DATE: January 30, 2020

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 0-1293-441-00-340-013-0-XXX

2020
Transfer

AI - 74218

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

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	CPS/HAZARDS-REG F/T EMPLOYEES	220	CPS/HAZARDS-FICA	75.00
113	CPS/HAZARDS-REG F/T EMPLOYEES	250	CPS/HAZARDS-UNEMPLOYMENT COMP	11.00
113	CPS/HAZARDS-REG F/T EMPLOYEES	260	CPS/HAZARDS-WORKERS COMP	11.00
113	CPS/HAZARDS-REG F/T EMPLOYEES	230	CPS/HAZARDS-RETIREMENT	195.00
211	CPS/HAZARDS-HEALTH INSURANCE	230	CPS/HAZARDS-RETIREMENT	279.00
610	CPS/HAZARDS-GENERAL SUPPLIES	230	CPS/HAZARDS-RETIREMENT	7.00
			TOTAL	**578.00**

REASON: ***Realigning the Local Match to to reflect the Local Match budget as sent to DSHS***

DEPARTMENT HEAD SIGNATURE

/ /
DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK