



Legislation Text

File #: 21-1781, Version: 1

To: Harris County Commissioners Court

Through: Mike Post, County Auditor, Auditor's Office

Prepared By: Reggie Yancey, Director, Accounts Payable

Subject: Audited Claims

Project ID (If applicable):

Purpose and Request:

*Request for approval for payment of audited claims.*

Background and Discussion: NA

*[INSTRUCTIONS: In this section should concisely provide any background and analysis that the Commissioners Court needs to fully understand the action being requested. Please limit background to 3-4 sentences and include any reference to when this item was previously considered by Court. Background should include reference to study or order that led to this item or if the item is a result of compliance with any specific law or statutory requirements.]*

Fiscal Impact: NA

*[INSTRUCTIONS: A short description of the cost of the request and where you are requesting funding from. No more than 2 sentences. In addition please fill out the table below. This includes financial impact to the current fiscal year and subsequent fiscal years along with the source of funding (general fund, grant, etc.). If the amount is within the current budget, please indicate the amount from 'Existing Department Budget'. If all of or part of the request is a new expense, please indicate funding source in the space provided.]*

Fiscal Summary			
Expenditures	FY 20-21	FY 21-22 Projected	Future Years Projected [3 additional years]
Service Impacted: <i>[Please specify division where expenditure is incurred]</i>			
Existing Budget			
Additional Appropriation Requested			
Total Expenditures			
Funding Sources			
Existing Department Budget			
Please Identify Funding Source: General Fund, Special Revenue, Grant, etc.			
[INSERT FUNDING SOURCE]			

<b>Total Sources</b>			
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**Alternatives:**

**Alignment with Strategic Objective:**

**Attachments:** Court Letter