



COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 06/28/2023 Current Slot No.: 0002
 Department Name: County Treasurer Current Position Title: Chief Deputy
 Department No.: 150-001 Requested Position Title: Chief Deputy

ALLOWANCE REQUEST: Type of Allowance

Position
 Interpreter
 Clothing
 Supplemental
 Auto

ALLOWANCE AMOUNT:	<u>\$ 534.00</u>	<u>\$ 0.00</u>	<u>-\$ 534.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 534.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget
 Annual Budget Cycle
 Will Require Additional Funds
 Salary Adjustment
 Other _____

POSITION TYPE: Full Time Regular Object Code 113
 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121
 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt
 Non-Exempt
 FLSA: Exempt
 Non-Exempt

JUSTIFICATION / PRIORITY: (Explain why this allowance request is essential)

Payroll for the Drainage District #1 not longer processed by employee.

COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)

 Department Head

 Department of Human Resources

6/29/23
 Date

7/3/23
 Date



COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 06/28/2023 Current Slot No.: 0004
 Department Name: County Treasurer Current Position Title: Supervisor III
 Department No.: 150-001 Requested Position Title: Supervisor III

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 3,500.00</u>	<u>\$ 0.00</u>	<u>-\$ 3,500.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 3,500.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: (Explain why this allowance request is essential)

Payroll for the Drainage District #1 not longer processed by employee.

COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)

Department Head _____

6/29/23

Date _____

Department of Human Resources _____

7/13/23

Date _____



COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 06/28/2023 Current Slot No.: 0005
 Department Name: County Treasurer Current Position Title: Payroll Specialist I
 Department No.: 150-001 Requested Position Title: Payroll Specialist I

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 2,750.00</u>	<u>\$ 0.00</u>	<u>-\$ 2,750.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 2,750.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Payroll for the Drainage District #1 not longer processed by employee.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

Department Head _____

Department of Human Resources _____

6/29/23

Date _____

7/3/23

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COUNTY OF HIDALGO

DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 06/28/2023 Current Slot No.: 0006
 Department Name: County Treasurer Current Position Title: Financial Analyst
 Department No.: 150-001 Requested Position Title: Financial Analyst

ALLOWANCE REQUEST: *Type of Allowance*

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 1,500.00</u>	<u>\$ 0.00</u>	<u>-\$ 1,500.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 1,500.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

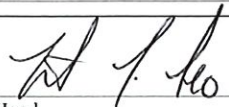
POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt


JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Payroll for the Drainage District #1 not longer processed by employee.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*



 Department Head



 Department of Human Resources

6/29/23

 Date

7/3/23

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DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 06/28/2023 Current Slot No.: 0007
 Department Name: County Treasurer Current Position Title: Cashier III
 Department No.: 150-001 Requested Position Title: Cashier III

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 1,100.00</u>	<u>\$ 0.00</u>	<u>-\$ 1,100.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 1,100.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Payroll for the Drainage District #1 not longer processed by employee.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

Department Head

6/28/23

Date

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7/13/23

Date



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DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 06/28/2023 Current Slot No.: 0009
 Department Name: County Treasurer Current Position Title: Payroll Clerk II
 Department No.: 150-001 Requested Position Title: Payroll Clerk II

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 2,200.00</u>	<u>\$ 0.00</u>	<u>-\$ 2,200.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 2,200.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: (Explain why this allowance request is essential)

Payroll for the Drainage District #1 not longer processed by employee.

COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)

Department Head _____

6/29/23

Date _____

Department of Human Resources _____

7/13/23

Date _____



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DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 06/28/2023 Current Slot No.: 0010
 Department Name: County Treasurer Current Position Title: Payroll Clerk III
 Department No.: 150-001 Requested Position Title: Payroll Clerk III

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 2,200.00</u>	<u>\$ 0.00</u>	<u>-\$ 2,200.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 2,200.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: (Explain why this allowance request is essential)

Payroll for the Drainage District #1 not longer processed by employee.

COMMENTS: (Any comments you wish to make regarding this request, attach additional pages if needed)

Department Head _____

Department of Human Resources _____

6/29/23

Date _____

7/3/23

Date _____



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DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 06/28/2023 Current Slot No.: 0012
 Department Name: County Treasurer Current Position Title: Cashier III
 Department No.: 150-001 Requested Position Title: Cashier III

ALLOWANCE REQUEST: *Type of Allowance*

Position
 Interpreter
 Clothing
 Supplemental
 Auto

ALLOWANCE AMOUNT:	<u>\$ 1,100.00</u>	<u>\$ 0.00</u>	<u>-\$ 1,100.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 1,100.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget
 Annual Budget Cycle
 Will Require Additional Funds
 Salary Adjustment
 Other _____

POSITION TYPE:
 Full Time Regular Object Code 113
 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121
 Part Time Temporary Object Code 122

CIVIL SERVICE:
 Exempt
 Non-Exempt
FLSA:
 Exempt
 Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Payroll for the Drainage District #1 not longer processed by employee.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

Department Head _____
 Department of Human Resources _____

6/29/23
Date

7/3/23
Date



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DEPARTMENT OF HUMAN RESOURCES

PERSONNEL ADJUSTMENT REQUEST FORM (ALLOWANCES)

NOTE: Complete multiple personnel action form if department is requesting more than (3) personnel actions.

Date: 06/28/2023 Current Slot No.: 0015
 Department Name: County Treasurer Current Position Title: Executive Assistant II
 Department No.: 150-001 Requested Position Title: Executive Assistant II

ALLOWANCE REQUEST: *Type of Allowance*

Position Interpreter Clothing Supplemental Auto

ALLOWANCE AMOUNT:	<u>\$ 3,500.00</u>	<u>\$ 0.00</u>	<u>-\$ 3,500.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

ALLOWANCE AMOUNT:	<u> </u>	<u> </u>	<u>\$ 0.00</u>
	Current Budgeted Amount	Proposed Budgeted Amount	Net Change

TOTAL BUDGETARY IMPACT: -\$ 3,500.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

Current Department Budget Annual Budget Cycle Will Require Additional Funds
 Salary Adjustment Other _____

POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

JUSTIFICATION / PRIORITY: *(Explain why this allowance request is essential)*

Payroll for the Drainage District #1 not longer processed by employee.

COMMENTS: *(Any comments you wish to make regarding this request, attach additional pages if needed)*

 Department Head

 Department of Human Resources

6/29/23
 Date

7/3/23
 Date