

DATE: June 23, 2015

DEPARTMENT HEAD: Sergio Cruz, Budget Officer

DEPARTMENT NAME: Department of Budget & Management for Health Grants

ACCOUNT NUMBER: 5-1XXX-X91-01-000-XXX-X-XXX

CONTACT PERSON: Debbie Tamez PHONE: (956) 292-7025 ext. 5427

SUBJECT: Interfund & BA - Transfer/s (transfer in/out) (increase/decrease) in Accordance with Local Government Code Chapter 111, Subchapter C.

2015 Interfund Transfer AI-50233



Honorable Commissioner's Court of Hidalgo County:

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

INCREASE/DECREASE ACCOUNT NUMBER	ACCOUNT (OBJECT) NAME	AMOUNT
FROM:		
5-1293-391-01-000-100-5- 000	Transfers In- General Fund	(694.00)
5-1100-491-01-000-293-5- 891	Transfers Out- Health Grants	(694.00)
TO:		
5-1293-391-01-000-100-6- 000	Transfers In- General Fund	694.00
5-1100-491-01-000-293-6- 891	Transfers Out- Health Grants	694.00
TOTAL BUDGET INCREASE (DECREASE)		0.00

REASON: To fund the total local match required for AI-50082, CC 6/23/15, to accept CPS/HAZARDS grant contract #2016-001134-00.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK