

ANNUAL MHSA REVENUE AND EXPENDITURE REPORT and ADJUSTMENT WORKSHEET COUNTY CERTIFICATION

County/City: Mono

Local Behavioral Health Director

Name: Robin K. Roberts

Telephone: 760-924-1740

Email: rroberts@mono.ca.gov

Document for Certification:


MHSA Annual Revenue and Expenditure Report

FY:

2021/2022

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 K. Roberts


Robin Roberts (Jan 31, 2023 14:12 PST)

Jan 31, 2023

Local Behavioral Health Director
(PRINT NAME)

Signature

Date

¹ Welfare and Institutions Code section 5899 (a)






DHCS_1820-Certification_Form

Final Audit Report

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