

State Controller's Office
Division of Accounting and Reporting

Counties Financial Transactions Report
Reporting Information Order Form

1. Indicate the Items Needed (check all applicable boxes)

- Reporting Forms (including the U.S. Bureau of the Census form)
- Reporting Instructions
- Other (specify): _____

2. Specify the Fiscal Year

Fiscal Year: _____
(e.g., 20XX-XX)

3. Provide the Mailing/Contact Information

Entity Name: _____

Mailing Address: _____

City, State, Zip: _____

Contact Person: _____

Phone Number: _____

E-mail Address: _____

4. Submit the Order Form

Mail: State Controller's Office
Division of Accounting and Reporting
Local Govt Reporting Section (Counties Unit)
P. O. Box 942850
Sacramento, CA 94250

Fax: (916) 327-3162

E-mail: LGRsupport@sco.ca.gov

For questions regarding this form, please contact us at:
LGRsupport@sco.ca.gov or (916) 322-9672