



# COUNTY OF HIDALGO

## Human Resources Department



### PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

**NOTE:** COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.

DATE: 02/06/2017 CURRENT POSITION TITLE: Cheif Deputy II  
 DEPARTMENT NAME: County Treasurer CURRENT SLOT NO.: 0002  
 DEPARTMENT NO.: 150 -001 #0 REQUESTED POSITION TITLE: \_\_\_\_\_

**ALLOWANCE REQUEST: Type of Allowance**

- |  |                                      |                                   |
|--|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> Longevity               | <input type="checkbox"/> Interpreter | <input type="checkbox"/> Clothing |
| <input checked="" type="checkbox"/> Supplemental | <input type="checkbox"/> Auto        |                                   |

Allowance Amount: <u>\$ 0.00</u>	\$ 561.00	\$ 561.00
Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 561.00

**POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Current Department Budget | <input type="checkbox"/> Annual Budget Cycle  | <input type="checkbox"/> Will Require Additional Funds |
| <input type="checkbox"/> Salary Adjustment         | <input checked="" type="checkbox"/> Other <u>Monies from Drainage District, processing of payroll</u> |  |

POSITION TYPE:  Full Time Regular Object Code 113  Part Time Regular Object Code 114  
 Full Time Temporary Object Code 121  Part Time Temporary Object Code 122

CIVIL SERVICE:  Exempt  Non-Exempt FLSA:  Exempt  Non- Exempt

**JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)**

Monitors all final processing of payroll, vendor checks and reports.

**COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)**

\_\_\_\_\_  
 \_\_\_\_\_

Norma P. Garcia  
 Department Head  
Raula Dreyer  
 Department of Human Resources  
[Signature]  
 Department of Budget & Management

02/06/2017  
 Date  
2/17/2017  
 Date  
2/17/17  
 Date



# COUNTY OF HIDALGO

## Human Resources Department



### PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

**NOTE: COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.**

DATE: 02/06/2017 CURRENT POSITION TITLE: Payroll Supervisor  
 DEPARTMENT NAME: County Treasurer CURRENT SLOT NO.: 0003  
 DEPARTMENT NO.: 150 -001 KJ REQUESTED POSITION TITLE: \_\_\_\_\_

**ALLOWANCE REQUEST: Type of Allowance**

- |  |                                      |                                   |
|--|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> Longevity               | <input type="checkbox"/> Interpreter | <input type="checkbox"/> Clothing |
| <input checked="" type="checkbox"/> Supplemental | <input type="checkbox"/> Auto        |                                   |

Allowance Amount: <u>\$ 0.00</u>	<u>\$ 3,000.00</u>	<u>\$ 3,000.00</u>
Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 3,000.00

**POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Current Department Budget | <input type="checkbox"/> Annual Budget Cycle  | <input type="checkbox"/> Will Require Additional Funds |
| <input type="checkbox"/> Salary Adjustment         | <input checked="" type="checkbox"/> Other <u>Monies from Drainage District, processing of payroll</u> |  |

POSITION TYPE:  Full Time Regular Object Code 113  Part Time Regular Object Code 114  
 Full Time Temporary Object Code 121  Part Time Temporary Object Code 122

CIVIL SERVICE:  Exempt  Non-Exempt FLSA:  Exempt  Non- Exempt

**JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)**

Supervises the employees that do the processing and distribution of all the payroll and vendor checks for the  
Drainage District.

**COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)**

\_\_\_\_\_  
 \_\_\_\_\_

Norma G. Garcia  
 Department Head

02/06/2017  
 Date

Kare Olyza  
 Department of Human Resources

2/17/2017  
 Date

[Signature]  
 Department of Budget & Management

2/17/17  
 Date



# COUNTY OF HIDALGO

## Human Resources Department



### PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

**NOTE:** COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.

DATE: 02/06/2017 CURRENT POSITION TITLE: Assistant Payroll Supervisor  
 DEPARTMENT NAME: County Treasurer CURRENT SLOT NO.: 0004  
 DEPARTMENT NO.: 150-001 REQUESTED POSITION TITLE: \_\_\_\_\_

**ALLOWANCE REQUEST: Type of Allowance**

- Longevity                       Interpreter                       Clothing  
 Supplemental                       Auto

<b>Allowance Amount:</b>	<u>\$ 0.00</u>	<u>\$ 2,800.00</u>	<u>\$ 2,800.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

**TOTAL BUDGETARY IMPACT:** \$ 2,800.00

**POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:**

- Current Department Budget                       Annual Budget Cycle                       Will Require Additional Funds  
 Salary Adjustment                       Other Processing of payroll & vendor checks for Drainage

**POSITION TYPE:**  Full Time Regular Object Code 113                       Part Time Regular Object Code 114  
 Full Time Temporary Object Code 121                       Part Time Temporary Object Code 122

**CIVIL SERVICE:**  Exempt                      **FLSA:**  Exempt  
 Non-Exempt                       Non- Exempt

**JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)**

Assist with the supervision of employees and also does some of the processing and distribution of all the payroll and vendor checks for the Drainage District.;

**COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)**

\_\_\_\_\_  
 \_\_\_\_\_

Norma G. Garcia  
 Department Head  
Rita Perez  
 Department of Human Resources  
[Signature]  
 Department of Budget & Management

02/06/2017  
 Date  
2/17/2017  
 Date  
2/17/17  
 Date



# COUNTY OF HIDALGO

## Human Resources Department



### PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

**NOTE:** COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.

DATE: 02/06/2017 CURRENT POSITION TITLE: Payroll Data Specialist II  
 DEPARTMENT NAME: County Treasurer CURRENT SLOT NO.: 0005  
 DEPARTMENT NO.: 150-001 REQUESTED POSITION TITLE: \_\_\_\_\_

**ALLOWANCE REQUEST: Type of Allowance**

- Longevity  Interpreter  Clothing  
 Supplemental  Auto

Allowance Amount: \$ 0.00 \$ 2,500.00 \$ 2,500.00  
 Current Budgeted Amount Proposed Budgeted Amount Net Change

TOTAL BUDGETARY IMPACT: \$ 2,500.00

**POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:**

- Current Department Budget  Annual Budget Cycle  Will Require Additional Funds  
 Salary Adjustment  Other Processing of payroll & vendor checks for Drainage

POSITION TYPE:  Full Time Regular Object Code 113  Part Time Regular Object Code 114  
 Full Time Temporary Object Code 121  Part Time Temporary Object Code 122

CIVIL SERVICE:  Exempt FLSA:  Exempt  
 Non-Exempt  Non- Exempt

**JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)**

Will perform duties required in order to process the payroll and vendor checks for the Drainage District.

**COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)**

\_\_\_\_\_  
\_\_\_\_\_

Norma G. Garcia  
 Department Head  
Karee Dujin  
 Department of Human Resources  
[Signature]  
 Department of Budget & Management

02/06/2017  
 Date  
2/17/2017  
 Date  
2/17/17  
 Date



# COUNTY OF HIDALGO

## Human Resources Department



### PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

**NOTE: COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.**

DATE: 02/06/2017 CURRENT POSITION TITLE: Cashier III  
 DEPARTMENT NAME: County Treasurer CURRENT SLOT NO.: 0007  
 DEPARTMENT NO.: 150 -001 REQUESTED POSITION TITLE: \_\_\_\_\_

**ALLOWANCE REQUEST: Type of Allowance**

- Longevity                       Interpreter                       Clothing  
 Supplemental                       Auto

	<u>\$ 0.00</u> Current Budgeted Amount	<u>2,344.00</u> <del>\$ 2,343.83</del> <span style="color: green; font-size: 1.2em;">PR</span> Proposed Budgeted Amount	<u>2,344.00</u> <del>\$ 2,343.83</del> Net Change
--	---	---	---

TOTAL BUDGETARY IMPACT: \$ 2,343.83

**POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:**

- Current Department Budget                       Annual Budget Cycle                       Will Require Additional Funds  
 Salary Adjustment                       Other Processing of payroll & vendor checks for Drainage

POSITION TYPE:  Full Time Regular Object Code 113                       Part Time Regular Object Code 114  
 Full Time Temporary Object Code 121                       Part Time Temporary Object Code 122

CIVIL SERVICE:  Exempt                      FLSA:  Exempt  
 Non-Exempt                       Non- Exempt

**JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)**

Will perform duties required in order to process the payroll and vendor checks for the Drainage District.

**COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)**

\_\_\_\_\_  
 \_\_\_\_\_

Norma G. Garcia \*  
 Department Head

02/06/2017  
 Date

Renee Dreyer  
 Department of Human Resources

2/17/17  
 Date

[Signature]  
 Department of Budget & Management

2/17/17  
 Date



# COUNTY OF HIDALGO

## Human Resources Department



### PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

**NOTE:** COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.

DATE: 02/06/2017 CURRENT POSITION TITLE: Payroll Clerk II  
 DEPARTMENT NAME: County Treasurer CURRENT SLOT NO.: 0009  
 DEPARTMENT NO.: 150 -∞1 REQUESTED POSITION TITLE: \_\_\_\_\_

**ALLOWANCE REQUEST: Type of Allowance**

- Longevity                       Interpreter                       Clothing  
 Supplemental                       Auto

Allowance Amount:	<u>\$ 0.00</u>	<u>\$ 2,345.00</u>	<u>\$ 2,345.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 2,345.00

**POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:**

- Current Department Budget                       Annual Budget Cycle                       Will Require Additional Funds  
 Salary Adjustment                       Other Processing of payroll & vendor checks for Drainage

POSITION TYPE:  Full Time Regular Object Code 113                       Part Time Regular Object Code 114  
 Full Time Temporary Object Code 121                       Part Time Temporary Object Code 122

CIVIL SERVICE:  Exempt                      FLSA:  Exempt  
 Non-Exempt                       Non- Exempt

**JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)**

Will perform duties required in order to process the payroll and vendor checks for the Drainage District.

**COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)**

\_\_\_\_\_

Norma P. Garcia  
 Department Head

02/06/2017  
 Date

Rene Dreyer  
 Department of Human Resources

2/17/2017  
 Date

[Signature]  
 Department of Budget & Management

2/17/17  
 Date



# COUNTY OF HIDALGO

## Human Resources Department



### PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

**NOTE:** COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.

DATE: 02/06/2017 CURRENT POSITION TITLE: Payroll Clerk II  
 DEPARTMENT NAME: County Treasurer CURRENT SLOT NO.: 0010  
 DEPARTMENT NO.: 150 - 001 REQUESTED POSITION TITLE: \_\_\_\_\_

**ALLOWANCE REQUEST: Type of Allowance**

- |  |                                      |                                   |
|--|--------------------------------------|-----------------------------------|
| <input type="checkbox"/> Longevity               | <input type="checkbox"/> Interpreter | <input type="checkbox"/> Clothing |
| <input checked="" type="checkbox"/> Supplemental | <input type="checkbox"/> Auto        |                                   |

Allowance Amount: <u>\$ 0.00</u>	<u>\$ 2,345.00</u>	<u>\$ 2,345.00</u>
Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 2,345.00

**POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Current Department Budget | <input type="checkbox"/> Annual Budget Cycle  | <input type="checkbox"/> Will Require Additional Funds |
| <input type="checkbox"/> Salary Adjustment         | <input checked="" type="checkbox"/> Other <u>Processing of payroll &amp; vendor checks for Drainage</u> |  |

POSITION TYPE:  Full Time Regular Object Code 113       Part Time Regular Object Code 114  
 Full Time Temporary Object Code 121       Part Time Temporary Object Code 122

CIVIL SERVICE:  Exempt      FLSA:  Exempt  
 Non-Exempt       Non- Exempt

**JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)**  
 Will perform duties required in order to process the payroll and vendor checks for the Drainage District.  
 \_\_\_\_\_  
 \_\_\_\_\_

**COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)**  
 \_\_\_\_\_  
 \_\_\_\_\_

<u>Norma G. Garcia*</u> Department Head	<u>02/06/2017</u> Date
<u>[Signature]</u> Department of Human Resources	<u>2/17/2017</u> Date
<u>[Signature]</u> Department of Budget & Management	<u>2/17/17</u> Date



# COUNTY OF HIDALGO

## Human Resources Department



### PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

**NOTE:** COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.

DATE: 02/06/2017 CURRENT POSITION TITLE: Payroll Clerk II  
 DEPARTMENT NAME: County Treasurer CURRENT SLOT NO.: 0011  
 DEPARTMENT NO.: 150 -001 REQUESTED POSITION TITLE: \_\_\_\_\_

**ALLOWANCE REQUEST: Type of Allowance**

- Longevity  Interpreter  Clothing  
 Supplemental  Auto

Allowance Amount: \$ 0.00 \$ 2,345.00 \$ 2,345.00  
 Current Budgeted Amount Proposed Budgeted Amount Net Change

TOTAL BUDGETARY IMPACT: \$ 2,345.00

**POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:**

- Current Department Budget  Annual Budget Cycle  Will Require Additional Funds  
 Salary Adjustment  Other Processing of payroll & vendor checks for Drainage

POSITION TYPE:  Full Time Regular Object Code 113  Part Time Regular Object Code 114  
 Full Time Temporary Object Code 121  Part Time Temporary Object Code 122

CIVIL SERVICE:  Exempt FLSA:  Exempt  
 Non-Exempt  Non- Exempt

**JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)**

Will perform duties required in order to process the payroll and vendor checks for the Drainage District.

**COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)**

\_\_\_\_\_  
\_\_\_\_\_

Norma G. Garcia  
Department Head

02/06/2017  
Date

Rene Oley  
Department of Human Resources

2/17/2017  
Date

[Signature]  
Department of Budget & Management

2/12/17  
Date



# COUNTY OF HIDALGO

## Human Resources Department



### PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

**NOTE:** COMPLETE MULTIPLE PERSONNEL ACTION FORM IF DEPARTMENT IS REQUESTING MORE THAN (3) PERSONNEL ACTIONS.

DATE: 02/06/2017 CURRENT POSITION TITLE: Cashier III  
 DEPARTMENT NAME: County Treasurer CURRENT SLOT NO.: 0012  
 DEPARTMENT NO.: 150-001 REQUESTED POSITION TITLE: \_\_\_\_\_

**ALLOWANCE REQUEST: Type of Allowance**

- Longevity                       Interpreter                       Clothing  
 Supplemental                       Auto

	<u>\$ 0.00</u> Current Budgeted Amount	<del>\$ 2,343.83</del> <sup>2,344.00</sup> Proposed Budgeted Amount	<del>\$ 2,343.83</del> <sup>2,344.00</sup> Net Change
--	---	--	--

TOTAL BUDGETARY IMPACT: \$ 2,343.83

**POSITION/ALLOWANCE TO BE FUNDED FROM ONE OF THE FOLLOWING:**

- Current Department Budget                       Annual Budget Cycle                       Will Require Additional Funds  
 Salary Adjustment                       Other Processing of payroll & vendor checks for Drainage

POSITION TYPE:  Full Time Regular Object Code 113                       Part Time Regular Object Code 114  
 Full Time Temporary Object Code 121                       Part Time Temporary Object Code 122

CIVIL SERVICE:  Exempt                      FLSA:  Exempt  
 Non-Exempt                       Non- Exempt

**JUSTIFICATION/PRIORITY: (Explain why this allowance request is essential)**

Will perform duties required in order to process the payroll and vendor checks for the Drainage District.

**COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)**

\_\_\_\_\_

Norma G. Garcia  
 Department Head  
Raul Perez  
 Department of Human Resources  
[Signature]  
 Department of Budget & Management

02/06/2017  
 Date  
2/17/2017  
 Date  
2/17/17  
 Date