**DATE:** March 9, 2021

**2021**
**Transfer**

**DEPARTMENT HEAD:** Ellie Torres

**DEPARTMENT** Hidalgo County Pct. 4

**ACCOUNT NUMBER:** 0-1100-441-60-124-212-1-XXX

**Contact Perso** Nick Perez **Ph#:** (956) 383-3112

**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 |
|---|---|---|---|---|
| 610 | PCT4-ICA UT HEALTH-SNAP-ED-GENERAL SUP | 550 | PCT4-ICA-UT HEALTH-SNAP-ED PRINT & BIN | $ 400.00 |
| | | | **TOTAL** | **400.00** |

**REASON**:
**Transfer request will fund the purchase of essential items necessary for the implementation of the UT Snap Program.**

**DEPARTMENT HEAD SIGNATURE**

/ /
**DATE**

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK