



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: 06/25/2025 Current Slot No.: 0088,0178
 Department Name: SHERIFF'S OFFICE Current Position Title: Please see attached
 Department No.: 280-001 Requested Position Title: Please see attached

ALLOWANCE REQUEST: Type of Allowance

Position Interpreter Clothing Supplemental Auto

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

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

TOTAL BUDGETARY IMPACT: \$ 0.00

POSITION TO BE FUNDED FROM ONE OF THE FOLLOWING:

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

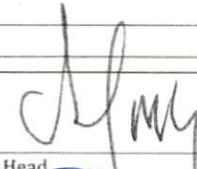
POSITION TYPE: Full Time Regular Object Code 113 Part Time Regular Object Code 114
 Full Time Temporary Object Code 121 Part Time Temporary Object Code 122

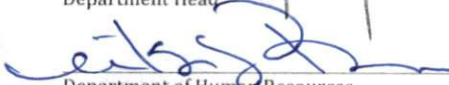
CIVIL SERVICE: Exempt **FLSA:** Exempt
 Non-Exempt Non-Exempt

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

Delete clothing allowance to slot # assigned to Patrol and to be added to a Deputy in CID

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



 Department Head


 Department of Human Resources

4/25/26

 Date
7/2/25

 Date

