Date: December 3, 2014
Department Head: Eduardo Olivarez, Chief Administrative Officer
Department Name: Hidalgo County Health Department
Account Number: 4-1100-441-00-340-003-0 Health Clinics
Budget Line Item Transfer(s)

Honorable Commissioner's Court of Hidalgo County

I submit to you for your consideration the following line-item transfers in accordance with Local Government Code, Chapter 111, Subchapter C:

FROM		TO		
ACCOUNT NUMBER	ACCOUNT NAME (OBJECT CODE)	ACCOUNT NUMBER	ACCOUNT NAME (OBJECT CODE)	AMOUNT
4-1100-441-00-340-003-0-350	HEALTH CLINICS-OTHER SERVICES	4-1100-441-00-340-003-0-421	HEALTH CLINICS-DISPOSAL	$ 378.63
4-1100-441-00-340-003-0-432	HEALTH CLINICS-EQUIP&VEH R&M SRV	4-1100-441-00-340-003-0-622	HEALTH CLINICS-ELECTRICITY	$ 1,000.00
4-1100-441-00-340-003-0-584	HEALTH CLINICS-REGISTRATION FEES	4-1100-441-00-340-003-0-622	HEALTH CLINICS-ELECTRICITY	$ 672.26
			Amount	$ 2,050.89

Revenue Account
Amount Requested: $ 2,050.89

Reason: Funds needed to cover anticipated expenditures.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONER'S COURT DATE ATTEST COUNTY CLERK