



HIDALGO COUNTY, TEXAS

Auto Allowance Authorization Form

Department Name/Number: Human Resources / 190-002 Date: 12/10/2014

Position Title: Human Resources Specialist III Position Slot No. : 5

Position Status: Vacant Current
If position status is vacant go to Justification for Auto Allowance Section

Employee Name: Hermelinda Solis Employee Number: 126322

Employee Driver License No.: 315445

Auto Allowance Amount Request \$3,500.00

Auto Allowance to be funded from one of the following:

- Current Department Budget Annual Budget Cycle Will Require Additional Funds Other

VEHICLE INFORMATION

Year, Make, & Model: 2005 Dodge Stratus Ins. Policy Number: C-PR1740141-09

VIN Registration No. : 4B3AG42G75E028356 Policy Holder's Name: Hermelinda Solis

License Plate No. : CK6 Z577 Ins. Coverage Date: 10/31/14 thru 05/01/15

*Vehicle Insurance Provider: CEM Insurance Company Ins. Verified By: Sylvia Rios

*Employee should provide copy of current vehicle liability insurance policy and driver license to their respective department and to the Safety Division

JUSTIFICATION FOR AUTO ALLOWANCE

In the space provided below, please justify why the auto allowance is needed, in lieu of receiving the IRS current mileage reimbursement rate for In-County business use of personal vehicle.

Employee will be making rounds to the Administration Building and other destinations on a daily basis.

Hermelinda Solis
Employee Signature

12/10/14
Date

By signing this Auto Allowance Authorization Form, I understand that I will not be eligible to receive mileage reimbursement for using my personal vehicle for In-County business travel. I further understand that the Auto Allowance provided to me is subject to all applicable federal and state income taxes and will be included in my bi-weekly or semi-monthly paycheck (as applicable). The Auto Allowance amount is subject to change, upon Commissioners Court approval.

Esther A. Cortez
Esther A. Cortez, HR Director

12/10/2014
Date

Funding Available in Dept. Budget YES NO