

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A
PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.03246900

Gross Claim \$ 159,307.60

Net Claim / Payment Amount \$ 159,307.60

YTD Amount: \$ 1,392,332.36

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A
PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00054427

Gross Claim	\$	2,670.43
Net Claim / Payment Amount	\$	2,670.43
YTD Amount:	\$	23,339.33

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00107889

Gross Claim \$ 5,293.57

Net Claim / Payment Amount \$ 5,293.57

YTD Amount: \$ 46,264.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00972131

Gross Claim \$ 47,697.08

Net Claim / Payment Amount \$ 47,697.08

YTD Amount: \$ 416,867.94

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00092140

Gross Claim \$ 4,520.80

Net Claim / Payment Amount \$ 4,520.80

YTD Amount: \$ 39,511.08

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00097076

Gross Claim \$ 4,762.99

Net Claim / Payment Amount \$ 4,762.99

YTD Amount: \$ 41,628.02

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.03218034

Gross Claim \$ 157,891.26

Net Claim / Payment Amount \$ 157,891.26

YTD Amount: \$ 1,379,953.81

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00113311

Gross Claim \$ 5,559.50

Net Claim / Payment Amount \$ 5,559.50

YTD Amount: \$ 48,589.57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00413969

Gross Claim \$ 20,311.19

Net Claim / Payment Amount \$ 20,311.19

YTD Amount: \$ 177,517.73

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.02962696

Gross Claim \$ 145,363.23

Net Claim / Payment Amount \$ 145,363.23

YTD Amount: \$ 1,270,459.99

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00096764

Gross Claim \$ 4,747.63

Net Claim / Payment Amount \$ 4,747.63

YTD Amount: \$ 41,493.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00810250

