

CELLULAR PHONE REQUEST FORM - W.1.2

HIDALGO COUNTY, TEXAS

(1) Type of Request:
 Cellular Service Allowance (STIPEND) Equipment Replacement
 County Owned Department Assigned Cellular Service Name Change
 Delete Service
 Other wireless device: Data card GPS Blackberry Other:

STIPEND ONLY:

(2) Requesting employee/position: _____
Department #: _____ Employee ID #: _____ Office: _____

(3) Type of duties:
 Offsite duties On-call duties Law Enforcement / Emergency Response Other: _____

(4) Describe how the use of this cell phone will benefit the county: _____

COUNTY OWNED CELL PHONE ONLY:

(5) TOTAL AMOUNT OF PURCHASE ORDER: (Purchase Order must cover total for fiscal year. Please allow an additional \$10-\$15 per device for fees)
Quantity: _____

Service: \$ _____ /mo (x) _____ months = \$0.00	Account: _____	-532
Service: \$ _____ /mo (x) _____ months = \$0.00	Account: _____	-662

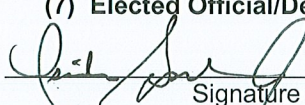
Requisition Total: _____ **Requisition Number:** _____

DATA CARDS, GPS or OTHER

(6) Requesting employee/position: David Sinder/Compliance Monitor
Department #: 009 Employee ID #: 023167 Office: Indigent Defe

Service: \$ _____ /mo (x) _____ months = \$0.00	Account: <u>91100412000090030601</u>	532
Service: \$ _____ /mo (x) _____ months = \$0.00	Account: _____	-662

Requisition Total: \$99.99 **Requisition Number:** 00166740

(7) Elected Official/Department Head Authorization for Request:
 _____ Isidro Sepulveda Jr _____ 12/07/2009
Signature Print Name Date

(8) Executive Office Authorization (Commissioner's Court Departments Only):

Signature Print Name Date

(9) IT DEPARTMENT ONLY:
Service Type Codes: Replacement

Commissioner's Court Action:

Approved Date: _____ Disapproved

Requisition

Req # 00166740

PO #

Date: 12/03/09

Bill To: x
x

Vendor : 210501
SPRINT
P O BOX 660092
DALLAS TX 75266-0092

Ship To: Indigent Defense
100 N. Closner
Annex Bldg 1
Edinburg Tx 78539

Contact: David Sinder
956-318-2372

Contract No:

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1.00	EACH	DO NOT DUPLICATE ORDER equipment upgrade from u598 data card to mifi card DISCOUNT: 200 Account No 9-1100-412-00-009-003-0-601	299.99	99.99
			<u>Encumbrance</u>	
			99.99	
			Freight	.00
			Total	99.99
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____