

Harris County, Texas

Legislation Details (With Text)

File #: 22-0987 Version: 1 Name:

Type: Resolution Status: Passed

File created: 2/1/2022 In control: Commissioners Court

On agenda: 2/8/2022 Final action: 2/8/2022

Title: Request by the Commissioner of Precinct 3 for approval of a resolution honoring the life of Harris

County Constable Precinct 5 Corporal Charles Galloway.

Sponsors:

Indexes:

Code sections:

Attachments:

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2/8/2022 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: Resolution

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 by the Commissioner of Precinct 3 for approval of a resolution honoring the life of Harris County Constable Precinct 5 Corporal Charles Galloway.

Background and Discussion:

Expected Impact:

N/A

Alternative Options:

N/A

File #:	22-0987	Version:	1
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Alignment with Goal(s):

- _ Justice and Safety
- _ Economic Opportunity
- _ Housing
- _ Public Health
- $_\, {\sf Transportation}$
- _ 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 Summary						
Service Name						
•	FY 21-22	FY 22	Next 3 FYs			
Incremental Expenditures (do NOT w	rite values in the	usands or millions	s)			
Labor Expenditures	\$	\$	\$			
Non-Labor Expenditures	\$	\$	\$			
Total Incremental Expenditures	\$	\$	\$			
Funding Sources (do NOT write value	es in thousands o	r millions)	•			
Existing Budget						
Choose an item.	\$	\$	\$			
Choose an item.	\$	\$	\$			
Choose an item.	\$	\$	\$			
Total Current Budget	\$	\$	\$			
Additional Budget Requested			•			
Choose an item.	\$	\$	\$			
Choose an item.	\$	\$	\$			
Choose an item.	\$	\$	\$			
Total Additional Budget Requested	\$	\$	\$			
Total Funding Sources	\$	\$	\$			

File #: 22-0987, Version: 1

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):