

Tehama County Sanitation District No. 1 Claims

FUND	Claimant	Description	Account	Amount
April 2025 Payments				
605	PACE Engineering	Professional Services	53230	\$ 877.38
605	PG&E	Utilities March 2025	53300	\$ 260.01
605	Fed Ex	Ground Shipping	53220	\$ 30.43
605	Fed Ex	Late Fee	53220	\$ 2.43
605	Frontier Communications	Communication Services	53120	\$ 216.41
605	Pace Anaylitcal	Mineral WWTP - Quarterly	53230	\$ 4,698.80
605	Pace Anaylitcal	Mineral WWTP	53230	\$ 309.50
605	Barry Gravier Trucking	Snow Removal - Mineral	53230	\$ 1,800.00
605	Home Depot Credit Services	Household/Grounds Maint.	53140	\$ 44.86
605	Home Depot Credit Services	Household/Grounds Maint.	53180	\$ 33.29
605	Central Valley Salinity Coalition	Annual State Salinity Portion	53230	\$ 183.23
April 2025 Total				\$ 8,456.34
May 2025 Payments				
605	PACE Engineering	Professional Services	53230	\$ 512.00
605	PG&E	TCSD #1 Sewer Pond Electric	53300	\$ 331.38
605	Frontier Communications	Communications Services	53120	\$ 109.75
605	Pace Analytical	Mineral WWTP	53230	\$ 309.50
605				
605				
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605				
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605				
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605				
605				
May 2025 Total				\$ 1,262.63

June 2025 Payments				
605	PACE Engineering	Professional Services	53230	\$ 3,115.38
605	PG&E	TCSD #1 Sewer Pond Electric	53300	\$ 577.82
684	NBS (Local Government Solutions)	Bond Admin Fee	105580	\$ 1,283.95
605	Tehama County Public Works	TCSD Q3 Admin	53230	\$ 28,553.21
605	Alliant Insurance Services, Inc.	25-26 SLIP Renewal	53150	\$ 6,985.06
605	Frontier Communications	Communication Services	53120	\$ 87.96
605	Frontier Communications	Communication Services	105580	\$ 22.02
605	Pace Analytical	Mineral WWTP	53230	\$ 309.50
605				
605				
605				
605				
June 2025 Total				\$ 40,934.90

\$ 50,653.87

Total Payments Made April - June 2025

TCSD #1**Financial Impact for Quarterly Claims**

April - June 2025

Fund 0605		
0605-53120	\$	414.12
0605-53140	\$	44.86
0605-53150	\$	6,985.06
0605-53180	\$	33.29
0605-53220	\$	32.86
0605-53230	\$	40,668.50
0605-53300	\$	1,169.21
0605-105580	\$	22.02
	\$	49,369.92
Fund 0684		
0684-105580	\$	1,283.95
	\$	1,283.95
Total Paid:	\$	50,653.87

APRIL 2025 CLAIMS

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 101226	KP & VERIFIED:

				DEPARTMENT USE	
DEPARTMENT: Sanitation District #1				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053230	95500	TCSD20213	52643	\$877.38
BUDGET SUMMARY				TOTAL	\$877.38

00053230	\$877.38
TOTAL	\$877.38

AUDITOR USE ONLY

I hereby certify that the above claim was examined and approved by this office

KRISTA PETERSON
Auditor/Controller

By _____

Deputy County Auditor

BOARD OF SUPERVISORS

Approved: Date _____

Chairman _____

SIGNED

Angela Polunin 4/29/05
Department Head or Authorized Signature / Date



PACE Engineering, Inc.
5155 Venture Parkway
Redding, CA 96002
530-244-0202

Received By: <u>TN</u>	Date: <u>4/10/25</u>
Reviewed By: <u>ST</u>	Date: <u>4/14/2</u>
Approved By: <u>WFP</u>	Date: <u>4/15/2</u>
Project Name/Number: <u>95500</u>	
Division #: <u>TCSD</u>	Activity Code: _____
Agreement/PO #: <u>2023-1</u>	
Reed/Bridge #: _____	Finance Only Batch #: _____ Account #: _____ Cost Center: _____
Equip/Repair Order: _____	
Description: <u>prof. services</u>	

TEHAMA CO SANITATION DIST NO.1
TIM MCSORLEY
9380 SAN BENITO AVE
GERBER, CA 96035

Invoice number 52643
Date 04/09/2025

Project **0288.38 Mineral Contract Operations**

BALANCE IS DUE AND PAYABLE WITHIN 30 DAYS
For Professional Services from February 23, 2025 through March 29, 2025

Phase 100 - Original Scope of Work

Professional Fees

	Date	Units	Rate	Billed Amount
Principal Engineer				
Laurie E. McCollum				
Project Coordination				
	02/24/2025	0.50	256.00	128.00
Groundwater Monitoring Well coordination	02/25/2025	0.50	256.00	128.00
Groundwater Monitoring Well coordination	03/11/2025	0.50	256.00	128.00
Groundwater Monitoring Well Installation Work Plan	03/28/2025	1.00	256.00	256.00
Monitoring Well assistance				
Subtotal		2.50		640.00

Reimbursables

	Units	Cost Rate	Cost Amount	Billed Amount
CALIFORNIA STATE WATER RESOURCES CONTROL BOARD				
US/State/Co/City - Reimb			215.80	
Contract Operator Renewals for 2025-2026				
Subtotal			215.80	
	Rate	Basis	Markup	Amount
10% Mark-up	10.00%	215.80	21.58	237.38
Phase subtotal				877.38
Invoice total				877.38

Invoice Summary

Description	Prior Billed	Total Billed	Current Billed
Phase 100 - Original Scope of Work	30,816.55	31,693.93	877.38
Phase 200 - Post - CWSRF Grant Application Work	23,209.75	23,209.75	0.00
Total	54,026.30	54,903.68	877.38

Aging Summary

Invoice Number	Invoice Date	Outstanding	Current	Over 30	Over 60	Over 90	Over 120
52643	04/09/2025	877.38	877.38				
	Total	877.38	877.38	0.00	0.00	0.00	0.00

Please reference Project & Invoice No. with remittance.

PACE Contract Operator Certification Renewal

Operator Renewal Fees	Qty	Unit Fee	Total Fee
Annual Fee	1	\$ 473.00	\$ 473.00
Number of Operators Fee	6	\$ 101.00	\$ 606.00
<i>Total</i>			\$ 1,079.00
Late Fee	0	\$ 135.00	\$ -
Total Combined			\$ 1,079.00

WWTP Fee Distribution		
<i>Client</i>	<i>Job No.</i>	<i>Amount</i>
Lewiston CSD WW	2399.11	\$ 215.80
City of Dunsmuir	204.49	\$ 215.80
Mineral/Tehama Co.	288.38	\$ 215.80
City of Williams	2290.20	\$ 215.80
Burney Water District	306.52	\$ 215.80

PAID
 Date 3/7/25 Ch #
 Acc# 52500 1079-



OFFICE USE ONLY	
<input type="checkbox"/>	Check \$ _____
<input type="checkbox"/>	Money Order \$ _____
<input type="checkbox"/>	ACHS _____



State Water Resources Control Board

CONTRACT OPERATOR REGISTRATION APPLICATION FOR WASTEWATER TREATMENT PLANTS

I. THIS IS AN APPLICATION FOR: <input type="checkbox"/> Initial Registration <input checked="" type="checkbox"/> Annual Renewal of Registration	
II. FEES	
Initial Registration Fee \$473	Annual Renewal Registration Fee \$473
Number of Operator Employees ____ x \$101 = _____	Number of Operator Employees <u>6</u> x \$101 = <u>\$606</u>
Total (Maximum Combined Fee is \$2,025) = _____	Total (Maximum Combined Fee is \$2,025) = <u>\$1,079</u>
	<input type="checkbox"/> Late Fee (see instructions) \$135
	Total (Combined Fee plus Late Fee) = <u>\$1,079</u>

III. CONTRACT OPERATOR INFORMATION: (Please type or print clearly)

Business Name: PACE Engineering, Inc. Contract Operator Number (if for a renewal): CO-040

Owner Name (if applicable): Last: _____ First: _____ Middle Initial: _____

Mailing Address: 5155 Venture Parkway Apt. #: _____ City: Redding

County: Shasta State: CA Zip: 96002

Business Address: 5155 Venture Parkway City: Redding

County: Shasta State: CA Zip: 96002

Telephone: Business: (530) 244-0202

Telephone: Cell: (530) 524-3169

Name of Contact Person: Nicole I. Harris Contact Phone: (530) 244-0202

Email Address: nharris@paceengineering.us

☒ Check box to receive public notices from the Wastewater Operator Certification Program.

IV. CONTRACT WASTEWATER TREATMENT PLANT INFORMATION:

Please complete a separate page for each wastewater treatment plant under contract.

Name of Wastewater Treatment Plant under Contract: Lewiston Community Services District

Name of Chief Plant Operator: Nicole Harris

Wastewater Treatment Plant Address: 151 Lachler Lane Lewiston

(County) Trinity (State) CA (City) Lewiston

(County) Trinity (State) CA (City) Lewiston

(County) Trinity (State) CA (City) Lewiston

Wastewater Treatment Plant Telephone Number: (530) 778-0306

Chief Plant Operator Telephone Number: (530) 244-0202 (Office) (530) 524-3169 (Cell)

Duration of Contract: 6-1-15 To: Current

(Effective date) (Expiration date)

Regional Water Quality Control Board: North Coast Region - Santa Rosa

Owner Name: Last: Lewiston Community Services District First: _____ Middle: _____
 Owner Mailing Address: P.O. Box 164 Apt. #: _____ City: Lewiston
 County: Trinity State: CA Zip: 96052
 Owner Telephone Number: (530) 778-0306 Owner Email Address: lewistoncsd@gmail.com

V. NAMES AND GRADE LEVELS OF ALL WASTEWATER TREATMENT PLANT OPERATORS EMPLOYED IN THE OPERATION OF THIS PLANT.

NAMES OF OPERATORS/OIT's			California Wastewater Operator/OIT Certification Grade Level
(Last)	(First)	(Middle)	
Harris	Nicole	Irene	III-43935
Warnock	Thomas	William	IV-5243
Chandler	Jessica	Leola	III-41836
Bryan	Rodney	Dale	III-10237
Chism	Tom	Gregory	V-7974
Quaife	Miles	Andrew	OIT-1-80366

VI. PRIOR ACTIONS (This section to be completed by Initial Contract Operator Registrants only):

Has a certifying body or court, for any act associated with performing duties at a facility that treats wastewater in a state other than California, in a territory, or on land under the jurisdiction of an Indian tribe, provided the duties are comparable to the duties of an operator or contract operator at a wastewater treatment plant, ever: taken final action to revoke or suspend your certification or registration; taken final action to discipline or impose administrative civil liability on you or conducted an investigation regarding you; or imposed civil or criminal liability upon you?

☐ Yes ☒ No

If YES, Explain:

VII. SIGNATURE OF OWNER OR PRINCIPAL OF FIRM

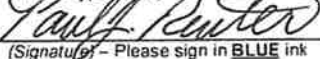
I, the undersigned, certify that all statements made, and information contained in this application, are true and correct to the best of my knowledge and belief. I understand that any omissions or misrepresentations may result in ineligibility for contract operator registration or revocation of any contract operator registration granted. I have read and understand that I must comply with the reporting requirements for contract operators set forth in section 3719.10 of chapter 26 of division 3 of title 23 California Code of Regulations. I authorize the State Water Resources Control Board to conduct a thorough investigation of my employment records and other qualifications for registration as a contract operator. I acknowledge that contract operator registration fees are non-refundable.

Paul Reuter

3-4-2025

(Print or type name)

(Date)


 (Signature) - Please sign in **BLUE** ink

Managing Engineer

(Title)

Rev. 01/19



OFFICE USE ONLY	
<input type="checkbox"/>	Check \$ _____
<input type="checkbox"/>	Money Order \$ _____
<input type="checkbox"/>	ACHS _____



GRAY NEWSOM
GOVERNOR

JARED BLUMENFELD
SECRETARY FOR
ENVIRONMENTAL PROTECTION

State Water Resources Control Board

CONTRACT OPERATOR REGISTRATION APPLICATION FOR WASTEWATER TREATMENT PLANTS

I. THIS IS AN APPLICATION FOR: <input type="checkbox"/> Initial Registration <input checked="" type="checkbox"/> Annual Renewal of Registration	
II. FEES	
Initial Registration Fee \$473	Annual Renewal Registration Fee \$473
Number of Operator Employees ____ x \$101 = _____	Number of Operator Employees ____ x \$101 = _____
Total (Maximum Combined Fee is \$2,025) = _____	Total (Maximum Combined Fee is \$2,025) = _____
	<input type="checkbox"/> Late Fee (see instructions) \$135
	Total (Combined Fee plus Late Fee) = _____

III. CONTRACT OPERATOR INFORMATION: (Please type or print clearly)

Business Name: PACE Engineering, Inc. Contract Operator Number (if for a renewal): CO-040

Owner Name (if applicable): Last: _____ First: _____ Middle Initial: _____

Mailing Address: 5155 Venture Parkway Apt #: _____ City: Redding

County: Shasta State: CA Zip: 96002

Business Address: 5155 Venture Parkway City: Redding

County: Shasta State: CA Zip: 96002

Telephone: Business: (530) 244-0202

Telephone: Cell: (530) 524-3169

Name of Contact Person: Nicole I. Harris Contact Phone: (530) 244-0202

Email Address: nharris@paceengineering.us

☒ Check box to receive public notices from the Wastewater Operator Certification Program.

IV. CONTRACT WASTEWATER TREATMENT PLANT INFORMATION:

Please complete a separate page for each wastewater treatment plant under contract.

Name of Wastewater Treatment Plant under Contract: City of Dunsmuir WWTP

Name of Chief Plant Operator: Greg Grimm

Wastewater Treatment Plant Address: 1100 South First Street Dunsmuir

(Street) (City)

Shasta CA 96025

(County) (State) (Zip Code)

Wastewater Treatment Plant Telephone Number: (530) 235-2325 (Office) 530-925-0871 (Cell)

Chief Plant Operator Telephone Number: (530) 519-1890

Duration of Contract: 8-15-2013 To: Current

(Effective date) (Expiration date)

Regional Water Quality Control Board: Central Valley Region - Redding

Owner Name: Last: City of Dunsmuir First: _____ Middle: _____
 Owner Mailing Address: 5915 Dunsmuir Avenue Apt #: _____ City: Dunsmuir
 County: Siskiyou State: CA Zip: 96025
 Owner Telephone Number: (530) 235-4822 Owner Email Address: uw1@ci.dunsmuir.ca.us

V. NAMES AND GRADE LEVELS OF ALL WASTEWATER TREATMENT PLANT OPERATORS EMPLOYED IN THE OPERATION OF THIS PLANT.

NAMES OF OPERATORS/OITs			California Wastewater Operator/OIT Certification Grade Level
(Last)	(First)	(Middle)	
Harris	Nicole	Irene	III-43935
Warnock	Thomas	William	IV-5243
Chandler	Jessica	Leola	III-41836
Bryan	Rodney	Dale	III-10237
Chism	Tom	Gregory	V-7974

VI. PRIOR ACTIONS (This section to be completed by Initial Contract Operator Registrants only):

Has a certifying body or court, for any act associated with performing duties at a facility that treats wastewater in a state other than California, in a territory, or on land under the jurisdiction of an Indian tribe, provided the duties are comparable to the duties of an operator or contract operator at a wastewater treatment plant, ever: taken final action to revoke or suspend your certification or registration; taken final action to discipline or impose administrative civil liability on you or conducted an investigation regarding you; or imposed civil or criminal liability upon you?

☐ Yes ☒ No

If YES, Explain:

VII. SIGNATURE OF OWNER OR PRINCIPAL OF FIRM

I, the undersigned, certify that all statements made, and information contained in this application, are true and correct to the best of my knowledge and belief. I understand that any omissions or misrepresentations may result in ineligibility for contract operator registration or revocation of any contract operator registration granted. I have read and understand that I must comply with the reporting requirements for contract operators set forth in section 3719.10 of chapter 26 of division 3 of title 23 California Code of Regulations. I authorize the State Water Resources Control Board to conduct a thorough investigation of my employment records and other qualifications for registration as a contract operator. I acknowledge that contract operator registration fees are non-refundable.

Paul Reuter

3-4-2025

(Print or type name)

(Date)



Managing Engineer

(Signature) - Please sign in **BLUE** ink

(Title)

Rev. 01/19



OFFICE USE ONLY	
<input type="checkbox"/>	Check \$ _____
<input type="checkbox"/>	Money Order \$ _____
<input type="checkbox"/>	ACHS _____



GAVIN NEWSOM
GOVERNOR

JARED BLUMENTHAL
SECRETARY FOR
ENVIRONMENTAL PROTECTION

State Water Resources Control Board

CONTRACT OPERATOR REGISTRATION APPLICATION FOR WASTEWATER TREATMENT PLANTS

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Number of Operator Employees ____ x \$101 = _____	Number of Operator Employees ____ x \$101 = _____
Total (Maximum Combined Fee is \$2,025) = _____	Total (Maximum Combined Fee is \$2,025) = _____
	<input type="checkbox"/> Late Fee (see instructions) \$135
	Total (Combined Fee plus Late Fee) = _____

III. CONTRACT OPERATOR INFORMATION: (Please type or print clearly)

Business Name: PACE Engineering, Inc. Contract Operator Number (if for a renewal): CO-040

Owner Name (if applicable): Last: _____ First: _____ Middle Initial: _____

Mailing Address: 5155 Venture Parkway Apt. #: _____ City: Redding

County: Shasta State: CA Zip: 96002

Business Address: 5155 Venture Parkway City: Redding

County: Shasta State: CA Zip: 96002

Telephone: Business: (530) 244-0202

Telephone: Cell: (530) 524-3169

Name of Contact Person: Nicole I. Harris Contact Phone: (530) 244-0202

Email Address: nharris@paceengineering.us

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IV. CONTRACT WASTEWATER TREATMENT PLANT INFORMATION:

Please complete a separate page for each wastewater treatment plant under contract.

Name of Wastewater Treatment Plant under Contract: City of Williams WWTP

Name of Chief Plant Operator: Damian Garcia

Wastewater Treatment Plant Address: 501 N. Colusa Cut Off Road Williams

(Street) (City)

Colusa CA 95987

(County) (State) (Zip Code)

Wastewater Treatment Plant Telephone Number: (530) 235-3270 ext 805

Chief Plant Operator Telephone Number: (530) 235-3270 ext 805 (Cell: 530-723-2964)

Duration of Contract: 12-16-2022 To: Current

(Effective date) (Expiration date)

Regional Water Quality Control Board: Central Valley Region - Rancho Cordova Office

Owner Name: Last: City of Williams First: _____ Middle: _____
 Owner Mailing Address: PO Box 310 Apt #: _____ City: Williams
 County: Colusa State: CA Zip: 95987
 Owner Telephone Number: (530) 235-3270 Owner Email Address: fkennedy@cityofwilliams.org

V. NAMES AND GRADE LEVELS OF ALL WASTEWATER TREATMENT PLANT OPERATORS EMPLOYED IN THE OPERATION OF THIS PLANT.

NAMES OF OPERATORS/OITs			California Wastewater Operator/OIT Certification Grade Level
(Last)	(First)	(Middle)	
Harris	Nicole	Irene	III-43935
Warnock	Thomas	William	IV-5243
Chandler	Jessica	Leola	III-41836
Bryan	Rodney	Dale	III-10237
Chism	Tom	Gregory	V-7974

VI. PRIOR ACTIONS (This section to be completed by Initial Contract Operator Registrants only):

Has a certifying body or court, for any act associated with performing duties at a facility that treats wastewater in a state other than California, in a territory, or on land under the jurisdiction of an Indian tribe, provided the duties are comparable to the duties of an operator or contract operator at a wastewater treatment plant, ever: taken final action to revoke or suspend your certification or registration; taken final action to discipline or impose administrative civil liability on you or conducted an investigation regarding you; or imposed civil or criminal liability upon you?

☐ Yes ☒ No

If YES, Explain:

VII. SIGNATURE OF OWNER OR PRINCIPAL OF FIRM

I, the undersigned, certify that all statements made, and information contained in this application, are true and correct to the best of my knowledge and belief. I understand that any omissions or misrepresentations may result in ineligibility for contract operator registration or revocation of any contract operator registration granted. I have read and understand that I must comply with the reporting requirements for contract operators set forth in section 3719.10 of chapter 26 of division 3 of title 23 California Code of Regulations. I authorize the State Water Resources Control Board to conduct a thorough investigation of my employment records and other qualifications for registration as a contract operator. I acknowledge that contract operator registration fees are non-refundable.

Paul Reuter

3-4-2025

(Print or type name)

(Date)


(Signature) Please sign in BLUE ink

Managing Engineer

(Title)

Rev 01/19



OFFICE USE ONLY	
<input type="checkbox"/>	Check \$ _____
<input type="checkbox"/>	Money Orders _____
<input type="checkbox"/>	ACH\$ _____



State Water Resources Control Board

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County: Shasta State: CA Zip: 96002

Business Address: 5155 Venture Parkway City: Redding

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Telephone: Cell: (530) 524-3169

Name of Contact Person: Nicole I. Harris Contact Phone: (530) 244-0202

Email Address: nharris@paceengineering.us

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IV. CONTRACT WASTEWATER TREATMENT PLANT INFORMATION:

Please complete a separate page for each wastewater treatment plant under contract.

Name of Wastewater Treatment Plant under Contract: Mineral Wastewater Treatment Plant

Name of Chief Plant Operator: Speero Tannous

Wastewater Treatment Plant Address: 37735 Highway 36E Mineral

(Street) (City)

Tehama CA 96063

(County) (State) (Zip Code)

Wastewater Treatment Plant Telephone Number: (530) 595-3320

Chief Plant Operator Telephone Number: (530) 385-1462 x 3025 (Office) (530) 354-5345 (Cell)

Duration of Contract: 2-9-17 To: Current

(Effective date) (Expiration date)

Regional Water Quality Control Board: Central Valley Region - Redding

Owner Name: Last: Tehama County Sanitation District No. 1 First: _____ Middle: _____
 Owner Mailing Address: 9380 San Benito Avenue Apt #: _____ City: Gerber
 County: Tehama State: CA Zip: 96035-9998
 Owner Telephone Number: (530) 385-1462 x 3005 Owner Email Address: jsimon@tcpw.ca.gov

V. NAMES AND GRADE LEVELS OF ALL WASTEWATER TREATMENT PLANT OPERATORS EMPLOYED IN THE OPERATION OF THIS PLANT.

NAMES OF OPERATORS/OITs			California Wastewater Operator/OIT Certification Grade Level
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Harris	Nicole	Irene	III-43935
Warnock	Thomas	William	IV-5243
Chandler	Jessica	Leola	III-41836
Bryan	Rodney	Dale	III-10237
Chism	Tom	Gregory	V-7974

VI. PRIOR ACTIONS (This section to be completed by Initial Contract Operator Registrants only):

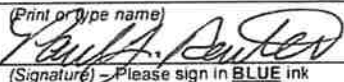
Has a certifying body or court, for any act associated with performing duties at a facility that treats wastewater in a state other than California, in a territory, or on land under the jurisdiction of an Indian tribe, provided the duties are comparable to the duties of an operator or contract operator at a wastewater treatment plant, ever: taken final action to revoke or suspend your certification or registration; taken final action to discipline or impose administrative civil liability on you or conducted an investigation regarding you; or imposed civil or criminal liability upon you?

☐ Yes ☒ No

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Paul Reuter 3-4-2025
 (Print or type name) (Date)
 Managing Engineer
 (Signature) - Please sign in BLUE ink (Title)

Rev. 01/19



OFFICE USE ONLY	
<input type="checkbox"/>	Check \$ _____
<input type="checkbox"/>	Money Order \$ _____
<input type="checkbox"/>	ACH \$ _____



GAVIN NEWSOM
GOVERNOR



YANA GARCIA
SECRETARY FOR
ENVIRONMENTAL PROTECTION

CONTRACT OPERATOR REGISTRATION APPLICATION FOR WASTEWATER TREATMENT PLANTS

I. THIS IS AN APPLICATION FOR: <input type="checkbox"/> Initial Registration <input type="checkbox"/> Annual Renewal of Registration	
II. FEES	
Initial Registration Fee \$473	Annual Renewal Registration Fee Number..... \$473
Number of Operator Employees ____ x \$101 = _____	of Operator Employees ____ x \$101 Total = _____
Total (Maximum Combined Fee is \$2,025) = _____	(Maximum Combined Fee is \$2,025) = _____
	<input type="checkbox"/> Late Fee (see instructions) \$135
	Total (Combined Fee plus Late Fee) = _____

III. CONTRACT OPERATOR INFORMATION: (Please type or print clearly)

Business Name: PACE Engineering, Inc Contract Operator Number (if for a renewal): CO-040

Owner Name (if applicable): Last: _____ First: _____ Middle Initial: _____

Mailing Address: 5155 Venture Parkway Apt. #: _____ City: Redding

County: Shasta State: CA Zip: 96002

Business Address: 5155 Venture Parkway City: Redding

County: Shasta State: CA Zip: 96002

Telephone: Business: (530) 244-0202

Telephone: Cell: (530) 524-3169

Name of Contact Person: Nicole I. Harris Contact Phone (530) 244-0202

Email Address: nharris@paceengineering.us

☐ Check box to receive public notices from the Wastewater Operator Certification Program.

IV. CONTRACT WASTEWATER TREATMENT PLANT INFORMATION:

Please complete a separate page for each wastewater treatment plant under contract.

Name of Wastewater Treatment Plant under Contract: Burney Wastewater Treatment Plant

Name of Chief Plant Operator: David Zevely

Wastewater Treatment Plant Address: 21111 Black Ranch Road Burney

Shasta CA 96013

(County) (State) (Zip Code)

Wastewater Treatment Plant Telephone Number: (530) 335-3582

Chief Plant Operator Telephone Number: (530) 335-3582

Duration of Contract: 12/23/2024 To: 6/30/2025

(Effective date) (Expiration date)

Regional Water Quality Control Board: Central Valley

Owner Name: Last: Burney Water District First: _____ Middle: _____
Owner Mailing Address: 20222 Hudson St Apt. #: _____ City: Burney
County: Shasta State: CA Zip: 96013
Owner Telephone Number: 530 335-3582 Owner Email Address: _____

V. NAMES AND GRADE LEVELS OF ALL WASTEWATER TREATMENT PLANT OPERATORS EMPLOYED IN THE OPERATION OF THIS PLANT.

NAMES OF OPERATORS/OITs			California Wastewater Operator/OIT Certification Grade Level
(Last)	(First)	(Middle)	
Chandler,	Jessica	L	III - 41836
Chism	Tom	G	V - 7974
Harris	Nicole	I	III - 43935
Warnock	Thomas	W	IV - 5243

VI. PRIOR ACTIONS (This section to be completed by Initial Contract Operator Registrants only):

Has a certifying body or court, for any act associated with performing duties at a facility that treats wastewater in a state other than California, in a territory, or on land under the jurisdiction of an Indian tribe, provided the duties are comparable to the duties of an operator or contract operator at a wastewater treatment plant, ever: taken final action to revoke or suspend your certification or registration; taken final action to discipline or impose administrative civil liability on you or conducted an investigation regarding you; or imposed civil or criminal liability upon you?

☐ Yes ☒ No

If YES, Explain:

VII. SIGNATURE OF OWNER OR PRINCIPAL OF FIRM

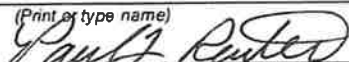
I, the undersigned, certify that all statements made, and information contained in this application, are true and correct to the best of my knowledge and belief. I understand that any omissions or misrepresentations may result in ineligibility for contract operator registration or revocation of any contract operator registration granted. I have read and understand that I must comply with the reporting requirements for contract operators set forth in section 3719.10 of chapter 26 of division 3 of title 23 California Code of Regulations. I authorize the State Water Resources Control Board to conduct a thorough investigation of my employment records and other qualifications for registration as a contract operator. I acknowledge that contract operator registration fees are non-refundable.

Paul Reuter

3-4-2025

(Print or type name)

(Date)


(Signature) Please sign in BLUE ink

Managing Engineer

(Title)

Rev. 09/2024

**INSTRUCTIONS FOR WASTEWATER TREATMENT PLANT
CONTRACT OPERATOR
CERTIFICATE OF REGISTRATION**

Who must register? All persons or entities that enter into a contract to operate a wastewater treatment plant must be registered by the State Water Resources Control Board as a contract operator. Please read the following instructions and information before completing the application forms.

I. APPLICATION FOR INITIAL CERTIFICATE AND ANNUAL RENEWAL OF REGISTRATION

Check the box for either Initial Registration or Annual Renewal of Registration.

II. CONTRACT OPERATOR CERTIFICATE OF REGISTRATION FEES

The Initial Registration Fee is \$350 for the original certificate of registration, plus \$75 for each operator and operator-in-training (OIT) listed on the Roster of Operator Employees (Section V). Pay the combined fees up to a maximum of \$1,500.

The Annual Renewal of Registration Fee is \$350 plus \$75 for each operator and OIT listed on the Roster of Operator Employees (Section V). Pay the combined fees up to a maximum of \$1,500.

If you fail to submit a complete application for renewal received at least thirty (30) days before the expiration date of the certificate of registration, you must pay a late fee of \$100.

WWOCP can now accept online payments from checking/savings accounts to pay for application fees. Instructions are available on the Wastewater Operator Certification Home page (http://www.waterboards.ca.gov/water_issues/programs/operator_certification/operator_certification.shtml) at the bottom of the page locate the Online Payments section. (Please note that fees are nonrefundable. (See California Code of Regulations, title 23, division 3, chapter 26 (Operator Certification Regulations), § 3717, subd. (a).))

III. CONTRACT OPERATOR INFORMATION

Provide all of the requested information. Please notify the Wastewater Operator Certification Program (WWOCP) immediately if your contact information changes. The WWOCP must be able to notify you in case there are any questions regarding your registration application.

IV. CONTRACT WASTEWATER TREATMENT PLANT INFORMATION:

Provide all of the requested information for each wastewater treatment plant for which you have a contract to operate. Please notify the WWOCP immediately if any of the provided information changes. Attach additional sheets if necessary.

In addition to your contract operator registration, you will be issued a contract operator credential for each wastewater treatment that you operate. Please note that registered contract operators must submit an application for an additional contract operator credential within 30 days of entering into a contract to operate a wastewater treatment plant not listed on the contract operator registration application.

V. NAMES AND GRADE LEVELS OF ALL WASTEWATER TREATMENT PLANT OPERATORS EMPLOYED IN THE OPERATION OF THIS PLANT.

List the names of each of the wastewater treatment plant operators you will assign to the wastewater treatment plant(s) listed in Section IV. The roster should contain full time, part time, and seasonal employees. List the California Wastewater Treatment Plant Operator certification number or Operator-in-Training grade for each employee. All employees must have a valid California operator certificate. Attach additional sheets if necessary.

VI. PRIOR ACTIONS

Check the box answering whether a certifying body or court, for any act associated with performing duties at a facility that treats wastewater in a state other than California, in a territory, or on land under the jurisdiction of an Indian tribe, provided the duties are comparable to the duties of an operator or contract operator at a wastewater treatment plant, has ever: taken final action to revoke or suspend your certification or registration; taken final action to discipline or impose administrative civil liability on you or conducted an investigation regarding you; or imposed civil or criminal liability upon you.

If the answer is yes, you must provide an explanation. Attach additional sheets if necessary.

VII. SIGNATURE OF OWNER OR PRINCIPAL OF FIRM

The application submitted to the WWOCP **MUST** include your **ORIGINAL** signature and date in **blue ink**. Please make a copy of your complete application for your files. Mail the original completed application package and fee to:

Mailing Address:
State Water Resources Control Board
Wastewater Operator Certification Program
P.O. Box 944212
Sacramento, CA 94244-2120

Overnight Mailing - Address:
State Water Resources Control Board Wastewater
Operator Certification Program 1001 I Street,
17th Floor
Sacramento, CA 95814

If you have any questions contact the Office of Operator Certification at (916) 341-5909 or wwocperlprogram@waterboards.ca.gov.

The fax number for the Wastewater Operator Certification Program is (916) 341-5734.

If your contract operator registration or one of your contract operator credentials have been lost, stolen, damaged, or destroyed you may request a replacement by submitting the replacement fee along with a signed, written statement explaining the circumstances of the loss, theft damage, or destruction of the registration or credential.

Rev. 01/19

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

APRIL

2

CLAIMANT'S NAME **P. G. & E.**
ADDRESS
PLEASE RETURN CHECK TO ROAD

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

				DEPARTMENT USE	
DEPARTMENT: Sanitation District #1				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053300	95000		6227612264-5-MAR	\$260.01
BUDGET SUMMARY				TOTAL	\$260.01

00053300	\$260.01
TOTAL	\$260.01

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	
	KRISTA PETERSON Auditor/Controller
By _____	Deputy County Auditor
BOARD OF SUPERVISORS	
Approved: Date _____	
Chairman _____	

CLAIMANT **P. G. & E.**

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

SIGNED _____
Department Head or Authorized Signature / Date

[Signature] 4/16/25



ENERGY STATEMENT

www.pge.com/MyEnergy

ACCOUNT NO: 6227612264-5
Statement Date: 04/02/2025
Due Date: 04/21/2025

Service For:

COUNTY OF TEHAMA
37735 HWY 36 E
MINERAL, CA 96063

Your Account Summary

Amount Due on Previous Statement	\$362.62
Payment(s) Received Since Last Statement	0.00
Previous Unpaid Balance	paid \$362.62
Current Electric Charges	\$318.24
Electric Adjustments	-58.23

Questions about your bill?

Business Specialist available:
Mon-Fri: 7am to 6pm
1-800-468-4743
www.pge.com/MyEnergy

Total Amount Due by 04/21/2025 ~~\$260.01~~ ~~\$622.63~~

Ways To Pay

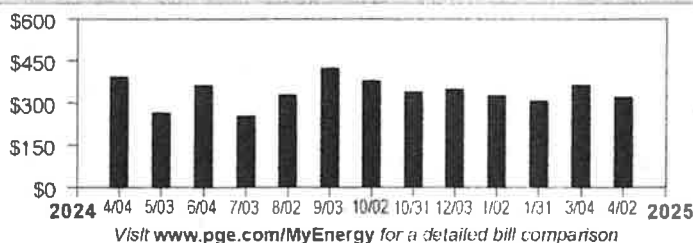
www.pge.com/waystopay

Your Enrolled Programs

Peak Day Pricing Plan

Electric Monthly Billing History

Daily Usage Comparison



1 Year Ago	Last Period	Current Period
30.50	25.76	26.02
Electric kWh / Day		

Important Messages

Thank you for your timely payments You have an excellent payment record with us, and we thank you for your prompt payments.

Call 811 before you dig. A common cause of pipeline accidents is damage from digging. If you plan on doing any digging, such as planting a tree or installing a fence, please call 811 at least two working days before you dig. One free call will notify underground utilities to mark the location of underground lines, helping you to plan a safe project.

Please return this portion with your payment. No staples or paper clips. Do not fold. Thank you.

99906227612264500000318240000062263



Account Number: Due Date:
6227612264-5 04/21/2025

Total Amount Due:
\$622.63

Amount Enclosed:
\$ 260.01

909040137996 1 AV 0.545 692 8535 11



COUNTY OF TEHAMA
9380 SAN BENITO AVE
GERBER CA 96035-9701

PG&E
BOX 997300
SACRAMENTO, CA 95899-7300





ENERGY STATEMENT

www.pge.com/MyEnergy

Statement Date: 04/02/2025

Due Date: 04/21/2025

Important Phone Numbers - Monday-Friday 7 a.m.-7 p.m., Saturday 8 a.m.-5 p.m.

Customer Service (All Languages; Relay Calls Accepted) 1-800-743-5000

TTY 7-1-1

Servicio al Cliente en Español (Spanish) 1-800-660-6789

華語客戶服務 (Chinese) 1-800-893-9555

Dịch vụ khách tiếng Việt (Vietnamese) 1-800-298-8438

Business Customer Service 1-800-468-4743

Rules and rates

You may be eligible for a lower rate. Find out about optional rates or view a complete list of rules and rates, visit www.pge.com or call 1-800-743-5000.

If you believe there is an error on your bill, please call 1-800-743-5000 to speak with a representative. If you are not satisfied with our response, contact the California Public Utilities Commission (CPUC), Consumer Affairs Branch (CAB), 505 Van Ness Avenue, Room 2003, San Francisco, CA 94102, 1-800-649-7570 or 7-1-1 (8:30 AM to 4:30 PM, Monday through Friday) or by visiting www.cpuc.ca.gov/complaints/.

To avoid having service turned off while you wait for the outcome of a complaint to the CPUC specifically regarding the accuracy of your bill, please contact CAB for assistance. If your case meets the eligibility criteria, CAB will provide you with instructions on how to mail a check or money order to be impounded pending resolution of your case. You must continue to pay your current charges while your complaint is under review to keep your service turned on.

If you are not able to pay your bill, call PG&E to discuss how we can help. You may qualify for reduced rates under PG&E's CARE program or other special programs and agencies may be available to assist you. You may qualify for PG&E's Energy Savings Assistance Program which is an energy efficiency program for income-qualified residential customers.

Important definitions

Rotating outage blocks are subject to change without advance notice due to operational conditions.

Demand charge: Many non-residential rates include a demand charge. Demand is a measurement of the highest usage of electricity in any single fifteen (or sometimes five) minute period during a monthly billing cycle. Demand is measured in kilowatts (or kW). High demand is usually associated with equipment start-up. By spreading equipment start-ups over a longer period of time, you may be able to lower demand and reduce your demand charges.

Time-of-use electric prices are higher every day during afternoons and evenings, and lower at other times of the day. Prices also change by season, with higher prices in the summer and lower prices in the winter.

Wildfire Fund Charge: Charge on behalf of the State of California Department of Water Resources (DWR) to fund the California Wildfire Fund. For usage prior to October 1, 2020, this charge included costs related to the 2001 California energy crisis, also collected on behalf of the DWR. These charges belong to DWR, not PG&E.

Power Charge Indifference Adjustment (PCIA): The PCIA is a charge to ensure that both PG&E customers and those who have left PG&E service to purchase electricity from other providers pay for the above market costs for electric generation resources that were procured by PG&E on their behalf. 'Above market' refers to the difference between what the utility pays for electric generation and current market prices for the sale of those resources. Visit www.pge.com/cca.

Wildfire Hardening Charge: PG&E has been permitted to issue bonds that enable it to recover more quickly certain costs related to preventing and mitigating catastrophic wildfires, while reducing the total cost to its customers. Your bill for electric service includes a fixed recovery charge called the Wildfire Hardening Charge that has been approved by the CPUC to repay those bonds. The right to recover the Wildfire Hardening Charge has been transferred to a separate entity (called the Special Purpose Entity) that issued the bonds and does not belong to PG&E. PG&E is collecting the Wildfire Hardening Charge on behalf of the Special Purpose Entity. For details visit: www.pge.com/tariffs/assets/pdf/tariffbook/ELEC_PRELIM_JF.pdf

Recovery Bond Charge/Credit: Your bill for electric service includes a charge that has been approved by the CPUC to repay bonds issued for certain costs related to catastrophic wildfires. The Recovery Bond Charge (RBC) rate is currently \$0.00647 per kWh. PG&E has also contributed certain amounts to a trust fund which is used to provide a customer credit equal to \$0.00647 per kWh (Recovery Bond Credit). The right to recover the RBC has been transferred to one or more Special Purpose Entities that issued the bonds and does not belong to PG&E. PG&E is collecting that portion of the RBC on behalf of the Special Purpose Entities.

Gas Public Purpose Program (PPP) Surcharge. Used to fund state-mandated gas assistance programs for low-income customers, energy efficiency programs, and public-interest research and development.

Visit www.pge.com/billexplanation for more definitions. To view most recent bill inserts including legal or mandated notices, visit www.pge.com/billinserts.

See the table reflecting "Your Electric Charges Breakdown" on the last page

PG&E refers to Pacific Gas and Electric Company, a subsidiary of PG&E Corporation. © 2025 Pacific Gas and Electric Company. All rights reserved.

Please do not mark in box. For system use only.

Update My Information (English Only)

Please allow 1-2 billing cycles for changes to take effect

Account Number: 6227612264-5

Change my mailing address to: _____

City _____ State _____ ZIP code _____
Primary Phone # _____ Primary Email _____

Ways To Pay

- **Online via web or mobile at www.pge.com/waystopay**
- **By mail:** Send your payment along with this payment stub in the envelope provided.
- **By debit card, Visa, MasterCard, American Express, or Discover:** Call 877-704-8470 at any time. (Our independent service provider charges a fee per transaction.)
- **At a neighborhood payment center:** To find a neighborhood payment center near you, please visit www.pge.com or call 800-743-5000. Please bring a copy of your bill with you.



ENERGY STATEMENT

www.pge.com/MyEnergy

ACCOUNT NO. 0227612204-0

Statement Date: 04/02/2025

Due Date: 04/21/2025

Details of Electric Charges

03/04/2025 - 04/01/2025 (29 billing days)

Service For: 37735 HWY 36 E

Service Agreement ID: 6227612018 DIST #1 SEWER PONDS

Rate Schedule: B6 Bus Low Use Alt

Enrolled Programs: Peak Day Pricing Plan

03/04/2025 - 04/01/2025

Customer Charge	29 days @ \$0.82136	\$23.82
Energy Charges		
Peak	112.397000 kWh @ \$0.43545	48.94
Off Peak	464.422000 kWh @ \$0.39186	181.99
Super Off Peak	177.804000 kWh @ \$0.35578	63.26
Energy Commission Tax		0.23

Total Electric Charges \$318.24

Adjustments

CA Climate Credit - \$58.23

Total Adjustments -\$58.23

Rate Identification Number



USCA-PGPG-0712-0000

www.pge.com/rin

To program your smart device, scan the QR code or enter the RIN code above and follow the on-screen instructions.

