

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1500485
PAYMENT ISSUE DATE: 07/25/2016

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: 04/01/2016 **To** 06/30/2016

Payment Calculations:

Allocation of Firefighters License Plate Revenue - 4th Quarter	172,006.99
Allocation of Firefighters' Check Off- 4th Quarter	162,869.44
Less: SCO Admin Costs	100.00

Gross Claim **\$334,776.43**

Net Claim / Payment Amount **\$334,776.43**

YTD Amount: **\$842,036.44**

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