



WIRELESS DEVICE REQUEST FORM W.2011.2

4-427

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: Office Use Employee ID# N/A Signature: _____

Department: Justice Court Tech Dept#: _____

Quantity: 5 358-3309, 358-3310, 483-9710, 581-2805 & 929-7938

Service: \$ 0 /mo (x) _____ months = _____ Account: 4-1242-412-00-060-001-0 -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] Renan Ramirez 3/20/14
Signature Print Name Date

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

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

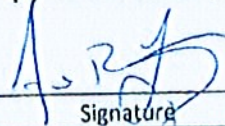
Service Type Codes: equipment upgrade to MHS291L for 5 Office Use data cards

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

WIRELESS DEVICE REQUEST FORM W.2011.2

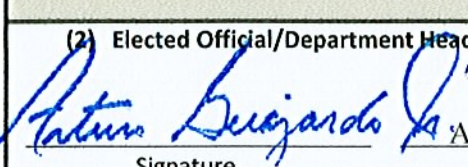
TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" 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>Office Use</u> Employee ID# <u>n/a</u> Signature: _____		
Department: <u>Public Affairs</u> Dept#: <u>110</u>		
Quantity: <u>1 950-310-1305</u>		
Service: \$ <u>0</u> /mo (x) _____ months = _____ Account: <u>4-1100-413-00-110-007-0-532</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:		
 Signature	<u>Jaime Longoria</u> Print Name	<u>3-21-14</u> Date
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
_____ Signature	_____ Print Name	_____ Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>equipment upgrade to MHS291L for 1 Office Use data card</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/irs/article/0,,d=167154,00.html>, EXAMPLE 2

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" 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> N/A </u> Employee ID# <u> </u> Signature: <u> </u>		
Department: <u>County Clerk's</u> Dept#: <u>180</u>		
Quantity: <u>3 950-587-2447, 950-587-2402 & 950-929-1835</u>		
Service: \$ <u>0</u> /mo (x) <u> </u> months = <u> </u> Account: <u> N/A </u> <u>-532</u>		
Service: \$ <u> </u> /mo (x) <u> </u> months = <u> </u> Account: <u> </u> <u>-619/664</u>		
Requisition Total: <u> 0 </u> Requisition Number: <u> N/A </u>		
STIPEND		
(1) Employee: <u> </u> Employee ID# <u> </u> Signature: <u> </u>		
Department: <u> </u> Dept#: <u> </u>		
Quantity: <u> </u>		
Service: \$ <u> </u> /mo (x) <u> </u> months = <u> </u> Account: <u> </u> <u>-532</u>		
Total: <u> </u>		
(2) Elected Official/Department Head Authorization for Request:		
 Signature	Arturo Guajardo, Jr. Print Name	<u>03/12/14</u> Date
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
_____ Signature	_____ Print Name	_____ Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>equipment upgrade to MHS291L for 3 data cards</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/gov/fslg/article/0,,id=167154,00.html>, EXAMPLE 2.

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" 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: Laura Hinojosa Employee ID# 152692 Signature: *Laura Hinojosa*

Department: District Clerk Dept#: 090

Quantity: 1 950-587-1269

Service: \$ 0 /mo (x) months = Account: 4-1100-412-00-090-001-0 -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:

Laura Hinojosa Laura Hinojosa 3/18/14

Signature Print Name Date

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

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: equipment upgrade to MHS291L for 1 data card

Commissioner's Court Action: Approved Date: Disapproved

Commissioner's Court Date:

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/irs/article0,,id=167154,00.html>, EXAMPLE 2.

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" 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: Office Use Employee ID# _____ Signature: _____

Department: Juvenile Probation Dept#: 330

Quantity: 3: 956-578-1993, 956-5782401 and 956-578-2827

Service: \$ 8 /mo (x) _____ months = _____ Account: 4-1100-423-32-330-001-0--532

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

Requisition Total: 1,367.64 Requisition Number: 249611

STIPEND

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

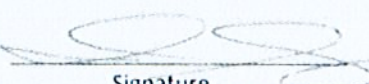
Department: _____ Dept#: _____

Quantity: _____

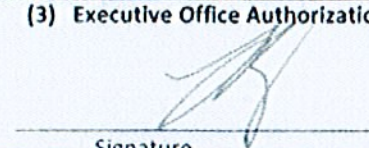
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532

Total: _____

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


Israel "Buddy" Silva, Jr.
2/6/14
Signature
Print Name
Date

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


Honorable Mario E. Ramirez Jr., Overseer
2/6/14
Signature
Print Name
Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: equipment upgrade to MHS2011L for 3 data cards.

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



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: Office Use Employee ID# - Signature: GA Beltran

Department: Pct #4 Dept#: 124

Quantity: One - (954) 578-3177

Service: \$ 0 /mo (x) _____ months = _____ Account: 4-1200-431-00-124-001-0-532

Service: \$ 0 /mo (x) _____ months = _____ Account: n/A -619/664

Requisition Total: 0 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:

Gloria A. Beltran
Signature

Gloria A. Beltran
Print Name

Joseph Palacios
3/12/14
Date

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

Signature

Print Name

Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: equipment upgrade to #1152912 for 1 data card

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:

- 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: Office Use Employee ID# - Signature: G.A. Beltran

Department: Pct #4 Dept#: 124

Quantity: One - (954) 578-3164

Service: \$ 0 /mo (x) _____ months = _____ Account: 4-1200-431-00-124-001-0 -532

Service: \$ 0 /mo (x) _____ months = _____ Account: n/A -619/664

Requisition Total: 0 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:

