DATE: September 19, 2023

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 3-1293-441-00-340-070-4-XXX

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

2023
Transfer

AI -92367

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
583	PHHS-TRAVEL OUT-OF-COUNTY	584	PHHS-REGISTRATION FEES	400.00
			TOTAL	400.00

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

DEPARTMENT HEAD SIGNATURE

DATE

APPROVED COMMISSIONERS' COURT

ATTEST COUNTY CLERK