

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input 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 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 (956)483-5638(Verizon)		
Office Use / Employee: <u>Tomas J. Arredondo</u> Employee ID# <u>105899</u> Signature:		
Department: <u>Planning Dept.</u> Dept#: <u>210</u>		
Quantity: <u>1</u>		
Service: \$ <u>72.89</u> /mo (x) <u>7</u> months = \$ <u>510.23</u> Account: <u>4-1100-419-10-210-001-0</u> -532		
Service: \$ <u>5.00</u> /mo (x) <u>7</u> months = \$ <u>35.00</u> Account: <u>4-1100-419-10-210-001-0</u> - 619/664 532		
Requisition Total: \$ <u>5,543.28</u> Requisition Number: <u>Req #249385 (PO #704678)</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>Tomas J. Arredondo</u>	<u>5-13-14</u>
Signature	Print Name	Date
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
	<u>Valde Guerra</u>	<u>5/18/14</u>
Signature	Print Name	Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>Deactivate wireless service.</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/alg/article/0,,id=167151,00.html>, EXAMPLE 2

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COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: Diana R. Serna Employee ID# 149659 Signature: *Maurice Serna*

Department: Urban County Program Dept#: 250

Quantity: 1 (956) 587-1221

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

Maurice R Serna DIANA R. SERNA 6.2.14
 Signature Print Name Date

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

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate Wireless Service. *[Signature]*

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

Revised: 03/09/2011