



NAVARRO COUNTY AUDITOR'S OFFICE

Natalie Robinson, First-Assistant
Patty Mosley, Assistant
Lisa Clay, Assistant
Vicki Lewis, Assistant
Krystal McCollum, Assistant
Kari Davis, Purchasing Assistant

Terri Gillen, County Auditor

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

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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: This was a miscommunication between Cole and I on PCT. I do apologize there was not a PO done for this Inv.

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

Date

08/09/24



Cole Distributing Company
 P.O. Box 1582
 Palestine, TX 75802
 (903) 723-8585

RECEIVED

AUG 05 2024

Invoice No: IN-057673
 Invoice Date: Mon 08/05/2024
 Delivery Date: Fri 08/02/2024

Account ID: 55287

NAVARRO COUNTY
 AUDITOR'S OFFICE

Original

Bill To: NAVARRO COUNTY 300 W 3rd Ste 4 Corsicana, TX 75110	Ship To: ID: 1 Navarro County Precinct 1 4201E HWY 22 Corsicana, TX 75110
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Order No: OD-086248	Reference No.:	P.O. No: po#
Salesperson:	Carrier: COLE DISTRIBUTING	

Description	From Site	BOL No	Units	Unit Price	Total
UNIVERSAL TRACTOR HYD FLUID	5030		2.0000	PAIL 5 GALL 63.270000	126.54
GOLDENROD FILTER ELMNT 470-	5030		2.0000	EACH 13.990000	27.98
FILTER 1" 10MIC SHRT CON 7001	5030		2.0000	EACH 13.990000	27.98

Tax and Other Charges Included in Price	Basis	Rate	Amount
Sales Tax 8.25 - FILTER 1" 10MIC SHRT CON 70015	\$27.98		0.00
Sales Tax 8.25 - GOLDENROD FILTER ELMNT 470-5	\$27.98		0.00
Sales Tax 8.25 - UNIVERSAL TRACTOR HYD FLUID	\$126.54		0.00

\$126.54

\$55.96

Debit: 211-611-321
 Desc: Unit 16 - Hydraulic Fluid
 PO#: NA
 Invoice#: IN-057673
 Vendor#: 7963

Debit: 211-611-321
 Desc: Shop - Filter, Filter Elmen-
 PO#: NA
 Invoice#: IN-057673
 Vendor#: 7963

Invoice Total	\$182.50
****Payment Terms Summary****	
Due by Wed 09/04/2024 (Net 30)	182.50

COLE DISTRIBUTING COMPANY LLC

140229

CORSICANA DIVISION • DISTRIBUTOR/RESELLER
 1200 N Bus. 45 • Corsicana, Texas 75110
 903-872-6621 • 903-303-5571

MAKE REMITTANCE TO

Cole Distributing Company, LLC
 PO Box 1582
 Palestine, TX 75802

TERMS

- CASH
- CHARGE
- RETURNS
- TRANSFER
- PAYMENT

DATE 8/1/24

BULK PLANT

ACCOUNT NO.

NAME

NC Pct 1

ADDRESS

PHONE

CUSTOMER ORDER NO:

PO#
 DO#

SUBJECT TO CORRECTION OF CLERICAL ERRORS
 DO NO DESTROY-THIS IS YOUR INVOICE AND MANIFEST

PACKAGES NO.	Kind, Size and No. to Case	PRODUCT	PRODUCT CODES	QUANTITY	UOM	PRICE EACH	AMOUNT
	BULK	GASOLINE / FLAMMABLE LIQUID 3 UN 1203 II					
		REGULAR UNLEADED					
	BULK	FUEL/OIL COMBUSTIBLE LIQUID (Diesel No.2) NA 1993 III LOW SULFER					
	BULK	FUEL/OIL COMBUSTIBLE LIQUID (Diesel No.2) NA 1993 III DYED DIESEL					
2	5/1	Universal TFL		2		63.27	126.54
2		GR Filter elements		2		13.99	27.98
2		3/4" Filter #70015 Cimtek		2		13.99	27.98
							182.50

DATE	NOTES:	
ARRIVAL		
DEPARTURE		
TRUCK		
		Subtotal
		Sales Tax
		CC Fee

Emergency Contact LONE STAR HAZMAT 888-942-9628

Delivered By <u>B</u>	Received Quantity Customer	Load Time 10:18	TOTAL AMOUNT
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Liability for State Motor Fuel tax shown on invoice has been assumed and will be paid as required by law. Seller warrants and agrees that goods delivered hereunder were produced in compliance with all applicable requirements of Section 6, 7 and 12 of the Fair Labor Standards Act of 1938 as amended and of regulations and orders of the Administrator of the Wage and Hour Division issued under Section 14 thereof.

PAYMENT RECEIVED - FOR OFFICE USE ONLY		Customer Signature
DATE:	AMOUNT:	
CHECK	CASH	
	CARD	