

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

ALAMEDA COUNTY TREASURER

1221 OAK STREET

OAKLAND CA

94612

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 **County/City Ratio:** 0.0000000

Gross Claim	\$	264,714.10
Net Claim / Payment Amount	\$	264,714.10
YTD Amount:	\$	264,714.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

ALPINE COUNTY TREASURER

PO BOX 217

MARKLEEVILLE CA 96120

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	162.75
Net Claim / Payment Amount	\$	162.75
YTD Amount:	\$	162.75

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

AMADOR COUNTY TREASURER
810 COURT STREET

JACKSON CA 95642

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	14,723.10
Net Claim / Payment Amount	\$	14,723.10
YTD Amount:	\$	14,723.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE CA 95965

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	164,966.90
Net Claim / Payment Amount	\$	164,966.90
YTD Amount:	\$	164,966.90

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	20,672.40
Net Claim / Payment Amount	\$	20,672.40
YTD Amount:	\$	20,672.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

COLUSA COUNTY TREASURER

546 JAY ST

COLUSA CA 95932

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.00000000

Gross Claim	\$	2,667.00
Net Claim / Payment Amount	\$	2,667.00
YTD Amount:	\$	2,667.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ CA 94553

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	133,707.00
Net Claim / Payment Amount	\$	133,707.00
YTD Amount:	\$	133,707.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY CA 95531

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	22,799.70
Net Claim / Payment Amount	\$	22,799.70
YTD Amount:	\$	22,799.70

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

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PAYMENT ISSUE DATE: 1/27/2012

EL DORADO COUNTY TREASURER

360 FAIR LANE

PLACERVILLE CA 95667

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

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Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	66,130.75
Net Claim / Payment Amount	\$	66,130.75
YTD Amount:	\$	66,130.75

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	727,543.25
Net Claim / Payment Amount	\$	727,543.25
YTD Amount:	\$	727,543.25

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

GLENN COUNTY TREASURER

P O BOX 151

WILLOWS CA 95988

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

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Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	15,110.20
Net Claim / Payment Amount	\$	15,110.20
YTD Amount:	\$	15,110.20

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

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CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

HUMBOLDT COUNTY TREASURER
825 FIFTH STREET ROOM 125

EUREKA CA 95501

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
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Fiscal Year: 2011-12

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Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	79,080.40
Net Claim / Payment Amount	\$	79,080.40
YTD Amount:	\$	79,080.40

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
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IMPERIAL COUNTY TREASURER
940 WEST MAIN STREET

EL CENTRO CA 92243 2863

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
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Fiscal Year: 2011-12

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Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	111,662.95
Net Claim / Payment Amount	\$	111,662.95
YTD Amount:	\$	111,662.95

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

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INYO COUNTY TREASURER

P O BOX O

INDEPENDENCE CA 93526

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

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Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	1,710.45
Net Claim / Payment Amount	\$	1,710.45
YTD Amount:	\$	1,710.45

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P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO CA 95798 1240

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
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Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	402,624.25
Net Claim / Payment Amount	\$	402,624.25
YTD Amount:	\$	402,624.25

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	83,155.80
Net Claim / Payment Amount	\$	83,155.80
YTD Amount:	\$	83,155.80

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT CA 95453

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	49,420.35
Net Claim / Payment Amount	\$	49,420.35
YTD Amount:	\$	49,420.35

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	23,323.65
Net Claim / Payment Amount	\$	23,323.65
YTD Amount:	\$	23,323.65

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	2,019,671.15
Net Claim / Payment Amount	\$	2,019,671.15
YTD Amount:	\$	2,019,671.15

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

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Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	79,191.35
Net Claim / Payment Amount	\$	79,191.35
YTD Amount:	\$	79,191.35

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

MARIN COUNTY TREASURER

PO BOX 4220
CIVIC CENTER
SAN RAFAEL CA 94913

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	171,214.75
Net Claim / Payment Amount	\$	171,214.75
YTD Amount:	\$	171,214.75

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA CA 95338

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	4,399.50
Net Claim / Payment Amount	\$	4,399.50
YTD Amount:	\$	4,399.50

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH CA

95482

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim \$ 21,532.00

Net Claim / Payment Amount \$ 21,532.00

YTD Amount: \$ 21,532.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

MERCED COUNTY TREASURER

C/O WELLS FARGO BANK
PO BOX 981311
WEST SACRAMENTO 95798-1311

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.00000000

Gross Claim	\$	198,507.40
Net Claim / Payment Amount	\$	198,507.40
YTD Amount:	\$	198,507.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS CA 96101

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

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Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	2,608.90
Net Claim / Payment Amount	\$	2,608.90
YTD Amount:	\$	2,608.90

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

MONO COUNTY TREASURER

P O BOX 495

BRIDGEPORT CA 93517

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

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Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	379.75
Net Claim / Payment Amount	\$	379.75
YTD Amount:	\$	379.75

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	162,006.60
Net Claim / Payment Amount	\$	162,006.60
YTD Amount:	\$	162,006.60

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

NAPA COUNTY TREASURER
1195 THIRD STREET ROOM 108

NAPA CA 94559 3035

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	119,992.60
Net Claim / Payment Amount	\$	119,992.60
YTD Amount:	\$	119,992.60

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY CA 95959

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	39,771.55
Net Claim / Payment Amount	\$	39,771.55
YTD Amount:	\$	39,771.55

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	970,909.45
Net Claim / Payment Amount	\$	970,909.45
YTD Amount:	\$	970,909.45

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

PLACER COUNTY TREASURER
2976 RICHARDSON DRIVE

AUBURN CA 95603

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	80,526.95
Net Claim / Payment Amount	\$	80,526.95
YTD Amount:	\$	80,526.95

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY CA

95971

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	14,129.50
Net Claim / Payment Amount	\$	14,129.50
YTD Amount:	\$	14,129.50

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

RIVERSIDE COUNTY TREASURER
C/O UNION BANK OF CA ST GOV
PO BOX 4035
SACRAMENTO CA 95812 4035

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	625,522.80
Net Claim / Payment Amount	\$	625,522.80
YTD Amount:	\$	625,522.80

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	865,936.75
Net Claim / Payment Amount	\$	865,936.75
YTD Amount:	\$	865,936.75

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SAN BENITO COUNTY TREASURER
COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER CA 95023

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	21,275.10
Net Claim / Payment Amount	\$	21,275.10
YTD Amount:	\$	21,275.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SAN BERNARDINO COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	1,060,067.75
Net Claim / Payment Amount	\$	1,060,067.75
YTD Amount:	\$	1,060,067.75

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SAN DIEGO COUNTY TREASURER

PO BOX 2920

SACRAMENTO CA 95812 2920

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	1,526,387.10
Net Claim / Payment Amount	\$	1,526,387.10
YTD Amount:	\$	1,526,387.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO 95814-2920

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	1,191,133.30
Net Claim / Payment Amount	\$	1,191,133.30
YTD Amount:	\$	1,191,133.30

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	491,068.90
Net Claim / Payment Amount	\$	491,068.90
YTD Amount:	\$	491,068.90

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	99,272.60
Net Claim / Payment Amount	\$	99,272.60
YTD Amount:	\$	99,272.60

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SAN MATEO COUNTY TREASURER
C/O UNION BANK ST GOVT DEPT
PO BOX 4035
SACRAMENTO CA 95812

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	285,421.15
Net Claim / Payment Amount	\$	285,421.15
YTD Amount:	\$	285,421.15

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	58,751.70
Net Claim / Payment Amount	\$	58,751.70
YTD Amount:	\$	58,751.70

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SANTA CLARA COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	299,048.40
Net Claim / Payment Amount	\$	299,048.40
YTD Amount:	\$	299,048.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ CA 95061

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	38,863.30
Net Claim / Payment Amount	\$	38,863.30
YTD Amount:	\$	38,863.30

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	130,656.05
Net Claim / Payment Amount	\$	130,656.05
YTD Amount:	\$	130,656.05

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE CA 95936 0376

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	550.90
Net Claim / Payment Amount	\$	550.90
YTD Amount:	\$	550.90

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA CA

96097

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	39,668.30
Net Claim / Payment Amount	\$	39,668.30
YTD Amount:	\$	39,668.30

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SOLANO COUNTY TREASURER TAX COLLECTOR

675 TEXAS ST STE 1900

FAIRFIELD CA

94533 6337

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	80,270.05
Net Claim / Payment Amount	\$	80,270.05
YTD Amount:	\$	80,270.05

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO CA 95812 1204

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	74,340.70
Net Claim / Payment Amount	\$	74,340.70
YTD Amount:	\$	74,340.70

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO CA

95353 3052

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	321,338.15
Net Claim / Payment Amount	\$	321,338.15
YTD Amount:	\$	321,338.15

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

SUTTER COUNTY TREASURER
PO BOX 546

YUBA CITY CA 95992

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	120,507.10
Net Claim / Payment Amount	\$	120,507.10
YTD Amount:	\$	120,507.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF CA 96080

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	37,162.65
Net Claim / Payment Amount	\$	37,162.65
YTD Amount:	\$	37,162.65

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

TRINITY COUNTY TREASURER
PO BOX 1297

WEAVERVILLE CA 96093 1297

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	3,546.55
Net Claim / Payment Amount	\$	3,546.55
YTD Amount:	\$	3,546.55

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

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

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	349,345.50
Net Claim / Payment Amount	\$	349,345.50
YTD Amount:	\$	349,345.50

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA CA 95370

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	28,858.20
Net Claim / Payment Amount	\$	28,858.20
YTD Amount:	\$	28,858.20

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK
PO BOX 980307
WEST SACRAMENTO CA 95798 0307

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	150,019.10
Net Claim / Payment Amount	\$	150,019.10
YTD Amount:	\$	150,019.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1100212A
PAYMENT ISSUE DATE: 1/27/2012

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND CA 95695

Allocation of Vehicle License Collection-Local Realignment

Section 17604(d) Welfare and Institutions code.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2011-12

More information at [HTTP://WWW.SCO.CA.GOV/ARD/LOCAL/APPORT/INDEX.SHTML](http://www.sco.ca.gov/ard/local/apport/index.shtml)

Collection Period 12/16/2011 TO: 1/15/2012

Total amount collected: \$14,000,000.00

Gross monthly apportionment: \$14,000,000.00 County/City Ratio: 0.0000000

Gross Claim	\$	31,971.45
Net Claim / Payment Amount	\$	31,971.45
YTD Amount:	\$	31,971.45