

TEHAMA COUNTY DEPARTMENT OF EDUCATION
SCHOOL BUSINESS SERVICES

ACCOUNTING SYSTEM – VENDOR CLAIM TRANSMITTAL

FOR DISTRICT: _____ ORG. # _____

PREPARED BY: _____

DATE SUBMITTED
TO COUNTY OFFICE: _____

Approval Batch ID number(s) included: _____
(Note: Payments must be in "audit" status to be processed)

Number of Payments included: _____ Number of **CHECKS**: _____

TOTAL CHECK AMOUNT \$ _____

NORMAL RETURN WILL BE 5 WORKING DAYS. IF THERE IS A NEED FOR A WARRANT TO BE PROCESSED IMMEDIATELY, PLEASE INDICATE THE DATE NEEDED _____ AND **SUBMIT THE SINGLE INVOICE** IN A BATCH BY ITSELF TO BE PROCESSED.

To: Tehama County Department of Education

Subject: District Vendor Warrants

It is hereby certified that the attached invoices and orders are proper charges against the above school district, that all goods and services described thereon have been received in the quantities indicated, and that no prior claims have been presented for any portion thereof. You are hereby authorized to prepare warrants to the order of the named payees, not to exceed the batch total stated above.

AUTHORIZING SIGNATURE: _____
BOARD APPROVAL OR AUTHORIZED AGENT (E.C.42632)

DATE OF APPROVAL: _____

SPECIAL INSTRUCTIONS:

FOR COE ONLY: