

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

ALAMEDA COUNTY TREASURER
1221 OAK ST

OAKLAND

CA 94612

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	1,091,464.47
Behavioral Health Services Growth Special Account county percentages	3.91724650

Gross Claim **\$1,091,464.47**

Net Claim / Payment Amount **\$1,091,464.47**

YTD Amount: **\$1,091,464.47**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

ALPINE COUNTY TREASURER

PO BOX 217

MARKLEEVILLE

CA 96120

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 2,415.84

Behavioral Health Services Growth Special Account county percentages 0.00867040

Gross Claim \$2,415.84

Net Claim / Payment Amount \$2,415.84

YTD Amount: \$2,415.84

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 2 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

AMADOR COUNTY TREASURER

810 COURT ST

JACKSON

CA 95642

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 15,151.71

Behavioral Health Services Growth Special Account county percentages 0.05437920

Gross Claim \$15,151.71

Net Claim / Payment Amount \$15,151.71

YTD Amount: \$15,151.71

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 3 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	221,868.28
Behavioral Health Services Growth Special Account county percentages	0.79628130

Gross Claim **\$221,868.28**

Net Claim / Payment Amount **\$221,868.28**

YTD Amount: **\$221,868.28**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 4 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	18,665.96
Behavioral Health Services Growth Special Account county percentages	0.06699180

Gross Claim **\$18,665.96**

Net Claim / Payment Amount **\$18,665.96**

YTD Amount: **\$18,665.96**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 5 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

COLUSA COUNTY TREASURER
546 JAY ST

COLUSA

CA 95932

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	19,868.08
Behavioral Health Services Growth Special Account county percentages	0.07130620

Gross Claim **\$19,868.08**

Net Claim / Payment Amount **\$19,868.08**

YTD Amount: **\$19,868.08**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 6 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ

CA 94553

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	506,365.38
Behavioral Health Services Growth Special Account county percentages	1.81733630

Gross Claim **\$506,365.38**

Net Claim / Payment Amount **\$506,365.38**

YTD Amount: **\$506,365.38**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

DEL NORTE COUNTY TREASURER

981 H ST STE 150

CRESCENT CITY

CA 95531

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 64,547.02

Behavioral Health Services Growth Special Account county percentages 0.23165810

Gross Claim **\$64,547.02**

Net Claim / Payment Amount **\$64,547.02**

YTD Amount: **\$64,547.02**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 8 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

EL DORADO COUNTY TREASURER

360 FAIR LN

PLACERVILLE

CA 95667

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	57,463.73
Behavioral Health Services Growth Special Account county percentages	0.20623630

Gross Claim **\$57,463.73**

Net Claim / Payment Amount **\$57,463.73**

YTD Amount: **\$57,463.73**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 9 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	557,183.63
Behavioral Health Services Growth Special Account county percentages	1.99972210

Gross Claim **\$557,183.63**

Net Claim / Payment Amount **\$557,183.63**

YTD Amount: **\$557,183.63**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 10 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS

CA 95988

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	69,236.90
Behavioral Health Services Growth Special Account county percentages	0.24849000

Gross Claim **\$69,236.90**

Net Claim / Payment Amount **\$69,236.90**

YTD Amount: **\$69,236.90**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

HUMBOLDT COUNTY TREASURER
825 FIFTH ST RM 125

EUREKA

CA 95501

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	99,528.39
Behavioral Health Services Growth Special Account county percentages	0.35720560

Gross Claim **\$99,528.39**

Net Claim / Payment Amount **\$99,528.39**

YTD Amount: **\$99,528.39**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

IMPERIAL COUNTY TREASURER
940 WEST MAIN ST

EL CENTRO

CA 92243 2863

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	433,035.65
Behavioral Health Services Growth Special Account county percentages	1.55415720

Gross Claim **\$433,035.65**

Net Claim / Payment Amount **\$433,035.65**

YTD Amount: **\$433,035.65**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

INYO COUNTY TREASURER

PO BOX 0

INDEPENDENCE

CA 93526

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 29,624.56

Behavioral Health Services Growth Special Account county percentages 0.10632200

Gross Claim \$29,624.56

Net Claim / Payment Amount \$29,624.56

YTD Amount: \$29,624.56

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 14 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

KERN COUNTY TREASURER

PO BOX 981240

SACRAMENTO

CA 95798 1240

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	399,150.83
Behavioral Health Services Growth Special Account county percentages	1.43254520

Gross Claim **\$399,150.83**

Net Claim / Payment Amount **\$399,150.83**

YTD Amount: **\$399,150.83**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 15 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT

CA 95453

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	48,524.59
Behavioral Health Services Growth Special Account county percentages	0.17415390

Gross Claim **\$48,524.59**

Net Claim / Payment Amount **\$48,524.59**

YTD Amount: **\$48,524.59**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 17 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	24,597.50
Behavioral Health Services Growth Special Account county percentages	0.08828000

Gross Claim **\$24,597.50**

Net Claim / Payment Amount **\$24,597.50**

YTD Amount: **\$24,597.50**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 13,865,288.32

Behavioral Health Services Growth Special Account county percentages 49.76227220

Gross Claim **\$13,865,288.32**

Net Claim / Payment Amount **\$13,865,288.32**

YTD Amount: **\$13,865,288.32**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 48,665.75

Behavioral Health Services Growth Special Account county percentages 0.17466050

Gross Claim **\$48,665.75**

Net Claim / Payment Amount **\$48,665.75**

YTD Amount: **\$48,665.75**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 20 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

MARIN COUNTY TREASURER

PO BOX 4220
CIVIC CENTER
SAN RAFAEL

CA 94913

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	65,742.82
Behavioral Health Services Growth Special Account county percentages	0.23594980

Gross Claim **\$65,742.82**

Net Claim / Payment Amount **\$65,742.82**

YTD Amount: **\$65,742.82**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA

CA 95338

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 13,291.12

Behavioral Health Services Growth Special Account county percentages 0.04770160

Gross Claim \$13,291.12

Net Claim / Payment Amount \$13,291.12

YTD Amount: \$13,291.12

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 22 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

MENDOCINO COUNTY TREASURER
501 LOW GAP RD 1060

UKIAH

CA 95482

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	117,489.91
Behavioral Health Services Growth Special Account county percentages	0.42166920

Gross Claim **\$117,489.91**

Net Claim / Payment Amount **\$117,489.91**

YTD Amount: **\$117,489.91**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

MERCED COUNTY TREASURER
PO BOX 981311

WEST SACRAMENTO CA 95798 1311

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	106,558.29
Behavioral Health Services Growth Special Account county percentages	0.38243580

Gross Claim **\$106,558.29**

Net Claim / Payment Amount **\$106,558.29**

YTD Amount: **\$106,558.29**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS

CA 96101

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	72,803.68
Behavioral Health Services Growth Special Account county percentages	0.26129110

Gross Claim **\$72,803.68**

Net Claim / Payment Amount **\$72,803.68**

YTD Amount: **\$72,803.68**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

MONO COUNTY TREASURER

PO BOX 495

BRIDGEPORT

CA 93517

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 25,720.72

Behavioral Health Services Growth Special Account county percentages 0.09231120

Gross Claim \$25,720.72

Net Claim / Payment Amount \$25,720.72

YTD Amount: \$25,720.72

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 26 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

MONTEREY COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	163,901.18
Behavioral Health Services Growth Special Account county percentages	0.58823840

Gross Claim **\$163,901.18**

Net Claim / Payment Amount **\$163,901.18**

YTD Amount: **\$163,901.18**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

NAPA COUNTY TREASURER

1195 THIRD ST RM 108

NAPA

CA 94559 3035

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	62,251.19
Behavioral Health Services Growth Special Account county percentages	0.22341840

Gross Claim **\$62,251.19**

Net Claim / Payment Amount **\$62,251.19**

YTD Amount: **\$62,251.19**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	59,334.23
Behavioral Health Services Growth Special Account county percentages	0.21294950

Gross Claim **\$59,334.23**

Net Claim / Payment Amount **\$59,334.23**

YTD Amount: **\$59,334.23**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 29 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO

CA 95798 1024

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	605,877.91
Behavioral Health Services Growth Special Account county percentages	2.17448500

Gross Claim **\$605,877.91**

Net Claim / Payment Amount **\$605,877.91**

YTD Amount: **\$605,877.91**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 30 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

PLACER COUNTY TREASURER

2976 Richardson Dr.

Auburn

CA 95603

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	72,300.03
Behavioral Health Services Growth Special Account county percentages	0.25948350

Gross Claim **\$72,300.03**

Net Claim / Payment Amount **\$72,300.03**

YTD Amount: **\$72,300.03**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 31 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

PLUMAS COUNTY TREASURER

PO BOX 176

QUINCY

CA 95971

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 17,327.81

Behavioral Health Services Growth Special Account county percentages 0.06218920

Gross Claim **\$17,327.81**

Net Claim / Payment Amount **\$17,327.81**

YTD Amount: **\$17,327.81**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO

CA 95812 4035

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	517,287.11
Behavioral Health Services Growth Special Account county percentages	1.85653420

Gross Claim **\$517,287.11**

Net Claim / Payment Amount **\$517,287.11**

YTD Amount: **\$517,287.11**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 33 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SACRAMENTO COUNTY TREASURER
PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	972,683.19
Behavioral Health Services Growth Special Account county percentages	3.49094260

Gross Claim **\$972,683.19**

Net Claim / Payment Amount **\$972,683.19**

YTD Amount: **\$972,683.19**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SAN BENITO COUNTY TREASURER
COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER CA 95023

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	16,182.28
Behavioral Health Services Growth Special Account county percentages	0.05807790

Gross Claim **\$16,182.28**

Net Claim / Payment Amount **\$16,182.28**

YTD Amount: **\$16,182.28**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 35 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

SAN BERNARDINO CO TREASURER

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	668,216.98
Behavioral Health Services Growth Special Account county percentages	2.39821880

Gross Claim **\$668,216.98**

Net Claim / Payment Amount **\$668,216.98**

YTD Amount: **\$668,216.98**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SAN DIEGO COUNTY TREASURER

PO BOX 980304

WEST SACRAMENTO

CA 95798 0304

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	923,766.15
Behavioral Health Services Growth Special Account county percentages	3.31538020

Gross Claim **\$923,766.15**

Net Claim / Payment Amount **\$923,766.15**

YTD Amount: **\$923,766.15**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 37 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SAN FRANCISCO COUNTY TREASURER
PO BOX 2920

SACRAMENTO

CA 95814 2920

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	479,239.94
Behavioral Health Services Growth Special Account county percentages	1.71998360

Gross Claim **\$479,239.94**

Net Claim / Payment Amount **\$479,239.94**

YTD Amount: **\$479,239.94**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO

CA 95798 1355

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	311,014.25
Behavioral Health Services Growth Special Account county percentages	1.11622460

Gross Claim **\$311,014.25**

Net Claim / Payment Amount **\$311,014.25**

YTD Amount: **\$311,014.25**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	137,720.91
Behavioral Health Services Growth Special Account county percentages	0.49427790

Gross Claim **\$137,720.91**

Net Claim / Payment Amount **\$137,720.91**

YTD Amount: **\$137,720.91**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SAN MATEO COUNTY TREASURER
C/O UNION BANK ST GOVT DEPT
PO BOX 4035
Sacramento CA 95812

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	149,540.23
Behavioral Health Services Growth Special Account county percentages	0.53669720

Gross Claim **\$149,540.23**

Net Claim / Payment Amount **\$149,540.23**

YTD Amount: **\$149,540.23**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 41 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

SANTA BARBARA COUNTY TREASURER

PO BOX 579

SANTA BARBARA

CA 93102

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	191,975.88
Behavioral Health Services Growth Special Account county percentages	0.68899800

Gross Claim **\$191,975.88**

Net Claim / Payment Amount **\$191,975.88**

YTD Amount: **\$191,975.88**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

SANTA CLARA CO TREASURER

PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 2,738,525.55

Behavioral Health Services Growth Special Account county percentages 9.82851930

Gross Claim \$2,738,525.55

Net Claim / Payment Amount \$2,738,525.55

YTD Amount: \$2,738,525.55

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 43 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ CA 95061

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	200,159.98
Behavioral Health Services Growth Special Account county percentages	0.71837060

Gross Claim **\$200,159.98**

Net Claim / Payment Amount **\$200,159.98**

YTD Amount: **\$200,159.98**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 44 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	93,582.77
Behavioral Health Services Growth Special Account county percentages	0.33586690

Gross Claim **\$93,582.77**

Net Claim / Payment Amount **\$93,582.77**

YTD Amount: **\$93,582.77**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SIERRA COUNTY TREASURER
PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	2,581.96
Behavioral Health Services Growth Special Account county percentages	0.00926660

Gross Claim **\$2,581.96**

Net Claim / Payment Amount **\$2,581.96**

YTD Amount: **\$2,581.96**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 46 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA

CA 96097

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 30,227.87

Behavioral Health Services Growth Special Account county percentages 0.10848730

Gross Claim **\$30,227.87**

Net Claim / Payment Amount **\$30,227.87**

YTD Amount: **\$30,227.87**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

SOLANO COUNTY T TC
675 TEXAS ST STE 1900

FAIRFIELD

CA 94533 6337

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	198,482.26
Behavioral Health Services Growth Special Account county percentages	0.71234930

Gross Claim **\$198,482.26**

Net Claim / Payment Amount **\$198,482.26**

YTD Amount: **\$198,482.26**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 48 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO

CA 95812 1204

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	153,498.98
Behavioral Health Services Growth Special Account county percentages	0.55090510

Gross Claim **\$153,498.98**

Net Claim / Payment Amount **\$153,498.98**

YTD Amount: **\$153,498.98**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 49 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

STANISLAUS COUNTY TREASURER
PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	211,097.29
Behavioral Health Services Growth Special Account county percentages	0.75762440

Gross Claim **\$211,097.29**

Net Claim / Payment Amount **\$211,097.29**

YTD Amount: **\$211,097.29**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY

CA 95992

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	129,616.11
Behavioral Health Services Growth Special Account county percentages	0.46518990

Gross Claim **\$129,616.11**

Net Claim / Payment Amount **\$129,616.11**

YTD Amount: **\$129,616.11**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 51 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	30,652.01
Behavioral Health Services Growth Special Account county percentages	0.11000950

Gross Claim **\$30,652.01**

Net Claim / Payment Amount **\$30,652.01**

YTD Amount: **\$30,652.01**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

TRINITY CO TREASURER

PO BOX 1297

WEAVERVILLE

CA 96093 1297

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 12,728.48

Behavioral Health Services Growth Special Account county percentages 0.04568230

Gross Claim \$12,728.48

Net Claim / Payment Amount \$12,728.48

YTD Amount: \$12,728.48

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 53 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA CA 93291

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	337,392.09
Behavioral Health Services Growth Special Account county percentages	1.21089420

Gross Claim **\$337,392.09**

Net Claim / Payment Amount **\$337,392.09**

YTD Amount: **\$337,392.09**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA

CA 95370

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	18,628.23
Behavioral Health Services Growth Special Account county percentages	0.06685640

Gross Claim **\$18,628.23**

Net Claim / Payment Amount **\$18,628.23**

YTD Amount: **\$18,628.23**

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 55 of 57

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A
PAYMENT ISSUE DATE: 05/29/2014

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO

CA 95798 0307

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 **To** 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period	291,216.05
Behavioral Health Services Growth Special Account county percentages	1.04516920

Gross Claim **\$291,216.05**

Net Claim / Payment Amount **\$291,216.05**

YTD Amount: **\$291,216.05**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200452A

PAYMENT ISSUE DATE: 05/29/2014

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND

CA 95695

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30027.9(c)(4)

Per schedule from the Department of Finance.

To be deposited in the County Support Services Account, Behavioral Health Subaccount.

Behavioral Health Services Growth Special Account per GC: 30027.9(c)(4)

Fiscal Year: 2012

Collection Period: 08/16/2012 To 08/15/2013

Payment Calculations:

Behavioral Health Services Growth Special Account Amount for current period 58,573.49

Behavioral Health Services Growth Special Account county percentages 0.21021920

Gross Claim \$58,573.49

Net Claim / Payment Amount \$58,573.49

YTD Amount: \$58,573.49

For assistance, please call: Maria Alvarez at (916) 324-7335

5/21/2014

Page 57 of 57