

# COMMISSIONERS' COURT AGENDA REQUEST FORM

REQUESTS MUST BE RECEIVED NO LATER THAN 12:00 PM

This space for Court Clerk

ON THE TUESDAY PRIOR TO THE MONDAY MEETING.

**AGENDA NUMBER:**

REGULAR

CONSENT 32659

**INSTRUCTIONS ON THE REVERSE**

## REQUESTING DEPARTMENT

Date: Aug 18, 2009 Court Date: Sept. 14, 2009 Phone/Ext: 5109 Department: Sheriff/Field Ops

Description of Agenda Item: Approve Interlocal Agreement with the  
City of Celina for the continuation of Child Abuse investigative  
Services.

### BUDGET RELATED INFORMATION

*MUST COMPLETE FOR ALL EXPENDITURES/RFP'S*

This item is part of the current budget:  Yes  
 No

Amount Budgeted: \_\_\_\_\_  
 (or needed)

Account Number: \_\_\_\_\_

DEPARTMENT HEAD  
SIGNATURE:

*T B D*

## PURCHASING DEPARTMENT ACTION & COMMENTS

Enter "not to exceed" cost estimate(s) for the requested item(s):

CHECK TWO OF THE BELOW			
ADVERTISE		BIDS	
AWARD		PROPOSALS	

BOND REQUIRED: \_\_\_\_\_  
 ANNUAL ACTION: \_\_\_\_\_  
 AD DATES: \_\_\_\_\_

INS. REQ'D: \_\_\_\_\_  
 EFFECTIVE: \_\_\_\_\_  
 OPEN DATE/TIME: \_\_\_\_\_

Item Description for Agenda: \_\_\_\_\_

Remarks: \_\_\_\_\_

PURCHASING AGENT  
SIGNATURE:

## AUDITOR'S OFFICE ACTION & COMMENTS

BUDGET/FUNDING VERIFICATION			
BUDGETED		FUNDS AVAILABLE	
UNBUDGETED		ACCOUNT NUMBER FOR AVAILABLE FUNDS	
FUNDS NOT AVAILABLE		(Needed for Agenda Submission)	

BUDGET AMENDMENT REQUIRED	
NON-EMERGENCY, Sec 111.011 LGC	
EMERGENCY, Sec 111.010 LGC	

### FUNDS TRANSFER RECOMMENDATION

AMOUNT	DEPARTMENT NAME	ACCOUNT NUMBER
\$ _____	From _____	_____
\$ _____	From _____	_____
\$ _____	To _____	_____
\$ _____	To _____	_____

Remarks: \_\_\_\_\_

COUNTY AUDITOR  
SIGNATURE:

## BUDGET DEPARTMENT ACTION & COMMENTS

COMMENTS RELATED TO BUDGET AMENDMENT JUSTIFICATION SUBMITTED BY DEPARTMENT

BUDGET OFFICER  
SIGNATURE: