

# WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
<b>County Owned Wireless Device:</b> <input type="checkbox"/> Office Use or <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	<b>Wireless Data Device:</b> <input checked="" type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	<b>Stipend:</b> <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

**COUNTY OWNED WIRELESS DEVICE**

Office Use / Employee: Comm. Eduardo Centu Employee ID# \_\_\_\_\_ Signature: Edu

Department: Pct. 2 Adm Dept#: 122-005

Quantity: 1

Service: \$ 37.99 /mo (x) \_\_\_\_\_ months = \_\_\_\_\_ Account: 5-1200-431-00-122-005-0-532

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

Requisition Total: \$2735.<sup>29</sup> Requisition Number: 270137

**STIPEND**

(1) Employee: \_\_\_\_\_ Employee ID# \_\_\_\_\_ Signature: \_\_\_\_\_

Department: \_\_\_\_\_ Dept#: \_\_\_\_\_

Quantity: \_\_\_\_\_

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

Total: \_\_\_\_\_

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

Edu Comm. Eduardo Centu 01/21/15

Signature Print Name Date

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

\_\_\_\_\_  
 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: HQ Mobile Broadband Int. @ 37.99/mo.

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.

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**COUNTY OWNED WIRELESS DEVICE**

Office Use / Employee: Armando Pompa Employee ID# 207888 Signature:

Department: Post & Adm Dept#: 122-005

Quantity: 1

Service: \$ 37.99/mo (x) \_\_\_\_\_ months = \_\_\_\_\_ Account: 5-1200-431-00-122-005-0532

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

Requisition Total: 3735.28 Requisition Number: 270137

**STIPEND**

(1) Employee: \_\_\_\_\_ Employee ID# \_\_\_\_\_ Signature: \_\_\_\_\_

Department: \_\_\_\_\_ Dept#: \_\_\_\_\_

Quantity: \_\_\_\_\_

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

Total: \_\_\_\_\_

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

Commissioner Eduardo Cantu 01/21/15

Signature                      Print Name                      Date

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

\_\_\_\_\_  
 Signature                      Print Name                      Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: 4G Mobile Broadband Int. @ 37.99/mo

Commissioner's Court Action:                      Commissioner's Court Date: \_\_\_\_\_

Approved Date: \_\_\_\_\_                       Disapproved

# WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
<b>County Owned Wireless Device:</b> <input type="checkbox"/> Office Use or <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	<b>Wireless Data Device:</b> <input checked="" type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	<b>Stipend:</b> <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo
COUNTY OWNED WIRELESS DEVICE		
Office Use / Employee: <u>Jorge D Hinojosa</u> Employee ID# <u>207861</u> Signature:		
Department: <u>Pct. 2 Adm</u> Dept#: <u>122-005</u>		
Quantity: <u>1</u>		
Service: \$ <u>37.99</u> /mo (x) _____ months = _____ Account: <u>5-1200-431-00-122-0050-532</u>		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664		
Requisition Total: <u>\$2735<sup>28</sup></u> Requisition Number: <u>270137</u>		
STIPEND		
(1) Employee: _____ Employee ID# _____ Signature: _____		
Department: _____ Dept#: _____		
Quantity: _____		
Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532		
Total: _____		
<b>(2) Elected Official/Department Head Authorization for Request:</b>		
_____ Signature	<u>Comm. Eduardo Cinto</u> Print Name	<u>01/20/15</u> Date
<b>(3) Executive Office Authorization (Commissioner's Court Departments Only):</b>		
_____ Signature	_____ Print Name	_____ Date
<b>(4) IT DEPARTMENT ONLY:</b>		
Service Type Codes: <u>4G Mobile Broadband Uni. @37.99 /mo.</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/lsig/article/0,,id=167154,00.html>, EXAMPLE 2.

# WIRELESS DEVICE REQUEST FORM W.2011.2

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**COUNTY OWNED WIRELESS DEVICE**

Office Use / Employee: Jose Cabrera DeValca Employee ID# 207837 Signature:

Department: Pct. 2 Admin Dept#: 122-005

Quantity: 1

Service: \$ 37.99 /mo (x) \_\_\_\_\_ months = \_\_\_\_\_ Account: 5-1200-431-00-122-005-0-532

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

Requisition Total: \$2735.28 Requisition Number: 270137

**STIPEND**

(1) Employee: \_\_\_\_\_ Employee ID# \_\_\_\_\_ Signature: \_\_\_\_\_

Department: \_\_\_\_\_ Dept#: \_\_\_\_\_

Quantity: \_\_\_\_\_

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

Total: \_\_\_\_\_

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

Comm. Eduardo Centu 01/11/15

Signature                      Print Name                      Date

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

\_\_\_\_\_  
 Signature                      Print Name                      Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: 49. Mobile Broadband Int. @ 37.99/mo

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

# WIRELESS DEVICE REQUEST FORM W.2011.2

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<b>County Owned Wireless Device:</b> <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	<b>Wireless Data Device:</b> <input checked="" type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	<b>Stipend:</b> <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: Pct. #2 Adm Dept#: 122-005

Quantity: 1

Service: \$ 37.99 /mo (x)      months =      Account: 57200-431-00-122-005-0-532

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

Requisition Total: \$ 2735.28 Requisition Number: 270137

**STIPEND**

(1) Employee:      Employee ID#      Signature:     

Department:      Dept#:     

Quantity:     

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

Total:     

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

     Comm Eduardo Centu 01/21/11

Signature                      Print Name                      Date

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

              

Signature                      Print Name                      Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: 4G Mobile Broadband Lvl. @ 37.99/mo.

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

Revised: 03/09/2011

# WIRELESS DEVICE REQUEST FORM W.2011.2

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**COUNTY OWNED WIRELESS DEVICE**

Office Use / Employee: Armando Garza Employee ID# 207845 Signature:

Department: Pct. 2 Adm Dept#: 122-005

Quantity: 1

Service: \$ 37.99 /mo (x) \_\_\_\_\_ months = \_\_\_\_\_ Account: 5-1200-431-10-122-005-0-532

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

Requisition Total: \$2735.28 Requisition Number: 270137

**STIPEND**

(1) Employee: \_\_\_\_\_ Employee ID# \_\_\_\_\_ Signature: \_\_\_\_\_

Department: \_\_\_\_\_ Dept#: \_\_\_\_\_

Quantity: \_\_\_\_\_

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

Total: \_\_\_\_\_

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

Comm. Eduardo Cantu 01/21/15

Signature                      Print Name                      Date

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

\_\_\_\_\_  
 Signature                      Print Name                      Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: 49. Mobile Broadband Int. @ 31.99/mo

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