DATE: August 13, 2009

DEPARTMENT HEAD: Eduardo Olivarez, Chief Administrative Officer

DEPARTMENT NAME: Hidalgo County Health Department

ACCOUNT NUMBER: 9-1293-441-00-340-012-0 Immunization Grant Contract

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

Honorable Commissioner's Court of Hidalgo County:

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

INCREASE OBJECT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT -
9-1293-441-00-340-012-0-113	Regular F/T Employees	$ 496,937.80
9-1293-441-00-340-012-0-220	FICA	$ 38,015.74
9-1293-441-00-340-012-0-230	Retirement	$ 44,326.85
9-1293-441-00-340-012-0-250	Unemployment Compensation	$ 2,484.69
9-1293-441-00-340-012-0-260	Workers Compensation	$ 16,249.87
9-1293-441-00-340-012-0-211	Health Insurance	$ 40,982.59
9-1293-441-00-340-012-0-212	Life Insurance	$ 465.00
9-1293-441-00-340-012-0-601	Office & Computer Supplies	$ 4,928.73
9-1293-441-00-340-012-0-603	Educational/Instructional Supplies	$ 4,928.73
9-1293-334-10-340-012-0-000	Immunization Revenues	649,320.00
	TOTAL BUDGET	$ 649,320.00

INCREASE REQUEST $

Revenue Account #

REASON: Implement Immunization Contract Budget for the period 9/1/2009 - 8/31/2010.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONER'S COURT DATE ATTEST CO. CLERK