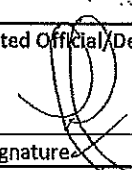
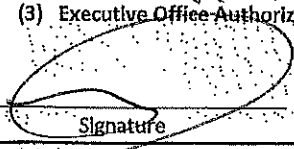


WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input checked="" type="checkbox"/> Office Use or <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input checked="" type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo
COUNTY OWNED WIRELESS DEVICE		
Office Use / Employee: <u>Office Use</u> Employee ID# <u>NA</u> Signature: <u>NA</u> Department: <u>I.T.</u> Dept#: <u>200</u> Quantity: <u>5</u> Service: \$ <u>189.5</u> /mo (x) <u>4</u> months = <u>759.80</u> Account: <u>8-1100-415-00200-001-0-532</u> Service: \$ _____/mo (x) _____ months = _____ Account: _____ -619/664 Requisition Total: <u>\$759.80</u> Requisition Number: <u>379069</u>		
STIPEND		
(1) Employee: _____ Employee ID# _____ Signature: _____ Department: _____ Dept#: _____ Quantity: _____ Service: \$ _____/mo (x) _____ months = _____ Account: _____ -532 Total: _____		
(2) Elected Official/Department Head Authorization for Request:		
 Signature	<u>Renan Ramirez</u> Print Name	<u>9/12/18</u> Date
(3) Executive Office Authorization (Commissioner's Court Departments Only):		
 Signature	<u>Valde Guerra</u> Print Name	<u>9/13/18</u> Date
(4) IT DEPARTMENT ONLY:		
Service Type Codes: <u>Mobile Broadband Uni. @ \$37.99/ea.</u>		

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

