

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

ALAMEDA COUNTY TREASURER  
1221 OAK ST

OAKLAND

CA 94612

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$ 0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

1

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

ALPINE COUNTY TREASURER  
PO BOX 217

MARKLEEVILLE CA 96120

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

2

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

AMADOR COUNTY TREASURER  
810 COURT ST

JACKSON

CA 95642

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$73,819.00**

**Net Claim / Payment Amount** **\$73,819.00**

**YTD Amount:** **\$73,819.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

3

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**BUTTE COUNTY TREASURER**  
25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the  
Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

4

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**CALAVERAS COUNTY TREASURER**  
GOVERNMENT CENTER

SAN ANDREAS

CA 95249

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$512,481.00**

**Net Claim / Payment Amount** **\$512,481.00**

**YTD Amount:** **\$512,481.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

5

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

COLUSA COUNTY TREASURER  
546 JAY ST

COLUSA

CA 95932

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$174,690.00**

**Net Claim / Payment Amount** **\$174,690.00**

**YTD Amount:** **\$174,690.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

6

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

CONTRA COSTA COUNTY TREASURER

625 COURT ST RM 102

MARTINEZ

CA 94553

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$930,767.00**

**Net Claim / Payment Amount** **\$930,767.00**

**YTD Amount:** **\$930,767.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

7

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**DEL NORTE COUNTY TREASURER**

981 H ST STE 150

CRESCENT CITY

CA 95531

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the  
Department of Finance schedule

51,544,437.00

**Gross Claim** **\$64,252.00**

**Net Claim / Payment Amount** **\$64,252.00**

**YTD Amount:** **\$64,252.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

8

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

EL DORADO COUNTY TREASURER

360 FAIR LN

PLACERVILLE

CA 95667

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$456,964.00**

**Net Claim / Payment Amount** **\$456,964.00**

**YTD Amount:** **\$456,964.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

9

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$3,082,234.00**

**Net Claim / Payment Amount** **\$3,082,234.00**

**YTD Amount:** **\$3,082,234.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

GLENN COUNTY TREASURER  
516 WEST SYCAMORE STREET

WILLOWS

CA 95988

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$162,562.00**

**Net Claim / Payment Amount** **\$162,562.00**

**YTD Amount:** **\$162,562.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

11

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**HUMBOLDT COUNTY TREASURER**

825 FIFTH ST RM 125

EUREKA

CA 95501

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$376,139.00**

**Net Claim / Payment Amount** **\$376,139.00**

**YTD Amount:** **\$376,139.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

12

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

IMPERIAL COUNTY TREASURER  
940 WEST MAIN ST

EL CENTRO

CA 92243 2863

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$902,432.00**

**Net Claim / Payment Amount** **\$902,432.00**

**YTD Amount:** **\$902,432.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

13

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

INYO COUNTY TREASURER

PO BOX 0

INDEPENDENCE

CA 93526

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

14

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**KERN COUNTY TREASURER**

PO BOX 981240

SACRAMENTO

CA 95798 1240

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$1,049,309.00**

**Net Claim / Payment Amount** **\$1,049,309.00**

**YTD Amount:** **\$1,049,309.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

15

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**KINGS COUNTY TREASURER**

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$398,459.00**

**Net Claim / Payment Amount** **\$398,459.00**

**YTD Amount:** **\$398,459.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

16

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**LAKE COUNTY TREASURER**  
255 NORTH FORBES ST RM 215

LAKEPORT

CA 95453

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$501,082.00**

**Net Claim / Payment Amount** **\$501,082.00**

**YTD Amount:** **\$501,082.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

17

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

LASSEN COUNTY TREASURER  
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the  
Department of Finance schedule

51,544,437.00

**Gross Claim** **\$8,628.00**

**Net Claim / Payment Amount** **\$8,628.00**

**YTD Amount:** **\$8,628.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

18

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$15,934,480.00**

**Net Claim / Payment Amount** **\$15,934,480.00**

**YTD Amount:** **\$ 15,934,480.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

19

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**MADERA COUNTY TREASURER**

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim**

**\$613,649.00**

**Net Claim / Payment Amount**

**\$613,649.00**

**YTD Amount:**

**\$613,649.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

20

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**MARIN COUNTY TREASURER**

PO BOX 4220  
CIVIC CENTER  
SAN RAFAEL

CA 94913

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$109,648.00**

**Net Claim / Payment Amount** **\$109,648.00**

**YTD Amount:** **\$109,648.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

21

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA

CA 95338

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

22

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**MENDOCINO COUNTY TREASURER**  
501 LOW GAP RD 1060

UKIAH

CA 95482

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$63,758.00**

**Net Claim / Payment Amount** **\$63,758.00**

**YTD Amount:** **\$63,758.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

MERCED COUNTY TREASURER

PO BOX 981311

WEST SACRAMENTO

CA 95798 1311

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$836,363.00**

**Net Claim / Payment Amount** **\$836,363.00**

**YTD Amount:** **\$836,363.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

24

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**MODOC COUNTY TREASURER**  
204 SOUTH COURT ST 101

ALTURAS

CA 96101

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$115,263.00**

**Net Claim / Payment Amount** **\$115,263.00**

**YTD Amount:** **\$115,263.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

25

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

MONO COUNTY TREASURER

PO BOX 495

BRIDGEPORT

CA 93517

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

26

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$1,770,316.00**

**Net Claim / Payment Amount** **\$1,770,316.00**

**YTD Amount:** **\$1,770,316.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

27

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**NAPA COUNTY TREASURER**

1195 THIRD ST RM 108

NAPA

CA 94559 3035

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$506,082.00**

**Net Claim / Payment Amount** **\$506,082.00**

**YTD Amount:** **\$506,082.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

28

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

29

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO

CA 95798 1024

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim \$687,975.00**

**Net Claim / Payment Amount \$687,975.00**

**YTD Amount: \$687,975.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

30

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**PLACER COUNTY TREASURER**

2976 Richardson Dr.

Auburn

CA 95603

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

31

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY

CA 95971

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**RIVERSIDE COUNTY TREASURER**

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO

CA 95812 4035

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$8,774,852.00**

**Net Claim / Payment Amount** **\$8,774,852.00**

**YTD Amount:** **\$8,774,852.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO

CA 95798 0264

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$3,229,685.00**

**Net Claim / Payment Amount** **\$3,229,685.00**

**YTD Amount:** **\$3,229,685.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

34

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**SAN BENITO COUNTY TREASURER**

COURTHOUSE  
440 FIFTH ST RM 107  
HOLLISTER

CA 95023

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the  
Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

35

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**SAN BERNARDINO CO TREASURER**

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$794,306.00**

**Net Claim / Payment Amount** **\$794,306.00**

**YTD Amount:** **\$794,306.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

36

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**SAN DIEGO COUNTY TREASURER**

PO BOX 980304

WEST SACRAMENTO

CA 95798 0304

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

37

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**SAN FRANCISCO COUNTY TREASURER**

PO BOX 2920

SACRAMENTO

CA 95814 2920

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$1,484,285.00**

**Net Claim / Payment Amount** **\$1,484,285.00**

**YTD Amount:** **\$1,484,285.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

38

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**SAN JOAQUIN COUNTY TREASURER**

PO BOX 981355

WEST SACRAMENTO

CA 95798 1355

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$2,121,502.00**

**Net Claim / Payment Amount** **\$2,121,502.00**

**YTD Amount:** **\$2,121,502.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

39

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**SAN LUIS OBISPO COUNTY TREASURER**  
PO BOX 1149

SAN LUIS OBISPO CA 93406

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**SAN MATEO COUNTY TREASURER HUMAN SERVICES AGENCY**

C/O Union Bank St Govt Dept  
PO Box 4035  
Sacramento

CA 95814

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$180,670.00**

**Net Claim / Payment Amount** **\$180,670.00**

**YTD Amount:** **\$180,670.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**SANTA BARBARA COUNTY TREASURER**

PO BOX 579

SANTA BARBARA

CA 93102 0579

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$754,371.00**

**Net Claim / Payment Amount** **\$754,371.00**

**YTD Amount:** **\$754,371.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

42

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

SANTA CLARA CO TREASURER  
PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$3,107,739.00**

**Net Claim / Payment Amount** **\$3,107,739.00**

**YTD Amount:** **\$3,107,739.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

43

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**SANTA CRUZ COUNTY TREASURER**  
PO BOX 1817

SANTA CRUZ CA 95061

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

44

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**SHASTA COUNTY TREASURER**

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$435,012.00**

**Net Claim / Payment Amount** **\$435,012.00**

**YTD Amount:** **\$435,012.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

45

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

46

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**SISKIYOU COUNTY TREASURER**  
311 FOURTH ST RM 104

YREKA

CA 96097 2944

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$41,941.00**

**Net Claim / Payment Amount** **\$41,941.00**

**YTD Amount:** **\$41,941.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

47

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**SOLANO COUNTY T TC**  
675 TEXAS ST STE 1900

FAIRFIELD

CA 94533 6337

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the  
Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

48

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO

CA 95812 1204

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

49

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

STANISLAUS COUNTY TREASURER  
PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$276,209.00**

**Net Claim / Payment Amount** **\$276,209.00**

**YTD Amount:** **\$276,209.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

50

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**SUTTER COUNTY TREASURER**

PO BOX 546

YUBA CITY

CA 95992

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$353,169.00**

**Net Claim / Payment Amount** **\$353,169.00**

**YTD Amount:** **\$353,169.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim**

**\$190,975.00**

**Net Claim / Payment Amount**

**\$190,975.00**

**YTD Amount:**

**\$190,975.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

52

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

TRINITY CO TREASURER

PO BOX 1297

WEAVERVILLE

CA 96093 1297

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

53

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

**TULARE COUNTY TREASURER**  
COUNTY CIVIC CENTER RM 103E  
221 SOUTH MOONEY BL  
VISALIA CA 93291

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

54

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

TUOLUMNE COUNTY TREASURER  
2 SOUTH GREEN ST

SONORA

CA 95370

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

Allocation of Local Realignment, Sales Tax Caseload Growth.

Fiscal Year: 2014

Collection Period: 08/16/2014 To 08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$254,052.00**

**Net Claim / Payment Amount** **\$254,052.00**

**YTD Amount:** **\$254,052.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

55

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**VENTURA COUNTY TREASURER**

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO

CA 95798 0307

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the  
Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

56

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A

PAYMENT ISSUE DATE: 10/13/2015

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND

CA 95695

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the Department of Finance schedule 51,544,437.00

**Gross Claim** **\$214,317.00**

**Net Claim / Payment Amount** **\$214,317.00**

**YTD Amount:** **\$214,317.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400524A  
PAYMENT ISSUE DATE: 10/13/2015

**YUBA COUNTY TREASURER**  
915 8TH ST STE 103

MARYSVILLE

CA 95901 5273

Financial Activity

**Additional Description:**

Section 17605(c) Welfare and Institutions Code. To be deposited in the Local Health and Welfare Trust Fund, Social Services Account. Per schedule from the Department of Finance.

Allocation of the 2014-15 Fiscal Year Caseload Sales Tax Growth

More information at [http://www.sco.ca.gov/ard\\_local\\_apportionments.html](http://www.sco.ca.gov/ard_local_apportionments.html)

**Allocation of Local Realignment, Sales Tax Caseload Growth.**

**Fiscal Year: 2014**

**Collection Period:** 08/16/2014      **To**    08/15/2015

**Payment Calculations:**

Social Services Caseload Growth statewide total to all counties from the  
Department of Finance schedule

51,544,437.00

**Gross Claim** **\$0.00**

**Net Claim / Payment Amount** **\$0.00**

**YTD Amount:** **\$0.00**

For assistance, please call: Mike Silvera at (916) 323-0704

10/7/2015

58