Date: February 17, 2015
Department Head: Eduardo Olivarez, Chief Administrative Officer
Department Name: Hidalgo County Health Department
Account Number: 5-1100-441-00-340-003-0 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
5-1100-441-00-340-003-0-610	HEALTH CLINICS-GENERAL SUPPLIES	5-1100-441-00-340-003-0-660	HEALTH CLINICS-FURNISHINGS & EQUIPMENT	$ 2,500.00
5-1100-441-00-340-003-0-610	HEALTH CLINICS-GENERAL SUPPLIES	5-1100-441-00-340-003-0-623	HEALTH CLINICS-BOTTLED GAS	$ 300.00
5-1100-441-00-340-003-0-610	HEALTH CLINICS-GENERAL SUPPLIES	5-1100-441-00-340-003-0-650	HEALTH CLINICS-SOFTWARE- CONTROLLED	$ 2,000.00
			Amount	$ 4,800.00

Revenue Account
Amount Requested: $ 4,800.00

Reason: Funds needed to cover anticipated expenditures.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONER'S COURT DATE ATTEST COUNTY CLERK