Service Information

Meter # 1009998929
Total Usage 754.623000 kWh
Serial K
Rotating Outage Block 50

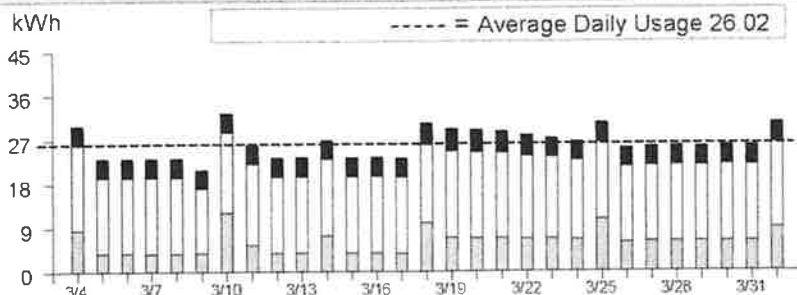
Additional Messages

CA Climate Credit -

You received a Climate Credit on this month's electric bill. For more information about this California Climate Credit, visit www.cpuc.ca.gov/smallbusinessclimatecredit

Received By: <u>TD</u>	Date: <u>4/7/25</u>
Reviewed By: <u>SS</u>	Date: <u>4/7/25</u>
Approved By: <u>W. Anderson</u>	Date: <u>4/10/25</u>
Project Name/Number: _____	
Division #: _____	Account Code: _____
Agreement/PO #: _____	
Road/Bridge #: _____	Batch #: _____
Equip/Repair Order: _____	Account #: _____
Description: _____	Cost Center: _____

Electric Usage This Period: 754.623000 kWh, 29 billing days



	Usage	Energy Charges
Peak ¹	14.89%	\$48.94
Off Peak ²	61.54%	\$181.99
Super Off Peak ³	23.57%	\$63.26

¹Peak: Year-round, Daily, 4:00pm-9:00pm

²Off Peak: Summer, 6/1-9/30, Daily, 9:00pm-4:00pm

Winter, 10/1-2/28, Daily, 9:00pm-4:00pm

Winter, 3/1-5/31, Daily, 9:00pm-9:00am and 2:00pm-4:00pm

³Super Off Peak: Winter, 3/1-5/31, Daily, 9:00am-2:00pm



Visit www.pge.com/MyEnergy for a detailed bill comparison.



ENERGY STATEMENT

www.pge.com/MyEnergy

ACCOUNT NO. 0227012204-0

Statement Date: 04/02/2025

Due Date: 04/21/2025

Your Electric Charges Breakdown (from page 2)

Generation	\$93.08
Transmission	21.39
Distribution	178.91
Electric Public Purpose Programs	17.10
Nuclear Decommissioning	-0.18
Wildfire Fund Charge	4.49
Recovery Bond Charge	4.88
Recovery Bond Credit	-4.88
Wildfire Hardening Charge	3.74
Competition Transition Charges (CTC)	-0.52
Taxes and Other	0.23
Total Electric Charges	\$318.24

APRIL

③

COUNTY CLAIM NO:

KP & VERIFIED:

DEPARTMENT USE

PO / AGREEMENT NO:

TOTAL	\$32.86
-------	---------

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.



Invoice Number	Invoice Date	Account Number
8-784-61970	Feb 28, 2025	1483-9997-2

Page
1 of 2

Billing Address:

TEHAMA COUNTY PUBLIC WORKS
9380 SAN BENITO AVE
GERBER CA 96035-9701

Shipping Address:

TEHAMA COUNTY PUBLIC WORKS
9380 SAN BENITO AVE
GERBER CA 96035-9701

Invoice Questions?**Contact FedEx Revenue Services**

Phone: 800.622.1147
M-F 7 AM to 8 PM CST
Sa 7 AM to 6 PM CST
Internet: fedex.com

Invoice Summary**FedEx Ground Services**

Total Charges	USD	\$30.43
TOTAL THIS INVOICE	USD	\$30.43

Other discounts may apply.

To pay your FedEx invoice, please go to www.fedex.com/payment. Thank you for using FedEx.

Payments not received by Mar 15, 2025 are subject to a late fee.



Received By: <u>TN</u>	Date: <u>4/7/25</u>
Reviewed By: <u>ST</u>	Date: <u>4/7/25</u>
Approved By: <u>Quinn FR</u>	Date: <u>4/10/25</u>
Project Name/Number: _____	
Division #: _____	Activity Code: _____
Agreement/PO #: _____	Finance Only Batch #: _____ Account #: _____ Cost Center: _____
Road/Bridge #: _____	
Equip/Repair Order: _____	
Description: _____	

Important Service Message:

For added security, enable Two-Step Verification (2SV) on your FedEx account today! This simple step helps protect your account from unauthorized access. How to Enable 2SV: Log in to your FedEx account. Visit the Account Settings section. Follow the prompts to activate Two-Step Verification.

Detailed descriptions of surcharges can be located at fedex.com

To ensure proper credit, please return this portion with your payment to FedEx. Please do not staple or fold. Please make check payable to FedEx.

Invoice Number	Invoice Amount	Account Number
8-784-61970	USD \$30.43	1483-9997-2

Remittance Advice

Your payment is due by Mar 15, 2025

Payments not received by this date are subject to a late fee.

878461970500000304371483999726000000000000000304370

TEHAMA COUNTY PUBLIC WORKS
9380 SAN BENITO AVE
GERBER CA 96035-9701



FedEx
P.O. Box 7221
Pasadena CA 91109-7321



Invoice Number	Invoice Date	Account Number	Page
8-784-61970	Feb 28, 2025	1483-9997-2	2 of 2

FedEx Ground Shipment Summary By Payor Type

FedEx Ground Shipments (Original)

Date	Shipments	Rated Weight lbs	Transportation Charges	Other Handling Charges	Ret Chg/Tax Credits/Other	Total Charges
02/12	1	5	20.48	9.95		30.43
Ground-Bill Recipient Subtotal						\$30.43
Total FedEx Ground		1	5	\$20.48	\$9.95	\$30.43

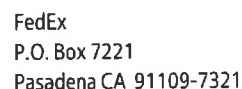
TOTAL THIS INVOICE **USD** **\$30.43**

FedEx Ground Bill Recipient Detail (Original)

Ship Date: Feb 12, 2025		Cust. Ref.: NO REFERENCE INFORMATION		P.O.#:	
Payor: Recipient		Dept.#: SD10331			
We calculated your charges based on a dimensional weight of 5.0 lbs, 13 in x 7 in x 7 in, using a dimensional factor of 139.					
Tracking ID	729170975412	<u>Sender</u>	<u>Recipient</u>	Transportation Charge	20.48
Service Type	Ground Domestic	SHIPPING MANAGER	TANNOUS, SPEERO	Fuel Surcharge	4.70
Zone	08	XYLEM SONTEK YSI	TEHAMA, COUNTY OF	DAS Extended Comm	5.25
Packages	1	1725 BRANNUM LN	9380 SAN BENITO AVE	Total Charge	USD \$30.43
Actual Weight	3.0 lbs	YELLOW SPRINGS OH 45387	GERBER CA 96035-970180		
Rated Weight	5 lbs				
Delivered	Feb 18, 2025				
Bill Recipient Subtotal				USD	\$30.43
Total FedEx Ground				USD	\$30.43

FedEx® Billing Online

FedEx Billing Online allows you to efficiently manage and pay your FedEx invoices online. It's free, easy and secure. FedEx Billing Online helps you streamline your billing process. With all your FedEx shipping information available in one secure online location, you never have to worry about misplacing a paper invoice or sifting through reams of paper to find information for past shipments. Go to fedex.com to sign up today!





Invoice Number	Invoice Date	Account Number	Page
9-693-33065	Apr 04, 2025	1483-9997-2	2 of 2

Other Charges Summary

	Invoice Number	Invoice Date	Original Amount	Payments Applied/Credit	Past Due Amount	Rate	Charges
Late Fee	8-784-61970	02/28/25	30.43	-	30.43	8%	2.43
Total					\$30.43		\$2.43

TOTAL THIS INVOICE

USD

\$2.43

FedEx® Billing Online

FedEx Billing Online allows you to efficiently manage and pay your FedEx invoices online. It's free, easy and secure. FedEx Billing Online helps you streamline your billing process. With all your FedEx shipping information available in one secure online location, you never have to worry about misplacing a paper invoice or sifting through reams of paper to find information for past shipments. Go to fedex.com to sign up today!

APRIL 4

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 115951	KP & VERIFIED:

[illegible]

AUDITOR USE ONLY

I hereby certify that the above claim was examined and
approved by this office

KRISTA PETERSON
Auditor/Controller

By _____

Deputy County Auditor

BOARD OF SUPERVISORS

Approved: Date _____

Chairman _____

SIGNED

Department Head or Authorized Signature / Date



TEHAMA CO SANITATION DIST Account Number:
NO1 530-595-3420-102496-8

PIN:
4777

Page 1/4
Billing Date:
Apr 05, 2025
Billing Period:
Apr 05 - May 04, 2025

Hi TEHAMA CO SANITATION DIST NO1,

Notice anything different? Your bill has a new look and feel. Simpler.
Clearer. Easier to understand.

Bill history

Previous balance	\$216.48
Payment received by Apr 05, thank you	-\$108.34
Prior bill period balance	\$108.14
Please pay past due immediately	\$108.14

Service summary

Phone	\$87.28
Taxes and Fees	\$20.99

Total services

\$108.27

Total balance

\$216.41

\$108.27 due Apr 29

Feb. not paid

Total balance

\$216.41

Please pay past due
immediately



Manage your account,
payments, and services
anytime, anywhere with the
MyFrontier app. Download
your free app today. To learn
more visit
frontier.com/myfrontierapp

Earn more. Get started with a business referral and earn up to \$325 per
referral. Learn more: <https://www.businessreferralrewards.com>



P.O. Box 211579
Eagan, MN 55121-2879

6790 0102 NO RP 05 04062025 NNNNNNNY 01 997829

TEHAMA CO SANITATION DIST NO1
9380 SAN BENITO AVE
GERBER CA 96035-9701

Total balance
\$216.41

Due by
Apr 29

Account number
530-595-3420-102496-8

Amount enclosed
\$

Mail payment to:

FRONTIER
PO BOX 740407
CINCINNATI, OH 45274-0407

135026530595342010249600000108140000216418



TEHAMA CO SANITATION DIST NO1 Account Number:

530-595-3420-102496-8

Billing Date:

Apr 05, 2025

PIN:

4777

Billing Period:

Apr 05 - May 04, 2025

WAYS TO PAY YOUR BILL



Easy, simple, secure payments with
Auto Pay at frontier.com/autopay



Download the
MyFrontier[®] app



For help: Customer Service at frontier.com/helpcenter, chat at frontier.com/chat, or call us at 800-921-8102.
Visually impaired/TTY customers, call 711.



PAYING YOUR BILL

You are responsible for all legitimate, undisputed charges on your bill. Paying by check authorizes Frontier to make a one-time electronic funds transfer from your account, as early as the day your check is received. When making an online payment, please allow time for the transfer of funds. If funds are received after the due date, you may be charged a fee, your service may be interrupted, and you may incur a reconnection charge to restore service. A fee may be charged for a bank returned check. Continued nonpayment of undisputed charges (incl. 900 and long distance charges) may result in collection action and a referral to credit reporting agencies, which may affect your credit rating.

IMPORTANT MESSAGES

You must pay all basic local service charges to avoid basic service disconnection. Failure to pay other charges will not cause disconnection of your basic service but this may cause other services to be terminated. Frontier Bundles may include charges for both basic and other services. Frontier periodically audits its bills to ensure accuracy which may result in a retroactive or future billing adjustment. Internet speed, if noted, is the maximum wired connection speed for selected tier; Wi-Fi speeds may vary; actual and average speed may be slower and depends on multiple factors. Performance details are at frontier.com/internetdisclosures. Billing and service complaints may be submitted to the California Public Utilities Commission, Consumer Affairs Branch www.cpuc.ca.gov/complaints/; or 1-800-649-7570; or 505 Van Ness Ave., Room 2003, San Francisco, CA 94102.

Hard of Hearing, Deaf, Blind, Vision and /or Mobility Impaired customers may dial 7-1-1 to reach a consultant trained to support their communication needs. Visit www.ddtp.org for more information.

SERVICE TERMS

Visit frontier.com/terms, frontier.com/tariffs or call Customer Service for information on tariffs, price lists and other important Terms, Conditions and Policies ("Terms") related to your voice, Internet and/or video services including limitations of liability, early termination fees, the effective date of and billing for the termination of service(s) and other important information about your rights and obligations, and ours. Frontier's Terms, include a binding arbitration provision to resolve customer disputes (frontier.com/terms/arbitration). **Video and Internet services are subscription-based and are billed one full month in advance. Unless otherwise required by applicable law, video and/or Internet service subscription cancellations and any early termination fees are effective on the last day of your Frontier billing cycle. No partial month credits or refunds will be provided for previously billed service subscriptions. Installation or setup fees paid at the initiation of the Service, if any, are not refundable.** By using or paying for Frontier services, you are agreeing to these Terms and that disputes will be resolved by individual arbitration. By providing personal information to Frontier you are also agreeing to Frontier's Privacy Policy posted at frontier.com/ca-privacy.



TEHAMA CO SANITATION DIST NO1 Account Number:
530-595-3420-102496-8
PIN:
4777

Billing Date:
Apr 05, 2025
Billing Period:
Apr 05 - May 04, 2025



Phone

Monthly Charges

04.05-05.04	Single Party Measured Business Service	\$43.50
	Multi-Line Business Federal	\$14.99
	Pre-Subscribed Line Charge	
	Carrier Cost Recovery Surcharge	\$13.99
	Multi-Line Federal Subscriber Line Charge	\$9.20
	Access Recovery Charge Multi-Line Business	\$3.00
	Frontier Roadwork Recovery Fee	\$2.60
Phone Total		\$87.28



Taxes and Fees

FCA Long Distance - Federal USF Surcharge	\$10.61
Federal USF Recovery Charge	\$4.47
Federal Excise Tax	\$1.86
Federal Taxes	\$16.94
CA St Switched Access Rate Recovery Surcharge	\$1.93
Universal Service Public Purpose Program Surcharge	\$1.11
CA St Public Utilities Commission Fee	\$0.51
CA State 911 Surcharge	\$0.41
Emergency 988 Surcharge	\$0.08
Delta EAS Recovery Surcharge	\$0.01
State Taxes	\$4.05
Taxes and Fees Total	\$20.99

Total current month charges

\$108.27

If your bill reflects that you owe a Balance Forward, you must make a payment immediately in order to avoid collection activities. You must pay a minimum of \$216.41 by your due date to avoid disconnection of your local service. All other charges should be paid by your due date to keep your account current.

Avoid account suspension by paying your past-due balance immediately. Log in to frontier.com or use the MyFrontier app for latest balances and due dates.

Emergency responders need accurate information in order to send help when someone calls 911. Can your PBX or Multi-line telephone system direct emergency personnel to your business location? Frontier encourages you to ensure your location information is correctly configured in your PBX or Multi-line telephone system. For more information, consult the CPUC PBX 911 Advisory Brochure available at <https://www.cpuc.ca.gov/-/media/cpuc-website/divisions/communications-division/documents/pbx-911-advisory-brochure.pdf>

Beginning April 1, 2025, the Federal USF Recovery Charge and the Frontier Long Distance Federal USF Surcharge are increasing from 36.3% to 36.6% of the taxable interstate and international portions of your phone bill. Both charges support the Universal Service Fund, which keeps local phone service affordable for all Americans by providing discounts on services to schools, libraries, and people living in rural and high-cost areas. Visit frontier.com/regulatory-changes.



Received By: <u>TN</u>	Date: <u>4/10/25</u>
Reviewed By: <u>ST</u>	Date: <u>4/14/25</u>
Approved By: <u>WFP</u>	Date: <u>4/15/25</u>
Project Name/Number: <u>95000</u>	
Division #: <u>TCSD</u>	Activity Code: _____
Agreement/PO #: _____	Finance Only Batch #: _____ Account #: _____ Cost Center: _____
Road/Bridge #: _____	
Equip/Repair Order: _____	
Description: <u>COMMUNE</u>	



TEHAMA CO SANITATION DIST NO1 Account Number:
530-595-3420-102496-8
PIN:
4777

Billing Date:
Apr 05, 2025
Billing Period:
Apr 05 - May 04, 2025



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

CLAIMANT'S NAME **Pace Analytical Services LLC**
ADDRESS **PO Box 684056**
Chicago, IL 60695-4056

APRIL **(5)**

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 132967	KP & VERIFIED:

				DEPARTMENT USE	
DEPARTMENT: Sanitation District #1				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053230	95200	SD46002	252802283	\$4,661.80
605-605	00053230	95200	SD46002	252802283	\$30.00
605-605	00053230	95200	SD46002	252802283	\$7.00
BUDGET SUMMARY					TOTAL \$4,698.80

00053230	\$4,698.80
TOTAL	\$4,698.80

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
KRISTA PETERSON Auditor/Controller
By _____ Deputy County Auditor
BOARD OF SUPERVISORS
Approved: Date _____
Chairman _____

CLAIMANT **Pace Analytical Services LLC**

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

SIGNED _____ **4/14/25**
Department Head or Authorized Signature / Date



2218 Railroad Avenue
Redding, California 96001
voice 530.243.7234

Invoice

Invoice To

TEHAMA COUNTY - ADMINISTRATION OFFICE
PURCHASING DEPARTMENT
727 OAK STREET
RED BLUFF, CA 96080

Invoice Number 252802283

Invoice Date 03/28/25

Customer ID # 28-100651

Terms Due Upon Receipt

PO Number

Bid / Contract VENDOR 100166

Remit Payment To:

Pace Analytical Services LLC

Post Office Box 684056

Chicago IL 60695-4056

Received: 03/10/25

Submitted By: JIM SIMON

TEHAMA COUNTY SANITATION DIST

Project(s): MINERAL WWTP - QUARTERLY MW

Work Order(s): 25C0340

Quantity	Matrix	Analysis/Description	Unit Cost	Extended Cost
McCAMPBELL ANALYTICAL INC				
3	Water	Chromium, Hexavalent-Dissolved by EPA 218.6 [8 day]	\$80.80	\$242.40
PACE ANALYTICAL SERVICES - BAKERSFIELD				
3	Water	ASTM-D1498 ORP (Redox Potential) as Eh [8 day]	\$57.60	\$172.80
Pace Analytical Services LLC - Redding CA				
3	Water	BOD - Biochemical Oxygen Demand by SM 5210 [8 day]	\$0.00	\$0.00
3	Water	Iron by EPA 200.8 Dissolved [8 day]	\$23.20	\$69.60
3	Water	Fixed Dissolved Solids by SM 2540E [8 day]	\$53.60	\$160.80
2	Water	E. coli. Quantitray by SM 9223B Colilert-18 [5 day]	\$64.00	\$128.00
3	Water	Copper by EPA 200.8 Dissolved [8 day]	\$23.20	\$69.60
3	Water	Chromium, Dissolved by EPA 200.8 [8 day]	\$23.20	\$69.60
3	Water	Co Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Chloride by EPA 300.0 [8 day]	\$31.20	\$93.60
3	Water	Cd Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Cation/Anion Balance Calculation [8 day]	\$8.80	\$26.40
3	Water	BOD - Biochemical Oxygen Demand by SM 5210 [8 day]	\$72.80	\$218.40
3	Water	Filtration - for Dissolved Metals [10 day]	\$18.20	\$54.60
3	Water	Be Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Ba Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Boron by EPA 200.8 [8 day]	\$23.20	\$69.60
3	Water	Arsenic by EPA 200.8 Dissolved [8 day]	\$23.20	\$69.60
4	Water	Ammonia as NH ₄ - EPA 350.1 [8 day]	\$52.00	\$208.00
3	Water	Alkalinity with HCO ₃ , CO ₃ & Hydroxide by SM 2320B [8 day]	\$31.20	\$93.60
3	Water	Al Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Ag Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Calcium by EPA 200.7 [8 day]	\$23.20	\$69.60
3	Water	Sodium by EPA 200.7 [8 day]	\$23.20	\$69.60
3	Water	V Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Total & Fecal Coliform MPN 15 by SM 9221B/E [8 day]	\$67.20	\$201.60
3	Water	Tl Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Solids, Total Dissolved (TDS) by SM 2540C [8 day]	\$40.80	\$122.40

Go to www.pacelabs.com/my-account to pay with a credit or debit card or ACH.

TIN 41-1821617

Page 1 of 2

A credit card surcharge of up to 3% may be added to any payments made via credit card.



2218 Railroad Avenue
Redding, California 96001
voice 530.243.7234

Invoice

Invoice To

TEHAMA COUNTY - ADMINISTRATION OFFICE
PURCHASING DEPARTMENT
727 OAK STREET
RED BLUFF, CA 96080

Invoice Number 252802283

Invoice Date 03/28/25

Customer ID # 28-100651

Terms Due Upon Receipt

PO Number

Bid / Contract VENDOR 100166

Remit Payment To:

Pace Analytical Services LLC
Post Office Box 684056
Chicago IL 60695-4056

Received: 03/10/25

Submitted By: JIM SIMON

TEHAMA COUNTY SANITATION DIST

Project(s): MINERAL WWTP - QUARTERLY MW

Work Order(s): 25C0340

Quantity	Matrix	Analysis/Description	Unit Cost	Extended Cost
Pace Analytical Services LLC - Redding CA				
3	Water	Sulfate by EPA 300.0 [8 day]	\$31.20	\$93.60
3	Water	Se Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Sb Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Total Phosphorus by SM 4500P E [8 day]	\$58.40	\$175.20
3	Water	Lead by EPA 200.8 Dissolved [8 day]	\$23.20	\$69.60
1	Water	Iron by EPA 200.8 Filtered 1.5 um [8 day]	\$23.20	\$23.20
3	Water	Ni Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Iron by EPA 200.8 [8 day]	\$23.20	\$69.60
3	Water	Mo Diss ICPMS 200.8 [8 day]	\$23.20	\$69.60
3	Water	Manganese by EPA 200.8 [8 day]	\$23.20	\$69.60
1	Water	Manganese by EPA 200.8 Filtered 1.5 um [8 day]	\$23.20	\$23.20
3	Water	Manganese by EPA 200.8 Dissolved [8 day]	\$23.20	\$69.60
3	Water	Magnesium by EPA 200.7 [8 day]	\$23.20	\$69.60
3	Water	Potassium by EPA 200.7 [8 day]	\$23.20	\$69.60
3	Water	Hg Diss CVAA 245.1 [8 day]	\$72.80	\$218.40
3	Water	Hardness by SM 2340C [8 day]	\$31.20	\$93.60
1	Water	Filtration - for Metals testing with 1.5 um filter [15 day]	\$25.60	\$25.60
3	Water	Zinc by EPA 200.8 Dissolved [8 day]	\$23.20	\$69.60
4	Water	Nitrogen, Total [8 day]	\$119.20	\$476.80
Additional Items				
1		Environmental Impact Fee	\$30.00	\$30.00
1		Sample Disposal Fee	\$7.00	\$7.00

Invoice Total \$4,698.80

Go to www.pacelabs.com/my-account to pay with a credit or debit card or ACH.

TIN 41-1821617

Page 2 of 2

A credit card surcharge of up to 3% may be added to any payments made via credit card.

Received By: <u>TN</u>	Date: <u>4/1/25</u>
Reviewed By: <u>[Signature]</u>	Date: <u>4/1/25</u>
Approved By: <u>WFP</u>	Date: <u>4/1/25</u>
Project Name/Number: <u>95200</u>	
Division #: <u>60510</u>	Activity Code: <u>✓</u>
Agreement/PO #: <u>SD-46002</u>	
Road/Bridge #: _____	Finance Only Batch #: _____ Account #: <u>605-605-53230-605</u> Cost Center: <u>605-605-3230</u>
Equip/Repair Order: _____	
Description: <u>Quarterly -</u> <u>Mineral WWTP</u>	



COUNTY OF TEHAMA

PURCHASE ORDER

727 OAK STREET - RED BLUFF, CA 96080
(530) 527-3365 Fax (530) 529-0980

Purchase Order No. **SD-46002**

PURCHASE ORDER

Vendor Information

Name Pace Analytical Services LLC
Address PO Box 684056
City Chicago St IL Zip 60695
Phone 530-243-7234

Ship To & Bill To:

Name Tehama County Sanitation District #1
Address 9380 San Benito Avenue
City Gerber CA Zip 96035
Phone 530-385-1462 Fax 530-385-1189

Qty	Units	Product Description	Unit Price	TOTAL
1	Is	Mineral WWTP - Quarterly MW	\$4,661.80	\$4,661.80
1	Ea	Environmental Fee	\$30.00	\$30.00
1	Ea	Sample Disposal Fee	\$7.00	\$7.00
Service Description (Less than \$4,000 including Material)			Hourly Rate	TOTAL

DEPARTMENT COMMENTS: Insert comments in Box Below

Invoice: 252802283

Product SubTotal	\$4,698.80
Shipping & Handling	\$0.00
Service SubTotal	
Taxes :0.00% CA	
P.O. TOTAL	\$4,698.80

Vendor Number **132967**

INSURANCE ON FILE	PDR ON FILE
INSURANCE ATTACHED	PDR ATTACHED

P.O. NOT TO EXCEED **\$4,698.80**

Approved By:

Debbie Schmidt

Debbie Schmidt, Snelor Buyer

Purchase Order Date: 4/2/2025

Department Account Number: 60510-53230

Fixed Asset Account Number:

Ordered By: Madison Coelho

Purchasing-Blue Auditor-Yellow Dept.-Pink Vendor-White

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

CLAIMANT'S NAME **Pace Analytical Services LLC**
ADDRESS **PO Box 684056**
Chicago, IL 60695-4056

APRIL

6

AUDITORS USE ONLY

COUNTY CLAIM NO:

VENDOR NO: **132967**

KP & VERIFIED:

DEPARTMENT: Sanitation District #1				DEPARTMENT USE	
				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053230	95200	46003	252802662	\$81.60
605-605	00053230	95200	46003	252802662	\$45.30
605-605	00053230	95200	46003	252802662	\$145.60
605-605	00053230	95200	46003	252802662	\$30.00
605-605	00053230	95200	46003	252802662	\$7.00
BUDGET SUMMARY					TOTAL
					\$309.50

00053230	\$309.50
TOTAL	\$309.50

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

KRISTA PETERSON
Auditor/Controller

By _____
Deputy County Auditor

BOARD OF SUPERVISORS

Approved: Date _____

Chairman _____

CLAIMANT **Pace Analytical Services LLC**

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

SIGNED

 4/29/25
Department Head or Authorized Signature / Date



2218 Railroad Avenue
Redding, California 96001
voice 530.243.7234

Invoice

Invoice To

TEHAMA COUNTY - ADMINISTRATION OFFICE
AP Admin
727 OAK STREET
RED BLUFF, CA 96080

Invoice Number 252802662

Invoice Date 04/10/25

Customer ID # 28-100651

Terms Due Upon Receipt

PO Number

Bid / Contract VENDOR 100166

Remit Payment To:

Pace Analytical Services LLC
Post Office Box 684056
Chicago IL 60695-4056

Received: 04/02/25

Submitted By: JIM SIMON

TEHAMA COUNTY SANITATION DIST

Project(s): MINERAL WWTP - MONTHLY

Project Number(s): 04/01/2025

Work Order(s): 25D0168

Quantity	Matrix	Analysis/Description	Unit Cost	Extended Cost
Pace Analytical Services LLC - Redding CA				
2	Water	Solids, Total Suspended (TSS) by SM 2540D [8 day]	\$40.80	\$81.60
1	Water	Pickup Fee - Route (Redding) [10 day]	\$45.30	\$45.30
2	Water	BOD - Biochemical Oxygen Demand by SM 5210 [8 day]	\$72.80	\$145.60
Additional Items				
1		Environmental Impact Fee	\$30.00	\$30.00
1		Sample Disposal Fee	\$7.00	\$7.00

Invoice Total \$309.50

Received By: <u>TN</u>	Date: <u>4/11/25</u>
Reviewed By: <u>S.T</u>	Date: <u>4/15/25</u>
Approved By: <u>WFP</u>	Date: <u>4/15/25</u>
Project Name/Number: <u>95200</u>	
Division #: <u>TCSD</u>	Activity Code: <u> </u>
Agreement/PO #: <u>46003</u>	Finance Only
Road/Bridge #: <u> </u>	Batch #: <u> </u>
Equip/Repair Order: <u> </u>	Account #: <u> </u>
Description: <u>Mineral</u>	Cost Center: <u> </u>
<u>WWTP monthly</u>	

Go to www.pacelabs.com/my-account to pay with a credit or debit card or ACH.

TIN 41-1821617

A credit card surcharge of up to 3% may be added to any payments made via credit card.



COUNTY OF TEHAMA

PURCHASE ORDER

727 OAK STREET - RED BLUFF, CA 96080
(530) 527-3365 Fax (530) 529-0980

Purchase Order No. **SD-46003**

PURCHASE ORDER

Vendor Information

Name Pace Analytical Services LLC
Address PO Box 684056
City Chicago St IL Zip 60695
Phone 530-243-7234

Ship To & Bill To:

Name Tehama County Sanitation District #1
Address 9380 San Benito Avenue
City Gerber CA Zip 96035
Phone 530-385-1462 Fax 530-385-1189

Qty	Units	Product Description	Unit Price	TOTAL
2	Ea	Water-Total Suspended (TSS) by SM 2540D [8day]	\$40.80	\$81.60
1	Ea	Water-Pickup Fee - Route (Redding) [10day]	\$45.30	\$45.30
2	Ea	Water-BOD Biochemical Oxygen Demand by SM 5210 [8day]	\$72.80	\$145.60
1	Ea	Environmental Fee	\$30.00	\$30.00
1	Ea	Sample Disposal Fee	\$7.00	\$7.00
Service Description (Less than \$4,000 including Material)			Hourly Rate	TOTAL

DEPARTMENT COMMENTS: Insert comments in Box Below

Invoice: 252802283

Product SubTotal	\$309.50
Shipping & Handling	\$0.00
Service SubTotal	
Taxes :0.00% CA	
P.O. TOTAL	\$309.50

Vendor Number **132967**

INSURANCE ON FILE

PDR ON FILE

INSURANCE ATTACHED

PDR ATTACHED

P.O. NOT TO EXCEED **\$309.50**

Approved By:

Debbie Schmidt

Debbie Schmidt, Sales Buyer

Purchase Order Date: 4/15/2025

Department Account Number: 60510-53230

Fixed Asset Account Number:

Ordered By: Madison Coelho

Purchasing-Blue Auditor-Yellow Dept.-Pink Vendor-White

~~1~~ APRIL

7

COUNTY CLAIM NO:

KP & VERIFIED:

DEPARTMENT: **Sanitation District #1**

PO / AGREEMENT NO:

BUDGET SUMMARY

TOTAL	\$1,800.00
-------	------------

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.

CLAIMANT Barry Gravier Trucking

BOARD OF SUPERVISORS

Chairman

SIGNED

Department Head or Authorized Signature / Date

CUSTOMER'S ORDER NO.		DEPARTMENT		DATE 4/1/25	
NAME Tehama Co Sanitation					
ADDRESS					
CITY, STATE, ZIP Genber ca					
SOLD BY		CASH	C.O.D.	CHARGE	ON. ACCT.
				MDSE. RETD.	PAID OUT

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1 2/9	3		300 -
2 2/15	3		300 -
3			
4 3/6	3		300 -
5 3/13	3		300 -
6 3/14	3		300 -
7 3/18	3		300 -
8			
9		total	1800 -
10	Feb + mar -		
11			
12			
13			
14			
15	Barry Gravier		
16	P.O. Box 10		
17	Mineral, CA 96063		
18			

RECEIVED BY

Received By: <u>TJ</u>	Date: <u>4/8/25</u>
Reviewed By: <u>ST.</u>	Date: <u>4/9/25</u>
Approved By: <u>Dum FR</u>	Date: <u>4/10/25</u>
Project Name/Number: _____	
Division #: _____	Activity Code: _____
Agreement/PO #: _____	Finance Only Batch #: _____ Account #: _____ _____ Cost Center: _____
Road/Bridge #: _____	
Equip/Repair Order: _____	
Description: _____ _____	

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

APRIL

8

AUDITORS USE ONLY

COUNTY CLAIM NO:

VENDOR NO: 112395

KP & VERIFIED:

CLAIMANT'S NAME Home Depot Credit Services
ADDRESS PLEASE RETURN CHECK TO ROAD

DEPARTMENT USE

DEPARTMENT: Sanitation District #1

PO / AGREEMENT NO:

FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053180	95200		3510685	\$33.29
605-605	00053140	95200		3510685	\$23.63
605-605	00053140	95200		3510685	\$14.81
605-605	00053140	95200		3510685	\$6.42

BUDGET SUMMARY

TOTAL \$78.15

00053140	\$44.86
00053180	\$33.29
TOTAL	\$78.15

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

KRISTA PETERSON
Auditor/Controller

By Deputy County Auditor

BOARD OF SUPERVISORS

Approved: Date

Chairman

CLAIMANT Home Depot Credit Services

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

SIGNED

Krista Peterson 4/29/25
Department Head or Authorized Signature / Date



How doers
get more done.

2650 MAIN STREET
RED BLUFF, CA 96080 (530)528-8579

8492 00051 64926 04/08/25 08:05 AM
SALE SELF CHECKOUT

071549000103 GC YLVK 1GAL <A> 30.97
ORTHO GC YLVK CONC 1 GAL
072725014143 12- HYDROGEN <A> 21.98
HARRIS 12% HYDROGEN PEROXIDE 128OZ
044600302089 CDW 3X75CT <A> 13.78
CLX DISINFECT WIPES 3X75CT
037000523642 DWNSPRFR <A> 5.97
DAWN DISH SPRAY SK FRESH 16OZ

SUBTOTAL 72.70
SALES TAX 5.45
TOTAL \$78.15

XXXXXXXXXXXX4474 HOME DEPOT
AUTH CODE 008871/3510685 USD\$ 78.15
TA

TEHAMA CNTY SANT DIST 1
TANNOUS SPEERO
Chip Read
AID A0000000049999D8400305 THD PLCC PROX

P.O.#/JOB NAME: TEHAMA COUNTY

3492 04/08/25 08:05 AM



8492 51 64926 04/08/2025 /943

RETURN POLICY DEFINITIONS
POLICY ID DAYS POLICY EXPIRES ON
A 11 365 04/08/2026

Received By: TN Date: 4/10/25
Reviewed By: OST Date: 4/14/25
Approved By: WFP Date: 4/15/25
Project Name/Number: 95200
Division #: TCSD Activity Code: _____
Agreement/PO #: _____
Road/Bridge #: _____
Equip/Repair Order: _____
Description: household
maint garage

Finance Only	
Batch #:	_____
Account #:	_____
Cost Center:	_____

9

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 132393	KP & VERIFIED:

[illegible]

AUDITOR USE ONLY

I hereby certify that the above claim was examined and approved by this office

KRISTA PETERSON
Auditor/Controller

By _____

Deputy County Auditor

BOARD OF SUPERVISORS

Approved: Date _____

Chairman _____

SIGNED *Danette Peterson* 4/29/25
Department Head or Authorized Signature / Date



P&O Study Contribution Invoice

Central Valley Salinity Coalition, Inc.

1540 River Park Drive #211
Sacramento, CA 95815

CV-SALTS ID: 3257

Invoice Date: 04/22/2025

Invoice Number: 25-3257

Bill To:

Entity: Tehama County SD

Facility: Mineral WWTP

Address: 9380 San Benito Avenue

Received By: <u>TN</u>	Date: <u>4/23/25</u>
Reviewed By: <u>[Signature]</u>	Date: <u>4/23/25</u>
Approved By: <u>[Signature]</u>	Date: <u>4/23/25</u>
Project Name/Number: <u>95200</u>	
Division #: <u>TCSD</u>	Activity Code: <u> </u>
Agreement/PO #: <u> </u>	
Road/Bridge #: <u> </u>	
Equip/Repair Order: <u> </u>	
Description: <u>Mineral</u> <u>portion of state</u> <u>testing</u>	
Finance Only	
Batch #: <u> </u>	
Account #: <u> </u>	
Cost Center: <u> </u>	

2025 Base Fee: \$25.00

2025 Annual Participation Fee: \$158.23

2025 Late Fee:

Total: \$183.23

If you paid by check, you must include a copy of this invoice with your check to ensure timely proper credit. Payments made after August 31, 2025 will incur a late fee. Checks received without the late fee will be returned or the late fee will be added to the following year's payment.

Federal ID Number: 26-3103060

1540 River Park Drive #211
Sacramento, CA 95815

The Central Valley Salinity Coalition Inc. Tax ID # 26-3103060

A Non-Profit Member Benefit Corporation

1540 River Park Drive #211 Sacramento, CA 95815 279-345-2671

To download a copy of our W-9, please go to

https://www.cvsalinity.org/wp-content/uploads/2023/02/CSVC_W-9-2023.pdf

MAY 2025 CLAIMS

MAY

①

VENDOR NO: 101226

CLAIMANT'S NAME
ADDRESS

DEPARTMENT: **Sanitation District #1**

[illegible]

TOTAL	\$512.00
-------	----------

[illegible]

AUDITOR USE ONLY

Chairman _____

SIGNED

Department Head or Authorized Signature / Date



PACE Engineering, Inc.
 5155 Venture Parkway
 Redding, CA 96002
 530-244-0202

TEHAMA CO SANITATION DIST NO.1
 TIM MCSORLEY
 9380 SAN BENITO AVE
 GERBER, CA 96035

Invoice number 52877
 Date 05/07/2025

Project **0288.38 Mineral Contract Operations**

BALANCE IS DUE AND PAYABLE WITHIN 30 DAYS
 For Professional Services from March 30, 2025 through April 26, 2025

Phase 100 - Original Scope of Work

Professional Fees

	Date	Units	Rate	Billed Amount
Principal Engineer				
Laurie E. McCollum				
Project Coordination				
	03/31/2025	0.50	256.00	128.00
Monitoring Well Work Plan coordination				
	04/01/2025	1.00	256.00	256.00
Monitoring Well Work Plan coordination				
	04/02/2025	0.50	256.00	128.00
Monitoring Well Work Plan coordination				
Subtotal		2.00		512.00
Phase subtotal				512.00
Invoice total				512.00

Invoice Summary

Description	Prior Billed	Total Billed	Current Billed
Phase 100 - Original Scope of Work	31,693.93	32,205.93	512.00
Phase 200 - Post - CWSRF Grant Application Work	23,209.75	23,209.75	0.00
Total	54,903.68	55,415.68	512.00

Aging Summary

Invoice Number	Invoice Date	Outstanding	Current	Over 30	Over 60	Over 90	Over 120
52643	04/09/2025	877.38	877.38				
52877	05/07/2025	512.00	512.00				
Total		1,389.38	1,389.38	0.00	0.00	0.00	0.00

Please reference Project & Invoice No. with remittance.

Received By: <u>TN</u>	Date: <u>5/8/25</u>
Reviewed By: <u>ST</u>	Date: <u>5/8/25</u>
Approved By: <u>STP</u>	Date: <u>5/9/25</u>
Project Name/Number: <u>0605 - 95000</u>	
Division #: <u>TCSDI</u>	Activity Code: _____
Agreement/PO #: <u>2023-1</u>	
Feed/Bridge #: _____	
Equip/Repair Order: _____	
Description: <u>Well</u>	
<u>monitoring</u>	
Finance Only	
Batch #: <u>SD0014</u>	
Account #: <u>53230</u>	
Cost Center: <u>605</u>	

Man

2

KP & VERIFIED:

PO / AGREEMENT NO:

TOTAL	\$331.38
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Debbie Peterson 5/22/25
Department Head or Authorized Signature / Date



ENERGY STATEMENT

www.pge.com/MyEnergy

Account No: 6227612264-5

Statement Date: 05/01/2025

Due Date: 05/19/2025

Service For:

COUNTY OF TEHAMA
37735 HWY 36 E
MINERAL, CA 96063

Questions about your bill?

Business Specialist available:
Mon-Fri: 7am to 6pm
1-800-468-4743
www.pge.com/MyEnergy

Ways To Pay

www.pge.com/waystopay

Your Enrolled Programs

Peak Day Pricing Plan

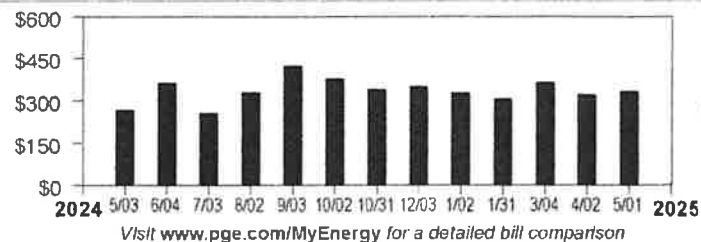
Your Account Summary

Amount Due on Previous Statement	\$622.63
Payment(s) Received Since Last Statement	-622.63
Previous Unpaid Balance	\$0.00
Current Electric Charges	\$331.38

Total Amount Due by 05/19/2025	\$331.38
---------------------------------------	-----------------

Electric Monthly Billing History

Daily Usage Comparison



1 Year Ago	Last Period	Current Period
70.79	26.02	27.30
Electric kWh / Day		

Please return this portion with your payment. No staples or paper clips. Do not fold. Thank you.

99906227612264500000331380000033138



Account Number: Due Date:
6227612264-5 05/19/2025

Total Amount Due:
\$331.38

Amount Enclosed:
\$

924060147031 1 AV 0.545 806 4218 17



COUNTY OF TEHAMA
9380 SAN BENITO AVE
GERBER CA 96035-9701

PG&E
BOX 997300
SACRAMENTO, CA 95899-7300





ENERGY STATEMENT

www.pge.com/MyEnergy

Account No: 6227612264-5
Statement Date: 05/01/2025
Due Date: 05/19/2025

Important Phone Numbers - Monday-Friday 7 a.m.-7 p.m., Saturday 8 a.m.-5 p.m.

