

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 **County/City Ratio:** 0.01890815

Gross Claim	\$	58,895.19
Net Claim / Payment Amount	\$	58,895.19
YTD Amount:	\$	191,597.73

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00001163

Gross Claim	\$	36.23
Net Claim / Payment Amount	\$	36.23
YTD Amount:	\$	117.78

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00105165

Gross Claim	\$	3,275.68
Net Claim / Payment Amount	\$	3,275.68
YTD Amount:	\$	10,656.45

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.01178335

Gross Claim	\$	36,702.83
Net Claim / Payment Amount	\$	36,702.83
YTD Amount:	\$	119,401.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00147660

Gross Claim	\$	4,599.32
Net Claim / Payment Amount	\$	4,599.32
YTD Amount:	\$	14,962.50

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00019050

Gross Claim	\$	593.37
Net Claim / Payment Amount	\$	593.37
YTD Amount:	\$	1,930.35

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00955050

Gross Claim	\$	29,747.94
Net Claim / Payment Amount	\$	29,747.94
YTD Amount:	\$	96,775.95

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00162855

Gross Claim	\$	5,072.61
Net Claim / Payment Amount	\$	5,072.61
YTD Amount:	\$	16,502.22

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00472363

Gross Claim	\$	14,713.18
Net Claim / Payment Amount	\$	14,713.18
YTD Amount:	\$	47,864.83

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.05196737

Gross Claim	\$	161,868.20
Net Claim / Payment Amount	\$	161,868.20
YTD Amount:	\$	526,589.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00107930

Gross Claim	\$	3,361.81
Net Claim / Payment Amount	\$	3,361.81
YTD Amount:	\$	10,936.63

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00564860

Gross Claim	\$	17,594.28
Net Claim / Payment Amount	\$	17,594.28
YTD Amount:	\$	57,237.69

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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.
To be deposited in General Fund for Mental Health Programs.

Fiscal Year: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00797593

Gross Claim	\$	24,843.46
Net Claim / Payment Amount	\$	24,843.46
YTD Amount:	\$	80,820.64

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00012217

Gross Claim	\$	380.54
Net Claim / Payment Amount	\$	380.54
YTD Amount:	\$	1,238.03

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO CA 95798 1240

Allocation of Vehicle License Collection-Local Realignment

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

Fiscal Year: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.02875887

Gross Claim	\$	89,578.26
Net Claim / Payment Amount	\$	89,578.26
YTD Amount:	\$	291,415.90

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00593970

Gross Claim	\$	18,501.00
Net Claim / Payment Amount	\$	18,501.00
YTD Amount:	\$	60,187.43

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00353003

Gross Claim	\$	10,995.35
Net Claim / Payment Amount	\$	10,995.35
YTD Amount:	\$	35,769.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00166597

Gross Claim	\$	5,189.17
Net Claim / Payment Amount	\$	5,189.17
YTD Amount:	\$	16,881.47

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.14426223

Gross Claim	\$	449,348.65
Net Claim / Payment Amount	\$	449,348.65
YTD Amount:	\$	1,461,820.13

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00565652

Gross Claim	\$	17,618.95
Net Claim / Payment Amount	\$	17,618.95
YTD Amount:	\$	57,318.02

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.01222963

Gross Claim	\$	38,092.91
Net Claim / Payment Amount	\$	38,092.91
YTD Amount:	\$	123,923.71

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00031425

Gross Claim	\$	978.83
Net Claim / Payment Amount	\$	978.83
YTD Amount:	\$	3,184.32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 **County/City Ratio:** 0.00153800

Gross Claim	\$	4,790.57
Net Claim / Payment Amount	\$	4,790.57
YTD Amount:	\$	15,584.67

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.01417910

Gross Claim	\$	44,165.12
Net Claim / Payment Amount	\$	44,165.12
YTD Amount:	\$	143,677.90

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00018635

Gross Claim	\$	580.44
Net Claim / Payment Amount	\$	580.44
YTD Amount:	\$	1,888.29

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00002713

Gross Claim	\$	84.50
Net Claim / Payment Amount	\$	84.50
YTD Amount:	\$	274.84

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.01157190

Gross Claim	\$	36,044.21
Net Claim / Payment Amount	\$	36,044.21
YTD Amount:	\$	117,258.95

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00857090

Gross Claim	\$	26,696.68
Net Claim / Payment Amount	\$	26,696.68
YTD Amount:	\$	86,849.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00284082

Gross Claim	\$	8,848.60
Net Claim / Payment Amount	\$	8,848.60
YTD Amount:	\$	28,786.32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.06935067

Gross Claim	\$	216,013.78
Net Claim / Payment Amount	\$	216,013.78
YTD Amount:	\$	702,735.72

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00575193

Gross Claim	\$	17,916.14
Net Claim / Payment Amount	\$	17,916.14
YTD Amount:	\$	58,284.68

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00100925

Gross Claim	\$	3,143.62
Net Claim / Payment Amount	\$	3,143.62
YTD Amount:	\$	10,226.81

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.04468020

Gross Claim	\$	139,170.09
Net Claim / Payment Amount	\$	139,170.09
YTD Amount:	\$	452,747.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.06185263

Gross Claim	\$	192,658.85
Net Claim / Payment Amount	\$	192,658.85
YTD Amount:	\$	626,757.36

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00151965

Gross Claim	\$	4,733.41
Net Claim / Payment Amount	\$	4,733.41
YTD Amount:	\$	15,398.73

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.07571913

Gross Claim	\$	235,850.28
Net Claim / Payment Amount	\$	235,850.28
YTD Amount:	\$	767,267.66

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.10902765

Gross Claim	\$	339,599.81
Net Claim / Payment Amount	\$	339,599.81
YTD Amount:	\$	1,104,785.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.08508095

Gross Claim	\$	265,010.52
Net Claim / Payment Amount	\$	265,010.52
YTD Amount:	\$	862,131.77

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.03507635

Gross Claim	\$	109,255.97
Net Claim / Payment Amount	\$	109,255.97
YTD Amount:	\$	355,431.34

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00709090

Gross Claim	\$	22,086.77
Net Claim / Payment Amount	\$	22,086.77
YTD Amount:	\$	71,852.63

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.02038722

Gross Claim	\$	63,502.20
Net Claim / Payment Amount	\$	63,502.20
YTD Amount:	\$	206,585.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00419655

Gross Claim	\$	13,071.43
Net Claim / Payment Amount	\$	13,071.43
YTD Amount:	\$	42,523.96

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.02136060

Gross Claim	\$	66,534.09
Net Claim / Payment Amount	\$	66,534.09
YTD Amount:	\$	216,448.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00277595

Gross Claim	\$	8,646.54
Net Claim / Payment Amount	\$	8,646.54
YTD Amount:	\$	28,128.91

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46

County/City Ratio: 0.00933257

Gross Claim	\$	29,069.13
Net Claim / Payment Amount	\$	29,069.13
YTD Amount:	\$	94,567.71

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00003935

Gross Claim	\$	122.57
Net Claim / Payment Amount	\$	122.57
YTD Amount:	\$	398.74

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00283345

Gross Claim	\$	8,825.64
Net Claim / Payment Amount	\$	8,825.64
YTD Amount:	\$	28,711.56

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46

County/City Ratio: 0.00573357

Gross Claim	\$	17,858.95
Net Claim / Payment Amount	\$	17,858.95
YTD Amount:	\$	58,098.77

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00531005

Gross Claim	\$	16,539.77
Net Claim / Payment Amount	\$	16,539.77
YTD Amount:	\$	53,807.15

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46

County/City Ratio: 0.02295273

Gross Claim \$ 71,493.27

Net Claim / Payment Amount \$ 71,493.27

YTD Amount: \$ 232,581.70

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00860765

Gross Claim	\$	26,811.15
Net Claim / Payment Amount	\$	26,811.15
YTD Amount:	\$	87,221.98

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00265447

Gross Claim	\$	8,268.15
Net Claim / Payment Amount	\$	8,268.15
YTD Amount:	\$	26,898.01

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00025333

Gross Claim	\$	789.07
Net Claim / Payment Amount	\$	789.07
YTD Amount:	\$	2,566.94

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.02495325

Gross Claim	\$	77,724.49
Net Claim / Payment Amount	\$	77,724.49
YTD Amount:	\$	252,853.19

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00206130

Gross Claim	\$	6,420.55
Net Claim / Payment Amount	\$	6,420.55
YTD Amount:	\$	20,887.31

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.01071565

Gross Claim	\$	33,377.15
Net Claim / Payment Amount	\$	33,377.15
YTD Amount:	\$	108,582.50

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200061A
PAYMENT ISSUE DATE: 10/26/2012

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: 2012-13

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 09/16/2012 TO: 10/15/2012

Total amount collected: \$3,114,804.46

Gross monthly apportionment: \$3,114,804.46 County/City Ratio: 0.00228367

Gross Claim	\$	7,113.19
Net Claim / Payment Amount	\$	7,113.19
YTD Amount:	\$	23,140.68