

HIDALGO COUNTY AUDITOR'S OFFICE

HIDALGO COUNTY, TEXAS  
PURCHASE AFFIDAVIT

THE STATE OF TEXAS

COUNTY OF HIDALGO

I, MICHAEL PEREZ hereby state that the item(s) listed on the invoice named below were purchased for the exclusive use of Hidalgo County:

<u>INVOICE NO.</u>	<u>DATE</u>	<u>AMOUNT</u>	<u>NAME OF COMPANY</u>
940019	7/18/2024	\$115.00	THE CENTER OF INDUSTRIAL REHABILITATION SERVICES

I further state that I was authorized to make such a purchase(s).

I therefore request reimbursement of this invoice (these invoices) from Hidalgo County and that payment be made payable to me.

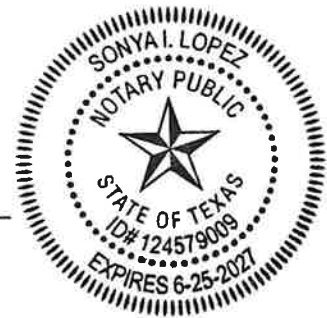
SIGNATURE: [Signature]

TITLE: TASK FORCE AGENT

Before me SONYA I. LOPEZ, a Notary Public, appeared MICHAEL PEREZ his oath deposed and stated that the foregoing facts as set forth in the above request for expense reimbursement are true and correct in every respect. He further stated that he requested payment of the same.

[Signature]  
NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS

[Signature]  
APPROVAL: JUAN SIFUENTES, COMMANDER



APPROVAL: COUNTY AUDITOR

The Center of Industrial  
 Rehabilitation Services  
 2120 E. Business Hwy. 83 Ste. A  
 Mission, TX 78572

<b>RECEIPT</b>		DATE <u>7-18-2024</u>	No. <u>940019</u>
RECEIVED FROM <u>Michael Perez</u>		\$ <u>115<sup>00</sup></u>	
		<u>one hundred fifteen</u> DOLLARS	
<input type="radio"/> FOR RENT <input type="radio"/> FOR <u>DOT PX + Paper Fee</u>			
ACCOUNT		<input type="radio"/> CASH	FROM _____ TO _____
PAYMENT	<u>115<sup>00</sup></u>	<input type="radio"/> CHECK	BY <u>C. Ortiz</u>
BAL. DUE		<input type="radio"/> MONEY ORDER	
		<input type="radio"/> CREDIT CARD	

The Center of Industrial  
 2120 E Business Hwy 83 A  
 MISSION, TX 78572  
 956 613 2400

**SALE**

Store 0001  
 REF# 00000000  
 Batch # 205 RRN: 420019167814  
 07/18/24 14:39:08  
 Trans ID: 0718MDBAVCYXP  
 APPR CODE: 005101  
 MASTERCARD Chip  
 8761

**AMOUNT \$115.00**

APPROVED

Mastercard Debit  
 AID: A0000000041010  
 TVR: 00 00 00 80 00  
 TSI E8 00

THANK YOU

ORANGE COPY

# Hidalgo County H.I.D.T.A. Task Force

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## INTER-OFFICE MEMORANDUM

TO: Sonya Lopez, Executive Assistant

FROM: Juan Sifuentes, Commander

SUBJECT: Reimbursement Request

DATE: August 1, 2024

CC: Agent Michael Perez

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On July 18, 2024, Agent Michael Perez obtained his D.O.T. Physical required by the Texas Department of Public Safety for his current assignments.

Commander Juan Sifuentes is requesting Agent Perez to be reimbursed for the fee paid at the Center of Industrial Services in Mission, Texas.

Agent Perez is seeking reimbursement in the amount of \$115.00. Refer to the attached receipt.

Thank you for assisting with the reimbursement.

Approved 8/01/2024