



Legislation Details (With Text)

File #: 21-2688 **Version:** 1 **Name:**
Type: Request for approval **Status:** Passed
File created: 6/1/2021 **In control:** Commissioners Court
On agenda: 6/8/2021 **Final action:** 6/8/2021
Title: Request for approval for payment of Audited Claims.

Sponsors:

Indexes:

Code sections:

Attachments: 1. 21-2688 - Agenda Item for Court 06-08-21 AP Claims Agenda Letter.pdf

Date	Ver.	Action By	Action	Result
6/8/2021	1	Commissioners Court		
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To: Harris County Commissioners Court
Through: Mike Post, County Auditor, Auditor’s Office
Prepared By: Reggie Yancey, Director, Accounts Payable
Subject: Audited Claims
Project ID (If applicable):

Purpose and Request:
Request for approval for payment of Audited Claims.

Background and Discussion: NA
[INSTRUCTIONS: In this section should concisely provide any background and analysis that the Commissioners Court needs to fully understand the action being requested. Please limit background to 3-4 sentences and include any reference to when this item was previously considered by Court. Background should include reference to study or order that led to this item or if the item is a result of compliance with any specific law or statutory requirements.]

Fiscal Impact: NA
[INSTRUCTIONS: A short description of the cost of the request and where you are requesting funding from. No more than 2 sentences. In addition please fill out the table below. This includes financial impact to the current fiscal year and subsequent fiscal years along with the source of funding (general fund, grant, etc.). If the amount is within the current budget, please indicate the amount from ‘Existing Department Budget’. If all of or part of the request is a new expense, please indicate funding source in the space provided.]

Fiscal Summary

Expenditures	FY 20-21	FY 21-22 Projected	Future Years Projected [3 additional years]
Service Impacted: <i>[Please identify the division where expenditures will be incurred]</i>			
Existing Budget			
Additional Appropriation Request			
Total Expenditures			
Funding Sources			
Existing Department Budget			
Please Identify Funding Sources: Special Revenue, Grant, etc.			
[INSERT FUNDING SOURCES]			
Total Sources			

Alternatives:

Alignment with Strategic Objective:

Attachments: Court Letter