Outside District Claim Form

District:	Cameron Estates CSD
Date:	7/15/2021
Prepared By:	Karen Beutelz
Contact Phone:	(530)677-9809

AUDITOR USE ONLY

DEPT:

FILE NAME:

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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:

ALWAYS 1	VENDOR	SUBTR	Invoice Number (Limit 10)	AMOUNT	FILE NAME	DATE	ALWAYS 2	ORG	OBJECT	DESCRIPTION (LIMIT 30 CHARACTERS)	AMOUNT	VENDOR NAME	SEND CHECK	DOC
1	1881	0	Johnson 07/15/2021	80.00	CECSD071521	07/15/21	2	6024000	4345	CECSD Director attend Board Meeting 07/15/2021	80.00	Angela Johnson		
1	6720	0	Clark 07/15/2021	80.00	CECSD 071521	07/15/21	2	6024000	4345	CECSD Director attend Board Meeting 07/15/2021	80.00	Joshua Clark		
1	10837	0	Hamma 07/15/2021	80.00	CECSD 071521	07/15/21	2	6024000	4345	CECSD Director attend Board Meeting 07/15/2021	80.00	Cory Hamma		
1	1265	0	Miller 07/15/2021	80.00	CECSD 071521	07/15/21	2	6024000	4345	CECSD Director attend Board Meeting 07/15/2021	80.00	Doris Miller		

FY 2021-2022