DATE: June 13, 2023

2023
Transfer

AI - 91107

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 3-1293-441-10-340-083-1-XXX

Contact Person: Carlos Oliva **Ph#:** 7241

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
581	HEALTH DISP-TRAVEL IN-COUNTY	211	HEALTH DISP-HEALTH INSURANCE	1,500.00
583	HEALTH DISP-TRAVEL OUT-OF-COUNTY	212	HEALTH DISP-LIFE INSURANCE	600.00
			TOTAL	**2,100.00**

REASON:

To cover anticipated expenditures

DEPARTMENT HEAD SIGNATURE

/ /
DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK