Outside District Claim Form

District:	Cameron Estates CSD
Date:	2/15/2022
Prepared By:	Karen Moonitz
Contact Phone:	(530) 677-5889

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	SUFFIX	Invoice Number (Limit 20)	AMOUNT	FILE NAME	DATE	ALWAYS 2	ORG	OBJECT	DESCRIPTION (LIMIT 50 CHARACTERS)	AMOUNT	VENDOR NAME	SINGLE CHECK	DOC:
1	9844	0	25	315.00	CECSD 021522	02/15/22	2	8024000	4180	CECSD Handy man work hours 01/15/2022	315.00	Isaias Garcia		
1	9844	0	01/10/2022	36.73	CECSD 021522	02/15/22	2	8024000	4197	CECSD Handy man work materials 01/10/2022	36.73	Isaias Garcia		
1	308	0	02/12/2022	3900.00	CECSD 021522	02/15/22	2	8024000	4191	CECSD Roadside weed spray 02/12/2022	3900.00	El Dorado Weed Control		