

ANNUAL MHSA REVENUE AND EXPENDITURE REPORT and ADJUSTMENT WORKSHEET COUNTY CERTIFICATION

County/City: Mono

Local Behavioral Health Director

Name: Robin K. Roberts

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Document for Certification:

DHCS 1822A-J Revenue and Expenditure Report

FY: 2022/2023

I hereby certify¹ under penalty of perjury under the laws of the State of California that the attached Annual MHSA Revenue and Expenditure Report or Adjustments to Revenue or Expenditure Summary Worksheet is complete and accurate to the best of my knowledge.

Robin Roberts


Robin Roberts (Jan 31, 2024 15:10 PST)

Jan 31, 2024

Local Behavioral Health Director
(PRINT NAME)

Signature

Date

¹ Welfare and Institutions Code section 5899 (a)






Mono DHCS_1820-Certification_Form

Final Audit Report

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