

DATE: March 12, 2019

DEPARTMENT HEAD: Sergio Cruz

DEPARTMENT NAME: Dept. of Budget & Mgmt for Comm. Pct4

ACCOUNT NUMBER: 9-1200-431-00-124-0XX-0-XXX

CONTACT PERSON: Patricia Ramos

PHONE: (956) 292-7025 Ext. 5416

**2019**

Transfer

AI-69216



**SUBJECT: Interdepartmental Transfer/s in Accordance with Local Government Code Chapter 111, Subchapter C.**

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Interdepartmental transfer/s (transfer in/out) (increase/decrease) in accordance with Local Government Code, Chapter 111, Subchapter C.

<b>INCREASE/DECREASE ACCOUNT NUMBER</b>	<b>ACCOUNT (OBJECT) NAME</b>	<b>AMOUNT</b>
<b>FROM</b>		
9-1200-431-00-124-007-0- 113	Pct4 Rd Maint- Reg F/T Employee	(150,565.57)
9-1200-431-00-124-007-0- 211	Pct4 Rd Maint- Health Insurance	(24,583.36)
9-1200-431-00-124-007-0- 212	Pct4 Rd Maint- Life Insurance	(144.87)
9-1200-431-00-124-007-0- 220	Pct4 Rd Maint- FICA	(11,518.27)
9-1200-431-00-124-007-0- 230	Pct4 Rd Maint- Retirement	(18,293.72)
9-1200-431-00-124-007-0- 250	Pct4 Rd Maint- Unemployment Comp	(903.39)
9-1200-431-00-124-007-0- 260	Pct4 Rd Maint- Worker's Comp	(3,839.42)
<b>TO</b>		
9-1200-431-00-124-036-0- 113	Pct4 Drain Imprv Prj- Reg F/T Employee	150,565.57
9-1200-431-00-124-036-0- 211	Pct4 Drain Imprv Prj- Health Insurance	24,583.36
9-1200-431-00-124-036-0- 212	Pct4 Drain Imprv Prj- Life Insurance	144.87
9-1200-431-00-124-036-0- 220	Pct4 Drain Imprv Prj- FICA	11,518.27
9-1200-431-00-124-036-0- 230	Pct4 Drain Imprv Prj- Retirement	18,293.72
9-1200-431-00-124-036-0- 250	Pct4 Drain Imprv Prj- Unemployment Comp	903.39
9-1200-431-00-124-036-0- 260	Pct4 Drain Imprv Prj- Worker's Comp	3,839.42
<b>TOTAL BUDGET INCREASE (DECREASE)</b>		<b>\$ 0.00</b>

**REASON: Transfer needed to fund personnel actions, AI-69152 CC 2/26/19.**

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SIGNATURE

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COMMISSIONERS COURT

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DATE

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ATTEST, COUNTY CLERK

DATE: March 12, 2019

DEPARTMENT HEAD: Sergio Cruz

DEPARTMENT NAME: Dept. of Budget & Mgmt for Comm. Pct4

ACCOUNT NUMBER: 9-1100-4XX-00-124-0XX-0-XXX

CONTACT PERSON: Patricia Ramos

PHONE: (956) 292-7025 Ext. 5416

**2019**

Transfer

AI-69216



**SUBJECT: Interdepartmental Transfer/s in Accordance with Local Government Code Chapter 111, Subchapter C.**

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Interdepartmental transfer/s (transfer in/out) (increase/decrease) in accordance with Local Government Code, Chapter 111, Subchapter C.

<b>INCREASE/DECREASE ACCOUNT NUMBER</b>	<b>ACCOUNT (OBJECT) NAME</b>	<b>AMOUNT</b>
<b>FROM</b>		
9-1100-452-00-124-009-0- 113	Pct4 Parks- Reg F/T Employee	(165,260.96)
9-1100-452-00-124-009-0- 211	Pct4 Parks- Health Insurance	(43,020.87)
9-1100-452-00-124-009-0- 212	Pct4 Parks- Life Insurance	(253.52)
9-1100-452-00-124-009-0- 220	Pct4 Parks- FICA	(12,651.49)
9-1100-452-00-124-009-0- 230	Pct4 Parks- Retirement	(20,289.21)
9-1100-452-00-124-009-0- 250	Pct4 Parks- Unemployment Comp	(992.28)
9-1100-452-00-124-009-0- 260	Pct4 Parks- Worker's Comp	(6,095.11)
<b>TO</b>		
9-1100-432-00-124-001-0- 113	Pct4 Sanitation- Reg F/T Employee	142,432.65
9-1100-432-00-124-001-0- 211	Pct4 Sanitation- Health Insurance	36,875.03
9-1100-432-00-124-001-0- 212	Pct4 Sanitation- Life Insurance	217.30
9-1100-432-00-124-001-0- 220	Pct4 Sanitation- FICA	10,896.10
9-1100-432-00-124-001-0- 230	Pct4 Sanitation- Retirement	17,305.57
9-1100-432-00-124-001-0- 250	Pct4 Sanitation- Unemployment Comp	854.60
9-1100-432-00-124-001-0- 260	Pct4 Sanitation- Worker's Comp	6,124.60
9-1100-466-00-124-077-0- 113	Pct4 CRC- Reg F/T Employee	22,946.30
9-1100-466-00-124-077-0- 211	Pct4 CRC- Health Insurance	6,145.84
9-1100-466-00-124-077-0- 212	Pct4 CRC- Life Insurance	36.22
9-1100-466-00-124-077-0- 220	Pct4 CRC- FICA	1,755.39
9-1100-466-00-124-077-0- 230	Pct4 CRC- Retirement	2,787.97
9-1100-466-00-124-077-0- 250	Pct4 CRC- Unemployment Comp	137.68
9-1100-466-00-124-077-0- 260	Pct4 CRC- Worker's Comp	48.19
<b>TOTAL BUDGET INCREASE (DECREASE)</b>		<b>\$ 0.00</b>

REASON: **Transfer needed to fund personnel actions, AI-69152 CC 2/26/19.**

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SIGNATURE

\_\_\_\_\_  
COMMISSIONERS COURT

\_\_\_\_\_  
DATE

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ATTEST, COUNTY CLERK