DATE: April 10, 2017

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 7-1293-441-00-340-069-8-XXX

Contact Person: Mike Escaname **Ph#:** 7210

2017
Transfer

AI - 59333

SUBJECT: **Intradepartmental transfer(s)** (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Intradepartmental transfer(s) (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

FROM OBJECT CODE	OBJECT DESCRIPTION	TO OBJECT CODE	OBJECT DESCRIPTION	AMOUNT
584	Registration	585	Non-Employee Travel	2,000.00
			TOTAL	2,000.00

REASON: ***To cover anticipated expenditure;***

DEPARTMENT HEAD SIGNATURE

____/____/____
DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK