

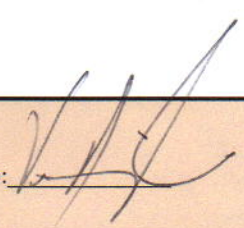


WIRELESS DEVICE REQUEST FORM W.1.3

(1) Type of Request:

- County Owned Department Assigned Cellular Service
- Equipment Replacement
- Delete Service -Name change 956-578-5972

COUNTY OWNED / ASSIGNED CELL PHONE :

(2) Requesting employee: Veronica Riojas Employee ID# 087963 Signature: 

DEPARTMENT: WIC DEPT #: 1292


Quantity: 1

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

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

Requisition Total: \$0.00 Requisition Number: _____

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

 Norma L. Longoria 3/11/2011
 Signature Print Name Date

(4) Executive Office Authorization:

 Valde Guerra 3/14/11
 Signature Print Name Date

(5) IT DEPARTMENT ONLY:

Service Type Codes:

- VERIZON Nationwide Talk Small Business Share Plan -or-
- VERIZON Talk Unlimited Anytime Minutes + Email PDA Smartphone / Blackberry solution

Commissioner's Court Action: Commissioner's Court Date: 3/29/11

- 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).



WIRELESS DEVICE REQUEST FORM W.1.3

(1) Type of Request:

- County Owned Department Assigned Cellular Service - Name Change 950-578-5972
- Equipment Replacement
- Delete Service

COUNTY OWNED / ASSIGNED CELL PHONE :

(2) Requesting employee: Office Use Employee ID# _____ Signature: _____

DEPARTMENT: WIC DEPT #: 1292

Quantity: 1

Service: \$ 25.94 /mo (x) 7.94 months = 181.58 Account: 1.1292.441.00.350.001.1 -532

tax: 5.00 /mo x 7 mo. = 35.00

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

Requisition Total: ~~\$0.00~~ 201.58 Requisition Number: P.O. 653061

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

Norma L Longoria Norma L. Longoria 3/11/2011
 Signature Print Name Date

(4) Executive Office Authorization:

[Signature] Valde Guerra 3/14/11
 Signature Print Name Date

(5) IT DEPARTMENT ONLY:

Service Type Codes:

- VERIZON Nationwide Talk Small Business Share Plan _____ -or-
- VERIZON Talk Unlimited Anytime Minutes + Email PDA Smartphone / Blackberry solution _____

Commissioner's Court Action: Commissioner's Court Date: 3/29/11

- 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).



WIRELESS DEVICE REQUEST FORM W.1.3

(1) Type of Request:

- County Owned Department Assigned Cellular Service
- Equipment Replacement
- Delete Service - Name change 956-907-4943

COUNTY OWNED / ASSIGNED CELL PHONE :

(2) Requesting employee: Noemi Hernandez Employee ID# 165034 Signature: Noemi Hernandez

DEPARTMENT: WIC DEPT #: 1292

Quantity: 1

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

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

Requisition Total: \$ 0.00 Requisition Number: _____

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

Norma L. Longoira Norma L. Longoira 3/11/2011
 Signature Print Name Date

(4) Executive Office Authorization:

Valde Guerra Valde Guerra 3/14/11
 Signature Print Name Date

(5) IT DEPARTMENT ONLY:

Service Type Codes:

- VERIZON Nationwide Talk Small Business Share Plan _____ -or-
- VERIZON Talk Unlimited Anytime Minutes + Email PDA Smartphone / Blackberry solution _____

Commissioner's Court Action: Commissioner's Court Date: 3/29/11

- 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).



WIRELESS DEVICE REQUEST FORM W.1.3

(1) Type of Request:

- County Owned Department Assigned Cellular Service Name Change 956-907-4943
- Equipment Replacement
- Delete Service

COUNTY OWNED / ASSIGNED CELL PHONE :

(2) Requesting employee: Office Use Employee ID# _____ Signature: _____

DEPARTMENT: WIC DEPT #: 1292

Quantity: 21

Service: \$25.94/mo (x) 7 months = 181.58 Account: 1.1292.441.00.350.001.1 -532
tax&fees: 5.00x7=35.00

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

Requisition Total: ~~\$0.00~~ = 201.58 Requisition Number: P.O. 653061

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

Norma L Longoria Norma L. Longoria 3/11/2011
Signature Print Name Date

(4) Executive Office Authorization:

Valde Guerra Valde Guerra 3/14/11
Signature Print Name Date

(5) IT DEPARTMENT ONLY:

Service Type Codes:

- VERIZON Nationwide Talk Small Business Share Plan _____ -or-
- VERIZON Talk Unlimited Anytime Minutes + Email PDA Smartphone / Blackberry solution _____

Commissioner's Court Action: Commissioner's Court Date: 3/29/11

- 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).