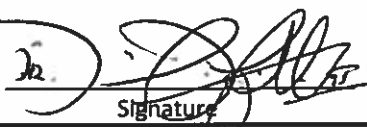




WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
County Owned Wireless Device: <input type="checkbox"/> Office Use <i>or</i> <input type="checkbox"/> Individual <input type="checkbox"/> Name Change <input checked="" type="checkbox"/> Equipment Change <input checked="" type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	Wireless Data Device: <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input type="checkbox"/> Other:	Stipend: <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo
COUNTY OWNED WIRELESS DEVICE		
Office Use / Employee: <u>Various Employees</u> Employee ID# _____ Signature: _____ Department: <u>Sheriff</u> Dept#: <u>280</u> Quantity: <u>149</u> Service: \$44.99 /mo (x) <u>6</u> months = <u>\$40,221.06</u> Account: <u>1-1229-421-00-280-007-0 -532</u> Service: \$ <u>2.00</u> /mo (x) <u>6</u> months = <u>\$1,788.00</u> Account: <u>1-1229-421-00-280-007-0 -532</u> 619/664 Requisition Total: <u>\$42,009.06</u> Requisition Number: _____		
STIPEND		
(1) Employee: _____ Employee ID# _____ Signature: _____ Department: _____ Dept#: _____ Quantity: _____ Service: \$ _____ /mo (x) _____ months = _____ Account: _____ -532 Total: _____		
(2) Elected Official/Department Head Authorization for Request: <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"> <div style="text-align: center;">  Signature </div> <div style="text-align: center;"> <u>Captain David Friedlein</u> Print Name </div> <div style="text-align: center;"> <u>06/03/2021</u> Date </div> </div>		
(3) Executive Office Authorization (Commissioner's Court Departments Only): <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 10px;"> <div style="text-align: center;">_____</div> <div style="text-align: center;">_____</div> <div style="text-align: center;">_____</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> Signature Print Name Date </div>		
(4) IT DEPARTMENT ONLY: Service Type Codes: _____		

Estimated Surcharges

Commissioner's Court Action: Approved Date: _____ Disapproved
 Commissioner's Court Date: _____

Current County cell phone policy stipulates that employees that have cell phones assigned to them will be taxed the value of the service. Please see the following IRS document for more information: <http://www.irs.gov/ftlg/article/0,,id=167154,00.html>, EXAMPLE 2.