State Controller’s Office

Local Health and Welfare Trust Fund

Mental Health Instructions

Please note the following when completing the annual report:

* Report prior fiscal year deposits, including growth.
* Amounts used should be post-AB85 amounts.
* Provide the County/City name.
* Provide a contact person’s name, telephone number and email for the report.
* Reports must be signed by the Mental Health Director and the County/City Auditor‑Controller.

1. Sales Tax
   1. Allocation: In column A, enter the total amount deposited pursuant to Welfare and Institutions (W&I) Code section 17601.25(c).
   2. Less: State Hospital Offset: In column A, enter the total amount for State Hospital Offset pursuant to W&I Code section 17601. Note: Counties making direct payments should enter ‑0‑ and refer to line 6.
   3. Less: Managed Care Offset: In column A, enter the total amount for Managed Care Program Offset.
   4. Sales Tax Annual Base: In column A, enter the amount deposited pursuant to W&I Code sections 17601 and 17601.25(a).
   5. Sales Tax General Growth: In column B, enter the amount deposited pursuant to W&I Code sections 17606.10(f)(1) and 17601.25(a).
   6. Total Sales Tax Revenue: This field will automatically populate.
2. County/City Matching Funds
   1. Mental Health Match: In column A, enter the total amount deposited pursuant to W&I Code section 17608.05(a), in accordance with the schedule developed by the California Department of Health Care Services.
   2. Mental Health Vehicle License Fee (VLF) Annual Base: In column A, enter the amount deposited pursuant to W&I Code sections 17601.25(a) and 17604(g)(5).
   3. VLF Collection Allocation: In column A, enter the total amount deposited pursuant to W&I Code section 17604(d).
   4. VLF General Growth: In column B, enter the amount deposited pursuant to W&I Code sections 17606.20(a) and 17601.25(a).
   5. Total Matching Funds: This field will automatically populate.
3. Other Deposits: Identify and in column A, enter total of miscellaneous deposits. If there is more than one type of deposit, please enter the total and include an attachment with the details.
4. Total Funds Deposited: This field will automatically populate.
5. Transfers to Operating Funds: In column A, enter the total amount transferred to other funds for spending purposes.
6. Other Disbursements: Identify and in column A, enter total all other disbursements amounts made during the fiscal year. If there is more than one type of deposit, please enter the total and include an attachment with the details.
7. Total Funds Disbursed: This field will automatically populate.
8. Transfers In/Out from/to Other Trust Funds: In column A, enter the amount for transfers in/out between other trust fund accounts pursuant to W&I Code section 17600.20.

State Controller’s Office

Local Health and Welfare Trust Fund

Health Account Instructions

Please note the following when completing the annual report:

* Report prior fiscal year deposits, including growth.
* Amounts used should be post-AB85 amounts.
* Provide the County/City name.
* Provide a contact person’s name, telephone number and email for the report.
* Reports must be signed by the Health Director and the County/City Auditor‑Controller.

1. Sales Tax
   1. Allocation: In column A, enter the total amount deposited pursuant to Welfare and Institutions (W&I) Code section 17603(c).
   2. Sales Tax General Growth: In column B, enter the amount deposited pursuant to W&I Code section 17606.10(f)(2).
   3. Total Sales Tax Revenue: This field will automatically populate.
2. County/City Matching Funds
   1. Health Match: In column A, enter the total amount deposited pursuant to the schedule shown in W&I Code section 17608.10.
   2. Vehicle License Fee (VLF) Allocation: In column A, enter the amount deposited pursuant to W&I Code section 17604(g)(2).
   3. VLF General Growth: In column B, enter the amount deposited pursuant to W&I Code section 17606.20(a).
   4. Total Matching Funds: This field will automatically populate.
3. Other Deposits: Identify and in column A, enter total of miscellaneous deposits. If there is more than one type of deposit, please enter the total and include an attachment with the details.
4. Total Funds Deposited: This field will automatically populate.
5. Transfers to Operating Funds: In column A, enter the total amount transferred to other funds for spending purposes.
6. Other Disbursements: Identify and in column A, enter total all other disbursements amounts made during the fiscal year. If there is more than one type of deposit, please enter the total and include an attachment with the details.
7. Total Funds Disbursed: This field will automatically populate.
8. Transfers In/Out from/to Other Trust Funds: In column A, enter the amount for transfers in/out between other trust fund accounts pursuant to W&I Code section 17600.20.

State Controller’s Office

Local Health and Welfare Trust Fund

Social Services Account Instructions

Please note the following when completing the annual report:

* Report prior fiscal year deposits, including growth.
* Amounts used should be post-AB85 amounts.
* Provide the County/City name.
* Provide a contact person’s name, telephone number and email for the report.
* Reports must be signed by the Social Services Director and the County/City Auditor‑Controller.

1. Sales Tax
   1. Allocation: In column A, enter the total amount deposited pursuant to Welfare and Institutions (W&I) Code section 17602(e).
   2. Stabilization: In column A, enter the total amount deposited pursuant to W&I Code section 17602(b)(1).
   3. Caseload Growth: In column B, enter the total amount for Caseload Growth Pursuant to W&I Code section 17605(c).
   4. Sales Tax General Growth: In column B, enter the amount deposited pursuant to W&I Code section 17606.10(g).
   5. Total Sales Tax Revenue: This field will automatically populate.
2. Vehicle License Fees (VLF)
   1. VLF Annual Base: In column A, enter the total amount deposited pursuant to W&I Code section 17604(g)(1).
   2. VLF General Growth: In column B, enter the amount deposited pursuant to W&I Code section 17606.20(c).
   3. Total VLF Revenue: This field will automatically populate.
3. CalWORKS Maintenance of Effort (MOE)
   1. Allocation: In Column A, enter the total amount deposited pursuant to W&I Code sections 17602.1 and 17604(g)(5).
   2. Total CalWORKS MOE Revenue: this field will automatically populate.
4. Family Support Subaccount
   1. Allocation: In column A, enter the total amount deposited pursuant to W&I Code section 17601.75(a).
   2. Growth: In column B, enter the amount deposited pursuant to W&I Code sections 17601.75(a), 17605.10 and 17606.20.
   3. Total Family Support Subaccount Revenue: This field will automatically populate.
5. Child Poverty and Family Supplemental Support (CPFSS) VLF
   1. Allocation: In column A, enter the total amount deposited pursuant to W&I Code section 17604(g)(4).
   2. Growth VLF: In column B, enter the amount deposited pursuant to W&I Code section 17606.20(a).
   3. Total CPFSS VLF Revenue: This field will automatically populate.
6. CPFSS Sales Tax
   1. Allocation: In column A, enter the total amount deposited pursuant to W&I Code section 17601.50.
   2. Growth Sales Tax: In column B, enter the amount deposited pursuant to W&I Code section 17606.10(f)(3).
   3. Total CPFSS Sales Tax Revenue: This field will automatically populate.
7. Other Deposits: Identify and in column A, enter total of miscellaneous deposits. If there is more than one type of deposit, please enter the total and include an attachment with the details.
8. Total Funds Deposited: This field will automatically populate.
9. Transfers to Operating Funds: In column A, enter the total amount transferred to other funds for spending purposes.
10. Other Disbursements: Identify and in column A, enter total all other disbursements amounts made during the fiscal year. If there is more than one type of deposit, please enter the total and include an attachment with the details.
11. Total Funds Disbursed: This field will automatically populate.
12. Transfers In/Out from/to Other Trust Funds: In column A, enter the amount for transfers in/out between other trust fund accounts pursuant to W&I Code section 17600.20.