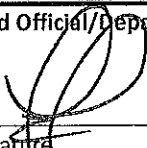



WIRELESS DEVICE REQUEST FORM W.2011.2

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 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#: _____ Signature: _____		
Department: <u>IT</u> Dept#: <u>200</u>		
Quantity: <u>2</u>		
Service: \$ <u>75.98</u> /mo (x) <u>10</u> months = <u>455.88</u> Account: <u>4-1100-415-00-200-001-0</u> 532		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ 619/664		
Requisition Total: <u>455.88</u> Requisition Number: <u>859175</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:		
	<u>Renan Ramirez</u>	<u>6/23/14</u>
Signature	Print Name	Date
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
	<u>Valde Guerra</u>	<u>6/23/14</u>
Signature	Print Name	Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>New activations</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/isl/article/0,,id=187154,00.html>, EXAMPLE 2.

Requisition

Req # 00259175

PO #

Date: 06/23/14

Bill To: x
 x

Vendor: 287024
VERIZON WIRELESS
P.O. BOX 660108
DALLAS TX 75266-0108

Ship To: INFORMATION TECHNOLOGY DEPARTMENT
100 E. CANO, 4TH FLOOR
EDINBURG TX 78540

Contact: GRISELDA
956-292-7010

Contract No: DIR-SDD-1779

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
6.00	MONTH	I.T. DEPT./ AI-44944 7/8/14 DO NOT DUPLICATE ORDER 4G Mobile Broadband Unlimited (new activations) @ \$37.99 X 2 = \$75.98 a month <u>Account No</u>	75.98	455.88
			<u>Encumbrance</u>	
			Freight	.00
			Total	455.88
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____