



HIDALGO COUNTY, TEXAS
APPLICATION FOR OFFICIAL TRAVEL

DATE OF REQUEST: 12/28/12
TOTAL NUMBER OF EMPLOYEES TRAVELING: 1

DEPARTMENT NAME: Hidalgo County Extension Service
NAME & TITLE OF EMPLOYEE(S): Christina L. Perez, CEA-4-H & Youth Development

EVENT INFORMATION

TITLE OF EVENT: 2013 San Antonio Stock Show & Rodeo
EVENT DATE(S) FROM: 02/19/13 TO: 02/24/13
DEPARTURE DATE: 02/20/13 RETURN DATE: 02/22/13
LOCATION OF EVENT: CITY: San Antonio 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.
[X] 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.

Table with 4 columns: SUMMARY OF ESTIMATED TRAVEL EXPENSES, ESTIMATED EXPENSES, (DBM USE ONLY) FUNDS AVAILABLE BALANCE, and MODE OF TRAVEL. Includes rows for Registration Fee, Airfare, Taxi, Bus, Rental Car, Gasoline, Mileage, Telephone, Parking, Lodging, Meals, and Other Expenses.

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:
[X] Trip expenses are necessary and will be incurred for official county business.
[X] Reasonable efforts to minimize the use of county funds have been explored.
[X] 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: Barbara [Signature] DATE: 1/1/13
DEPARTMENT CONTACT PERSON: Nora Linda Cruz PHONE NO.: 383-1036

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): Jamie Alejos DATE: 1-15-13 REVIEWER'S SIGNATURE: [Signature] PHONE NO.: 292-7025
DBM'S DEPARTMENT HEAD APPROVAL (PRINT NAME): DATE: SIGNATURE OF DBM DEPARTMENT HEAD:

1/14/13 - Hotel
Reg.# 00229347
PO#
CC-583
Comm Code-97B0
1/14/13 - Meals
Reg.# 00229344
PO#
CC-583
Comm code-96347

3-1100-461-00-380-001-0-583

HIDALGO COUNTY BUDGET OFFICE

JAN 14 PM 4:49



HIDALGO COUNTY, TEXAS
SEMINAR, HOTEL, CAR RENTAL, AND AIRFARE
CHECK REQUEST FORM
PAGE 1 OF 2

DEPARTMENT: Hidalgo County Extension Service If applicable, was travel approved by Co. Exec. Officer?

DEPARTURE DATE: 2/20/2013 RETURN DATE: 2/22/2013

TO CITY: San Antonio STATE: Texas

NAME OF EMPLOYEES ATTENDING SEMINAR: Christina L. Perez

TOTAL# OF EMPLOYEES ATTENDING SEMINAR: One (1)

PURPOSE/BENEFIT TO HIDALGO COUNTY:
 To participat in professional organizaitons related to the employee or official's job assignment.

A. WORKSHOP/SEMINAR REGISTRATION(S)

TITLE OF WORKSHOP/SEMINAR: _____

SPONSORED BY: _____

REGISTRATION CHECK PAYABLE TO: _____

REGISTRATION ADDRESS: _____ SEMINAR START DATE: _____

_____ SEMINAR END DATE: _____

_____ PURCHASE ORDER NO. _____

1. REGISTRATION COST PER EMPLOYEE: _____ NO. OF EMPLOYEES ATTENDING AT THIS RATE: _____

2. REGISTRATION COST PER EMPLOYEE: _____ NO. OF EMPLOYEES ATTENDING AT THIS RATE: _____

3. "FREE REGISTRATION COST: "FREE" NO. OF EMPLOYEES ATTENDING FOR "FREE": _____

GL ACCT NO.: _____ TOTAL NO. OF EMPLOYEES ATTENDING: 0

TOTAL COST OF SEMINAR (Registration Cost per Employee x Number of Employees Attending at a rate) A.	\$ -
(SEE PAGE 2 FOR SECTIONS B, C, & D)	
TOTAL THIS PAGE (A):	\$ -
TOTAL 2ND PAGE (B + C + D):	\$ <u>188.26</u>
GRAND TOTAL (A + B + C + D):	\$ <u>188.26</u>

E. CERTIFICATIONS AND EMPLOYEE AUTHORIZATIONS FOR PAYROLL DEDUCTIONS

DEPARTMENT'S PUBLIC OFFICIAL CERTIFICATION: I hereby certify that trip expenditures are necessary and will be incurred for official county business. Reasonable efforts to minimize the use of county funds have been explored. The information and estimates provided on this form are true and as accurate as possible. If it becomes necessary to cancel a trip, all necessary cancellations and notices will be made to the applicable vendors and departments in accordance with the Travel Policy, Guidelines, and Procedures. Travelers have read the Travel Policy, Guidelines, and Procedures and understand that failure to cancel reservations for any reasons other than those allowed by the Travel Policy will be at their expense.

	Barbara Storz	(956) 383-1026
DEPARTMENT'S PUBLIC OFFICIAL (Signature)	DEPARTMENT'S CONTACT PERSON	PHONE #

TRAVELER'S AUTHORIZATION: I certify that if it becomes necessary to cancel a trip, all necessary cancellations and notices will be made to the applicable vendors and departments in accordance with the Travel Policy, Guidelines, and Procedures. If I fail to cancel reservations for reasons other than those allowed by Section 17 of the Travel Policy, Guidelines, and Procedures, I authorize the deduction of any travel expenses incurred by the county on my behalf from my payroll check.

Christina L. Perez		188760
EMPLOYEE NAME (PRINT)	EMPLOYEE'S SIGNATURE	EMPLOYEE NO.

HIDALGO COUNTY BUDGET OFFICE



**HIDALGO COUNTY, TEXAS
SEMINAR, HOTEL, CAR RENTAL, AND AIRFARE
CHECK REQUEST FORM
PAGE 2 OF 2**

DEPARTMENT: Hidalgo County Extension Service

DEPARTURE DATE: 2/20/2013 RETURN DATE: 2/22/2013

TO CITY: San Antonio STATE: Texas

NAME OF EMPLOYEES ATTENDING SEMINAR: Christina L. Perez

TOTAL# OF EMPLOYEES ATTENDING SEMINAR: One (1)

B. HOTEL RESERVATION(S)

Note: Use of a travel agency is discouraged. Unless a benefit is achieved by other means, you must use the State of Texas travel management services contract by visiting: www.window.state.tx.us/procurement/prog/stmp/

NAME OF HOTEL: Best Western Hill Country Suites HOTEL PHONE NO: (210) 490-9191

ADDRESS OF HOTEL: 18555 US Highway 281 North CONFIRMATION NO.(s): 166715848.01
San Antonio, TX 78258 Reservation #213581

ROOM RATE: \$84.99 PURCHASE ORDER NO. _____

NUMBER OF NIGHTS: Two (2) GENERAL LEDGER ACCT NO: 3-1100-461-00-380-001-0-583

ROOM RATE: _____ TOTAL NO. OF ROOMS: One (1)

NUMBER OF NIGHTS: _____

ROOM RATE: _____ HOTEL TAX RATE: 10.75%

NUMBER OF NIGHTS: _____

TOTAL CHECK AMOUNT FOR HOTEL(Daily Room Rate x No. of Rooms x No. of Days x Tax Rate). B. \$188.26

C. CAR RENTAL(S)

Note: Reservations for car rentals made under the name of Hidalgo County are required to be made through the State of Texas travel management services contract by visiting: www.window.state.tx.us/procurement/prog/stmp/

IS A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT? YES / NO _____ IF YES, EXPLAIN REASON FOR NOT UTILIZING IT? Attach memo if more space needed. _____

NAME OF CAR RENTAL COMPANY: _____

ADDRESS OF CAR RENTAL COMPANY: _____
Note: Coordination of travel is required for every group of 4 or less

PHONE NUMBER OF CAR RENTAL COMPANY: _____

VEHICLE NO. 1 TYPE: _____ VEHICLE NO. 2 TYPE: _____

DAILY CAR RATE: _____ DAILY CAR RATE: _____

NUMBER OF DAYS: _____ NUMBER OF DAYS: _____

CONFIRMATION NO.: _____ CONFIRMATION NO. _____

VEHICLE NO. 1 - NAMES OF EMPLOYEES TRAVELING: _____ VEHICLE NO. 2 - NAMES OF EMPLOYEES TRAVELING: _____

PURCHASE ORDER NO. _____ GL ACCT NO: _____

TOTAL CHECK AMOUNT FOR CAR RENTAL (Daily Car Rate x No. of Days) C. \$ _____

D. AIRFARE(S)

Note: Use of a travel agency is discouraged. Refundable fares should be considered if possibility of a trip cancellation exists.

NAME OF AIRLINE COMPANY: _____

ADDRESS OF AIRLINE COMPANY: _____

PHONE NO. OF AIRLINE COMPANY: _____ CONFIRMATION NO.: _____

ROUND TRIP AIRFARE PER PERSON: _____

NUMBER OF TRAVELERS: _____

GENERAL LEDGER ACCOUNT NUMBER _____ P.O. NO. _____

TOTAL CHECK AMOUNT FOR AIRLINE COMPANY D. \$ _____

SUBTOTAL (B+C+D) **#VALUE!**

HIDALGO COUNTY AUDITOR'S FORM T.1.2 (07/10)



BW PLUS HILL COUNTRY SUITES
 18555 U.S. HWY 281 NORTH
 SAN ANTONIO, TX 78258
 Phone #: 210-490-9191

Deposit Required

Reservation Confirmation

Reservation #: 213561

Guest: PEREZ, CHRISTINA

T/A #:

Reserv	Advtl	Ex	Room	Rate	Rate	Rate	Rate	Rate	Rate	Rate	Rate
Date	Status	Date	Nts	Rate	Rate	Rate	Rate	Rate	Rate	Rate	Rate
01/10/13	Reserved	02/20/13	2	02/22/13	KSTE	1	0	MG	MR	\$84.99	Y 166715848.01
										Rate Change	Rate Change

PEREZ, CHRISTINA
 410 N 13TH AVE
 EDINBURG, TX 78541

Thank you for choosing
 BW PLUS HILL COUNTRY SUITES

Each Best Western® branded hotel is independently owned and operated.

HIDALGO
 BUDGET OFFICE
 03 JAN 21 PM 4 50

Requisition # 00229247 Prod Requisition Date Entered 01-14-2012 Account Year 3 PO # Item Total 188,28
Enter Req's Only Approve Approve By Year Requisition Status No Items Found for Requisition View Acct Total 188,28

Order Header | Items | Accounts | Inquire | Approval |
Estimates | Documents | GAT8

Vendor 349984 BEST WESTERN HILL COUNTRY SUITES
Mailing Name: BEST WESTERN HILL COUNTRY SUITES
Address: 18555 HWY 281 NORTH
City: SAN ANTONIO
State: TX Zip: 78258-

Locations
Order 390 TEXAS AGRILIFE EXTENSION
Ship 390 TEXAS AGRILIFE EXTENSION
Requestor
Phone
Owner
Order Type
BSTORZ

Buyer Code Freight Cost .00 Freight % Discount % Contract No Date Cancel Date Needed
Default Product Class Update

Special Instructions
Internal Pending C/C approval for 1/29/13
Header Edit
Footer Edit
Header Code Edit DN
Footer Code Edit RH

HIDALGO COUNTY
BUDGET OFFICE
03 JAN 24 PM 4 50



HIDALGO COUNTY, TEXAS OUT-OF-COUNTY – TRAVEL ADVANCE REQUEST

A. TRIP AND TRAVELER INFORMATION

EMPLOYEE NAME:	<u>Christina L. Perez</u>	EMPLOYEE I.D. NO.:	<u>188760</u>	EMPLOYEE TITLE:	<u>CEA=4-H & Youth Development</u>
DEPARTMENT:	<u>Hidalgo County Extension Service</u>	DO YOU HAVE AN OUSTANDING TRAVEL ADVANCE?	<u>No</u>		
DEPARTURE DATE:	<u>2/20/13</u>	RETURN DATE:	<u>2/22/13</u>		
TIME OF DEPARTURE:	<u>11:00 AM</u>	TIME OF RETURN:	<u>11:00 PM</u>		
TO CITY:	<u>San Antonio</u>	STATE:	<u>Texas</u>		
SEMINAR/CONFERENCE/MEETING:	START DATE: <u>2/19/2013</u>	END DATE: <u>2/24/2013</u>	ACTUAL NO. OF DAYS	<u>6</u>	
TITLE OF WORKSHOP/CONFERENCE:	<u>2013 San Antonio Stock Show & Rodeo</u>				
METHOD OF TRAVEL (AIR TRAVEL/ PERSONAL VEHICLE/ COUNTY VEHICLE/ CAR RENTAL):	<u>County Vehicle</u>	IS COORDINATION OF TRAVEL REQUIRED? IF NO, ATTACH WRITTEN EXPLANATION FROM THE COUNTY OFFICIAL.	<u>Yes</u>		
LIST NAMES OF COUNTY EMPLOYEES TRAVELING WITH YOU IN THE COUNTY VEHICLE, CAR RENTAL, OR PERSONAL VEHICLE?	<u>Christina L. Perez</u>				
DO YOU HAVE A COUNTY VEHICLE ASSIGNED TO YOUR DEPARTMENT?	<u>Yes</u>	IF YES, EXPLAIN REASON FOR NOT UTILIZING COUNTY VEHICLE?	<u>F350 Pickup will be used</u>		
PURPOSE/BENEFIT TO HIDALGO COUNTY:	<u>To participate in professional organizations related the employee or official's job assignment.</u>				

B. ESTIMATED EXPENSES:

I. MEALS: (Meals for one-day travel not requiring an overnight stay will not be advanced)									
Meals will be prorated for partial days	Meal Rate	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	MONTH / DAY	Total
		20-Feb	21-Feb	22-Feb					
Breakfast	\$9.00	\$0.00	\$0.00	\$0.00					\$0.00
Lunch	\$12.00	\$12.00	\$12.00	\$12.00					\$36.00
Dinner	\$18.00	\$18.00	\$18.00	\$18.00					\$54.00
Total	\$39.00	\$30.00	\$30.00	\$30.00	\$0.00	\$0.00	\$0.00	\$0.00	\$90.00

Meal per diems must be prorated for 1st day and last day of travel as follows:			
Departure:	Arrival:		
Before 8:00 a.m. (breakfast, lunch, & dinner)	\$ 39.00	Before 8:00 a.m. (breakfast)	\$ 9.00
8:00 a.m. - 1:00 p.m. (lunch & dinner)	\$ 30.00	8:00 a.m. - 6:00 p.m. (breakfast & lunch)	\$ 21.00
After 1:00 p.m. (dinner)	\$ 18.00	After 6:00 p.m. (breakfast, lunch, & dinner)	\$ 39.00

II. INCIDENTAL EXPENSES (taxi fare, shuttle fare, gas charges for car rentals, airport and hotel parking):

Expense type:	days @ \$	20.00	\$	-
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III. PERSONAL VEHICLE MILEAGE Miles @ \$ 0.565 (Current Rate) \$

(Note: Mileage may be advanced calculated on a point-to-point basis using "Mapquest" at the current county adopted rate per highway mile. Incidental mileage will not be advanced. In addition, "Coordination of Travel" may apply (see Section 7 of the Travel Policies, Guidelines, and Procedures). When traveling out of state, if the most economical means of travel is driving, traveler must supply documentation to support the price of the airfare at the time of travel.

Mapquest

IV. OTHER (Itemize)

_____ \$ _____

_____ \$ _____

V. P.O. # ISSUED UNDER EMPLOYEE'S NAME FOR THE AMOUNT OF THE TRAVEL ADVANCE:	VI. TOTAL TRAVEL ADVANCE REQUESTED: \$ <u>90.00</u>
VII. COMMENTS:	VII. GENERAL LEDGER ACCOUNT NUMBER: <u>3-1100-461-00-380-001-0-583</u>

C. CERTIFICATION AND AUTHORIZATION TO PAYROLL DEDUCTIONS

I hereby certify that information provided on this form is true and estimated expenditures are reasonable and necessary. The funds will be used by me for the specific trip listed above and not given to or used by another county employee. If my trip is cancelled, I will immediately return the travel advance funds to the County Treasurer no later than 20 calendar days after the seminar/conference/ meeting end date by submitting a Final Travel Expense Claim. In addition, I agree to account for all travel expenditures including the travel advance by submitting a Final Travel Expense Claim, accompanied by required original supporting documentation, no later than 20 days after my seminar/conference/meeting end date. Any unused funds will also be returned to the County Treasurer's Office no later than 20 days after my seminar/conference/meeting end date.

Should I fail to submit a Final Travel Expense Claim, I understand that I will not be allowed to obtain another travel advance until the pending travel advance is settled. In addition, I agree to repay Hidalgo County and further consent to payroll deductions by the County Treasurer to recover the pending travel advance amount.

 EMPLOYEE SIGNATURE	 DEPARTMENT OFFICIAL'S NAME (Print Name)	 DEPARTMENT OFFICIAL'S APPROVAL (Signature)
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HIDALGO COUNTY
GET CERTIFIED

Requisition # 00229344 Print Requisition Date Entered 01-14-2013 Account Year 3 PO # Item Total 90.00
 Enter Reqs Only Approve Approve By Year Requisition Status View Acct Total 90.00

Order Header | Items | Accounts | Inquire | Approval |
 Estimate Documents GAT8

Vendor 399213 PEREZ, CHRISTINA LORRAINE
 Mailing Name: PEREZ, CHRISTINA LORRAINE
 Address: C/O EXTENSION SERVICE
 City: State: Zip:
 Locations
 Order 390 TEXAS AGRILIFE EXTENSION
 Ship 390 TEXAS AGRILIFE EXTENSION
 Requestor Barbara Storz Phone (958)393-1028
 Owner Order Type

Buyer Code	Freight Cost	Freight %	Discount %	Contract No	Date Cancel	Date Needed
	.00					
Default Product Class						

Update

Special Instructions

Internal	Header	Header Code
Pending C/C approval for 1/29/2013	Ed1	DN
PO	Footer	Footer Code
		RH

HIDALGO COUNTY
 BUDGET OFFICE
 03 JAN 24 PM 4 50

Tuesday, February 19

Mon-8am	Junior Market Steers	Arrive	Gembler
Mon-Noon	Junior Market Barrows (Group 2) Chester White, Landrace, Yorkshire, Crossbred	Arrive	Gembler
7am- 2pm	Junior Market Barrows (Group 2) <i>(Weight, Validation Number, & Breed Designation must be turned in by 2pm)</i>	Check-In	SB
8am-3pm	Junior Market Steers <i>(Weight, Validation Number, & Breed Designation must be turned in by 3pm)</i>	Check-In	CB#1
8am	Junior Commercial Steers	Live Evaluation	AB
6:30pm	Junior Commercial Steers	Awards Dinner	AB

✓ Wednesday, February 20 *Check-in*

7am-11am	Junior Market Broilers/Turkey Hens/Turkey Toms	Arrive	Gembler
7am	Junior Market Barrows (Group 2) Chester White, Landrace, Yorkshire, Crossbred (classes 89-95)	Judge	SB
8am	Junior Market Steers Charolais, Chianina, Shorthorn, Hereford, Red Angus, Angus	Judge	CB#2
8am-Noon	Junior Market Broilers/Turkey Hens/Turkey Toms	Sift	MAC
10:30am	Poultry Biathlon <i>(Registration at 10am)</i>		
2pm	Junior Market Broilers	Judge	MAC

✓ Thursday, February 21

7am	Junior Market Barrows (Group 2) Crossbred (classes 96-110)	Judge	SB
8am	Junior Market Steers Simmental, Limousin, Simbrah, Santa Gertrudis, Brangus, Brahman, ABC	Judge	CB#2
9am	Junior Turkey Hens	Judge	MAC
1pm	Junior Turkey Toms	Judge	MAC
1pm	Junior Market Goat Auction		AB
5pm	Junior Market Lamb Auction		AB

✓ Friday, February 22 *Check out*

5am-8am	Junior Agricultural Mechanics Tractor Restoration Projects	Arrive	Gembler
5am-Noon	Junior Agricultural Mechanics Show (excluding tractors)	Arrive	Gembler
8am	Junior Market Steers Maine-Anjou, AOB	Judge	CB#2
8am-4pm	Tractor Restoration Projects	Judge Upon Offloading	MAC & SB
9am	Wildlife Recreation & Mgmt. Contest <i>(Registration at 8am)</i>		NSC
1pm	Junior Market Poultry Auction		AB
4pm	Junior Market Barrow Auction		AB
7pm	Intercollegiate Livestock Judging	Coaches Meeting	TBA

~~Saturday, February 23~~

7am	Intercollegiate Livestock Judging Contest		CB#2
8am	Junior Agricultural Mechanics Show	Judge	MAC & SB
10am	Junior Market Steer Auction		AB

Sunday, February 24

9am	Livestock Judging Contest <i>(Registration at 7:30am)</i>		CB#2
9am	Cowboy Church		AB
9am	Junior Agricultural Mechanics	Awards	MAC
After Awards	<i>Release: All Agricultural Mechanics Projects</i>		

Location Codes

AB	Auction Barn
Cargill	Cargill Food Distribution (Off Grounds Location)
CB#1	Cattle Barn #1
CB#2	Cattle Barn #2
Gembler	Gembler Road Staging Lot
MAC	Morris Activity Center
NSC	National Shooting Complex (Off Grounds Location)
R-20	Education Service Center, Region 20 (Off Grounds Location)
SALE HQ	Sale Headquarters (723 ATT Parkway, Use Gate G for entry)
SB	Swine Barn

HIDALGO COUNTY
 BUDGET OFFICE
 13 JAN 24 PM 4 50

Travel Outside of Hidalgo County in County Vehicle

TO: D.B.M. SAFETY DIVISION
318-2658FAX

FROM: Hidalgo County Extension Service
DATE: 1/10/2013

Notice to be processed
minimum of 24 hours
prior to trip

Date(s) Requested: From: 2/10/2013 To: 2/15/2013
Estimated Time Leave: 11:00 AM Est. Time Return: 5:30 PM
Destination: San Antonio, Texas
Reason for Trip: 2013 San Antonio Stock Show & Rodeo

The following person(s) are requesting to take the following County vehicle(s) out of County:

Name of Driver: Christina L. Perez ✓
DL Number: #20474044 ✓ (Texas Only)
Birth Date: 4/23/1984 ✓
Expiration Date: 4/23/2014 ✓

Checklist:
Ins. Card in Vehicle
Jack in Vehicle
Drivers License with Driver
This approval with Driver

Name of Driver: _____
DL Number: _____ (Texas Only)
Birth Date: _____
Expiration Date: _____

Name of Driver: _____
DL Number: _____ (Texas Only)
Birth Date: _____
Expiration Date: _____

Vehicle VIN#: #1FTWW30525EB48635 ✓
Tag Number: #884-793 ✓
Asset Number: #42595 - Ford F350 Pickup

Vehicle VIN#: _____
Tag Number: _____
Asset Number: _____

Signed: Barbara C. Strong
Department Head/Designee

Dated: 1/10/2013

D.B.M. Safety Division Checked Insurances:

[Signature]

Date: 1-11-13 8:30 AM

05 FEB 11 PM 4:50
BUDGET OFFICE
HIDALGO COUNTY