

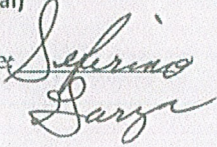


WIRELESS DEVICE REQUEST FORM W.1.2

(1) Type of Request:

Wireless device: Data card Blackberry Other: _____

DATA CARDS, BLACKBERRY or OTHER (one form per individual)

(2) Requesting employee: SEFERINO GARZA Employee ID# 144584 Signature: 

DEPARTMENT: FACILITIES MANAGEMENT DEPT #: 220

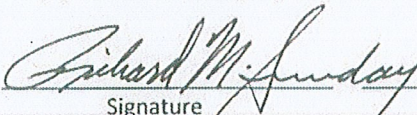
Quantity: 1

Service: \$ 55.00/mo (x) 10 months = 550.00 Account: 0-1100-419-40-220-002-0-...-532

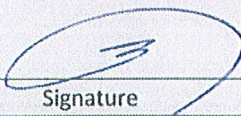
Service: \$ _____/mo (x) _____ months = 0.00 Account: _____-619/664

Requisition Total: 550.00 Requisition Number: 171570

(3) Elected Official/Department Head Authorization for Request:

 Richard M. Sunday 3/2/10
Signature Print Name Date

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

 Valde Guerra 3/3/10
Signature Print Name Date

(5) IT DEPARTMENT ONLY:

Service Type Codes:

SPRINT UNLIMITED DATACARD PLAN -or-

SPRINT BE1000 + DATAPLAN

OTHER: _____

Commissioner's Court Action: Commissioner's Court Date: _____

Approved Date: _____ Disapproved

I understand that the value of the use of the wireless device(s) will be included in the wages of the employee that is assigned a county phone and the employee will be liable for the taxes incurred by the cost of this device(s).