

Requisition

Req # 00201760

PO #

Date: 08/30/11

Bill To: x
x

Vendor : 287024
VERIZON WIRELESS
P.O. BOX 660108
DALLAS TX 75266-0108

Ship To: HIDALGO CO. PCT 3
724 N. BREYFOGLE
MISSION TX 78574

Contact: LOUIE MENDOZA
956-585-4509

Contract No: DIR-SDD-604

Special Instructions:

REQ# 873

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DIR-SDD-604 DO NOT DUPLICATE ORDER		
4.00	EACH	CELLULAR PHONE SERVICES FOR DANIEL HERNANDEZ (956)587-1622 (NATIONWIDE UNLIMITED @ \$56.69 PER MONTH)	56.69	226.76
4.00	EACH	TAXES AND FEE (ESTIMATE AMT. ONLY)	5.00	20.00
4.00	EACH	CELLULAR PHONE SERVICES FOR SAUL RAMIREZ (956)929-0063 (NATIONWIDE UNLIMITED @ \$56.69 PER MONTH)	56.69	226.76
4.00	EACH	TAXES AND FEE (ESTIMATE AMT. ONLY)	5.00	20.00
4.00	EACH	CELLULAR PHONE SERVICES FOR GILBERTO CAVAZOS (956)929-0049 (NATIONWIDE UNLIMITED @ \$56.69 PER MONTH)	56.69	226.76
4.00	EACH	TAXES AND FEE (ESTIMATE AMT. ONLY)	5.00	20.00
4.00	EACH	CELLULAR PHONE SERVICE FOR SABAS SANDOVAL (956)929-0140 (NATIONWIDE UNLIMITED @ \$56.69 PER MONTH)	56.69	226.76
4.00	EACH	TAXES AND FEE (ESTIMATE AMT. ONLY)	5.00	20.00
4.00	EACH	CELLULAR PHONE SERVICES FOR ROBERT SALAZAR (PENDING PHONE) (NATIONWIDE UNLIMITED @ \$56.69 PER MONTH)	56.69	226.76
4.00	EACH	TAXES AND FEE (ESTIMATE AMT. ONLY)	5.00	20.00
		<u>Account No</u>	<u>Encumbrance</u>	
		1-1200-431-00-123-004-0-532	1,233.80	
			Freight	.00
			Total	1,233.80
		FOR USE AT PRECINCT#3 FOR CHANGING OF PHONE PLANS FOR CELL PHONES TO NATIONWIDE UNLIMITED		
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____

New Service

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Name Change <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: Salazar, Robert Employee ID# 110814 Signature: [Signature]
 Department: Print #3 RAB Dept#: 123

Quantity: 1

Service: \$ 56.69 /mo (x) 4 months = 226.76 Account: 1-1200-431-00-123-004-0 -532
 Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664

Requisition Total: 4,233.80 Requisition Number: 201760

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____
 Department: _____ Dept#: _____

Quantity: _____

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

Total: _____

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

[Signature] Joe M. Flores, Commissioner 8/13/11
 Signature Print Name Date

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

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: New activation

Commissioner's Court Action: _____ Commissioner's Court Date: 9/20/11
 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/govt/irsig/article/0,,id=167154,00.html>, EXAMPLE 2.

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 type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" 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: Hammond, Daniel Employee ID# 103608 Signature: [Signature]

Department: Print #3 R+B Dept#: 123

Quantity: 1 956 587-1622

Service: \$ 56.69 /mo (x) 4 months = 226.76 Account: 1-1300-451-00-123-004-0-532

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

Requisition Total: 1,233.80 Requisition Number: 201740

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

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

Total: _____

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

[Signature] Joe M. Flores, Commissioner 8/18/11

Signature Print Name Date

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

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: upgrading to Nationwide Unlimited

Commissioner's Court Action: _____ Commissioner's Court Date: 9/20/11

Approved Date: _____ Disapproved



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 type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" 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>Romney, Paul C.</u> Employee ID# <u>051527</u> Signature: <u>[Signature]</u>		
Department: <u>Print #3 REP</u> Dept#: <u>123</u>		
Quantity: <u>1</u> <u>950-929-0063</u>		
Service: \$ <u>56.69</u> /mo (x) <u>4</u> months = <u>226.76</u> Account: <u>1-1200-431-00-123-004-0 -532</u>		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664		
Requisition Total: <u>1,233.80</u> Requisition Number: <u>201760</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>[Signature]</u> <u>Paul M. Flores, Commissioner</u> <u>8/12/11</u>		
Signature Print Name Date		
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
_____ Signature Print Name Date		
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>upgrading to Nationwide Unlimited</u>		

Commissioner's Court Action:

Commissioner's Court Date: 9/20/11

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/govt/tsg/article0,,id=167154,00.html>, EXAMPLE 2.

Revised: 03/09/2011



WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST

County Owned Wireless Device:

- Office Use *or* Individual
- Name Change
- Equipment Change
- Plan Change
- Delete Service

Wireless Data Device:

- Data Card
- Blackberry
- Other:

Stipend:

- Cellular Telephone \$50/mo
- Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: Canyon, District Employee ID# 106030 Signature: [Signature]

Department: Puente #3 R+B Dept#: 123

Quantity: 1 950-929-0049

Service: \$ 56.69 /mo (x) 4 months = 226.76 Account: 1-1200-431-10-123-104-0- -532

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

Requisition Total: 1,233.80 Requisition Number: 201740

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

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

Total: _____

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

[Signature] Joe M. Flores, Commissioner 8/18/11
Signature Print Name Date

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

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Upgrading to Nationwide Unlimited

Commissioner's Court Action: _____ Commissioner's Court Date: 9/20/11

- 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/govt/irsig/article/0,,id=167154,00.html>, EXAMPLE 2.



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 type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" 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: Sanford, Arbas Employee ID# 143847 Signature: [Signature]

Department: Print #3 R+B Dept#: 123

Quantity: 1 950-929-0140

Service: \$56.69/mo (x) 4 months = 226.76 Account: 1-1200-431-00123-004-0 -532

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

Requisition Total: 1,233.80 Requisition Number: 201760

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

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

Total: _____

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

[Signature] Joe M. Flores, Commissioner 8/18/11

Signature Print Name Date

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

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Upgrading to Nationwide Unlimited

Commissioner's Court Action: _____ Commissioner's Court Date: 9/20/11

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/govt/sg/article0,,ki=167154,00.html>, EXAMPLE 2.

Revised: 03/09/2011