DATE: September 27, 2019

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 9-1293-441-00-340-074-0-XXX

Contact Person: David M. Valdez **Ph#:** 7241

2019
Transfer

AI - 72542

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
113	ZIKA CMM-REG F/T EMPLOYEES	211	ZIKA CMM-HEALTH INSURANCE	4,700.00
			TOTAL	4,700.00

REASON: ***To cover anticipated expenditure; Available Funds due to lapse salaries and fringes***

DEPARTMENT HEAD SIGNATURE

DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK