CalSAWS M&E	☐ CalWIN Migration
Distribution Date:	August 9, 2022
То:	Fiscal.Admin.Mgmt.18; Fiscal.Admin.Mgmt.Riverside; Fiscal.Admin.Mgmt.San Bernardino  CC: PPOC.18; PPOC.Riverside; PPOC.San Bernardino; Consortium.RegionalManagers.R1; Consortium.RegionalManagers.R2; Consortium.RegionalManagers.R4; Consortium.RegionalManagers.R5; PMO.Fiscal@CalSAWS.org; MurphyH@CalSAWS.org; UppalG@CalSAWS.org; CarlsonB@CalSAWS.org BerhelT@CalSAWS.org; GatesM@CalSAWS.org; DrohanS@CalSAWS.org; WeinmeisterT@CalSAWS.org; SAWSFiscal@osi.ca.gov
CIT Name:	SB 1341 Automation County Claim Form and Instructions, SFY 2022-23
From:	CalSAWS Project

## PPOCs, please forward to the appropriate impacted staff in your county:

General	
Policy	☐ Fiscal
□CW	Caseload Movement
□CF	
□MC	☐ Fiscal
□CMSP	☐ Security
□FC/KG/AAP	Batch and Interfaces
Child Care	☐ Imaging
☐W†W	
Other Program(s)	Conversion
☐ BenefitsCal ☐ Your Benefits Now!	☐ Technical
Customer Correspondence	☐ Training
Other County Budget Personnel	☐ Help Desk

Description: (Including any step-by-step instructions)

### Purpose (CalWIN, Riverside and San Bernardino counties)

The purpose of this CIT is to provide the SB 1341 Automation State Fiscal Year (SFY) 2022-23 claim form and instructions for claiming SB 1341 Automation related expenditures starting with the July 2022 claim cycle.

### **Background**

Beginning with the July 2022 claim cycle, counties will utilize the attached claim form to claim monthly costs for SB 1341 Automation.

#### **Additional Information**

The claim form is the Excel workbook that includes the Claim and CAP worksheets which are to be recycled and used every month to claim county costs. The Instructions document is also attached for reference.

# County Action To claim SB 1341 Automation related expenditures using the attached claim form. Counties are to complete the county name/number, claim month, contact information and costs starting with the July 2022 claim cycle. **Key Points** • Please submit claims no later than the 20th of the month following the month your county paid the costs. • Please consult and track your county's allocation amounts to determine which line-items are applicable to your county for claiming. Please submit your Excel file, PDF of signed and dated Claim with Cost Allocation Plan (CAP), and supporting documents attached as three (3) separate files in one email to: OSI- SAWSFiscal@osi.ca.gov CDSS- SAWS.CountyClaims@dss.ca.gov CalSAWS Project- PMO.Fiscal@CalSAWS.org If you have questions on this CIT, please reach out to the Primary Contact listed below and cc your Regional Managers. Primary Project Stacey Drohan Contact: (916) 846-7332 (Name and PMO.Fiscal@CalSAWS.org email address) Backup Project Tracy Berhel Contact: (916) 846-7304 (Name and PMO.Fiscal@CalSAWS.org email address) Attachments: SB 1341 Automation Claim CAP SFY 2022-23 Final.xlsx SB 1341 Automation Claim CAP SFY 2022-23 Final.docx Web Portal Link: OR You may also retrieve the CIT document and attachments by following these steps: 1. Click on the CRFIs & CITs link at the top of the page. 2. Click on the "CalSAWS Information Transmittal (CIT)" folder. 3. Click on the "2022" folder. 4. Click on the appropriate CIT # folder.