## **COUNTY OF TEHAMA**

STATE OF CALIFORNIA

## **CLAIM / AUTHORIZATION FOR RELEASE OF FUNDS**

Inc.

25-2095					
AUDITORS USE ONLY					
COUNTY CLAIM No					
VENDOR No 129761	KP & VERIFIED				

CLAIMANT'S	CLAIMANT'S NAME		Richard J Ofshe Ph D.					DEOED DOOR
<b>ADDRESS</b>	11585 Billagio Road		-			12 (A) (A) (A)		
	Los Angeles, Ca 90049		PURCHASE ORDER / AGREEMENT NO. NOV 1 3 202					
DEPARTME	ENT:							
FUND	DEPT	ACCT. No.	PROJECT No.	ACCT. No.	WARRANT	DESCRIPTION	(25 positions)	AMOUNT
53221	2026				PEOPLE VS.		, (as positions)	1837, 50
					24CR2515	10/23	25	1001,01
					1	10/12	<u>ය</u>	
							·	
DATE	, , , ,			VOICES ATTACHED		TOTAL	\$1,837.50	
11/11/2025	2025 PEOPLE V(S 24CR2515							
								Ī
	W-9 by Frank							
	W-9 to Fron  Ex Parte Appointment of Export / Ex Porte Food							
	Ex Parte Appointment of Expert / Ex Parte Fees							
-								
				±(				
Original: Au	ditor		Purchase Order I	Required:		Aareeme	ent Required:	
Copy 1: Clai	1: Claims File o Supplies over allowed maximum			o All servic	es except one-time			
Copy 2: Copy 3:	ppy 2: o Supplies + labor or installation charg ppy 3: o One-time services (insurance must b				file			
			o Write P O Number			o write Ag	eement number above	

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, that the amount therein is justly due, and that the same is presented within one year after the last item thereof has accrued

AUDITORS USE ONLY	CLAIMANT Richard J Ofshe Ph D				
I hereby certify that the above claim was examined and approved by this office					
Krista Peterson	I hereby certify under penalty of perjury, that I have not violated any of the provisions				
Auditor-Controller	of Article Four, Chapter One, Division Four, Title One of the Calif Gov Code				
By AZ 12/03/25	Furthermore, that the articles of services specified in the above claim were necessary				
Deputy County Auditor	and were ordered by me for use by the department and for the purpose indicated above				
BOARD OF SUPERVISORS	or services have been delivered or performed as stated hereon except as otherwise				
Approved	indicated by me				
Date	11/18/2025				
	SIGNED				
Chairman	Department Head or Authorized Signature / Date				