

Outside District Claim Form		PROCESSOR USE ONLY	
District:	Cameron Estates CSD	METHOD IN THE SPACE BELOW:	
Date:	9/19/2025	AUDITOR USE ONLY	
Prepared By:	Joy Regglando	BATCH:	
Contact Phone:	(350) 677-5689	US MAIL: X	
DEPT: _____		Return to District:	
FILE NAME: _____		Call/fax for pickup:	
		Document Total: \$219,173.37	
		Entered by:	

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:

[illegible]