

# Harris County, Texas

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

# **Legislation Text**

File #: 22-5593, Version: 1

**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 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 by the Commissioner of Precinct 3 for approval of a resolution honoring the life of Harris County Precinct 3 Constable Deputy Omar J. Ursin.

#### **Background and Discussion:**

N/A

### **Expected Impact:**

N/A

### **Alternative Options:**

N/A

#### Alignment with Goal(s):

- \_ Justice and Safety
- \_ Economic Opportunity
- \_ Housing
- \_ Public Health
- \_ Transportation
- Flooding
- \_ Environment
- X Governance and Customer Service

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## 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			
•	SFY 22	FY 23	Next 3 FYs
Incremental Expenditures (do <mark>NOT</mark> w	rite values in th	nousands or millions	s)
Labor Expenditures	\$	\$	\$
Non-Labor Expenditures	\$	\$	\$
Total Incremental Expenditures	\$	\$	\$
Funding Sources (do NOT write value	es 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	\$	\$	\$
<b>Personnel</b> (Fill out section only if reques	sting new PCNs)		
Current Position Count for Service	-	-	-
Additional Positions Requested	-	-	-
Total Personnel	-	-	-

### **Anticipated Court Date:**

**Anticipated Implementation Date (if different from Court date):** 

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

Contact(s) name, title, department: Conrad Joe, Administrative Assistant

Attachments (if applicable): Resolution