Customer Service (All Languages; Relay Calls Accepted) 1-800-743-5000

TTY 7-1-1

Servicio al Cliente en Español (Spanish)	1-800-660-6789	Dịch vụ khách tiếng Việt (Vietnamese)	1-800-298-8438
華語客戶服務 (Chinese)	1-800-893-9555	Business Customer Service	1-800-468-4743

Rules and rates

You may be eligible for a lower rate. Find out about optional rates or view a complete list of rules and rates, visit www.pge.com or call 1-800-743-5000.

If you believe there is an error on your bill, please call 1-800-743-5000 to speak with a representative. If you are not satisfied with our response, contact the California Public Utilities Commission (CPUC), Consumer Affairs Branch (CAB), 505 Van Ness Avenue, Room 2003, San Francisco, CA 94102, 1-800-649-7570 or 7-1-1 (8:30 AM to 4:30 PM, Monday through Friday) or by visiting www.cpuc.ca.gov/complaints/.

To avoid having service turned off while you wait for the outcome of a complaint to the CPUC specifically regarding the accuracy of your bill, please contact CAB for assistance. If your case meets the eligibility criteria, CAB will provide you with instructions on how to mail a check or money order to be impounded pending resolution of your case. You must continue to pay your current charges while your complaint is under review to keep your service turned on.

If you are not able to pay your bill, call PG&E to discuss how we can help. You may qualify for reduced rates under PG&E's CARE program or other special programs and agencies may be available to assist you. You may qualify for PG&E's Energy Savings Assistance Program which is an energy efficiency program for income-qualified residential customers.

Important definitions

Rotating outage blocks are subject to change without advance notice due to operational conditions.

Demand charge: Many non-residential rates include a demand charge. Demand is a measurement of the highest usage of electricity in any single fifteen (or sometimes five) minute period during a monthly billing cycle. Demand is measured in kilowatts (or kW). High demand is usually associated with equipment start-up. By spreading equipment start-ups over a longer period of time, you may be able to lower demand and reduce your demand charges.

Time-of-use electric prices are higher every day during afternoons and evenings, and lower at other times of the day. Prices also change by season, with higher prices in the summer and lower prices in the winter.

Wildfire Fund Charge: Charge on behalf of the State of California Department of Water Resources (DWR) to fund the California Wildfire Fund. For usage prior to October 1, 2020, this charge included costs related to the 2001 California energy crisis, also collected on behalf of the DWR. These charges belong to DWR, not PG&E.

Power Charge Indifference Adjustment (PCIA): The PCIA is a charge to ensure that both PG&E customers and those who have left PG&E service to purchase electricity from other providers pay for the above market costs for electric generation resources that were procured by PG&E on their behalf. 'Above market' refers to the difference between what the utility pays for electric generation and current market prices for the sale of those resources. Visit www.pge.com/ccs.

Wildfire Hardening Charge: PG&E has been permitted to issue bonds that enable it to recover more quickly certain costs related to preventing and mitigating catastrophic wildfires, while reducing the total cost to its customers. Your bill for electric service includes a fixed recovery charge called the Wildfire Hardening Charge that has been approved by the CPUC to repay those bonds. The right to recover the Wildfire Hardening Charge has been transferred to a separate entity (called the Special Purpose Entity) that issued the bonds and does not belong to PG&E. PG&E is collecting the Wildfire Hardening Charge on behalf of the Special Purpose Entity. For details visit: www.pge.com/tariffs/assets/pdf/tariffbook/ELEC_PRELIM_JF.pdf.

Recovery Bond Charge/Credit: Your bill for electric service includes a charge that has been approved by the CPUC to repay bonds issued for certain costs related to catastrophic wildfires. The Recovery Bond Charge (RBC) rate is currently \$0.00647 per kWh. PG&E has also contributed certain amounts to a trust fund which is used to provide a customer credit equal to \$0.00647 per kWh (Recovery Bond Credit). The right to recover the RBC has been transferred to one or more Special Purpose Entities that issued the bonds and does not belong to PG&E. PG&E is collecting that portion of the RBC on behalf of the Special Purpose Entities.

Gas Public Purpose Program (PPP) Surcharge. Used to fund state-mandated gas assistance programs for low-income customers, energy efficiency programs, and public-interest research and development.

Visit www.pge.com/billexplanation for more definitions. To view most recent bill inserts including legal or mandated notices, visit www.pge.com/billinserts.

See the table reflecting "Your Electric Charges Breakdown" on the last page

*PG&E refers to Pacific Gas and Electric Company, a subsidiary of PG&E Corporation. © 2025 Pacific Gas and Electric Company All rights reserved.

Please do not mark in box. For system use only

Update My Information (English Only)

Please allow 1-2 billing cycles for changes to take effect

Account Number: 6227612264-5

Change my mailing address to: _____

City _____ State _____ ZIP code _____
Primary Phone # _____ Primary Email _____

Ways To Pay

- **Online via web or mobile at www.pge.com/waystopay**
- **By mail:** Send your payment along with this payment stub in the envelope provided.
- **By debit card, Visa, MasterCard, American Express, or Discover:** Call 877-704-8470 at any time. (Our independent service provider charges a fee per transaction.)
- **At a neighborhood payment center:** To find a neighborhood payment center near you, please visit www.pge.com or call 800-743-5000. Please bring a copy of your bill with you.



ENERGY STATEMENT

www.pge.com/MyEnergy

Account No: 6227612264-5
Statement Date: 05/01/2025
Due Date: 05/19/2025

Details of Electric Charges

04/02/2025 - 04/30/2025 (29 billing days)

Service For: 37735 HWY 36 E

Service Agreement ID: 6227612018 DIST #1 SEWER PONDS

Rate Schedule: B6 Bus Low Use Alt

Enrolled Programs: Peak Day Pricing Plan

04/02/2025 - 04/30/2025

Customer Charge	29 days @ \$0.82136	\$23.82
Energy Charges		
Peak	105.497000 kWh @ \$0.43545	45.94
Off Peak	476.678000 kWh @ \$0.39186	186.79
Super Off Peak	209.639000 kWh @ \$0.35578	74.59
Energy Commission Tax		0.24

Total Electric Charges \$331.38

Rate Identification Number



USCA-PGPG-0712-0000

www.pge.com/rin

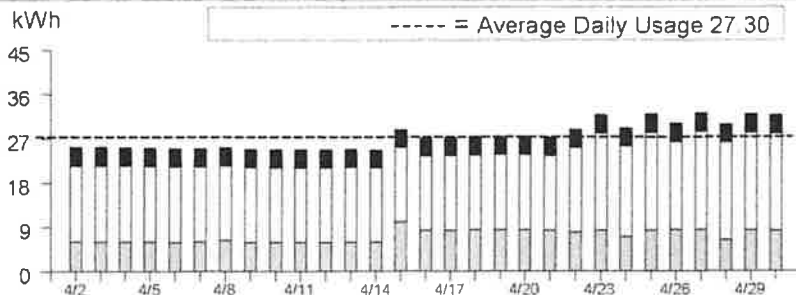
To program your smart device, scan the QR code or enter the RIN code above and follow the on-screen instructions.

Service Information

Meter #	1009998929
Total Usage	791.814000 kWh
Serial	K
Rotating Outage Block	50

Received By: <u>TN</u>	Date: <u>5/5/25</u>
Reviewed By: <u>ST</u>	Date: <u>5/6/25</u>
Approved By: <u>WFP</u>	Date: <u>5/13/25</u>
Project Name/Number: _____	
Division #: <u>TCSD1</u>	Activity Code: _____
Agreement/PO #: _____	
Road/Bridge #: _____	Finance Only Batch #: <u>SD0016</u> Account #: <u>53300</u> Cost Center: <u>605</u>
Equip/Repair Order: _____	
Description: <u>sewer pond</u> <u>etc.</u>	

Electric Usage This Period: 791.814000 kWh, 29 billing days



	Usage	Energy Charges
Peak ¹	13.32%	\$45.94
Off Peak ²	60.20%	\$186.79
Super Off Peak ³	26.48%	\$74.59

¹Peak: Year-round, Daily, 4:00pm-9:00pm

²Off Peak: Summer, 6/1-9/30, Daily, 9:00pm-4:00pm

Winter, 10/1-2/28, Daily, 9:00pm-4:00pm

Winter, 3/1-5/31, Daily, 9:00pm-9:00am and 2:00pm-4:00pm

³Super Off Peak: Winter, 3/1-5/31, Daily, 9:00am-2:00pm





ENERGY STATEMENT

www.pge.com/MyEnergy

ACCOUNT NO: 0227012204-3
Statement Date: 05/01/2025
Due Date: 05/19/2025

Your Electric Charges Breakdown (from page 2)

Generation	\$96.31
Transmission	22.44
Distribution	186.52
Electric Public Purpose Programs	17.94
Nuclear Decommissioning	-0.19
Wildfire Fund Charge	4.72
Recovery Bond Charge	5.12
Recovery Bond Credit	-5.12
Wildfire Hardening Charge	3.93
Competition Transition Charges (CTC)	-0.53
Taxes and Other	0.24
Total Electric Charges	\$331.38



AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 115951	KP & VERIFIED:

				DEPARTMENT USE	
DEPARTMENT: Sanitation District #1				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053120	95000		5305953420-MAY	\$109.75
BUDGET SUMMARY					TOTAL
					\$109.75

[illegible]

AUDITOR USE ONLY

I hereby certify that the above claim was examined and approved by this office

KRISTA PETERSON
Auditor/Controller

By _____

Deputy County Auditor

BOARD OF SUPERVISORS

Approved, Date _____

Chairman _____

SIGNED  5/22/25
Department Head or Authorized Signature / Date



TEHAMA CO SANITATION DIST Account Number:
NO1 530-595-3420-102496-8

PIN:
4777

Billing Date:
May 05, 2025

Billing Period:
May 05 - Jun 04, 2025

Hi TEHAMA CO SANITATION DIST NO1,

Your account is past due, please pay immediately to avoid any service interruptions.

Bill history

Previous balance	\$216.41
Payment received by May 05, thank you	-\$108.14
Prior bill period balance	\$108.27
Please pay past due immediately	\$108.27

Service summary

Phone	\$87.28	\$87.28
One-Time Charges		\$1.68
Taxes and Fees	\$20.99	\$20.79
Total services	\$108.27	\$109.75
Total balance		\$218.02

\$109.75 due May 29

Total balance
\$218.02
Please pay past due
immediately



Manage your account, payments, and services anytime, anywhere with the MyFrontier app. Download your free app today. To learn more visit frontier.com/myfrontierapp

Earn more. Get started with a business referral and earn up to \$325 per referral. Learn more: <https://www.businessreferralrewards.com>



P.O. Box 211579
Eagan, MN 55121-2879

6790 0102 NO RP 05 05052025 NNNNNNNY 01 997865

TEHAMA CO SANITATION DIST NO1
9380 SAN BENITO AVE
GERBER CA 96035-9701

Total balance
\$218.02

Due by
May 29

Account number
530-595-3420-102496-8

Amount enclosed
\$

Mail payment to:

FRONTIER
PO BOX 740407
CINCINNATI, OH 45274-0407

435044530595342010249600000108270000218028



TEHAMA CO SANITATION DIST NO1

Account Number:

530-595-3420-102496-8

Billing Date:

May 05, 2025

PIN:

4777

Billing Period:

May 05 - Jun 04, 2025

WAYS TO PAY YOUR BILL



Easy, simple, secure payments with
Auto Pay at frontier.com/autopay



Download the
MyFrontier® app



For help: Customer Service at frontier.com/helpcenter, chat at frontier.com/chat, or call us at 800-921-8102.
Visually impaired/TTY customers, call 711.



PAYING YOUR BILL

You are responsible for all legitimate, undisputed charges on your bill. Paying by check authorizes Frontier to make a one-time electronic funds transfer from your account, as early as the day your check is received. When making an online payment, please allow time for the transfer of funds. If funds are received after the due date, you may be charged a fee, your service may be interrupted, and you may incur a reconnection charge to restore service. A fee may be charged for a bank returned check. Continued nonpayment of undisputed charges (incl. 900 and long distance charges) may result in collection action and a referral to credit reporting agencies, which may affect your credit rating.

IMPORTANT MESSAGES

You must pay all basic local service charges to avoid basic service disconnection. Failure to pay other charges will not cause disconnection of your basic service but this may cause other services to be terminated. Frontier Bundles may include charges for both basic and other services. Frontier periodically audits its bills to ensure accuracy which may result in a retroactive or future billing adjustment. Internet speed, if noted, is the maximum wired connection speed for selected tier; Wi-Fi speeds may vary; actual and average speed may be slower and depends on multiple factors. Performance details are at frontier.com/internetdisclosures. Billing and service complaints may be submitted to the California Public Utilities Commission, Consumer Affairs Branch www.cpuc.ca.gov/complaints/; or 1-800-649-7570; or 505 Van Ness Ave., Room 2003, San Francisco, CA 94102.

Hard of Hearing, Deaf, Blind, Vision and /or Mobility Impaired customers may dial 7-1-1 to reach a consultant trained to support their communication needs. Visit www.ddtp.org for more information.

SERVICE TERMS

Visit frontier.com/terms, frontier.com/tariffs or call Customer Service for information on tariffs, price lists and other important Terms, Conditions and Policies ("Terms") related to your voice, Internet and/or video services including limitations of liability, early termination fees, the effective date of and billing for the termination of service(s) and other important information about your rights and obligations, and ours. Frontier's Terms, include a binding arbitration provision to resolve customer disputes (frontier.com/terms/arbitration). **Video and Internet services are subscription-based and are billed one full month in advance. Unless otherwise required by applicable law, video and/or Internet service subscription cancellations and any early termination fees are effective on the last day of your Frontier billing cycle. No partial month credits or refunds will be provided for previously billed service subscriptions. Installation or setup fees paid at the initiation of the Service, if any, are not refundable.** By using or paying for Frontier services, you are agreeing to these Terms and that disputes will be resolved by individual arbitration. By providing personal information to Frontier you are also agreeing to Frontier's Privacy Policy posted at frontier.com/ca-privacy.

**TEHAMA CO SANITATION DIST NO1**

Account Number:

530-595-3420-102496-8

Billing Date:

May 05, 2025

PIN:

4777

Billing Period:

May 05 - Jun 04, 2025

Don't let an unexpected outage stop your business. Get Frontier Internet Backup to keep your critical systems running. And for a limited time, you also get an 8-hour battery backup at no additional charge. Visit: business.frontier.com/internet-backup

**Phone****Monthly Charges**

05.05-06.04

Single Party Measured Business Service	\$43.50
Multi-Line Business Federal	\$14.99
Pre-Subscribed Line Charge	
Carrier Cost Recovery Surcharge	\$13.99
Frontier Roadwork Recovery Fee	\$2.60
Multi-Line Federal Subscriber Line Charge	\$9.20
Access Recovery Charge Multi-Line Business	\$3.00

Phone Total**\$87.28**

If your bill reflects that you owe a Balance Forward, you must make a payment immediately in order to avoid collection activities. You must pay a minimum of \$218.02 by your due date to avoid disconnection of your local service. All other charges should be paid by your due date to keep your account current.

Avoid account suspension by paying your past-due balance immediately. Log in to frontier.com or use the MyFrontier app for latest balances and due dates.

**One-Time Charges**

Frontier Com of America	\$1.68
-------------------------	--------

One-Time Charges Total**\$1.68****Taxes and Fees**

FCA Long Distance - Federal USF Surcharge	\$10.61
Federal USF Recovery Charge	\$4.47
Federal Excise Tax	\$1.85
Federal Taxes	\$16.93
CA St Switched Access Rate Recovery Surcharge	\$1.93
Universal Service Public Purpose Program Surcharge	\$0.90
CA St Public Utilities Commission Fee	\$0.53
CA State 911 Surcharge	\$0.41
Emergency 988 Surcharge	\$0.08
Delta EAS Recovery Surcharge	\$0.01
State Taxes	\$3.86

Taxes and Fees Total**\$20.79****Total current month charges****\$109.75**

**TEHAMA CO SANITATION DIST NO1**
 Account Number:
530-595-3420-102496-8

 Billing Date:
May 05, 2025

 PIN:
4777

 Billing Period:
May 05 - Jun 04, 2025
Frontier Com of America

530-595-3420

Call #	Date	Time	Min	*Type	Place and number called	Charge	Plan code
1	Apr 22	7:47A	.7	DN	CHICO CA 530-354-5345	\$0.08	L
2	Apr 22	7:50A	.9	DN	CHICO CA 530-354-5345	\$0.08	L
3	Apr 22	7:53A	.8	DN	CHICO CA 530-354-5345	\$0.08	L
4	Apr 22	7:56A	.8	DN	CHICO CA 530-354-5345	\$0.08	L
5	Apr 22	7:59A	.6	DN	CHICO CA 530-354-5345	\$0.08	L
6	Apr 22	8:02A	.4	DD	CHICO CA 530-354-5345	\$0.08	L
7	Apr 22	8:05A	.6	DD	CHICO CA 530-354-5345	\$0.08	L
8	Apr 22	8:08A	.7	DD	CHICO CA 530-354-5345	\$0.08	L
9	Apr 22	8:11A	.6	DD	CHICO CA 530-354-5345	\$0.08	L
10	Apr 22	8:14A	.9	DD	CHICO CA 530-354-5345	\$0.08	L
11	Apr 22	8:17A	.9	DD	CHICO CA 530-354-5345	\$0.08	L
12	Apr 22	8:20A	.9	DD	CHICO CA 530-354-5345	\$0.08	L
13	Apr 22	8:23A	.9	DD	CHICO CA 530-354-5345	\$0.08	L
14	Apr 22	8:26A	.9	DD	CHICO CA 530-354-5345	\$0.08	L
15	Apr 22	8:29A	.6	DD	CHICO CA 530-354-5345	\$0.08	L
16	Apr 22	8:32A	.6	DD	CHICO CA 530-354-5345	\$0.08	L
17	Apr 22	8:35A	.6	DD	CHICO CA 530-354-5345	\$0.08	L
18	Apr 22	8:38A	.5	DD	CHICO CA 530-354-5345	\$0.08	L
19	Apr 22	8:41A	.5	DD	CHICO CA 530-354-5345	\$0.08	L
20	Apr 22	8:45A	.4	DD	CHICO CA 530-354-5345	\$0.08	L
21	Apr 22	8:47A	.8	DD	CHICO CA 530-354-5345	\$0.08	L
Subtotal						\$1.68	

Legend Call Types:

DN - Night

DD - Day

Caller Summary Report

Phone #	Calls	Minutes	Amount
530-595-3420	21	14	\$1.68
Total	21	14	\$1.68

Caller Summary Report

Phone #	Calls	Minutes	Amount
Intra-Lata	21	14	\$1.68
Total	21	14	\$1.68

**TEHAMA CO SANITATION DIST NO1**

Account Number:

530-595-3420-102496-8

Billing Date:

May 05, 2025

PIN:

4777

Billing Period:

May 05 - Jun 04, 2025

Notice of Public Forums Regarding Verizon's Application to Acquire Frontier Companies in California (A.24-10-006)

The California Public Utilities Commission (CPUC) invites you to attend a public forum, also called a public participation hearing (PPH), regarding Verizon's application to acquire Frontier companies in California. At the PPHs you may make comments and raise concerns to the CPUC Administrative Law Judge overseeing this application.

You may also provide written public comments on this application at any time during the proceeding at:
apps.cpuc.ca.gov/c/A2410006.

In Person Public Participation Hearings

Date & Time	Location
May 29, 2025 2 p.m. and 6 p.m.	Palm Desert City Council Chambers 73510 Fred Waring Drive Palm Desert, CA 92260
June 11, 2025 2 p.m. and 6 p.m.	Santa Barbara City Council 735 Anacapa Street Santa Barbara, CA 93102 ¹
June 18, 2025 2 p.m. and 6 p.m.	Eureka City Council Chambers 531 K Street Eureka, CA 95501
June 24, 2025 2 p.m. and 6 p.m.	Monticola Clubhouse 140 S Lassen Street Susanville, CA 96130
June 30, 2025 2 p.m. and 6 p.m.	Long Beach City Council Chambers 411 West Ocean Boulevard Long Beach, CA 90802
July 7, 2025 2 p.m. and 6 p.m.	Sacramento County Board of Supervisors' Board Chambers 700 H Street, Suite 1450 Sacramento, CA 95814

¹Parking can be validated if parked in City lot 10 at Anacapa and Ortega.

Virtual Public Participation Hearings

Date & Time	Meeting Access Information
June 16, 2025 2 p.m. and 6 p.m.	Phone Number 1-800-857-1917 Passcode: 6032788# To make a comment, press *1 Webcast (View Only): Adminmonitor.com/ca/cpuc/
July 15, 2025 2 p.m. and 6 p.m.	Phone Number 1-800-857-1917 Passcode: 6032788# To make a comment, press *1 Webcast (View Only): Adminmonitor.com/ca/cpuc/



Please note: If you need a language interpreter, please contact the CPUC's Public Advisor's Office using the contact information on this notice at least five business days before the Public Forum.

Why am I receiving this notice?

