

# WIRELESS DEVICE REQUEST FORM W.2011.2

TYPE OF REQUEST		
<b>County Owned Wireless Device:</b> <input type="checkbox"/> Office Use <i>or</i> <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Name Change <input type="checkbox"/> Equipment Change <input type="checkbox"/> Plan Change <input type="checkbox"/> Delete Service	<b>Wireless Data Device:</b> <input type="checkbox"/> Data Card <input type="checkbox"/> Blackberry <input checked="" type="checkbox"/> Other: <u>iPhone</u>	<b>Stipend:</b> <input type="checkbox"/> Cellular Telephone \$50/mo <input type="checkbox"/> Data Pad \$25/mo

**COUNTY OWNED WIRELESS DEVICE**

Office Use / Employee: Hector H. Garcia Employee ID# 219312 Signature: Hector Garcia

Department: Constable Precinct 4 Dept#: 294

Quantity: 1

Service: \$ 39.99 /mo (x) 6 months = \$ 239.94 Account: 2-1100-421-00-294-001-0 -532

Service: \$ \_\_\_\_\_ /mo (x) \_\_\_\_\_ months = \_\_\_\_\_ Account: \_\_\_\_\_ -619/664

Requisition Total: \$ 239.94 Requisition Number: 00456487

**STIPEND**

(1) Employee: \_\_\_\_\_ Employee ID# \_\_\_\_\_ Signature: \_\_\_\_\_

Department: \_\_\_\_\_ Dept#: \_\_\_\_\_

Quantity: \_\_\_\_\_

Service: \$ \_\_\_\_\_ /mo (x) \_\_\_\_\_ months = \_\_\_\_\_ Account: \_\_\_\_\_ -532

Total: \_\_\_\_\_

**(2) Elected Official/Department Head Authorization for Request:**

Heraldo Sanchez      Heraldo Sanchez      6/23/2022  
 Signature                      Print Name                      Date

**(3) Executive Office Authorization (Commissioner's Court Departments Only):**

\_\_\_\_\_  
 Signature                      Print Name                      Date

**(4) IT DEPARTMENT ONLY:**

Service Type Codes: 4G Custom Nationwide Unl. Mins + MSB Unl. + Email & Data Unl. @ \$39.99 + \$5.00 (+xs/fees) / per month

Commissioner's Court Action:      Commissioner's Court Date: \_\_\_\_\_

Approved Date: \_\_\_\_\_       Disapproved

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/govt/irs/article/0,,id=167154,00.html>, EXAMPLE 2.

Revised: 03/09/2011





Bill To:

Vendor: 287024  
 VERIZON WIRELESS  
 P.O. BOX 660108  
 DALLAS TX 75266-0108

Ship To: HIDALGO CO. CONSTABLE PRECINCT 4  
 2814 S. HWY 281  
 EDINBURG TX 78539

Contract No: DIR-TELE-CTSA-003

Contact: NMUNOZ  
 956-383-8560

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
		Wireless Device/Service for Deputy assigned to HSI DO NOT DUPLICATE ORDER		
6.00	EACH	4G CUSTOM NATIONWIDE UNL MINS + MSG UNL + EMAIL&DATA UNL \$39.99 0218	39.99	239.94
1.00	EACH	IPHONE SE 5G	.00	.00
		Account No _____	<u>Encumbrance</u>	
			Freight	.00
			Total	239.94
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: \_\_\_\_\_