

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 checked="" 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>Jorge Heiu</u> Employee ID# <u>176028</u> Signature:		
Department: <u>I.T.</u> Dept#: <u>200</u>		
Quantity: <u>1 950-515-8431</u>		
Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532		
Service: \$ _____/mo (x) _____ months = _____ Account: _____ -619/664		
Requisition Total: _____ Requisition Number: _____		
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>Renan Ramirez</u>	<u>1/17/12</u>
Signature	Print Name	Date
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
	<u>Valde Guerra</u>	<u>1/27/12</u>
Signature	Print Name	Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>Deactivate 950-515-8431</u>		

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Current County call phone policy stipulates that employees that have call 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/ftslg/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: Jose Alvarez Employee ID# 163167 Signature: n/aDepartment: I.T. Dept#: 200Quantity: 1 956-207-2391

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

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

Requisition Total: _____ Requisition Number: _____

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] Renan Ramirez 1/8/12
 Signature Print Name Date

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

[Signature] Valde Guerra 1/27/12
 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate 207-2391

Commissioner's Court Action: _____ Commissioner's Court Date: _____

 Approved Date: _____ DisapprovedCurrent 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.

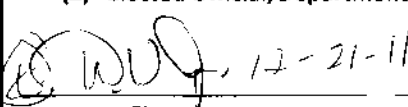
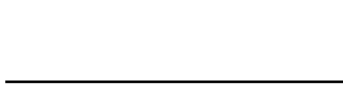
WIRELESS DEVICE REQUEST FORM W.2011.2

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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 type="checkbox"/> Plan Change <input checked="" 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>Daniel Hernandez</u> Employee ID# <u>103608</u> Signature: <u>[Signature]</u> Department: <u>District #3</u> Dept#: <u>123</u> Quantity: <u>1 587-1022</u> Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532 Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664 Requisition Total: _____ Requisition Number: _____		
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>Joe M Flores</u> <u>12/9/11</u> Signature Print Name Date		
(3) Executive Office Authorization (Commissioner's Court Departments Only): <u>[Signature]</u> <u>[Print Name]</u> <u>[Date]</u> Signature Print Name Date		
(4) IT DEPARTMENT ONLY: Service Type Codes: <u>Deactivate 950-587-1022</u> <u>[Signature]</u>		

Commissioner's Court Action: _____ **Commissioner's Court Date:** _____
 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/govtfsig/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 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>Carrizo, Delato</u> Employee ID# <u>100038</u> Signature: <u>[Signature]</u>		
Department: <u>Quint #3</u> Dept#: <u>123</u>		
Quantity: <u>1 929-0049</u>		
Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532		
Service: \$ _____/mo (x) _____ months = _____ Account: _____ -619/664		
Requisition Total: _____ Requisition Number: _____		
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	<u>12-21-11</u> Date	<u>Ms. Flores, Comm.</u> Print Name
Date: <u>12/19/11</u>		
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
 Signature	<u>[Signature]</u> Print Name	<u>12/1/11</u> Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>Deactivate 950-929-0049</u>		

Commissioner's Court Action: _____ **Commissioner's Court Date:** _____
 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/tstg/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 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>Romina Law</u> Employee ID# <u>051527</u> Signature: <u>[Signature]</u>		
Department: <u>Account #3</u> Dept#: <u>123</u>		
Quantity: <u>1 929-0063</u>		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664		
Requisition Total: _____ Requisition Number: _____		
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>12/9/11</u> Signature Print Name Date		
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
_____ _____ <u>11/1</u> Signature Print Name Date		
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>Deactivate 950-929-0063</u>		

Commissioner's Court Action: _____ **Commissioner's Court Date:** _____
 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/irs/article/0,,id=167154,00.html>, EXAMPLE 2.



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TYPE OF REQUEST

County Owned Wireless Device:

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Wireless Data Device:

- Data Card
- Blackberry
- Other:

Stipend:

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

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: Adrian Anderson Employee ID# 145847 Signature: [Signature]

Department: Pat #3 Dept#: 123

Quantity: 1 959-0140

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

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

Requisition Total: _____ Requisition Number: _____

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 12/09/11
Signature Print Name Date

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

[Signature] [Print Name] [Date]
Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate 959-0140

Commissioner's Court Action: _____ Commissioner's Court Date: _____

- 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.

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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 type="checkbox"/> Plan Change <input checked="" 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: Edward Martinez Employee ID# 094391 Signature: Edward Martinez

Department: Project #3 Dept#: 123

Quantity: 1 587-1105

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

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

Requisition Total: _____ Requisition Number: _____

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] Mr. M. Elias 12/9/11

Signature Print Name Date

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

[Signature] [Print Name] [Date]

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate 950-587-1105

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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



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- Plan Change
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Wireless Data Device:

- Data Card
- Blackberry
- Other:

Stipend:

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

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: Patrol, District Employee ID# 133493 Signature: [Signature]Department: District #3 Dept#: 123Quantity: 1 950-587-1171

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

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

Requisition Total: _____ Requisition Number: _____

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] John Flores 12/19/11
 Signature Print Name Date

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

[Signature] [Print Name] [Date]
 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate 950-587-1171

Commissioner's Court Action: _____ Commissioner's Court Date: _____

 Approved Date: _____ DisapprovedCurrent 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/gov/isl/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 type="checkbox"/> Plan Change <input checked="" 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: Serge H. Saury Employee ID# 069442 Signature: Serge H. Saury

Department: Pit#3 Dept#: 123

Quantity: 1 956-929-0694

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

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

Requisition Total: _____ Requisition Number: _____

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 P. Flores 12/9/11

Signature Print Name Date

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

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Service 956-929-0694

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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/foia/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 type="checkbox"/> Plan Change <input checked="" 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 (VERIZON) (956) 515-6020

Office Use / Employee: Jonathan Leidre Employee ID# 180033 Signature:

Department: Planning Dept#: 210

Quantity: _____

Service: \$ 2 /mo (x) 12 months = _____ Account: 2-1100-437-10-210-001-0-1932

Service: \$ 2 /mo (x) _____ months = _____ Account: 019/664

Requisition Total: _____ Requisition Number: N/A

STIPEND

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

Department: _____ Dept#: _____

Quantity: _____

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

Total: _____

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

Tomas J. Arredondo 1-9-12

Signature Print Name Date

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

Valde Guerra 1/17/12

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate 956-515-6020

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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.htm>, EXAMPLE 2.

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use <i>or</i> <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input checked="" 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

(VERIZON) (956) 648-7812

Office Use / Employee: Edgar Iaidro Employee ID# 166618 Signature:

Department: Planning Dept#: 210

Quantity: _____

Service: \$ 15 /mo (x) 12 months = 180 Account: 2-1100-419-10-210-001-0132

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

Requisition Total: 180.00 Requisition Number: N/A

STIPEND

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

Department: _____ Dept#: _____

Quantity: _____

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

Total: _____

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

Tomas J. Arredondo 1-9-12

Signature Print Name Date

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

Valde Guerra 1/17/12

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivated 956-648-7812

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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-gia/article0..td=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 type="checkbox"/> Plan Change <input checked="" 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 (956) 648-7053 (VERIZON)

Office Use / Employee: Gilbert Pecina Employee ID# 159131 Signature:

Department: Public Works Dept#: 210

Quantity: _____

Service: \$ 0 /mo (x) _____ months = _____ Account: 2-1100-419-10-210-001-0-1592

Service: \$ _____ /mo (x) _____ months = _____ Account: _____ #19/664

Regulation Total: _____ Regulation Number: N/A

STIPEND

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

Department: _____ Dept#: _____

Quantity: _____

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

Total: _____

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

Tomas J. Accredend 1-9-12

Signature Print Name Date

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

Valde Guerra 1/17/12

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate 956-648-7053

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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/irs/article01,01=167154,00.html>, EXAMPLE 2.

Revised: 03/09/2011

(450)292-5349

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 type="checkbox"/> Plan Change <input checked="" 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: Danny Guerra Employee ID# 89567 Signature: [Signature]

Department: Facilities Maint Dept#: 220

Quantity: 1

Service: \$ _____ /mo (x) _____ months = _____ Account: 1-1100-41942-220-001-0-532

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

Requisition Total: _____ Requisition Number: _____

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] Daniel Flores 1/6/12

Signature Print Name Date

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

[Signature] Valde Guerra 1/6/12

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Service 950-292-5349

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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/ftlg/article/0,,id=167154,00.html>. EXAMPLE 2.

(456) 207-2886

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 type="checkbox"/> Plan Change <input checked="" 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: Mike Cruz Employee ID# 095117 Signature: Miguel Cruz
 Department: Facilities Mgmt Dept#: 220

Quantity: _____

Service: \$ _____ /mo (x) _____ months = _____ Account: 1-1100-419-40-220-001-0 -532
 Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664

Requisition Total: _____ Requisition Number: _____

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] Davide Flores 4/6/12
 Signature Print Name Date

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

[Signature] Valde Guerra 1/6/12
 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Service 956-207-2886

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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.