In October 2024, Verizon filed an application with the CPUC to request approval for their acquisition of Frontier companies in California. The Administrative Law Judge assigned to this proceeding requested that PPHs are held to hear from the public and ordered the applicant to notify its customers about them.

How does this process work?

This application is assigned to a CPUC Administrative Law Judge and a Commissioner, who will consider proposals and evidence presented during the formal hearing processes. The Administrative Law Judge will then issue a proposed decision that may adopt Verizon's application, modify it, or deny it. Any CPUC Commissioner may sponsor an alternate decision with a different outcome. The proposed decision, and any alternate decisions, will be discussed and voted upon by the CPUC Commissioners at a public CPUC Voting Meeting.

Parties involved in the application include the Public Advocates Office, which is an independent consumer advocate within the CPUC. For more information about the Public Advocates Office, please call 1-415-703-1584, email PublicAdvocatesOffice@cpuc.ca.gov, or visit PublicAdvocates.cpuc.ca.gov.

Where can I get more information?

Contact CPUC

Please visit **apps.cpuc.ca.gov/p/A2410006** to submit a public comment about this application. Here you can also view documents and other public comments related to this proceeding. You may also mail written comments to the CPUC's Public Advisor's address below.

If you have questions about CPUC processes, you may contact CPUC's Public Advisor's Office at:

Phone: 1-866-849-8390 (toll-free) or 1-415-703-2074

Email: PublicAdvisor@cpuc.ca.gov

Mail: CPUC Public Advisor's Office, 505 Van Ness Avenue, San Francisco, CA 94102

Please reference Application **24-10-006** in any communications you have with the CPUC regarding this matter.

Contact Frontier

For questions about this application, please contact Frontier at:

Phone: 877-501-5661

Email: Jenny.Smith@ftr.com, ATTN: A.24-10-006

Address: Jenny Smith, 9260 E. Stockton Blvd, Elk Grove CA 95624, ATTN: A.24-10-006

Received By: <u>TN</u>	Date: <u>5/7/25</u>
Reviewed By: <u>ST</u>	Date: <u>5-7-25</u>
Approved By: <u>WFF</u>	Date: <u>5/8/25</u>
Project Name/Number: <u>D605-95000</u>	
Division #: <u>TCSD 1</u>	Activity Code: <u> </u>
Agreement/PO #: <u> </u>	
Road/Bridge #: <u> </u>	
Equip/Repair Order: <u> </u>	
Description: <u>phone service</u>	
<u>may 2025</u>	
<div>Finance Only Batch #: <u>SD0016</u> Account #: <u>53120</u> Cost Center: <u>605</u></div>	

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

CLAIMANT'S NAME **Pace Analytical Services LLC**
ADDRESS **PO Box 684056**
Chicago, IL 60695-4056

may (4)

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 132967	KP & VERIFIED:

DEPARTMENT: Sanitation District #1				DEPARTMENT USE	
				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053230	95200	SD46001	252801850	\$81.60
605-605	00053230	95200	SD46001	252801850	\$45.30
605-605	00053230	95200	SD46001	252801850	\$145.60
605-605	00053230	95200	SD46001	252801850	\$30.00
605-605	00053230	95200	SD46001	252801850	\$7.00
BUDGET SUMMARY					TOTAL
					\$309.50

00053230	\$309.50
TOTAL	\$309.50

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
By <u>KRISTA PETERSON</u> Auditor/Controller
By _____ Deputy County Auditor
BOARD OF SUPERVISORS
Approved: Date _____
Chairman _____

CLAIMANT **Pace Analytical Services LLC**

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

SIGNED *Krista Peterson* 3/20/25
Department Head or Authorized Signature / Date



2218 Railroad Avenue
Redding, California 96001
voice 530.243.7234

Invoice

Invoice To

TEHAMA COUNTY - ADMINISTRATION OFFICE
AP Admin
727 OAK STREET
RED BLUFF, CA 96080

Invoice Number 252801850

Invoice Date 03/11/25

Customer ID # 28-100651

Terms Due Upon Receipt

PO Number

Bid / Contract VENDOR 100166

Remit Payment To:

Pace Analytical Services LLC
Post Office Box 684056
Chicago IL 60695-4056

Received: 03/05/25

Submitted By: JIM SIMON
TEHAMA COUNTY SANITATION DIST

Project(s): MINERAL WWTP - MONTHLY

Work Order(s): 25C0212

Quantity	Matrix	Analysis/Description	Unit Cost	Extended Cost
Pace Analytical Services LLC - Redding CA				
2	Water	Solids, Total Suspended (TSS) by SM 2540D [8 day]	\$40.80	\$81.60
1	Water	Pickup Fee - Route (Redding) [10 day]	\$45.30	\$45.30
2	Water	BOD - Biochemical Oxygen Demand by SM 5210 [8 day]	\$72.80	\$145.60
Additional Items				
1		Environmental Impact Fee	\$30.00	\$30.00
1		Sample Disposal Fee	\$7.00	\$7.00
			Invoice Total	\$309.50

Received By: <u>TN</u>	Date: <u>3/12/25</u>
Reviewed By: <u>ST</u>	Date: <u>3/12/25</u>
Approved By: <u>QFP</u>	Date: <u>3/13/25</u>
Project Name/Number: _____	
Division #: <u>SD#1</u>	Activity Code: _____
Agreement/PO #: _____	
Road/Bridge #: _____	
Equip/Repair Order: _____	
Description: _____	
Finance Only	
Batch #: <u>1200037</u>	
Account #: <u>0605.605.53230.602</u>	
Cost Center: <u>0605.605.3230</u>	

Go to www.pacelabs.com/my-account to pay with a credit or debit card or ACH.

TIN 41-1821617

Page 1 of 1

A credit card surcharge of up to 3% may be added to any payments made via credit card.

Page 1 of 1



COUNTY OF TEHAMA

PURCHASE ORDER

727 OAK STREET - RED BLUFF, CA 96080
(530) 527-3365 Fax (530) 529-0980

Purchase Order No. **SD-46001**

PURCHASE ORDER

Vendor Information

Name Pace Analytical Services LLC
Address PO Box 684056
City Chicago St IL Zip 60695
Phone 530-243-7234

Ship To & Bill To:

Name Tehama County Sanitation District #1
Address 9380 San Benito Avenue
City Gerber CA Zip 96035
Phone 530-385-1462 Fax 530-385-1189

Qty	Units	Product Description	Unit Price	TOTAL
2	EA	Solids, Total Sisp[ended (TSS) by SM 2540D [8 day]	\$40.80	\$81.60
1	EA	Pickup Fee - Route (Redding) [10 day]	\$45.30	\$45.30
2	Ea	BOD - Biochemical Oxygen Demand by SM 5210 [8 day]	\$72.80	\$145.60
1	Ea	Environmental Impact Fee	\$30.00	\$30.00
1	Ea	Sample Disposal Fee	\$7.00	\$7.00
Service Description (Less than \$4,000 including Material)			Hourly Rate	TOTAL

DEPARTMENT COMMENTS: Insert comments in Box Below

Invoice: 252801850

Product SubTotal	\$309.50
Shipping & Handling	\$0.00
Service SubTotal	
Taxes :0.00% CA	
P.O. TOTAL	\$309.50

Vendor Number

132967

INSURANCE ON FILE

PDR ON FILE

INSURANCE ATTACHED

PDR ATTACHED

P.O. NOT TO EXCEED **\$309.50**

Approved By:

Debbie Schmidt

Signer ID: HLWOTCGI12

Debbie Schmidt, Snelior Buyer

Purchase Order Date: 3/14/2025

Department Account Number: 60510-53230

Fixed Asset Account Number:

Ordered By: Sarah Watson

Purchasing-Blue Auditor-Yellow Dept.-Pink Vendor-White

JUNE 2025 CLAIMS

①

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 101226	KP & VERIFIED:

[illegible]

AUDITOR USE ONLY

I hereby certify that the above claim was examined and
approved by this office

KRISTA PETERSON
Auditor/Controller

By _____

Deputy County Auditor

BOARD OF SUPERVISORS

Approved: Date _____

Chairman _____

SIGNED

[Signature] 6/25/25
Department Head or Authorized Signature /Date



PACE Engineering, Inc.
 5155 Venture Parkway
 Redding, CA 96002
 530-244-0202

TEHAMA CO SANITATION DIST NO.1
 TIM MCSORLEY
 9380 SAN BENITO AVE
 GERBER, CA 96035

Invoice number 53157
 Date 06/13/2025

Project **0288.38 Mineral Contract Operations**

BALANCE IS DUE AND PAYABLE WITHIN 30 DAYS
 For Professional Services from April 27, 2025 through May 31, 2025

Phase 100 - Original Scope of Work

Professional Fees

	Date	Units	Rate	Billed Amount
Principal Engineer				
Laurie E. McCollum				
Contract Administration				
	04/30/2025	1.00	256.00	256.00
<i>Proposal Letter</i>				
Project Coordination				
	05/06/2025	0.50	256.00	128.00
<i>Groundwater Evaluation</i>				
	05/21/2025	0.50	256.00	128.00
Subtotal		2.00		512.00
Senior Engineer				
Jessica L. Chandler				
Correspondence				
	04/30/2025	0.75	235.00	176.25
Project Management				
	05/05/2025	0.75	235.00	176.25
Subtotal		1.50		352.50

Reimbursables

	Units	Cost Rate	Cost Amount	Billed Amount
LAWRENCE & ASSOCIATES, INC				
Outside Service - Reimb			2,046.25	
<i>Professional Services</i>				
Subtotal			2,046.25	
	Rate	Basis	Markup	Amount
10% Mark-up	10.00%	2,046.25	204.63	2,250.88

Phase subtotal 3,115.38

Invoice total 3,115.38

Invoice Summary

Description	Prior Billed	Total Billed	Current Billed
Phase 100 - Original Scope of Work	32,205.93	35,321.31	3,115.38
Phase 200 - Post - CWSRF Grant Application Work	23,209.75	23,209.75	0.00
Total	55,415.68	58,531.06	3,115.38

Aging Summary

Invoice Number	Invoice Date	Outstanding	Current	Over 30	Over 60	Over 90	Over 120
53157	06/13/2025	3,115.38	3,115.38				
	Total	3,115.38	3,115.38	0.00	0.00	0.00	0.00

Please reference Project & Invoice No. with remittance.

Received By: <u>TN</u>	Date: <u>6/13/25</u>
Reviewed By: <u>SF</u>	Date: <u>6/16/25</u>
Approved By: <u>WFP</u>	Date: <u>6/12/25</u>
Project Name/Number: <u>95500</u>	
Division #: <u>ICSD 1</u>	Activity Code: <u>N/A</u>
Agreement/PO #: <u>2025-01</u>	
Road/Bridge #: <u>N/A</u>	Finance Only Batch #: <u>SD009</u> Account #: Cost Center:
Equip/Repair Order: <u>N/A</u>	
Description:	

enrollment
#3
exp
5/18/26

Tha *Tha*

RECEIVED

MAY 06 2025

PACE ENGINEERING



LAWRENCE & ASSOCIATES

3590 Iron Court
Shasta Lake, CA 96019
530.275.4800 www.lwrnc.com

Project Manager: Bonnie Lampley

May 01, 2025

Project No: 024055.00

Invoice No: 30749

Job # 288.38
Task 1b

PAID

Date 5/24/25 Ch. # 2046.25
ACCT. 52400

Pace Civil Eng.
5155 Venture Parkway
Redding, CA 96002

Project 024055.00

MONITORING WELL EVAL. MINERAL WWTP PONDS

PACE Job Number 288.38

Work Performed from January 01, 2025 to March 31, 2025

Task 002 TEST WELL SPECIFICATIONS

Professional Personnel

	Hours	Rate	Amount
Kirk, David	.25	185.00	46.25
Lampley, Bonnie	12.00	165.00	1,980.00
Nachtwey, Jessica	.25	80.00	20.00
Totals	12.50		2,046.25
Total Labor			2,046.25
Total this Task			\$2,046.25
Total this Invoice			<u>\$2,046.25</u>

Invoice Terms: Net 30

-There will be a 1.5% finance charge per month on all past due invoices-

Project #	024055.00	MONITORING WELL EVAL. MINERAL WWTP PONDS	Invoice	30749
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Billing Backup

Lawrence & Associates

Invoice 30749 Dated 5/1/2025

Thursday, May 1, 2025

12:45:23 PM

Project	024055.00	MONITORING WELL EVAL. MINERAL WWTP PONDS
PACE Job Number 288.38		

Task	002	TEST WELL SPECIFICATIONS
------	-----	--------------------------

Professional Personnel

		Hours	Rate	Amount	
PR - Kirk, David	3/24/2025	.25	185.00	46.25	
Review Work Plan					
SG - Lampley, Bonnie	2/11/2025	2.50	165.00	412.50	
Prepare responses to RWQCB comments on Mineral WWTP well report prepared by County					
SG - Lampley, Bonnie	2/12/2025	.50	165.00	82.50	
Telecon w/Pace and County staff re Mineral WWTP response (for Pace)					
SG - Lampley, Bonnie	2/13/2025	4.00	165.00	660.00	
Prepare memo with responses to RWQCB comments on Mineral WWTP groundwater plan					
SG - Lampley, Bonnie	3/19/2025	3.00	165.00	495.00	
Prepare workplan for Mineral WWTP groundwater investigation					
SG - Lampley, Bonnie	3/24/2025	2.00	165.00	330.00	
Prepare workplan for Mineral WWTP groundwater investigation; email to client					
CL - Nachtwey, Jessica	3/24/2025	.25	80.00	20.00	
Edit - Work Plan Piezometer Installation					
Totals		12.50		2,046.25	
Total Labor					2,046.25
			Total this Task		\$2,046.25
			Total this Project		\$2,046.25
			Total this Report		\$2,046.25

Invoice Terms: Net 30
 ~There will be a 1.5% finance charge per month on all past due invoices~

Page 2

JUNE 2	
AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 101232	KP & VERIFIED:

	DEPARTMENT USE	
	PO / AGREEMENT NO:	
	WARRANT DESCRIPTION	AMOUNT
	6227612264-5-MAY	\$577.82
TOTAL		\$577.82

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.

CLAIMANT P. G. & E.

SIGNED _____
Department Head or Authorized Signature / Date



ENERGY STATEMENT

www.pge.com/MyEnergy

ACCOUNT NO. 6227612264-5
Statement Date: 06/02/2025
Due Date: 06/20/2025

Service For:

COUNTY OF TEHAMA
37735 HWY 36 E
MINERAL, CA 96063

Your Account Summary

Amount Due on Previous Statement \$331.38
Payment(s) Received Since Last Statement 0.00
Previous Unpaid Balance ~~\$331.38~~
Current Electric Charges \$577.82

Questions about your bill?

Business Specialist available:
Mon-Fri: 7am to 6pm
1-800-468-4743
www.pge.com/MyEnergy

Total Amount Due by 06/20/2025 577.82 ~~\$909.20~~

Ways To Pay

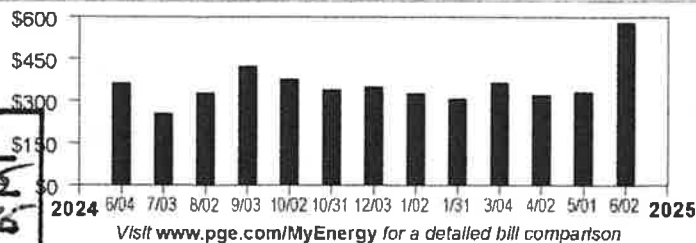
www.pge.com/waystopay

Your Enrolled Programs

Peak Day Pricing Plan

Electric Monthly Billing History

Daily Usage Comparison



1 Year Ago	Last Period	Current Period
26.08	27.30	44.27
Electric kWh / Day		

Received By: TU Date: 6/6/25
Reviewed By: S Date: 6-9-25
Approved By: WOP Date: 6/10/25
Project Name/Number: _____
Division #: TCSD 1 Activity Code: _____
Agreement/PO #: _____
Road/Bridge #: _____
Equip/Repair Order: _____
Description: sewer pond electric

Finance Only
Batch #: 80019
Account #: 53300
Cost Center: _____

Please return this portion with your payment. No staples or paper clips. Do not fold. Thank you.

99906227612264500000577820000090920



Account Number: Due Date:
6227612264-5 06/20/2025

Total Amount Due:
\$909.20

Amount Enclosed:
\$ **577.82**

939930129752 1 AV 0.545 737 9797 12



COUNTY OF TEHAMA
9380 SAN BENITO AVE
GERBER CA 96035-9701

PG&E
BOX 997300
SACRAMENTO, CA 95899-7300



ENERGY STATEMENT

www.pge.com/MyEnergy

Account No: 6227612264-5
Statement Date: 06/02/2025
Due Date: 06/20/2025

Details of Electric Charges

05/01/2025 - 06/01/2025 (32 billing days)

Service For: 37735 HWY 36 E

Service Agreement ID: 6227612018 DIST #1 SEWER PONDS

Rate Schedule: B6 Bus Low Use Alt

Enrolled Programs: Peak Day Pricing Plan

05/01/2025 - 05/31/2025

Customer Charge	31 days @ \$0.82136	\$25.46
Energy Charges		
Peak	158.733310 kWh @ \$0.43545	69.12
Off Peak	831.247710 kWh @ \$0.39186	325.73
Super Off Peak	377.833980 kWh @ \$0.35578	134.43
Energy Commission Tax		0.41

06/01/2025

Customer Charge	1 days @ \$0.82136	\$0.82
Energy Charges		
Peak	5.733530 kWh @ \$0.68214	3.91
Off Peak	43.202470 kWh @ \$0.42452	18.34
PDP Program Details		
Peak Usage Credits	5.733530 kWh @ -\$0.07228	-0.41
Energy Commission Tax		0.01

Total Electric Charges \$577.82

Rate Identification Number



USCA-PGPG-0712-0000

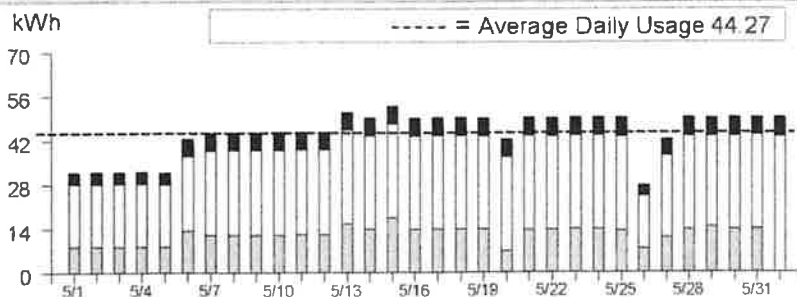
www.pge.com/rin

To program your smart device, scan the QR code or enter the RIN code above and follow the on-screen instructions.

Service Information

Meter #	1009998929
Total Usage	1,416.751000 kWh
Serial	K
Rotating Outage Block	50

Electric Usage This Period: 1,416.751000 kWh, 32 billing days



	Usage	Energy Charges
Peak ¹	11.60%	\$73.03
Off Peak ²	61.72%	\$344.07
Super Off Peak ³	26.68%	\$134.43

¹Peak: Year-round, Daily, 4:00pm-9:00pm

²Off Peak: Summer, 6/1-9/30, Daily, 9:00pm-4:00pm

Winter, 10/1-2/28, Daily, 9:00pm-4:00pm

Winter, 3/1-5/31, Daily, 9:00pm-9:00am and 2:00pm-4:00pm

³Super Off Peak: Winter, 3/1-5/31, Daily, 9:00am-2:00pm



Visit www.pge.com/MyEnergy for a detailed bill comparison.

