

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Name Change 956-289-0977 <input type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo
COUNTY OWNED WIRELESS DEVICE		
Office Use / Employee: <u>Office Use</u> Employee ID# <u>N/A</u> Signature: <u>N/A</u>		
Department: <u>Commissioner Pet 4</u> Dept#: <u>124</u>		
Quantity: <u>1</u>		
Service: \$ <u>39.99</u> /mo (x) <u>9</u> months = \$ <u>359.91</u> Account: <u>1-1200-431-00-124-007-0-532</u>		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664		
Requisition Total: \$ <u>3,839.04</u> Requisition Number: <u>P.O. 651282</u>		
STIPEND		
(1) Employee: _____ Employee ID# _____ Signature: _____		
Department: _____ Dept#: _____		
Quantity: _____		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532		
Total: _____		
(2) Elected Official/Department Head Authorization for Request:		
<u><i>Joseph Palacios</i></u> Signature	<u>Joseph Palacios</u> Print Name	<u>3-30-11</u> Date
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
_____ Signature	_____ Print Name	_____ Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>Name Change for 956-289-0977</u>		

Commissioner's Court Action: _____ Commissioner's Court Date: 4/5/11

Approved Date: _____ Disapproved

Current County cell phone policy stipulates that employees that have cell phones assigned to them will be taxed the value of the service. Please see the following IRS document for more information: http://www.irs.gov/pub/irs/psig/article01_id=167154_00.html, EXAMPLE 2