



Dr. Jorge O. Ayala, *Superintendent*

**CERTIFICATION OF AUDIT &  
AUTHORIZATION TO PROCESS 1099's**

DISTRICT: \_\_\_\_\_

TO: YOLO COUNTY OFFICE OF EDUCATION  
Business, Management & Advisory Services

I have reviewed the 1099 information and find it to be accurate and therefore authorize 1099's to process.

LIST ACCOUNT PAYABLE TECHNICIAN(S):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CHIEF BUSINESS OFFICIAL: \_\_\_\_\_  
(Signature)

DATE: \_\_\_\_\_

COUNTY USE ONLY:

Date received: \_\_\_\_\_ By: \_\_\_\_\_

Form #AP 005  
Revised: 01/07  
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