

MENTAL HEALTH TRUST FUND INSTRUCTIONS

Instructions for the 2008-09 Second Quarter Report.

- ◆ Reports must be returned by **March 5, 2009**, to the State Controller's Office, Division of Accounting and Reporting, County Cost Plans and Local Apportionments Section, P.O. Box 942850, Sacramento, CA 94250.
- ◆ Reports are to be signed by the Director of Mental Health and the County/City Auditor-Controller.
- ◆ Report 2008-09 second quarter deposits made October through December 2008.
- ◆ Refer to the remittance advice received with your payments.
- ◆ **Do not enter amounts in gray areas.**

Deposits

1. Sales tax
 - a. Allocation
W & I Code Sec. 17601 In columns titled "October, November, and December" enter the total amount allocated October 27, November 26, and December 24, 2008, respectively.
 - b. Less: State Hospital Offset
W & I Code Sec. 17601 In columns titled "October, November, and December," enter the State Hospital Service contract offsets made in October through December 2008. Note: Counties making direct payments should enter -0- and refer to line 6.
 - c. Less: Managed Care Offset In columns titled "October, November, and December," enter the Managed Care Program offset amounts made in October through December 2008.
 - d. Total Sales Tax Revenue Enter the total of lines 1a, less 1b, less 1c.
2. County/City Matching Funds
 - a. Mental Health Match
W & I Code Sec. 17608.05 Enter the amount of local matching funds deposited from October through December 2008 in accordance with the schedule developed by the State Department of Mental Health.
 - b. Vehicle License Collection
Allocation In the columns titled "October, November, December," enter the amount deposited in October, November and December 2008.
 - c. Vehicle License Fees
Annual Base Enter the amount of county/city matching funds deposited as Vehicle License Fees in the columns titled "October, November, and December," enter the total amount allocated on October 27, November 26, and December 24, 2008, respectively.
 - d. Total Matching Funds Enter the total of lines 2a, 2b and 2c.
3. Other (identify) Enter and identify all miscellaneous deposits.
4. Total Funds Deposited Enter the total of lines 1d, 2d, and 3.

Disbursements

5. Transfers to Operating Funds Enter the total amounts transferred to other funds for spending purposes.
6. Other (identify) Enter and identify any other disbursements made during the second Quarter.
7. Total Funds Disbursed Enter the total of lines 5 and 6.

Transfers

8. Transfers In (Out) to Other
Trust Funds
W & I Code Sec. 17600.20 Enter the transfers In (Out) between trust fund accounts.

HEALTH TRUST FUND INSTRUCTIONS

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- ◆ Reports are to be signed by the Director of Health and the County/City Auditor-Controller.
- ◆ Report 2008-09 second quarter deposits made October through December 2008.
- ◆ Refer to the remittance advice received with your payments.
- ◆ **Do not enter amounts in gray areas.**

Deposits

1. Sales Tax
 - a. Allocation
W & I Code Sec. 17603
In columns titled "October, November, and December" enter the total amount allocated October 27, November 26, and December 24, 2008, respectively.
 - b. Less: CMSP Offset
Enter the amounts of the County Medical Services Program (CMSP) offsets from October through December 2008. Note: Counties making direct payments should enter -0- and refer to line 6.
 - c. Total Sales Tax Revenue
Enter the total of line 1a less line 1b.
2. County/City Matching Funds
 - a. Health Match
W & I Code Sec. 17608.10(a)
In columns titled "October, November, and December" enter the gross amount of local matching funds deposited from October through December 2008, based on the schedule shown in W & I Code Section 17608.10.
 - b. Vehicle License Fee
W & I Code Sec. 17608.10(b)
 - i. Allocation
Enter the amount of county/city matching funds deposited as Vehicle License Fees in the columns titled "October, November, and December," enter the total amount allocated on October 27, November 26, and December 24, 2008, respectively.
 - ii. Less: CMSP Offset
W & I Code Sec. 17604.05
Enter the amount of the County Medical Services Program offset from October through December 2008. Note: Counties making direct payments should enter -0- and refer to line 6.
 - c. Total Matching Funds
Enter the total of line 2a, 2b(i), less 2b(ii).
3. Other (identify)
Enter and identify all miscellaneous deposits.
4. Total Funds Deposited
Enter the total of lines 1c, 2c, and 3.

Disbursements

5. Transfers to Operating Funds
Enter the total amounts transferred to other funds for spending purposes.
6. CMSP Payments
Enter the amounts from counties/cities making direct CMSP payments to the Department of Health Services.
7. Other (identify)
Enter and identify any other disbursements made during the second quarter.
8. Total Funds Disbursed
Enter the total of lines 5, 6, and 7.

Transfers

9. Transfers In (Out) to Other Trust Funds,
W & I Code Sec. 17600.
Enter the transfers In (Out) between trust fund accounts.

SOCIAL SERVICES TRUST FUND INSTRUCTIONS

Instructions for the 2008-09 Second Quarter Report.

- ◆ Reports must be returned by **March 5, 2009**, to the State Controller's Office, Division of Accounting and Reporting, County Cost Plans and Local Apportionments Section, P.O. Box 942850, Sacramento, CA 94250.
- ◆ Reports are to be signed by the Director of Social Services and the County Auditor-Controller.
- ◆ Report 2008-09 second quarter deposits made October through December 2008.
- ◆ Refer to the remittance advice received with your payments.
- ◆ **Do not enter amounts in gray areas.**

Deposits

1. Sales Tax
 - d. Allocation In columns titled "October, November, and December" enter the total Amount allocated October 27, November 26, and December 24, 2008, Respectively.
 - e. Stabilization
W & I Code Sec. 17602(a) In column titled "November," enter the amount allocated November 26, 2008.
 - c. Total Sales Tax Revenue Enter the total of lines 1a and 1b.
2. Vehicle License Fees
 - d. Vehicle License Fees
Annual Base Enter the amount of county/city matching funds deposited as Vehicle License Fees in the columns titled "October, November, and December," enter the total amount allocated on October 27, November 26, and December 24, 2008, respectively.
3. Other (identify) Enter and identify all miscellaneous deposits.
4. Total Funds Deposited Enter the total of lines 1c, 2a and 3.

Disbursements

5. Transfers to Operating Funds Enter the total amounts transferred to other funds for spending purposes.
6. Other (identify) Enter and identify any other disbursements made during the second Quarter.
7. Total Funds Disbursed Enter the total of lines 5 and 6.

Transfers

8. Transfers In (Out) to Other
Trust Funds
W & I Code Sec. 17600.20 Enter the Transfers In (Out) between trust fund accounts.