

Legislation Details (With Text)

File #:	21-65	521	Version:	1	Name:					
Туре:	Posit	ion			Status:	Passed				
File created:	11/16	6/2021			In control:	Commissioners Court				
On agenda:	11/30	0/2021			Final action:	11/30/2021				
Title:	Requ	lest by the	Constable	of Pr	ecinct 8 for appro	val of a Reserve Deputy's renewal Bond and Oath.				
Sponsors:										
Indexes:										
Code sections:										
Attachments:	1. 21	-6521 Con	st. 8-Roste	er Cha	anges.pdf					
Date	Ver.	Action By			Actio	n Result				
11/30/2021	1	Commissi	oners Cou	rt						
Department: Co	nstab	oles								
Department Head/Elected Official: Constable Phil Sandlin										

Regular or Supplemental RCA: Regular RCA

Type of Request: Miscellaneous Section

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

Request Summary (Agenda Caption):

Request by the Constable of Precinct 8 for approval of a Reserve Deputy's renewal Bond and Oath.

Background and Discussion:

Expected Impact:

Alternative Options:

Alignment with Goal(s):

- X 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): Precinct(s): Choose an item.

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	S	-	-	-
Funding Sources (General Fund,	PIC Fund, Debt o	r CP, Grants, or O	ther - Please Spe	cify)
Existing Budget	_	-	-	-
	-	-	-	-
	-	-	-	-
Total Current Budget	-	-	-	-
Additional Budget Requested	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Additional Budget Reques	ted	-	-	-
Total Funding Sources		-	-	-
Personnel (Fill out section only if	requesting new I	PCNs)	- -	
Current Position Count for Serv	ice	-	-	-
Additional Positions Requested		-	-	-
Total Personnel	-	-	-	

i.

Anticipated Implementation Date: Emergency/Disaster Recovery Note: Choose an item. Contact(s) name, title, department: Attachments (if applicable):