

**Request for Funds from Navarro Community Foundation Grant**

Department Name: \_\_\_\_\_

What is being purchased: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount of Invoice: \_\_\_\_\_

Name of person submitting request: \_\_\_\_\_

Email of requestor: \_\_\_\_\_

Phone of requestor: \_\_\_\_\_

Pay company directly       Reimburse department

(Check one)

You must attach the invoice to this request

Mail to:

John Gantt  
905 Shady Ln.  
Corsicana, TX 75109  
(817) 832-0141  
[John\\_gantt@att.net](mailto:John_gantt@att.net)