DATE: September 7, 2016

DEPARTMENT HEAD: Arnold K Patrick, Executive Director

DEPARTMENT NAME: Hidalgo County CSCD - DWI

ACCOUNT NUMBER: 6-1289-423-00-320-032-6-

SUBJECT: **Intra-departmental Transfer/s**

I would like to request the following Intra-departmental transfer/s (increase/decrease) in accordance with Local Government Code, Chapter 111, Subchapter C Section 111.070, Subsection C.

FROM OBJECT CODE	OBJECT NAME	TO OBJECT CODE	OBJECT NAME	AMOUNT
211	Health Insurance	117	Supplemental Pay	34.53
212	Life Insurance	117	Supplemental Pay	0.37
220	FICA	117	Supplemental Pay	14.02
230	Retirement	117	Supplemental Pay	23.20
250	Unemployment Comp	117	Supplemental Pay	8.28
260	Worker's Compensation	117	Supplemental Pay	0.51
660	Furnishings & Equipment-Controlled	751	Machinery & Equipment	1,606.00
			TOTAL	1,686.91

REASON: To cover fringe benefits through year end for the supplemental pay.
To correctly classify Fatal goggles kit

Arnold K Patrick, Director
Hidalgo County CSCD

Date

Ray Eufracio, CPA
County Auditor

Date