1,738.3
13.	Waterproofing	\$0.28	\$780.5
14.	HM Doors and Frames	\$2.08	\$5,888.9
15.	Wood Doors	\$1.56	\$4,434.4
16.	Finish Hardware	\$2.94	\$8,336.6
17.	Glass & Glazing	\$3.11	\$8,833.3
18.	Plaster	\$2.63	\$7,449.8
19.	Drywall & Metal Studs	\$4.69	\$13,303.1
20.	Acoustical Ceilings	\$3.29	\$9,329.9
21.	Ceramic Tile	\$2.36	\$6,704.8
22.	Resilient Flooring	\$3.28	\$9,294.5
23.	painting	\$4.49	\$12,735.5
24.	Visual Display Boards	\$0.45	\$1,277.1
25.	Toilet Partitions	\$1.35	\$3,831.3
26.	Flagpole	\$0.19	\$532.1
27.	Signage	\$0.48	\$1,348.1
28.	Fire Extinguishers	\$0.19	\$532.1
29.	Toilet Accessories	\$0.66	\$1,880.2
30.	Projection Screens	\$0.69	\$1,951.1
31.	Plumbing	\$11.14	\$31,608.2
32.	Fire Sprinkler System	\$3.24	\$9,188.0
33.	HVAC	\$12.10	\$34,339.8
34.	Electrical	\$19.46	\$55,234.6
35.	Generator	\$2.85	\$8,088.3
		\$170.50	\$483,879.00

TOTAL PROBABLE CONSTRUCTION COST

\$483,879.00

B. Professional Services

1.	Architectural/Engineering Fees	% of ACC	6.50%	\$31,452.14
2.	Reproduction			\$15,000.00
3.	Construction Materials Testing			\$15,000.00
4.	TDLR Review and Inspection			\$2,000.00

TOTAL PROFESSIONAL SERVICES

\$63,452.14

TOTAL PROBABLE TURN KEY COST

\$547,331.14

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

V·A Architecture

REQUEST FOR PAYMENT NO: Two-D

Project Name: New Pct. 2 Administration Office & Other County Offices:Tax Office No. 08-1016
for Hidalgo County, Pharr, Texas

Architeturual Firm: V-A Architecture Contract No 09-037-01-13
P.O. # 617618

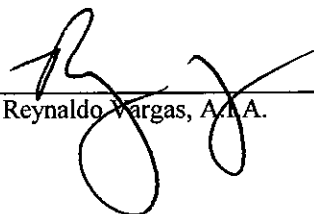
Address: 2029 Industrial Drive

City/State McAllen, Texas 78504

Project Budget:		\$997,139.00	Arch % Rate:	6.5%	*\$ Max. Contract Amt.	\$64,814.04
Scope of Services		Estimated Budget	% Completed To Date	Total Due	Less Prev. Payments	Amount Due This Request
Schematic Design A/E Fee	15%	*\$ 9,722.11	100%	*\$ 9,722.11	*\$ 0.00	*\$ 9,722.11
Design Development A/E Fee	20%	*\$ 12,962.81	100%	*\$ 12,962.81	*\$ 0.00	*\$ 12,962.81
Constr. Doc. Phase A/E Fee	40%	*\$ 25,925.61	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00
Bidding Phase A/E Fee	5%	*\$ 3,240.70	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00
Construction Adm. A/E Fee	20%	*\$ 12,962.81	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00
Reimbursables		*\$ 0.00	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00
TOTALS		*\$ 64,814.04		*\$ 22,684.91	*\$ 0.00	*\$ 22,684.91
Total Amount This Request						*\$ 22,684.91

I certify that the above is true and correct to the best of my knowledge.

VA Architecture March 26, 2008
Architect Date


Reynaldo Vargas, A.A.A.

ANY AND ALL QUESTIONS PERTAINING TO THIS INVOICE SHALL BE ADDRESSED ONLY TO SONIA INFANTE AT 956-631-2242

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

V·A Architecture

**STATEMENT OF PROBABLE CONSTRUCTION COST FOR NEW TAX ASSESSOR OFFICE
FOR HIDALGO COUNTY, TEXAS**

#08-1016

A.	BUILDING SQUARE FOOTAG	7,340	03/12/09
	SCHEDULED VALUE	PRICE/SQ FT	SYSTEM COST
1.	Mobilization	\$3.36	\$24,662.40
2.	Betterment Allowance	\$0.13	\$954.20
3.	Dirtwork	\$4.39	\$32,222.60
4.	Concrete Foundation	\$7.98	\$58,573.20
5.	Concrete Columns	\$1.31	\$9,615.40
6.	Concrete Walks	\$1.15	\$8,441.00
7.	Masonry	\$19.05	\$139,827.00
8.	Structural Steel	\$12.07	\$88,593.80
9.	Millwork	\$3.18	\$23,341.20
10.	Roofing/C	\$18.98	\$139,313.20
11.	Flashing & Damproofing	\$0.98	\$7,193.20
12.	Cavity Insulation	\$0.49	\$3,596.60
13.	Waterproofing	\$0.22	\$1,614.80
14.	HM Doors and Frames	\$1.66	\$12,184.40
15.	Wood Doors	\$1.25	\$9,175.00
16.	Finish Hardware	\$2.35	\$17,249.00
17.	Glass & Glazing	\$2.49	\$18,276.60
18.	Plaster	\$2.10	\$15,414.00
19.	Drywall & Metal Studs	\$3.75	\$27,525.00
20.	Acoustical Ceilings	\$2.63	\$19,304.20
21.	Ceramic Tile	\$1.89	\$13,872.60
22.	Resilient Flooring	\$2.62	\$19,230.80
23.	Painting	\$3.59	\$26,350.60
24.	Visual Display Boards	\$0.36	\$2,642.40
25.	Toilet Partitions	\$1.08	\$7,927.20
26.	Flagpole	\$0.15	\$1,101.00
27.	Signage	\$0.38	\$2,789.20
28.	Fire Extinguishers	\$0.15	\$1,101.00
29.	Folding Partition	\$0.87	\$6,385.80
30.	Toilet Accessories	\$0.53	\$3,890.20
31.	Projection Screens	\$0.55	\$4,037.00
32.	Plumbing	\$8.91	\$65,399.40
33.	HVAC	\$9.68	\$71,051.20
34.	Electrical	\$15.57	\$114,283.80
		\$135.85	\$997,139.00

TOTAL PROBABLE CONSTRUCTION COST

\$997,139.00

B. Professional Services

1.	Architectural/Engineering Fees	6.50% of Construction Cost	\$64,814.04
2.	Document Reproduction	0.25% of Construction Cost	\$2,492.85
3.	Constr. Materials Testing	0.25% of Construction Cost	\$2,492.85
4.	Texad Dept. of Licensing & Regulation Review and Inspection		\$1,240.00

TOTAL A/E PROFESSIONAL SERVICES

\$71,039.73

TOTAL PROBABLE PROJECT 'TURN-KEY' COST

\$1,068,178.73

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

V·A Architecture

REQUEST FOR PAYMENT NO: Two-E

Project Name: New Pct. 2 Administration Office & Other County Offices: **Justice of the Peace Office**
for Hidalgo County, Pharr, Texas No. 08-1016

Architeturual Firm: V-A Architecture Contract No 09-037-01-13
P.O. # 617618

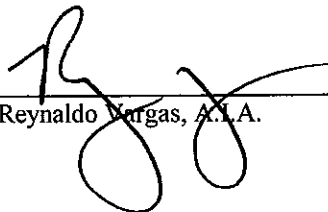
Address: 2029 Industrial Drive

City/State McAllen, Texas 78504

Project Budget:		\$1,307,978.88	Arch % Rate:	6.5%	*\$ Max. Contract Amt.	\$85,018.63
Scope of Services	Estimated Budget	% Completed To Date	Total Due	Less Prev. Payments	Amount Due This Request	
Schematic Design						
A/E Fee 15%	*\$ 12,752.79	100%	*\$ 12,752.79	*\$ 0.00	*\$ 12,752.79	
Design Development						
A/E Fee 20%	*\$ 17,003.73	100%	*\$ 17,003.73	*\$ 0.00	*\$ 17,003.73	
Constr. Doc. Phase						
A/E Fee 40%	*\$ 34,007.45	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
Bidding Phase						
A/E Fee 5%	*\$ 4,250.93	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
Construction Adm.						
A/E Fee 20%	*\$ 17,003.73	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
Reimbursables	*\$ 0.00	0%	*\$ 0.00	*\$ 0.00	*\$ 0.00	
TOTALS	*\$ 85,018.63		*\$ 29,756.52	*\$ 0.00	*\$ 29,756.52	
Total Amount This Request					*\$ 29,756.52	

I certify that the above is true and correct to the best of my knowledge.

VA Architecture March 26, 2008
Architect Date


Reynaldo Vargas, A.I.A.

ANY AND ALL QUESTIONS PERTAINING TO THIS INVOICE SHALL BE ADDRESSED ONLY TO SONIA INFANTE AT 956-631-2242

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

V·A Architecture

**STATEMENT OF PROBABLE CONSTRUCTION COST FOR NEW OFFICE FOR THE JUSTICE OF THE PEACE
PHARR, TEXAS**

#08-1016

A.	BUILDING SQUARE FOOT/	9,802	01/16/09
	SCHEDULED VALUE	PRICE/SQ FT	SYSTEM COST
1.	Mobilization	\$3.36	\$32,934.72
2.	Betterment Allowance	\$0.13	\$1,274.26
3.	Landscaping Allowance	\$0.00	\$0.00
4.	Lawn Sprinkler Allowance	\$0.00	\$0.00
5.	HVAC Allowance	\$0.00	\$0.00
6.	Plumbing Allowance	\$0.00	\$0.00
7.	Electrical Allowance	\$0.00	\$0.00
8.	Dirtwork	\$4.39	\$43,030.78
9.	Concrete Foundation	\$7.98	\$78,219.96
10.	Concrete Columns	\$1.31	\$12,840.62
11.	Concrete Walks	\$1.15	\$11,272.30
12.	Masonry	\$19.05	\$186,728.10
13.	Structural Steel	\$12.07	\$118,310.14
14.	Millwork	\$3.18	\$31,170.36
15.	Roofing	\$13.98	\$137,031.96
16.	Flashing & Damproofing	\$0.98	\$9,605.96
17.	Cavity Insulation	\$0.49	\$4,802.98
18.	Waterproofing	\$0.22	\$2,156.44
19.	HM Doors and Frames	\$1.66	\$16,271.32
20.	Wood Doors	\$1.25	\$12,252.50
21.	Finish Hardware	\$2.35	\$23,034.70
22.	Glass & Glazing	\$2.49	\$24,406.98
23.	Plaster	\$2.10	\$20,584.20
24.	Drywall & Metal Studs	\$3.75	\$36,757.50
25.	Acoustical Ceilings	\$2.63	\$25,779.26
26.	Ceramic Tile	\$1.89	\$18,525.78
27.	Resilient Flooring	\$2.62	\$25,681.24
28.	painting	\$3.59	\$35,189.18
29.	Visual Display Boards	\$0.36	\$3,528.72
30.	Toilet Partitions	\$1.08	\$10,586.16
31.	Flagpole	\$0.15	\$1,470.30
32.	Signage	\$0.38	\$3,724.76
33.	Fire Extinguishers	\$0.15	\$1,470.30
34.	Folding Partition	\$0.87	\$8,527.74
35.	Toilet Accessories	\$0.53	\$5,195.06
36.	Projection Screens	\$0.55	\$5,391.10
37.	Plumbing	\$8.91	\$87,335.82
38.	Fire Sprinkler System	\$2.59	\$25,387.18
39.	HVAC	\$9.68	\$94,883.36
40.	Electrical	\$15.57	\$152,617.14
		\$133.44	\$1,307,978.88
TOTAL PROBABLE CONSTRUCTION COST			\$1,307,978.88

B. Professional Services

1.	Architectural/Engineering Fees	6.50% of Construction Cost	\$85,018.63
2.	Document Reproduction	0.25% of Construction Cost	\$3,269.95
3.	Constr. Materials Testing	0.25% of Construction Cost	\$3,269.95
4.	Texad Dept. of Licensing & Regulation Review and Inspection		\$1,240.00
TOTAL A/E PROFESSIONAL SERVICES			\$92,798.52

TOTAL PROBABLE PROJECT 'TURN-KEY' COST	\$1,400,777.40
---	-----------------------

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

V·A Architecture

March 30, 2009

Héctor "Tito" Palacios, Commissioner
Hidalgo County Pct. 2
301 E. State Street
Pharr, Texas 78577

RE: **New Administration Offices for Hidalgo County Pct. 2 & Other County Offices
Pharr, Texas
Request for Payment
Contract No. 09-037-01-13
PO # 617618**

Commissioner Palacios:

Enclosed please find four sets of the following:

1. Document B, Review and Approval by Hidalgo County Precinct 2 of Architect's Request for Payment #2 (A-E) for the **New Administration Offices for Hidalgo County Pct. 2 & Other County Offices**, for your signature
2. **Architect's Request for Payment #2 (A-E) in the amount totaling \$136,348.32 for the New Administration Offices for Hidalgo County Pct. 2 and Other County Offices.**

Please forward one set to Lupita Garza, Hidalgo County Auditor's Office.

Your prompt attention to this request is greatly appreciated.

Sincerely,


Reynaldo Vargas, A.I.A.
RV:sic
08-101016 INV LTRS#2-032709

RECEIVED BY: _____ TIME: _____

cc: Moisés Salazar, Hidalgo County Purchasing Department

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

South Tower Park Payment Requests

CC CONSENT

Date: 04/28/2009
Submitted By: Yolanda Cisneros, COMM. PCT. #2
Submitted For: Yolanda Cisneros
Department: COMM. PCT. #2
Agenda Category: Purchasing Department

Information

CAPTION

Precinct No.2

1. Approval of Request for Payment No. 6 in the amount of \$2,732.44, from V-A Architecture, contracted architect for "South Tower CRC/Park Pending Construction Items" Contract #C-07-042-04-17.

2. Approval of Request for Application and Certificate for Payment No. 1 in the amount of \$457,531.87, from CAS Companies, L.P. and as recommended by project architect V-A Architecture for "South Tower CRC/ Park Pending Construction Items" after Auditor's review and processing procedures completed including authority for County Treasure to issue payment(s) check(s).

BACKGROUND

PO #613390 for V-A Architecture
PO #614127 for CAS Companies

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1212-452-00-122-008-0-739

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

BUDGETARY IMPACT:

PO#613390 - Funding available in the amount of \$3,310.39

FISCAL YEAR: 2009 ACCT. #: 9-1212-452-00-122-008-0-XXX

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

BUDGETARY IMPACT:

PO#614127 Funding available as of 04/23/2009 in the following object codes:

720---->\$222,310.00

739---->\$330,815.00

pending reattachment of CAS companies invoice/docs.

