

RECEIVED

JUN 10 2022

NAVARRO COUNTY
AUDITOR'S OFFICE

CELLULAR PHONE ALLOWANCE AUTHORIZATION

NAME: CASEY GASTON

DEPARTMENT: District Attorney

JOB TITLE: Investigator

JUSTIFICATION FOR ALLOWANCE:
investigator for the DA's office

DATE APPROVED/DECLINED IN COURT: _____

EFFECTIVE DATE: _____

AMOUNT: \$50 / month

ADD

REMOVE

CHANGE

By signing this form, the employee understands that they will be required to provide proof of billing for cellular telephone service in their name on a periodic basis, as deemed necessary by Navarro County.

SIGNATURES:

EMPLOYEE: _____ DATE: _____

DEPARTMENT HEAD: [Signature] DATE: 6/7/2022