



Legislation Text

File #: 23-0368, **Version:** 1

Department: Sheriff

Department Head/Elected Official: Ed Gonzalez, Sheriff

Regular or Supplemental RCA: Supplemental RCA

Type of Request: Financial Authorization

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 Sheriff's Office for approval of overtime funding reimbursement from the U.S. Immigration and Customs Enforcement, Homeland Security Investigations joint operations program in the amount of \$65,000.00 for the period of October 1, 2022 - September 30, 2023.

Background and Discussion:

The Sheriff's Office requests approval to receive \$65,000.00 in overtime reimbursement from ICE/HSI.

Reimbursements will be made for the Harris County Sheriff's Office overtime from October 1, 2022, through September 30, 2023.

Expected Impact:

The overtime will be used to conduct a joint criminal/drug trafficking investigations by the Special Investigation Division.

Alternative Options:

Alignment with Goal(s):

- 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 Summary			
Service Name			
	FY 23	FY 24	Next 3 FYs
Incremental Expenditures (do NOT write values in thousands or millions)			
Labor Expenditures	\$	\$	\$
Non-Labor Expenditures	\$	\$	\$
Total Incremental Expenditures	\$	\$	\$
Funding Sources (do NOT write values 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 requesting 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: Choose an item.

Contact(s) name, title, department:

Attachments (if applicable):