



## HIDALGO COUNTY, TEXAS APPLICATION FOR OFFICIAL TRAVEL

DATE OF REQUEST: 08/13/12  
TOTAL NUMBER OF EMPLOYEES TRAVELING: 2

DEPARTMENT NAME: Health and Human Services  
NAME & TITLE OF EMPLOYEE(S) TRAVELING: Dairen Sarmiento, Director; Maria de Lourdes Acevedo, Coordinator

### EVENT INFORMATION

TITLE OF EVENT: TIHCA 2012 Conference  
EVENT DATE(S) FROM: 10/02/12 TO: 10/04/12  
DEPARTURE DATE: 10/02/12 RETURN DATE: 10/04/12  
LOCATION OF EVENT: CITY: Austin STATE: TX

### 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.

**The employees will be able to acquire knowledge about county indigent programs throughout the State in order to provide more efficient and effective assistance to the citizens of Hidalgo County.**

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)	\$ 210.00		AIRFARE* _____
Subtotal for Object Code 584	\$ 210.00	\$	BUS** _____
2. AIRFARE- ROUNDTrip COACH FARE ONLY	\$ -		Rental Car** _____
3. TAXI FARE	\$ -		County Vehicle** <input checked="" type="checkbox"/>
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	\$ 621.00		
11. MEALS	\$ 234.00		
12. OTHER EXPENSES	\$ -		
Subtotal for Object Code 583	\$ 855.00		
13. TOTAL ESTIMATED TRAVEL EXPENSES	\$ 1,065.00	\$	

14. IF HIDALGO COUNTY IS NOT FUNDING ANY OR PART OF THIS TRIP, INDICATE BELOW THE EXPENSE TYPE & SOURCE OF PAYMENT:

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: \_\_\_\_\_ DATE: \_\_\_\_\_ DEPARTMENT CONTACT PERSON: Dairen Sarmiento PHONE NO.: 318-2011

### 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): \_\_\_\_\_ DATE: \_\_\_\_\_ REVIEWER'S SIGNATURE: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_  
DBM'S DEPARTMENT HEAD APPROVAL (PRINT NAME): \_\_\_\_\_ DATE: \_\_\_\_\_ SIGNATURE OF DBM DEPARTMENT HEAD: \_\_\_\_\_



www.tihca.org

Texas Indigent Health Care Association

*We are headed back to Austin!  
Announcing the 2012 TIHCA Conference.*

*Mark your calendars for October 2-4, 2012!*

*Omni Southpark Hotel  
4140 Governors Row  
Austin, TX*

*The 2011 TIHCA conference was a huge success and we expect this year's conference to be even better! Informative speakers are being arranged to lead challenging and valuable discussions that will benefit you and your program.*

*Register now by contacting the  
Texas Conference of Urban Counties  
at 512.476.6174.*

*Please be sure to let us know how many years you have been working in indigent health care.*

<b>Registration Fees</b>	<b>Early Before August 31<sup>th</sup></b>	<b>Late After August 31<sup>th</sup></b>
Charter Member	\$90	\$120
General Member	\$105	\$135
Non Member	\$120	\$150

*To make your hotel reservations, please call the hotel directly at 1-800-THE-OMNI (1.800.843.6664) and refer to TIHCA 2012 Annual Conference to reserve your room. The negotiated rate of \$135 per night will be honored until September 14, 2012.*

*For more information, please contact:  
Kristen Thurman, Program Manager at 512.476.6174 • tihca@cuc.org*