

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500220
PAYMENT ISSUE DATE: 01/22/2016

California Fire Foundation
1780 Creekside Oaks, Ste. 200

Sacramento, CA 95833

Financial Activity

Additional Description:

For Information Only - Warrant will be mailed separately

Firefighters' Memorial Fund payment

Fiscal Year: 2015

Collection Period: 10/01/2015 **To** 12/31/2015

Payment Calculations:

Allocation of Firefighters License Plate Revenue - 2nd Quarter	161,081.91
Allocation of Firefighters' Check Off	0.00
Less: SCO Admin Costs	0.00

Gross Claim **\$161,081.91**

Net Claim / Payment Amount **\$161,081.91**

YTD Amount: **\$343,613.32**

For assistance, please call: Erika Bosnich at (916) 323-2892