



COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0002 #8
 Department Name: County Treasurer Current Position Title: Chief Deputy II
 Department No.: 150 -001 Requested Position Title: chief Deputy

ALLOWANCE REQUEST: Type of Allowance

Position
 Interpreter
 Clothing
 Supplemental
 Auto

ALLOWANCE AMOUNT:	\$ 561.00	\$ 534.00	-\$ 27.00
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	\$ 0.00		\$ 0.00
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 27.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget
 Annual Budget Cycle
 Will Require Additional Funds
 Salary Adjustment
 Other _____

POSITION TYPE:
 Full Time Regular Object Code 113
 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121
 Part Time Temporary Object Code 122

CIVIL SERVICE:
 Exempt
FLSA: Exempt
 Non-Exempt
 Non-Exempt

JUSTIFICATION / PRIORITY: (Explain why this allowance request is essential)

Employee's responsibility for Drainage District #1 workload reduced.

COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)

Effective as of January 1, 2020

Department Head: [Signature]
 Department of Human Resources: [Signature]
 Department of Budget & Management: [Signature]

Date: 12/09/2019
 Date: 12/19/19
 Date: 12/19/19





COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0004
 Department Name: County Treasurer Current Position Title: Supervisor III
 Department No.: 150 -001 Requested Position Title: Supervisor III ky

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 2,800.00</u>	<u>\$ 3,500.00</u>	<u>\$ 700.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 700.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*
Employee's responsibility for Drainage District #1 workload increased.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*
Effective as of January 1, 2020

Department Head: *W. L. Lee*
 Department of Human Resources: *Karl P. Reyes*
 Department of Budget & Management: *[Signature]*

Date: 12/09/2019
 Date: 12/19/19
 Date: 12/19/19





COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0005
 Department Name: County Treasurer Current Position Title: Payroll Specialist I
 Department No.: 150 -001 Requested Position Title: Payroll Specialist I *fy*

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 2,500.00</u>	<u>\$ 2,750.00</u>	<u>\$ 250.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 250.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*
Employee's responsibility for Drainage District #1 workload increased.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*
Effective as of January 1, 2020

Department Head: *[Signature]*
 Department of Human Resources: *[Signature]*
 Department of Budget & Management: *[Signature]*

Date: 12/09/2019
 Date: 12/19/19
 Date: 12/19/19





COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0006
 Department Name: County Treasurer Current Position Title: Financial Analyst
 Department No.: 150 -001 Requested Position Title: Financial Analyst ty

ALLOWANCE REQUEST: Type of Allowance

Position
 Interpreter
 Clothing
 Supplemental
 Auto

ALLOWANCE AMOUNT:	\$ 0.00	\$ 1,500.00	\$ 1,500.00
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	\$ 0.00	\$ 0.00	\$ 0.00
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 1,500.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget
 Annual Budget Cycle
 Will Require Additional Funds
 Salary Adjustment
 Other _____

POSITION TYPE:
 Full Time Regular Object Code 113
 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121
 Part Time Temporary Object Code 122

CIVIL SERVICE:
 Exempt
 Non-Exempt
FLSA:
 Exempt
 Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Employee has performed Drainage District #1 responsibilities without compensation.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

Effective as of January 1, 2020

Department Head *Lot L. Leo*
 Department of Human Resources *[Signature]*
 Department of Budget & Management *[Signature]*

Date 12/09/2019
 Date 12/19/19
 Date 12/19/19





COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0007
 Department Name: County Treasurer Current Position Title: Cashier III
 Department No.: 150 -001 Requested Position Title: cashier III ty

ALLOWANCE REQUEST: Type of Allowance

Position
 Interpreter
 Clothing
 Supplemental
 Auto

ALLOWANCE AMOUNT:	\$ 2,344.00	\$ 1,100.00	-\$ 1,244.00
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	\$ 0.00	\$ 0.00	\$ 0.00
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 1,244.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget
 Annual Budget Cycle
 Will Require Additional Funds
 Salary Adjustment
 Other _____

POSITION TYPE:
 Full Time Regular Object Code 113
 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121
 Part Time Temporary Object Code 122

CIVIL SERVICE:
 Exempt
 Non-Exempt
FLSA:
 Exempt
 Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Employee's responsibilities for Drainage District #1 workload reduced.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

Effective as of January 1, 2020

Department Head *Lita P. Lee*
 Department of Human Resources *[Signature]*
 Department of Budget & Management *[Signature]*

12/09/2019
Date
 12/19/19.
Date
 12/19/19
Date





COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0009
 Department Name: County Treasurer Current Position Title: Payroll Clerk II
 Department No.: 150 -001 Requested Position Title: Payroll Clerk II fj

ALLOWANCE REQUEST: Type of Allowance

Position
 Interpreter
 Clothing
 Supplemental
 Auto

ALLOWANCE AMOUNT:	<u>\$ 2,345.00</u>	<u>\$ 2,750.00</u>	<u>\$ 405.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 405.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget
 Annual Budget Cycle
 Will Require Additional Funds
 Salary Adjustment
 Other _____

POSITION TYPE:
 Full Time Regular Object Code 113
 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121
 Part Time Temporary Object Code 122

CIVIL SERVICE:
 Exempt
 Non-Exempt
FLSA:
 Exempt
 Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Employee's responsibilities for Drainage District #1 workload increased.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

Effective as of January 1, 2020

Department Head [Signature]
 Department of Human Resources [Signature]
 Department of Budget & Management [Signature]

Date 12/09/2019
 Date 12/19/19.
 Date 12/19/19





COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0010
 Department Name: County Treasurer Current Position Title: Payroll Clerk III
 Department No.: 150-001 Requested Position Title: Payroll Clerk III ky

ALLOWANCE REQUEST: Type of Allowance

Position
 Interpreter
 Clothing
 Supplemental
 Auto

ALLOWANCE AMOUNT:	<u>\$ 2,345.00</u>	<u>\$ 2,750.00</u>	<u>\$ 405.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 405.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget
 Annual Budget Cycle
 Will Require Additional Funds
 Salary Adjustment
 Other _____

POSITION TYPE:
 Full Time Regular Object Code 113
 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121
 Part Time Temporary Object Code 122

CIVIL SERVICE:
 Exempt
 Non-Exempt
FLSA:
 Exempt
 Non-Exempt

JUSTIFICATION / PRIORITY: (Explain why this allowance request is essential)

Employee's responsibilities for Drainage District #1 workload increased.

COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)

Effective as of January 1, 2020

Department Head: [Signature]
 Department of Human Resources: [Signature]
 Department of Budget & Management: [Signature]

Date: 12/09/2019
 Date: 12/19/19.
 Date: 12/19/19





COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0011
 Department Name: County Treasurer Current Position Title: Cashier II
 Department No.: 150 001 Requested Position Title: Cashier II

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 2,344.00⁵</u> Current Budgeted Amount	<u>\$ 1,100.00</u> Proposed Budgeted Amount	<u>-\$ 1,244.00⁵</u> Net Change
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ALLOWANCE AMOUNT:	<u> </u> Current Budgeted Amount	<u> </u> Proposed Budgeted Amount	<u>\$ 0.00</u> Net Change
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TOTAL BUDGETARY IMPACT: -\$ 1,244.00⁵

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*
Employee's responsibilities for Drainage District #1 workload reduced.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*
Effective as of January 1, 2020

Department Head: [Signature]
 Department of Human Resources: [Signature]
 Department of Budget & Management: [Signature]

Date: 12/09/2019
 Date: 12/19/19
 Date: 12/19/19





COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0012
 Department Name: County Treasurer Current Position Title: Cashier III
 Department No.: 150 -001 Requested Position Title: cashier III TS

ALLOWANCE REQUEST: Type of Allowance

Position
 Interpreter
 Clothing
 Supplemental
 Auto

ALLOWANCE AMOUNT:	<u>\$ 2,344.00</u>	<u>\$ 1,100.00</u>	<u>-\$ 1,244.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 1,244.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget
 Annual Budget Cycle
 Will Require Additional Funds
 Salary Adjustment
 Other _____

POSITION TYPE:
 Full Time Regular Object Code 113
 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121
 Part Time Temporary Object Code 122

CIVIL SERVICE:
 Exempt
 Non-Exempt
FLSA:
 Exempt
 Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Employee's responsibilities for Drainage District #1 workload reduced.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

Effective as of January 1, 2020

Department Head [Signature]
 Department of Human Resources [Signature]
 Department of Budget & Management [Signature]

12/09/2019
Date
 12/19/19.
Date
 12/19/19
Date





COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 12/09/2019 Current Slot No.: 0015
 Department Name: County Treasurer Current Position Title: Executive Assistant II
 Department No.: 150-001 Requested Position Title: Executive Assistant II

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 2,800.00</u>	<u>\$ 3,500.00</u>	<u>\$ 700.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: \$ 700.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: (Explain why this allowance request is essential)

Employee's responsibilities for Drainage District #1 workload increased.

COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)

Effective as of January 1, 2020

Department Head: [Signature]
 Department of Human Resources: [Signature]
 Department of Budget & Management: [Signature]

Date: 12/09/2019
 Date: 12/19/19
 Date: 12/19/19

