DATE: November 15, 2022

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 2-1293-441-00-340-012-3-XXX

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

2022
Transfer

AI - 88277

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
230	IMM DIV LOCAL-RETIREMENT	211	IMM DIV LOCAL-HEALTH INSURANCE	36,605.15
250	IMM DIV LOCAL-UNEMPLOYMENT COMP	211	IMM DIV LOCAL-HEALTH INSURANCE	1,400.00
581	IMM DIV LOCAL-TRAVEL IN COUNTY	211	IMM DIV LOCAL-HEALTH INSURANCE	4,743.12
550	IMM DIV LOCAL-PRINTING & BINDING	211	IMM DIV LOCAL-HEALTH INSURANCE	1,790.00
610	IMM DIV LOCAL-GENERAL SUPPLIES	211	IMM DIV LOCAL-HEALTH INSURANCE	5,761.73
610	IMM DIV LOCAL-GENERAL SUPPLIES	113	IMM DIV LOCAL-REG F/T EMPLOYEES	6,200.00
610	IMM DIV LOCAL-GENERAL SUPPLIES	212	IMM DIV LOCAL-LIFE INSURANCE	200.00
610	IMM DIV LOCAL-GENERAL SUPPLIES	220	IMM DIV LOCAL-FICA	300.00
610	IMM DIV LOCAL-GENERAL SUPPLIES	250	IMM DIV LOCAL-UNEMPLOYMENT COMP	200.00
			TOTAL	**57,200.00**

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

DEPARTMENT HEAD SIGNATURE

DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK