

**MEASURE C CITIZEN OVERSIGHT COMMITTEE**  
**Fiscal Year 2017-2018 LOCAL AGENCY BUDGET FORM**

This Form is used to report your planned budget for Measure C Pass-Through Funding. Please complete each page and e-mail entire form to Fresno COG staff member Brenda Veenendaal at [brendav@fresnocog.org](mailto:brendav@fresnocog.org)

**City of Coalinga**

Date first completed or revised: \_\_\_\_\_ Completed by: (print) \_\_\_\_\_  
 Date last completed or revised: \_\_\_\_\_ Date approved by COC: (staff use only): \_\_\_\_\_

The anticipated Fiscal Year 2017-18 revenue allocation for **Street Maintenance** sub-program: **\$197,160**

Select the type of expenditure (check one for each project)

Expenditure Amount Totals

|  |   |   |                                       |
|--|---|---|---------------------------------------|
| A.   | Street Maintenance Rehabilitation<br>Street Maintenance Reconstruction<br>Street Maintenance Storm Damage Repair  | <i>(check one, then give detailed, itemized description in section L)</i> |                                       |
| B.   | Street Maintenance Rehabilitation<br>Street Maintenance Reconstruction<br>Street Maintenance Storm Damage Repair  | <i>(check one, then give detailed, itemized description in section L)</i> |                                       |
| C.   | Street Maintenance Rehabilitation<br>Street Maintenance Reconstruction<br>Street Maintenance Storm Damage Repair  | <i>(check one, then give detailed, itemized description in section L)</i> |                                       |
| D.   | Total 2017-2018 Street Maintenance Planned Expenditures (Items A, B & C):   |   |                                       |
| E.   | Fiscal Year 2017-18 Street Maintenance Funds to be kept in reserve: *   |   |                                       |
| *Please indicate why 2017-2018 funds are being reserved: |   |   |                                       |
| F.   | Total of expenditures in lines D & E above: <i>Total on Line F must match the 2017-2018 revenue allocation in blue at the top right hand area of this page.</i>         |   |                                       |
| G.   | Total of all cumulative Street Maintenance funds held in reserve accounts through June 30, 2017:  |   |                                       |
| H.   | Will you be using 2017-2018 Street Maintenance funds in conjunction with other Fiscal Year 2017-2018 Local Agency Pass Through Funds?                                   |   | Yes No                                |
| I.   | If you marked yes above, select what other type of Local Pass-Through funds will be used for the expenditures listed in A, B and C above: <i>(check all that apply)</i> |   | Flexible<br>ADA<br>Bikeways<br>Trails |
| J.   | Are you using Matching Funds that are NOT from Measure C? If yes, indicate what type of funds:  |   | Yes No                                |
| K.   | Will you use previous fiscal year reserve funds during this fiscal year?  |   | Yes No                                |

L. Give detailed, itemized descriptions of projects or items listed above in section A, B or C. You may attach additional pages of description or documentation if needed:

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**Fiscal Year 2017-2018 LOCAL AGENCY BUDGET FORM**

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**City of Coalinga**

The anticipated Fiscal Year 2017-18 revenue allocation for **ADA Compliance** sub-program: **\$6,901**

| Select the type of expenditure (give detailed, itemized descriptions at bottom)  | Expenditure Amount Totals             |
|--|---------------------------------------|
| A. ADA Curb Cuts and Ramps<br>Signage/Striping<br>Other program related & support facilities<br><i>(check one, then give detailed, itemized description in section L)</i>  |                                       |
| B. ADA Curb Cuts and Ramps<br>Signage/Striping<br>Other program related & support facilities<br><i>(check one, then give detailed, itemized description in section L)</i>  |                                       |
| C. ADA Curb Cuts and Ramps<br>Signage/Striping<br>Other program related & support facilities<br><i>(check one, then give detailed, itemized description in section L)</i>  |                                       |
| D. Total <b>2017-2018 ADA Compliance</b> Planned Expenditures (Items A, B & C):  |                                       |
| E. Fiscal Year 2017-18 <b>ADA Compliance</b> Funds to be kept in reserve: *  |                                       |
| *Please indicate why 2017-2018 funds are being reserved:   |                                       |
| F. Total of expenditures in lines D & E above: <i>Total on Line F must match the 2017-2018 revenue allocation in blue at the top right hand area of this page.</i>         |                                       |
| G. <b>Total of all cumulative ADA Compliance funds held in reserve accounts through June 30, 2017:</b>   |                                       |
| H. Will you be using <b>2017-2018 ADA Compliance</b> funds in conjunction with other Fiscal Year <b>2017-2018</b> Local Agency Pass Through Funds?                         | Yes      No                           |
| I. If you marked yes above, select what other type of Local Pass-Through funds will be used for the expenditures listed in A, B and C above: <i>(check all that apply)</i> | Flexible<br>ADA<br>Bikeways<br>Trails |
| J. Are you using Matching Funds that are NOT from Measure C? If yes, indicate what type of funds:  | Yes      No                           |
| K. Will you use previous fiscal year reserve funds during this fiscal year?  | Yes      No                           |

L. Give detailed, itemized descriptions of projects or items listed above in section A, B or C. You may attach additional pages of description or documentation if needed:

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**City of Coalinga**

The anticipated Fiscal Year 2017-18 revenue allocation for Flexible sub-program: **\$236,590**

Write it the type of expenditure (give detailed, itemized descriptions at bottom) Expenditure Amount Totals

|  |   |
|--|---|
| A. Type of expenditure:  |   |
| B. Type of expenditure:  |   |
| C. Type of expenditure:  |   |
| D. Total 2017-2018 Flexible Funding Planned Expenditures (Items A, B & C):   |   |
| E. Fiscal Year 2017-18 Flexible Funding to be kept in reserve: *   |   |
| Please indicate why 2017-2018 funds are being reserved:  |   |
| F. Total of expenditures in lines D & E above: <i>Total on Line F must match the 2016-2017 revenue allocation in blue at the top right hand area of this page.</i>           |   |
| G. Total of all cumulative Flexible funds held in reserve accounts through June 30, 2017:  |   |
| H. Will you be using 2017-2018 Flexible Funding in conjunction with other Fiscal Year 2017-2018 Local Agency Pass Through Funds ( <i>Street Maintenance, ADA, etc.</i> )     | Yes      No                                     |
| I. If you marked yes above, select what other type of Local Pass-Through funds will be used for the expenditures listed in A, B and C above: ( <i>check all that apply</i> ) | Street Maintenance<br>ADA<br>Bikeways<br>Trails |
| J. Are you using Matching Funds that are NOT from Measure C? If yes, indicate what type of funds:  | Yes      No                                     |
| K. Will you use previous fiscal year reserve funds during this fiscal year?  | Yes      No                                     |

L. Give detailed, itemized descriptions of projects or items listed above in section A, B or C. You may attach additional pages of description or documentation if needed: