

# WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
<b>County Owned Wireless Device:</b> <input checked="" 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	<b>Wireless Data Device:</b> <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	<b>Stipend:</b> <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

**COUNTY OWNED WIRELESS DEVICE**

Office Use / Employee: Pct 4 Office Employee ID# \_\_\_\_\_ Signature: \_\_\_\_\_

Department: Pct 4 Dept#: 124

Quantity: 2

Service: \$ 69.99 /mo (x) 9 months = 1,259.82 Account: 7-1200-431-00-124-007-0-532

Service: \$ 10.00 /mo (x) 9 months = 90.00 Account: 7-1200-431-00-124-007-0-532

Requisition Total: 1,349.82 Requisition Number: 316177

**STIPEND**

(1) Employee: \_\_\_\_\_ Employee ID# \_\_\_\_\_ Signature: \_\_\_\_\_

Department: \_\_\_\_\_ Dept#: \_\_\_\_\_

Quantity: \_\_\_\_\_

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

Total: \_\_\_\_\_

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

Joseph Palacios Joseph Palacios 4/24/17

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. Unls. Email & Data Unl. + MHS  
New/MSU/MSG Unl. @ .69.99 + 5.00 each per month

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/slg/article/0,,id=167154,00.html>, EXAMPLE 2.



# Requisition

Req # 00316177

PO #

Date: 03/02/17

Bill To:   x  
              x

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

Ship To: HIDALGO CO. PCT 4  
1051 N. DOOLITTLE  
EDINBURG TX 78542

Contact: VLopez  
956-383-3112

Contract No: DIR-TSO-3415

Special Instructions:  
Req # 332

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		DIR-TSO-3415, EXP 04/20/2020 CC APPROVAL ON MM/DD/YYYY, AI- Originally approved CC 06/02/15 AI- 49779, Regular See PO# 754516 (956)483-0602 (956)483-0835 DO NOT DUPLICATE ORDER		
9.00	MONTH	CO Nationwide Unlimited Mins Email & Data Unl + MHS	139.98	1,259.82
		N&W/M2M/MSG Unl @ \$69.99 /month x 2 lines = \$139.98		
9.00	MONTH	EX Taxes and Fees @ \$5.00 x 2 lines= \$10.00 x 9 months= \$90.00	10.00	90.00
		Account No _____	<u>Encumbrance</u>	
		7-1200-431-00-124-007-0-532	1,349.82	
			Freight	.00
			Total	1,349.82
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: \_\_\_\_\_