JUNE

3

COUNTY CLAIM NO:

KP & VERIFIED:

CLAIMANT'S NAME
ADDRESS

PO / AGREEMENT NO:

[illegible]

TOTAL	\$1,283.95
-------	------------

00105580	\$1,283.95
TOTAL	\$1,283.95

Chairman _____

SIGNED

Department Head or Authorized Signature / Date

NBS
32605 Temecula Pkwy
Suite 316
Temecula CA 92592

INVOICE



NOTE: Our suite number has changed to #316 effective May 20, 2025

Bill To:

Tiffany Jensen, Accountant
Tehama County Sanitation District
tjensen@tehamartpa.org

Invoice #	202506-2447
Invoice Date	6/20/2025
Due Date	7/20/2025
Terms	Net 30
Project #	TEHAMA.1915
PO #	
Amount Due:	\$1,283.95

Quarterly Invoice
District Administration Services

Annual Fee of \$5,059.80 Invoiced Quarterly (Includes 3.80% inflator)

Professional Services from July 1, 2025 through September 30, 2025

Fees

Item	Description	Amount
District Administration - Bonded Assessment	AD 1995-1	\$1,264.95
Fees Subtotal:		\$1,264.95

Expenses

Item	Amount
AD 1995-1 property data expense	\$15.00
AD 1995-1 phone expense	\$4.00
Expenses Subtotal:	\$19.00

Amount Due:	\$1,283.95
--------------------	-------------------

Received By: <u>TJ</u>	Date: <u>6/23/25</u>
Reviewed By: <u>[Signature]</u>	Date: <u>6-25-25</u>
Approved By: <u>WFP</u>	Date: <u>6/25/25</u>
Project Name/Number: _____	
Division #: <u>TCSD</u>	Activity Code: _____
Agreement/PO #: <u>SD-46006</u>	
Road/Bridge #: _____	
Equip/Repair Order: _____	
Description: <u>Bond admin</u>	

Finance Only	
Batch #: <u>SD0020</u>	
Account #:	
Cost Center:	

684-53230



COUNTY OF TEHAMA

PURCHASE ORDER

727 OAK STREET - RED BLUFF, CA 96080
(530) 527-3365 Fax (530) 529-0980

Purchase Order No. **SD-46006**

PURCHASE ORDER

Vendor Information

Name **NBS**
Address **32605 Temecula Parkway, Ste 316**
City **Temecula** St **CA** Zip **92592**
Phone _____

Ship To & Bill To:

Name **Tehama County Sanitation District #1**
Address **9380 San Benito Avenue**
City **Gerber** CA Zip **96035**
Phone **530-385-1462** Fax **530-385-1189**

Qty	Units	Product Description	Unit Price	TOTAL
1	Ea	District Administration - Bonded Assesment	\$1,264.95	\$1,264.95
1	EA	AD 1995-1 Property Data Expense	\$15.00	\$15.00
1	Ea	AD 1995-1 Phone Expense	\$4.00	\$4.00
Service Description (Less than \$4,000 including Material)			Hourly Rate	TOTAL

DEPARTMENT COMMENTS: Insert comments in Box Below

Invoice: 202506-2447

Product SubTotal	\$1,283.95
Shipping & Handling	\$0.00
Service SubTotal	
Taxes :0.00% CA	
P.O. TOTAL	\$1,283.95

Vendor Number	106441	INSURANCE ON FILE	X	PDR ON FILE
		INSURANCE ATTACHED		PDR ATTACHED

P.O. NOT TO EXCEED **\$1,283.95**

Approved By:

Debbie Schmidt
Debbie Schmidt, Senior Buyer

Purchase Order Date: **6/30/2025**
Department Account Number: **60510-53230**
Fixed Asset Account Number: _____
Ordered By: **Madison Coelho**

Purchasing-Blue Auditor-Yellow Dept.-Pink Vendor-White

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

CLAIMANT'S NAME **Tehama County Public Works**
ADDRESS **Credit Fund 3011-461070**

JUNE

④

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 106793	KP & VERIFIED:

INTERNAL CLAIM				DEPARTMENT USE	
DEPARTMENT: Sanitation District #1				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053230	95000		251020068	\$8,694.20
605-605	00053230	95200		251020068	\$19,065.68
605-605	00053230	95224		251020068	\$793.33
BUDGET SUMMARY					TOTAL \$28,553.21

00053230	\$28,553.21
TOTAL	\$28,553.21

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	
By	KRISTA PETERSON Auditor/Controller
Deputy County Auditor	
BOARD OF SUPERVISORS	
Approved: Date	
Chairman	

CLAIMANT **Tehama County Public Works**

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

SIGNED  6/24/25
Department Head or Authorized Signature / Date

Page 1 of 1



Tehama County
PUBLIC WORKS DEPARTMENT
9380 SAN BENITO AVE
GERBER, CA 96035
Road
(530) 385-1462
www.tehamacountypublicworks.ca.gov

To:

Tehama County Sanitation District #1
9380 San Benito Avenue
Gerber, CA 96035

Date: 06/15/2025

Customer No: 95000

Invoice No: 251020068

Total Due: **\$28,553.21**

Page # 1 of 1

3rd Qtr Intrafund / Jan-March FY24-25 See Attached Detail

Description	Quantity	Unit Cost	Unit of Meas	Total Cost
95000 TCSD #1 General Admin / Clerical	1	8,694.20	EA	8,694.20
95200 Plant Operations / Maintenance	1	19,065.68	EA	19,065.68
95224 Inflow & Infiltration	1	793.33	EA	793.33

Prepared by: SLT

On Receipt

Payment to 102-3011-461070

Tehama County
PUBLIC WORKS DEPARTMENT
9380 SAN BENITO AVE
GERBER, CA 96035
Road
(530) 385-1462
www.tehamacountypublicworks.ca.gov

Tehama County Sanitation District #1

Customer No: 95000

Invoice No: 251020068

TOTAL DUE **\$28,553.21**

Amount of remittance:

Tehama County Auditor's Office
DEPARTMENTAL TRANSACTION REQUEST

DEPARTMENT NAME: Sanitation District #1

TYPE OF TRANSACTION:

- ☐ TRANSFER FROM TRUST AND AGENCY FUNDS
- ☐ CORRECTIVE ACTION
- ☒ OTHER

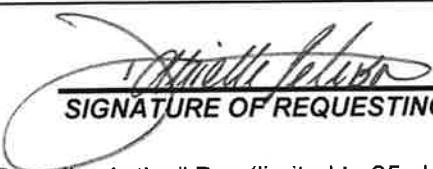
FROM					USE DEBIT FOR:	USE CREDIT FOR:
MOVE REVENUE OR EXPENSE "FROM" THIS ACCOUNT, OR CORRECT AN ENTRY MADE IN ERROR FROM THIS ACCT					Decreasing Revenue in this account	Decreasing Expenses in this account
FUND/ DEPT	ACCT #	PROJECT #	ACCT #	DESCRIBE ACTION	DEBIT	CREDIT
605-60510	53230			95000 TCSD General/Admin	8,694.20	
605-60510	53230			95200 TCSD Plant Ops/Maintenance	19,065.68	
605-60510	53230			95224 Inflow&Infiltration	793.33	

TO					USE DEBIT FOR:	USE CREDIT FOR:
MOVE REVENUE OR EXPENSE "TO" THIS ACCOUNT, OR CORRECT AN ENTRY MADE IN ERROR FROM THIS ACCT					Increasing Expenses in this account	Increasing Revenues in this account
FUND/ DEPT	ACCT #	PROJECT #	ACCT #	DESCRIBE ACTION	DEBIT	CREDIT
102-3011	461070			95000 TCSD General/Admin		8,694.20
102-3011	461070			95200 TCSD Plant Ops/Maintenance		19,065.68
102-3011	461070			95224 Inflow&Infiltration		793.33

REQUIRED:

STATE REASON FOR TRANSFER. INCLUDE DEPOSIT, CLAIM, OR JOURNAL ENTRY NUMBERS

Invoice #251020068 - 3rd Quarter Intrafund TCSD #1


SIGNATURE OF REQUESTING OFFICIAL

6/24/2025

DATE

NOTE: The description you put in the "Describe Action" Box (limited to 25 characters) will appear on the monthly ledger status report you receive from the Auditor's Office.

**Tehama County
Department of Public Works
Cost Accounting Management System
Project Cost Source Report**

*Detail Report by Project (W/ Lead Elmnts), Source Type
Run Date: 06/24/2025 12:04:23pm By: SLT
Fiscal Year: 2025*

Selection Criteria

Select Month

JAN 2025~MAR 2025

Exclude Month

JUL 2024~DEC 2024, APR 2025~JUN 2025

Select Project

0102-95000~0102-95500

Run Date: 06/24/2025 12:04:23pm
 Fiscal Year: 2025
 Selection Criteria: See Cover Page

Tehama County
 Department of Public Works
 Cost Accounting Management System
 Project Cost Source Report

Page 1
 By: SLT

0102 (Project (W/ Lead Elmnts)) FUNO: Road
 95000 PROJECT NO: TCRD#1 GENERAL ADMIN./CLERICAL
 INV Invoice

Date	Doc No	Vendor Name	Amount
01/02/2025	01092025	AT&T Mobility	40.24
02/01/2025	287339254695-01	AT&T Mobility	40.24
02/24/2025	A-2502-19A	Amazon Business	21.22
02/24/2025	A-2502-19A	Amazon Business	9.43
02/24/2025	A-2502-19A	Amazon Business	9.09
02/24/2025	A-2502-19A	Amazon Business	27.87
03/01/2025	787339254695-02	AT&T Mobility	40.24
04/01/2025	287339254695-MAR	AT&T Mobility	40.24
* INV Subtotal			228.57

LBR Labor

Date	Employee	Name	Job Class Descr	Activity	Reg Hrs	Ot Hrs	Labor	Overhead	Equipment	Amount
01/06/2025	E04435	Peterson, Danielle	Finance Manager	0005	0.25	0.00	16.13	0.00	0.00	16.13
01/07/2025	E04435	Peterson, Danielle	Finance Manager	0005	2.50	0.00	161.27	0.00	0.00	161.27
01/08/2025	E04435	Peterson, Danielle	Finance Manager	0005	2.00	0.00	129.02	0.00	0.00	129.02
01/07/2025	5485	Watson, Sarah	Accountant I	0005	3.00	0.00	185.82	0.00	0.00	185.82
01/08/2025	5485	Watson, Sarah	Accountant I	0005	6.00	0.00	371.65	0.00	0.00	371.65
01/09/2025	E04435	Peterson, Danielle	Finance Manager	0005	2.00	0.00	129.02	0.00	0.00	129.02
01/10/2025	E04435	Peterson, Danielle	Finance Manager	0005	0.25	0.00	16.13	0.00	0.00	16.13
01/09/2025	5485	Watson, Sarah	Accountant I	0005	5.50	0.00	340.68	0.00	0.00	340.68
01/10/2025	5485	Watson, Sarah	Accountant I	0005	2.00	0.00	123.88	0.00	0.00	123.88
01/09/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	2.00	0.00	159.77	0.00	0.00	159.77
01/13/2025	5485	Watson, Sarah	Accountant I	0005	1.00	0.00	61.94	0.00	0.00	61.94
01/13/2025	E04435	Peterson, Danielle	Finance Manager	0005	1.00	0.00	64.51	0.00	0.00	64.51
01/17/2025	5485	Watson, Sarah	Accountant I	0005	4.00	0.00	247.77	0.00	0.00	247.77
01/21/2025	5485	Watson, Sarah	Accountant I	0005	5.00	0.00	309.71	0.00	0.00	309.71
01/22/2025	5485	Watson, Sarah	Accountant I	0005	6.00	0.00	371.65	0.00	0.00	371.65
01/23/2025	5485	Watson, Sarah	Accountant I	0005	2.00	0.00	123.88	0.00	0.00	123.88
01/24/2025	5485	Watson, Sarah	Accountant I	0005	6.00	0.00	371.65	0.00	0.00	371.65
01/16/2025	E04435	Peterson, Danielle	Finance Manager	0030	0.75	0.00	48.38	0.00	0.00	48.38
01/13/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0068	3.00	0.00	239.65	0.00	0.00	239.65
01/15/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0068	4.00	0.00	319.53	0.00	0.00	319.53
01/22/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0068	1.00	0.00	79.88	0.00	0.00	79.88
01/23/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0068	2.00	0.00	159.77	0.00	0.00	159.77
01/31/2025	5485	Watson, Sarah	Accountant I	0005	5.00	0.00	309.71	0.00	0.00	309.71
02/03/2025	5485	Watson, Sarah	Accountant I	0005	4.00	0.00	247.77	0.00	0.00	247.77
02/04/2025	E04435	Peterson, Danielle	Finance Manager	0005	0.25	0.00	16.13	0.00	0.00	16.13
02/04/2025	5485	Watson, Sarah	Accountant I	0005	3.00	0.00	185.82	0.00	0.00	185.82
02/05/2025	5485	Watson, Sarah	Accountant I	0005	1.00	0.00	61.94	0.00	0.00	61.94
02/06/2025	5485	Watson, Sarah	Accountant I	0005	6.00	0.00	371.65	0.00	0.00	371.65
02/07/2025	5485	Watson, Sarah	Accountant I	0005	4.00	0.00	247.77	0.00	0.00	247.77
02/06/2025	E04435	Peterson, Danielle	Finance Manager	0030	0.25	0.00	16.13	0.00	0.00	16.13
01/29/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	2.00	0.00	159.77	0.00	0.00	159.77
01/30/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	1.00	0.00	79.88	0.00	0.00	79.88
02/10/2025	5485	Watson, Sarah	Accountant I	0005	2.00	0.00	123.88	0.00	0.00	123.88
02/11/2025	5485	Watson, Sarah	Accountant I	0005	2.00	0.00	123.88	0.00	0.00	123.88
02/19/2025	E04435	Peterson, Danielle	Finance Manager	0005	1.25	0.00	80.63	0.00	0.00	80.63
02/19/2025	5485	Watson, Sarah	Accountant I	0005	2.00	0.00	123.88	0.00	0.00	123.88
02/20/2025	5485	Watson, Sarah	Accountant I	0005	3.00	0.00	185.82	0.00	0.00	185.82
02/21/2025	5485	Watson, Sarah	Accountant I	0005	4.00	0.00	247.77	0.00	0.00	247.77
02/10/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	2.00	0.00	159.77	0.00	0.00	159.77
02/13/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	3.00	0.00	239.65	0.00	0.00	239.65
02/14/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	0.00	1.00	62.59	0.00	0.00	62.59
02/19/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	1.00	0.00	79.88	0.00	0.00	79.88
02/20/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0068	1.00	0.00	79.88	0.00	0.00	79.88
02/25/2025	E04435	Peterson, Danielle	Finance Manager	0005	2.25	0.00	145.14	0.00	0.00	145.14
02/27/2025	E04435	Peterson, Danielle	Finance Manager	0005	1.50	0.00	96.76	0.00	0.00	96.76
02/24/2025	5485	Watson, Sarah	Accountant I	0005	3.00	0.00	185.82	0.00	0.00	185.82
02/25/2025	5485	Watson, Sarah	Accountant I	0005	2.00	0.00	123.88	0.00	0.00	123.88
03/05/2025	5485	Watson, Sarah	Accountant I	0005	1.00	0.00	61.94	0.00	0.00	61.94
03/04/2025	E04908	Coelho, Anne D.	Administrative Assistant	0005	1.00	0.00	61.94	0.00	0.00	61.94
03/03/2025	E04908	Coelho, Anne D.	Administrative Assistant	0005	1.00	0.00	61.94	0.00	0.00	61.94
02/27/2025	E04908	Coelho, Anne D.	Administrative Assistant	0005	1.50	0.00	92.91	0.00	0.00	92.91
02/24/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	3.00	0.00	239.65	0.00	0.00	239.65
02/27/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0068	1.00	0.00	79.88	0.00	0.00	79.88
03/03/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0068	1.00	0.00	79.88	0.00	0.00	79.88
* LBR Subtotal					127.25	1.00	8,465.63	0.00	0.00	8,465.63
** 95000 Subtotal					127.25	1.00	8,465.63	0.00	0.00	8,694.20

Run Date: 06/24/2025 12:04:23pm
 Fiscal Year: 2025
 Selection Criteria: See Cover Page

Tehama County
 Department of Public Works
 Cost Accounting Management System
 Project Cost Source Report

Page 2
 By: SLT

0102 (Project (W/ Lead Elmnts)) FUND: Road
 95200 PROJECT NO: Plant Operations/Maintenance
 EQP Equipment

Date	Equipment No	Units	Amount
01/14/2025	205	3.00	111.57
01/21/2025	205	3.00	111.57
01/27/2025	205	3.00	111.57
02/03/2025	205	3.00	111.57
02/04/2025	205	3.00	111.57
02/11/2025	205	3.00	111.57
02/18/2025	205	3.00	111.57
02/25/2025	205	3.00	111.57
03/04/2025	205	3.00	111.57
03/06/2025	205	2.00	74.38
* EQP Subtotal			1,078.51

INV Invoice

Date	Doc No	Vendor Name	Amount
01/23/2025	1129419567	Ferreilgas LP	341.11
01/24/2025	A-2501-15A	Amazon Business	106.18
01/30/2025	9390861285	Grainder Inc	120.73
01/30/2025	INV00609021	USA BlueBook	1,196.08
01/30/2025	INV00609021	USA BlueBook	21.31
01/30/2025	INV00609076	USA BlueBook	41.24
02/17/2025	INV00625573	USA BlueBook	94.36
* INV Subtotal			1,921.01

LBR Labor

Date	Employee	Name	Job Class Descr	Activity	Reg Hrs	Ot Hrs	Labor	Overhead	Equipment	Amount
01/07/2025	E05327	Bayles, Delmar	Public Works Maintenance Worker	0064	10.00	0.00	481.96	0.00	0.00	481.96
01/07/2025	E01398	Raimor, Clint L.	Lead Public Works Maintenance Wo	0064	10.00	0.00	675.45	0.00	0.00	675.45
01/07/2025	E04851	Tejeda, Mario A.	Public Works Maintenance Worker	0064	10.00	0.00	623.10	0.00	0.00	623.10
01/08/2025	E01398	Raimor, Clint L.	Lead Public Works Maintenance Wo	0064	6.00	0.00	405.27	0.00	0.00	405.27
01/08/2025	E05327	Bayles, Delmar	Public Works Maintenance Worker	0064	5.00	0.00	240.98	0.00	0.00	240.98
01/08/2025	E05376	Gonzalez, Francisco	Public Works Maintenance Worker	0064	5.00	0.00	277.32	0.00	0.00	277.32
01/08/2025	E01353	Botts, Fredrick Delmar	Public Works Maintenance Supervi	0064	10.00	0.00	754.33	0.00	0.00	754.33
01/08/2025	E04851	Tejeda, Mario A.	Public Works Maintenance Worker	0064	8.00	0.00	498.48	0.00	0.00	498.48
01/07/2025	E05376	Gonzalez, Francisco	Public Works Maintenance Worker	0064	10.00	0.00	554.64	0.00	0.00	554.64
12/30/2024	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	798.83	0.00	0.00	798.83
01/06/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	3.00	0.00	239.65	0.00	0.00	239.65
01/07/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	798.83	0.00	0.00	798.83
01/08/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	5.00	0.00	399.42	0.00	0.00	399.42
01/14/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	798.83	0.00	0.00	798.83
01/21/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	798.83	0.00	0.00	798.83
01/27/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	798.83	0.00	0.00	798.83
01/31/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	0.00	3.00	187.77	0.00	0.00	187.77
02/01/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	0.00	3.00	187.77	0.00	0.00	187.77
02/03/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	5.00	0.00	399.42	0.00	0.00	399.42
02/04/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	798.83	0.00	0.00	798.83
02/10/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	4.00	0.00	319.53	0.00	0.00	319.53
02/11/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	798.83	0.00	0.00	798.83
02/18/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	9.00	0.00	718.95	0.00	0.00	718.95
02/25/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	798.83	0.00	0.00	798.83
03/03/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	3.00	0.00	239.65	0.00	0.00	239.65
03/04/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	798.83	0.00	0.00	798.83
03/05/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	2.00	0.00	159.77	0.00	0.00	159.77
03/06/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	2.00	0.00	159.77	0.00	0.00	159.77
* LBR Subtotal					197.00	6.00	14,712.70	0.00	0.00	14,712.70

OVH Overhead

Date	Employee	Name	Amount
01/07/2025	E05327	Bayles, Delmar	144.59
01/07/2025	E01398	Raimor, Clint L.	202.64
01/07/2025	E04851	Tejeda, Mario A.	186.93
01/08/2025	E01398	Raimor, Clint L.	121.58
01/08/2025	E05327	Bayles, Delmar	72.29
01/08/2025	E05376	Gonzalez, Francisco	83.20
01/08/2025	E01353	Botts, Fredrick Delmar	226.30
01/08/2025	E04851	Tejeda, Mario A.	149.54
01/07/2025	E05376	Gonzalez, Francisco	166.39
* OVH Subtotal			1,353.46

** 95200 Subtotal

19,065.68

Run Date: 06/24/2025 12:04:23pm
 Fiscal Year: 2025
 Selection Criteria: See Cover Page

Tehama County
 Department of Public Works
 Cost Accounting Management System
 Project Cost Source Report

Page 3
 By: SLT

0102 (Project (W/ Lead Elmnts)) FUND: Road
 95224 PROJECT NO: Inflow & Infiltration - TCSD #1
 EQP Equipment

Date	Equipment No	Units	Amount
02/26/2025	205	2.38	74.38
* EQP Subtotal			0.00

LBR Labor

Date	Employee	Name	Job Class Descr	Activity	Reg Hrs	Ot Hrs	Labor	Overhead	Equipment	Amount
02/05/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	6.00	0.00	479.30	0.00	0.00	479.30
02/26/2025	E04730	Tannous, Speero B.	Senior Engineering Technician	0064	3.00	0.00	239.65	0.00	0.00	239.65
* LBR Subtotal					9.00	0.00	718.95	0.00	0.00	718.95
** 95224 Subtotal					9.00	0.00	718.95	0.00	74.38	793.33
*** 0102 Subtotal					333.25	7.00	23,897.28	1,353.46	1,152.89	28,553.21
**** Grand Total					333.25	7.00	23,897.28	1,353.46	1,152.89	28,553.21

*** END OF REPORT ***

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

JUNE **(5)**

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 112999	KP & VERIFIED:

CLAIMANT'S NAME **Alliant Insurance Services, Inc.**
 ADDRESS **NPB Main
PO Box 8473
Pasadena, CA 91109-8473**

				DEPARTMENT USE	
DEPARTMENT: Sanitation District #1				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053150	95000		10170991	\$6,700.00
605-605	00053150	95000		10170991	\$72.00
605-605	00053150	95000		10170991	\$213.06
BUDGET SUMMARY					TOTAL
					\$6,985.06

00053150	\$6,985.06
TOTAL	\$6,985.06

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	
KRISTA PETERSON Auditor/Controller	
By _____	Deputy County Auditor
BOARD OF SUPERVISORS	
Approved Date _____	
Chairman _____	

CLAIMANT **Alliant Insurance Services, Inc.**

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

SIGNED  **6/20/25**
 Department Head or Authorized Signature Date

Alliant Insurance Services Inc.

