

Harris County, Texas

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

Legislation Details (With Text)

Version: 1 File #: 23-0847 Name:

Type: **Financial Authorization** Status: Passed

File created: 1/31/2023 In control: **Commissioners Court**

Final action: On agenda: 2/9/2023 2/9/2023

Title: Request for approval of payment of Audited Claims.

Sponsors:

Indexes:

Code sections:

Attachments:

Date	Ver.	Action By	Action	Result
2/9/2023	1	Commissioners Court		

2/9/2023

Department: Auditor

Department Head/Elected Official: Michael Post

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

Project ID (if applicable): N/A

Vendor/Entity Legal Name (if applicable):

MWDBE Contracted Goal (if applicable): N/A MWDBE Current Participation (if applicable): N/A

Justification for 0% MWDBE Participation Goal: N/A - Goal not applicable to request

Request Summary (Agenda Caption):

Request for approval of payment of Audited Claims.

Background and Discussion:

Expected Impact:

Alternative Options:

Alignment with Goal(s):
_ Justice and Safety
_ Economic Opportunity
Housing

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_ Public Health

_ Transportation

_ Flooding

_ Environment

X Governance and Customer Service

Prior Court Action (if any):

Date	Agenda Item #	Action Taken		

Location:

Address (if applicable): N/A Precinct(s): Countywide

Fiscal and Personnel Summary			
Service Name			
	FY 23	FY 24	Next 3 FYs
Incremental Expenditures (do <mark>NOT</mark> w	rite values in t	housands or millions	s)
Labor Expenditures	\$	\$	\$
Non-Labor Expenditures	\$	\$	\$
Total Incremental Expenditures	\$	\$	\$
Funding Sources (do NOT write value	s in thousands	or 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	\$	\$	\$
Personnel (Fill out section only if reques	ting new PCNs)	•	•
Current Position Count for Service	-	-	-
Additional Positions Requested	-	-	-

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Total Personnel - - -

Anticipated Court Date: 2/9/2023

Anticipated Implementation Date (if different from Court date): N/A

Emergency/Disaster Recovery Note: Not an emergency, disaster, or COVID-19 related item **Contact(s) name, title, department:** Carmella Sanford, Executive Assistant, Auditor's Office

Attachments (if applicable):