Date: January 22, 2015
Department Head: Eduardo Olivarez, Chief Administrative Officer
Department Name: Hidalgo County Health & Human Services Department
Account Number: 5-1293-441-00-340-012-5-
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
5-1293-441-00-340-012-5-113	IMM DIV LOCAL-REG F/T EMPLOYEES	5-1293-441-00-340-012-5-540	IMM DIV LOCAL-ADVERTISING	$ 5,000.00
5-1293-441-00-340-012-5-113	IMM DIV LOCAL-REG F/T EMPLOYEES	5-1293-441-00-340-012-5-610	IMM DIV LOCAL-GENERAL SUPPLIES	$ 17,000.00
5-1293-441-00-340-012-5-113	IMM DIV LOCAL-REG F/T EMPLOYEES	5-1293-441-00-340-012-5-581	IMM DIV LOCAL-TRAVEL IN COUNTY	$ 1,000.00
5-1293-441-00-340-012-5-230	IMM DIV LOCAL-RETIREMENT	5-1293-441-00-340-012-5-260	IMM DIV LOCAL-WORKERS COMP	$ 500.00
			Amount	$ 23,500.00

Revenue Account
Amount Requested: $ 23,500.00

Reason: Line item transfer needed to cover anticipated expenditures.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONER'S COURT DATE ATTEST COUNTY CLERK