Outside District Claim Form

District:	Cameron Estates CSD
Date:	11/21/2024
Prepared By:	Joy Regglardo
Contact Phone:	(530) 677-5889

AUDITOR USE ONLY

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THE ARTICLES FOR SERVICES DESCRIBED BY THE INVOICE(S) ATTACHED AND LISTED BELOW WERE APPROVED AND ARE INCLUDED IN THE DISTRICT BUDGET THAT HAS BEEN ADOPTED BY THE BOARD OF DIRECTORS AND WERE NECESSARY FOR USE BY THE DISTRICT AND HAVE BEEN DELIVERED OR PERFORMED AND THAT NO PRIOR CLAIM HAS BEEN PRESENTED FOR SAID ARTICLES OR SERVICES. I FURTHER CERTIFY I AM AUTHORIZED BY THE BOARD OF DIRECTORS TO APPROVE PAYMENT REQUESTS TO THE AUDITOR-CONTROLLER FOR THE ATTACHED INVOICE(S).

Authorizing signatures: Angela Johnson

ALWAYS 1	VENDOR	SUFFIX	Invoice Number (Limit 20)	AMOUNT	FILE NAME	DATE	ALWAYS 2	ORG	OBJECT	DESCRIPTION (LIMIT 50 CHARACTERS)	AMOUNT	VENDOR NAME	SINGLE CHECK
1	1881	0	Johnson 11/21/24	80.00	CECSD 112124	11/21/24	2	8024000	4345	CECSD- Board Meeting	80.00	Angela Johnson	
1	14631	0	Thomson 11/21/24	80.00	CECSD 112124	11/21/24	2	8024000	4345	CECSD- Board Meeting	80.00	Richard Thomson	
1	12893	0	Reese 11/21/24	80.00	CECSD 112124	11/21/24	2	8024000	4345	CECSD- Board Meeting	80.00	Peter Reese	
1	14607	0	Panages 11/21/24	80.00	CECSD 112124	11/21/24	2	8024000	4345	CECSD- Board Meeting	80.00	Thomas Panages	
1	7691	0	2668	4980.00	CECSD 112124	11/21/24	2	8024000	4180	CECSD - Replace SHills Motor-Auto Accident 11/5	4980.00	Capitol Iron	

DOC: