

## ANNUAL MHSA REVENUE AND EXPENDITURE REPORT and ADJUSTMENT WORKSHEET COUNTY CERTIFICATION

County/City: IMPERIAL COUNTY

### Local Mental Health Director

Name: Leticia Plancarte Garcia

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### Document for Certification:

MHSA Annual Revenue and Expenditure Report

FY: 2020-2021

I hereby certify<sup>1</sup> 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.

Leticia Plancarte Garcia

Local Mental Health Director (PRINT)

 01/31/2022  
Signature Date

<sup>1</sup> Welfare and Institutions Code section 5899(a)