

DATE: July 23, 2024

DEPARTMENT HEAD: Eduardo Olivarez

DEPARTMENT NAME: Health & Human Services

ACCOUNT NUMBER: 4-1293-441-00-340-012-5-XXX

Contact Person: Carlos Oliva Ph#: (956) 383-6221

2024
Appropriation
AI-95963



SUBJECT: Budget Amendments (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 Budget Amendments (increase (decrease)) in accordance with Local Government Code, Chapter 111, § 111.070, Item C (2).

INCREASE ACCOUNT NUMBER(S)	ACCOUNT (OBJECT) NAME	AMOUNT
4-1293-441-00-340-012-5-113	IMM DIV LOCAL-REG F/T EMPLOYEES	429,585.00
4-1293-441-00-340-012-5-211	IMM DIV LOCAL-HEALTH INSURANCE	126,310.00
4-1293-441-00-340-012-5-212	IMM DIV LOCAL-LIFE INSURANCE	600.00
4-1293-441-00-340-012-5-220	IMM DIV LOCAL-FICA	32,865.00
4-1293-441-00-340-012-5-230	IMM DIV LOCAL-RETIREMENT	55,720.00
4-1293-441-00-340-012-5-250	IMM DIV LOCAL-UNEMPLOYMENT COMP	2,562.00
4-1293-441-00-340-012-5-583	IMM DIV LOCAL-TRAVEL OUT COUNTY	1,188.00
4-1293-441-00-340-012-5-610	IMM DIV LOCAL-GENERAL SUPPLIES	490.00
4-1293-334-10-340-012-5-000	IMM DIV LOCAL-STATE REVENUES	649,320.00
TOTAL BUDGET INCREASE (DECREASE)		649,320.00

REASON: Appropriation of funds for IMMUNIZATION BRANCH / LOCALS FY 25 program that starts on 09/01/2024 and ends on 08/31/2025.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK