COMMISSION ON STATE MANDATES

980 NINTH STREET, SUITE 300 SACRAMENTO, CA 95814 PHONE: (916) 323-3562 FAX: (916) 445-0278 E-mail: csminfo@csm.ca.gov



October 3, 2014

Jim L. Spano
State Controller's Office
Division of Audits
Post Office Box 942850
Sacramento, California 94250-5874

And Parties, Interested Parties, and Interested Persons (See Mailing List)

Re: Request for Additional Information

Incorrect Reduction Claim

Health Fee Elimination 05-4206-I-03

Education Code Section 76355

Statutes 1984, chapter 1; Statutes 1987, chapter 1118

Long Beach Community College District, Claimant

Dear Mr. Spano:

Commission staff requests additional information and evidence from the Controller's Office regarding Finding 1 of the audit for the above entitled matter. Specifically, the audit identifies a reduction totaling \$11,869 for fiscal years 2001-2002 and 2002-2003 for athletic insurance premiums that were not provided for in the parameters and guidelines. In comments on the draft proposed decision, the claimant disputes this finding, and asserts that the Controller has not "described how the disallowance was calculated" and that "only the Controller has the documentary support to show how these costs were reallocated".

The evidence in the record does not support this audit finding and the Commission therefore requests additional information regarding the evidentiary basis for this reduction.

Commission staff requests that the Controller provide a response to these questions posed above on or before October 20, 2014.

Sincerely,

Heather Halsey

Executive Director

DECLARATION OF SERVICE BY EMAIL

I, the undersigned, declare as follows:

I am a resident of the County of Yolo and I am over the age of 18 years, and not a party to the within action. My place of employment is 980 Ninth Street, Suite 300, Sacramento, California 95814.

On October 3, 2014, I served the:

Request for Additional Information

Health Fee Elimination, 05-4206-I-03 Education Code Section 76355 Statutes 1984, Chapter 1, 2nd E.S.; Statutes 1987, Chapter 1118 Fiscal Years 2001-2002 and 2002-2003

Long Beach Community College District, Claimant

by making it available on the Commission's website and providing notice of how to locate it to the email addresses provided on the attached mailing list.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct, and that this declaration was executed on October 3, 2014 at Sacramento, California.

Jason Hone

Commission on State Mandates

980 Ninth Street, Suite 300

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(916) 323-3562

9/23/2014 Mailing List

COMMISSION ON STATE MANDATES

Mailing List

Last Updated: 8/18/14

Claim Number: 05-4206-I-03

Matter: Health Fee Elimination

Claimant: Long Beach Community College District

TO ALL PARTIES, INTERESTED PARTIES, AND INTERESTED PERSONS:

Each commission mailing list is continuously updated as requests are received to include or remove any party or person on the mailing list. A current mailing list is provided with commission correspondence, and a copy of the current mailing list is available upon request at any time. Except as provided otherwise by commission rule, when a party or interested party files any written material with the commission concerning a claim, it shall simultaneously serve a copy of the written material on the parties and interested parties to the claim identified on the mailing list provided by the commission. (Cal. Code Regs., tit. 2, § 1181.3.)

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