

# COMMISSIONERS' COURT AGENDA REQUEST FORM

REQUESTS MUST BE RECEIVED NO LATER THAN 12:00 PM

This space for Court Clerk

**AGENDA NUMBER:**

ON THE TUESDAY PRIOR TO THE MONDAY MEETING.

REGULAR

CONSENT 35765

**INSTRUCTIONS ON THE REVERSE**

## REQUESTING DEPARTMENT

Date: 9/4/12 Court Date: 9/17/12 Phone/Ext: 5110 Department: Sheriff/Support Svc

Description of Agenda Item: Approve the Motorola Maintenance

### BUDGET RELATED INFORMATION

*MUST COMPLETE FOR ALL EXPENDITURES/RFP'S*

This item is part of the current budget:  Yes  
 No

Amount Budgeted: \$428,922.56  
(or needed)

Account Number: 001-1001-411.75-30  
*(last year item #)*

Contracts for maintenance of the Motorola Communications

Equipment and software. This includes the Infrastructure,  
Subscriber Repair, Software Maintenance, & Network Management.  
Total amount of contracts is \$428,922.56

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	<input type="checkbox"/>	BIDS	<input type="checkbox"/>
AWARD	<input type="checkbox"/>	PROPOSALS	<input type="checkbox"/>

BOND REQUIRED: \_\_\_\_\_

INS. REQ'D: \_\_\_\_\_

ANNUAL ACTION: \_\_\_\_\_

EFFECTIVE: \_\_\_\_\_

AD DATES: \_\_\_\_\_

OPEN DATE/TIME: \_\_\_\_\_

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

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

PURCHASING AGENT  
SIGNATURE: \_\_\_\_\_

## AUDITOR'S OFFICE ACTION & COMMENTS

BUDGET/FUNDING VERIFICATION			
BUDGETED	<input type="checkbox"/>	FUNDS AVAILABLE	<input type="checkbox"/>
UNBUDGETED	<input type="checkbox"/>	ACCOUNT NUMBER FOR AVAILABLE FUNDS	<input type="checkbox"/>
FUNDS NOT AVAILABLE	<input type="checkbox"/>	(Needed for Agenda Submission)	

BUDGET AMENDMENT REQUIRED	
NON-EMERGENCY, Sec 111.011 LGC	<input type="checkbox"/>
EMERGENCY, Sec 111.010 LGC	<input type="checkbox"/>

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