Vouchers #1 Payables Interface CV1
(Permanent Vendors) - Outside District

District Name:Cameron Estates CSD

Date: 8/19/2019

Prepared By: Karen Moonitz

Contact Phone (ext)

CECSD ClaimVoucher 8/19/2019

Record:

Number	Interfaced By	Batch Date

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I HEREBY CERTIFY THAT THE ARTICLES OR SERVICES DESCRIBED BY THE INVOICE(S) ATTACHED AND LISTED BELOW 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:

Authorizing signatures:

Date: Aug., 19, 2019

LINE NO.	TRANS CODE	INDEX CODE	SUB OBJECT	USER CODE NUMBER	AMOUNT	DESCRIPTION (LIMIT 50 CHARACTERS)	VENDOR NUMBER	VENDOR SUFFIX	SINGLE CHECK	VENDOR NAME
1	210	8024000	4300		200.00	CECSD Consultant Invoice 6 12/27/18-6/6/19	018985	01		Angela Johnson
						FY 2018/2019				