


# WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
<b>County Owned Wireless Device:</b> <input type="checkbox"/> Office Use <i>or</i> <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	<b>Wireless Data Device:</b> <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	<b>Stipend:</b> <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo
<b>COUNTY OWNED WIRELESS DEVICE</b>		
Office Use / Employee: <u>Various Employees</u> Employee ID# _____ Signature: _____ Department: <u>Sheriff</u> Dept#: <u>280</u> Quantity: <u>47</u> Service: \$ <u>45.59</u> /mo (x) <u>6</u> months = \$ <u>12,856.38</u> Account: <u>3-1229-421-00-280-007-0</u> -532 Service: \$ <u>10.00</u> /mo (x) <u>6</u> months = \$ <u>2,820.00</u> Account: <u>3-1229-421-00-280-007-0</u> <del>532/532</del> 532 <b>Requisition Total:</b> <u>\$15,676.38</u> <b>Requisition Number:</b> <u>239204</u>		
<b>STIPEND</b>		
(1) Employee: _____ Employee ID# _____ Signature: _____ Department: _____ Dept#: _____ Quantity: _____ Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532 <b>Total:</b> _____		
<b>(2) Elected Official/Department Head Authorization for Request:</b> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;">             Signature         </div> <div style="text-align: center;"> <u>Gabriel Castaneda</u>            Print Name         </div> <div style="text-align: center;"> <u>06/26/13</u>            Date         </div> </div>		
<b>(3) Executive Office Authorization (Commissioner's Court Departments Only):</b> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;">           _____            Signature         </div> <div style="text-align: center;">           _____            Print Name         </div> <div style="text-align: center;">           _____            Date         </div> </div>		
<b>(4) IT DEPARTMENT ONLY:</b> Service Type Codes: _____		

**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/fslg/article/0,,id=167154,00.html>, EXAMPLE 2.*  
 Revised: 03/09/2011