

Disriict:	Cameron Estates CSD
Date:	6/28/2025
Prepared By:	Joy Regglando
Contact Phone:	(530) 677-5689

DEPT: _____
FILE NAME: _____

Date:

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 ADULTS INVOLVED ON THE APPROVED REQUEST.

11/11/2011

Signature of the Applicant

PROCESSOR USE ONLY

BATCH:

BATCH:

[illegible]

Document Total: \$785.17

1000

Date:

[illegible]