

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

ALAMEDA COUNTY TREASURER
1221 OAK ST

OAKLAND

CA 94612

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,742,780.69

Gross Claim \$1,742,780.69

Net Claim / Payment Amount \$1,742,780.69

YTD Amount: \$41,316,465.90

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE CA 96120

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 44,429.88

Gross Claim **\$44,429.88**

Net Claim / Payment Amount **\$44,429.88**

YTD Amount: **\$1,053,308.52**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

AMADOR COUNTY TREASURER
810 COURT ST

JACKSON

CA 95642

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 79,976.13

Gross Claim **\$79,976.13**

Net Claim / Payment Amount **\$79,976.13**

YTD Amount: **\$1,896,010.80**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY CA 94704

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 147,665.59

Gross Claim \$147,665.59

Net Claim / Payment Amount \$147,665.59

YTD Amount: \$3,500,738.92

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 285,048.04

Gross Claim **\$285,048.04**

Net Claim / Payment Amount **\$285,048.04**

YTD Amount: **\$6,757,693.33**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS CA 95249

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 86,476.77

Gross Claim **\$86,476.77**

Net Claim / Payment Amount **\$86,476.77**

YTD Amount: **\$2,050,122.81**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

COLUSA COUNTY TREASURER
546 JAY ST

COLUSA

CA 95932

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 72,011.69

Gross Claim **\$72,011.69**

Net Claim / Payment Amount **\$72,011.69**

YTD Amount: **\$1,707,196.16**

For assistance, please call: John Bodolay at (916) 323-2154

4/10/2013

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

CONTRA COSTA COUNTY TREASURER
625 COURT ST RM 102

MARTINEZ

CA 94553

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,107,068.84

Gross Claim **\$1,107,068.84**

Net Claim / Payment Amount **\$1,107,068.84**

YTD Amount: **\$26,245,512.24**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

DEL NORTE COUNTY TREASURER
981 H ST STE 150

CRESCENT CITY CA 95531

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 75,799.06

Gross Claim \$75,799.06

Net Claim / Payment Amount \$75,799.06

YTD Amount: \$1,796,984.16

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

EL DORADO COUNTY TREASURER

360 FAIR LN

PLACERVILLE

CA 95667

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 198,111.42

Gross Claim **\$198,111.42**

Net Claim / Payment Amount **\$198,111.42**

YTD Amount: **\$4,696,668.91**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

FRESNO COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,198,722.25

Gross Claim \$1,198,722.25

Net Claim / Payment Amount \$1,198,722.25

YTD Amount: \$28,418,358.78

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS CA 95988

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 76,208.73

Gross Claim **\$76,208.73**

Net Claim / Payment Amount **\$76,208.73**

YTD Amount: **\$1,806,696.29**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

HUMBOLDT COUNTY TREASURER
825 FIFTH ST RM 125

EUREKA

CA 95501

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 175,806.61

Gross Claim **\$175,806.61**

Net Claim / Payment Amount **\$175,806.61**

YTD Amount: **\$4,167,884.00**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

IMPERIAL COUNTY TREASURER
940 WEST MAIN ST

EL CENTRO CA 92243 2863

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 242,201.78

Gross Claim **\$242,201.78**

Net Claim / Payment Amount **\$242,201.78**

YTD Amount: **\$5,741,928.29**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

INYO COUNTY TREASURER
PO BOX 0

INDEPENDENCE CA 93526

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 51,400.60

Gross Claim \$51,400.60

Net Claim / Payment Amount \$51,400.60

YTD Amount: \$1,218,564.66

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

KERN COUNTY TREASURER
PO BOX 981240

SACRAMENTO CA 95798 1240

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,034,547.62

Gross Claim **\$1,034,547.62**

Net Claim / Payment Amount **\$1,034,547.62**

YTD Amount: **\$24,526,236.55**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

KINGS COUNTY TREASURER
PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 203,522.86

Gross Claim **\$203,522.86**

Net Claim / Payment Amount **\$203,522.86**

YTD Amount: **\$4,824,958.93**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT CA 95453

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 100,832.24

Gross Claim \$100,832.24

Net Claim / Payment Amount \$100,832.24

YTD Amount: \$2,390,451.09

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 75,918.89

Gross Claim **\$75,918.89**

Net Claim / Payment Amount **\$75,918.89**

YTD Amount: **\$1,799,825.03**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

LOS ANGELES COUNTY TREASURER
PO BOX 1859

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 13,915,580.00

Gross Claim **\$13,915,580.00**

Net Claim / Payment Amount **\$13,915,580.00**

YTD Amount: **\$329,899,561.93**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 213,161.54

Gross Claim **\$213,161.54**

Net Claim / Payment Amount **\$213,161.54**

YTD Amount: **\$5,053,465.08**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

MARIN COUNTY TREASURER

PO BOX 4220
CIVIC CENTER
SAN RAFAEL

CA 94913

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 **To** 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 276,153.68

Gross Claim **\$276,153.68**

Net Claim / Payment Amount **\$276,153.68**

YTD Amount: **\$6,546,832.98**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

MARIPOSA COUNTY TREASURER
PO BOX 36

MARIPOSA CA 95338

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 51,795.16

Gross Claim **\$51,795.16**

Net Claim / Payment Amount **\$51,795.16**

YTD Amount: **\$1,227,918.78**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

MENDOCINO COUNTY TREASURER
501 LOW GAP RD 1060

UKIAH

CA 95482

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 122,672.35

Gross Claim **\$122,672.35**

Net Claim / Payment Amount **\$122,672.35**

YTD Amount: **\$2,908,218.94**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

MERCED COUNTY TREASURER
PO BOX 981311

WEST SACRAMENTO CA 95798 1311

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 358,663.33

Gross Claim \$358,663.33

Net Claim / Payment Amount \$358,663.33

YTD Amount: \$8,502,906.48

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS

CA 96101

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 48,302.50

Gross Claim **\$48,302.50**

Net Claim / Payment Amount **\$48,302.50**

YTD Amount: **\$1,145,117.48**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

MONO COUNTY TREASURER
PO BOX 495

BRIDGEPORT CA 93517

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 50,376.18

Gross Claim \$50,376.18

Net Claim / Payment Amount \$50,376.18

YTD Amount: \$1,194,278.59

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

MONTEREY COUNTY TREASURER
PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 571,265.16

Gross Claim \$571,265.16

Net Claim / Payment Amount \$571,265.16

YTD Amount: \$13,543,102.55

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

NAPA COUNTY TREASURER
1195 THIRD ST RM 108

NAPA

CA 94559 3035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 **To** 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 164,114.23

Gross Claim **\$164,114.23**

Net Claim / Payment Amount **\$164,114.23**

YTD Amount: **\$3,890,690.24**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 134,324.30

Gross Claim **\$134,324.30**

Net Claim / Payment Amount **\$134,324.30**

YTD Amount: **\$3,184,454.19**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

ORANGE COUNTY TREASURER
PO BOX 981024

WEST SACRAMENTO CA 95798 1024

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,959,876.17

Gross Claim **\$3,959,876.17**

Net Claim / Payment Amount **\$3,959,876.17**

YTD Amount: **\$93,877,611.63**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

PLACER COUNTY TREASURER

2976 Richardson Dr.

Auburn

CA 95603

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 332,610.60

Gross Claim **\$332,610.60**

Net Claim / Payment Amount **\$332,610.60**

YTD Amount: **\$7,885,268.93**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

PLUMAS COUNTY TREASURER
PO BOX 176

QUINCY

CA 95971

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 69,777.75

Gross Claim **\$69,777.75**

Net Claim / Payment Amount **\$69,777.75**

YTD Amount: **\$1,654,235.67**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

RIVERSIDE COUNTY TREASURER
C/O UNION BANK OF CA ST GOV
PO BOX 4035
SACRAMENTO CA 95812 4035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,539,898.37

Gross Claim **\$2,539,898.37**

Net Claim / Payment Amount **\$2,539,898.37**

YTD Amount: **\$60,213,901.28**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SACRAMENTO COUNTY TREASURER
PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,565,500.05

Gross Claim **\$1,565,500.05**

Net Claim / Payment Amount **\$1,565,500.05**

YTD Amount: **\$37,113,636.77**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

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

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 97,379.53

Gross Claim \$97,379.53

Net Claim / Payment Amount \$97,379.53

YTD Amount: \$2,308,596.76

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SAN BERNARDINO CO TREASURER
PO BOX 1859

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,570,752.66

Gross Claim **\$2,570,752.66**

Net Claim / Payment Amount **\$2,570,752.66**

YTD Amount: **\$60,945,370.35**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SAN DIEGO COUNTY TREASURER
PO BOX 980304

WEST SACRAMENTO CA 95798 0304

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 3,992,354.52

Gross Claim **\$3,992,354.52**

Net Claim / Payment Amount **\$3,992,354.52**

YTD Amount: **\$94,647,582.72**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

CA 95814 2920

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 **To** 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 904,440.34

Gross Claim **\$904,440.34**

Net Claim / Payment Amount **\$904,440.34**

YTD Amount: **\$21,441,755.97**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SAN JOAQUIN COUNTY TREASURER

PO BOX 981355

WEST SACRAMENTO

CA 95798 1355

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 **To** 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 822,890.32

Gross Claim **\$822,890.32**

Net Claim / Payment Amount **\$822,890.32**

YTD Amount: **\$19,508,432.64**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SAN LUIS OBISPO COUNTY TREASURER
PO BOX 1149

SAN LUIS OBISPO CA 93406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 331,921.32

Gross Claim **\$331,921.32**

Net Claim / Payment Amount **\$331,921.32**

YTD Amount: **\$7,868,928.12**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

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

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 **To** 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 794,854.51

Gross Claim **\$794,854.51**

Net Claim / Payment Amount **\$794,854.51**

YTD Amount: **\$18,843,781.99**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 565,788.45

Gross Claim \$565,788.45

Net Claim / Payment Amount \$565,788.45

YTD Amount: \$13,413,265.06

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SANTA CLARA CO TREASURER
PO BOX 1406

SACRAMENTO CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,239,121.18

Gross Claim **\$2,239,121.18**

Net Claim / Payment Amount **\$2,239,121.18**

YTD Amount: **\$53,083,313.49**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ CA 95061

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 359,577.66

Gross Claim **\$359,577.66**

Net Claim / Payment Amount **\$359,577.66**

YTD Amount: **\$8,524,582.62**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 236,480.54

Gross Claim **\$236,480.54**

Net Claim / Payment Amount **\$236,480.54**

YTD Amount: **\$5,606,293.56**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SIERRA COUNTY TREASURER
PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 45,389.51

Gross Claim **\$45,389.51**

Net Claim / Payment Amount **\$45,389.51**

YTD Amount: **\$1,076,058.67**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA

CA 96097

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 84,368.02

Gross Claim **\$84,368.02**

Net Claim / Payment Amount **\$84,368.02**

YTD Amount: **\$2,000,130.24**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SOLANO COUNTY T TC
675 TEXAS ST STE 1900

FAIRFIELD

CA 94533 6337

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 **To** 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 493,067.51

Gross Claim **\$493,067.51**

Net Claim / Payment Amount **\$493,067.51**

YTD Amount: **\$11,689,254.57**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SONOMA COUNTY TREASURER
PO BOX 1204

SACRAMENTO CA 95812 1204

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 554,011.80

Gross Claim **\$554,011.80**

Net Claim / Payment Amount **\$554,011.80**

YTD Amount: **\$13,134,073.46**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

STANISLAUS COUNTY TREASURER
PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 627,936.90

Gross Claim \$627,936.90

Net Claim / Payment Amount \$627,936.90

YTD Amount: \$14,886,631.31

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY

CA 95992

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 232,872.92

Gross Claim **\$232,872.92**

Net Claim / Payment Amount **\$232,872.92**

YTD Amount: **\$4,516,639.20**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

TEHAMA COUNTY TREASURER
PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 97,739.02

Gross Claim **\$97,739.02**

Net Claim / Payment Amount **\$97,739.02**

YTD Amount: **\$2,317,119.41**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

TRI CITY MENTAL HEALTH
2008 N GAREY AVENUE

POMONA

CA 91767

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 271,566.94

Gross Claim **\$271,566.94**

Net Claim / Payment Amount **\$271,566.94**

YTD Amount: **\$6,438,094.21**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

TRINITY CO TREASURER
PO BOX 1297

WEAVERVILLE CA 96093 1297

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 50,186.20

Gross Claim \$50,186.20

Net Claim / Payment Amount \$50,186.20

YTD Amount: \$1,189,774.76

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

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

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 594,544.22

Gross Claim **\$594,544.22**

Net Claim / Payment Amount **\$594,544.22**

YTD Amount: **\$14,094,984.06**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA

CA 95370

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 93,402.18

Gross Claim **\$93,402.18**

Net Claim / Payment Amount **\$93,402.18**

YTD Amount: **\$2,214,304.94**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK
PO BOX 980307
WEST SACRAMENTO CA 95798 0307

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,014,236.59

Gross Claim **\$1,014,236.59**

Net Claim / Payment Amount **\$1,014,236.59**

YTD Amount: **\$24,044,718.79**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200259A
PAYMENT ISSUE DATE: 04/15/2013

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND

CA 95695

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 03/01/2013 To 03/31/2013

Payment Calculations:

Mental health Services apportionment amount for current period 264,686.83

Gross Claim **\$264,686.83**

Net Claim / Payment Amount **\$264,686.83**

YTD Amount: **\$6,274,986.09**