Gross Claim \$ 39,754.52

Net Claim / Payment Amount \$ 39,754.52

YTD Amount: \$ 347,450.51

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00410345

Gross Claim \$ 20,133.38

Net Claim / Payment Amount \$ 20,133.38

YTD Amount: \$ 175,963.71

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00131853

Gross Claim \$ 6,469.25

Net Claim / Payment Amount \$ 6,469.25

YTD Amount: \$ 56,540.77

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.01642728

Gross Claim \$ 80,599.59

Net Claim / Payment Amount \$ 80,599.59

YTD Amount: \$ 704,432.54

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00481565

Gross Claim \$ 23,627.75

Net Claim / Payment Amount \$ 23,627.75

YTD Amount: \$ 206,504.18

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00369721

Gross Claim \$ 18,140.23

Net Claim / Payment Amount \$ 18,140.23

YTD Amount: \$ 158,543.45

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00098401

Gross Claim \$ 4,828.00

Net Claim / Payment Amount \$ 4,828.00

YTD Amount: \$ 42,196.21

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.29176667

Gross Claim \$ 1,431,538.95

Net Claim / Payment Amount \$ 1,431,538.95

YTD Amount: \$ 12,511,507.31

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00391769

Gross Claim \$ 19,221.95

Net Claim / Payment Amount \$ 19,221.95

YTD Amount: \$ 167,997.94

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00372515

Gross Claim \$ 18,277.27

Net Claim / Payment Amount \$ 18,277.27

YTD Amount: \$ 159,741.48

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00090410

Gross Claim \$ 4,435.87

Net Claim / Payment Amount \$ 4,435.87

YTD Amount: \$ 38,769.23

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00512304

Gross Claim \$ 25,135.90

Net Claim / Payment Amount \$ 25,135.90

YTD Amount: \$ 219,685.43

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.01230253

Gross Claim \$ 60,361.81

Net Claim / Payment Amount \$ 60,361.81

YTD Amount: \$ 527,555.96

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00093070

Gross Claim \$ 4,566.38

Net Claim / Payment Amount \$ 4,566.38

YTD Amount: \$ 39,909.78

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00088240

Gross Claim \$ 4,329.45

Net Claim / Payment Amount \$ 4,329.45

YTD Amount: \$ 37,839.15

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.01005054

Gross Claim \$ 49,312.53

Net Claim / Payment Amount \$ 49,312.53

YTD Amount: \$ 430,986.26

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00321204

Gross Claim \$ 15,759.72

Net Claim / Payment Amount \$ 15,759.72

YTD Amount: \$ 137,738.34

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00340896

Gross Claim \$ 16,725.89

Net Claim / Payment Amount \$ 16,725.89

YTD Amount: \$ 146,182.65

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.04197941

Gross Claim \$ 205,969.92

Net Claim / Payment Amount \$ 205,969.92

YTD Amount: \$ 1,800,156.58

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00596774

Gross Claim \$ 29,280.37

Net Claim / Payment Amount \$ 29,280.37

YTD Amount: \$ 255,907.92

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00117378

Gross Claim \$ 5,759.14

Net Claim / Payment Amount \$ 5,759.14

YTD Amount: \$ 50,334.23

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.03768480

Gross Claim \$ 184,898.67

Net Claim / Payment Amount \$ 184,898.67

YTD Amount: \$ 1,615,995.68

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.04463869

Gross Claim \$ 219,017.54

Net Claim / Payment Amount \$ 219,017.54

YTD Amount: \$ 1,914,191.42

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00116101

Gross Claim \$ 5,696.39

Net Claim / Payment Amount \$ 5,696.39

YTD Amount: \$ 49,786.19

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.05207946

Gross Claim \$ 255,525.36

Net Claim / Payment Amount \$ 255,525.36

YTD Amount: \$ 2,233,265.95

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.08924835

Gross Claim \$ 437,892.65

Net Claim / Payment Amount \$ 437,892.65

YTD Amount: \$ 3,827,137.97

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.03038705

Gross Claim \$ 149,092.62

Net Claim / Payment Amount \$ 149,092.62

YTD Amount: \$ 1,303,054.47

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.02080242

Gross Claim \$ 102,066.05

Net Claim / Payment Amount \$ 102,066.05

YTD Amount: \$ 892,047.09

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00521781

Gross Claim \$ 25,600.98

Net Claim / Payment Amount \$ 25,600.98

YTD Amount: \$ 223,749.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.01816469

Gross Claim \$ 89,124.21

Net Claim / Payment Amount \$ 89,124.21

YTD Amount: \$ 778,936.39

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.01175378

Gross Claim \$ 57,669.34

Net Claim / Payment Amount \$ 57,669.34

YTD Amount: \$ 504,024.32

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.04130638

Gross Claim \$ 202,667.68

Net Claim / Payment Amount \$ 202,667.68

YTD Amount: \$ 1,771,295.39

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00604733

Gross Claim \$ 29,670.98

Net Claim / Payment Amount \$ 29,670.98

YTD Amount: \$ 259,321.16

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00936890

Gross Claim \$ 45,968.00

Net Claim / Payment Amount \$ 45,968.00

YTD Amount: \$ 401,755.93

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00073592

Gross Claim \$ 3,610.80

Net Claim / Payment Amount \$ 3,610.80

YTD Amount: \$ 31,557.86

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00169156

Gross Claim \$ 8,299.56

Net Claim / Payment Amount \$ 8,299.56

YTD Amount: \$ 72,537.30

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00994978

Gross Claim \$ 48,818.11

Net Claim / Payment Amount \$ 48,818.11

YTD Amount: \$ 426,665.38

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.01278619

Gross Claim \$ 62,734.86

Net Claim / Payment Amount \$ 62,734.86

YTD Amount: \$ 548,296.04

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.01675485

Gross Claim \$ 82,206.80

Net Claim / Payment Amount \$ 82,206.80

YTD Amount: \$ 718,479.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00327915

Gross Claim \$ 16,088.94

Net Claim / Payment Amount \$ 16,088.94

YTD Amount: \$ 140,616.10

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00205592

Gross Claim \$ 10,087.27

Net Claim / Payment Amount \$ 10,087.27

YTD Amount: \$ 88,161.73

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00100527

Gross Claim \$ 4,932.26

Net Claim / Payment Amount \$ 4,932.26

YTD Amount: \$ 43,107.66

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.01619676

Gross Claim \$ 79,468.61

Net Claim / Payment Amount \$ 79,468.61

YTD Amount: \$ 694,547.68

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.00146903

Gross Claim \$ 7,207.72

Net Claim / Payment Amount \$ 7,207.72

YTD Amount: \$ 62,994.77

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93 0.01489402

Gross Claim \$ 73,076.78

Net Claim / Payment Amount \$ 73,076.78

YTD Amount: \$ 638,683.74

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00749666

Gross Claim \$ 36,781.95

Net Claim / Payment Amount \$ 36,781.95

YTD Amount: \$ 321,470.57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500316A

PAYMENT ISSUE DATE: 3/24/2016

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 2/16/2016 TO: 3/15/2016

Total amount collected: \$4,906,450.93

Gross monthly apportionment: \$4,906,450.93

0.00527747

Gross Claim \$ 25,893.65

Net Claim / Payment Amount \$ 25,893.65

YTD Amount: \$ 226,307.88