

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A  
PAYMENT ISSUE DATE: 9/27/2016

**ALAMEDA COUNTY TREASURER**  
1221 OAK STREET

OAKLAND CA 94612

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

Total amount collected: \$122,600,762.20

Gross monthly apportionment: \$122,600,762.20

County/City Ratio: 0.04712639

Gross Claim	\$	5,777,731.33
Stabilization	\$	0.00
Net Claim / Payment Amount	\$	5,777,731.33
YTD Amount:	\$	5,777,731.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A  
PAYMENT ISSUE DATE: 9/27/2016

ALPINE COUNTY TREASURER  
PO BOX 217

MARKLEEVILLE CA 96120

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20 **County/City Ratio:** 0.00010863

<b>Gross Claim</b>	<b>\$</b>	<b>13,318.12</b>
<b>Stabilization</b>	<b>\$</b>	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	<b>\$</b>	<b>13,318.12</b>
<b>YTD Amount:</b>	<b>\$</b>	<b>13,318.12</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**AMADOR COUNTY TREASURER**

810 COURT STREET

JACKSON CA

95642

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00078780

**Gross Claim** \$ 96,584.88

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 96,584.88

**YTD Amount:** \$ 96,584.88

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**BUTTE COUNTY TREASURER**  
25 COUNTY CENTER DR

OROVILLE CA 95965

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00971274

<b>Gross Claim</b>	\$	<b>1,190,789.33</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>1,190,789.33</b>
<b>YTD Amount:</b>	\$	<b>1,190,789.33</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**CALAVERAS COUNTY TREASURER**  
GOVERNMENT CENTER

SAN ANDREAS CA 95249

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00157074

<b>Gross Claim</b>	\$	<b>192,573.92</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>192,573.92</b>
<b>YTD Amount:</b>	\$	<b>192,573.92</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**COLUSA COUNTY TREASURER**

546 JAY ST

COLUSA CA

95932

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00072051

<b>Gross Claim</b>	\$	<b>88,335.08</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>88,335.08</b>
<b>YTD Amount:</b>	\$	<b>88,335.08</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**CONTRA COSTA COUNTY TREASURER**

625 COURT ST RM 102

MARTINEZ CA

94553

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.02029303

**Gross Claim** \$ 2,487,940.95

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 2,487,940.95

**YTD Amount:** \$ 2,487,940.95

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**DEL NORTE COUNTY TREASURER**

981 H ST STE 150

CRESCENT CITY CA 95531

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00147671

<b>Gross Claim</b>	\$	<b>181,045.77</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>181,045.77</b>
<b>YTD Amount:</b>	\$	<b>181,045.77</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**EL DORADO COUNTY TREASURER**

360 FAIR LANE

PLACERVILLE CA

95667

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00393308

<b>Gross Claim</b>	\$	<b>482,198.61</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>482,198.61</b>
<b>YTD Amount:</b>	\$	<b>482,198.61</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**FRESNO COUNTY TREASURER**

PO BOX 1406

SACRAMENTO CA

95812

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.02987698

**Gross Claim** \$ 3,662,940.52

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 3,662,940.52

**YTD Amount:** \$ 3,662,940.52

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**GLENN COUNTY TREASURER**  
516 WEST SYCAMORE STREET

WILLOWS CA 95988

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00150870

<b>Gross Claim</b>	\$	<b>184,967.77</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>184,967.77</b>
<b>YTD Amount:</b>	\$	<b>184,967.77</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**HUMBOLDT COUNTY TREASURER**

825 FIFTH STREET ROOM 125

EUREKA CA

95501

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00488795

**Gross Claim** \$ 599,266.40

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 599,266.40

**YTD Amount:** \$ 599,266.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**IMPERIAL COUNTY TREASURER**

940 WEST MAIN STREET

EL CENTRO CA

92243 2863

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00737745

**Gross Claim** \$ 904,480.99

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 904,480.99

**YTD Amount:** \$ 904,480.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**INYO COUNTY TREASURER**

P O BOX 0

INDEPENDENCE CA

93526

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00057813

**Gross Claim** \$ 70,879.18

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 70,879.18

**YTD Amount:** \$ 70,879.18

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**KERN COUNTY TREASURER**

PO BOX 981240

SACRAMENTO CA 95798 1240

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20 **County/City Ratio:** 0.01807650

<b>Gross Claim</b>	\$	<b>2,216,192.68</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>2,216,192.68</b>
<b>YTD Amount:</b>	\$	<b>2,216,192.68</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**KINGS COUNTY TREASURER**

PO BOX 1406

SACRAMENTO CA 95812 1406

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00455278

<b>Gross Claim</b>	\$	<b>558,174.30</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>558,174.30</b>
<b>YTD Amount:</b>	\$	<b>558,174.30</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**LAKE COUNTY TREASURER**

255 NORTH FORBES ST RM 215

LAKEPORT CA

95453

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00454605

**Gross Claim** \$ 557,349.19

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 557,349.19

**YTD Amount:** \$ 557,349.19

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**LASSEN COUNTY TREASURER**  
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00115677

<b>Gross Claim</b>	\$	<b>141,820.88</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>141,820.88</b>
<b>YTD Amount:</b>	\$	<b>141,820.88</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**LOS ANGELES COUNTY TREASURER**

PO BOX 1859

SACRAMENTO CA

95812

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.31432036

<b>Gross Claim</b>	\$	<b>38,535,915.75</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>38,535,915.75</b>
<b>YTD Amount:</b>	\$	<b>38,535,915.75</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**MADERA COUNTY TREASURER**

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO CA 95812 1859

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00349771

**Gross Claim** \$ 428,821.91

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 428,821.91

**YTD Amount:** \$ 428,821.91

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**MARIN COUNTY TREASURER**

PO BOX 4220

CIVIC CENTER

SAN RAFAEL CA

94913

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00493104

**Gross Claim** \$ 604,549.26

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 604,549.26

**YTD Amount:** \$ 604,549.26

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**MARIPOSA COUNTY TREASURER**

PO BOX 36

MARIPOSA CA

95338

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00089433

<b>Gross Claim</b>	\$	<b>109,645.54</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>109,645.54</b>
<b>YTD Amount:</b>	\$	<b>109,645.54</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**MENDOCINO COUNTY TREASURER**

501 LOW GAP RD 1060

UKIAH CA

95482

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00561326

<b>Gross Claim</b>	\$	<b>688,189.95</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>688,189.95</b>
<b>YTD Amount:</b>	\$	<b>688,189.95</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**MERCED COUNTY TREASURER**

C/O WELLS FARGO BANK

PO BOX 981311

WEST SACRAMENTO 95798-1311

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00671826

<b>Gross Claim</b>	\$	<b>823,663.80</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>823,663.80</b>
<b>YTD Amount:</b>	\$	<b>823,663.80</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**MODOC COUNTY TREASURER**

204 COURT ST RM 101

ALTURAS CA

96101

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00047868

**Gross Claim** \$ 58,686.53

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 58,686.53

**YTD Amount:** \$ 58,686.53

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**MONO COUNTY TREASURER**

P O BOX 495

BRIDGEPORT CA

93517

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00037537

<b>Gross Claim</b>	\$	<b>46,020.65</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>46,020.65</b>
<b>YTD Amount:</b>	\$	<b>46,020.65</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**MONTEREY COUNTY TREASURER**

PO BOX 1406

SACRAMENTO CA 95812 1406

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00943197

<b>Gross Claim</b>	\$	<b>1,156,366.71</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>1,156,366.71</b>
<b>YTD Amount:</b>	\$	<b>1,156,366.71</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**NAPA COUNTY TREASURER**

1195 THIRD STREET ROOM 108

NAPA CA

94559 3035

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00346266

<b>Gross Claim</b>	\$	<b>424,524.76</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>424,524.76</b>
<b>YTD Amount:</b>	\$	<b>424,524.76</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**NEVADA COUNTY TREASURER**

PO BOX 128

NEVADA CITY CA

95959

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00199762

<b>Gross Claim</b>	\$	<b>244,909.73</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>244,909.73</b>
<b>YTD Amount:</b>	\$	<b>244,909.73</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**ORANGE COUNTY TREASURER**

