

DATE: November 12, 2024

DEPARTMENT HEAD: COMMISSIONER ELLIE TORRES

DEPARTMENT NAME: PCT4-ICA UT HEALTH SNAP ED

ACCOUNT NUMBER: 4-1286-441-60-124-212-5-XXX

Contact Person: NICK PEREZ Ph#: (956) 383-3112 EXT. 4008

2024
Appropriation
AI-97132



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
4-1286-441-60-124-212-5- 113	PCT4-ICA UT HEALTH-SNAP ED- REG F/T EMPLOYEES	\$ 38,128.19
4-1286-441-60-124-212-5- 115	PCT4-ICA UT HEALTH-SNAP ED- LONGEVITY PAY	\$ 360.00
4-1286-441-60-124-212-5- 211	PCT4-ICA UT HEALTH-SNAP ED- HEALTH INS	\$ 10,212.00
4-1286-441-60-124-212-5- 212	PCT4-ICA UT HEALTH-SNAP ED- LIFE INSURANCE	\$ 56.16
4-1286-441-60-124-212-5- 220	PCT4-ICA UT HEALTH-SNAP ED- FICA	\$ 2,944.35
4-1286-441-60-124-212-5- 230	PCT4-ICA UT HEALTH-SNAP ED- RETIREMENT	\$ 5,473.98
4-1286-441-60-124-212-5- 250	PCT4-ICA UT HEALTH-SNAP ED- UNEMPLOYMENT COMP	\$ 101.03
4-1286-441-60-124-212-5- 532	PCT4-ICA UT HEALTH-SNAP ED- WIRELESS DEVICES	\$ 1,200.00
4-1286-441-60-124-212-5- 610	PCT4-ICA UT HEALTH-SNAP ED- GENERAL SUPPLIES	\$ 1,524.29
4-1286-337-00-124-212-5- 000	PCT4-ICA UT HEALTH REVENUES	\$ 60,000.00
TOTAL BUDGET INCREASE (DE		\$ 60,000.00

REASON:

To appropriate funds into the Snap-Ed Program relating to the Interlocal Cooperative Agreement with UT-Health Science for FY25. Monies subject to reimbursement as per agreement.

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

DATE

ATTEST COUNTY CLERK