

DATE: 9/22/2011
 DEPARTMENT HEAD: NORMA LONGORIA
 DEPARTMENT NAME: WIC - LACTATION
 ACCOUNT NUMBER: 1.1292.441.00.350.013.2.XXX

SUBJECT: Budget Amendments (Increases) in Accordance with Local Government Code, Chapter 111, Subchapter C

Honorable Commissioner's Court of Hidalgo County :

I would like to request the following amendments (increases) to my department budget in accordance with Local Government Code, Chapter 111, Subchapter C.

INCREASE OBJECT NUMBERS	ACCOUNT (OBJECT) NAME	AMOUNT
1.1292.441.00.350.013.2.113	Salaries	20,000.00
1.1292.441.00.350.013.2.211	Health Insurance	2,000.00
1.1292.441.00.350.013.2.212	Life Insurance	13.50
1.1292.441.00.350.013.2.220	FICA	1,400.00
1.1292.441.00.350.013.2.230	Retirement	1,500.00
1.1292.441.00.350.013.2.250	Unemployment	86.50
1.1292.331.12.350.013.2.000	WIC Lactation Program Revenue	25,000.00
TOTAL FUND BALANCE IMPACT		25,000.00

REASON: Appropriate money from grant award for the FY2012.

 DEPARTMENT HEAD SIGNATURE

 APPROVED COMMISSIONERS COURT DATE: _____ ATTEST COUNTY CLERK