

State Controller's Office
Division of Accounting and Reporting
Bureau of Payments - Local Reimbursements Section
Apportionment Payment Applied to State Mandated Claims
Claimant's Account Summary
As of June 30, 2016

Claimant Name: BREA OLINDA UNIFIED SCHOOL DISTRICT

Apportionment Amount: \$ 349,419

(A) Program Name	(B) Program Number	(C) Legal Reference	(D) Fiscal Year	(E) Claim Offset	(F) Accrued Interest Offset	(G) Apportionment Offset (E)+(F)
Behavioral Intervention Plans (07/01/1993 to 06/30/2012)	348	Title 5	19931994	\$ 32,690	\$ -	\$ 32,690
Behavioral Intervention Plans (07/01/1993 to 06/30/2012)	348	Title 5	19941995	\$ 35,547	\$ -	\$ 35,547
Behavioral Intervention Plans (07/01/1993 to 06/30/2012)	348	Title 5	19951996	\$ 36,849	\$ -	\$ 36,849
Graduation Requirements (07/01/1995 to 06/30/2004)	295	Ch. 498/93	19951996	\$ 146,498	\$ -	\$ 146,498
Graduation Requirements (07/01/1995 to 06/30/2004)	295	Ch. 498/93	19961997	\$ 97,835	\$ -	\$ 97,835
Brea Olinda Unified School District Total				\$ 349,419	\$ -	\$ 349,419