

# COMMISSIONERS' COURT AGENDA REQUEST FORM

REQUESTS MUST BE RECEIVED NO LATER THAN 12:00 PM

This space for Court Clerk

AGENDA NUMBER:

REGULAR

CONSENT 30669

ON THE TUESDAY PRIOR TO THE MONDAY MEETING.

INSTRUCTIONS ON THE REVERSE

## REQUESTING DEPARTMENT

Date: Aug 27, 2009 Court Date: Sept 14, 2009 Phone/Ext: 5110 Department: Sheriff/Support Svc

Description of Agenda Item: Approval of Interlocal Dispatch Services

Agreement with the City of Melissa.

### 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:

## 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: \_\_\_\_\_