

DATE: September 27, 2017

DEPARTMENT HEAD: Eduardo Olivarez, Chief Administrative Officer

DEPARTMENT NAME: Hidalgo County Health & Human Services Department

ACCOUNT NUMBER: 7-1293-441-11-340-052-6-XXX Prenatal

**SUBJECT: Budget Amendments (Increases) in Accordance with Local Government Code,
Chapter 111, Subchapter C**

Honorable Commissioner's Court of Hidalgo County:

I would like to request the following amendments (increase) to my department budget in accordance with Local Government Code, Chapter 111, Subchapter C.

INCREASE OBJECT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT -
Personnel		
7-1293-441-11-340-052-6-113	Prenatal - Reg F/T Employees	\$ 40,651.00
Fringes		
7-1293-441-11-340-052-6-211	Prenatal - Health Insurance	\$ 9,922.00
7-1293-441-11-340-052-6-212	Prenatal - Life Insurance	\$ 69.00
7-1293-441-11-340-052-6-220	Prenatal - FICA	\$ 3,110.00
7-1293-441-11-340-052-6-230	Prenatal - Retirement	\$ 4,663.00
7-1293-441-11-340-052-6-250	Prenatal - Unemployment Comp	\$ 243.00
7-1293-441-11-340-052-6-260	Prenatal - Workers Comp	\$ 383.00
Travel		
7-1293-441-11-340-052-6-581	Prenatal - In-County Travel	\$ 2,000.00
Supplies		
7-1293-441-11-340-052-6-610	Prenatal - General Supplies	\$ 7,988.00
Other		
7-1293-441-11-340-052-6-339	Prenatal - Other Professional Services	\$ 75,000.00
		\$ -
	TOTAL APPROPRIATION	\$ 144,029.00
7-1293-334-10-340-052-6-000	Prenatal - Grant Revenue	\$ 144,029.00
	TOTAL APPROPRIATION	\$ 144,029.00

REASON: To appropriate the grant allocation for the Prenatal FY 18 program

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONER'S C

DATE

ATTEST CO. CLERK