DATE: **July 13, 2021**

2021
Transfer

AI - 81457

DEPARTMENT HEAD: **Eduardo Olivarez**

DEPARTMENT NAME: **Health & Human Services**

ACCOUNT NUMBER: **1-1293-441-00-340-051-1-**

Contact Person: Mike Escaname **Ph#:** 7210

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**
339	TITLE V CHILD HEALTH- OTHER PROF SERVIC	660	TITLE V CHILD HEALTH-FURN & EQUIP CNTRLD	5,000.00
581	TITLE V CHILD HEALTH-TRAVEL IN COUNTY	660	TITLE V CHILD HEALTH-FURN & EQUIP CNTRLD	1,000.00
			TOTAL	**6,000.00**

REASON: ***To cover anticipated expenditures***

DEPARTMENT HEAD SIGNATURE

/ /
DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK