Exhibit I

NO: (A)	RECEIPT COUNTY of OF Santa Ana, Cali	_	\$(B)
RECEIVED OF:	(C)	DATE:	(D)
ADDRESS:	(E)	CITY:	
FOR	(F)		
Questions? Contact t	he Agency/Department where navme	ent was made (Directo	ory assistance 834-5400)
Questions? Contact t	he Agency/Department where payme If you suspect fraud, contact the Fra		
Questions? Contact t			
	If you suspect fraud, contact the Fra		08.
PAID BY CASH \$	If you suspect fraud, contact the Fra	aud Hotline at 834-360	(I)

Facsimile Form