Outside District Claim Form

District:	Cameron Estates CSD
Date:	3/28/2024
Prepared By:	Joy Regglardo
Contact Phone:	(530) 677-5889

AUDITOR USE ONLY

DEPT:_____

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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 Pete Reese

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	DOC:
1	1881	0	Johnson 03/21/24	80.00	CECSD 032824	03/28/24	2	8024000	4345	CECSD- Board Meeting	80.00	Angela Johnson		
1	6720	0	Clark 03/21/24	80.00	CECSD 032824	03/28/24	2	8024000	4345	CECSD- Board Meeting	80.00	Joshua Clark		
1	12893	0	Reese 03/21/24	80.00	CECSD 032824	03/28/24	2	8024000	4345	CECSD- Board Meeting	80.00	Peter Reese		
1	9844	0	50	225.00	CECSD 032824	03/28/24	2	8024000	4180	CECSD- Pot Hole Labor	225.00	Isaias Garcia Handyman Services		
1	9844	0	51	255.11	CECSD 032824	03/28/24	2	8024000	4197	CECSD- Blacktop Repair Materials-Reimbursement	255.11	Isaias Garcia Handyman Services		