APIP INVOICE

NAMED INSURED: Tehama County Sanitation District #1	INVOICE DATE: June 6, 2025 PAYMENT DUE DATE: July 23, 2025 CUSTOMER NUMBER: TEHACOU-05 EFFECTIVE DATE: July 1, 2025
TOTAL INVOICE DUE AT THIS TIME: \$ 6,985.06	

INSURANCE CO: Various	INVOICE NUMBER: 10170991
POLICY NUMBER: PPROP2526	
Total Property Premium:	\$ 6,700.00
ABS Fee:	\$ 72.00
Estimated SLT&F:	\$ 213.06
Broker Fee:	\$ 0.00
TOTAL DUE AT THIS TIME:	\$ 6,985.06

Total Due includes Premiums, Taxes and Fees where applicable. The Cyber Enhancement premium, should you have elected to purchase this coverage, is not included as part of this invoice.

Please return a copy of the invoice with your payment. Premiums are due and payable upon receipt of this invoice but no later than 30 days of Binding. If payment is not received by the due date, policies may be subject to cancellation.

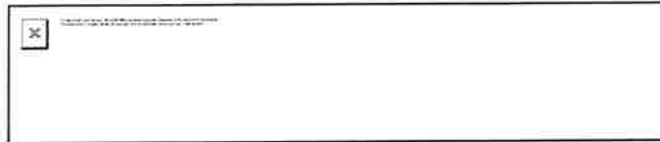
Alliant embraces a policy of transparency with respect to its compensation from insurance transactions. Details on our compensation policy, including the types of income that Alliant may earn on a placement, are available on our website at www.alliant.com. For a copy of our policy or for any inquiries regarding compensation issues pertaining to your account you may also contact us at: Alliant Insurance Services, Attention: General Counsel, 701 B Street, 6th Floor, San Diego, CA 92101.

Coverages, limits, sub-limits, terms and conditions could change. All changes will be advised prior to binding and accompany the Binder Confirmation for July 1, 2025 bound terms.

Received By: <u>TJ</u>	Date: <u>6/18/25</u>
Reviewed By: <u>[Signature]</u>	Date: <u>6/18/25</u>
Approved By: <u>WCP</u>	Date: <u>6/18/25</u>
Project Name/Number: _____	
Division #: <u>TCSD 4</u>	Activity Code: _____
Agreement/PO #: <u>SD-4600L</u>	Finance Only
Road/Bridge #: _____	Batch #: _____
Equip/Repair Order: _____	Account #: <u>53150</u>
Description: <u>25-26</u>	Cost Center: _____
<u>Slip Renewal</u>	

Valerie Chavez

From: PurchaseOrder <Purchaseorder@tehama.gov>
Sent: Friday, June 20, 2025 11:41 AM
To: Valerie Chavez; PurchaseOrder
Subject: RE: Attached Image



I spoke with Fran at the Auditor's Office and she confirmed, you do not need a Purchase Order to pay insurance premiums.

Debbie Schmidt

From: Valerie Chavez <vchavez@tcpw.ca.gov>
Sent: Friday, June 20, 2025 11:36 AM
To: PurchaseOrder <Purchaseorder@tehama.gov>
Subject: FW: Attached Image

Hello,

Purchase order for your signature. Have a great weekend.

Thank you,
Val

******CAUTION: This is an EXTERNAL email. Exercise caution. DO NOT open attachments or click links from unknown senders or unexpected email.******

6

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 115951	KP & VERIFIED:

[illegible]

AUDITOR USE ONLY

I hereby certify that the above claim was examined and approved by this office

KRISTA PETERSON
Auditor/Controller

By _____
Deputy County Auditor

BOARD OF SUPERVISORS

Approved: Date _____

Chairman _____

SIGNED  6/17/25
Department Head or Authorized Signature / Date



TEHAMA CO SANITATION DIST Account Number:
NO1 530-595-3420-102496-8

PIN:
4777

Billing Date:
Jun 05, 2025
 Billing Period:
Jun 05 - Jul 04, 2025

Hi TEHAMA CO SANITATION DIST NO1,

Simplify your payments! Enroll in Auto Pay today to avoid missed payments and service interruptions.

Bill history

Previous balance	\$218.02
Payment received by Jun 05, thank you	-\$216.41
Prior bill period balance	\$1.61
Please pay past due immediately	\$1.61

Service summary

Phone	\$87.28	\$87.28
One-Time Charges	\$1.68	\$0.32
Taxes and Fees	\$20.79	\$20.77
Total services	\$109.75	\$108.37

Total balance **\$109.98**

\$108.37 due Jun 30

Total balance
\$109.98
 Please pay past due
 immediately



Manage your account, payments, and services anytime, anywhere with the MyFrontier app. Download your free app today. To learn more visit frontier.com/myfrontierapp

$(FY25/06/05 - 06/30: \$77.25 + 0.32 + 10.39 = 87.96)$
 $(FY25/07/01 - 07/04: \$11.64 + 10.39 = 22.02)$
109.98 ✓

Earn more. Get started with a business referral and earn up to \$325 per referral. Learn more: <https://www.businessreferralrewards.com>



P.O. Box 211579
 Eagan, MN 55121-2879

6790 0102 NO RP 05 06052025 NNNNNNNY 01 997227

TEHAMA CO SANITATION DIST NO1
 9380 SAN BENITO AVE
 GERBER CA 96035-9701

Total balance
\$109.98

Due by
 Jun 30

Account number
 530-595-3420-102496-8

Amount enclosed
 \$

Mail payment to:

FRONTIER
 PO BOX 740407
 CINCINNATI, OH 45274-0407

835003530595342010249600000001610000109988



TEHAMA CO SANITATION DIST NO1

Account Number:

530-595-3420-102496-8

Billing Date:

Jun 05, 2025

PIN:

4777

Billing Period:

Jun 05 - Jul 04, 2025

WAYS TO PAY YOUR BILL



Easy, simple, secure payments with
Auto Pay at frontier.com/autopay



Download the
MyFrontier[®] app



For help: Customer Service at frontier.com/helpcenter, chat at frontier.com/chat, or call us at 800-921-8102.
Visually impaired/TTY customers, call 711.

PAYING YOUR BILL

You are responsible for all legitimate, undisputed charges on your bill. Paying by check authorizes Frontier to make a one-time electronic funds transfer from your account, as early as the day your check is received. When making an online payment, please allow time for the transfer of funds. If funds are received after the due date, you may be charged a fee, your service may be interrupted, and you may incur a reconnection charge to restore service. A fee may be charged for a bank returned check. Continued nonpayment of undisputed charges (incl. 900 and long distance charges) may result in collection action and a referral to credit reporting agencies, which may affect your credit rating.

IMPORTANT MESSAGES

You must pay all basic local service charges to avoid basic service disconnection. Failure to pay other charges will not cause disconnection of your basic service but this may cause other services to be terminated. Frontier Bundles may include charges for both basic and other services. Frontier periodically audits its bills to ensure accuracy which may result in a retroactive or future billing adjustment. Internet speed, if noted, is the maximum wired connection speed for selected tier: Wi-Fi speeds may vary; actual and average speed may be slower and depends on multiple factors. Performance details are at frontier.com/internetdisclosures. Billing and service complaints may be submitted to the California Public Utilities Commission, Consumer Affairs Branch www.cpuc.ca.gov/complaints/; or 1-800-649-7570; or 505 Van Ness Ave., Room 2003, San Francisco, CA 94102.

Hard of Hearing, Deaf, Blind, Vision and/or Mobility Impaired customers may dial 7-1-1 to reach a consultant trained to support their communication needs. Visit www.ddtp.org for more information

SERVICE TERMS

Visit frontier.com/terms, frontier.com/tariffs or call Customer Service for information on tariffs, price lists and other important Terms, Conditions and Policies ("Terms") related to your voice, Internet and/or video services including limitations of liability, early termination fees, the effective date of and billing for the termination of service(s) and other important information about your rights and obligations, and ours. Frontier's Terms, include a binding arbitration provision to resolve customer disputes (frontier.com/terms/arbitration). **Video and Internet services are subscription-based and are billed one full month in advance. Unless otherwise required by applicable law, video and/or Internet service subscription cancellations and any early termination fees are effective on the last day of your Frontier billing cycle. No partial month credits or refunds will be provided for previously billed service subscriptions. Installation or setup fees paid at the initiation of the Service, if any, are not refundable.** By using or paying for Frontier services, you are agreeing to these Terms and that disputes will be resolved by individual arbitration. By providing personal information to Frontier you are also agreeing to Frontier's Privacy Policy posted at frontier.com/ca-privacy.

**TEHAMA CO SANITATION DIST NO1**

Account Number:

530-595-3420-102496-8

Billing Date:

Jun 05, 2025

Page 3/6

PIN:

4777

Billing Period:

Jun 05 - Jul 04, 2025

Don't let an unexpected outage stop your business. Get Frontier Internet Backup to keep your critical systems running. And for a limited time, you also get an 8-hour battery backup at no additional charge. Visit: business.frontier.com/internet-backup

**Phone****Monthly Charges**

06 05-07 04

Single Party Measured Business Service	\$43.50
Multi-Line Business Federal	\$14.99
Pre-Subscribed Line Charge	
Carrier Cost Recovery Surcharge	\$13.99
Frontier Roadwork Recovery Fee	\$2.60
Multi-Line Federal Subscriber Line Charge	\$9.20
Access Recovery Charge Multi-Line Business	\$3.00

Phone Total**\$87.28****One-Time Charges**

Frontier Com of America

\$0.32

One-Time Charges Total**\$0.32****Taxes and Fees**

FCA Long Distance - Federal USF Surcharge	\$10.61
Federal USF Recovery Charge	\$4.47
Federal Excise Tax	\$1.85

Federal Taxes**\$16.93**

CA St Switched Access Rate Recovery Surcharge	\$1.93
Universal Service Public Purpose Program Surcharge	\$0.90
CA St Public Utilities Commission Fee	\$0.51
CA State 911 Surcharge	\$0.41
Emergency 988 Surcharge	\$0.08
Delta EAS Recovery Surcharge	\$0.01

State Taxes**\$3.84****Taxes and Fees Total****\$20.77****Total current month charges****\$108.37**

If your bill reflects that you owe a Balance Forward, you must make a payment immediately in order to avoid collection activities. You must pay a minimum of \$109.98 by your due date to avoid disconnection of your local service. All other charges should be paid by your due date to keep your account current.

Avoid account suspension by paying your past-due balance immediately. Log in to frontier.com or use the MyFrontier app for latest balances and due dates.

ENABLING SHORT CODE ACCESS FOR MULTI-LINE

TELEPHONE SYSTEM (MLTS) AND PBX SERVICE:

When calling from an MLTS or PBX phone (which often requires dialing 9 to get dial-tone), or a phone with direct access to dial-tone to reach calls to 9-1-1, and other abbreviated dialing or short code numbers, the call may not be completed if your telephone system is not programmed correctly.

Some MLTS systems (also known as PBX, or by other names), which often require dialing 9 to obtain a dial-tone for an outside line may not be able to reach calls to short code numbers such as 2-1-1, 7-1-1, 8-1-1 and 9-1-1. Some callers may have issues with call completion such as false disconnected messages, no dial tone, fast busy or other type of call failure, if the calling path in the equipment has not been correctly programmed for short code numbers.

Call failures may be due to lack of software programming for MLTS or PBX-type systems to recognize the short code numbers such as 2-1-1, 7-1-1, 8-1-1 and 9-1-1. If an MLTS or PBX-type system is not programmed to allow short codes other than 9-1-1, the call will not even reach the carrier's switch or facilities.

To enable access to services available through short codes, your equipment should be programmed by your equipment provider. Please contact your





TEHAMA CO SANITATION DIST
NO1

Account Number:
530-595-3420-102496-8

PIN:
4777

Billing Date:
Jun 05, 2025

Billing Period:
Jun 05 - Jul 04, 2025

LET FRONTIER BE YOUR TECH SUPPORT

Tech issues won't wait until you have an IT team to fix them. Get the tech support you need without the overhead. Frontier Premium Tech Pro.

business.frontier.com

vendor for assistance. If you purchased your system from Frontier and need assistance with programming, please contact Frontier at 1-800-921-8102 for support and assistance.





TEHAMA CO SANITATION DIST NO1

Account Number:
530-595-3420-102496-8

Billing Date:
Jun 05, 2025

PIN:
4777

Billing Period:
Jun 05 - Jul 04, 2025

Frontier Com of America

530-595-3420

Call #	Date	Time	Min	*Type	Place and number called	Charge	Plan code
1	Jun 01	5 50A	2	DN	CHICO CA 530-354-5345	\$0 08	L
2	Jun 01	5 52A	8	DN	CHICO CA 530-354-5345	\$0 08	L
3	Jun 01	6 06A	5	DN	CHICO CA 530-354-5345	\$0 08	L
4	Jun 01	6 09A	5	DN	CHICO CA 530-354-5345	\$0 08	L
Subtotal						\$0 32	

Legend Call Types:

DN - Night



Caller Summary Report

Phone #	Calls	Minutes	Amount
530-595-3420	4	2	\$0 32
Total	4	2	\$0 32

Caller Summary Report

Phone #	Calls	Minutes	Amount
Intra-Lata	4	2	\$0 32
Total	4	2	\$0 32



TEHAMA CO SANITATION DIST NO1

Account Number:
530-595-3420-102496-8

PIN:
4777

Billing Date:
Jun 05, 2025

Billing Period:
Jun 05 - Jul 04, 2025



Sign Out

Get the MyFrontier app:

Personalized deals and discounts, order and installation tracking, & self-service tools. Download today.

My Account My Billing

MY BILLING

Address: 37735 State Highway 3

Received By: <u>TN</u>	Date: <u>6/10/25</u>
Reviewed By: <u>ST</u>	Date: <u>6-11-25</u>
Approved By: <u>WFP</u>	Date: <u>6-11-25</u>
Project Name/Number: _____	
Division #: <u>TCSD 1</u>	Activity Code: _____
Agreement/PO #: _____	Finance Only Batch #: <u>550218</u> Account #: <u>53120</u> Cost Center: _____
Road/Bridge #: _____	
Equip/Repair Order: _____	
Description: <u>phone service</u>	

Total Balance

Manage payments →

\$0.23

Payment due Jun 30

 Set up Auto Pay and never miss a payment

MAKE A PAYMENT

Recent activity

View activity →

Payment	Jun 09, 2025	-\$109.75
Bill statement	Jun 05, 2025	\$109.98
Payment	May 07, 2025	-\$216.41



Chat

Statement date

Jun 05, 2025

▼

 **DOWNLOAD**

Jun 05, 2025	\$109.98
Phone	\$87.28 ▼
One-time charges	\$0.32 ▼
Taxes and fees	\$20.77 ▼
Past due balance	\$1.61 ▼

Statements

Manage statements →

June 05, 2025

\$109.98

[View Bill](#)

[Download Bill](#)

May 05, 2025

\$218.02

[View Bill](#)

[Download Bill](#)

April 05, 2025

[View Bill](#)

[Download Bill](#)



Chat

Auto Pay is off



Never miss a payment with Auto Pay.

Set up safe and easy automatic payments.

SET UP AUTO PAY

Paperless Billing

You're enrolled in Paperless!

You're reducing waste & organizing your bills with paperless billing.

Turn off Paperless →

Payment methods

You don't have any saved payment methods

Manage payment methods →



Sign Out

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Corporate 

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Policies & Notifications	Broadband Consumer Labels
Terms & Conditions	Do Not Sell or Share My Personal Information

Privacy Policy



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

JUNE

7

AUDITORS USE ONLY

COUNTY CLAIM NO:

VENDOR NO: **132967**

KP & VERIFIED:

CLAIMANT'S NAME **Pace Analytical Services LLC**
ADDRESS **PO Box 684056**
Chicago, IL 60695-4056

DEPARTMENT USE

DEPARTMENT: **Sanitation District #1**

PO / AGREEMENT NO:

FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053230	95200	SD46005	252804316	\$81.60
605-605	00053230	95200	SD46005	252804316	\$45.30
605-605	00053230	95200	SD46005	252804316	\$145.60
605-605	00053230	95200	SD46005	252804316	\$30.00
605-605	00053230	95200	SD46005	252804316	\$7.00

complete

BUDGET SUMMARY

TOTAL **\$309.50**

00053230	\$309.50
TOTAL	\$309.50

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

KRISTA PETERSON
Auditor/Controller

By _____
Deputy County Auditor

BOARD OF SUPERVISORS

Approved: Date _____

Chairman _____

CLAIMANT **Pace Analytical Services LLC**

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

SIGNED


Department Head or Authorized Signature / Date

6/25/25



2218 Railroad Avenue
Redding, California 96001
voice 530.243.7234

Invoice

Invoice To
TEHAMA COUNTY - ADMINISTRATION OFFICE
AP Admin
727 OAK STREET
RED BLUFF, CA 96080

Invoice Number 252804316
Invoice Date 06/12/25
Customer ID # 28-100651
Terms Due Upon Receipt

PO Number
Bid / Contract VENDOR 100166

Remit Payment To:
Pace Analytical Services LLC
Post Office Box 684056
Chicago IL 60695-4056

Received: 06/04/25
Submitted By: SPEERO TANNOUS
TEHAMA COUNTY SANITATION DIST
Project(s): MINERAL WWTP - MONTHLY
Work Order(s): 25F0215

Quantity	Matrix	Analysis/Description	Unit Cost	Extended Cost
Pace Analytical Services LLC - Redding CA				
2	Water	Solids, Total Suspended (TSS) by SM 2540D [8 day]	\$40.80	\$81.60
1	Water	Pickup Fee - Route (Redding) [10 day]	\$45.30	\$45.30
2	Water	BOD - Biochemical Oxygen Demand by SM 5210 [8 day]	\$72.80	\$145.60
Additional Items				
1		Environmental Impact Fee	\$30.00	\$30.00
1		Sample Disposal Fee	\$7.00	\$7.00
			Invoice Total	\$309.50

Received By: <u>TN</u>	Date: <u>6/12/25</u>
Reviewed By: <u>ST</u>	Date: <u>6-12-25</u>
Approved By: <u>WFO</u>	Date: <u>6/12/25</u>
Project Name/Number: <u>0605-95200</u>	
Division #: <u>TCSD 1</u>	Activity Code: <u>N/A</u>
Agreement/PO #: <u>SD-46005</u>	
Road/Bridge #: <u>N/A</u>	
Equip/Repair Order: <u>N/A</u>	
Description: <u>monthly testing</u>	
Finance Only	
Batch #: <u>SD0019</u>	
Account #: <u>53230</u>	
Cost Center: <u>605</u>	

Go to <http://pacelabs.billtrust.com> to pay with a credit or debit card or ACH.

TIN 41-1821617

A credit card surcharge of up to 3% may be added to any payments made via credit card.



COUNTY OF TEHAMA

PURCHASE ORDER

727 OAK STREET - RED BLUFF, CA 96080
(530) 527-3365 Fax (530) 529-0980

Purchase Order No. **SD-46005**

PURCHASE ORDER

Vendor Information

Name Pace Analytical Services LLC
Address PO Box 684056
City Chicago St IL Zip 60695
Phone 530-243-7234

Ship To & Bill To:

Name Tehama County Sanitation District #1
Address 9380 San Benito Avenue
City Gerber CA Zip 96035
Phone 530-385-1462 Fax 530-385-1189

Qty	Units	Product Description	Unit Price	TOTAL
2	Ea	Water-Total Suspended (TSS) by SM 2540D [8day]	\$40.80	\$81.60
1	Ea	Water-Pickup Fee - Route (Redding) [10day]	\$45.30	\$45.30
2	Ea	Water-BOD Biochemical Oxygen Demand by SM 5210 [8day]	\$72.80	\$145.60
1	Ea	Environmental Fee	\$30.00	\$30.00
1	Ea	Sample Disposal Fee	\$7.00	\$7.00
Service Description (Less than \$4,000 including Material)			Hourly Rate	TOTAL

DEPARTMENT COMMENTS: Insert comments in Box Below

Invoice: 252804316

Product SubTotal	\$309.50
Shipping & Handling	\$0.00
Service SubTotal	
Taxes :0.00% CA	
P.O. TOTAL	\$309.50

Vendor Number	132967	INSURANCE ON FILE	PDR ON FILE
		INSURANCE ATTACHED	PDR ATTACHED

P.O. NOT TO EXCEED **\$309.50**

Approved By:

Debbie Schmidt
Signer ID: OT4GDGHC15...

Debbie Schmidt, Sneior Buyer

Purchase Order Date: 6/17/2025

Department Account Number: 60510-53230

Fixed Asset Account Number:

Ordered By: Madison Coelho