HIDALGO COUNTY AUDITOR'S OFFICE
HIDALGO COUNTY, TEXAS

PURCHASE AFFIDAVIT

THE STATE OF TEXAS

COUNTY OF HIDALGO

I, **Diana Huallpa Trevino**, do hereby state that the item(s) listed on the invoice(s) named below
PURCHASER'S NAME
were purchased for the exclusive use of Hidalgo County:

INVOICE NO.	DATE	AMOUNT	NAME OF COMPANY
704403433	07/01/2020	$140.25	Wix.com LTD
TOTAL		$140.25	

I further state that I was authorized to make such a purchase(s).

I therefore request reimbursement of this invoice (these invoices) from Hidalgo County and that payment be made payable to me.

SIGNATURE: _____

TITLE: **Wellness Program Coordinator**
PERSON MAKING PURCHASE

Before me, **Veronica Ortiz**, a Notary Public, appeared **Diana Huallpa Trevino** and stated that the foregoing facts as set forth in the above request for expense reimbursement are true and correct in every respect. She further stated her requested payment of the same.

VERONICA ORTIZ NOTARY PUBLIC (SEAL) STATE OF TEXAS NOTARY ID 12828730-2 MY COMM. EXP. 06/01/2022

_____
NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

_____
APPROVAL: DEPARTMENT HEAD

_____
APPROVAL: COUNTY AUDITOR

COUNTY AUDITOR'S FORM: MCJR-CA-004
REVISED: 01/01/2001