



Legislation Details (With Text)

File #: 21-5533 **Version:** 1 **Name:**
Type: Donation **Status:** Passed
File created: 10/5/2021 **In control:** Commissioners Court
On agenda: 10/12/2021 **Final action:** 10/12/2021
Title: Request for approval to accept from the Better Business Bureau of Metropolitan Houston, Inc., the donation of a check in the amount of \$2,122 for the purchase of technology for the computer labs at Thomas A. Glazier Senior Education Center.

Sponsors:

Indexes:

Code sections:

Attachments:

Date	Ver.	Action By	Action	Result
10/12/2021	1	Commissioners Court		

Department: Commissioner, Precinct 3

Department Head/Elected Official: Tom S. Ramsey, P.E., Commissioner

Regular or Supplemental RCA: Regular RCA

Type of Request: Donation

Project ID (if applicable): N/A

Vendor/Entity Legal Name (if applicable): N/A

MWDBE Participation (if applicable): N/A

Request Summary (Agenda Caption):

Request for approval to accept from the Better Business Bureau of Metropolitan Houston, Inc., the donation of a check in the amount of \$2,122 for the purchase of technology for the computer labs at Thomas A. Glazier Senior Education Center.

Background and Discussion:

Funds should be deposited in GL UNIT HCNTY, Fund 2201, Acct 486000, Dept. 10302131

Expected Impact:

N/A

Alternative Options:

N/A

Alignment with Goal(s):

- ☐ Justice and Safety
- ☐ Economic Opportunity
- ☐ Housing
- ☐ Public Health
- ☐ Transportation
- ☐ Flooding
- ☐ Environment
- ☒ Governance and Customer Service

Prior Court Action (if any):

Date	Agenda Item #	Action Taken

Location:

Address (if applicable): 16600 Pine Forest Lane, Houston, TX, 77084

Precinct(s): Precinct 3

Fiscal and Personnel Summary				
Service Name		FY 21-22	Estimates	
			FY 22	Next 3 FYs
Incremental Expenditures				
Labor Expenditures		-	-	-
Non-Labor Expenditures		-	-	-
Total Incremental Expenditures		-	-	-
Funding Sources (General Fund, PIC Fund, Debt or CP, Grants, or Other - Please Specify)				
Existing Budget		-	-	-
		-	-	-
		-	-	-
Total Current Budget		-	-	-
Additional Budget Requested		-	-	-
		-	-	-
		-	-	-
Total Additional Budget Requested		-	-	-
Total Funding Sources		-	-	-

Personnel (Fill out section only if requesting new PCNs)			
Current Position Count for Service	-	-	-
Additional Positions Requested	-	-	-
Total Personnel	-	-	-

Anticipated Implementation Date:

Emergency/Disaster Recovery Note: Choose an item.

Contact(s) name, title, department: Conrad Joe, Administrative Assistant

Attachments (if applicable): Copy of the check