

HIDALGO COUNTY AUDITOR'S OFFICE
HIDALGO COUNTY, TEXAS

PURCHASE AFFIDAVIT

THE STATE OF TEXAS

COUNTY OF HIDALGO

I, Daniel S. Lopez, do hereby state that the item(s) listed on the invoice(s) named below were purchased for the exclusive use of Hidalgo County.

INVOICE NO.	DATE	AMOUNT	NAME OF COMPANY
	8/24/18	198.00	Social Security Administration 2005 W. Jefferson Ave. Harlingen, Texas 78550-5280
			Re: <u>S. Zavala v. County</u> ^{Cause #} <u>(C-0152-16-C)</u>
TOTAL		<u>198.00</u>	

I further state that I was authorized to make such a purchase(s).

I therefore request payment of this invoice from Hidalgo County and that payment be made payable to me.

SIGNATURE: [Signature]

TITLE: Asst. D.A. - Civil Litigation Division
PERSON MAKING PURCHASE

Before me Monica Salinas, a Notary Public, appeared Daniel S. Lopez and on his oath deposed and stated that the foregoing facts as set forth in the above request for expense reimbursement are true and correct in every respect. He / S_ further stated he / s_ requested payment of the same.



[Signature]
NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

[Signature]
APPROVAL: DEPARTMENT HEAD

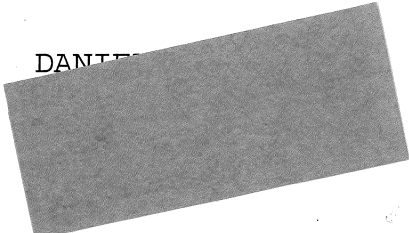
APPROVAL: COUNTY AUDITOR

8-1100-415-30-125-006-0333

Social Security Administration
SOCIAL SECURITY
2005 W JEFFERSON AVE
HARLINGEN TX 78550-5280

Date: August 24, 2018

DANIEL S. LOPEZ



This is a receipt for the payment you made today. You should keep this receipt as proof that you made this payment. Your receipt number is 18236875005.

Person Making the Payment: DANIEL S. LOPEZ
You Made This
Payment For : SANTIAGO ZAVALA
Claim Number : XXX-XX-5555 A
Amount of Payment : \$198.00
Reason for Payment : To Pay A Fee
Type of Payment : Check Or Money Order
Date of Check/Money Order: AUGUST 24, 2018
Check/Money Order Number : 1337

Thank you for your payment.

SOCIAL SECURITY INVOICE

8/23/2018

Social Security Administration
2005 W JEFFERSON AVE
HARLINGEN, TX 78550

Daniel Lopez
DA
100 E Cano
Courthouse Annex III 1st Floor
Edinburg, TX 78539

Subject: Invoice for Services
Zavala, Santiago - 5555

Please Pay This Amount: \$198.00

The Social Security Administration (SSA) charges a fee for providing information from our records to a third party when the request for information is not directly related to the administration of any program under the Social Security Act. SSA must be compensated for the work it does for others so that the Social Security Trust Funds do not bear the costs of such activities. SSA requires payment before providing the requested record.

The fee for processing your request is shown above. Please make your check or money order payable to "Social Security Administration." Mail it, along with the tear-off form below, to the SSA office shown above. For your records, SSA's Employer Identification Number (EIN) is 526004813. Thank you.

TEAR HERE AND MAIL THIS FORM WITH YOUR PAYMENT

Unit Code: SR5

To help us credit your record, please fill out this form and return it with your payment to the address shown above. Make your check or money order payable to "Social Security Administration."

REQUESTER NAME: DA
NAME: Zavala, Santiago
ACCOUNT NUMBER: 5555
AMOUNT DUE: \$ 198.00

ENTER AMOUNT ENCLOSED: \$

Zimbra

monica.salinas@co.hidalgo.tx.us

Re: Zavala vs County of Hidalgo, Texas

From : valde guerra <valde.guerra@co.hidalgo.tx.us>

Thu, Aug 23, 2018 06:11 PM

Subject : Re: Zavala vs County of Hidalgo, Texas**To :** Daniel Lopez <daniel.lopez@da.co.hidalgo.tx.us>**Cc :** monica salinas <monica.salinas@co.hidalgo.tx.us>, josephine ramirez <josephine.ramirez@da.co.hidalgo.tx.us>, Carmen Fuentes <carmen.fuentes@da.co.hidalgo.tx.us>

Mr. Lopez,

First and foremost thank you. Yes and I will have a commissioners court agenda item to reimburse you in the amount of \$198.00.

Respectfully,

Valde Guerra
CEO

From: "Daniel Lopez" <daniel.lopez@da.co.hidalgo.tx.us>**To:** "valde guerra" <valde.guerra@co.hidalgo.tx.us>, "monica salinas" <monica.salinas@co.hidalgo.tx.us>**Cc:** "josephine ramirez" <josephine.ramirez@da.co.hidalgo.tx.us>, "Carmen Fuentes" <carmen.fuentes@da.co.hidalgo.tx.us>**Sent:** Thursday, August 23, 2018 5:12:42 PM**Subject:** Zavala vs County of Hidalgo, Texas

Mr. Guerra

Due to circumstances beyond our control we have had to get the Social Security Administration to provide us with records, at the last minute, that we desperately need for the upcoming mediation on August 30, 2018 with Scott McLain. Please allow this email to serve as a formal request to allow me, personally, to pay for the records and request reimbursement in the amount of \$198.00. Please let me know at your earliest convenience as I plan to travel to Harlingen, Texas at around noon tomorrow to pick them up.

Thank you

Daniel S. Lopez

--

DANIEL S. LOPEZ

Assistant District Attorney
Civil Litigation Division

need receipt.
for cc 9/4/18

Zimbra**monica.salinas@co.hidalgo.tx.us**

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Daniel S. Lopez

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DANIEL S. LOPEZ

Assistant District Attorney
Civil Litigation Division

Office of the Criminal District Attorney
Hidalgo County, Texas
100 E. Cano
Edinburg, TX 78539
(956) 292-7609 EXT 8011
(956) 292-7619 FAX

daniel.lopez@da.co.hidalgo.tx.us

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