

DATE: 6/18/2018
DEPARTMENT HEAD: Clarissa Ramirez
DEPARTMENT NAME: WIC Lactation Support Center Services-Strategic Expansion Program
ACCOUNT NUMBER: 8-1292-441-00-350-018-9.XXX

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 (increases) to my department budget in accordance with Local Government Code, Chapter 111, Subchapter C.

INCREASE OBJECT NUMBERS	ACCOUNT (OBJECT) NAME	AMOUNT
8.1292.441.00.350.018.9.113	Salaries	107,856.00
8.1262.441.00.350.018.9.115	Longevity	600.00
8.1292.441.00.350.018.9.211	Health Insurance	13,800.00
8.1292.441.00.350.018.9.212	Life Insurance	88.00
8.1292.441.00.350.018.9.220	FICA	8,327.00
8.1292.441.00.350.018.9.230	Retirement	12,978.00
8.1292.441.00.350.018.9.250	Unemployment	651.00
8.1292.441.00.350.018.9.260	Workers Comp.	1,020.00
8.1292.441.00.350.018.9.310	Indirect Cost	10,696.00
8.1292.441.00.350.018.9.550	Printing	5,000.00
8.1292.441.00.350.018.9.583	Out of County Travel	9,178.00
8.1292.441.00.350.018.9.584	Registration	1,650.00
8.1292.441.00.350.018.9.610	General Supplies	26,940.00
8.1292.441.00.350.018.9.660	Furnishing and Equipment	820.00
8.1292.441.00.350.018.9.810	Membership	396.00
8.1292.334.10.350.018.9.XXX	WIC Lactation Program Revenue	200,000.00
TOTAL FUND BALANCE IMPACT		200,000.00

REASON: Appropriate grant award for the full grant cycle 09/01/18 thru 08/31/19.

