DATE: **June 18, 2019**

DEPARTMENT HEAD: **Eduardo Olivarez**

DEPARTMENT NAME: **Health & Human Services**

ACCOUNT NUMBER: **9-1293-441-00-340-054-9-XXX**

Contact Person: Mike Escaname **Ph#:** 7210

2019

Transfer

AI - 70867

SUBJECT: **Intradepartmental transfer(s)** (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

Honorable Commissioners' Court of Hidalgo County:

I would like to request the following Intradepartmental transfer(s) (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

FROM OBJECT CODE	OBJECT DESCRIPTION	**TO** OBJECT CODE	OBJECT DESCRIPTION	**AMOUNT**
585	BBHW-EMPLOYEE TRAVEL	583	BBHW-TRAVEL OUT-OF-COUNTY	250.00
610	BBHW-GENERAL SUPPLIES	583	BBHW-TRAVEL OUT-OF-COUNTY	750.00
			TOTAL	**1,000.00**

REASON: ***To cover anticipated expenditures.***

DEPARTMENT HEAD SIGNATURE

/ /

DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK