

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A
PAYMENT ISSUE DATE: 6/26/2015

ALAMEDA COUNTY TREASURER
1221 OAK STREET

OAKLAND CA 94612

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	3,359,365.63
Net Claim / Payment Amount	\$	3,359,365.63
YTD Amount:	\$	33,873,649.58

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A
PAYMENT ISSUE DATE: 6/26/2015

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE CA 96120

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	13,402.01
Net Claim / Payment Amount	\$	13,402.01
YTD Amount:	\$	139,014.76

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

AMADOR COUNTY TREASURER

810 COURT STREET

JACKSON CA

95642

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 87,657.25

Net Claim / Payment Amount \$ 87,657.25

YTD Amount: \$ 858,300.96

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

BUTTE COUNTY TREASURER

25 COUNTY CENTER DR

OROVILLE CA

95965

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 1,095,662.73

Net Claim / Payment Amount \$ 1,095,662.73

YTD Amount: \$ 10,958,977.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	135,266.89
Net Claim / Payment Amount	\$	135,266.89
YTD Amount:	\$	1,337,241.14

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

COLUSA COUNTY TREASURER

546 JAY ST

COLUSA CA

95932

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 85,636.85

Net Claim / Payment Amount \$ 85,636.85

YTD Amount: \$ 828,332.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

CONTRA COSTA COUNTY TREASURER

625 COURT ST RM 102

MARTINEZ CA

94553

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 1,158,143.44

Net Claim / Payment Amount \$ 1,158,143.44

YTD Amount: \$ 11,383,813.84

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY CA 95531

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 156,153.52

Net Claim / Payment Amount \$ 156,153.52

YTD Amount: \$ 1,544,270.25

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

EL DORADO COUNTY TREASURER

360 FAIR LANE

PLACERVILLE CA

95667

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 479,756.98

Net Claim / Payment Amount \$ 479,756.98

YTD Amount: \$ 4,540,954.60

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 386,747.42

Net Claim / Payment Amount \$ 386,747.42

YTD Amount: \$ 3,572,136.58

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS CA 95988

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	170,793.94
Net Claim / Payment Amount	\$	170,793.94
YTD Amount:	\$	1,614,863.40

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

HUMBOLDT COUNTY TREASURER

825 FIFTH STREET ROOM 125

EUREKA CA

95501

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 636,729.88

Net Claim / Payment Amount \$ 636,729.88

YTD Amount: \$ 6,477,756.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

IMPERIAL COUNTY TREASURER

940 WEST MAIN STREET

EL CENTRO CA

92243 2863

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 781,313.55

Net Claim / Payment Amount \$ 781,313.55

YTD Amount: \$ 7,794,801.21

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

INYO COUNTY TREASURER

P O BOX O

INDEPENDENCE CA

93526

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 81,722.15

Net Claim / Payment Amount \$ 81,722.15

YTD Amount: \$ 826,682.70

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO CA 95798 1240

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	75,779.62
Net Claim / Payment Amount	\$	75,779.62
YTD Amount:	\$	951,257.97

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 512,373.87

Net Claim / Payment Amount \$ 512,373.87

YTD Amount: \$ 4,847,457.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

LAKE COUNTY TREASURER

255 NORTH FORBES ST RM 215

LAKEPORT CA

95453

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 483,629.11

Net Claim / Payment Amount \$ 483,629.11

YTD Amount: \$ 4,786,118.22

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	137,483.19
Net Claim / Payment Amount	\$	137,483.19
YTD Amount:	\$	1,349,145.36

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA

95812

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 16,145,984.33

Net Claim / Payment Amount \$ 16,145,984.33

YTD Amount: \$ 166,807,878.86

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 407,266.70

Net Claim / Payment Amount \$ 407,266.70

YTD Amount: \$ 3,922,039.78

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

MARIN COUNTY TREASURER

PO BOX 4220

CIVIC CENTER

SAN RAFAEL CA

94913

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 614,932.92

Net Claim / Payment Amount \$ 614,932.92

YTD Amount: \$ 6,145,158.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA CA

95338

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 106,014.67

Net Claim / Payment Amount \$ 106,014.67

YTD Amount: \$ 1,039,976.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH CA

95482

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 580,070.90

Net Claim / Payment Amount \$ 580,070.90

YTD Amount: \$ 5,738,385.74

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

MERCED COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 981311

WEST SACRAMENTO 95798-1311

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 88,889.44

Net Claim / Payment Amount \$ 88,889.44

YTD Amount: \$ 948,608.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

MODOC COUNTY TREASURER

204 COURT ST RM 101

ALTURAS CA 96101

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	54,065.55
Net Claim / Payment Amount	\$	54,065.55
YTD Amount:	\$	544,213.25

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

MONO COUNTY TREASURER

P O BOX 495

BRIDGEPORT CA

93517

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	42,164.53
Net Claim / Payment Amount	\$	42,164.53
YTD Amount:	\$	425,443.80

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	59,590.98
Net Claim / Payment Amount	\$	59,590.98
YTD Amount:	\$	719,587.43

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

NAPA COUNTY TREASURER

1195 THIRD STREET ROOM 108

NAPA CA

94559 3035

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 410,177.31

Net Claim / Payment Amount \$ 410,177.31

YTD Amount: \$ 4,077,503.85

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY CA

95959

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 253,669.52

Net Claim / Payment Amount \$ 253,669.52

YTD Amount: \$ 2,527,787.80

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	1,568,808.56
Net Claim / Payment Amount	\$	1,568,808.56
YTD Amount:	\$	20,448,556.26

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

PLACER COUNTY TREASURER

2976 RICHARDSON DRIVE

AUBURN CA

95603

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 170,725.37

Net Claim / Payment Amount \$ 170,725.37

YTD Amount: \$ 2,138,845.93

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY CA

95971

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 123,533.58

Net Claim / Payment Amount \$ 123,533.58

YTD Amount: \$ 1,238,077.27

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO CA 95812 4035

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 173,841.46

Net Claim / Payment Amount \$ 173,841.46

YTD Amount: \$ 2,182,222.69

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	1,697,492.82
Net Claim / Payment Amount	\$	1,697,492.82
YTD Amount:	\$	21,030,437.72

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SAN BENITO COUNTY TREASURER

COURTHOUSE

440 FIFTH ST RM 107

HOLLISTER CA

95023

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 177,816.31

Net Claim / Payment Amount \$ 177,816.31

YTD Amount: \$ 1,760,284.31

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SAN BERNARDINO COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA

95812

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 240,244.52

Net Claim / Payment Amount \$ 240,244.52

YTD Amount: \$ 3,015,777.64

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST SACRAMENTO 95798 0304

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	1,680,910.68
Net Claim / Payment Amount	\$	1,680,910.68
YTD Amount:	\$	22,156,341.86

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

95814-2920

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 140,176.61

Net Claim / Payment Amount \$ 140,176.61

YTD Amount: \$ 1,759,630.31

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	95,962.30
Net Claim / Payment Amount	\$	95,962.30
YTD Amount:	\$	1,204,610.46

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SAN LUIS OBISPO COUNTY TREASURER

PO BOX 1149

SAN LUIS OBISPO CA 93406

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 113,641.14

Net Claim / Payment Amount \$ 113,641.14

YTD Amount: \$ 1,500,580.97

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

SACRAMENTO CA 95812

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 83,794.45

Net Claim / Payment Amount \$ 83,794.45

YTD Amount: \$ 1,051,867.12

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SANTA BARBARA COUNTY TREASURER

PO BOX 579

SANTA BARBARA CA 93102

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 444,499.61

Net Claim / Payment Amount \$ 444,499.61

YTD Amount: \$ 5,503,444.42

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SANTA CLARA COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA

95812

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 190,547.85

Net Claim / Payment Amount \$ 190,547.85

YTD Amount: \$ 2,391,937.76

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SANTA CRUZ COUNTY TREASURER

PO BOX 1817

SANTA CRUZ CA 95061

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 155,523.03

Net Claim / Payment Amount \$ 155,523.03

YTD Amount: \$ 2,033,908.35

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 811,190.74

Net Claim / Payment Amount \$ 811,190.74

YTD Amount: \$ 8,121,270.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE CA 95936 0376

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim	\$	35,087.79
Net Claim / Payment Amount	\$	35,087.79
YTD Amount:	\$	352,088.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA CA

96097

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 185,442.63

Net Claim / Payment Amount \$ 185,442.63

YTD Amount: \$ 1,794,866.25

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SOLANO COUNTY TREASURER TAX COLLECTOR

675 TEXAS ST STE 1900

FAIRFIELD CA

94533 6337

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 1,009,568.85

Net Claim / Payment Amount \$ 1,009,568.85

YTD Amount: \$ 9,848,727.69

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO CA 95812 1204

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 1,792,174.50

Net Claim / Payment Amount \$ 1,792,174.50

YTD Amount: \$ 17,789,422.08

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO CA

95353 3052

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 590,286.25

Net Claim / Payment Amount \$ 590,286.25

YTD Amount: \$ 7,313,267.53

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY CA

95992

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 304,110.52

Net Claim / Payment Amount \$ 304,110.52

YTD Amount: \$ 3,035,859.05

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF CA

96080

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 260,067.06

Net Claim / Payment Amount \$ 260,067.06

YTD Amount: \$ 2,611,096.30

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

TRINITY COUNTY TREASURER

PO BOX 1297

WEAVERVILLE CA 96093 1297

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 86,991.78

Net Claim / Payment Amount \$ 86,991.78

YTD Amount: \$ 827,672.27

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

TULARE COUNTY TREASURER

COUNTY CIVIC CENTER RM 103E

221 SOUTH MOONEY BL

VISALIA CA

93291

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 291,624.75

Net Claim / Payment Amount \$ 291,624.75

YTD Amount: \$ 3,819,065.21

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

TUOLUMNE COUNTY TREASURER

2 SOUTH GREEN ST

SONORA CA

95370

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 147,322.43

Net Claim / Payment Amount \$ 147,322.43

YTD Amount: \$ 1,476,007.66

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO CA 95798 0307

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 1,135,771.74

Net Claim / Payment Amount \$ 1,135,771.74

YTD Amount: \$ 11,477,634.22

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND CA

95695

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 201,818.93

Net Claim / Payment Amount \$ 201,818.93

YTD Amount: \$ 2,501,338.32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1400447A

PAYMENT ISSUE DATE: 6/26/2015

YUBA COUNTY TREASURER

915 8TH ST STE 103

MARYSVILLE CA

95901 5273

Allocation of Vehicle License Fees-Local Realignment, 2014-15 Social Services Annual Base.

Section 17604(c)(5)(A) Welfare and Institutions Code (W&I). To be deposited in General Fund for Social Services Programs. County match to the Local Health and Welfare Trust Fund-Social Services Account is required pursuant to W&I Section 17608.10(b).

Fiscal Year: 2014-15

More information at http://www.sco.ca.gov/ard_local_apportionments.html

Collection Period 5/16/2015 TO: 6/15/2015

Total amount collected: \$30,797,678.11

Gross monthly apportionment: \$30,797,678.11

Gross Claim \$ 376,496.05

Net Claim / Payment Amount \$ 376,496.05

YTD Amount: \$ 3,711,772.21