Attachments

Link: [Payment No.6 Invoice](#)

Link: [Payment No.1 CAS Invoice](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Purchasing Department	Marty Salazar	04/24/2009 11:13 AM	APRV
2	Budget & Management	Veronica Lopez	04/24/2009 11:22 AM	APRV
3	Roland Garcia	Rolando Garcia	04/24/2009 05:13 PM	APRV
4	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Yolanda Cisneros

Started On: 04/23/2009 04:21 PM

Final Approval Date: 04/24/2009

V·A Architecture

**B.
Review and Approval by Hidalgo County Precinct 2
of Architect's Request for Payment**

Project	South Tower CRC/Park Pending Construction Items
PO#	613390
Request for Payment:	#6
In the amount of:	\$2,732.44
Submitted by:	V·A Architecture
For Period to:	April 23, 2009

Reviewed and Approved by:

Héctor "Tito" Palacios, Commissioner
Hidalgo County Pct. 2

Date:

_____ **613390** _____
9-1212-452-00-122-008-0-739
Req. #143944

INVOICE RECEIVED BY:

Yoni ON *4/23/09*

GOODS/SERVICES RECEIVED BY:

Hector Palacios ON *4/23/09*

Vargas & Associates
2029 Industrial Drive
McAllen, Texas 78504
(956) 631-2242

V·A Architecture

REQUEST FOR PAYMENT NO: Six

Project Name: South Tower CRC/Park Pending Construction Items
 Hidalgo County Pct. 2
 Alamo, Texas
 Architectural Firm: V-A Architecture
 Address: 2029 Industrial Drive
 City/State: McAllen, Texas 78504

No. 07-1004A
 PO# 613390

Project Contract Amount:	\$ 654,390.00	Arch % Rate:	6.5%	Orig. Contract Amt.	\$42,535.35
	<i>Minus Alternate No. 5 & 7 Construction Administration Phase Fee 1</i>				<i>(\$1,316.45)</i>
	Maximum Contract Amount				\$41,218.90
Scope of Services	Estimated Budget	% Completed To Date	Total Due	Less Prev. Payments	Amount Due This Request
Schematic Design					
A/E Fee 15%	\$ 6,380.30	100%	\$ 6,380.30	\$ 6,380.30	\$ 0.00
Design Development					
A/E Fee 20%	\$ 8,507.07	100%	\$ 8,507.07	\$ 8,507.07	\$ 0.00
Constr. Doc. Phase					
A/E Fee 40%	\$ 17,014.14	100%	\$ 17,014.14	\$ 17,014.14	\$ 0.00
Bidding Phase					
A/E Fee 5%	\$ 2,126.77	100%	\$ 2,126.77	\$ 2,126.77	\$ (0.00)
<i>Orig. Construction Adm. A/E Fee</i>	<i>\$ 8,507.07</i>				
<i>Minus Alt. #5, #7 Constr. Adm. Fee</i>	<i>\$ (1,316.45)</i>				
	\$ 7,190.62	87%	\$ 6,255.84	3,523.40	\$ 2,732.44
Reimbursables	\$ 0.00	0%	\$ 0.00	\$ 0.00	\$ 0.00
TOTALS	\$ 41,218.90		\$ 40,284.12	\$ 37,551.68	\$ 2,732.44
Total Amount This Request					\$ 2,732.44

I certify that the above is true and correct to the best of my knowledge.

VA Architecture April 23, 2009
 Architect

1 Alternates No. 5: Handball Courts & No. 7 Project Sign in the amount totaling \$101,265.00 were designed but not awarded. Therefore, \$101,265.00 x 6.5% (A/E Rate) x 20% (Construction Adm. Phase Only) which equals, (\$1,316.45), is being deleted from the Construction Administration Fee.

