



## COUNTY EMPLOYEE CELL PHONE STIPEND APPLICATION

Date: 5/28/25 Department: 72000

ID # 13737

Position # and Title: 874 Foreman

Type of Service Requested (circle one): \$20/month – voice service only  
\$40/month – voice and data  
\$70/month – Department Heads/Assistants with Data

Justification: Voice calls to vendors for material delivery coordination.  
Calls to complainants for service request communications.  
Data for email communication.

Check one: ☐ I have/will be turning in my county issued cell phone to IS. Date turned in: \_\_\_\_\_  
☐ I have/will be having the county cell phone issued to me and will obtain service through a phone provider of my choosing. Date issued \_\_\_\_\_  
☒ I currently do not have a county issued cell phone and am requesting a stipend.

I have read, understand and have received a copy of the Brazoria County Cell Phone Policy Changes, which was approved by Commissioners' Court on November 12, 2014. Furthermore, I understand that the above stated amount will be received by me through payroll once all necessary approval is granted.

[Signature]  
Employee's Signature

Approved: ☒ Yes ☐ No

Department Head's Signature/ Commissioners' Court Liaison

Signed by:

Yes ☐ No ☐

Kaysie Stewart

Auditor's Office Signature

Signed by:

X Yes ☒ No ☐

Holly Fox

Human Resources Office Signature

Court Order request sent to County Judge's office for Commissioners' Court approval: \_\_\_\_\_