**DATE: March 10, 2010**

**DEPARTMENT HEAD: Eduardo Olivarez, Chief Administrative Officer**

**DEPARTMENT NAME: Hidalgo County Health Department**

**ACCOUNT NUMBER: 0-1293-441-00-340-042-0 FY 2010 CPS/PHER 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 - |
|---|---|---|
| 0-1293-441-00-340-042-0-113 | Regular F/T Employees | $ 114,086.00 |
| 0-1293-441-00-340-042-0-211 | Health Insurance | $ 12,145.00 |
| 0-1293-441-00-340-042-0-212 | Life Insurance | $ 96.25 |
| 0-1293-441-00-340-042-0-220 | FICA | $ 8,727.58 |
| 0-1293-441-00-340-042-0-230 | Retirement | $ 10,176.47 |
| 0-1293-441-00-340-042-0-250 | Unemployment Compensation | $ 570.43 |
| 0-1293-441-00-340-042-0-260 | Worker's Compensation | $ 3,730.27 |
| 0-1293-441-00-340-042-0-441 | Rental of Land and Buildings | $ 5,000.00 |
| 0-1293-441-00-340-042-0-581 | Travel in County | $ 1,100.00 |
| 0-1293-441-00-340-042-0-583 | Travel Out of County | $ 7,643.00 |
| 0-1293-441-00-340-042-0-584 | Registration Fees | $ 5,000.00 |
| 0-1293-441-00-340-042-0-601 | Office and Computer Supplies | $ 9,492.00 |
| 0-1293-441-00-340-042-0-603 | Educational / Instructional Supplies | $ 5,000.00 |
| 0-1293-441-00-340-042-0-604 | Medical & Lab Supplies | $ 7,000.00 |
| 0-1293-441-00-340-042-0-748 | Other Equipment | $ 22,733.00 |
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| | **TOTAL BUDGET** | $ 212,500.00 |

**INCREASE REQUEST $**

Revenue Account # 0-1293-331-12-340-042-0-000 $ 212,500.00

REASON: Implement revised CPS / PHER Contract Budget for the period 9/15/2009 - 7/31/2010.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONER'S COURT DATE ATTEST CO. CLERK