PO BOX 981024

WEST SACRAMENTO CA 95798 1024

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.04135555

<b>Gross Claim</b>	\$	<b>5,070,221.95</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>5,070,221.95</b>
<b>YTD Amount:</b>	\$	<b>5,070,221.95</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**PLACER COUNTY TREASURER**

2976 RICHARDSON DRIVE

AUBURN CA

95603

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00607093

**Gross Claim** \$ 744,300.65

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 744,300.65

**YTD Amount:** \$ 744,300.65

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**PLUMAS COUNTY TREASURER**

PO BOX 176

QUINCY CA

95971

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00098919

<b>Gross Claim</b>	\$	<b>121,275.45</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>121,275.45</b>
<b>YTD Amount:</b>	\$	<b>121,275.45</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**RIVERSIDE COUNTY TREASURER**

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO CA 95812 4035

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.05693731

**Gross Claim** \$ 6,980,557.60

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 6,980,557.60

**YTD Amount:** \$ 6,980,557.60

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SACRAMENTO COUNTY TREASURER**

PO BOX 980264

WEST SACRAMENTO CA 95798 0264

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.05428378

**Gross Claim** \$ 6,655,232.80

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 6,655,232.80

**YTD Amount:** \$ 6,655,232.80

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SAN BENITO COUNTY TREASURER**

COURTHOUSE

440 FIFTH ST RM 107

HOLLISTER CA

95023

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00149137

**Gross Claim** \$ 182,843.10

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 182,843.10

**YTD Amount:** \$ 182,843.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SAN BERNARDINO COUNTY TREASURER**

PO BOX 1859

SACRAMENTO CA

95812

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.05276338

**Gross Claim** \$ 6,468,830.60

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 6,468,830.60

**YTD Amount:** \$ 6,468,830.60

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SAN DIEGO COUNTY TREASURER**

PO BOX 980304

WEST SACRAMENTO 95798 0304

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.06079055

<b>Gross Claim</b>	\$	<b>7,452,967.76</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>7,452,967.76</b>
<b>YTD Amount:</b>	\$	<b>7,452,967.76</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SAN FRANCISCO COUNTY TREASURER**

PO BOX 2920

SACRAMENTO

95814-2920

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.04071838

<b>Gross Claim</b>	\$	<b>4,992,104.42</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>4,992,104.42</b>
<b>YTD Amount:</b>	\$	<b>4,992,104.42</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SAN JOAQUIN COUNTY TREASURER**

PO BOX 981355

WEST SACRAMENTO CA 95798 1355

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.01904272

**Gross Claim** \$ 2,334,651.99

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 2,334,651.99

**YTD Amount:** \$ 2,334,651.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SAN LUIS OBISPO COUNTY TREASURER**

PO BOX 1149

SAN LUIS OBISPO CA 93406

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00613528

<b>Gross Claim</b>	\$	<b>752,190.00</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>752,190.00</b>
<b>YTD Amount:</b>	\$	<b>752,190.00</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SAN MATEO COUNTY TREASURER**

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

SACRAMENTO CA 95812

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.01083664

**Gross Claim** \$ 1,328,580.32

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 1,328,580.32

**YTD Amount:** \$ 1,328,580.32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SANTA BARBARA COUNTY TREASURER**

PO BOX 579

SANTA BARBARA CA 93102

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00784449

<b>Gross Claim</b>	\$	<b>961,740.45</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>961,740.45</b>
<b>YTD Amount:</b>	\$	<b>961,740.45</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SANTA CLARA COUNTY TREASURER**

PO BOX 1406

SACRAMENTO CA

95812

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.04692796

**Gross Claim** \$ 5,753,403.66

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 5,753,403.66

**YTD Amount:** \$ 5,753,403.66

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SANTA CRUZ COUNTY TREASURER**

PO BOX 1817

SANTA CRUZ CA 95061

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00549762

**Gross Claim** \$ 674,012.40

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 674,012.40

**YTD Amount:** \$ 674,012.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SHASTA COUNTY TREASURER**

PO BOX 1859

SACRAMENTO CA 95812 1859

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00668759

<b>Gross Claim</b>	\$	<b>819,903.63</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>819,903.63</b>
<b>YTD Amount:</b>	\$	<b>819,903.63</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SIERRA COUNTY TREASURER**

PO BOX 376

DOWNIEVILLE CA 95936 0376

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00028255

<b>Gross Claim</b>	\$	<b>34,640.85</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>34,640.85</b>
<b>YTD Amount:</b>	\$	<b>34,640.85</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SISKIYOU COUNTY TREASURER**

311 FOURTH ST RM 104

YREKA CA

96097

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00151445

<b>Gross Claim</b>	\$	<b>185,672.72</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>185,672.72</b>
<b>YTD Amount:</b>	\$	<b>185,672.72</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SOLANO COUNTY TREASURER TAX COLLECTOR**

675 TEXAS ST STE 1900

FAIRFIELD CA

94533 6337

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00832163

**Gross Claim** \$ 1,020,238.18

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 1,020,238.18

**YTD Amount:** \$ 1,020,238.18

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SONOMA COUNTY TREASURER**

PO BOX 1204

SACRAMENTO CA 95812 1204

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.01403517

**Gross Claim** \$ 1,720,722.54

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 1,720,722.54

**YTD Amount:** \$ 1,720,722.54

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**STANISLAUS COUNTY TREASURER**

PO BOX 3052

MODESTO CA

95353 3052

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.01109539

**Gross Claim** \$ 1,360,303.27

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 1,360,303.27

**YTD Amount:** \$ 1,360,303.27

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**SUTTER COUNTY TREASURER**

PO BOX 546

YUBA CITY CA

95992

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00241347

**Gross Claim** \$ 295,893.26

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 295,893.26

**YTD Amount:** \$ 295,893.26

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**TEHAMA COUNTY TREASURER**

PO BOX 1150

RED BLUFF CA

96080

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00229121

**Gross Claim** \$ 280,904.09

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 280,904.09

**YTD Amount:** \$ 280,904.09

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**TRINITY COUNTY TREASURER**

PO BOX 1297

WEAVERVILLE CA 96093 1297

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00077086

<b>Gross Claim</b>	\$	<b>94,508.02</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>94,508.02</b>
<b>YTD Amount:</b>	\$	<b>94,508.02</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**TULARE COUNTY TREASURER**

COUNTY CIVIC CENTER RM 103E

221 SOUTH MOONEY BL

VISALIA CA

93291

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.01070602

<b>Gross Claim</b>	\$	<b>1,312,566.21</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>1,312,566.21</b>
<b>YTD Amount:</b>	\$	<b>1,312,566.21</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**TUOLUMNE COUNTY TREASURER**

2 SOUTH GREEN ST

SONORA CA

95370

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00129032

**Gross Claim** \$ 158,194.22

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 158,194.22

**YTD Amount:** \$ 158,194.22

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**VENTURA COUNTY TREASURER**

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO CA 95798 0307

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.01056591

<b>Gross Claim</b>	\$	<b>1,295,388.62</b>
<b>Stabilization</b>	\$	<b>0.00</b>
<b>Net Claim / Payment Amount</b>	\$	<b>1,295,388.62</b>
<b>YTD Amount:</b>	\$	<b>1,295,388.62</b>

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**YOLO COUNTY TREASURER**

PO BOX 1995

WOODLAND CA

95695

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00519624

**Gross Claim** \$ 637,062.98

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 637,062.98

**YTD Amount:** \$ 637,062.98

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1600057A

PAYMENT ISSUE DATE: 9/27/2016

**YUBA COUNTY TREASURER**

915 8TH ST STE 103

MARYSVILLE CA

95901 5273

**Allocation of Sales Tax-Local Realignment, Social Services.**

Section 17602(e) Welfare and Institutions Code. To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2016-17

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

Collection Period 8/16/2016 TO: 9/15/2016

**Total amount collected:** \$122,600,762.20

**Gross monthly apportionment:** \$122,600,762.20

**County/City Ratio:** 0.00313184

**Gross Claim** \$ 383,965.97

**Stabilization** \$ 0.00

**Net Claim / Payment Amount** \$ 383,965.97

**YTD Amount:** \$ 383,965.97