

23

Lorie Stovall

From: CPSCert@safekids.org
Sent: Wednesday, April 23, 2025 11:27 AM
To: Lorie Stovall
Subject: - Payment Processed



[Handwritten signature] 5/2/25

Reimbursed to Lorie

We have processed the following payment:

Bill To:
Lorie M Stovall
313 W 3rd
Corsicana, TX 75110

Payment ID: CMS-PMT-114603
Amount: USD 55.00
Paid On: Wed Apr 23 2025 11:26:53 am
Method: CC - Visa
Reference: CC (Last 4): 4803

The following payments were received:

Item	Trx Date	Description	Amount
1	04/23/2025	Technician Recertification Fee CMS-RECAPP-60532: CPST Recertification Application for recert cycle ending 2025	55.00

Please note: Credit card payments will appear under the name of Safe Kids Worldwide on your statement.

For further assistance, or if you have any questions, please email us at CPSCert@safekids.org or call us at 202-875-6330 for help.

Regards,



Budget Number	101-421-419
Request Date	05/02/25
Phone Number	
Fax Number	
Contact Name	

Authorized by Official/Department Head

5/2/25

Auditor Use Only	
Vendor No:	
Purchase Order No:	
G/L Account No:	
Auditor Approval:	

RECEIVED

MAY 02 2025

NAVARRO COUNTY
AUDITOR'S OFFICE



NAVARRO COUNTY AUDITOR'S OFFICE

Terri Gillen, County Auditor

Phone: (903) 654-3095

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

e-mail: auditor@navarrocounty.org

Natalie Robinson, First-Assistant

Stephanie Cates, Assistant

Lisa Clay, Assistant

Rhonda Knight, Assistant

Vicki Lewis, Assistant

Kari Davis, Purchasing Assistant

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.

Signature _____

Date 5/2/25