

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A
PAYMENT ISSUE DATE: 4/27/2016

ALAMEDA COUNTY TREASURER
1221 OAK STREET

OAKLAND CA 94612

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.
Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare
Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

<u>Total amount collected:</u>	\$6,266,989.73	
Gross monthly apportionment:	\$6,266,989.73	0.03246901

Gross Claim	\$	203,482.95
Net Claim / Payment Amount	\$	203,482.95
YTD Amount:	\$	1,595,815.31

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A
PAYMENT ISSUE DATE: 4/27/2016

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE CA 96120

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.
Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare
Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00054428

Gross Claim	\$	3,411.00
Net Claim / Payment Amount	\$	3,411.00
YTD Amount:	\$	26,750.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

AMADOR COUNTY TREASURER
810 COURT STREET

JACKSON CA 95642

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00107889

Gross Claim \$ 6,761.39

Net Claim / Payment Amount \$ 6,761.39

YTD Amount: \$ 53,026.28

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE CA 95965

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.
Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare
Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00972131

Gross Claim \$ 60,923.35

Net Claim / Payment Amount \$ 60,923.35

YTD Amount: \$ 477,791.29

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.
Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare
Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00092139

Gross Claim \$ 5,774.34

Net Claim / Payment Amount \$ 5,774.34

YTD Amount: \$ 45,285.42

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

COLUSA COUNTY TREASURER

546 JAY ST

COLUSA CA

95932

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00097077

Gross Claim \$ 6,083.81

Net Claim / Payment Amount \$ 6,083.81

YTD Amount: \$ 47,711.83

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

CONTRA COSTA COUNTY TREASURER

625 COURT ST RM 102

MARTINEZ CA

94553

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.03218033

Gross Claim \$ 201,673.80

Net Claim / Payment Amount \$ 201,673.80

YTD Amount: \$ 1,581,627.61

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY CA 95531

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00113311

Gross Claim \$ 7,101.19

Net Claim / Payment Amount \$ 7,101.19

YTD Amount: \$ 55,690.76

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

EL DORADO COUNTY TREASURER

360 FAIR LANE

PLACERVILLE CA

95667

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00413969

Gross Claim \$ 25,943.39

Net Claim / Payment Amount \$ 25,943.39

YTD Amount: \$ 203,461.12

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.02962695

Gross Claim \$ 185,671.79

Net Claim / Payment Amount \$ 185,671.79

YTD Amount: \$ 1,456,131.78

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS CA 95988

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00096763

Gross Claim \$ 6,064.13

Net Claim / Payment Amount \$ 6,064.13

YTD Amount: \$ 47,558.02

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

HUMBOLDT COUNTY TREASURER

825 FIFTH STREET ROOM 125

EUREKA CA

95501

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00810250

Gross Claim \$ 50,778.28

Net Claim / Payment Amount \$ 50,778.28

YTD Amount: \$ 398,228.79

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

IMPERIAL COUNTY TREASURER

940 WEST MAIN STREET

EL CENTRO CA

92243 2863

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00410346

Gross Claim \$ 25,716.34

Net Claim / Payment Amount \$ 25,716.34

YTD Amount: \$ 201,680.05

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

INYO COUNTY TREASURER

P O BOX 0

INDEPENDENCE CA

93526

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00131853

Gross Claim \$ 8,263.21

Net Claim / Payment Amount \$ 8,263.21

YTD Amount: \$ 64,803.98

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO CA 95798 1240

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.01642728

Gross Claim \$ 102,949.60

Net Claim / Payment Amount \$ 102,949.60

YTD Amount: \$ 807,382.14

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00481566

Gross Claim \$ 30,179.69

Net Claim / Payment Amount \$ 30,179.69

YTD Amount: \$ 236,683.87

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

LAKE COUNTY TREASURER

255 NORTH FORBES ST RM 215

LAKEPORT CA

95453

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00369721

Gross Claim \$ 23,170.38

Net Claim / Payment Amount \$ 23,170.38

YTD Amount: \$ 181,713.83

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE CA 96130

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00098401

Gross Claim \$ 6,166.78

Net Claim / Payment Amount \$ 6,166.78

YTD Amount: \$ 48,362.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA

95812

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.29176664

Gross Claim \$ 1,828,498.54

Net Claim / Payment Amount \$ 1,828,498.54

YTD Amount: \$ 14,340,005.85

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00391769

Gross Claim \$ 24,552.12

Net Claim / Payment Amount \$ 24,552.12

YTD Amount: \$ 192,550.06

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

MARIN COUNTY TREASURER

PO BOX 4220

CIVIC CENTER

SAN RAFAEL CA

94913

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00372514

Gross Claim \$ 23,345.41

Net Claim / Payment Amount \$ 23,345.41

YTD Amount: \$ 183,086.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA CA

95338

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00090410

Gross Claim \$ 5,665.99

Net Claim / Payment Amount \$ 5,665.99

YTD Amount: \$ 44,435.22

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH CA

95482

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00512304

Gross Claim \$ 32,106.04

Net Claim / Payment Amount \$ 32,106.04

YTD Amount: \$ 251,791.47

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

MERCED COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 981311

WEST SACRAMENTO 95798-1311

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.01230253

Gross Claim \$ 77,099.83

Net Claim / Payment Amount \$ 77,099.83

YTD Amount: \$ 604,655.79

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

MODOC COUNTY TREASURER

204 COURT ST RM 101

ALTURAS CA

96101

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00093070

Gross Claim \$ 5,832.69

Net Claim / Payment Amount \$ 5,832.69

YTD Amount: \$ 45,742.47

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

MONO COUNTY TREASURER

P O BOX 495

BRIDGEPORT CA

93517

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00088241

Gross Claim \$ 5,530.05

Net Claim / Payment Amount \$ 5,530.05

YTD Amount: \$ 43,369.20

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812 1406

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.01005054

Gross Claim \$ 62,986.63

Net Claim / Payment Amount \$ 62,986.63

YTD Amount: \$ 493,972.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

NAPA COUNTY TREASURER

1195 THIRD STREET ROOM 108

NAPA CA

94559 3035

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00321205

Gross Claim \$ 20,129.88

Net Claim / Payment Amount \$ 20,129.88

YTD Amount: \$ 157,868.22

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY CA

95959

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00340896

Gross Claim \$ 21,363.92

Net Claim / Payment Amount \$ 21,363.92

YTD Amount: \$ 167,546.57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.04197942

Gross Claim \$ 263,084.59

Net Claim / Payment Amount \$ 263,084.59

YTD Amount: \$ 2,063,241.17

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

PLACER COUNTY TREASURER

2976 RICHARDSON DRIVE

AUBURN CA

95603

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00596774

Gross Claim \$ 37,399.77

Net Claim / Payment Amount \$ 37,399.77

YTD Amount: \$ 293,307.69

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY CA

95971

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00117378

Gross Claim \$ 7,356.07

Net Claim / Payment Amount \$ 7,356.07

YTD Amount: \$ 57,690.30

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

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, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.03768480

Gross Claim \$ 236,170.25

Net Claim / Payment Amount \$ 236,170.25

YTD Amount: \$ 1,852,165.93

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SACRAMENTO COUNTY TREASURER

PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.04463869

Gross Claim \$ 279,750.21

Net Claim / Payment Amount \$ 279,750.21

YTD Amount: \$ 2,193,941.63

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SAN BENITO COUNTY TREASURER

COURTHOUSE

440 FIFTH ST RM 107

HOLLISTER CA

95023

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00116101

Gross Claim \$ 7,276.04

Net Claim / Payment Amount \$ 7,276.04

YTD Amount: \$ 57,062.23

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SAN BERNARDINO COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA

95812

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.05207946

Gross Claim \$ 326,381.44

Net Claim / Payment Amount \$ 326,381.44

YTD Amount: \$ 2,559,647.39

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST SACRAMENTO 95798 0304

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.08924835

Gross Claim \$ 559,318.49

Net Claim / Payment Amount \$ 559,318.49

YTD Amount: \$ 4,386,456.46

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

95814-2920

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.03038705

Gross Claim \$ 190,435.33

Net Claim / Payment Amount \$ 190,435.33

YTD Amount: \$ 1,493,489.80

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.02080242

Gross Claim \$ 130,368.55

Net Claim / Payment Amount \$ 130,368.55

YTD Amount: \$ 1,022,415.64

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SAN LUIS OBISPO COUNTY TREASURER

PO BOX 1149

SAN LUIS OBISPO CA

93406

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00521781

Gross Claim \$ 32,699.96

Net Claim / Payment Amount \$ 32,699.96

YTD Amount: \$ 256,449.85

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

SACRAMENTO CA 95812

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.01816469

Gross Claim \$ 113,837.93

Net Claim / Payment Amount \$ 113,837.93

YTD Amount: \$ 892,774.32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SANTA BARBARA COUNTY TREASURER

