COMMISSIONERS' COURT AGENDA REQUEST FORM

REQUESTS MUST BE RECEIVED NO LATER THAN 12:00 PM

ON THE TUESDAY PRIOR TO THE MONDAY MEETING.

INSTRUCTIONS ON THE REVERSE

This space for Court Clerk

AGENDA NUMBER:
REGULAR _____
CONSENT 30666

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 Town of Fairview.

DEPARTMENT HEAD SIGNATURE:

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:

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: