DATE: **January 24, 2019**

DEPARTMENT HEAD: **VALDE GUERRA**

DEPARTMENT NAME: **INSURANCE**

ACCOUNT NUMBER: **9-1100-419-00-125-009-0-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**
820	CLAIMS & JUDGMENTS	**520**	INSURANCE	**1,000.00**
			TOTAL	**1,000.00**

REASON: **To pay for additional drone coverage; add additional insurance coverage.**

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

/ /
DATE

ATTEST COUNTY CLERK