

COLUMBIA COUNTY

DEPARTMENT AUTHORIZATION FOR BUSINESS USE OF EMPLOYEE'S PERSONAL CELL PHONE

Employee Name: _____

Employee ID#: _____

Employee's Personal Cell Phone Number: _____

Base Monthly Plan Amount: \$40 \$60 \$120 Push to Talk: \$5 \$10

County Department: _____

Department Contact: _____ Phone No.: _____

Email: _____

As Department Manager/Director, I verify that the employee listed above is required, due to legitimate business need, to maintain a cell phone to conduct official COUNTY business. I hereby authorize the employee listed above to use his/her personal cell phone for conducting official COUNTY business. The Department will pay the employee a cell phone requirement allowance for using his/her personal cell phone in accordance with the County's "Cell Phone Usage & Reimbursement Policy."

Approval:

Department Manager Signature _____ Employee Signature _____

Title _____ Date _____

Division Director/Constitutional Official Signature _____ Date _____

Committee Approval: Yes No

*****Please attach a copy of the first page of your cell phone bill to this form, (to document that you have a cell phone and your monthly plan cost). Both the employee and the Department should retain a copy.**