

# Harris County, Texas

1001 Preston St., 1st Floor Houston, Texas 77002

## Legislation Details (With Text)

File #: 21-4650 Version: 1 Name:

Type: Proposals/Bids Status: Passed

File created: 9/3/2021 In control: Commissioners Court

On agenda: 9/14/2021 Final action: 9/14/2021

Title: Request for approval of a project scheduled for advertisement for publication of public notices and

public service announcements for Harris County (210289).

Sponsors:

Indexes:

Code sections:

Attachments: 1. 21-4650 Advertisement 210289.pdf

Date Ver. Action By Action Result
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9/14/2021 1 Commissioners Court

**Department:** Purchasing

Department Head/Elected Official: DeWight Dopslauf, Purchasing Agent, Purchasing Department

### **Regular or Supplemental RCA:**

□ Regular RCA

☐ Supplemental RCA

Type of Request: Proposals/Bids

Project ID (if applicable):

Vendor/Entity Legal Name (if applicable):

MWDBE Participation (if applicable):

### Request Summary (Agenda Caption):

Request for approval of a project scheduled for advertisement for publication of public notices and public service announcements for Harris County (210289).

### **Background and Discussion:**

### **Expected Impact:**

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ternative Options:	
ignment with Goal(s):	
Justice and Safety	
Economic Opportunity	
Housing	
Public Health	
Transportation	
Flooding	
Environment	
Governance and Customer Service	
ior Court Action (if any):	
ocation:	
ddress (if applicable list below):	
Countywide	
Precinct 1 Precinct 2	
Precinct 2	
Precinct 4	
T I Comot 7	
Fiscal and Personnel Summary	
,	

Service Name		FY 21-22	Estimates	
			FY 22	Next 3 FYs
Incremental Expen	ditures		•	
Labor Expenditures		-	-	-
Non-Labor Expenditures		-	-	-
Total Incremental Expenditures		-	-	-
Funding Sources (G	eneral Fund, PIC Fund, De	ebt or CP, Grants, or O	ther - Please Spe	cify)
Existing Budget	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Current Budget		-	-	-
Additional Budget Reque	Requested -	-	-	-
	-	-	-	-
	-	-	-	-

#: 21-4650, <b>Version</b> : 1			
Total Additional Budget Requested	-	-	-
Total Funding Sources	-	-	-
Personnel (Fill out section only if requesting r	iew PCNs)		•
Current Position Count for Service	-	-	-
Additional Positions Requested	-	-	-
Total Personnel	-	-	-

# Anticipated Implementation Date: Emergency/Disaster Recovery Note: Not an emergency, disaster recovery, or COVID-19 related item Emergency Item COVID-19 related Item Disaster Recovery related Item Contact(s) name, title, department: Attachments (if applicable):