

26-0635

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By _____

COUNTY OF TEHAMA
STATE OF CALIFORNIA
CLAIM / AUTHORIZATION FOR RELEASE OF FUNDS

AUDITORS USE ONLY
COUNTY CLAIM No: _____
VENDOR No: 102157 KP & VERIFIED: _____

CLAIMANT'S NAME Kent Caruso Ph.D
ADDRESS P.O Box 994445
Redding , Ca-96001

PURCHASE ORDER / AGREEMENT No.: _____

DEPARTMENT:		ACCT. No.	PROJECT No.	ACCT. No.	WARRANT DESCRIPTION (25 positions)	AMOUNT
59221	2026				PEOPLE VS. NCR97187	1500 1250.00 HK
2017	53230				2/10/26	
						HK 1250.00
						\$7,500.00

DATE	DESCRIPTION - CLAIMS MUST BE ITEMIZED AND INVOICES ATTACHED	TOTAL
2/6/2026	PEOPLE VS NCR97187	
Ex Parte Request for Expert Appointment / Fees		

Original: Auditor
 Copy 1: Claims File
 Copy 2:
 Copy 3:

Purchase Order Required:
 o Supplies over allowed maximum
 o Supplies + labor or installation charges
 o One-time services (insurance must be on file)
 o Write P.O. Number above & attach to claim.

Agreement Required:
 o All services except one-time
 o Certificate of Insurance must be on file
 o Write Agreement 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
 I hereby certify that the above claim was examined and approved by this office.
 Krista Peterson
 Auditor-Controller
 By AZ 4/16/26
 Deputy County Auditor

BOARD OF SUPERVISORS
 Approved:
 Date
 Chairmen

CLAIMANT Kent Caruso Ph.D.

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 or services have been delivered or performed as stated hereon except as otherwise indicated by me.

SIGNED 4/9/2026 [Signature]
 Department Head or Authorized Signature / Date Judge