

Outside District Claim Form

District:	Cameron Estates CSD	AUDITOR USE ONLY		PLEASE INDICATE CHECK DISTRIBUTION METHOD IN THE SPACE BELOW:		PROCESSOR USE ONLY
Date:	3/13/2020					BATCH:
Prepared By:	Karen Moonitz	DEPT:		US MAIL: <input checked="" type="checkbox"/> Return to District:		
Contact Phone:	(330) 677-5889	FILE NAME:		Call email for pickup:		Entered by:
				Document Total:		Date:
				\$30,381.00		

THE ARTICLES FOR SERVICES DESCRIBED BY THE INVOICES 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 ACTION CLAIM HAS BEEN PRESENTED FOR SAID ARTICLES OR SERVICES. (FURTHER CERTIFY I AM AUTHORIZED BY THE BOARD OF DIRECTORS TO APPROVE PAYMENT REQUESTS TO THE AUDITOR-CONTROLLER FOR THE ATTACHED INVOICES).

Authorizing signatures: *Allen Stille* *Angela Johnson*

ALWAYS 1	VENDOR	SUPPL	INVOICE NUMBER (LIMIT 20)	AMOUNT	FILE NAME	DATE	ALWAYS 2	ORG	SUBJECT	DESCRIPTION (LIMIT 60 CHARACTERS)	AMOUNT	VENDOR NAME	SINGLE CHECK	DOC
1	4946	0	328169	30381.00	CECSD 001320	03/13/20	2	8024000	4303	CECSD Road work per contract 2172020	30381.00	Doug Veerkamp		
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