ANY AND ALL QUESTIONS PERTAINING TO THIS INVOICE
 SHALL BE ADDRESSED ONLY TO SONIA INFANTE AT 956-631-2242

Vargas & Associates
 2029 Industrial Drive
 McAllen, Texas 78504
 (956) 631-2242

**AT & T FIBER RUN FOR THE IT DEPT.
CC CONSENT**

Date: 04/28/2009
Submitted By: Tanya Delira, PURCHASING DEPT.
Submitted For: Marty Salazar
Department: PURCHASING DEPT.
Agenda Category: Purchasing Department

Information

CAPTION

Presentation for discussion, consideration and approval to utilize the following cooperative purchasing vendors, for purchases on an "AS NEEDED BASIS" through our membership/participation with Texas Procurement and Support Services (TPASS), (DIR) Department of Information Resources, (TCPN) The Cooperative Purchasing Network, (HGAC) awarded pricing included, but not limited to, Precincts, Department, Programs. Agencies, etc.:

VENDOR	CONTRACT DESCRIPTION	CONTACT #
AT & T	FIBER RUN	DIR-SDD-233

through December 31, 2009.

BACKGROUND

FIBER RUN WILL RUN FROM COURTHOUSE TO ELECTIONS DEPARTMENT. IT WILL IMPROVE CONNECTIVITY TO ELECTION'S COMPUTERIZED VOTING SYSTEM & IMPROVE TELEPHONE CONNECTIVITY TO ELECTIONS DURING THE ELECTION EVENTS.

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1100-415-00-200-002-0-431
FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Amount available for req #153460 for A & T \$17,565.12 as of 4-22-09.

Attachments

Link: [AT&T](#)

Form Routing/Status

Route Seq	Inbox	Approved By	Date	Status
1	Purchasing Department	Marty Salazar	04/22/2009 03:06 PM	APRV
2	Budget & Management	Veronica Lopez	04/22/2009 03:08 PM	APRV
3	Ivan Cantu	Ivan Cantu	04/22/2009 03:21 PM	APRV
4	Auditor's Office		04/24/2009 05:21 PM	NEW

Form Started By: Tanya Delira

Started On: 04/22/2009 08:28
AM

Final Approval Date: 04/24/2009

Consent
4/22/09
#15139

Requisition

Req # 00153460

PO #

Date: 04/21/09

Bill To: x
 x

Vendor : 328626
 AT&T
 C/O WES BRYANT/7TH FLOOR
 2600 N. CENTRAL EXPRESSWAY
 RICHARDSON TX 75080

Ship To: INFORMATION TECHNOLOGY DEPARTMENT
 100 E. CANO, 4TH FLOOR
 EDINBURG TX 78540

Contact: EDNA KIRBY
 956-292-7010

Contract No: DIR-SDD-233

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		QUOTE 041609a DIR-SDD-233 FIBER RUN WILL RUN FROM COURTHOUSE TO ELECTIONS DEPARTMENT. IMPROVE CONNECTIVITY TO ELECTION'S COMPUTERIZED VOTING SYSTEM & IMPROVE TELEPHONE CONNECTIVITY TO ELECTION'S DURING ELECTION EVENTS DO NOT DUPLICATE ORDER		
1.00	EACH	FIBER RUN	17,565.12	17,565.12
		Account No _____	Encumbrance	
		9-1100-415-00-200-002-0-431	17,565.12	
			Freight	.00
			Total	17,565.12
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____



at&t

Proposal and Quotation

AT&T Proprietary

Quote # x 041609a

A Quotation for		Quotation Information	
Name: Juan DeLeon Company: Hidalgo County Division: Email: Phone #:	Hidalgo County	Quote Date: 041609a Quote Expiration Date: 5/16/2009 Account Executive: Nelda Guerra Technical Sales Consultant II: Rufino Saenz Application Specialist II: Roy Hanks Inside Sales: Wes Bryant	

Line #	Part #	Description	Qty	List Price	Prorated Price	Extnd Price
	604-1091	Fiber Run	1	\$ 17,565.12	\$ 17,565.12	\$ 17,565.12

Pricing in accordance w/State of Texas DIR contract # DIR-SDD-233
DIR-SDD-233 must be referenced on the PO

TOTAL \$17,565.12

TERMS: Net 30
 *Net 30, payment terms and order acceptance based upon prior credit approval.
 *This Proposal and Quotation, and any purchase made in response to this Proposal and Quotation, are subject to the terms and conditions set forth in the Equipment Resale Contract between the parties, or if no contract exists, the standard AT&T Equipment and Services resale contract.
 * This Quotation excludes all applicable taxes and shipping charges.
 * F.O.B.: Origin; Prepaid and Add, Standard Shipping method is UPS Ground unless otherwise specified.

NOTE:
 *Please include "NET 30", "Ship To" and "Bill To" on Purchase Order.
 *Please verify your shipment is correct by reviewing the packing list before opening.
 *Return policies vary by manufacturer and are time sensitive. Please contact your local AT&T representative regarding any return questions or requests. All returns are subject to manufacturer's terms and conditions. Restocking charges may apply. Return authorizations are required prior to return.

AT&T Services encompass complete Network Lifecycle Solutions to maximize the return on investment from your network infrastructure. We can...

- Design** - Consulting Services, Security, Network Mgmt.
- Deliver** - Staging, Installation, Leasing, Project Mgmt.
- Manage** - Monitoring, Maintenance, Mgd Svcs.

Monthly Financing available through AT&T Capital Services.
 For questions and information about this and other financing options and promotions available from AT&T, please call your local AT&T representative.

Estimated Monthly Payment: \$337.54
 (Based on financing from AT&T Capital Services)
 Plus applicable taxes

Thank you for this opportunity to present you with our quote.
 To ensure prompt expediting of this order, please fax to the following number. Fax 214-576-7771

Remittance Address: AT&T P.O. Box 8104 Aurora, IL 60507-8104	Order Entry Address: AT&T C/O Wes Bryant/7th Floor 2600 N. Central Expressway Richardson, TX 75080
--	---

Tel: 214-576-7238
 Fax: 214-576-7771

V. 03/26/09



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Go DIRECT

for Purchase or Lease of Cisco Networking Equipment

AT&T Datacomm offers Cisco networking equipment to Texas governmental entities through DIR's Go DIRect Program.

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How to Order

- For product and pricing information and for a quote form, contact one of the vendors listed below.
Note: Pricing for products is the same no matter which reseller you order from.
- Generate a purchase order, payable to the **vendor of your choice**.
Note: You must reference agreement number **DIR-SDD-233** on your purchase order.
- Submit your purchase order directly to the selected vendor.

Contract Information

To access PDF files, use the free [Adobe Acrobat Reader](#).

- Contract [DIR-SDD-233](#) expires 05/09/2009 (46 KB)
- [Appendix A, Standard Terms and Conditions](#) (177 KB)
- [Appendix B, Product and Pricing Index](#) (34 KB)
- [Appendix C, Subcontracting Plan](#) (152 KB)
- [Appendix D, End User License Agreement](#) (37 KB)
- [Appendix E, Master Leasing Agreement](#) (152 KB)
- [Amendment 1](#) (17 KB)
- [Amendment 2](#) (19 KB)

Contacts

Vendor Contacts

Vendor Name		

Vendor ID	HUB	Contact
AT&T Datacomm Vendor ID: 143-052-9710-400	No	Marcus Montemayor Phone: 512-421-5160 Fax: 512-870-4388
Genesis Networks Vendor ID: 174-302-2935-500	Hispanic Male	Sean Nelson or Philip Kiser Phone: 210-489-6690 Fax: 210-489-6612
HBMG, Inc. Vendor ID: 174-302-4249-900	Hispanic Male	David Smith Phone: 512-459-2667 Fax: 512-459-5291

DIR Contract Contact

Lisa Maldonado
Phone: 512-463-5662



Department of Information Resources

300 West 15th St., Suite 1300
Austin, TX 78701 ([Map & Directions](#))
1-512-475-4700

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[DIR Contacts](#) | dirinfo@dir.state.tx.us

Last updated February 25, 2009

February 25, 2009

Pct. 1-Purchase of Digital Video System

CC CONSENT

Date: 04/28/2009
 Submitted By: Gricelda Villarreal, PURCHASING DEPT.
 Submitted For: Marty Salazar
 Department: PURCHASING DEPT.
 Agenda Category: Purchasing Department

