

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 35814

INSTRUCTIONS ON THE REVERSE

REQUESTING DEPARTMENT

MS

Date: 9/11/12 Court Date: 9/24/12 Phone/Ext: 5109 Department: Sheriff/Field Ops

Description of Agenda Item: Acceptance of the Victim Assistance

BUDGET RELATED INFORMATION

MUST COMPLETE FOR ALL EXPENDITURES/RFP'S

This item is part of the current budget: Yes
 No

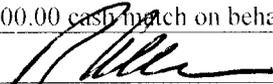
Amount Budgeted: \$2,000.00
(or needed)

Account Number: 001-5001-640-64-01

Grant with City of Frisco, to share a full-time Victim Advocate.

Funding is from September 1, 2012 – August 31, 2013. This is a 3yr

Grant. There is a \$2,000.00 cash match on behalf of Collin County.

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: _____

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	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: _____