DATE: February 17, 2026

DEPARTMENT HEAD: Dairen Sarmiento Rangel

DEPARTMENT NAME: Health & Human Services

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

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

2025
Appropriation

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
5-1293-441-00-340-012-5-610	IMM DIV LOCAL-GENERAL SUPPLIES	21,686.66
5-1293-345-40-340-012-5-000	IMM DIV LOCAL-PROGRAM INCOME	21,686.66
	TOTAL BUDGET INCREASE (DECREASE)	**21,686.66**

REASON: Appropriating FY 25 program income

DEPARTMENT HEAD SIGNATURE

APPROVED COMMISSIONERS' COURT

/ /
DATE

ATTEST COUNTY CLERK