

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

ALAMEDA COUNTY TREASURER

1221 OAK ST

OAKLAND

CA 94612

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 4.99051700

Behavioral Health Services Growth Special Account Amount for current period 3,384,024.07

Gross Claim **\$3,384,024.07**

Net Claim / Payment Amount **\$3,384,024.07**

YTD Amount: **\$3,384,024.07**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

ALPINE COUNTY TREASURER

PO BOX 217

MARKLEEVILLE

CA 96120

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 0.00442400

Behavioral Health Services Growth Special Account Amount for current period 2,999.87

Gross Claim \$2,999.87

Net Claim / Payment Amount \$2,999.87

YTD Amount: \$2,999.87

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

AMADOR COUNTY TREASURER

810 COURT ST

JACKSON

CA 95642

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 0.05782600

Behavioral Health Services Growth Special Account Amount for current period 39,211.28

Gross Claim \$39,211.28

Net Claim / Payment Amount \$39,211.28

YTD Amount: \$39,211.28

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 1.11215700 |
| Behavioral Health Services Growth Special Account Amount for current period | 754,143.52 |

Gross Claim **\$754,143.52**

Net Claim / Payment Amount **\$754,143.52**

YTD Amount: **\$754,143.52**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS

CA 95249

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.09730500 |
| Behavioral Health Services Growth Special Account Amount for current period | 65,981.63 |

Gross Claim **\$65,981.63**

Net Claim / Payment Amount **\$65,981.63**

YTD Amount: **\$65,981.63**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 2.19183900

Behavioral Health Services Growth Special Account Amount for current period 1,486,266.04

Gross Claim \$1,486,266.04

Net Claim / Payment Amount \$1,486,266.04

YTD Amount: \$1,486,266.04

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.11564400 |
| Behavioral Health Services Growth Special Account Amount for current period | 78,417.14 |

Gross Claim **\$78,417.14**

Net Claim / Payment Amount **\$78,417.14**

YTD Amount: **\$78,417.14**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

FRESNO COUNTY TREASURER

PO BOX 980938

WEST SACRAMENTO

CA 95798

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 2.76968100

Behavioral Health Services Growth Special Account Amount for current period 1,878,095.43

Gross Claim \$1,878,095.43

Net Claim / Payment Amount \$1,878,095.43

YTD Amount: \$1,878,095.43

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS

CA 95988

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.09858700 |
| Behavioral Health Services Growth Special Account Amount for current period | 66,850.95 |

Gross Claim **\$66,850.95**

Net Claim / Payment Amount **\$66,850.95**

YTD Amount: **\$66,850.95**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

INYO COUNTY TREASURER

PO BOX 0

INDEPENDENCE

CA 93526

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 0.03527300

Behavioral Health Services Growth Special Account Amount for current period 23,918.30

Gross Claim \$23,918.30

Net Claim / Payment Amount \$23,918.30

YTD Amount: \$23,918.30

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

KINGS COUNTY TREASURER
1400 WEST LACEY BOULEVARD

HANFORD

CA 93230

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.39739600 |
| Behavioral Health Services Growth Special Account Amount for current period | 269,470.60 |

Gross Claim **\$269,470.60**

Net Claim / Payment Amount **\$269,470.60**

YTD Amount: **\$269,470.60**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.21731800 |
| Behavioral Health Services Growth Special Account Amount for current period | 147,361.35 |

Gross Claim **\$147,361.35**

Net Claim / Payment Amount **\$147,361.35**

YTD Amount: **\$147,361.35**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.08347600 |
| Behavioral Health Services Growth Special Account Amount for current period | 56,604.31 |

Gross Claim **\$56,604.31**

Net Claim / Payment Amount **\$56,604.31**

YTD Amount: **\$56,604.31**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

LOS ANGELES COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 30.82880400

Behavioral Health Services Growth Special Account Amount for current period 20,904,730.81

Gross Claim **\$20,904,730.81**

Net Claim / Payment Amount **\$20,904,730.81**

YTD Amount: **\$20,904,730.81**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.50192400 |
| Behavioral Health Services Growth Special Account Amount for current period | 340,350.09 |

Gross Claim **\$340,350.09**

Net Claim / Payment Amount **\$340,350.09**

YTD Amount: **\$340,350.09**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

MARIPOSA COUNTY TREASURER

PO BOX 36

MARIPOSA

CA 95338

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 0.06782800

Behavioral Health Services Growth Special Account Amount for current period 45,993.55

Gross Claim \$45,993.55

Net Claim / Payment Amount \$45,993.55

YTD Amount: \$45,993.55

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.88571700 |
| Behavioral Health Services Growth Special Account Amount for current period | 600,596.62 |

Gross Claim **\$600,596.62**

Net Claim / Payment Amount **\$600,596.62**

YTD Amount: **\$600,596.62**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

MONTEREY COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 1.64664100

Behavioral Health Services Growth Special Account Amount for current period 1,116,572.25

Gross Claim \$1,116,572.25

Net Claim / Payment Amount \$1,116,572.25

YTD Amount: \$1,116,572.25

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

NEVADA COUNTY TREASURER

PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 0.31180600

Behavioral Health Services Growth Special Account Amount for current period 211,432.81

Gross Claim **\$211,432.81**

Net Claim / Payment Amount **\$211,432.81**

YTD Amount: **\$211,432.81**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|--------------|
| Behavioral Health Services Growth Special Account county percentages | 4.14569600 |
| Behavioral Health Services Growth Special Account Amount for current period | 2,811,158.65 |

Gross Claim **\$2,811,158.65**

Net Claim / Payment Amount **\$2,811,158.65**

YTD Amount: **\$2,811,158.65**

For assistance, please call: Heather Bui at (916) 323-0740

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

| | |
|---|--------------|
| Behavioral Health Services Growth Special Account county percentages | 5.12882000 |
| Behavioral Health Services Growth Special Account Amount for current period | 3,477,806.07 |

Gross Claim **\$3,477,806.07**

Net Claim / Payment Amount **\$3,477,806.07**

YTD Amount: **\$3,477,806.07**

For assistance, please call: Heather Bui at (916) 323-0740

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 4.33399500

Behavioral Health Services Growth Special Account Amount for current period 2,938,842.49

Gross Claim **\$2,938,842.49**

Net Claim / Payment Amount **\$2,938,842.49**

YTD Amount: **\$2,938,842.49**

For assistance, please call: Heather Bui at (916) 323-0740

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.10174700 |
| Behavioral Health Services Growth Special Account Amount for current period | 68,993.71 |

Gross Claim **\$68,993.71**

Net Claim / Payment Amount **\$68,993.71**

YTD Amount: **\$68,993.71**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|--------------|
| Behavioral Health Services Growth Special Account county percentages | 5.22046100 |
| Behavioral Health Services Growth Special Account Amount for current period | 3,539,947.00 |

Gross Claim **\$3,539,947.00**

Net Claim / Payment Amount **\$3,539,947.00**

YTD Amount: **\$3,539,947.00**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.63435200 |
| Behavioral Health Services Growth Special Account Amount for current period | 430,148.31 |

Gross Claim **\$430,148.31**

Net Claim / Payment Amount **\$430,148.31**

YTD Amount: **\$430,148.31**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

SAN MATEO COUNTY TREASURER DEPT OF BEHAVIORAL HEALTH
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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 1.27369900 |
| Behavioral Health Services Growth Special Account Amount for current period | 863,683.68 |

Gross Claim **\$863,683.68**

Net Claim / Payment Amount **\$863,683.68**

YTD Amount: **\$863,683.68**

For assistance, please call: Heather Bui at (916) 323-0740

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA

CA 93102 0579

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 1.27866500 |
| Behavioral Health Services Growth Special Account Amount for current period | 867,051.08 |

Gross Claim **\$867,051.08**

Net Claim / Payment Amount **\$867,051.08**

YTD Amount: **\$867,051.08**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

SANTA CLARA CO TREASURER

Post Office Box 980483

West Sacramento

CA 95798

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 4.28872800

Behavioral Health Services Growth Special Account Amount for current period 2,908,147.35

Gross Claim **\$2,908,147.35**

Net Claim / Payment Amount **\$2,908,147.35**

YTD Amount: **\$2,908,147.35**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.84803800 |
| Behavioral Health Services Growth Special Account Amount for current period | 575,046.83 |

Gross Claim **\$575,046.83**

Net Claim / Payment Amount **\$575,046.83**

YTD Amount: **\$575,046.83**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

SHASTA COUNTY TREASURER

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.58288000 |
| Behavioral Health Services Growth Special Account Amount for current period | 395,245.61 |

Gross Claim **\$395,245.61**

Net Claim / Payment Amount **\$395,245.61**

YTD Amount: **\$395,245.61**

For assistance, please call: Heather Bui at (916) 323-0740

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

SIERRA COUNTY TREASURER

PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 0.00443800

Behavioral Health Services Growth Special Account Amount for current period 3,009.37

Gross Claim \$3,009.37

Net Claim / Payment Amount \$3,009.37

YTD Amount: \$3,009.37

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.94349600 |
| Behavioral Health Services Growth Special Account Amount for current period | 639,776.03 |

Gross Claim **\$639,776.03**

Net Claim / Payment Amount **\$639,776.03**

YTD Amount: **\$639,776.03**

For assistance, please call: Heather Bui at (916) 323-0740

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

STANISLAUS COUNTY TREASURER

PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 1.47936600

Behavioral Health Services Growth Special Account Amount for current period 1,003,144.59

Gross Claim **\$1,003,144.59**

Net Claim / Payment Amount **\$1,003,144.59**

YTD Amount: **\$1,003,144.59**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY

CA 95992

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 **To** 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.66358900 |
| Behavioral Health Services Growth Special Account Amount for current period | 449,973.65 |

Gross Claim **\$449,973.65**

Net Claim / Payment Amount **\$449,973.65**

YTD Amount: **\$449,973.65**

For assistance, please call: Heather Bui at (916) 323-0740

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A

PAYMENT ISSUE DATE: 01/17/2020

TEHAMA COUNTY TREASURER

PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)

Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

Behavioral Health Services Growth Special Account county percentages 0.20944800

Behavioral Health Services Growth Special Account Amount for current period 142,024.78

Gross Claim **\$142,024.78**

Net Claim / Payment Amount **\$142,024.78**

YTD Amount: **\$142,024.78**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

TRINITY CO TREASURER
PO BOX 1297

WEAVERVILLE

CA 96093 1297

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.05868400 |
| Behavioral Health Services Growth Special Account Amount for current period | 39,793.09 |

Gross Claim **\$39,793.09**

Net Claim / Payment Amount **\$39,793.09**

YTD Amount: **\$39,793.09**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

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 30029.07(A)(1)(B)
Per schedule from the Department of Finance.
To be deposited in the County Support Services Account, Behavioral Health Subaccount.

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|--------------|
| Behavioral Health Services Growth Special Account county percentages | 1.65706900 |
| Behavioral Health Services Growth Special Account Amount for current period | 1,123,643.38 |

Gross Claim **\$1,123,643.38**

Net Claim / Payment Amount **\$1,123,643.38**

YTD Amount: **\$1,123,643.38**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1800571A
PAYMENT ISSUE DATE: 01/17/2020

YOLO COUNTY TREASURER

PO BOX 1995

WOODLAND

CA 95695

Financial Activity

Additional Description:

Behavioral Health Services Growth Special Account per Government Code Section 30029.07(A)(1)(B)
Per schedule from the Department of Finance.

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

More information at http://www.sco.ca.gov/ard_local_apportionments.html.

Behavioral Health Services Growth Special Account per GC: 30029.07(A)(1)(B)

Fiscal Year: 2018

Collection Period: 08/16/2018 To 08/15/2019

Payment Calculations:

| | |
|---|------------|
| Behavioral Health Services Growth Special Account county percentages | 0.36538200 |
| Behavioral Health Services Growth Special Account Amount for current period | 247,762.20 |

Gross Claim **\$247,762.20**

Net Claim / Payment Amount **\$247,762.20**

YTD Amount: **\$247,762.20**

For assistance, please call: Heather Bui at (916) 323-0740

1/8/2020

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