PO BOX 579

SANTA BARBARA CA

93102

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.01175379

Gross Claim \$ 73,660.88

Net Claim / Payment Amount \$ 73,660.88

YTD Amount: \$ 577,685.20

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SANTA CLARA COUNTY TREASURER

PO BOX 1406

SACRAMENTO CA 95812

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.04130638

Gross Claim \$ 258,866.66

Net Claim / Payment Amount \$ 258,866.66

YTD Amount: \$ 2,030,162.05

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SANTA CRUZ COUNTY TREASURER

PO BOX 1817

SANTA CRUZ CA 95061

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00604733

Gross Claim \$ 37,898.56

Net Claim / Payment Amount \$ 37,898.56

YTD Amount: \$ 297,219.72

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO CA 95812 1859

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00936890

Gross Claim \$ 58,714.80

Net Claim / Payment Amount \$ 58,714.80

YTD Amount: \$ 460,470.73

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE CA 95936 0376

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00073592

Gross Claim \$ 4,612.00

Net Claim / Payment Amount \$ 4,612.00

YTD Amount: \$ 36,169.86

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA CA

96097

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00169156

Gross Claim \$ 10,600.99

Net Claim / Payment Amount \$ 10,600.99

YTD Amount: \$ 83,138.29

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SOLANO COUNTY TREASURER TAX COLLECTOR

675 TEXAS ST STE 1900

FAIRFIELD CA

94533 6337

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00994978

Gross Claim \$ 62,355.17

Net Claim / Payment Amount \$ 62,355.17

YTD Amount: \$ 489,020.55

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO CA 95812 1204

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.01278619

Gross Claim \$ 80,130.92

Net Claim / Payment Amount \$ 80,130.92

YTD Amount: \$ 628,426.96

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO CA

95353 3052

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.01675485

Gross Claim \$ 105,002.47

Net Claim / Payment Amount \$ 105,002.47

YTD Amount: \$ 823,482.06

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY CA

95992

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00327915

Gross Claim \$ 20,550.40

Net Claim / Payment Amount \$ 20,550.40

YTD Amount: \$ 161,166.50

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF CA

96080

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00205592

Gross Claim \$ 12,884.43

Net Claim / Payment Amount \$ 12,884.43

YTD Amount: \$ 101,046.16

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

TRINITY COUNTY TREASURER

PO BOX 1297

WEAVERVILLE CA 96093 1297

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00100527

Gross Claim \$ 6,300.02

Net Claim / Payment Amount \$ 6,300.02

YTD Amount: \$ 49,407.68

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

TULARE COUNTY TREASURER

COUNTY CIVIC CENTER RM 103E

221 SOUTH MOONEY BL

VISALIA CA

93291

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.01619676

Gross Claim \$ 101,504.93

Net Claim / Payment Amount \$ 101,504.93

YTD Amount: \$ 796,052.61

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA CA 95370

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.
Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare
Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00146903

Gross Claim \$ 9,206.40

Net Claim / Payment Amount \$ 9,206.40

YTD Amount: \$ 72,201.17

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO CA 95798 0307

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.01489402

Gross Claim \$ 93,340.67

Net Claim / Payment Amount \$ 93,340.67

YTD Amount: \$ 732,024.41

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND CA

95695

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73 0.00749665

Gross Claim \$ 46,981.43

Net Claim / Payment Amount \$ 46,981.43

YTD Amount: \$ 368,452.00

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500365A

PAYMENT ISSUE DATE: 4/27/2016

YUBA COUNTY TREASURER

915 8TH ST STE 103

MARYSVILLE CA

95901 5273

Allocation of Vehicle License Fees-Local Realignment, 2015-16 Social Services Annual Base.

Section 17604(f)(1) Welfare and Institutions Code (W&I). To be deposited in Local Health and Welfare Trust Fund-Social Services Account.

Fiscal Year: 2015-16

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

Collection Period 3/16/2016 TO: 4/15/2016

Total amount collected: \$6,266,989.73

Gross monthly apportionment: \$6,266,989.73

0.00527747

Gross Claim \$ 33,073.85

Net Claim / Payment Amount \$ 33,073.85

YTD Amount: \$ 259,381.73