

CELLULAR PHONE ALLOWANCE AUTHORIZATION

NAME: Marcos Ortiz

DEPARTMENT: Maintenance

JOB TITLE: Maintenance Technician

JUSTIFICATION FOR ALLOWANCE:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE APPROVED/DECLINED IN COURT: November 13, 2023

EFFECTIVE DATE: 11/15/2023

AMOUNT: \$85

ADD

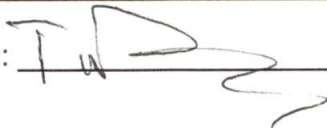
REMOVE

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: 11-3-23

DEPARTMENT HEAD:  DATE: 11-3-23