

# WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
<b>County Owned Wireless Device:</b> <input 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 checked="" type="checkbox"/> Delete Service	<b>Wireless Data Device:</b> <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input checked="" type="checkbox"/> Other: <span style="font-size: 1.2em;">WiFi</span>	<b>Stipend:</b> <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

**COUNTY OWNED WIRELESS DEVICE**

Office Use / Employee: Probate Court Employee ID#: N/A Signature: N/A  
 Department: Probate Court Dept#: 023  
 Quantity: 1  
 Service: \$ \_\_\_\_\_ /mo (x) \_\_\_\_\_ months = \_\_\_\_\_ Account: \_\_\_\_\_ -532  
 Service: \$ \_\_\_\_\_ /mo (x) \_\_\_\_\_ months = \_\_\_\_\_ Account: \_\_\_\_\_ -619/664  
 Requisition Total: \_\_\_\_\_ Requisition Number: \_\_\_\_\_

**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] Judge Jo Anne Garcia 2/5/2019  
 Signature Print Name Date

(3) Executive Office Authorization (Commissioner's Court Departments Only):

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

(4) IT DEPARTMENT ONLY:

Service Type Codes: Deactivate data service for 956-249-8418  
Mobile Broadband Intl. @ \$37.99/mo.

Commissioner's Court Action: \_\_\_\_\_ Commissioner's Court Date: \_\_\_\_\_  
 Approved Date: \_\_\_\_\_  Disapproved 2/6/19