

Tehama County Sanitation District No. 1 Claims

FUND	Claimant	Description	Account	Amount
January 2025 Payments				
605	Home Depot Credit Services	Cleaning Supplies	53140	\$ 26.60
605	Home Depot Credit Services	Small Tools	53270	\$ 160.18
605	Home Depot Credit Services	Building Maintenance Supplies	53180	\$ 65.43
605	Fed Ex	DO Meter-Mailed Pump for Repairs	53170	\$ 185.37
605	Fed Ex	Fee - DO Meter Pump	53170	\$ 14.83
605				
605				
605				
605				
605				
January 2025 Total				\$ 452.41
February 2025 Payments				
684	NBS (Local Government Solutions)	Bond - Admin Fee 01/01/25-03/31/25	53230	\$ 1,284.64
605	PACE Engineering	Professional Services 12/29/24-01/25/25	53230	\$ 293.75
605	PG&E	Utilities 01/02/25-01/30/25	53300	\$ 305.62
605	Home Depot Credit Services	Small Parts	53180	\$ 5.85
605	Tehama County Public Works	TCSD Quarter 1 Admin	53230	\$ 19,369.45
605	Tehama County Public Works	TCSD Quarter 2 Admin	53230	\$ 9,380.39
605	Frontier Communications	Phone Service 01/05/25-02/04/25	53120	\$ 108.34
605	Pace Anaylitcal	Mineral WWTP	53230	\$ 308.54
605	USA Bluebook	Plant Daily Testing	53280	\$ 21.31
605	USA Bluebook	Plant Daily Testing	53270	\$ 1,196.08
605	USA Bluebook	Plant Daily Testing	53280	\$ 41.24
605				
605				
February 2025 Total				\$ 32,315.21

March 2025 Payments					
605	Pace Analytical	Mineral WWTP	53230	\$	309.50
605	PACE Engineering	Professional Services 01/01/25-02/28/25	53230	\$	1,855.25
605	USA Bluebook	Plant Chart	53280	\$	94.36
684	NBS (Local Government Solutions)	Bond - Admin Fee 04/01/25-06/30/25	53230	\$	1,283.95
605	Frontier Communications	Phone Service 03/05/25-04/04/25	53120	\$	108.14
605	PG&E	Utilities 01/31/25-03/03/25	53300	\$	362.62
605	Home Depot Credit Services	Small Parts	53180	\$	27.86
605					
605					
605					
605					
605					
March 2025 Total			\$		4,041.68

\$ 36,809.30 Total Payments Made January - March 2025

TCSD #1

Financial Impact for Quarterly Claims

January - March 2025

Fund 0605		\$34,240.71
0605	53120	\$ 216.48
0605	53140	\$ 26.60
0605	53170	\$ 200.20
0605	53180	\$ 99.14
0605	53230	\$ 31,516.88
0605	53270	\$ 1,356.26
0605	53280	\$ 156.91
0605	53300	\$ 668.24
		\$ 34,240.71

Fund 0684		\$ 2,568.59
0684	53230	\$ 2,568.59

Total Paid:		\$ 36,809.30
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January 2025 Claims

COPY

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

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

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 112395	KP & VERIFIED:

				DEPARTMENT USE	
DEPARTMENT: Sanitation District #1				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053140	95200		2533400	\$9.12
605-605	00053140	95200		2533400	\$10.73
605-605	00053140	95200		2533400	\$6.75
605-605	00053180	95200		2533402	\$20.70
605-605	00053180	95200		2533402	\$1.76
605-605	00053180	95200		2533402	\$42.97
605-605	00053270	95200		2533402	\$160.18
BUDGET SUMMARY					TOTAL
					\$252.21

00053140	\$26.60
00053180	\$65.43
00053270	\$160.18
TOTAL	\$252.21

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 <div>KRISTA PETERSON Auditor/Controller</div> 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 _____ **2/10/25**
Department Head of Authorized Signature / Date

cleaning supplies

TEHAMA COUNTY WARRANT
444 OAK STREET, SUITE J
RED BLUFF, CA 96080-3335

ACCOUNTS PAYABLE

USBANK
24-HOUR BANKING 90-2267/1211
1-800-673-3555

70869304

Warrant Date 02/12/25

PAY TWO Hundred FIFTY TWO Dollars and TWENTY ONE Cents

PAY THIS AMOUNT

\$ *****252.21

VOID IF NOT CASHED WITHIN SIX MONTHS

TO THE
ORDER
OF:

HOME DEPOT CREDIT SERVICES
P O BOX 78047
PHOENIX, AZ 85062-2047

Krista Peterson, Auditor - Controller

11 70869304 11 121122676153401776676 11

INVOICE DATE	INV #	PO#	AMT	DESC
01/29/25	2533400		26.60	HOUSEHOLD EXPENSE
01/29/25	2533402		225.61	MTCE STRUCT-IMPRV-GROUNDS
				PWRK

PWRK

WARRANT DATE

02/12/25

WARRANT TOTAL

252.21

VENDOR NO.

112395

WARRANT NO.

70869304

COPY

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 113434	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



Invoice Number	Invoice Date	Account Number	Page
8-717-48292	Dec 20, 2024	1483-9997-2	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 Express Services**

Total Charges USD \$185.37
TOTAL THIS INVOICE USD \$185.37

0605-00053220-000
0605-605-3220

You saved \$7.35 in discounts this period!

Shipments included in this invoice received an earned discount. If you would like to know how it was calculated, please go to the following URL:
<https://www.fedex.com/EarnedDiscounts/>.

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 Jan 04, 2025 are subject to a late fee.

Important Service Message:

Ensure the safety of your shipments by keeping your account information secure. Avoid sharing your FedEx account details with unauthorized personnel.



mail
pump
gas repair

DO Meter

1/31/25
PUBLIC WORKS/POA
Received Date 1/21/25 By TW
Approver Date 1-27-25 JZ

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
8-717-48292	USD \$185.37	1483-9997-2

Remittance Advice

Your payment is due by Jan 04, 2025

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

8717482924000018537114839997260000000000000001853710

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
8-717-48292	Dec 20, 2024	1483-9997-2	2 of 2

FedEx Express Shipment Summary By Payor Type

FedEx Express Shipments (Original)

Payor Type	Shipments	Rated Weight lbs	Transportation Charges	Special Handling Charges	Ret Chg/Tax Credits/Other	Discounts	Total Charges
Shipper	1	14.0	147.05	45.67		-7.35	185.37
Total FedEx Express	1	14.0	\$147.05	\$45.67		-\$7.35	\$185.37

TOTAL THIS INVOICE

USD

\$185.37

FedEx Express Shipment Detail By Payor Type (Original)

Ship Date: Dec 13, 2024	Cust. Ref.: NO REFERENCE INFORMATION	Ref.#2:
Payor: Shipper	Ref.#3:	

Fuel Surcharge - FedEx has applied a fuel surcharge of 16.00% to this shipment.

Distance Based Pricing, Zone 8

Package sent from: 96002 zip code

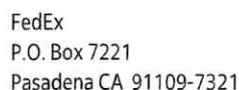
FedEx has audited this shipment for correct packages, weight, and service. Any changes made are reflected in the invoice amount.

We calculated your charges based on a dimensional weight of 14.0 lbs, 17 in x 16 in x 7 in, using a dimensional factor of 139.

Automation	AWB	Sender	Recipient
Tracking ID	807583761085	TEHAMA COUNTY PUBLIC WORKS	YSI XYLEM BRANK
Service Type	FedEx 2Day	9380 SAN BENITO AVE	1725 BRANNUM LANE
Package Type	Customer Packaging	GERBER CA 96035-9701 US	YELLOW SPRINGS OH 45387 US
Zone	08		
Packages	1		
Actual Weight	4.0 lbs, 1.8 kgs		
Rated Weight	14.0 lbs, 6.4 kgs	Transportation Charge	147.05
Declared Value	USD 1,500.00	Grace Discount	-7.35
Delivered	Dec 17, 2024 11:37	Fuel Surcharge	22.67
Svc Area	A2	Declared Value Charge	21.00
Signed by	P.WAYNE	Demand Surcharge	2.00
FedEx Use	034844045/6112/_	Total Charge	USD \$185.37
		Shipper Subtotal	USD \$185.37
		Total FedEx Express	USD \$185.37

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
9-689-35687	Jan 24, 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	8-717-48292	12/20/24	185.37	-	185.37	8%	14.83
Total					\$185.37		\$14.83

TOTAL THIS INVOICE

USD

\$14.83

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!

February 2025 Claims

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 106441	KP & VERIFIED:

[illegible]

TOTAL	\$1,284.64
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[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 _____

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.

Angela Polanco 2/20/25
Department Head or Authorized Signature / Date

NBS
32605 Temecula Pkwy
Suite 100
Temecula CA 92592

INVOICE



Sanitation

Bill To:

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

Invoice # 202412-4171
Invoice Date 12/20/2024
Due Date 1/19/2025
Terms Net 30
Project # TEHAMA.1915
PO #

Amount Due: \$1,284.64

PUBLIC WORKS/ROAD
Received Date 1/17/25 By TJ
Approved Date 1/17/25 By RS

Quarterly Invoice
District Administration Services

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

Professional Services from January 1, 2025 through March 31, 2025

Fees

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

Expenses

Item	Amount
AD 1995-1 property data expense	\$15.00
AD 1995-1 phone expense	\$4.00
Postage - Direct Bills	\$0.69
<i>Expenses Subtotal:</i>	\$19.69

Amount Due: \$1,284.64

0684-0684-53230-000
0684-684-3230



TEHAMA COUNTY WARRANT

444 OAK STREET, SUITE J
RED BLUFF, CA 96080-3335

USBANK
24-HOUR BANKING 90-2267/1211
1-800-673-3555

ACCOUNTS PAYABLE

70869804

Warrant Date 02/24/25

PAY ONE Thousand TWO Hundred EIGHTY FOUR Dollars and SIXTY FOUR Cents

PAY THIS AMOUNT

\$ *****1,284.64

VOID IF NOT CASHED WITHIN SIX MONTHS

TO THE ORDER OF: NBS GOVERNMENT FINANCE
32605 TEMECULA PARKWAY STE 100
TEMECULA, CA 92592

Krista Peterson
Krista Peterson, Auditor - Controller

⑈70869804⑈ ⑆121122676⑆153401776676⑈

INVOICE DATE	INV #	PO#	AMT	DESC
01/19/25	022412-4171		1,284.64	PROFESSIONAL/SPECIAL SERV
PWRK				

WARRANT DATE

02/24/25

WARRANT TOTAL

1,284.64

VENDOR NO.

106441

WARRANT NO.

70869804

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

CLAIMANT'S NAME **PACE Engineering**
ADDRESS **PLEASE RETURN TO ROAD**

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	52177	\$293.75
BUDGET SUMMARY					TOTAL
					\$293.75


00053230	\$293.75
TOTAL	\$293.75

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 Engineering**

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  2/24/25
Department Head or Authorized Signature / Date



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

PUBLIC WORKS/ROAD
Received Date 2/10/25 BY TJ
Approved Date 2/11/25 BY SA

Sanitation

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

Invoice number 52177
Date 02/06/2025

Project 0288.38 Mineral Contract Operations

BALANCE IS DUE AND PAYABLE WITHIN 30 DAYS
For Professional Services from December 29, 2024 through January 25, 2024

Phase 100 - Original Scope of Work

Professional Fees

	Date	Units	Rate	Billed Amount
Senior Engineer				
Jessica L. Chandler				
Research				
	01/09/2025	0.50	235.00	117.50
Reconnection fee/inspection policy				
	01/10/2025	0.75	235.00	176.25
Reconnection ordinance language				
Subtotal		1.25		293.75
Phase subtotal				293.75
Invoice total				293.75

Invoice Summary

Description	Prior Billed	Total Billed	Current Billed
Phase 100 - Original Scope of Work	28,667.55	28,961.30	293.75
Phase 200 - Post - CWSRF Grant Application Work	23,209.75	23,209.75	0.00
Total	51,877.30	52,171.05	293.75

Aging Summary

Invoice Number	Invoice Date	Outstanding	Current	Over 30	Over 60	Over 90	Over 120
52177	02/06/2025	293.75	293.75				
Total		293.75	293.75	0.00	0.00	0.00	0.00

Please reference Project & Invoice No. with remittance.

COF 7

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 101232	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

Angelle Peterson 2/20/25
Department Head or Authorized Signature / Date



ENERGY STATEMENT

www.pge.com/MyEnergy

Mineral
TCSO

Account No: 6227612264-5
Statement Date: 01/31/2025
Due Date: 02/18/2025

Service For:

COUNTY OF TEHAMA
37735 HWY 36 E
MINERAL, CA 96063

Your Account Summary

Amount Due on Previous Statement	\$325.62
Payment(s) Received Since Last Statement	-325.62
Previous Unpaid Balance	\$0.00
Current Electric Charges	\$305.62

Questions about your bill?

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

Total Amount Due by 02/18/2025 \$305.62

Ways To Pay

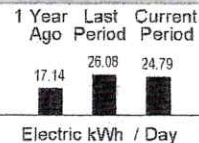
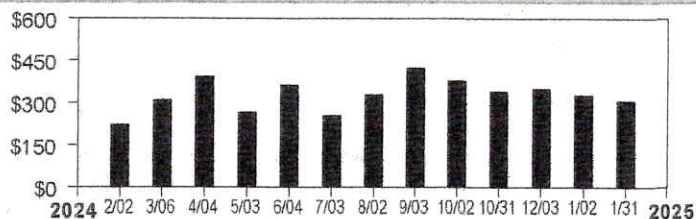
www.pge.com/waystopay

Your Enrolled Programs

Peak Day Pricing Plan

Electric Monthly Billing History

Daily Usage Comparison



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

PUBLIC WORKS/ROAD
Received Date 2/1/25 By JY
Approved Date 2/1/25 By AK

0605-0605-53300-000

0605-605-3300

0605-95000

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

99906227612264500000305620000030562



Account Number: 6227612264-5 Due Date: 02/18/2025

Total Amount Due: \$305.62

Amount Enclosed:



875460122085 1 AV 0.545 658 6224 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

Account No: 6227612264-5
Statement Date: 01/31/2025
Due Date: 02/18/2025

Details of Electric Charges

01/02/2025 - 01/30/2025 (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

01/02/2025 - 01/30/2025

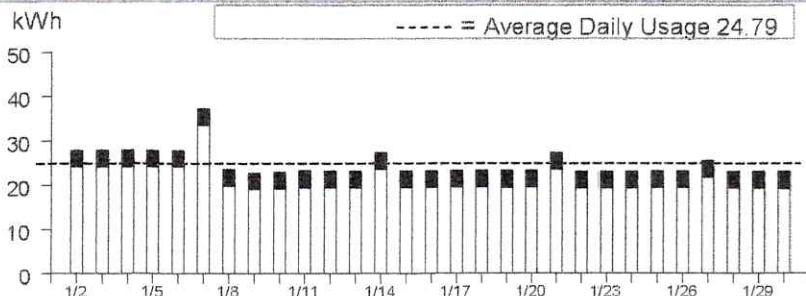
Customer Charge	29 days @ \$0.82136	\$23.82
Energy Charges		
Peak	109.553000 kWh @ \$0.42870	46.97
Off Peak	609.215000 kWh @ \$0.38511	234.61
Energy Commission Tax		0.22

Total Electric Charges \$305.62

Service Information

Meter # 1009998929
Total Usage 718 768000 kWh
Serial K
Rotating Outage Block 50

Electric Usage This Period: 718.768000 kWh, 29 billing days



	Usage	Energy Charges
■ Peak ¹	15.24%	\$46.97
□ Off Peak ²	84.76%	\$234.61
■ Super Off Peak ³	0.00%	\$0.00

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



COPY

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 112395	KP & VERIFIED:

BUDGET SUMMARY

TOTAL	\$5.85
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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 **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

Department Head or Authorized Signature / Date



Smallpox

How doers
get more done

Speed PUBLIC WORKS/ROAD
Received Date 2/25/05 BY TTD
Approved Date 2/16/05 BY MS

95220

2550 MAIN STREET
RED BLUFF, CA 96080 (530)528-8579

02/03/25 11:34 AM

SA>

TOTAL
SALES TAX
TOTAL
174 HOME DEPOT
USD\$ 5.85
TA

TEHAMA COUNTY



AM

8492 02 90379 02/03/25 4214
RETURN POLICY DEFINITIONS
POLICY ID 365
POLICY EXPIRES ON 02/03/2026



Smallpox

How doers
get more done

Speed PUBLIC WORKS/ROAD
Received Date 2/25/05 BY TTD
Approved Date 2/16/05 BY MS

95220

2550 MAIN STREET
RED BLUFF, CA 96080 (530)528-8579

02/03/25 11:34 AM

SA>

SUBTOTAL
SALES TAX
TOTAL
XXXXXXX 14474 HOME DEPOT
USD\$ 5.85
TA

TEHAMA COUNTY



AM

8492 02 0379 02/03/25 11:34 AM
RETURN POLICY DEFINITIONS
POLICY ID 365
POLICY EXPIRES ON 02/03/2026

COPY

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

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

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	00053230	95000	FY 24-25	251020037	\$3,174.44
605-605	00053230	95200	FY 24-25	251020037	\$16,195.01
605-605	00053230	95000	FY 24-25	251020038	\$2,315.75
605-605	00053230	95200	FY 24-25	251020038	\$7,064.64
BUDGET SUMMARY					TOTAL
					\$28,749.84

00053230	\$28,749.84
TOTAL	\$28,749.84

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

2/25/25
 Department Head or Authorized Signature / Date

8



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: 01/31/2025

Customer No: 95000

Invoice No: 251020037

Total Due: **\$19,369.45**

Page # 1 of 1

1st Qtr Intrafund / Jul-Sept FY24-25 See Attached Detail

Description	Quantity	Unit Cost	Unit of Meas	Total Cost
95000 TCSD #1 General Admin / Clerical	1	3,174.44	EA	3,174.44
95200 Plant Operations / Maintenance	1	16,195.01	EA	16,195.01

Prepared by: SLT

On Receipt

Revenue Account 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: **251020037**

TOTAL DUE **\$19,369.45**

Amount of remittance:

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: 02/20/2025 12:58:32pm By: SLT
Fiscal Year: 2025

Selection Criteria

Select Project
0102-95000~0102-95500

Select Month
JUL 2024~SEP 2024

0102 (Project (W/ Lead Elmnts)) FUND: Road
95000 PROJECT NO: TUSD#1 GENERAL ADMIN./CLERICAL
LBR Labor

Date	Employee	Name
07/08/2024	1064	Bethurem, Nichole L.
07/01/2024	1064	Bethurem, Nichole L.
07/09/2024	1064	Bethurem, Nichole L.
07/10/2024	1064	Bethurem, Nichole L.
07/15/2024	1064	Bethurem, Nichole L.
07/16/2024	1064	Bethurem, Nichole L.
07/17/2024	1064	Bethurem, Nichole L.
07/22/2024	1064	Bethurem, Nichole L.
07/23/2024	1064	Bethurem, Nichole L.
07/25/2024	1064	Bethurem, Nichole L.
07/17/2024	4730	Tannous, Speero B.
07/18/2024	4730	Tannous, Speero B.
07/22/2024	4730	Tannous, Speero B.
07/24/2024	4730	Tannous, Speero B.
07/15/2024	4730	Tannous, Speero B.
07/22/2024	4730	Tannous, Speero B.
07/29/2024	1064	Bethurem, Nichole L.
08/08/2024	4730	Tannous, Speero B.
08/13/2024	1064	Bethurem, Nichole L.
08/21/2024	1064	Bethurem, Nichole L.
09/05/2024	1064	Bethurem, Nichole L.
09/11/2024	1064	Bethurem, Nichole L.
09/16/2024	1064	Bethurem, Nichole L.
09/17/2024	1064	Bethurem, Nichole L.
09/09/2024	4730	Tannous, Speero B.
09/12/2024	4730	Tannous, Speero B.

* LBR Subtotal
** 95000 Subtotal

95200 PROJECT NO: Plant Operations/Maintenance
EQP Equipment

Date	Equipment No	Units
07/01/2024	205	4.00
07/08/2024	205	4.00
07/09/2024	205	4.00
07/10/2024	205	4.00
07/26/2024	227	3.00
07/26/2024	3A05	3.00
07/26/2024	629	5.00
07/16/2024	205	4.00
07/23/2024	205	3.00
07/26/2024	205	1.00
08/06/2024	205	4.00
08/13/2024	205	4.00
08/30/2024	227	2.00
08/27/2024	205	4.00
09/03/2024	205	3.00
09/05/2024	205	2.00
09/10/2024	205	4.00
09/17/2024	205	3.00
		0.00

* EQP Subtotal
INV Invoice

Date	Doc No	Vendor Name
07/17/2024	1894334487-1	P. G. & E.
07/17/2024	1894334487-1	P. G. & E.
08/16/2024	1894334487-1	P. G. & E.
09/17/2024	1894334487-1	P. G. & E.

* INV Subtotal

JNV Journal

Activity Activity Description

Aud Jnl Dt Budget Exp Acct Description
08/19/2024 0102-3011-00053300-010 AP Actuals 23/24

Doc No
FW137793

* JNV Subtotal

LBR Labor

Date	Employee	Name
07/01/2024	4730	Tannous, Speero B.

Job Class Descr
Senior Engineering Technician

Activity
0064

Reg Hrs
10.00

Ot Hrs
0.00

Labor
768.06

Overhead
0.00

Equipment
0.00

Amount
768.06

Job Class Descr	Activity	Reg Hrs	Ot Hrs	Labor	Overhead	Equipment	Amount
Administrative Assistant	0005	3.00	0.00	190.39	0.00	0.00	190.39
Administrative Assistant	0005	3.00	0.00	190.39	0.00	0.00	190.39
Administrative Assistant	0005	0.50	0.00	31.73	0.00	0.00	31.73
Administrative Assistant	0005	0.50	0.00	31.73	0.00	0.00	31.73
Administrative Assistant	0005	3.50	0.00	222.12	0.00	0.00	222.12
Administrative Assistant	0005	1.00	0.00	63.46	0.00	0.00	63.46
Administrative Assistant	0005	1.00	0.00	63.46	0.00	0.00	63.46
Administrative Assistant	0005	1.00	0.00	63.46	0.00	0.00	63.46
Administrative Assistant	0005	0.50	0.00	31.73	0.00	0.00	31.73
Senior Engineering Technician	0068	2.00	0.00	153.61	0.00	0.00	153.61
Senior Engineering Technician	0068	1.00	0.00	76.81	0.00	0.00	76.81
Senior Engineering Technician	0068	1.00	0.00	76.81	0.00	0.00	76.81
Senior Engineering Technician	0064	5.00	0.00	384.03	0.00	0.00	384.03
Senior Engineering Technician	0064	6.00	0.00	460.84	0.00	0.00	460.84
Administrative Assistant	0005	2.00	0.00	126.93	0.00	0.00	126.93
Administrative Assistant	0064	2.50	0.00	192.02	0.00	0.00	192.02
Administrative Assistant	0005	1.00	0.00	63.46	0.00	0.00	63.46
Administrative Assistant	0005	1.00	0.00	63.46	0.00	0.00	63.46
Administrative Assistant	0005	1.50	0.00	95.19	0.00	0.00	95.19
Administrative Assistant	0005	1.00	0.00	63.46	0.00	0.00	63.46
Administrative Assistant	0005	2.00	0.00	126.93	0.00	0.00	126.93
Senior Engineering Technician	0068	1.00	0.00	153.61	0.00	0.00	153.61
Senior Engineering Technician	0068	1.00	0.00	76.81	0.00	0.00	76.81
		45.50	0.00	3,174.44	0.00	0.00	3,174.44
		45.50	0.00	3,174.44	0.00	0.00	3,174.44

Amount
148.76
148.76
148.76
148.76
151.08
338.85
317.00
178.52
133.89
44.63
178.52
100.72
178.52
133.89
89.26
178.52
133.89
2,930.85

Amount
6.63
7.49
13.32
14.86
42.32

Amount
-6.63

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

Date	Employee	Name	Job Class Descr	Activity	Reg Hrs	Ot Hrs	Labor	Overhead	Equipment	Amount
07/02/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	3.00	0.00	230.42	0.00	0.00	230.42
07/05/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	0.00	3.00	178.84	0.00	0.00	178.84
07/06/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	0.00	3.00	178.84	0.00	0.00	178.84
07/07/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	0.00	3.00	178.84	0.00	0.00	178.84
07/08/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	6.00	0.00	460.84	0.00	0.00	460.84
07/09/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	768.06	0.00	0.00	768.06
07/10/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	5.00	0.00	384.03	0.00	0.00	384.03
07/16/2024	5376	Gonzalez, Francisco	Public Works Maintenance Worker	0045	0.00	10.00	526.25	0.00	0.00	526.25
07/26/2024	1353	Botts, Fredrick Delmar	Senior Engineering Technician	0064	10.00	0.00	768.06	0.00	0.00	768.06
07/16/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	3.50	0.00	268.82	0.00	0.00	268.82
07/17/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	3.00	0.00	230.42	0.00	0.00	230.42
07/18/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	768.06	0.00	0.00	768.06
07/23/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	0.00	6.00	357.68	0.00	0.00	357.68
08/02/2024	5376	Gonzalez, Francisco	Public Works Maintenance Worker	0064	0.00	10.00	526.25	0.00	0.00	526.25
08/06/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	5.00	0.00	384.03	0.00	0.00	384.03
08/12/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	4.00	0.00	307.23	0.00	0.00	307.23
08/13/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	768.06	0.00	0.00	768.06
08/27/2024	1353	Botts, Fredrick Delmar	Public Works Maintenance Supervisor	0064	0.00	4.00	210.50	0.00	0.00	210.50
08/30/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	768.06	0.00	0.00	768.06
08/36/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	0.00	4.00	238.46	0.00	0.00	238.46
09/03/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	768.06	0.00	0.00	768.06
09/05/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	2.00	0.00	153.61	0.00	0.00	153.61
09/10/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	768.06	0.00	0.00	768.06
09/11/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	5.00	0.00	384.03	0.00	0.00	384.03
09/17/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	10.00	0.00	768.06	0.00	0.00	768.06
09/19/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	2.00	0.00	153.61	0.00	0.00	153.61
09/19/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0064	1.00	0.00	76.81	0.00	0.00	76.81
09/18/2024	4730	Tannous, Speero B.	Senior Engineering Technician	0065	3.50	0.00	268.82	0.00	0.00	268.82
* LBR Subtotal					133.00	53.00	12,794.48	0.00	0.00	12,794.48
OVH Overhead										

Date	Employee	Name	Amount
07/26/2024	5376	Gonzalez, Francisco	106.48
07/26/2024	1353	Botts, Fredrick Delmar	157.88
08/02/2024	5376	Gonzalez, Francisco	106.48
08/30/2024	1353	Botts, Fredrick Delmar	63.15
* OVH Subtotal			433.99
** 95200 Subtotal			16,195.01
*** 0102 Subtotal			19,369.45
**** Grand Total			19,369.45



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: 01/31/2025

Customer No: 95000

Invoice No: 251020038

Total Due: **\$9,380.39**

Page # 1 of 1

2nd Qtr Intrafund / Oct-Dec FY24-25 See Attached Detail

Description	Quantity	Unit Cost	Unit of Meas	Total Cost
95000 TCSD #1 General Admin / Clerical	1	2,315.75	EA	2,315.75
95200 Plant Operations / Maintenance	1	7,064.64	EA	7,064.64

Prepared by: SLT

On Receipt

Revenue Account 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: 251020038

TOTAL DUE **\$9,380.39**

Amount of remittance:

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: 02/20/2025 12:55:30pm By: SLT
Fiscal Year: 2025*

Selection Criteria

Select Month
OCT 2024~DEC 2024

Select Project
0102-95000~0102-95500

Run Date: 02/20/2025 12:55:30pm
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
OVH Overhead

Date	Employee	Name
10/04/2024	5376	Gonzalez, Francisco
+ OVH Subtotal		
** 95200 Subtotal		
*** 0102 Subtotal		
**** Grand Total		

Amount
106.48
106.48
7,064.64
9,380.39
9,380.39

COPY

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

BUDGET SUMMARY

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

 2/25/25

Department Head or Authorized Signature / Date



FRONTIER

Important Information

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.

TEHAMA CO SANITATION DIST

Page 1 of 4

Your Monthly Invoice

Account Summary

New Charges Due Date

Billing Date	3/01/25
Account Number	2/05/25
PIN	530-595-3420-102496-8
Previous Balance	4777
Payments Received Thru 2/05/25	.32
Balance Forward	.00
New Charges	.32
	108.34

Total Amount Due

\$108.66



PUBLIC WORKS/ROAD
Received Date 2/13/25 By TJ
Approved Date 2/20/25 By WEP

ANYTIME, ANYWHERE SUPPORT

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frontier.com/resources/myfrontier-mobile-app

WAYS TO PAY YOUR BILL



[frontier.com/
signupforautopay](http://frontier.com/signupforautopay)



800-801-6652



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Google Play



Download on the
App Store

MyFrontier app



FRONTIER

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

6790 0002 NO RP 05 02052025 NNNNNNYN 01 999731

TEHAMA CO SANITATION DIST NO1
1509 SCHWAB STREET
RED BLUFF CA 96080

PAYMENT STUB

Total Amount Due

\$108.66

New Charges Due Date

3/01/25

Account Number

530-595-3420-102496-8

Amount Enclosed

\$ 108.34

Mail Payment To:

FRONTIER
P.O. BOX 740407
CINCINNATI, OH 45274-0407

335032530595342010249600000000320000108666



Date of Bill
Account Number

2/05/25
530-595-3420-102496-8

LET FRONTIER® BE YOUR TECH SUPPORT

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business.frontier.com



For help: Customer Service at frontier.com/helpcenter or chat at frontier.com/chat or call 1-800-921-8102.

PAYING YOUR BILL, LATE PAYMENTS, RETURNED CHECK FEES and PAST DUE BALANCES

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 CONSUMER MESSAGES

You must pay all basic local service charges to avoid basic local 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.

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.

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.



Date of Bill
Account Number

2/05/25
530-595-3420-102496-8

CURRENT BILLING SUMMARY

Local Service from 02/05/25 to 03/04/25

Qty Description	530/595-3420.0	Charge
Basic Charges		
Single Party Measured Business Service		43.50
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
FCA Long Distance - Federal USF Surcharge		5.08
Federal USF Recovery Charge		4.43
CA St Switched Access Rate Recovery Surcharge		1.93
Federal Excise Tax		1.86
Universal Service Public Purpose Program Surcharge		1.11
CA St Public Utilities Commission Fee		.51
CA State 911 Surcharge		.41
Emergency 988 Surcharge		.08
Delta EAS Recovery Surcharge		.01
Total Basic Charges		87.71
Non Basic Charges		
Multi-Line Business Federal Pre-Subscribed Line Charge		14.99
FCA Long Distance - Federal USF Surcharge		5.44
Total Non Basic Charges		20.43
Toll/Other		
Frontier Com of America -Detailed Below		.20
Total Toll/Other		.20
TOTAL	108.34	

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 \$108.66 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.

**Detail of Frontier Com of America Charges**

Toll charged to 530/595-3420

Ref #	Date	Time	Min	*Type	Place and Number Called	Charge
1	JAN 17	10:24A	.3	DD	CHICO CA (530)354-5345	.08 L
2	FEB 04	12:36P	1.0	DD	MARYSVILLE CA (530)933-0849	.12 L
530/595-3420						Subtotal .20

FRONTIER LD - BUS SELECT PLAN Summary

Description	Amount
Direct Dialed Charges	.20
Total Charges	.20

Calls on This Plan are Designated by L

Legend Call Types:

DD - Day

Caller Summary Report

	Calls	Minutes	Amount
Main Number	2	1	.20
***Customer Summary	2	1	.20

Caller Summary Report

	Calls	Minutes	Amount
Intra-Lata	1		.08
Intrastate	1	1	.12
***Customer Summary	2	1	.20



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

COPY

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

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	46000	252801089	\$80.96
605-605	00053230	95200	46000	252801089	\$45.30
605-605	00053230	95200	46000	252801089	\$145.28
605-605	00053230	95200	46000	252801089	\$30.00
605-605	00053230	95200	46000	252801089	\$7.00

BUDGET SUMMARY

TOTAL **\$308.54**

00053230	\$308.54
TOTAL	\$308.54

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

 **3/6/25**
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

PO Number 95200
Bid / Contract VENDOR 100166

PUBLIC WORKS/ROAD
Received Date 2/18/25 By JN
Approved Date 2/20/25 By WFP
ST

Invoice Number 252801089
Invoice Date 02/13/25
Customer ID # 28-100651
Terms Due Upon Receipt

Remit Payment To:

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

Received: 02/05/25
Submitted By: JIM SIMON
TEHAMA COUNTY SANITATION DIST
Project(s): MINERAL WWTP - MONTHLY
Project Number(s): 02/04/25
Work Order(s): 25B0178

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]	\$40.48	\$80.96
1	Water	Pickup Fee - Route (Redding) [10 day]	\$45.30	\$45.30
2	Water	BOD - Biochemical Oxygen Demand by SM 5210 [8 day]	\$72.64	\$145.28
Additional Items				
1		Environmental Impact Fee	\$30.00	\$30.00
1		Sample Disposal Fee	\$7.00	\$7.00
			Invoice Total	\$308.54

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-46000**

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

PURCHASE ORDER

Qty	Units	Product Description	Unit Price	TOTAL
2	EA	Solids, Total Siplended (TSS) by SM 2540D [8 day]	\$40.48	\$80.96
1	EA	Pickup Fee - Route (Redding) [10 day]	\$45.30	\$45.30
2	Ea	BOD - Biochemical Oxygen Demand by SM 5210 [8 day]	\$72.64	\$145.28
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 #252801089

Vendor Number	132967	INSURANCE ON FILE	PDR ON FILE
		INSURANCE ATTACHED	PDR ATTACHED
P.O. NOT TO EXCEED		\$308.54	

Product SubTotal \$308.54
Shipping & Handling \$0.00
Service SubTotal
Taxes :0.00% CA

P.O. TOTAL \$308.54

Approved By:

Debbie Schmidt

Superior ID #11W010012
Debbie Schmidt, Snelior Buyer

Purchase Order Date: 2/24/2025

Department Account Number: 60510-53230

Fixed Asset Account Number:

Ordered By: Sarah Watson

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

COPY

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

CLAIMANT'S NAME **USA BlueBook**
ADDRESS **PLEASE RETURN CHECK TO ROAD**

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 101802	KP & VERIFIED:

				DEPARTMENT USE	
DEPARTMENT: Sanitation District #1				PO / AGREEMENT NO:	
FUND/DEPT	ACCT. NO.	PROJ NO.	P.O. #	WARRANT DESCRIPTION	AMOUNT
605-605	00053280	95200		INV00609021	\$21.31
605-605	00053270	95200		INV00609021	\$1,196.08
605-605	00053280	95200		INV00609076	\$41.24
BUDGET SUMMARY					TOTAL
					\$1,258.63

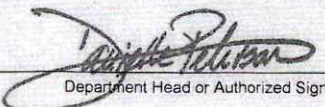
00053270	\$1,196.08
00053280	\$62.55
TOTAL	\$1,258.63

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 **USA BlueBook**

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  **3/6/25**
Department Head or Authorized Signature / Date

USABlueBook®

Get the Best Treatment™

INVOICE

10802

Remit To:
P.O. Box 9004
Gurnee, IL 60031-9004
TEL: (847) 689-3000
FAX: (847) 689-3001
TOLL FREE: 1-800-493-9876
F.E.I.N.: 75-2007383

PUBLIC WORKS/ROW
Received Date 2/13/25 By TN
Approved Date 2/20/25 By WFP

95200

5

View online at: <http://usabluebook.billtrust.com>
Web Enrollment Token: RPM WXT ZPM

INVOICE NO.	PAGE NO.
INV00609021	1 of 1
CUSTOMER NO.	DATE
924572	01/30/25

BILL TO: 924572
38 1 SP 0.690 E0038X I0093 D13913397719 S2 P10667477 0001:0003

SHIP TO: 924572-1



TEHAMA COUNTY SANITATION DIST
727 OAK ST
RED BLUFF CA 96080-3755

TEHAMA COUNTY SANITATION DIST
9380 San Benito Ave
Gerber CA 96035-9701
USA

Ordered by: SPEERO TANNOUS

Attention: Speero

CUSTOMER P.O. NO.	SHIP DATE	SLP	TERMS	TAX CODE	SALES ORDER NO.	W/H	FREIGHT	SHIP VIA
95200	01/30/25	DR	N30	AVATAX	SO3611563	21	Fixed	FEDEXGRND
USA STOCK NO.	DESCRIPTION	ORDERED	SHIPPED	BACKORDER	U/M	PRICE	PER	EXTENSION
28068	Conductivity Solution; 84 uS 500 mL (1 Pint)	1	1	0	ea	19.50	ea	19.50
87052	YSI Pro20i DO Meter; 4-m Cable Polarographic; 607125	1	1	0	ea	1,094.40	ea	1,094.40

THANK YOU for your business!
1.5% MONTHLY FINANCE CHARGE
ON AMOUNTS 30 DAYS PAST DUE
Discounts Apply to Merchandise Only

MERCHANDISE	MISCELLANEOUS	DISCOUNT	TAX	FREIGHT	TOTAL
1,113.90	0.00	0.00	82.29	21.20	1,217.39

Should it become necessary to refer your unpaid balance to a collection agency, a collection fee, not to exceed 25% of the balance referred; plus reasonable attorney's fees; and court costs when necessary, will be added to the balance due.

Please Detach and Return Bottom Portion to Ensure Proper Credit to Your Account

USABlueBook®

Get the Best Treatment™

****IMPORTANT****

Please include this customer #
on the face of your remittance check.

INVOICE NO.	CUSTOMER NO.	DATE	TOTAL
INV00609021	924572	01/30/25	1,217.39

TEHAMA COUNTY SANITATION DIST
727 OAK ST
RED BLUFF CA 96080-3755

REMITTANCE ADDRESS

USABlueBook
P.O. Box 9004
Gurnee, IL 60031-9004

USABlueBook®

Get the Best Treatment™

Remit To:
P.O. Box 9004
Gurnee, IL 60031-9004
TEL: (847) 689-3000
FAX: (847) 689-3001
TOLL FREE: 1-800-493-9876
F.E.I.N.: 75-2007383

PUBLIC WORKS/ROAD
Received Date 2/13/25 By JN
Approved Date 2/20/25 By WFP

95200

INVOICE

INVOICE NO.	PAGE NO.
INV00609076	1 of 1
CUSTOMER NO.	DATE
924572	01/30/25

View online at: <http://usabluebook.billtrust.com>
Web Enrollment Token: RPM WXT ZPM

BILL TO: 924572
38 1 SP 0.690 E0038 I0094 D13913398089 S2 P10667477 0002:0003

SHIP TO: 924572-1



TEHAMA COUNTY SANITATION DIST
727 OAK ST
RED BLUFF CA 96080-3755

TEHAMA COUNTY SANITATION DIST
9380 San Benito Ave
Gerber CA 96035-9701
USA

Ordered by: SPEERO TANNOUS

Attention: Speero Tannous

CUSTOMER P.O. NO.	SHIP DATE	SLP	TERMS	TAX CODE	SALES ORDER NO.	W/H	FREIGHT	SHIP VIA
95200	01/30/25	DR	N30	AVATAX	SO3611592	01	Fixed	FEDEXGRND
USA STOCK NO.	DESCRIPTION	ORDERED	SHIPPED	BACKORDER	U/M	PRICE	PER	EXTENSION
40328	USABB pH Buffer Pack 4.00; 7.00; 10.00; 500 mL Each <i>Calibrating pH-Meter Plant</i>	1	1	0	ea	38.45	ea	38.45

THANK YOU for your business!
1.5% MONTHLY FINANCE CHARGE
ON AMOUNTS 30 DAYS PAST DUE
Discounts Apply to Merchandise Only

MERCHANDISE	MISCELLANEOUS	DISCOUNT	TAX	FREIGHT	TOTAL
38.45	0.00	0.00	2.79	0.00	41.24

Should it become necessary to refer your unpaid balance to a collection agency, a collection fee, not to exceed 25% of the balance referred; plus reasonable attorney's fees; and court costs when necessary, will be added to the balance due.

Please Detach and Return Bottom Portion to Ensure Proper Credit to Your Account

USABlueBook®

Get the Best Treatment™

****IMPORTANT****

Please include this customer #
on the face of your remittance check.

INVOICE NO.	CUSTOMER NO.	DATE	TOTAL
INV00609076	924572	01/30/25	41.24

TEHAMA COUNTY SANITATION DIST
727 OAK ST
RED BLUFF CA 96080-3755

REMITTANCE ADDRESS

USABlueBook
P.O. Box 9004
Gurnee, IL 60031-9004



TEHAMA COUNTY WARRANT

**444 OAK STREET, SUITE J
RED BLUFF, CA 96080-3335**

USBANK
24-HOUR BANKING 90-2267/1211
1-800-673-3555

ACCOUNTS PAYABLE

70870548

Warrant Date 03/12/25

PAY ONE Thousand TWO Hundred FIFTY EIGHT Dollars and SIXTY THREE Cents

PAY THIS AMOUNT

\$ *****1,258.63

VOID IF NOT CASHED WITHIN SIX MONTHS

TO THE
ORDER
OF:

USA BLUEBOOK

Krista Peterson
Krista Peterson, Auditor - Controller

|| 70870548 || 1: 1 2 1 1 2 26 76 1: 1 53 40 1 7 76 6 76 ||

INVOICE DATE	INV #	PO#	AMT	DESC
01/30/25	IN00609076		41.24	SPECIAL DEPARTMENTAL EXP
01/30/25	INV00609021		1,217.39	SMALL TOOLS & INSTRUMENTS

PWRK

PWRK

WARRANT DATE	WARRANT TOTAL	VENDOR NO.	WARRANT NO.
03/12/25	1,258.63	101802	70870548

March 2025 Claims

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

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	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

KRISTA PETERSON
Auditor/Controller

By _____
Deputy County Auditor

BOARD OF SUPERVISORS

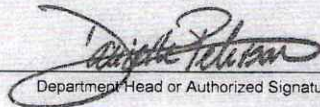
Approved: Date _____

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



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>020037</u>	
Account #: <u>0605-0605-5323-602</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

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

Page 1 of 1

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)				TOTAL
DEPARTMENT COMMENTS: Insert comments in Box Below				
Invoice: 252801850				
Vendor Number	132967	INSURANCE ON FILE	PDR ON FILE	
		INSURANCE ATTACHED	PDR ATTACHED	
Product SubTotal				\$309.50
Shipping & Handling				\$0.00
Service SubTotal				
Taxes :0.00% CA				
P.O. TOTAL				\$309.50
P.O. NOT TO EXCEED				\$309.50

Approved By:

Debbie Schmidt
Signature: HLWOTOG12

Debbie Schmidt, Snelor 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

COL

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

[illegible]

TOTAL	\$1,855.25
-------	------------

[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 _____

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

David Peterson 3/20/25
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 52432
Date 03/07/2025

Project **0288.38 Mineral Contract Operations**

BALANCE IS DUE AND PAYABLE WITHIN 30 DAYS
For Professional Services from January 26, 2025 through February 22, 2025

Phase 100 - Original Scope of Work

Professional Fees

	Date	Units	Rate	Billed Amount
Principal Engineer				
Laurie E. McCollum				
Project Coordination				
	02/11/2025	3.50	256.00	896.00
Groundwater Monitoring Well Network Eval Response to Comments				
	02/12/2025	2.00	256.00	512.00
Groundwater Monitoring Well Network Eval Response to Comments				
	02/13/2025	1.50	256.00	384.00
Groundwater Monitoring Well Network Eval Response to Comments				
Subtotal		7.00		1,792.00
Admin Clerk II				
Karrie A. Nunes				
Word Processing				
	02/12/2025	0.25	89.00	22.25
Backcheck Response to Comments letter				
Admin Clerk I				
Ambria C. Delgado				
Word Processing				
	02/12/2025	0.50	82.00	41.00
Proof, edit District Response to Central Valley Regional Water Quality Control Board letter				
Phase subtotal				1,855.25
Invoice total				1,855.25

Invoice Summary

Description	Prior Billed	Total Billed	Current Billed
Phase 100 - Original Scope of Work	28,961.30	30,816.55	1,855.25
Phase 200 - Post - CWSRF Grant Application Work	23,209.75	23,209.75	0.00
Total	52,171.05	54,026.30	1,855.25

Aging Summary

Invoice Number	Invoice Date	Outstanding	Current	Over 30	Over 60	Over 90	Over 120
52432	03/07/2025	1,855.25	1,855.25				
	Total	1,855.25	1,855.25	0.00	0.00	0.00	0.00

Please reference Project & Invoice No. with remittance.

Received By: <u>TN</u>	Date: <u>3/10/25</u>
Reviewed By: <u>ST</u>	Date: <u>3/11/25</u>
Approved By: <u>WRP</u>	Date: <u>3/12/25</u>
Project Name/Number: _____	
Division #: _____	Activity Code: _____
Agreement/PO #: _____	Finance Only Batch #: _____ Account #: _____ Cost Center: _____
Road/Bridge #: _____	
Equip/Repair Order: _____	
Description: _____	



TEHAMA COUNTY WARRANT

444 OAK STREET, SUITE J
RED BLUFF, CA 96080-3335

USBANK
24-HOUR BANKING 90-226711211
1-800-673-3555

ACCOUNTS PAYABLE

70871200

Warrant Date 03/25/25

PAY ONE Thousand EIGHT Hundred FIFTY FIVE Dollars and TWENTY
FIVE Cents

PAY THIS AMOUNT

\$ *****1,855.25

VOID IF NOT CASHED WITHIN SIX MONTHS

TO THE ORDER OF: PACE ENGINEERING INC
5155 VENTURE PARKWAY
REDDING, CA 96002

Krista Peterson
Krista Peterson, Auditor - Controller

⑈70871200⑈ ⑆121122676⑆153401776676⑈

INVOICE DATE	INV #	PO#	AMT	DESC
03/07/25	52432		1,855.25	PROFESSIONAL/SPECIAL SERV
mailed 3/28/25				

PWRK HP

WARRANT DATE

03/25/25

WARRANT TOTAL

1,855.25

VENDOR NO.

101226

WARRANT NO.

70871200

COPY

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 101802	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  3/20/25
Department Head or Authorized Signature / Date

USABlueBook®

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Remit To:
P.O. Box 9004
Gurnee, IL 60031-9004
TEL: (847) 689-3000
FAX: (847) 689-3001
TOLL FREE: 1-800-493-9876
F.E.I.N.: 75-2007383

INVOICE

INVOICE NO.	PAGE NO.
INV00625573	1 of 1
CUSTOMER NO.	DATE
924572	02/17/25

View online at: <http://usabluebook.billtrust.com>
Web Enrollment Token: RPM WXT ZPM

BILL TO: 924572
404 1 SP 0.690 E0404X I0766 D13979967239 S2 P10698505 0001:0002

SHIP TO: 924572-1



TEHAMA COUNTY SANITATION DIST
727 OAK ST
RED BLUFF CA 96080-3755

TEHAMA COUNTY SANITATION DIST
9380 San Benito Ave
Gerber CA 96035-9701
USA

Ordered by: SPEERO TANNOUS

Attention: Speero

CUSTOMER P.O. NO.	SHIP DATE	SLP	TERMS	TAX CODE	SALES ORDER NO.	W/H	FREIGHT	SHIP VIA
95200	02/17/25	GR	N30	AVATAX	SO3627848	44	Fixed	FEDEXGRND
USA STOCK NO.	DESCRIPTION	ORDERED	SHIPPED	BACKORDER	U/M	PRICE	PER	EXTENSION
62169	Partlow Circular Chart BX/100 00214731; 0-1; 7-DAY	1	1	0	ea	85.95	ea	85.95

THANK YOU for your business!
1.5% MONTHLY FINANCE CHARGE
ON AMOUNTS 30 DAYS PAST DUE
Discounts Apply to Merchandise Only

MERCHANDISE	MISCELLANEOUS	DISCOUNT	TAX	FREIGHT	TOTAL
85.95	0.00	0.00	6.38	2.03	94.36

Should it become necessary to refer your unpaid balance to a collection agency, a collection fee, not to exceed 25% of the balance referred; plus reasonable attorney's fees; and court costs when necessary, will be added to the balance due.

Please Detach and Return Bottom Portion to Ensure Proper Credit to Your Account

USABlueBook®

Get the Best Treatment™

****IMPORTANT****

Please include this customer #
on the face of your remittance check.

INVOICE NO.	CUSTOMER NO.	DATE	TOTAL
INV00625573	924572	02/17/25	94.36

TEHAMA COUNTY SANITATION DIST
727 OAK ST
RED BLUFF CA 96080-3755

REMITTANCE ADDRESS

USABlueBook
P.O. Box 9004
Gurnee, IL 60031-9004

Received By: TN Date: 3/4/25
Reviewed By: ST Date: 3-5-25
Approved By: Duncan F R Date: 3/7/25
Project Name/Number: Mineral WWTP 95200
Division #: _____ Activity Code: _____
Agreement/PO #: _____
Road/Bridge #: _____
Equip/Repair Order: _____
Description: Weekly 7-day
Flow charts -

Finance Only

Batch #: _____

Account #: _____

Cost Center: _____



TEHAMA COUNTY WARRANT

444 OAK STREET, SUITE J
RED BLUFF, CA 96080-3335

USBANK
24-HOUR BANKING 90-2267/1211
1-800-673-3555

ACCOUNTS PAYABLE

70871194

Warrant Date 03/25/25

PAY NINETY FOUR Dollars and THIRTY SIX Cents

PAY THIS AMOUNT

\$ *****94.36

VOID IF NOT CASHED WITHIN SIX MONTHS

TO THE
ORDER
OF:

USA BLUEBOOK

Krista Peterson
Krista Peterson, Auditor - Controller

⑈70871194⑈ ⑆121122676⑆153401776676⑈

INVOICE DATE	INV #	PO#	AMT	DESC
02/17/25	INV00625573		94.36	SPECIAL DEPARTMENTAL EXP
mailed 3/28/25				
PWRK				

WARRANT DATE

03/25/25

WARRANT TOTAL

94.36

VENDOR NO.

101802

WARRANT NO.

70871194

4 copy

AUDITORS USE ONLY	
COUNTY CLAIM NO:	
VENDOR NO: 106441	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 *Douglas Peterson* 4/2/25
Department Head or Authorized Signature / Date

NBS
32605 Temecula Pkwy
Suite 100
Temecula CA 92592

INVOICE

**Bill To:**

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

Invoice # 202503-1640
Invoice Date 3/20/2025
Due Date 4/19/2025
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 April 1, 2025 through June 30, 2025

Fees

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

Expenses

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

Amount Due: \$1,283.95

Received By: <u>TN</u>	Date: <u>3/24/25</u>
Reviewed By: _____	Date: _____
Approved By: <u>DR</u>	Date: <u>3/24/25</u>
Project Name/Number: _____	
Division #: _____	Activity Code: _____
Agreement/PO #: _____	Finance Only Batch #: _____ Account #: _____ Cost Center: _____
Road/Bridge #: _____	
Equip/Repair Order: _____	
Description: _____	

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


[illegible]

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 _____

I certify, under penalty of perjury, that I have not violated any of the provisions of the California Code of Civil Procedure, Chapter One, Division Four, Title One of the Calif. Gov. Code. I further certify 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. I further certify that the articles or services have been delivered or performed as stated hereon and as otherwise indicated by me.

SIGNED _____

 4/2/25
Department Head or Authorized Signature / Date

Page 1 of 1



FRONTIER

Important Information

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.

Sanitation

TEHAMA CO SANITATION DIST

Page 1 of 4

Your Monthly Invoice

Account Summary

New Charges Due Date

3/31/25

Billing Date

3/05/25

Account Number

530-595-3420-102496-8

PIN

4777

Previous Balance

108.66

Payments Received Thru 2/08/25

-.32

Thank you for your payment!

Balance Forward

108.34

New Charges

108.14

Total Amount Due

\$216.48



paid

SOMETHING
EXCITING IS JUST A
STATEMENT AWAY

A newly designed bill just for you.

Visit frontier.com/billredesign

**WAYS
TO PAY
YOUR
BILL**



[frontier.com/
signupforautopay](http://frontier.com/signupforautopay)



800-801-6652



Google Play



Download on the
App Store

MyFrontier app



FRONTIER

P.O. Box 211579

Eagan, MN 55121-2879

6790 0002 NO RP 05 03052025 NNNNNNYYN 01 999814

TEHAMA CO SANITATION DIST NO1
1509 SCHWAB STREET
RED BLUFF CA 96080

PAYMENT STUB

Total Amount Due

108.14

\$216.48

New Charges Due Date

3/31/25

Account Number

530-595-3420-102496-8

Amount Enclosed

\$

Mail Payment To:

FRONTIER

P.O. BOX 740407

CINCINNATI, OH 45274-0407

235001530595342010249600000108340000216488



Date of Bill

3/05/25

Account Number

530-595-3420-102496-8

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—with Frontier Premium Tech Pro.

business.frontier.com

For help: Customer Service at frontier.com/helpcenter or chat at frontier.com/chat or call 1-800-921-8102.

PAYING YOUR BILL, LATE PAYMENTS, RETURNED CHECK FEES and PAST DUE BALANCES

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 CONSUMER MESSAGES

You must pay all basic local service charges to avoid basic local 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.

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.

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.





Date of Bill
Account Number

3/05/25
530-595-3420-102496-8

CURRENT BILLING SUMMARY

Local Service from 03/05/25 to 04/04/25

Qty Description	530/595-3420.0	Charge
Basic Charges		
Single Party Measured Business Service		43.50
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
FCA Long Distance - Federal USF Surcharge		5.08
Federal USF Recovery Charge		4.43
CA St Switched Access Rate Recovery Surcharge		1.93
Federal Excise Tax		1.86
Universal Service Public Purpose Program Surcharge		1.11
CA St Public Utilities Commission Fee		.51
CA State 911 Surcharge		.41
Emergency 988 Surcharge		.08
Delta EAS Recovery Surcharge		.01
Total Basic Charges		87.71
Non Basic Charges		
Multi-Line Business Federal Pre-Subscribed Line Charge		14.99
FCA Long Distance - Federal USF Surcharge		5.44
Total Non Basic Charges		20.43
TOTAL	108.14	

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 \$216.48 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.

Future delivery of Frontier print directories may be reduced or eliminated in certain areas. You may access a digital version at www.therealyellowpages.com/ or <https://frontierwhitepages.dirxion.com/>. To receive a printed copy of your local directory, where available, at no charge call 1-844-339-6334. You can opt out of a printed directory by visiting www.yellowpagesoptout.com.



Received By: <u>TN</u>	Date: <u>3/14/25</u>
Reviewed By: <u>ST</u>	Date: <u>3-17-25</u>
Approved By: _____	Date: _____
Project Name/Number: _____	
Vision #: _____	Activity Code: _____
Agreement/PO #: _____	Finance Only
Road/Bridge #: _____	Batch #: _____
Equip/Repair Order: _____	Account #: _____
Description: _____	Cost Center: _____

**Notice of CPUC Public Forums on Carrier of Last Resort Issues (R.24-06-012)****Why am I receiving this notice?**

The California Public Utilities Commission (CPUC) wants to hear from you. In-person and virtual public forums have been scheduled to hear your comments, concerns and opinions regarding the CPUC's proceeding to update its Carrier of Last Resort rules. Your thoughts will help inform the CPUC's decision. You can attend the in-person forums or, for the remote forums, watch a livestream of the hearings or participate via telephone. You can also submit comments by mail or post them on the CPUC's public comment portal.

How does the CPUC's administrative process work?

This application is assigned to a CPUC Administrative Law Judge and a Commissioner, who will consider proposals and evidence presented during formal processes, and then issue a proposed decision. 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 rulemaking include the Public Advocates Office. The Public Advocates Office is an independent consumer advocate within the CPUC that represents customers to help them obtain the lowest possible rates consistent with reliable and safe service levels. Find out more here: **1-415-703-1584**, email PublicAdvocatesOffice@cpuc.ca.gov or visit PublicAdvocates.cpuc.ca.gov.

Contact the CPUC:

Please visit apps.cpuc.ca.gov/p/R2406012 to submit a public comment about this rulemaking to the CPUC. You may also mail written comments to the CPUC's Public Advisor's address below. For more information on participating in the public hearing, submitting comments, to request special assistance, or to request a non-English or Spanish language interpreter, please contact the Public Advisor's Office at least five days prior to the hearings.

CPUC Public Advisor's Office

505 Van Ness Avenue
San Francisco, CA 94102
Phone: **1-866-849-8390** (toll-free) or **1-415-703-2074**
Email: PublicAdvisor@cpuc.ca.gov

Please reference **Rulemaking 24-06-012** in any communications you have with the CPUC regarding this matter.

There will be in-person hearings and "virtual" hearings, as follows:

April 9, 2025

City of Vista (San Diego County)
City Council Chambers
200 Civic Center Drive
Vista, CA 92084
2:00 p.m. and 6:00 p.m.

April 10, 2025

City of Walnut
(Los Angeles County)
City Council Chambers
21201 La Puente Road
Walnut, CA 91789
2:00 p.m. and 6:00 p.m.

April 15, 2025

City of Bakersfield (Kern County)
City Council Chambers
1501 Truxtun Avenue
Bakersfield, CA 93301
2:00 p.m. and 6:00 p.m.

April 17, 2025

Virtual - <https://adminmonitor.com/ca/cpuc/hearing>
Toll-free phone number:
1-800-857-1917; code: 6032788#
2:00 p.m.

April 23, 2025

City of Roseville (Placer County)
City Council Chambers
311 Vernon Street
Roseville, CA 95678
2:00 p.m. and 6:00 p.m.

April 30, 2025

City of Santa Rosa
(Sonoma County)
City Council Chambers
100 Santa Rosa Avenue
Santa Rosa, CA 95404
2:00 p.m. and 6:00 p.m.

May 5, 2025

Virtual - <https://adminmonitor.com/ca/cpuc/hearing>
Toll-free phone number:
1-800-857-1917; code: 6032788#
6:00 p.m.

May 13, 2025

Virtual - <https://adminmonitor.com/ca/cpuc/hearing>
Toll-free phone number:
1-800-857-1917; code: 6032788#
2:00 p.m. and 6:00 p.m.

COL.

SP 0013

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

[illegible]

BUDGET SUMMARY

TOTAL	\$362.62
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[illegible]

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



ENERGY STATEMENT

www.pge.com/MyEnergy

Account No: 6227612264-5
Statement Date: 03/04/2025
Due Date: 03/21/2025

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

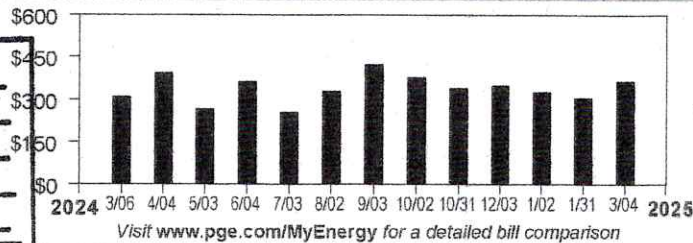
Your Account Summary

Amount Due on Previous Statement	\$305.62
Payment(s) Received Since Last Statement	-305.62
Previous Unpaid Balance	\$0.00
Current Electric Charges	\$362.62

Total Amount Due by 03/21/2025 \$362.62

Electric Monthly Billing History

Daily Usage Comparison



1 Year Ago	Last Period	Current Period
22.07	24.78	26.76
Electric kWh / Day		

Received By: <u>TN</u>	Date: <u>3/11/25</u>
Reviewed By: <u>AS</u>	Date: <u>3/11/25</u>
Approved By: <u>AS</u>	Date: <u>3/11/25</u>
Project Name/Number: _____	
Division #: _____	Activity Code: _____
Agreement/PO #: _____	Finance Only
Road/Bridge #: _____	Batch #: <u>000038</u>
Equip/Repair Order: _____	Account #: _____
Description: _____	Cost Center: _____

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

99906227612264500000362620000036262



Account Number: 6227612264-5
Due Date: 03/21/2025

Total Amount Due: \$362.62

Amount Enclosed:

\$ 362.62

892160135459 1 AV 0.545 627 8247 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

Account No: 6227612264-5
Statement Date: 03/04/2025
Due Date: 03/21/2025

Details of Electric Charges

01/31/2025 - 03/03/2025 (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

Service Information

Meter # 1009998929
Total Usage 856.376000 kWh
Serial K
Rotating Outage Block 50

01/31/2025 - 02/28/2025

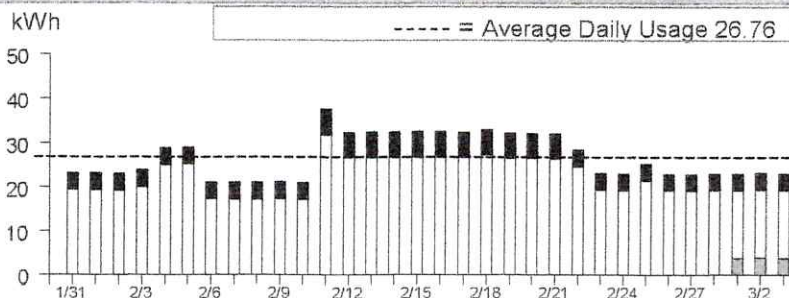
Customer Charge	29 days @ \$0.82136	\$23.82
Energy Charges		
Peak	131.636000 kWh @ \$0.42870	56.43
Off Peak	655.429000 kWh @ \$0.38511	252.41
Energy Commission Tax		0.24

03/01/2025 - 03/03/2025

Customer Charge	3 days @ \$0.82136	\$2.46
Energy Charges		
Peak	11.376000 kWh @ \$0.43545	4.95
Off Peak	46.568000 kWh @ \$0.39186	18.25
Super Off Peak	11.367000 kWh @ \$0.35578	4.04
Energy Commission Tax		0.02

Total Electric Charges \$362.62

Electric Usage This Period: 856.376000 kWh, 32 billing days



	Usage	Energy Charges
Peak ¹	16.69%	\$61.38
Off Peak ²	81.97%	\$270.66
Super Off Peak ³	1.34%	\$4.04

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



TEHAMA COUNTY WARRANT
444 OAK STREET, SUITE J
RED BLUFF, CA 96080-3335

ACCOUNTS PAYABLE

USBANK
24-HOUR BANKING 90-2267/1211
1-800-673-3555

70871693

Warrant Date 04/04/25

PAY THREE Hundred SIXTY TWO Dollars and SIXTY TWO Cents

PAY THIS AMOUNT

\$ *****362.62

VOID IF NOT CASHED WITHIN SIX MONTHS

TO THE ORDER OF: PACIFIC GAS & ELECTRIC
P O BOX 997300
SACRAMENTO, CA 95899

Krista Peterson
Krista Peterson, Auditor - Controller

⑈70871693⑈ ⑆121122676⑆153401776676⑈

INVOICE DATE	INV #	PO#	AMT	DESC
03/04/25	12264-5 3/4/25		362.62	6227612264-5
mailed 4/11/25				

PWRK HP

WARRANT DATE	WARRANT TOTAL	VENDOR NO.	WARRANT NO.
04/04/25	362.62	101232	70871693

✓ SD0013		COPY	
AUDITORS USE ONLY			
COUNTY CLAIM NO:			
VENDOR NO: 112395		KP & VERIFIED:	

[illegible]

TOTAL	\$27.86
-------	---------

[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 _____

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.

 4/2/25
Department Head or Authorized Signature / Date



Commercial Account



TEHAMA CNTY SANT DIST 1
ATTN TEHAMA CNTY PRCHSNG
727 OAK STREET

INVOICEInvoice #: **9024356**

Please pay from this invoice.

Account **xxxx xxxx xxxx 4474**Transaction Date **02/11/25**Total Invoice Due
by 03/31/25 **\$27.86**Balance Due if paid online
by 03/03/25 **\$27.34**

Customer #	Purchased By	Authorized By	Purchase Order/Job Name	Customer Agreement #
00004	TANNOUS SPEERO	TANNOUS SPEERO	TEHAMACOUNTY	
Store / Register #: 8492, RED BLUFF, CA / 2				

PRODUCT	SKU #	QUANTITY	UNIT	UNIT PRICE	TOTAL PRICE
HENRY 208R WET PATCH 10.1 OZ	00003970450001000006	1.0000	EA	\$6.48	\$6.48
HENRY 208R WET PATCH 10.1 OZ	00003970450001000006	1.0000	EA	\$6.48	\$6.48
HENRY 208R WET PATCH 10.1 OZ	00003970450001000006	1.0000	EA	\$6.48	\$6.48
HENRY 208R WET PATCH 10.1 OZ	00003970450001000006	1.0000	EA	\$6.48	\$6.48

SUBTOTAL	\$25.92
TAX	\$1.94
SHIPPING	\$0.00
TOTAL	\$27.86

Early Pay Discount	\$0.52
Balance Due if paid online by 03/03/25	\$27.34

Please pay from this invoice.

The 2% early pay discount is applied to the purchase subtotal (excluding sales tax) on invoices paid online within 20 days of the transaction date.

Questions **ACCT MGR** MICHELLE ABBOTT EXT 4676624
About Your Account **EMAIL** MICHELLE.ABBOTT@CITI.COM

PHONE 1-800-494-1946
(TTY: 711)
FAX 1-877-969-6751

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION

Page 1 of 2

8 HP 11

This Account is Issued by Citibank, N.A.

↓ Please detach and return lower portion with your payment to ensure proper credit. Retain upper portion for your records. ↓



P.O. Box 790420
St. Louis, MO 63179

Your Account Number is **xxxx xxxx xxxx 4474**Amount Due **\$27.86**Due Date **March 31, 2025**Invoice Number **9024356**

Amount Enclosed: \$

Please see reverse side to change your address.
Make Checks Payable to ▼

Invoice Enclosed

TEHAMA CNTY SANT DIST 1
ATTN TEHAMA CNTY PRCHSNG
727 OAK STREET
RED BLUFF, CA 96080-3755

HOME DEPOT CREDIT SERVICES
DEPT. xx - xxxxxx4474
PO BOX 78047
PHOENIX, AZ 85062-8047

Other Account and Payment Information

WHEN YOUR PAYMENT WILL BE CREDITED: For payments by regular mail, please allow 5-7 days for your payment to reach us. Payment must be received in proper form at our processing facility by 5 p.m. local time there to be credited as of that day. All payments received at the processing facility in proper form after that hour will be credited as of the following day. There may be a delay of up to 5 days in crediting a payment sent by mail if it is not in the proper form or is addressed to a location other than the address listed on the return envelope or on the front of the payment coupon, or, for courier or express mail payments, to the Express Mail address set forth in the Express Mail section.

PROPER FORM for payments sent by mail or courier.

For a payment to be in proper form, you should:

- **ENCLOSE** your check or money order. No cash, gift cards, or foreign currency please.
- **INCLUDE** the last four digits of your account number and name.

COPY FEE. We charge \$5 for each copy of a billing statement that dates back 3 months or more. We add the fee to a balance of our choosing. We reserve the right to add this fee to balances subject to a higher annual percentage rate. We waive the fee if your request for the copy relates to a billing error or disputed purchase.

PAYMENT OTHER THAN BY MAIL:

- **Online Payments.** Go to the URL on Page 1 of your statement to make a payment. For security reasons, you may not be able to pay your entire New Balance the first time you make a payment online. The payment cutoff time for Online Bill Payments is 5 p.m. Eastern time. Payments received after 5 p.m. Eastern time will be credited as of the next day.

- **Phone.** Call the phone number on Page 1 of your statement to make a payment. We may process your payment electronically after we verify your identity. There is no fee for this service. The payment cutoff time for Phone Payments is 5 p.m. Eastern time. Payments received after 5 p.m. Eastern time will be credited as of the next day.
- **Express Payments.** Send payment by courier or express mail to: Attn: Prox Payment Dept, 6716 Grade Lane, Building 9, Suite 910, Louisville, KY, 40213. Payment must be received in proper form, at the proper address, by 5 p.m. Eastern time in order to be credited as of that day. All payments received in proper form, at the proper address, after 5 p.m. Eastern time will be credited as of the next day.
- **In-Store Payments.** For your added convenience, payments can be made at The Home Depot® stores, with no service fee. Any payment in proper form accepted in-store will be credited as of that day. However, credit availability may be subject to verification of funds.

If you send an eligible check with this payment coupon you authorize us to complete your payment by electronic debit. If we do the checking account will be debited in the amount on the check. We may do this as soon as the day we receive the check. Also the check will be destroyed.

REPORT A LOST, STOLEN OR NEVER RECEIVED CARD IMMEDIATELY: Customer Service is available 24 hours a day, 7 days a week.

CUSTOMER SERVICE WRITTEN INQUIRY ADDRESS:

Home Depot Credit Services, P.O. Box 790340, St. Louis, MO 63179

T10637 - HP - 1420 - 0PRX - 0000 - - - - - X -

THD PROX EN JUN16

Page 2 of 2

Easily manage your contact information

It's important we have your current contact information, so if anything changes (including your email or mailing address or phone number), please do one of the following to easily update your information:

- You can update your contact information by logging into your online account via the URL located in the **Questions About Your Account** section on the front of your statement, or
- Call the phone number located in the **Questions About Your Account** section on the front of your statement

JOB-SITE DELIVERY TO GET YOUR JOB DONE FASTER



- Let us deliver paint and supplies directly to you
- Same-day & next-day delivery options
- Sign up for the Pro Xtra Paint Rewards program today and start enjoying additional savings

BEHR
GOOD. BETTER. BEHR.

THE HOME DEPOT

ProXtra

Learn more at
homedepot.com/propaint



Commercial Account



Remit payment and make checks payable to:
HOME DEPOT CREDIT SERVICES
DEPT. 32 - 2505524474
PO BOX 78047
PHOENIX, AZ 85062-8047

INVOICE DETAIL

BILL TO:
Acct: 6035 3225 0552 4474
TEHAMA CNTY SANT DIST 1

0605-0605-S3180-602
0605-605-3180
95200

Amount Due:	Trans Date:	DUE DATE:	Invoice #:
\$27.86	02/11/25	03/31/25	9024356
PO: TEHAMACOUNTY		Store: 8492, RED BLUFF, CA	

PRODUCT	SKU #	QUANTITY	UNIT PRICE	TOTAL PRICE
HENRY 208R WET PATCH 10.1 OZ	00003970450001000006	1.0000 EA	\$6.48	\$6.48
HENRY 208R WET PATCH 10.1 OZ	00003970450001000006	1.0000 EA	\$6.48	\$6.48
HENRY 208R WET PATCH 10.1 OZ	00003970450001000006	1.0000 EA	\$6.48	\$6.48
HENRY 208R WET PATCH 10.1 OZ	00003970450001000006	1.0000 EA	\$6.48	\$6.48

Purchased by: TANNOUS SPEERO
Customer #: 00004

SUBTOTAL	\$25.92
TAX	\$1.94
TOTAL	\$27.86

San. Plant Leak

BILL TO:
Acct: 6035 3225 0552 4474
TEHAMA CNTY SANT DIST 1

Amount Due:	Trans Date:	DUE DATE:	Invoice #:
\$59.09	02/25/25	03/31/25	5535663
PO: TEHAMAFLOOD		Store: 8492, RED BLUFF, CA	

PRODUCT	SKU #	QUANTITY	UNIT PRICE	TOTAL PRICE
CE 12-OUTLET SURGE PROTECT 15FT USB	10075332630000300006	1.0000 EA	\$54.97	\$54.97

Purchased by: TANNOUS SPEERO
Customer #: 00004

SUBTOTAL	\$54.97
TAX	\$4.12
TOTAL	\$59.09

for Flood:
Adrian S
extension
red.

* emailed Speero requesting
copies on 3/14/25
JW

* emailed contact Michelle Abbott
to update billing address &

3/14/25
JW

Received By: <u>TW</u>	Date: <u>3/18/25</u>
Reviewed By: <u>25</u>	Date: <u>3/19/25</u>
Approved By: <u>AS</u>	Date: <u>3/19/25</u>
Project Name/Number: <u>95200</u>	
Division #: _____	Activity Code: _____
Agreement/PO #: _____	
Road/Bridge #: _____	
Equip/Repair Order: _____	
Description: _____	
Finance Only Batch #: _____ Account #: _____ Cost Center: _____	



1000000000



PO BOX 790420
ST. LOUIS, MO 63179

Statement Enclosed

00008884 1 G3821807 DHF 00001945



TEHAMA CNTY SANT DIST 1
ATTN TEHAMA CNTY PRCHSNG
727 OAK STREET
RED BLUFF, CA 96080-3755

01220498
LOB 203 S111





Commercial Account



RETURN MAIL ADDRESS
PO BOX 790420
ST. LOUIS, MO 63179

ACCOUNT ACTIVITY STATEMENT

Commercial Account: 6035 3225 0552 4474
Statement Date 02/28/25
Credit Line \$1,000
Credit Available \$907

TEHAMA CNTY SANT DIST 1
ATTN TEHAMA CNTY PRCHSNG
727 OAK STREET
RED BLUFF, CA 96080-3755

Account Balance **\$92.80**

Account Information

Please see Payment Page(s) for Amount Due and Payment Due Date(s)

Current Payments and Unapplied Payments	- \$264.01
Current Purchases and Debits	\$356.81
Current Returns, Exchanges and Adjustments	\$0.00
Previously Billed Invoices	\$0.00

PAST DUE INVOICES

1-29 Days	30-59 Days	60-89 Days	90-149 Days	150-179 Days	180+ Days
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00



FIN
FIT

- G
- F
- A

Need to
Change billing
Address -

an now
more
talls



Account maintenance request: If you have no access to your account online at homedepot.com/mycommercialaccount to validate that we have the correct user information, you will be prompted to validate this information immediately upon login. Make sure the Full Name and Date of Birth is correct before submitting this information. Thank you for your prompt attention to this matter.

CURRENT PAYMENTS AND UNAPPLIED PAYMENTS

Payments received since the last statement period.
Please contact us with your instructions on how to apply to specific invoices.

Date	Amount
02/17/25	-\$252.21
02/21/25	-\$11.80
Total	-\$264.01

CURRENT PURCHASES AND DEBITS

Date	Purchase Location/Description	Invoice #	Purchase Order/Job Name	Customer Agreement #	Amount	Due Date
01/29/25	THE HOME DEPOT RED BLUFF, CA	2533400	TEHAMACOUNTY		\$26.60	02/28/25
01/29/25	THE HOME DEPOT RED BLUFF, CA	2533401	TEHAMACOUNTY		\$11.80	02/28/25
01/29/25	THE HOME DEPOT RED BLUFF, CA	2533402	TEHAMACOUNTY		\$225.61	02/28/25
02/03/25	THE HOME DEPOT RED BLUFF, CA	7023374	TEHAMACOUNTY		\$5.85	03/31/25

**Questions
About Your
Account**

ACCT MGR MICHELLE ABBOTT EXT 4676624
PHONE 1-800-494-1946 (TTY: 711)
FAX 1-877-969-6751
EMAIL MICHELLE.ABBOTT@CITI.COM

Send Billing Inquiries to:
HOME DEPOT CREDIT SERVICES
PO Box 790340
St. Louis, MO 63179-0340

Send a SECURE MESSAGE
right now to a customer
service professional online at
myhomedepotaccount.com



CURRENT PURCHASES AND DEBITS, cont.

Date	Purchase Location/Description	Invoice #	Purchase Order/Job Name	Customer Agreement #	Amount	Due Date
02/11/25	THE HOME DEPOT RED BLUFF, CA	9024356	TEHAMACOUNTY		\$27.86	03/31/25
02/25/25	THE HOME DEPOT RED BLUFF, CA	5535663	TEHAMAFLOOD		\$59.09	03/31/25
TOTAL					\$356.81	

PURCHASE HISTORY

Year to Date \$356.81

Life to Date \$10,518.50



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312

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456



Commercial Account 6035 3225 0552 4474

Statement Date 02/28/25

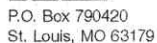
View, manage and pay your account online at
myhomedepotaccount.com

IMPORTANT:

To ensure accurate posting of your payment, please indicate which invoices you are paying by checking the appropriate box below. To apply a credit to an invoice, write in the invoice number of the debit transaction that you would like to have applied to, in the "Invoice Number" column next to the credit. Please remit entire Payment Page(s) when sending payment.

Transaction Date	Invoice #	Original Invoice Amount	Amount Due	Payment Due Date	Check if Paying	Payment Amount (if less than Amount Due)
02/03/25	7023374	\$5.85	\$5.85	03/31/25	<input type="checkbox"/>	\$ paid
02/11/25	9024356	\$27.86	\$27.86	03/31/25	<input type="checkbox"/>	\$
02/25/25	5535663	\$59.09	\$59.09	03/31/25	<input type="checkbox"/>	\$

Page 5 of 10



Your Account Number is 6035 3225 0552 4474



Statement Date _____
Account Balance _____
Check here if paying
all invoices ☐

02/28/25

\$92.80

Statement Enclosed

For proper credit, please write
6035 3225 0552 4474
on your check and enclose
with this payment coupon.

Amount Enclosed: \$

Please see reverse side to change your address.
Make Checks Payable to ▼

TEHAMA CNTY SANT DIST 1
ATTN TEHAMA CNTY PRCHSNG
727 OAK STREET
RED BLUFF, CA 96080-3755

HOME DEPOT CREDIT SERVICES
DEPT. 32 - 2505524474
PO BOX 78047
PHOENIX, AZ 85062-8047



03409 0000000 0009280 0000000 06035322505524474 2803



Commercial Account



Remit payment and make checks payable to:
HOME DEPOT CREDIT SERVICES
DEPT. 32 - 2505524474
PO BOX 78047
PHOENIX, AZ 85062-8047

INVOICE DETAIL

BILL TO:
Acct: 6035 3225 0552 4474
TEHAMA CNTY SANT DIST 1

Amount Due:	Trans Date:	DUE DATE:	Invoice #:
\$26.60	01/29/25	02/28/25	2533400
PO: TEHAMACOUNTY		Store: 8492, RED BLUFF, CA	

PRODUCT	SKU #	QUANTITY	UNIT PRICE	TOTAL PRICE
HDX REUSABLE LATEX L/XL 5PK	10071024060000400032	1.0000 EA	\$8.48	\$8.48
SB NON SCRATCH SCRUB SPONGE 9PK	00003823020000400020	1.0000 EA	\$9.98	\$9.98
CLR CALCIUM/LIME/RUST REMOVER 28OZ	00003368080000400004	1.0000 EA	\$6.28	\$6.28

Purchased by: TANNOUS SPEERO
Customer #: 00004

SUBTOTAL	\$24.74
TAX	\$1.86
TOTAL	\$26.60

BILL TO:
Acct: 6035 3225 0552 4474
TEHAMA CNTY SANT DIST 1

Amount Due:	Trans Date:	DUE DATE:	Invoice #:
\$11.80	01/29/25	02/28/25	2533401
PO: TEHAMACOUNTY		Store: 8492, RED BLUFF, CA	

PRODUCT	SKU #	QUANTITY	UNIT PRICE	TOTAL PRICE
ZEP SEPTIC SYSYTEM & CESSPOOL 64OZ	00003383750000700007	1.0000 EA	\$10.98	\$10.98

Purchased by: TANNOUS SPEERO
Customer #: 00004

SUBTOTAL	\$10.98
TAX	\$0.82
TOTAL	\$11.80

BILL TO:
Acct: 6035 3225 0552 4474
TEHAMA CNTY SANT DIST 1

Amount Due:	Trans Date:	DUE DATE:	Invoice #:
\$225.61	01/29/25	02/28/25	2533402
PO: TEHAMACOUNTY		Store: 8492, RED BLUFF, CA	

PRODUCT	SKU #	QUANTITY	UNIT PRICE	TOTAL PRICE
15A BLACK/RED BUTTON GFCI, WHITE	10013708110000200016	1.0000 EA	\$19.26	\$19.26
1G WHT JUMBO DECORA WALLPLT	00001252930000200006	1.0000 EA	\$1.64	\$1.64
RYB ONE+ 18V 6 GAL WET DRY VACUUM	10086257770001400006	1.0000 EA	\$149.00	\$149.00
KT PRM NC VLT&GFCI RCPTCL ELCTTSTKT	10063232940001100004	1.0000 EA	\$39.97	\$39.97

Purchased by: TANNOUS SPEERO
Customer #: 00004

SUBTOTAL	\$209.87
TAX	\$15.74
TOTAL	\$225.61

BILL TO:
Acct: 6035 3225 0552 4474
TEHAMA CNTY SANT DIST 1

Amount Due:	Trans Date:	DUE DATE:	Invoice #:
\$5.85	02/03/25	03/31/25	7023374
PO: TEHAMACOUNTY		Store: 8492, RED BLUFF, CA	

PRODUCT	SKU #	QUANTITY	UNIT PRICE	TOTAL PRICE
HEX BOLT ZINC 5/16 X 3-1/2 (ASE)	00002176590000300007	4.0000 EA	\$0.69	\$2.76
HEX NUT ZINC 5/16 (ABC)	00006554300000300007	4.0000 EA	\$0.15	\$0.60
FENDER WASHER ZINC 5/16 (AKC)	00005906700000300007	8.0000 EA	\$0.26	\$2.08

Purchased by: TANNOUS SPEERO
Customer #: 00004

SUBTOTAL	\$5.44
TAX	\$0.41
TOTAL	\$5.85





TEHAMA COUNTY WARRANT
444 OAK STREET, SUITE J
RED BLUFF, CA 96080-3335

ACCOUNTS PAYABLE

USBANK
24-HOUR BANKING 90-2267/1211
1-800-673-3555

70871687

Warrant Date 04/04/25

PAY TWENTY SEVEN Dollars and EIGHTY SIX Cents

PAY THIS AMOUNT

\$ *****27.86

VOID IF NOT CASHED WITHIN SIX MONTHS

TO THE
ORDER
OF:

HOME DEPOT CREDIT SERVICES
P O BOX 78047
PHOENIX, AZ 85062-2047

Krista Peterson
Krista Peterson, Auditor - Controller

⑈70871687⑈ ⑆121122676⑆153401776676⑈

INVOICE DATE	INV #	PO#	AMT	DESC
02/11/25	9024356		27.86	MTCE STRUCT-IMPRV-GROUNDS
mailed 4/11/25				

PWRK HP

WARRANT DATE
04/04/25

WARRANT TOTAL
27.86

VENDOR NO.
112395

WARRANT NO.
70871687