DATE: **October 17, 2018**

DEPARTMENT HEAD: **VALDE GUERRA**

DEPARTMENT NAME: **COUNTY COMMISSIONERS**

ACCOUNT NUMBER: **8-1100-413-30-125-004-0-XXX**

SUBJECT: **Intra-departmental Transfer/s (increase/decrease) in Accordance with Local Government Code, Chapter 111, Subchapter C, Section 111.070, Subsection C.**

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Intra-departmental transfer/s (increase/decrease) in accordance with Local Government Code, Chapter 111, Subchapter C Section 111.070, Subsection C.

FROM OBJECT CODE	OBJECT DESCRIPTION	TO OBJECT CODE	OBJECT DESCRIPTION	AMOUNT
583	Travel out of county	**584**	Registration Fees	**488.00**
			TOTAL	**488.00**

REASON: **To cover negative due to emergency transfer made on 10/10/18.**

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT / / **DATE** **ATTEST COUNTY CLERK**