

## Harris County, Texas

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

## Legislation Details (With Text)

File #:	21-5537	Version: 1	Name:

Type: Financial Authorization 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 of payment of Audited Claims.

Sponsors:

Indexes:

**Code sections:** 

Attachments:

Date	Ver.	Action By	Action	Result

10/12/2021 1 Commissioners Court

**Department:** Auditor

**Department Head/Elected Official:** 

Michael Post

Regular or Supplemental RCA: Regular RCA
Type of Request: Financial Authorization

Project ID (if applicable): NA

Vendor/Entity Legal Name (if applicable): NA MWDBE Participation (if applicable): NA

## **Request Summary (Agenda Caption):**

Request for approval of payment of Audited Claims.

**Background and Discussion:** 

**Expected Impact:** 

**Alternative Options:** 

File #: 21-5	537, <b>Version:</b> 1			
Alignment	with Goal(s):			
Justice	and Safety			
_	nic Opportunity			
_ Housing	g 5			
_ Public I	Health			
_ Transpo	ortation			
_ Floodin	g			
_ Enviror	iment			
_X Gover	nance and Customer	Service		
Prior Court	: Action (if any):			
Date	Agenda Item #	Action Taken		

## Location:

Address (if applicable): Precinct(s): Countywide

Fiscal and Personnel Sumn	nary			
Service Name		FY 21-22	Estimates	
			FY 22	Next 3 FYs
Incremental Expenditures		•	•	•
Labor Expenditures		-	-	-
Non-Labor Expenditures		-	-	-
Total Incremental Expenditures	5	-	-	-
Funding Sources (General Fund,	PIC Fund, Debt or	CP, Grants, or O	ther - Please Spe	cify)
Existing Budget	-	_	-	-
	-	-	-	-
	-	-	-	-
Total Current Budget		-	-	-
Additional Budget Requested	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Additional Budget Requested		-	-	-
Total Funding Sources		-	-	-
<b>Personnel</b> (Fill out section only if	requesting new Po	CNs)		
Current Position Count for Service		-	-	-
Additional Positions Requested		_	_	_
Total Personnel		-	-	-

File #: 21-5537, Version: 1

**Anticipated Implementation Date:** 

Emergency/Disaster Recovery Note: Not an emergency, disaster, or COVID-19 related item

Contact(s) name, title, department: Carmella Sanford, Executive Assistant/Executive Division, Auditor's Office

Attachments (if applicable):