Gloria A. Beltran Gloria A. Beltran
Signature Print Name

Joseph Palacios
3/12/14
Date

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

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Equipment upgrade to NMS2912 for 1 data card

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

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" 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: Office Use Employee ID# - Signature: GA Beltran

Department: Pct #4 Dept#: 124

Quantity: One - (956)358-1407

Service: \$ 0 /mo (x) months = Account: 4-1200-431-00-124-007-0 -532

Service: \$ 0 /mo (x) months = Account: n/A -619/664

Requisition Total: 0 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:

<u>Gloria A. Beltran</u> <small>Signature</small>	<u>Gloria A. Beltran</u> <small>Print Name</small>	<u>3/12/14</u> <small>Date</small>
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(3) Executive Office Authorization (Commissioner's Court Departments Only):

<u> </u> <small>Signature</small>	<u> </u> <small>Print Name</small>	<u> </u> <small>Date</small>
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(4) IT DEPARTMENT ONLY:

Service Type Codes: equipment upgrade to MHS2912 for 1 data card

Commissioner's Court Action: Approved Date: Disapproved

Commissioner's Court Date:

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" 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: Office Use Employee ID# - Signature: G.A. Beltran

Department: Pct #4 Dept#: 124

Quantity: One - (956) 221-2293

Service: \$ 0 /mo (x) _____ months = _____ Account: 4-1200-431-00-124-007-0 -532.

Service: \$ 0 /mo (x) _____ months = _____ Account: n/A -619/664

Requisition Total: 0 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:

Gloria A. Beltran Gloria A. Beltran Joseph Palacios
 Signature Print Name Date

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

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: equipment upgrade to MHS291L for 1 datacard

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.



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: Office Use Employee ID# - Signature: GA Beltran

Department: Pct #4 Dept#: 124

Quantity: One - (956) 221-2292

Service: \$ 0 /mo (x) months = Account: 4-1200-431-00-124-007-0 -532

Service: \$ 0 /mo (x) months = Account: N/A -619/664

Requisition Total: 0 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:

Gloria A. Beltran Gloria A. Beltran 3/12/14
 Signature Print Name Date

Joseph Pulcinna
 Signature

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

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: equipment upgrade to MHS 291L for 1 data card

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



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: Office Use Employee ID# n/a Signature: _____

Department: Purchasing Department Dept#: 160

Quantity: 2 950-310-8530 & 950-310-8594

Service: \$ 0 /mo (x) _____ months = _____ Account: 4-1100-415-18-160-001-0 -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:

Martha L Salazar Martha L Salazar 3-20-14
Signature Print Name Date

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

[Signature] ValdeGuerra 3/20/14
Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: equipment upgrade to MHS291L for 2 Office Use data cards

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

WIRELESS DEVICE REQUEST FORM W/2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" 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>Office Use</u> Employee ID# <u>n/a</u> Signature:		
Department: <u>CC#7</u> Dept#: <u>027</u>		
Quantity: <u>1 912-342-1143</u>		
Service: \$ <u>37.99</u> /mo (x) <u>12</u> months = <u>455.88</u> Account: <u>4-1100-412-00-027-001-0</u> -532		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664		
Requisition Total: <u>\$455.88</u> Requisition Number: <u>251892</u>		

STIPEND		
(1) Employee: _____ Employee ID# _____ Signature: _____		
Department: _____ Dept#: _____		
Quantity: _____		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532		
Total: _____		

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

	SERGIO J. VALDEZ	<u>3-13-14</u>
Signature	Print Name	Date

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

_____	_____	_____
Signature	Print Name	Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: equipment upgrade to MHS291L for 1 data card

Commissioner's Court Action: Approved Date: _____ Disapproved

Commissioner's Court Date: _____

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" 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: Office Use Employee ID# N/A Signature: _____

Department: WIC Dept#: 1250

Quantity: 1 956-929-1042

Service: \$ 0.00 /mo (x) _____ months = _____ Account: 4,1292,441,00,350,001-532

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:

Norma Longoria Norma Longoria 3/12/14
 Signature Print Name Date

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

Valde Guerra Valde Guerra 3/14/14
 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Upgrade equipment to MHS291L for 1 data card

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

RECEIVED

MAR 14 2014

Revised: 03/09/2011

 **WIRELESS DEVICE REQUEST FORM W.2011.2**

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" 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 checked="" 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: Office Use Employee ID# N/A Signature: N/A
 Department: County Judges Dept#: _____
 Quantity: 1 950-310-1305
 Service: \$ 31.99 /mo (x) 12 months = 455.88 Account: 4-1100-415-00-110-0000-01 -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:

A= [Signature] Jaime R. Longoria 2/6/14
 Signature Print Name Date

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

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: transfer to Public Affairs 4-1100-413-00-110-0177-0-532

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

 **WIRELESS DEVICE REQUEST FORM W.2011.2**

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

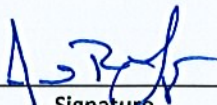
COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: Office Use Employee ID# N/A Signature: N/A
 Department: Public Affairs Dept#: 110
 Quantity: 1 950-310-1305
 Service: \$ 37.99 /mo (x) 12 months = 455.88 Account: A-1100-413-00-110-077-0 -532
 Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664
 Requisition Total: \$455.88 Requisition Number: 25074

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____
 Department: _____ Dept#: _____
 Quantity: _____
 Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532
 Total: _____

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

 Jaime R. Longoria 2/6/14
 Signature Print Name Date

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

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

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