**DATE:** December 14, 2021

**DEPARTMENT HEAD:** Eduardo Olivarez

**DEPARTMENT NAME:** Health & Human Services

**ACCOUNT NUMBER:** 1-1293-441-00-340-011-1-XXX

**Contact Person:** Bryon Vela **Ph#:** 7241

**2021**
**Transfer**

**AI - 83716**

**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 | TB PREV&CNTRL FEDERAL-PRINTING & BINDING | 581 | TB PREV&CNTRL FEDERAL-TRVL IN COUNTY | 365.00 |
| 583 | TB PREV&CNTRL FEDERAL-TRAVEL OUT OF COUN | 581 | TB PREV&CNTRL FEDERAL-TRVL IN COUNTY | 788.00 |
| 211 | TB PREV&CNTRL FEDERAL-HEALTH INSURACE | 610 | TB PREV&CNTRL FEDERAL-GENERAL SUPPLIES | 2,500.00 |
| 113 | TB PREV&CNTRL FEDERAL-REG F/T EMPLOYEES | 610 | TB PREV&CNTRL FEDERAL-GENERAL SUPPLIES | 1,000.00 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | **TOTAL** | **4,653.00** |

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

**DEPARTMENT HEAD SIGNATURE**

__/__/__
**DATE**

**APPROVED COMMISSIONERS' COURT**

**ATTEST COUNTY CLERK**