

#12

PURCHASE ORDER
NAVARRO COUNTY
300 WEST 3RD AVENUE, SUITE 4
CORSICANA, TX 75110
PHONE: (903) 654-3095
FAX: (903) 654-3097

325185

TAX EXEMPT #75-6001092

12/09/2025
PP 03/2026

PAYMENT TERMS: TEXAS PROMPT PAYMENT ACT

VENDOR: 008551 FIVE STAR CHEVROLET LLC GENERAL FUND
1735 S I-35
CARROLLTON, TX 75006 PLANNING & DEVELOPMENT

Qty	Description	Account	Item Amount	Item Total
1	2025 SILVERADO 1500 LT BUYBOARD #724-23	101-402-575	54,977.15	54,977.15

GRAND TOTAL 54,977.15

APPROVED BY:



DATE

12-17-23

NATALIE ROBINSON / CHARLES ADAMS

ELECTRONIC INVOICES SHALL BE SENT TO AUDITOR@NAVARROCOUNTY.ORG

PAYMENT WILL BE MADE IN ACCORDANCE WITH TEXAS PROMPT PAYMENT ACT, TGC, SUBTITLE F, CHAPTER 2251. BUDGET PROVISIONS HAVE BEEN MADE & FUNDS ARE OR WILL BE AVAILABLE TO MEET THIS OBLIGATION WHEN DUE, PROVIDED THERE IS PROPER & LEGAL PERFORMANCE.

12-9-2025



RECEIVED
DEC 09 2025
NAVARRO COUNTY
AUDITOR'S OFFICE

Departmental Purchase Requisition

Company Sam Pack Five Star chevrolet

Budget Number _____

Address _____

Request Date 12-9-2025

City _____

Phone Number 903-875-3313

State/Province _____

Zip/Postal Code _____

Fax Number _____

Country _____

Contact Name _____

Stock No.	Description	Supplier	Quantity	Unit Cost	Amount
	2025 Silverado 1500LT				\$54,977.15
Comments			Total		
			Shipping Charge		
			Grand Total \$54,977.15		

Authorized By Elected/Appointed Official

Date

12-9-2025

Return To: Navarro County Auditor's Office
300 West 3rd Avenue, Suite 10
Corsicana, TX 75110

Auditor Use Only

Vendor No: _____

Purchase Order No: _____

G/L Account No: _____

Auditor Approval: _____

#12

Sam Pack's Five Star Chevrolet

INVOICE

Takin' Care of Business!

Remit to:

PO Box 110098

Carrollton, Texas 75011-0098

Phone 888.835.3389 Fax 972.245.5278

**PLEASE FORWARD/PROCESS THESE DOCUMENTS
FOR PAYMENT AND LICENSING**

ORIGINAL INVOICE - REMIT FOR PAYMENT

DATE: December 18, 2025

INVOICE # SZ341576

Bill To:

NAVARRO COUNTY

300 WEST 3RD AVE

SUITE 4

CORSICANA, TX 75110

Ship To:

SAME


RECEIVED

DEC 18 2025

NAVARRO COUNTY
AUDITOR'S OFFICE

Comments or Special Instructions: INTERNAL TRACKING NO.: PO 5051

SALESPERSON	P.O. NUMBER	SHIP DATE	SHIP VIA	F.O.B. POINT	TERMS
MOORE	325185		DRIVER		NET 10 DAYS

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
1	2025 CHEVROLET SILVERADO  Debit: _____ Desc: _____ PO#: _____ Invoice#: _____ Vendor#: _____	\$ 54,977.15	54,977.15

Wiring Instructions:

Remit To: BBVA Compass Bank

8080 W. Central Expressway

Suite 1500 Dallas TX 75206

ABA 113010547

ACCT 6725895982

Bank Contact Elaine Grad

972.735.3542

SUBTOTAL \$ 54,977.15

TAX RATE 0.00%

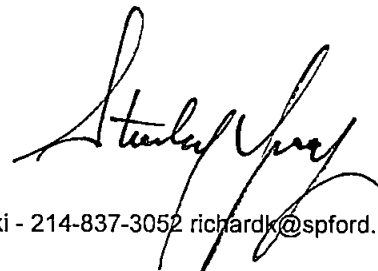
SALES TAX -

SHIPPING & HANDLING -

TOTAL \$ 54,977.15

Make all checks payable to **Sam Pack's Five Star Chevrolet**

If you have any questions concerning this invoice, contact Richard Kopczynski - 214-837-3052 richardk@spford.com



THANK YOU FOR YOUR BUSINESS!

Application for Texas Title and/or Registration

DEAL# 133211
CUST# 133217

Applying for (please check one): <input checked="" type="checkbox"/> Title & Registration <input type="checkbox"/> Title Only <input type="checkbox"/> Registration Purposes Only <input type="checkbox"/> Nontitle Registration						TAX OFFICE USE ONLY		
For a corrected title or registration, check reason: <input type="checkbox"/> Vehicle Description <input type="checkbox"/> Add/Remove Lien <input type="checkbox"/> Other: <u>N/A</u>						County: _____ Doc #: _____ <input type="checkbox"/> SPV <input type="checkbox"/> Appraisal Value \$ _____		
1. Vehicle Identification Number		2. Year	3. Make	4. Body Style	5. Model	6. Major Color	7. Minor Color	
<u>[REDACTED]</u>		2025	CHEVROLET		SILVERADO	WHITE	BLACK	
8. Texas License Plate No.	9. Odometer Reading (no tenths)	10. This is the Actual Mileage unless the mileage is:			11. Empty Weight	12. Carrying Capacity (if any)		
	15	<input type="checkbox"/> Not Actual <input type="checkbox"/> Exceeds Mechanical Limits <input type="checkbox"/> Exempt				N/A		
13. Applicant Type						14. Applicant Photo ID Number or FEIN/EIN		
<input type="checkbox"/> Individual <input type="checkbox"/> Business <input type="checkbox"/> Government <input type="checkbox"/> Trust <input type="checkbox"/> Non-Profit						N/A		
15. ID Type								
<input checked="" type="checkbox"/> U.S. Driver License/ID Card (issued by: _____) <input type="checkbox"/> NATO ID <input type="checkbox"/> U.S. Dept. of State ID <input type="checkbox"/> Passport (issued by: <u>N/A</u>) <input type="checkbox"/> U.S. Military ID <input type="checkbox"/> U.S. Dept. of Homeland Security ID <input type="checkbox"/> U.S. Citizenship & Immigration Services/DOJ ID <input type="checkbox"/> Other Military Status of Forces Photo ID								
16. Applicant First Name (or Entity Name)		Middle Name		Last Name		Suffix (if any)		
NAVARRO COUNTY								
17. Additional Applicant First Name (if applicable)		Middle Name		Last Name		Suffix (if any)		
N/A		N/A		N/A		N/A		
18. Applicant Mailing Address		City		State		Zip		
300 WEST 3RD AVE SUITE 4		CORSICANA		TX		75110		
19. Applicant County of Residence		NAVARRO						
20. Previous Owner Name (or Entity Name)		City		State		21. Dealer GDN (if applicable)		
FIVE STAR CHEVROLET		CARROLLTON		TX		<u>P127206</u>		
22. Unit No. (if applicable)								
23. Renewal Recipient First Name (or Entity Name) (if different)		Middle Name		Last Name		Suffix (if any)		
N/A		N/A		N/A		N/A		
24. Renewal Notice Mailing Address (if different)		City		State		Zip		
N/A		N/A		N/A		N/A		
25. Applicant Phone Number (optional)		26. Email (optional)		27. Registration Renewal eReminder		28. Communication Impediment?		
				<input type="checkbox"/> Yes (Provide Email in #26)		<input type="checkbox"/> Yes (Attach Form VTR-216)		
29. Vehicle Location Address (if different)		City		State		Zip		
N/A		N/A		N/A		N/A		
30. Multiple (Additional) Liens		31. Electronic Title Request		32. Certified/eTitle Lienholder ID Number (if any)		33. First Lien Date (if any)		
<input type="checkbox"/> Yes (Attach Form VTR-267)		<input checked="" type="checkbox"/> Yes (Cannot check #30)				NONE		
34. First Lienholder Name (if any)		Mailing Address		City		State		
CASH								
35. Check only if applicable:								
<input type="checkbox"/> I hold Motor Vehicle Retailer (Rental) Permit No. <u>N/A</u> and will satisfy the minimum tax liability (V.A.T.S., Tax Code §152.046(c)) <input type="checkbox"/> I am a dealer or lessor and qualify to take the Fair Market Value Deduction (V.A.T.S., Tax Code §152.002(c)). GDN or Lessor Number _____								
36. Trade-In (if any)		Year		Make		Vehicle Identification Number		
<input type="checkbox"/> Yes (Complete)		N/A						
37. Additional Trade-In(s)								
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A								
38. Check only if applicable:								
SALES AND USE TAX COMPUTATION								
(a) Sales Price (\$ _____ rebate has been deducted)		\$ 54977.15		<input type="checkbox"/> \$90 New Resident Tax – (Previous State) <u>N/A</u>				
(b) Less Trade-in Amount, described in Box 36 above		\$ (_____)		<input type="checkbox"/> \$5 Even Trade Tax				
(c) For Dealers/Lessors/Rental ONLY – Fair Market Value Deduction, described in Box 36 above		\$ (_____)		<input type="checkbox"/> \$10 Gift Tax – Attach Comptroller Form 14-317				
(d) Taxable Amount (Item a minus Item b or Item c)		\$ 54977.15		<input type="checkbox"/> \$65 Rebuilt Salvage Fee				
(e) 6.25% Tax on Taxable Amount (Multiply Item d by .0625)		\$ _____		<input type="checkbox"/> 2.5% Emissions Fee (Diesel Vehicles 1996 and Older > 14,000 lbs.) <u>N/A</u>				
(f) Late Tax Payment Penalty <input type="checkbox"/> 5% or <input type="checkbox"/> 10%		\$ _____		<input type="checkbox"/> 1% Emissions Fee (Diesel Vehicles 1997 and Newer > 14,000 lbs.) <u>N/A</u>				
(g) Tax Paid to _____ (STATE)		\$ _____		<input checked="" type="checkbox"/> Exemption claimed under the Motor Vehicle Sales and Use Tax Law because: <u>N/A Public Agency</u>				
(h) AMOUNT OF TAX AND PENALTY DUE (Item e plus Item f minus Item g)		\$ _____		<input type="checkbox"/> \$28 or \$33 Application Fee for Texas Title (Contact your county tax assessor-collector for the correct fee.)				
CERTIFICATION – State law makes falsifying information a third degree felony I certify all statements in this document are true and correct to the best of my knowledge and belief, and I am eligible for title and/or registration (as applicable). I also certify (check if applicable): <input type="checkbox"/> I have physically inspected the vehicle described and verified the vehicle identification number above. <input type="checkbox"/> The vehicle is unrecovered stolen, and I am unable to verify the vehicle identification number above. <input type="checkbox"/> I am applying for a corrected title and the original Texas Certificate of Title is lost or destroyed.								
Signature(s) of Seller(s), Donor(s), or Trader(s)		FIVE STAR CHEVROLET		U. Marshall		12/18/2025		
		Printed Name(s) (Same as Signature(s))				Date		
Signature of Applicant/Owner		NAVARRO COUNTY				12/18/2025		
		Printed Name (Same as Signature)				Date		
N/A		N/A		N/A		N/A		
Signature(s) of Additional Applicant(s)/Owner(s)		Printed Name(s) (Same as Signature(s))				Date		

Customer's Name: NAVARRO COUNTYDeal/Stock No.: SZ341576**ODOMETER DISCLOSURE STATEMENT**

Federal law (and State law, if applicable) requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

I, FIVE STAR CHEVROLET (transferor's name, Print) state that the odometer now reads 15 (no tenths) miles and to the best of my knowledge that it reflects the actual mileage of the vehicle described below, unless one of the following statements is checked.

☐ (1) I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.

☐ (2) I hereby certify that the odometer reading is **NOT** the actual mileage.
WARNING - ODOMETER DISCREPANCY.

MAKE	MODEL	BODY TYPE
CHEVROLET	SILVERADO	
VEHICLE IDENTIFICATION NUMBER	YEAR	
1GCPKKEK6SZ341576	2025	

X *C. Marshall*
TRANSFEROR'S SIGNATURE

FIVE STAR CHEVROLET
PRINTED NAME

1735 S. INTERSTATE 35 E
TRANSFEROR'S ADDRESS (STREET)

CARROLLTON
CITY

TX
STATE

75006
ZIP CODE

12/18/2025
DATE OF STATEMENT

X
TRANSFEREE'S SIGNATURE

NAVARRO COUNTY
PRINTED NAME

NAVARRO COUNTY
TRANSFEREE'S NAME

300 WEST 3RD AVE SUITE 4
TRANSFEREE'S ADDRESS (STREET)

CORSICANA
CITY

TX
STATE

75110
ZIP CODE

CERTIFICATE OF ORIGIN FOR A VEHICLE

2482



DATE

07/03/25

VEHICLE IDENTIFICATION NO.

[REDACTED]

YEAR

2025

RBLPD019

INVOICE NO.

10D08736836

MAKE

CHEVROLET

BODY TYPE

SILVERADO 4WD CREW CAB PICKUP

SHIPPING WEIGHT

4884

H.P. (S.A.E.)

21.1

G.V.W.R.

7000

NO. CYLS.

04

SERIES OR MODEL

CK10543

N.T.R.

1/2

I, the undersigned authorized representative of the company, firm or corporation named below, hereby certify that the new vehicle described above is the property of the said company, firm or corporation and is transferred on the above date and under the Invoice Number indicated to the following distributor or dealer.

NAME OF DISTRIBUTOR, DEALER, ETC.

07035 DVDZ5R

SAM PACK'S FIVE STAR CHEVROLET

PO BOX 111846

CARROLLTON

TX 75011

It is further certified that this was the first transfer of such new vehicle in ordinary trade and commerce.

* THIS VEHICLE *

* HAS A *

* 50-STATE *

* EMISSION *

* SYSTEM *

GENERAL MOTORS LLC

BY:

(SIGNATURE OF AUTHORIZED REPRESENTATIVE)

(AGENT)

DETROIT

MI 48243-1114

CITY STATE

G96321301

GM 521 REV. 10-05



Texas Department
of Motor Vehicles

Application for Standard Texas Exempt License Plates

County Use Only

License No _____

Mo/Yr of Exp _____

Date Issued _____

Instructions

Submit a completed application for vehicles operated or leased by a qualifying governmental entity to your local county tax assessor-collector's office. This application may be used for up to six (6) vehicles. If the vehicle is leased, attach a copy of the lease agreement.

If the entity is a *volunteer fire department* or *emergency ambulance service*, complete one of the applications listed below in lieu of this application:

- Volunteer fire department – *Application for Exempt Registration of Certain Rescue Vehicles* (Form VTR-62-F)
- Emergency ambulance service – *Application for Exempt Registration of an Emergency Medical Services Vehicle* (Form VTR-62-EMS)

NOTE: A federal tax exemption status or the assignment of a Comptroller I.D. number *does not* qualify a vehicle for exempt license plates.

Vehicle Requirements

Exempt vehicles must ensure proper inscription as required by Texas Transportation Code Chapter 721. United States government owned vehicles are exempt from the inscription requirements in Chapter 721.

Exempt Organization Information

Name of Governmental Entity NAVARRO COUNTY		Department/Office	
Authorized Agent First Name	Middle Name	Last Name	Suffix
Address 300 WEST 3RD AVE		City CORSICANA	State TX
Email		ZIP 75110	
Phone Number		Phone Number	

Exempt Vehicle Information

	Year Model	Vehicle Make	Body Style	Vehicle Identification Number	Empty Weight (lbs.)	COUNTY USE ONLY Plate Issued
1	2025	CHEV	PK		5000	
2						
3						
4						
5						
6						

Certification - State law makes falsifying information a third degree felony.

I certify I am authorized to sign this application on behalf of a qualifying governmental entity, and the vehicle(s) display the name of the governmental entity on each side of the vehicle as specified above.

12/18/2025

Authorized Agent Signature

Date