



HIDALGO COUNTY, TEXAS APPLICATION FOR OFFICIAL TRAVEL

DATE OF REQUEST: 05/29/12

TOTAL NUMBER OF EMPLOYEES TRAVELING: 1

DEPARTMENT NAME: Health & Human Services

NAME & TITLE OF EMPLOYEE(S) TRAVELING: Brenda G. Salazar, Public Health Tech III

EVENT INFORMATION

TITLE OF EVENT: Texas Department of State Health Services Cardiovascular Disease & Stroke Program - Heart and Stroke Healthy Cities Liaison Collaboration Meeting

EVENT DATE(S) FROM: 06/29/12 TO: 06/29/12

DEPARTURE DATE: 06/28/12 RETURN DATE: 06/30/12

LOCATION OF EVENT: CITY: Austin STATE: Texas

PURPOSE OF TRAVEL

- Place an "X" by the applicable purpose of the trip.
- To obtain statutorily required continuing professional education.
 - To obtain continuing education related to an employee's work or maintenance of a license or certification.
 - To testify before legislative bodies, regulatory agencies and commissions, and other forums that may make decisions affecting the County and its affiliated organizations and operations.
 - To participate in professional organizations related to the employee or official's job assignment.
 - To conduct essential research & information-gathering for improvement of County operations or compliance with law.
 - To monitor the development of state or federal legislation or implementation of legislation that might affect the County
 - To participate in forums, coalitions, & discussions relating to the policy, legislative & regulatory interests of the County
 - To pursue the County's interests in litigation or criminal justice.
 - To promote the economic development interests of the County.
 - To carry out other purposes determined by Commissioners' Court to be in the interest of the County (Commissioners' Court approval is attached).

JUSTIFICATION FOR THE NEED TO TRAVEL OUT-OF-STATE

Explain the benefits that this trip it will bring to Hidalgo County. Attach an itinerary, agenda, or schedule for the conference and/ or event. If applicable, justify the need for multiple persons traveling to the same event.

SUMMARY OF ESTIMATED TRAVEL EXPENSES	ESTIMATED EXPENSES	(DBM USE ONLY) FUNDS AVAILABLE BALANCE	MODE OF TRAVEL (Place an "X" by applicable mode of travel)
1. REGISTRATION FEE(S)	\$ -		AIRFARE*
Subtotal for Object Code 584	\$ -	\$ -	BUS**
2. AIRFARE- ROUNDTRIP COACH FARE ONLY	\$ -		Rental Car**
3. TAXI FARE	\$ -		County Vehicle**
4. BUS FARE	\$ -		Private Vehicle**
5. RENTAL CAR	\$ -		OTHER** (Specify)
6. GASOLINE/DIESEL/FUEL	\$ -		* If traveling by airplane, the traveler should consider purchasing a refundable fare if possibility of a cancellation exists.
7. MILEAGE REIMBURSEMENT	\$ -		
8. TELEPHONE CALLS	\$ -		** If mode of travel includes bus, rental car, county vehicle, private vehicle, or other form of transportation, a comparison of the savings that will be achieved by not choosing to travel by airplane must be provided with supporting documentation.
9. PARKING	\$ -		
10. LODGING	\$ -		
11. MEALS	\$ -		
12. OTHER EXPENSES	\$ 10		
Subtotal for Object Code 583	\$ -		
13. TOTAL ESTIMATED TRAVEL EXPENSES	\$ -	\$ -	

14. IF HIDALGO COUNTY IS NOT FUNDING ANY OR PART OF THIS TRIP, INDICATE BELOW THE EXPENSE TYPE & SOURCE OF PAYMENT:
 Texas Department of State Health Services CVD & Stroke Program will reimburse all travel expenses to the employee. Employee will pay for all travel expenses and submit required documentation directly to TDSHS for reimbursement.

NOTE: If trip duration is extended to take advantage of lower airfare, a comparison of the savings to the additional estimated cost must be provided with supporting airfare rate documentation.

ELECTED OFFICIAL/DEPARTMENT HEAD CERTIFICATION (Place an "X" by each of the certifications)

- I certify that:
- Trip expenses are necessary and will be incurred for official county business.
 - Reasonable efforts to minimize the use of county funds have been explored.
 - Sufficient funds are available within in my department's budget to pay for the related travel expenses without the need of a budget amendment.
 - If this trip is for out-of-state training, the training is not available in some other form that does not require out-of-state travel.

APPROVED BY ELECTED OFFICIAL/DEPARTMENT HEAD: [Signature] DATE: 5/30/12 DEPARTMENT CONTACT PERSON: Josie E. PHONE NO.: 383-6221

FOR DEPARTMENT OF BUDGET & MANAGEMENT (DBM) USE ONLY:

TRAVEL IS APPROVED for the individuals listed below:

TRAVEL IS NOT APPROVED for the individuals listed below:

REVIEWED BY (PRINT NAME): Veronica Ortiz DATE: 6/7/12 REVIEWER'S SIGNATURE: [Signature] PHONE NO.: 292-7025

DBM'S DEPARTMENT HEAD APPROVAL (PRINT NAME): Dina R. Trevino DATE: 6/7/12 SIGNATURE OF DBM DEPARTMENT HEAD: [Signature]

cc 6/12/12

Brenda Salazar

From: Benedict, Maria (DSHS) [Maria.Benedict@dshs.state.tx.us]
Sent: Friday, May 25, 2012 11:00 AM
To: Amber Haig (amber.haig@dentoncounty.com); Annette Boles; Brenda Salazar; Carter, William; Casie Stoughton; John Brink; Judy Garcia; Kristi Louder; Loza, Henry; Nora C. Martinez; Sherry Ulmer; TEX-Lindholm, Craig; 'THD-Vickers, Cheryl'; Tiffani Johnson
Subject: Action Required: HSHC Liaison Collaborative Meeting | 29JUN - Austin, TX
Importance: High

Greetings All,

I would like to know who would be willing to participate in the HSHC Liaison meeting here in Austin along with the 2011 cities. I'm trying to get an estimate for budgeting purposes. DSHS will pay for travel and the meeting will take place here at DSHS in Austin from 9a-4p.

I'm thrilled to say that Karen Odegaard, MPH, the Community Engagement Specialist with the County Health Rankings through The University of Wisconsin Population Health Institute will be our keynote presenter.

Here's some information about CHR: <http://www.countyhealthrankings.org/about-project>
 About Karen Odegaard: <http://uwphi.pophealth.wisc.edu/about/staff/odegaard-karen.htm>... I've attended a handful of webinars, several she's hosted and they're superior.

I would love to hear ASAP who's interested in attending so I can coordinate efforts as well as you all coordinating travel arrangements.

Have a safe and fun Memorial Day weekend!!!!

Many thanks,

Maria Benedict, BSPH

Program Specialist
 Cardiovascular Disease & Stroke Program
 Chronic Disease Branch
 Health Promotion and Chronic Disease Prevention Section
 Division for Prevention and Preparedness Services
 Texas Department of State Health Services
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 P 512.776.3507 | F 512.776.7254

Maria.Benedict@dshs.state.tx.us

Handwritten signature of Maria Benedict. To the right of the signature, the text "if state pays." is written in cursive. A circled "C" is written to the left of the signature.

- May is American Stroke Month, National High Blood Pressure Month, National Physical Activity and Sports Month, Mental Health Month, National Bike Month, Better Sleep Month, Asthma and Allergy Awareness Month