

Vouchers Payables CV1 Outside District

PLEASE INDICATE CHECK DISTRIBUTION

District Name: Golden West CSD		AUDITOR USE ONLY	
Date: 9/1/2018	Copy:	Copied By	Copy Date
Prepared By: Audrey B Keebler	Scan:	Scanned By	Scan Date
Contact Phone: 530-620-6844	Audit:	Audited By	Audit Date

METHOD IN THE SPACE BELOW:

US Mail:

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Document Total: \$1,467.54

AUDITOR USE ONLY

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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:

Date:

LINE NO.	TRANS CODE	INDEX CODE	SUB OBJECT	AMOUNT	DESCRIPTION (LIMIT 50 CHARACTERS)	VENDOR NUMBER	VENDOR SUFFIX	SINGLE CHECK	VENDOR NAME	CV#
1	201	801 1000	4300	750.00	GWCSGD GM Consult Inv 07312018-045	019672	01	X	EL White Enigma Mgt Services	CV#
2	201	801 1000	4041	402.18	GWCSGD Temp Signage re Bd Openings	019672	01			CV#
3	201	801 1000	4260	134.19	GWCSGD Office Supplies	019672	01			CV#
4	201	801 1000	4261	96.48	GWCSGD Mailing	019672	01			CV#
5	201	801 1000	4602	44.69	GWCSGD GM Consult Mileage	019672	01			CV#
6	201	801 1000	4313	40.00	GWCSGD Legal Services	016885	01		McMurchie Law Firm	CV#
7										CV#
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15										CV#

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Prepared By: Audrey B Keebler	Scan:	Scanned By	Scan Date	Call for pickup: _____		CODED BY:	
Contact Phone: 530-620-6844	Audit:	Audited By	Audit Date	Document Total: \$1,157.51			

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).

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LINE NO.	TRANS CODE	INDEX CODE	SUB OBJECT	AMOUNT	DESCRIPTION (LIMIT 50 CHARACTERS)	VENDOR NUMBER	VENDOR SUFFIX	SINGLE CHECK	VENDOR NAME	CV#
1	201	801 1000	4100	1,157.51	GWCSO Insurance Inv 64492	008537	01		SDRMA Special Districts Risk Management Authority	CV#
2										CV#
3										CV#
4										CV#
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6										CV#
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Contact Phone: 530-620-6844	Audit:	Audited By	Audit Date
2017-18 Fiscal Year			

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Document Total: \$1,221.51

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1	201	801 1000	4300	540.00	GWCSGD GM Consultant Inv 06302018-044	019672	01	X	EL White Enigma Mgt Services	CV#
2	201	801 1000	4602	58.58	GWCSGD GM Consultant Mileage	019672	01			CV#
3	201	801 1000	4191	600.00	GWCSGD Weed Control Inv 2095	014458	01		All Green Landscape Solutions	CV#
4	201	801 1000	4260	22.93	GWCSGD Reimburse Off. Supplies for audit	025026	01		Audrey Keebler, Bd Member	CV#
5										CV#
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