

HIDALGO COUNTY
 Department of Budget & Management
FISCAL NOTE

* Fiscal notes are prepared by the Department of Budget & Management to present the budgetary impact of requests by departments/offices or new proposals not approved during the budget process.

To: Commissioner' Court
From: Budget & Management
CC Date: Tuesday, July 7, 2026

Agenda Item: 103903

Summary of request/proposal:

Probate Court II (1100):

Approval to award a discretionary step for the employee listed below in accordance with HR criteria certification as per Section 8.03 of the Compensation Plan, effective upon Commissioners Court approval:

Fund	Position Title	Position #	Obj	R/S	Current Budgeted Salary/ Allowance	Proposed Budgeted Salary/ Allowance	Total Request
1100	Court Coordinator	330002	501130	15/02	69,688.00	72,127.00	2,439.00
					69,688.00	72,127.00	2,439.00

Budgetary Impact:

Increase/Decrease Account Number	Account Name/Object Code Name	Amount
1100-12-033-001-0000-501130-	REG F/T EMPLOYEES	\$1,196.14
1100-12-033-001-0000-502110-	HEALTH INSURANCE	\$0.00
1100-12-033-001-0000-502120-	LIFE INSURANCE	\$0.00
1100-12-033-001-0000-502200-	FICA	\$91.50
1100-12-033-001-0000-502300-	RETIREMENT	\$174.64
1100-12-033-001-0000-502500-	UNEMPLOYMENT	\$1.79
1100-12-033-001-0000-502600-	WORKER'S COMP	\$0.00

Current Fiscal Year: \$1,464.07

Next Fiscal Year: \$2,985.33

Funding Source:

Funding available in accordance with the CCP plan.

Comments:

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Agenda Item: 103903

Summary of request/proposal:

Probate Court II (1100):
 Approval of the following actions, effective upon Commissioners Court approval:

Fund	Position Title	Position #	Obj	R/S	Current Budgeted Salary/ Allowance	Proposed Budgeted Salary/ Allowance	Total Request
1100	Probate Auditor	330006	501130	13/01	0.00	59,746.00	59,746.00
1100	Investigator (Probate Court)	330007	501130	11/01	0.00	51,222.00	51,222.00
1100	Associate Probate Auditor	330008	501130	07/01	0.00	37,650.00	37,650.00
1100	Associate Judge	330009	501130	00/00	0.00	144,472.00	144,472.00
					0.00	293,090.00	293,090.00

Budgetary Impact:

Increase/Decrease Account Number	Account Name/Object Code Name	Amount
1100-12-033-001-0000-	501130- REG F/T EMPLOYEES	\$143,737.62
1100-12-033-001-0000-	502110- HEALTH INSURANCE	\$20,668.32
1100-12-033-001-0000-	502120- LIFE INSURANCE	\$110.17
1100-12-033-001-0000-	502200- FICA	\$10,995.93
1100-12-033-001-0000-	502300- RETIREMENT	\$20,985.69
1100-12-033-001-0000-	502500- UNEMPLOYMENT	\$215.61
1100-12-033-001-0000-	502600- WORKER'S COMP	\$0.00

Current Fiscal Year: \$196,713.34
Next Fiscal Year: \$401,110.81

Funding Source:

Funds not available for action requested.

Comments:
