DATE: January 1, 2020

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health and Human Services Department

ACCOUNT NUMBER: 0-1293-441-00-340-005-0-XXX

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

2020
Appropriation
AI-73148

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

INCREASE ACCOUNT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT
Travel		
0-1293-441-00-340-005-0-581	H.D. ADM TRAVEL - IN COUNTY	500.00
0-1293-441-00-340-005-0-583	H.D. ADM TRAVEL - OUT OF COUNTY	15,000.00
Supplies		
0-1293-441-00-340-005-0-610	H.D. ADM GENERAL SUPPLIES	25,000.00
0-1293-441-00-340-005-0-631	H.D. ADM BOTTLED WATER	500.00
0-1293-441-00-340-005-0-660	H.D. ADM FURN & EQUIP CONTROLLED	10,000.00
Other		
0-1293-441-00-340-005-0-336	H.D. ADM COMPUTER SERVICES	12,000.00
0-1293-441-00-340-005-0-430	H.D. ADM REPAIR & MAINTENANCE SERVICES	85,000.00
0-1293-441-00-340-005-0-584	H.D. ADM REGISTRATION FEES	18,000.00
0-1293-441-00-340-005-0-810	H.D. ADM DUES & MEMBERSHIPS	5,000.00
0-1293-441-00-340-005-0-890	H.D. ADM OTHER	4,000.00
		-
		-
	TOTAL BUDGET INCREASE (DECREASE)	**175,000.00**

REASON: To appropriate funds into the H.D. ADM program for the period of 01/01/2020 to 12/31/2020

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

/ /
DATE

ATTEST COUNTY CLERK