



NAVARRO COUNTY AUDITOR'S OFFICE

300 W 3rd Ave., Suite 4 Corsicana, TX 75110 Natalle Robinson, First-Assistant Stephanie Cates, Assistant Lisa Clay, Assistant Rhonda Knight, Assistant Vicki Lewis, Assistant Kari Davis, Purchasing Assistant

Fax: (903) 654-3097

Charles Adams, County Auditor

Signature

Phone: (903) 654-3095 e-mail: auditor@navarrocounty.org

| | | INTEROF | FICE MEMO | í: Popular | | , | |
|----------------|---|-----------------|---|--|---------------------------------------|---------------------------------------|--|
| The a | ttached item is being re | turned for the | e following rea | sons: | .,. * . , | | · |
| X | Item incurred before p | urchase orde | r issued | | | | |
| | Purchase order number | er is inconsist | ent with invoic | ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;; | Marin India Tangan Asi | | |
| .; a | Amount billed does no | t match the p | urchase order | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| | Vendor on purchase o | rder does no | t match invoice |) } | | | |
| | Insufficient documenta | | ss payment | | | | . : : |
| · · · · · | Signature or date not p System shows invoice | · į, | | | | | 4,55 |
| - | Budget Account Numb | er (Line Item |) is missing – | Acct # | · · · · · · · · · · · · · · · · · · · | | |
| | Insufficient budget in L | ine Item | | | | | i. :::::::::::::::::::::::::::::::::::: |
| <u> </u> | Payment Request inco | nsistent with | County Policy | | | | |
| | e provide the additional do st. This notice must rema | | | |) process | lhis paym | ent |
| Additio | onal explanation: | | | | | · · · · · · · · · · · · · · · · · · · | |
| | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 | 277,6 | # 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | *** | | · · · · · · · · · · · · · · · · · · · | :::: |
| confi | Department Head or Element Head or Element Head on that wed on this pyrchase. | | | | | | |
| | 13/200 | | X 4 | 14.7 | 12.11.11.11.11.11 | | 1. |

Date



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Charles Adams, County Auditor

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

Phone: (903) 654-3095

followed on this purchase.

Signature

e-mail: auditor@navarrocounty.org

INTEROFFICE MEMO

| The | attached item is being returned for the following reasons: |
|------------|--|
| × | Item incurred before purchase order issued |
| <i>'</i> a | Purchase order number is inconsistent with invoice |
| 0 | Amount billed does not match the purchase order |
| 0 | Vendor on purchase order does not match invoice |
| 0 | Insufficient documentation to process payment |
| | Signature or date not present |
| | System shows invoice paid |
| | Budget Account Number (Line Item) is missing – Acct # |
| 0 | Insufficient budget in Line Item |
| | Payment Request inconsistent with County Policy |
| | Other |
| | e provide the additional documentation or explanation necessary to process this payment st. This notice must remain attached to the payment request. |
| Additi | onal explanation: |
| - | |
| The | Department Head or Elected or Appointed Official must sign this form |
| HIE | Department head of Elected of Appointed Official must sign this form |

confirming notification that the Navarro County Purchasing Policy was not

1.14.25

Date



NAVARRO COUNTY AUDITOR'S OFFICE

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Charles Adams, County Auditor.

followed on

Signature

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| | | INTEROF | FICE MEMO | | | | : |
|--|---|--------------------|--|--------------|---|--|-----------|
| The a | ttached item is being | returned for the | following reaso | ns. | | | ;.· |
| X | Item incurred before | e purchase order | issued | | | • | : |
| , | Purchase order nun | nber is inconsiste | ent with invoice | | | | . • : |
| • | Amount billed does | not match the pu | urchase order | | | | |
| a | Vendor on purchase | e order does not | match invoice | | | l . | |
| | Insufficient docume | ntation to proces | s payment | Pro Pro Pro | | | - 7,1, |
| ۵ | Signature or date no | ot present | | | | | ٠٠: |
| | System shows invoi | ce paid | i er i juga da sa Sinsara da Sinsara da sa | | | | |
| | Budget Account Nu | mber (Line Item) | is missing – A | cct # | · | ************************************** | • |
| | Insufficient budget in | n Line Item | | | | | · |
| | Payment Request in | nconsistent with | County Policy | | | | · |
| | Other | | | | | | 114 |
| | provide the additional st. This notice must re | | | | process | ınıs paym | ent |
| Additio | onal explanation: | | | 11.11.1 | | | # Jan. |
| ······································ | | | | .,.* * * . * | - : : : : : : : : : : : : : : : : : : : | | |

8.14-

Date



Knife River Corporation - South **Central Texas Division** P.O. Box 674 Bryan, Texas 77806 Phone: (979) 361-2900

RECEIVED

AUG 1 1 2025

NAVARRO COUNTY AUDITOR'S OFFICE

BILL TO:

NAVARRO COUNTY PRECINCT 3 300 W 3RD AVE, SUITE 4 **CORSICANA TX 75110-0000**

ORIGINAL

| INVOICE | | | | | | | |
|---------|--------------|--------|--|--|--|--|--|
| | INVOICE NU | MBER | | | | | |
| | 969986 | | | | | | |
| | INVOICE DATE | PAGE | | | | | |
| | 08/07/25 | 1 of 1 | | | | | |
| | CUSTOMER N | IUMBER | | | | | |

61221 **BRANCH PLANT**

392810 KR - CTD MADDOX/SKY PIT SALES ORDER NUMBER

871177 **CUSTOMER P.O.**

| | TERMS | | NET DUE DATE | | DELIVERY AD | DR | ESS | |
|--|----------------------|-----------------------------|---|--------------------------------------|---|----------------|--------------------|--|
| N | let 30 Days - KR - 0 | СТБ | 09/06/25 | yard | | | | |
| | | | SPECIAL INSTRU | CTIONS | | | | |
| TICKET | ITEM | | DESCRIPTION | TRUCK | QUANTITY | MOC | UNIT PRICE | EXTENDED PRICE |
| 7494464* 7494493 7494511* 7494530 | T39498 T39498 | TRU FLE | X BASE TY A GR 1-27 380 X BASE TY A GR 1-2 X BASE TY A GR 1-2 X BASE TY A GR 1-2 Subtotal Product | JWM859 JWM859 JWM859 JWM859 | 22.93 23.70 24.98 24.06 95.67 | TN TN TN | 14.0000 14.0000 | 321.0; 331.8; 349.7; 336.8; 1,339.3; |
| | | Debit: Desc: SPO#: Invoice# | | | | | | |
| | | Vendon | | V | | | | |
| | | | | | | | | |

TOTAL SUBTOTAL SALES TAX DISCOUNT **TAXABLE AMOUNT: NONTAXABLE AMOUNT:** 1,339.38 1,339.38 1,339.38

All accounts not paid within 30 days of delivery will bear interest at the rate of 18% per annum.



BILL TO:

P.O. Box 674 Bryan, Texas 77806 Phone: (979) 361-2900

RECEIVED

AUG 11 2025

NAVARRO COUNTY AUDITOR'S OFFICE

NAVARRO COUNTY PRECINCT 3 300 W 3RD AVE, SUITE 4 **CORSICANA TX 75110-0000**

Knife River Corporation - South **Central Texas Division**

ORIGINAL

INVOICE INVOICE NUMBER 970082 INVOICE DATE PAGE 08/08/25 1 of 1 **CUSTOMER NUMBER** 61221 **BRANCH PLANT** 392810 KR - CTD MADDOX/SKY PIT

SALES ORDER NUMBER

871319 CUSTOMER P.O.

332.92

| TERMS | NET DUE DATE | DELIVERY ADDRESS | |
|------------------------|--------------|------------------|--|
| Net 30 Days - KR - CTD | 09/07/25 | YARD | |

SPECIAL INSTRUCTIONS EXTENDED TICKET TRUCK QUANTITY ITEM DESCRIPTION UNIT PRICE PRICE TRU FLEX BASE TY A GR 1-25W 0380 7494700' T39498 JWM859 23.78 TN 14.0000 332.92 Subtotal Product 23.78 TN 332.92 PO#: N/A DISCOUNT SUBTOTAL SALES TAX TOTAL TAXABLE AMOUNT:

All accounts not paid within 30 days of delivery will bear interest at the rate of 18% per annum.

332.92

NONTAXABLE AMOUNT:

332.92



Knife River Corporation - South **Central Texas Division** P.O. Box 674 Bryan, Texas 77806 Phone: (979) 361-2900

AUG 11 2025

NAVARRO COUNTY AUDITOR'S OFFICE

NAVARRO COUNTY PRECINCT 3 BILL TO:

300 W 3RD AVE, SUITE 4 CORSICANA TX 75110-0000 **ORIGINAL**

INVOICE

INVOICE NUMBER

969800

INVOICE DATE 08/05/25

PAGE 1 of 1

CUSTOMER NUMBER

61221

BRANCH PLANT

392810

KR - CTD MADDOX/SKY PIT

SALES ORDER NUMBER

871020

| | | | | | | CU | STOMER P.O | |
|--|--|---|--|--|--|--|---|--|
| | TERMS | NET D | UE DATE | | DELIVERY AL | DDRE | SS | |
| N | let 30 Days - KR - CTI | 90 | 0/04/25 | | yard | | | |
| | | | SPECIAL INSTRUCT | IONS | | | | |
| | | | | | | | | |
| TICKET | ITEM | DES | CRIPTION | TRUCK | QUANTITY | MOM | UNIT PRICE | EXTENDED PRICE |
| 7494159 7494160 7494174 7494182 7494193 7494196 7494216 7494222 | T39498 T39498 T39498 T39498 T39498 T39498 | | GR 1-25W 2030 GR 1-25W 2380 GR 1-25W 2030 GR 1-25W 2380 GR 1-25W 2380 GR 1-25W 2380 | JWM859 NAV316 JWM859 NAV316 JWM859 NAV316 JWM859 NAV316 | 23.72 21.63 24.35 23.41 24.82 22.72 24.51 23.12 188.28 | TN TN TN TN TN TN TN | 14.0000 14.0000 14.0000 14.0000 14.0000 14.0000 14.0000 | 332.08 302.82 340.90 327.74 347.48 318.08 343.14 323.68 2,635.92 |
| | | PO#: N/A Invoice#: 910° Vendor#: 55 | 800 | | | | | |
| TAXABI F | AMOUNT: | | SUBTOTAL | SALES TAX | DISC | COUN | т | TOTAL |
| | BLE AMOUNT: | 2,635.92 | 2,635.92 | | | | 1 | 2,635.92 |

All accounts not paid within 30 days of delivery will bear interest at the rate of 18% per annum.