DATE: June 2, 2015

DEPARTMENT HEAD: Eduardo Olivarez, Chief Administrative Officer

DEPARTMENT NAME: Hidalgo County Health & Human Services Department

ACCOUNT NUMBER: 5-1293-441-00-340-013-5-XXX CPS / HAZARDS

SUBJECT: Budget Amendments (Increases) in Accordance with Local Government Code, Chapter 111, Subchapter C

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following amendments (increase) to my department budget in accordance with Local Government Code, Chapter 111, Subchapter C.

INCREASE OBJECT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT -
Personnel		
5-1293-441-00-340-013-5-113	CPS/HAZARDS - Reg F/T Employees	$ (44,949.00)
Fringes		
5-1293-441-00-340-013-5-211	CPS/HAZARDS - Health Insurance	$ (5,838.00)
5-1293-441-00-340-013-5-212	CPS/HAZARDS - Life Insurance	$ (38.00)
5-1293-441-00-340-013-5-220	CPS/HAZARDS - FICA	$ (3,439.00)
5-1293-441-00-340-013-5-230	CPS/HAZARDS - Retirement	$ (6,429.00)
5-1293-441-00-340-013-5-250	CPS/HAZARDS - Unemployment	$ (246.00)
5-1293-441-00-340-013-5-260	CPS/HAZARDS - Workmans Comp	$ (421.00)
Travel		
5-1293-441-00-340-013-5-581	CPS/HAZARDS - Travel In-County	$ (656.00)
5-1293-441-00-340-013-5-583	CPS/HAZARDS - Travel Out-of-County	$ (1,000.00)
	TOTAL APPROPRIATION	$ (63,016.00)
5-1293-331-12-340-013-5-000	CPS/HAZARDS - Revenue	$ (63,016.00)
	TOTAL APPROPRIATION	$ (63,016.00)

REASON: To REDUCE the CPS/HAZARDS FY 15 grant award in the amount of $63,016.00.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONER'S DATE ATTEST CO. CLERK