

# Office DEPOT, Inc.

Office Depot, Inc  
PO BOX 7241  
SIOUX FALLS SD  
57117-7241

RECEIVED

FEDERAL ID: 59-2663954

DEC 28 2021

**BILL TO:** NAVARRO COUNTY  
AUDITOR'S OFFICE  
ATTN: ACCTS PAYABLE  
NAVARRO COUNTY  
ATTN ACCTS PAYABLE  
300 W 3RD AVE STE 4  
CORSIANA TX 75110-4603

001423-001332



## ORIGINAL INVOICE

10000

20

### THANKS FOR YOUR ORDER

IF YOU HAVE ANY QUESTIONS  
OR PROBLEMS. JUST CALL US

FOR CUSTOMER SERVICE ORDER: (888) 263-3423  
FOR ACCOUNT: (800) 721-6592

INVOICE NUMBER	AMOUNT DUE	PAGE NUMBER
216153957001	197.97	Page 1 of 2
INVOICE DATE	TERMS	PAYMENT DUE
13-DEC-21	Net 30	16-JAN-22

### SHIP TO:

NAVARRO COUNTY JP4  
312 W 2ND AVE STE 4  
CORSIANA TX 75110-3097



ACCOUNT NUMBER 28868857	PURCHASE ORDER UPON APPROVAL	SHIP TO ID JP4	ORDER NUMBER 216153957001	ORDER DATE 10-DEC-21	SHIPPED DATE 13-DEC-21		
BILLING ID 221110	ACCOUNT MANAGER RELEASE	ORDERED BY CHRISTY LOVE	DESKTOP	COST CENTER JP4			
CATALOG ITEM #/ MANUF CODE	DESCRIPTION/ CUSTOMER ITEM #	U/M	QTY ORD	QTY SHP	QTY B/O	UNIT PRICE	EXTENDED PRICE
417667 U82594	6PK Z-PERFORM 2000D 4X6 IN 417667	EA	3	3	0	65.990	197.97

001423-001332

To ensure timely and accurate application of your payment, please include the following on your remittance: account number, invoice number, and the amount you are paying for each invoice.

ORIGINAL INVOICE

10000

**Office  
DEPOT, Inc.**

Office Depot, Inc  
PO BOX 7241  
SIOUX FALLS SD  
57117-7241

THANKS FOR YOUR ORDER

IF YOU HAVE ANY QUESTIONS  
OR PROBLEMS. JUST CALL US

FOR CUSTOMER SERVICE ORDER: (888) 263-3423  
FOR ACCOUNT: (800) 721-6592

FEDERAL ID:59-2663954

RECEIVED

DEC 28 2021

INVOICE NUMBER 216153957001	AMOUNT DUE 197.97	PAGE NUMBER Page 2 of 2
INVOICE DATE 13-DEC-21	TERMS Net 30	PAYMENT DUE 16-JAN-22

BILL TO:

ATTN: ACCTS PAYABLE  
NAVARRO COUNTY  
ATTN ACCTS PAYABLE  
300 W 3RD AVE STE 4  
CORNICANA TX 75110-4603

NAVARRO COUNTY  
AUDITOR'S OFFICE

SHIP TO:

NAVARRO COUNTY JP4  
312 W 2ND AVE STE 4  
CORNICANA TX 75110-3097

001423-001332



ACCOUNT NUMBER 28868857	PURCHASE ORDER UPON APPROVAL	SHIP TO ID JP4	ORDER NUMBER 216153957001	ORDER DATE 10-DEC-21	SHIPPED DATE 13-DEC-21		
BILLING ID 221110	ACCOUNT MANAGER RELEASE	ORDERED BY CHRISTY LOVE	DESKTOP	COST CENTER JP4			
CATALOG ITEM #/ MANUF CODE	DESCRIPTION/ CUSTOMER ITEM #	U/M TAX	QTY ORD	QTY SH	QTY B/O	UNIT PRICE	EXTENDED PRICE

SUB-TOTAL	197.97
DELIVERY	0.00
SALES TAX	0.00
<b>TOTAL</b>	<b>197.97</b>

All amounts are based on USD currency

To return supplies, please repack in original box and insert our packing list, or copy of this invoice. Please note problem so we may issue credit or replacement, whichever you prefer. Please do not ship collect. Please do not return furniture or machines until you call us first for instructions. Shortage or damage must be reported within 5 days after delivery.

001423-001332

▲ DETACH HERE ▲

CUSTOMER NAME NAVARRO COUNTY	BILLING ID 221110	INVOICE NUMBER 216153957001	INVOICE DATE 13-DEC-21	INVOICE AMOUNT 197.97	AMOUNT ENCLOSED
---------------------------------	----------------------	--------------------------------	---------------------------	--------------------------	-----------------

FL0 002211100 2161539570018 00000019797 1 5

Please  
Send Your  
Check to:

OFFICE DEPOT, INC.  
PO Box 660113  
Dallas, TX 75266-0113

Please return this stub with your payment to  
ensure prompt credit to your account.

Please DO NOT staple or fold. Thank You.



**NAVARRO COUNTY AUDITOR'S OFFICE**

300 W 3<sup>rd</sup> Ave, Suite 6  
Corsicana, Texas 75110  
e-mail: auditor@navarrocounty.org

Natalie Robinson, First Assistant,  
Kaye Martin, Assistant  
Lisa Clay, Assistant  
Patty Wells, Assistant  
Jan Wise, Administrative Assistant

Terri Gillen, County Auditor

Phone: (903) 654-3095

Fax: (903) 654-3097

**INTEROFFICE MEMO**

The attached item is being returned for the following reasons:

- Item incurred before purchase order issued
- Purchase order number is inconsistent with invoice
- Amount billed does not match the purchase order
- Vendor on purchase order does not match invoice
- Insufficient documentation to process payment
- Signature or date not present
- Budget Account Number (Line Item) is missing – Acct # \_\_\_\_\_
- Insufficient budget
- Payment Request inconsistent with County Policy

Other order went thru w/o P.O. Sign invoice too please

Please provide the additional documentation or explanation necessary to process this payment request.  
This notice must remain attached to the payment request.

Additional explanation: \_\_\_\_\_

The Department Head or Elected or Appointed Official must sign this form confirming notification that the Navarro County Purchasing Policy was not followed on this purchase.

[Signature] \_\_\_\_\_  
Signature Date