

HIDALGO COUNTY AUDITOR'S OFFICE
HIDALGO COUNTY, TEXAS

PURCHASE AFFIDAVIT

THE STATE OF TEXAS

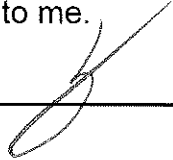
COUNTY OF HIDALGO

I, Romeo Pena Jr., do hereby state that the item(s) listed on the invoice(s) named below
PURCHASER'S NAME
were purchased for the exclusive use of Hidalgo County:

INVOICE NO.	DATE	AMOUNT	NAME OF COMPANY
jRsW	9/24/2025	\$100.00	A + Medical Examiners
TOTAL		<u>\$100.00</u>	

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

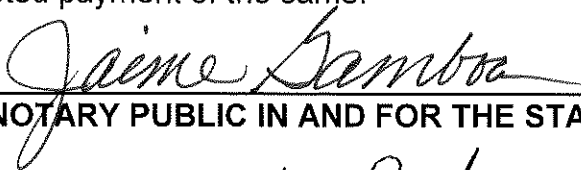
I therefore request reimbursement of this invoice (these invoices) from Hidalgo County and that payment be made payable to me.

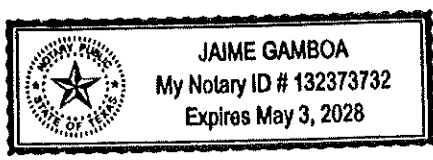
SIGNATURE: 

TITLE: Sergeant
PERSON MAKING PURCHASE

Before me Romeo Pena Jr., a Notary Public, appeared Romeo Pena Jr. and on h is oath depose and stated that the foregoing facts as set forth in the above request for expense reimbursement are true and correct in every respect. H IS / S further stated h is / s requested payment of the same.

(SEAL)


NOTARY PUBLIC IN AND FOR THE STATE OF TEXAS




APPROVAL: DEPARTMENT HEAD

APPROVAL: COUNTY AUDITOR

+ Medical Examiners

101 South 6th St. September 24, 2021
Box B 9:26 AM
CALLEEN, TX
3501-3306
(56) 322-5558

Receipt: jRsW

OT Physical	\$100.00
OT Physical	
<hr/>	
Total	\$100.00
Cash	\$100.00
Change	\$0.00

INVOICE RECEIVED BY:

A. F. ON 9-24-25

GOODS/SERVICES RECEIVED BY:

A. F. ON 9-24-25

APPROVAL BY: Holder

5-1100-421-00-294-001-0-331