

27

INVOICE

TimeKeeping Systems, Inc.
30700 Bainbridge Road
Suite H
Solon, Ohio 44139
Ph: 216-595-0890
Fax: 216-595-0991
Tax ID: 34-1530120

RECEIVED

FEB 24 2023

NAVARRO COUNTY
AUDITOR'S OFFICE

INVOICE NO	PAGE
382794	1

INVOICE DATE
2/23/2023

BILL TO: Navarro County Sheriff's Office
312 W 2nd Ave
Attn: Accounts Payable
Corsicana, TX 75110
United States

SHIP TO: Navarro County Sheriff's Office
312 W 2nd Ave
Attn: Charlie York
Corsicana, TX 75110
United States

ORDER NO	ORDER DATE	CUSTOMER NO	LOC	SALES REP	TERMS
1149581	2/23/2023	NAV005	TKS	MW	Net 30 Days

CUSTOMER PO NUMBER	JOB NUMBER	SHIP VIA	FOB
RMA #64900		UPSNextDaySaver	

ITEM NUMBER DESCRIPTION	QTY ORDERED	QTY SHIPPED/RETURNED QTY BACKORDERED	UNIT PRICE	UOM DISC%	EXTENDED PRICE
MISC-REPAIR PIPE Out of Warranty Repair PIPE II - A19BC9	1.0000	1.0000 0.0000	125.000	EA 0.00	125.00

Debit: 101-512-445
 Desc: _____
 PO#: _____
 Invoice#: _____
 Vendor#: _____

TOTAL AMOUNT 125.00
 MISC CHARGES 0.00
 SHIPPING 0.00
 SALES TAX 0.00

TOTAL INVOICE 125.00 USD

Debra Keeley 3/1/23

Shipped on: 02/23/2023
 Tracking#: 1Z30F57Y1357633902
 Service: UPS Next Day Air Saver
 Total Weight: 0.9
 Number of Packages: 1
 Billing Option: Prepaid
 End Shipment(s)

THIS IS THE ONLY INVOICE YOU WILL RECEIVE. PLEASE ADVISE US IMMEDIATELY IF YOU RECEIVED THIS IN ERROR.

All sales are subject to TimeKeeping Systems' Terms and Conditions of Sale, available at
www.guard1.com/about/privacy-policy/#terms-and-conditions-of-sale



NAVARRO COUNTY AUDITOR'S OFFICE

Natalie Robinson, First-Assistant
Patty Wells, Assistant
Lisa Clay, Assistant
Jan Wise, Assistant
Krystal McCollum, Assistant

Terri Gillen, County Auditor
Phone: (903) 654-3095

300 W 3rd Ave., Suite 4
Corsicana, TX 75110

e-mail: auditor@navarrocouny.org

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
- System shows invoice paid
- Budget Account Number (Line Item) is missing – Acct # _____
- Insufficient budget in Line Item
- Payment Request inconsistent with County Policy
- Other _____

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.

 Morris Steward
Signature

 3/08/23
Date