

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: INYO COUNTY OFFICE OF EDUCATION

Apportionment Amount: \$ 866

(A) Program Name	(B) Program Number	(C) Legal Reference	(D) Fiscal Year	(E) Claim Offset	(F) Accrued Interest Offset	(G) Apportionment Offset (E)+(F)
Open Meetings Act/Brown Act Reform	218	Ch. 641/86	19951996	\$ 866	\$ -	\$ 866
Inyo County Office of Education Total				\$ 866	\$ -	\$ 866