Information

CAPTION

Presentation for discussion, consideration and approval to purchase One (1) DVM-500 Digital In-Car Video System complete kit through Hidalgo County's membership/participation with HGAC awarded vendor Digital Ally, Inc. (HGAC contract no: EF 04-09) for the total amount of \$3,953.43, price includes HGAC fees project #2009-208)

BACKGROUND

Fiscal Impact

FISCAL YEAR: 2009 ACCT. #: 9-1100-432-00-121-001-0-748
 FUNDS AVAILABLE Y/N?: Y MATCHING FUNDS Y/N?:

BUDGETARY IMPACT:

Amount available for req #153609 \$3,953.42 as of 4-24-09 for Digital Ally, Inc.

The quote reflects an amount of \$3,953.425; the req amount will be rounded up to \$3,953.43, pending to be corrected by Noe from Pct. 1 on the Allio Acct system as of 4-24-09.

Attachments

Link: [Digital Video System](#)

Form Routing/Status

Route	Seq	Inbox	Approved By	Date	Status
1		Purchasing Department	Marty Salazar	04/24/2009 11:16 AM	APRV
2		Budget & Management	Veronica Lopez	04/24/2009 11:21 AM	APRV
3		Ivan Cantu	Ivan Cantu	04/24/2009 11:53 AM	APRV
4		Auditor's Office		04/24/2009 05:21 PM	NEW
Form Started By: Gricelda Villarreal				Started On: 04/24/2009 10:06 AM	
Final Approval Date: 04/24/2009					



CONTRACT PRICING WORKSHEET For Standard Equipment Purchases

Contract No.:

EF04-09

Date Prepared:

4/23/2009

This Form must be prepared by Contractor and given to End User. The H-GAC administrative fee shall be shown in Section F. End User Issues PO to Contractor, and MUST also fax a copy of PO, together with completed Pricing Worksheet, to H-GAC @ 713-993-4548. Please type or print legibly.

Buying Agency:	Hidalgo County Constable Precinct 1	Contractor:	Digital Ally, Inc.
Contact Person:		Prepared By:	Alicia Everett
Phone:	956-973-7815	Phone:	913-814-7774
Fax:	956-973-7804	Fax:	913-814-7775
Email:		Email:	salcs@digitalallyinc.com
Product Code:	BE01	Description:	DVM-500 Digital In-Car Video System complete kit

A. Product Item Base Unit Price Per Contractor's H-GAC Contract: \$3,895.00

B. Published Options - Itemize below - Attach additional sheet(s) if necessary - Include Option Code in description if applicable.
(Note: Published Options are options which were submitted and priced in Contractor's bid.)

Description	Cost	Description	Cost
<h1>HGACBUY</h1> THE SMART PURCHASING SOLUTION			
			Subtotal From Additional Sheet(s):

C. Unpublished Options - Itemize below / attach additional sheet(s) if necessary.
(Note: Unpublished options are items which were not submitted and priced in Contractor's bid.)

Description	Cost	Description	Cost
			Subtotal From Additional Sheet(s):
			Subtotal C:

Check: Total cost of Unpublished Options (C) cannot exceed 25% of the total of the Base Unit Price plus Published Options (A+B). For this transaction the percentage is: 0%

D. Other Cost Items Not Itemized Above (e.g. Installation, Freight, Delivery, Etc.)

Description	Cost	Description	Cost
			Subtotal D:

E. Total Cost Before Any Applicable Trade-In / Other Allowances / Discounts (A+B+C+D) 3895

F. H-GAC Fee Calculation (From Current Fee Tables) Subtotal E: 3895

G. Trade-Ins / Other Allowances / Special Discounts Subtotal F: 58.425

H. Total Purchase Price (E+F+G): 3953.425

9-1100-432-00-121-001-0-748