DATE: September 29, 2020

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 0-1293-441-00-340-006-0-XXX

Contact Person: David Mathew Valdez **Ph#:** 7241

2020
Transfer

AI - 77609

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
550	RLSS/LPHS-PRINTING & BINDING	211	RLSS/LPHS-HEALTH INSURANCE	800.00
			TOTAL	800.00

REASON: ***To cover anticipated expenditure;***

DEPARTMENT HEAD SIGNATURE

____/____/____
DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK