Outside District Claim Form

District:	Cameron Estates CSD	AUDITOR USE ONLY	PLEASE INDICATE CHECK DISTRIBUTION METHOD IN THE SPACE BELOW:
Date:	6/22/2021		US MAIL: X Return to District:
Prepared By:	Karen Moonitz	DEPT:	Call/Email for pickup:
Contact Phone:	(530)677-8828	FILE NAME:	Document Total: $3004.00
		AUDITED BY: Date:	

PROCESSOR USE ONLY

BATCH:

Entered by:

Date:

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: [signature] 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	PRINT CHECK	DOC
1	1672	0	4612	2980.00	CECSD 062221	06/22/21	2	8024000	4313	CECSD legal services 5/29-5/28/2021	2980.00	McMurchie Law Firm		
1	11128	0	5920	24.00	CECSD 062221	06/22/21	2	8024000	4220	CECSD Mr Security gold membership June 2021	24.00	Mr.Security Camera, Inc.		