

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: N/A Employee ID# N/A Signature: _____

Department: D.A.'s office Dept#: 080

Quantity: 1 (950)-929-1577

Service: \$~~69.99~~/mo (x) 2 months = 139.98 Account: 6-1100-412-00-080-002-0-532

Service: \$ 5.00 /mo (x) 2 months = 10.00 Account: 6-1100-412-00-080-002-0-532

Requisition Total: \$149.98 Requisition Number: 304554

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Cantu Rosalinda Cantu 11/14/11

Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nationwide Unl. Mins Email & Data Unl. + MHS
New/M24/HSG Unl. @ \$69.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use Employee: N/A Employee ID# N/A Signature: _____

Department: D.A.'s Office Dept#: 080

Quantity: 1 (950) 929-1970

Service: \$ 69.99/mo (x) 2 months = 139.98 Account: 6-1100-412-00-080-002-0-532

Service: \$ 5.00/mo (x) 2 months = 10.00 Account: 6-1100-412-00-080-002-0-532-619/664

Requisition Total: \$149.98 Requisition Number: 304584

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Conti Rosalinda Conti 11/14/10

Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature _____ Print Name _____ Date _____

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nationwide Unl. Mins. Email & Data Unl. + MHS
NEW/M2M/MSR Unl @ \$169.99 + 5.00 = 74.99

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Requisition

Req # 00304554

PO #

Date: 08/23/16

Bill To: x
x

Vendor : 287024
VERIZON WIRELESS
P.O. BOX 660108
DALLAS TX 75266-0108

Ship To: Hidalgo County District Attorney
100 East Cano
Edinburg Tx 78539

Contact: ANA GALVAN
956-292-7604

Contract No: DIR-TSO-3415

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		STATE OF TEXAS DIR CONTRACT NO, DIR-TSO-3415 EXP: 4/27/2020		
		DO NOT DUPLICATE ORDER		
2.00	MONTH	CO NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-929-1577	69.99	139.98
2.00	MONTH	CO TAXES & FEES	5.00	10.00
2.00	MONTH	CO NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-929-1970	69.99	139.98
2.00	MONTH	EX TAXES AND FEES	5.00	10.00
		<u>Account No</u>	<u>Encumbrance</u>	
		6-1100-412-00-080-002-0-532	299.96	
			Freight	.00
			Total	299.96
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____



WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST

County Owned Wireless Device:

- Office Use or Individual
- Name Change
- Equipment Change
- Plan Change
- Delete Service

Wireless Data Device:

- Data Card
- Blackberry
- Other:

Stipend:

- Cellular Telephone \$50/mo
- Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use Employee: N/A Employee ID# N/A Signature: _____

Department: D.A.'s office Dept#: 080

Quantity: 1 (956)-929-0015

Service: \$ 69.99/mo (x) 2 months = 139.98 Account: 6-1100-412-00-080-013-0-532

Service: \$ 5.00/mo (x) 2 months = 10.00 Account: 6-1100-412-00-080-013-0-532 ~~619/664~~

Requisition Total: \$ 149.98 Requisition Number: 304552

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Cantu Rosalinda Cantu 11/14/10
Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature _____ Print Name _____ Date _____

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nationwide Int. Mms Data & Email Intl + MMS
N&W/424/456 Intl. @ 69.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Current County cell phone policy stipulates that employees that have cell phones assigned to them will be taxed the value of the service. Please see the following IRS document for more information: <http://www.irs.gov/govul/slg/article/0,,id=167154,00.html>, EXAMPLE 2.

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: N/A Employee ID# N/A Signature: _____

Department: D.A.'s office Dept#: 080

Quantity: 1 (956)-929-0125

Service: \$ 69.99/mo (x) 2 months = 139.98 Account: 6-1100-412-00-080-013-0532

Service: \$ 5.00/mo (x) 2 months = 10.00 Account: 6-1100-412-00-080-013-0-532-619/664

Requisition Total: \$149.98 Requisition Number: 304552

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Cantu Rosalinda Cantu 11/14/16

Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature _____ Print Name _____ Date _____

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nationwide Intl. LMS Email & Data. Intl. + MHS
N.E.W./M2M/LSG Intl. @ 69.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Requisition

Req # 00304552

PO #

Date: 08/23/16

Bill To: x
x

Vendor: 287024
VERIZON WIRELESS
P.O. BOX 660108
DALLAS TX 75266-0108

Ship To: Hidalgo County District Attorney
100 East Cano
Edinburg Tx 78539

Contact: ANA GALVAN
956-292-7604

Contract No: DIR-TSO-3415

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		STATE OF TEXAS DIR CONTRACT NO. DIR-TSO-3415 EXP: 4/27/2020		
		DO NOT DUPLICATE ORDER		
2.00	MONTH	CO NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-929-0015	69.99	139.98
2.00	MONTH	CO TAXES AND FEES	5.00	10.00
2.00	MONTH	CO NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-929-0125	69.99	139.98
2.00	MONTH	304555 TAXES AND FEES	5.00	10.00
		<u>Account No</u>	<u>Encumbrance</u>	
		6-1100-412-00-080-013-0-532	299.96	
			Freight	.00
			Total	299.96
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use/Employee: N/A Employee ID# N/A Signature: _____

Department: D.A.'s office Dept#: 080

Quantity: 1 (926) 929-4459

Service: \$149.99/mo (x) 2 months = 149.98 Account: 6-1281-412-00-080-012-7-532

Service: \$5.00/mo (x) 2 months = 10.00 Account: 6-1281-412-00-080-012-7-532 519/664

Requisition Total: \$149.98 Requisition Number: 304550

STIPEND

(1) Employee: _____ Employee ID#: _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Cantu Rosalinda Cantu 11/14/14

Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nationwide Intl. Mins Email & Data Intl + MHS
New/1424/MSE Intl @ 149.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Current County cell phone policy stipulates that employees that have cell phones assigned to them will be taxed the value of the service. Please see the following IRS document for more information: <http://www.irs.gov/govt/istg/article/0,,id=167154,00.html>, EXAMPLE 2.

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: N/A^b Employee ID# N/A Signature: _____

Department: D.A.'s office Dept#: 080

Quantity: 1 (956) 929-4460

Service: \$ 69.99/mo (x) 2 months = 139.98 Account: 6-1281-412-00-080-012-0-7-532

Service: \$ 5.00/mo (x) 2 months = 10.00 Account: 6-1281-412-00-080-012-0-7-532
-519/664

Requisition Total: \$149.98 Requisition Number: 304550

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Cantu Rosalinda Cantu 11/14/16

Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature _____ Print Name _____ Date _____

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nationwide Intl. Mins Email & Data Intl. + MHS
NEW/MSG/MSG Intl. @ 69.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Requisition

Req # 00304550

PO #
Date: 08/23/16

Bill To: x
x

Vendor: 287024
VERIZON WIRELESS
P.O. BOX 660108
DALLAS TX 75266-0108

Ship To: Hidalgo County District Attorney
100 East Cano
Edinburg Tx 78539

Contact: ANA GALVAN
956-292-7604

Contract No: DIR-TSO-3415

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DIR-TSO-3415 STATE OF TEXAS DIR CONTRACT NO. DIR-TSO-3415 EXP: 4/27/2020		
		DO NOT DUPLICATE ORDER		
2.00	MONTH	CO NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-929-4459	69.99	139.98
2.00	MONTH	EX TAXES & FEES	5.00	10.00
2.00	MONTH	CO NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-929-4460	69.99	139.98
2.00	MONTH	EX TAXES & FEES	5.00	10.00
2.00	MONTH	CO MOBILE BROADBAND UNLIMITED - \$ 37.99 956-929-4461	37.99	75.98
2.00	MONTH	CO MOBILE BROADBAND UNLIMITED - \$ 37.99 956-587-8183	37.99	75.98
		<u>Account No</u>	<u>Encumbrance</u>	
		6-1281-412-00-080-012-7-532	451.92	
			Freight	.00
			Total	451.92
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____



WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST

County Owned Wireless Device:

- Office Use or Individual
- Name Change
- Equipment Change
- Plan Change
- Delete Service

Wireless Data Device:

- Data Card
- Blackberry
- Other:

Stipend:

- Cellular Telephone \$50/mo
- Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: N/A^{MS} Employee ID# N/A Signature: _____

Department: D.A.'s office Dept#: 080

Quantity: 1 (956-279-8479)

Service: \$ 69.99/mo (x) 2 months = 139.98 Account: 6-1223-412-00-080-007-0-532

Service: \$ 5.00/mo (x) 2 months = 10.00 Account: 6-1223-412-00-080-007-0-532-619/664

Requisition Total: 149.98 Requisition Number: 304145

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosculinda Centri Rosculinda Centri 11/14/16
 Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature _____ Print Name _____ Date _____

(4) IT DEPARTMENT ONLY:

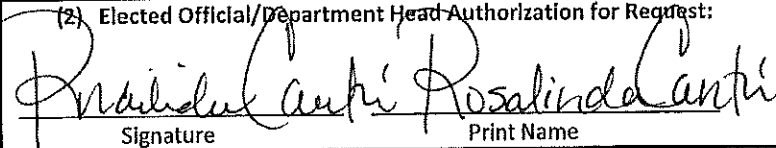
Service Type Codes: Nationwide Unt. Mins Email & Data Unt. + MHSO
Ntw/H2M/H98 Unt @ 69.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Current County cell phone policy stipulates that employees that have cell phones assigned to them will be taxed the value of the service. Please see the following IRS document for more information: <http://www.irs.gov/govt/istg/article/0,,id=167154,00.html>, EXAMPLE 2.

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo
COUNTY OWNED WIRELESS DEVICE		
Office Use <input checked="" type="checkbox"/> Employee: <u>N/A PD</u> Employee ID# <u>N/A</u> Signature: _____ Department: <u>D.A.'s Office</u> Dept#: <u>080</u> Quantity: <u>1 (956) 827-9198</u> Service: \$ <u>69.99</u> /mo (x) <u>2</u> months = <u>139.98</u> Account: <u>6-1223-412-00-080-007-0-532</u> Service: \$ <u>50</u> /mo (x) <u>2</u> months = <u>10.00</u> Account: <u>6-1223-412-00-080-007-0-532</u> Requisition Total: <u>149.98</u> Requisition Number: <u>304145</u>		
STIPEND		
(1) Employee: _____ Employee ID# _____ Signature: _____ Department: _____ Dept#: _____ Quantity: _____ Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532 Total: _____		
(2) Elected Official/Department Head Authorization for Request:  <u>11/14/14</u> Signature _____ Print Name <u>Rosalinda Cantu</u> Date _____		
(3) Executive Office Authorization (Commissioner's Court Departments Only): Signature _____ Print Name _____ Date _____		
(4) IT DEPARTMENT ONLY: Service Type Codes: <u>Nationwide Intl. Mins Email: Data Intl + MHS</u> <u>Ntw/M2M/MSG Intl. 69.99 + 5.00 = 74.99/mo.</u>		

Commissioner's Court Action: _____ Commissioner's Court Date: _____
 Approved Date: _____ Disapproved

Current County cell phone policy stipulates that employees that have cell phones assigned to them will be taxed the value of the service. Please see the following IRS document for more information: <http://www.irs.gov/gov/istg/article/0,,id=167154,00.html>, EXAMPLE 2.

WIRELESS DEVICE REQUEST FORM W 2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: N/A Employee ID# N/A Signature: _____

Department: D.A.'s Office Dept#: 080

Quantity: 1 (956) 929-1630

Service: \$69.99/mo (x) 2 months = 139.98 Account: 6-1223-412-00-080-0070-532

Service: \$5.00/mo (x) 2 months = 10.00 Account: 6-1223-412-00-080-007-0-532-619/664

Requisition Total: \$149.98 Requisition Number: 304145

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Conti Rosalinda Conti 11/14/10

Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature _____ Print Name _____ Date _____

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nationwide Unl. Mins Email & Data Unl. Mins
NEW 1424 MSG Unl. @ 69.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Current County cell phone policy stipulates that employees that have cell phones assigned to them will be taxed the value of the service. Please see the following IRS document for more information: <http://www.irs.gov/govt/isl/article/0,,id=167154,00.html>, EXAMPLE 2.

Revised: 03/09/2011

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use Employee: N/A Employee ID# N/A Signature: _____

Department: D.A.'s office Dept#: 080

Quantity: 1 (950) 929-1648

Service: \$69.99/mo (x) 2 months = 139.98 Account: 6-1223-412-00-080-007-0-532

Service: \$5.00/mo (x) 2 months = 10.00 Account: 6-1223-412-00-080-007-0-532
619/664

Requisition Total: \$149.98 Requisition Number: 304145

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Cantu Rosalinda Cantu 11/14/16
 Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature _____ Print Name _____ Date _____

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nationwide Intl. Mins Email & Data Intl. LHS
NEW 1424/HSE Intl. @ 19.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: N/A Employee ID# N/A Signature: _____
 Department: D.A.'s office Dept#: 080
 Quantity: 1 950-587-2017
 Service: \$ 69.99/mo (x) 2 months = 139.98 Account: 6-1223-412-00-0800070-532
 Service: \$ 5.00/mo (x) 2 months = 10.00 Account: 6-1223-412-00-080-0070-532-6197664
 Requisition Total: \$149.98 Requisition Number: 304145

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____
 Department: _____ Dept#: _____
 Quantity: _____
 Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532
 Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Conti Rosalinda Conti 11/14/11
 Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nation wide Int. Email & Data Unit + MHS
NEW/124/MSC Len. @ 69.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Requisition

Req # 00304145

PO #
Date: 08/15/16

Bill To: x
x

Vendor: 287024
VERIZON WIRELESS
P.O. BOX 660108
DALLAS TX 75266-0108

Ship To: Hidalgo County District Attorney
100 East Cano
Edinburg Tx 78539

Contact: ANA GALVAN
956-292-7604

Contract No: DIR-TSO-3415

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DIR-TSO-3415 STATE OF TEXAS DIR CONTRACT NO. DIR-TSO-3415 EXP: 4/27/2020		
		DO NOT DUPLICATE ORDER		
2.00	MONTH	CO NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-279-8479	69.99	139.98
2.00	MONTH	EX TAXES & FEES	5.00	10.00
2.00	MONTH	NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-827-9198	69.99	139.98
2.00	MONTH	TAXES & FEES	5.00	10.00
2.00	MONTH	NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-929-1630	69.99	139.98
2.00	MONTH	TAXES & FEES	5.00	10.00
2.00	MONTH	NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-929-1648	69.99	139.98
2.00	MONTH	TAXES & FEES	5.00	10.00
2.00	MONTH	NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-587-2017	69.99	139.98
2.00	MONTH	TAXES & FEES	5.00	10.00
2.00	MONTH	MOBILE BROADBAND UNLIMITED \$37.99 - 956-929-0076	37.99	75.98
2.00	MONTH	MOBILE BROADBAND UNLIMITED \$37.99 - 956-929-3654	37.99	75.98
2.00	MONTH	MOBILE BROADBAND UNLIMITED \$37.99 - 956-929-3739	37.99	75.98
		<u>Account No</u>	<u>Encumbrance</u>	
		6-1223-412-00-080-007-0-532	977.84	
			Freight	.00
			Total	977.84
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: N/A Employee ID# N/A Signature: _____

Department: D.A.'s Office Dept#: 080

Quantity: 1 (956-683-5514)

Service: \$ 69.99 /mo (x) 2 months = \$139.98 Account: 6-110-412-00-080-002-0-532

Service: \$ 5.00 /mo (x) 2 months = 10.00 Account: 6-110-412-00-080-002-0-532-619/664

Requisition Total: \$149.98 Requisition Number: 304555

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Rosalinda Cantu Rosalinda Cantu 11/14/16

Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature _____ Print Name _____ Date _____

(4) IT DEPARTMENT ONLY:

Service Type Codes: Nationwide Intl. Mms Email & Data Intl + MMS
New/Intl/MSG Intl. @ 69.99 + 5.00 = 74.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Requisition

Req # 00304555

PO #

Date: 08/23/16

Bill To: x
x

Vendor: 287024
VERIZON WIRELESS
P.O. BOX 660108
DALLAS TX 75266-0108

Ship To: Hidalgo County District Attorney
100 East Cano
Edinburg Tx 78539

Contact: ANA GALVAN
956-292-7604

Contract No: DIR-TSO-3415

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		STATE OF TEXAS DIR CONTRACT NO. DIR-TSO-3415 EXP: 4/27/2020		
		DO NOT DUPLICATE ORDER		
2.00	MONTH	CO NATIONWIDE UNLIMITED MINS EMAIL & DATA UNL+MHS N&W/M2M/MSG UNL \$69.99 - 956-683-5514	69.99	139.98
2.00	MONTH	EX TAXES & FEES	5.00	10.00
2.00	MONTH	CO MOBILE BROADBAND UNLIMITED \$37.99 - 956-269-2162	37.99	75.98
		<u>Account No</u>	<u>Encumbrance</u>	
		6-1100-412-00-080-002-0-532	225.96	
			Freight	.00
			Total	225.96
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: _____

WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

COUNTY OWNED WIRELESS DEVICE

Office Use / Employee: N/A Employee ID# N/A Signature: _____

Department: DA'S OFFICE Dept#: 080-013

Quantity: 1

Service: \$ 37.99 /mo (x) 1 months = 37.99 Account: 6.1100.412.00.080.013.0-532

Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -619/664

Requisition Total: 37.99 Requisition Number: 309305

STIPEND

(1) Employee: _____ Employee ID# _____ Signature: _____

Department: _____ Dept#: _____

Quantity: _____

Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532

Total: _____

(2) Elected Official/Department Head Authorization for Request:

Priscilla Conti Priscilla Conti 11/14/16

Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

 Signature Print Name Date

(4) IT DEPARTMENT ONLY:

Service Type Codes: 4G Mobile Broadband Unit @ 37.99/mo

Commissioner's Court Action: _____ Commissioner's Court Date: _____

Approved Date: _____ Disapproved

Requisition

Req # 00309305

PO # 752726

Date: 11/04/16

Bill To: x
x

Vendor: 287024
VERIZON WIRELESS
P.O. BOX 660108
DALLAS TX 75266-0108

Ship To: Hidalgo County District Attorney
100 East Cano
Edinburg Tx 78539

Contact: VICTOR
956-292-7604

Contract No: DIR-TSO-3415

Special Instructions:
R 159

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1.00	MONTH	DIR-TSO-3415 EXP: 4-27-2020 CC APPROVED 11/1/2016 (AI- 57144) DO NOT DUPLICATE ORDER CO 4G MOBILE BROADBAND UNLIMITED @ \$37.99 A MONTH Account No _____ 6-1100-412-00-080-013-0-532 4G MOBILE BROADBAND THIS ITEM IS GOING TO BE USED BY THE CIVIL LITIGATION DEPARTMENT WHEN NEEDED <div style="text-align: center; font-size: 1.2em; font-family: cursive;">civil litigation</div>	37.99 <u>Encumbrance</u> 37.99 Freight .00 Total 37.99	37.99

Authorized By: _____



Executive Summary

Prepared by:

Milena Lamon

Verizon Account Manager:

Carlos Zavala

Business Name:

Hidalgo County- District Attorney

Business Account:

MULTIPLE

Next Bill Cycle Date:

Oct 23, 2016

Sep 23, 2016 | Aug 23, 2016 | Jul 23, 2016

Business ECPD:

2703147

Business Discount:

19%

Today's Upgrade Date

November 2, 2016

Monthly Spending

	Sep '16	Aug '16	Jul '16	Avg
Monthly Access	\$1,048.92	\$1,277.27	\$1,080.46	\$1,135.55
Voice	\$0.00	\$0.00	\$0.00	\$0.00
Messaging	\$0.02	\$0.00	\$0.00	\$0.01
Data	\$0.00	\$0.00	\$0.00	\$0.00
International Charges	\$0.00	\$0.00	\$0.00	\$0.00
Other Charges & Credits	\$0.00	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00	\$0.00
Totals*	\$1,048.94	\$1,277.27	\$1,080.46	\$1,135.56

Upgrade Eligibility Breakdown

	Now	30 days	60 days	90 days	Beyond
SMARTPHONE	11	-	-	-	1
PHONE	-	-	-	-	-
MBB	5	-	2	-	1
TABLET, NOTEBOOK	-	-	-	-	-
ROUTER	-	-	-	-	-
CONNECTED_DEVICE	-	-	-	-	-
M2M	-	-	-	-	-
TOTAL	16	-	2	-	2

Proposed Monthly Access

Price Plan Description	Count	Allowance (GB)	Total
98396-NATIONWIDE UNLIMITED MINS EMAIL&DATA UNL+MMS N&W/M2M/MSG UNL \$69.99	12	-	\$689.52
84356-MOBILE BROADBAND UNLIMITED \$37.99 1210	8	-	\$303.92
	-	-	\$0.00
	-	-	\$0.00
	-	-	\$0.00
	-	-	\$0.00
	-	-	\$0.00
	-	-	\$0.00
	-	-	\$0.00
	-	-	\$0.00
TOTALS	20	-	\$993.44
PROPOSED GB POOL		0	
PROPOSED VOICE POOL		0	

12 Month Usage

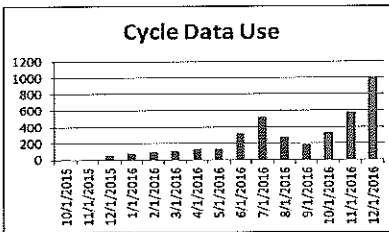
Cycle	Peak Mins	GB	MTN	User Name	Avg. GB
September-16	3,044	190	956-929-1081	NEW HOTSPOT DA	156
August-16	1,697	273	956-929-0076	OFFICE USE M.C.	112
July-16	1,091	522	956-269-2162	OFFICE USE	23
June-16	1,061	319	956-929-3654	MIFI DATA CARD	17
May-16	1,283	137	956-587-8183	NEW JETPACK	4
April-16	1,695	137	956-279-8479	DIST ATTY BB BOLD	4
March-16	1,437	111	956-929-1630	BB BOLD	4
February-16	1,158	95	956-587-2017	NEW LINE	3
January-16	840	77	956-587-2733	NEW HOTSPOT DA	2
December-15	1,304	54	956-929-4461	HIDALGO DA MIFI CARD	2
November-15	896	11	956-929-4459	HIDALGO DA BLACKBERRY	1
October-15	1,048	4	956-827-9198	DIST ATTY BB BOLD	1

Top Users

This will save \$120.00 per month or \$1,440.00 per year. This does not include taxes, fees, and/or usage charges.

0
0
0
0

This account shows a STRONG increasing usage pattern. The trend indicates a pool size of 859 GB may be sufficient, based on strength and general direction of the trend. Last 3 months on chart are *ESTIMATED forecast based on usage history.



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Our Surcharges (Incl. 2.29% Federal Universal Service (varies quarterly), 5¢ Regulatory & 40¢ Administrative/line/mo., & others by area) are not taxes (details: 1-888-684-1888); gov't taxes and our surcharges could add 6% - 35% to your bill. Activation fees may apply (according to your contract agreement).

IMPORTANT CONSUMER INFORMATION: Subject to Major Account Agmt, Calling Plan & credit approval. Charges up to 45¢/min after allowance. Usage rounded to next full minute. Offers & coverage subject to change. Not available everywhere. Network details & coverage map at verizonwireless.com. Mktg: 8-01am. © 2016 Verizon Wireless