WIRELESS DEVICE REQUEST FORM W.1.2

(1) Type of Request:

Wireless device: ☑ Data card ☐ Blackberry ☑ Other: DELETE

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

(2) Requesting employee: Raymundo Eufracio Employee ID# 138509 Signature:

DEPARTMENT: County Auditor's Office DEPT #: 170

Quantity: 1

Service: $ 55.00 /mo (x) 8 months = 440.00 Account: 0-1100-415-21-170-001-0-532

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

Requisition Total: 440.00 **Requisition Number:** 637574

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

Signature | RAY EUFRACIO Print Name | 9/30/10 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:** DELETE 956-289-6192

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).

Revised: 01/21/2010

WIRELESS DEVICE REQUEST FORM W.1.2

(1) Type of Request:

Wireless device: ☑ Data card ☐ Blackberry ☑ Other: DELETE

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

(2) Requesting employee: Linda Fong Employee ID# 089087 Signature: Linda Fong

DEPARTMENT: County Auditor's Office DEPT #: 170

Quantity: 1

Service: $ 55.00 /mo (x) 8 months = 440.00 Account: 0-1100-415-21-170-001-0-532

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

Requisition Total: 440.00 **Requisition Number:** 637574

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

Signature | R M Eufrasio (Print Name) | 9/30/10 (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: DELETE 956-225-8783

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).

Revised: 01/21/2010