

District:	Cameron Estates CSD	AUDITOR USE ONLY
Date:	8/29/2024	
Prepared By:	Joy Reggardo	
Contact Phone:	(530) 677-5889	
		DEPT: _____
		FILE NAME: _____

Date:

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Amount	Vendor	Supplier	Invoice Number (Limit 20)	Amount	File Name	Date	Account	Orig	Object	Description (Limit 60 Characters)	Amount	Vendor Name	Single Check
1	1080	0	3512 07/28/24	162.09	CECSD 082924	08/29/24	2	8024000	4700	CECSD P.G.R.E. Statement /723/24	162.09	U S Bank	
1	1080	0	3512 08/05/24	50.00	CECSD 082924	08/29/24	2	8024000	4143	CECSD Stanline	50.00	U S Bank	
1	1080	0	3512 08/10/24	83.75	CECSD 082924	08/29/24	2	8024000	4040	CECSD At&T Statement 08/01/24	83.75	U S Bank	
1	1080	0	3512 08/12/24	330.00	CECSD 082924	08/29/24	2	8024000	4040	CECSD WSC IntegratorVt Mobile	330.00	U S Bank	
1	1080	0	3512 08/18/24	99.50	CECSD 082924	08/29/24	2	8024000	4538	CECSD Drive	99.50	U S Bank	
1	1080	0	3512 08/16/24	702.98	CECSD 082924	08/29/24	2	8024000	4040	CECSD At&T Statement 08/10/24	702.98	U S Bank	

[illegible]