

District: <u>Cameron Earias CSD</u>		Outside District Claim Form	PLEASE INDICATE CHECK DISTRIBUTION METHOD IN THE SPACE BELOW:		PROCESSOR USE ONLY
Date: <u>1/17/2022</u>			US MAIL: <input checked="" type="checkbox"/> <u>Return to District:</u>		
Prepared By: <u>Joy Rosgard</u>			Checkroll for pickup:		
Contact Phone: <u>(530) 877-5889</u>			Document Total: <u>\$320.00</u>		
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authorizing signatures:

Amelia Jones

SK



ALWAYS	VENDOR	CURFUT	Invoice Number (Line 20)	AMOUNT	FILE NAME	DATE	ALWAYS	ORG	OBJECT	DESCRIPTION (LIMIT TO CHARACTERS)	AMOUNT	VENDOR NAME	DOC.	SINGLE CHECK
1	1861	0	Johnson 11/17/2022	80.00	CECSD0111722	11/17/2022	2	8024000	4345	CECSD Director attend Board Meeting 11/17/2022	80.00	Angela Johnson		
1	6720	0	Clark 11/17/2022	80.00	CECSD0111722	11/17/2022	2	8024000	4345	CECSD Director attend Board Meeting 11/17/2022	80.00	Joshua Clark		
1	10637	0	Hammia 11/17/2022	80.00	CECSD0111722	11/17/2022	2	8024000	4345	CECSD Director attend Board Meeting 11/17/2022	80.00	Cory Hammia		
1	1255	0	Miller 11/17/2022	80.00	CECSD0111722	11/17/2022	2	8024000	4345	CECSD Director attend Board Meeting 11/17/2022	80.00	Doris Miller		

[illegible]