Revised: 03/09/2011

(950) 239-0055

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use <i>or</i> <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input checked="" 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: Rogelio Salinas Employee ID# 137995 Signature: [Signature]

Department: FACILITIES MNGT. Dept#: _____

Quantity: 1

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

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

Requisition Total: _____ Requisition Number: _____

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] David Flores 1/6/12

Signature Print Name Date

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

[Signature] Valde Guerra 1/6/12

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Service 950-239-0055

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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

(956) 292-8567

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 type="checkbox"/> Plan Change <input checked="" 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: Silvestre Rubio Employee ID# 14967 Signature: [Signature]

Department: Tron/In. 20 Hwgt. Dept#: 220

Quantity: 1

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

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

Requisition Total: _____ Requisition Number: _____

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] David Flores 1/6/12
 Signature Print Name Date

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

[Signature] Valde Guerra 1/6/12
 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Service 956-292-8567

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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

(456) 207-2765

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 type="checkbox"/> Plan Change <input checked="" 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>Dominico Villalobos</u> Employee ID# <u>052639</u> Signature: <u>[Signature]</u>		
Department: <u>Facilities Mgmt</u> Dept#: <u>220</u>		
Quantity: _____		
Service: \$ _____ /mo (x) _____ months = _____ Account: <u>1100-41940-220-001-0532</u>		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664		
Requisition Total: _____ Requisition Number: _____		
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>Daniel Flores</u>	<u>1/6/12</u>
Signature	Print Name	Date
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
<u>[Signature]</u>	<u>Valde Guerra</u>	<u>1/6/12</u>
Signature	Print Name	Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>Deactivate Service 950-207-2765</u>		

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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.

(954) 457-6114

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 type="checkbox"/> Plan Change <input checked="" 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: Richard Sunday Employee ID# 175781 Signature: [Signature]

Department: Facilities Mgmt Dept#: _____

Quantity: 1

Service: \$ _____ /mo (x) _____ months = _____ Account: 1-1100-419-40-220-001-0-532

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

Requisition Total: _____ Requisition Number: _____

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] David Flores 1/6/12

Signature Print Name Date

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

[Signature] Valde Guerra 1/6/12

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Service 954-457-6114

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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/afslg/article/0,,id=167154,00.html>. EXAMPLE 2.

(956) 207-2805

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 type="checkbox"/> Plan Change <input checked="" 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>Joe Castro</u>	Employee ID# <u>058823</u>	Signature: <u>[Signature]</u>
Department: <u>Facilities Mgmt</u>	Dept#: <u>220</u>	
Quantity: <u>1</u>		
Service: \$ _____ /mo (x) _____ months = _____	Account: _____	-532
Service: \$ _____ /mo (x) _____ months = _____	Account: _____	-619/664
Requisition Total: _____	Requisition Number: _____	
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>Daniel Flores</u>	<u>1/6/12</u>
Signature	Print Name	Date
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
<u>[Signature]</u>	<u>Valde Guerra</u>	<u>1/6/12</u>
Signature	Print Name	Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>Deactivate Service 956-207-2805</u>		<u>[Signature]</u>

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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.

(956) 207-2582

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 type="checkbox"/> Plan Change <input checked="" 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: DAVID MARTINEZ Employee ID# 058092 DIM Signature: David Martinez

Department: Facilities Mgmt. Dept#: 220

Quantity: 1

Service: \$ _____ /mo (x) _____ months = _____ Account: 1-1100-4940-220-001-0 -532

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

Requisition Total: _____ Requisition Number: _____

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] Daniel Flores 1/6/12

Signature Print Name Date

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

[Signature] Valde Guerra 1/6/12

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Service 956 207-2582

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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

(950) 207-9678

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 type="checkbox"/> Plan Change <input checked="" 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: Maris Monte Employee ID# 085413 Signature: Maris Monte
 Department: Facilities Mgmt. Dept#: 220
 Quantity: 1
 Service: \$ _____ /mo (x) _____ months = _____ Account: 1-1100-419-40-220-04-0-532
 Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664
 Requisition Total: _____ Requisition Number: _____

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] Daniel Flores 1/6/12
 Signature Print Name Date

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

[Signature] Valde Guerra 1/6/12
 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Service 950-207-9678

Commissioner's Court Action: _____ Commissioner's Court Date: _____
 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/tfsig/article/0,,id=167154,00.html>, EXAMPLE 2.

(956) 515-9713

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use <i>or</i> <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input checked="" 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: Sam Ramos Employee ID# 149276 Signature: [Signature]

Department: Facilities Mngt. Dept#: 220

Quantity: _____

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

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

Requisition Total: _____ Requisition Number: _____

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] Demel Flores 1/10/12

Signature Print Name Date

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

[Signature] Valde Guerra 1/6/12

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Service 956-515-9713

Commissioner's Court Action: _____ Commissioner's Court Date: _____

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/ftsg/article/0,,id=167154,00.html>, EXAMPLE 2.