State of California
Health and Human Services Agency

Department of Health Care Services

ANNUAL MHSA REVENUE AND EXPENDITURE REPORT and ADJUSTMENT WORKSHEET COUNTY CERTIFICATION

County/City: Fresno

Local Behavioral Health Director

Name: Susan Holt

Telephone: (559) 600-9058

Email: sholt@fresnocountyca.gov

Document for Certification:

MHSA RER **FY:** 2,122.00

I hereby certify[1] 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.

Sean Patterson for Susan Holt	Sean Patterson Digitally signed by Sean Patterson Date: 2023.01.31 13:53:05 -08'00'	01/31/2023
Local Behavioral Health Director (PRINT NAME)	Signature	Date

[1] Welfare and Institutions Code section 5899 (a)