

26-1010

RECEIVED  
SUPERIOR COURT OF CALIFORNIA  
May 28 2026  
COUNTY OF TEHAMA  
KEVIN HARRIGAN, CLERK OF THE COURT

COUNTY OF TEHAMA  
STATE OF CALIFORNIA

CLAIM/AUTHORIZATION FOR RELEASE OF FUNDS

CLAIMANT'S NAME: KENT R. CARUSO, PH.D.  
ADDRESS: P.O. BOX 994445  
REDDING, CA. 96099

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 102157	KP & VERIFIED:

(Do not address if transaction is between county departments)

DEPARTMENT: Defense Counsel	DEPARTMENT USE
	PURCHASE ORDER/AGREEMENT NO:

FUND/DEPT	ACCT. NO.	PROJECT NO.	ACCT. NO.	WARRANT DESCRIPTIONS (25 positions)	AMOUNT
<del>2065</del>	<del>52320</del>			People vs	\$1,400.00
2017	53230			Case Number 24CR2515	
				5/5/26 Psychological Evaluation	
				HON. C. TODD BOTTKE, JUDGE	
				ATTY. CHRISTOPHER LOGAN	

DATE	DESCRIPTION - CLAIMS MUST BE ITEMIZED AND INVOICES ATTACHED.	TOTAL	AMOUNT
05/05/2026	05/05/2026 PSYCHOLOGICAL EVALUATION  CASE/24CR2515 HON. BOTTKE/ATTY LOGAN ExParte for Appointment of Expert  <b>Purchase Order Required:</b> • Supplies over allowed maximum • Supplies + labor or installation charges • One-time Services (ins. must be on file) • Write P.O. Number above & attach to claim	▶	\$1,400.00

Under penalty of perjury, I certify that the above claim, and the items and statements as herein set forth, are true and correct that no part has been paid, and that the amount therein is justly due, and that the same is presented within one year after the last item thereof has accrued.

AUDITOR USE ONLY	
I hereby certify that the above claim was examined and approved by this office.	
LEROY ANDERSON Auditor/Controller	
By AZ 6/8/26	Beauty Brandy Auditor
BOARD OF SUPERVISORS	
Approved Date	
Chairman	

CLINICAL FORENSIC PSYCHOLOGIST  
CLAIMANT Kent R. Caruso, Ph.D.  
KENT, R. CARUSO, PH.D. 5/8/26

I hereby certify, under penalty of perjury, that I have not violated any of the provisions of Article Four, Chapter One, Division Four, Title One of the Calif. Gov. Code. Furthermore, that the articles of services specified in the above claim were necessary and were ordered by me for use by the department and for the purpose indicated above that the articles of services have been delivered or performed as stated hereon except as otherwise indicated by me.

SIGNED [Signature] 6/3/2026  
Department Head or Authorized Signature/Date