DATE: October 8, 2019

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 9-1293-441-00-340-071-0

2019
Transfer

AI - 72585

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

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
250	TECE-UNEMPLOYMENT COMP	211	TECE-HEALTH INSURANCE	105.00
250	TECE-UNEMPLOYMENT COMP	230	TECE-RETIREMENT	390.00
			TOTAL	495.00

REASON: ***To cover anticipated expenditure through remaining grant period.***

DEPARTMENT HEAD SIGNATURE

___/___/___
DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK