



WIRELESS DEVICE REQUEST FORM W.1.2

(1) Type of Request:

Wireless device: Data card Blackberry Other: NameChange(newnumber)

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

(2) Requesting employee: Office Use Employee ID# n/a Signature: *Yvonne Ramon*

DEPARTMENT: Election's Department DEPT #: _____

Quantity: 1

Service: \$ 55.00/mo (x) 7 months = 385.00 Account: _____ 0-1100-414-00-130-001-0-532

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

Requisition Total: 2,640.00 ^{P.O.} Requisition Number: 637893

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

Yvonne Ramon YVONNE RAMON 6-9-10
Signature Print Name Date

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

Signature Print Name Date

(5) IT DEPARTMENT ONLY:

Service Type Codes:

SPRINT UNLIMITED DATACARD PLAN -or-
 SPRINT BE1000 + DATAPLAN
 OTHER: NameChange(newnumber) Replacing

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).