MEASURE C CITIZEN OVERSIGHT COMMITTEE Fiscal Year 2018-2019 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 <u>brendav@fresnocog.org</u>

City of Huron

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

The anticipated Fiscal Year 2018-19 revenue allocation for Street Maintenance sub-program: <u>\$114,350</u>

Select the type of expenditure (check one for each project)		Expenditure Amount Totals
A. Street Maintenance Rehabilitation Street Maintenance Reconstruction Street Maintenance Storm Damage Repair	(check one, then give detailed, itemized description in section L)	
 B. Street Maintenance Rehabilitation B. Street Maintenance Reconstruction Street Maintenance Storm Damage Repair 	(check one, then give detailed, itemized description in section L)	
C. Street Maintenance Rehabilitation Street Maintenance Reconstruction Street Maintenance Storm Damage Repair	(check one, then give detailed, itemized description in section L)	
D. Total 2018-19 Street Maintenance Planned Exp	enditures (Items A, B & C):	
E. Fiscal Year 2018-19 Street Maintenance Funds	to be kept in reserve: *	
*Please indicate why 2018-19 funds are being read	served:	
F. Total of expenditures in lines D & E above: <u>Total</u> <u>revenue allocation in blue at the top right hand area</u>		
G. Total of <u>all cumulative Street Maintenance func</u> June 30, 2018:	ls held in reserve accounts through	
H. Will you be using 2018-19 Street Maintenance funds in conjunction with other Fiscal Year 2018-19 Local Agency Pass Through Funds?		Yes No
. 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 ADA Bikeways 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 du	ring this figuel 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:

MEASURE C CITIZEN OVERSIGHT COMMITTEE Fiscal Year 2018-2019 LOCAL AGENCY BUDGET FORM

This Form is used to report your planned budget for all **Fiscal Year 2018-19** Measure C Pass-Through Funding. Please complete all Forms and e-mail to Fresno COG at <u>brendav@fresnocog.org</u>

City of Huron

The anticipated Fiscal Year 2018-19 revenue allocation for <u>ADA Compliance</u> sub-program: <u>\$4,002</u>

ADA Curb Cuts and Ramps (check one, then give detailed, itemized description in section L) ADA Curb Cuts and Ramps (check one, then give detailed, itemized description in section L) B. Signage/Striping (check one, then give detailed, itemized description in section L) Other program related & support facilities (check one, then give detailed, itemized description in section L) ADA Curb Cuts and Ramps (check one, then give detailed, itemized description in section L) Other program related & support facilities (check one, then give detailed, itemized description in section L) Other program related & support facilities (check one, then give detailed, itemized description in section L) Other program related & support facilities (check one, then give detailed, itemized description in section L) Other program related & support facilities (check one, then give detailed, itemized description in section L) D. Total 2018-19 ADA Compliance Planned Expenditures (Items A, B & C): E E. Fiscal Year 2018-19 ADA Compliance Funds to be kept in reserve: * * *Please indicate why 2018-19 funds are being reserved: F F. Total of expenditures in lines D & E above: Total on Line F must match the 2018-19 revenue allocation in blue at the top right hand area of this page. G G. Total of all cumulative ADA Compliance funds held in reserve accounts through June 30, 2018:	nount Totals
ADA Curb Cuts and Ramps (check one, then give detailed, itemized description in section L) B. Signage/Striping (check one, then give detailed, itemized description in section L) C. Signage/Striping (check one, then give detailed, itemized description in section L) D. Other program related & support facilities (check one, then give detailed, itemized description in section L) D. Total 2018-19 ADA Compliance Planned Expenditures (Items A, B & C): [check one, then give detailed, itemized description in section L) E. Fiscal Year 2018-19 ADA Compliance Funds to be kept in reserve: * [check one, then give detailed, itemized description in section L) F. Total of expenditures in lines D & E above: Total on Line F must match the 2018-19 revenue allocation in blue at the top right hand area of this page. [check one, then give detailed, itemized description in section L) G. Total of all cumulative ADA Compliance funds held in reserve accounts through June 30, 2018: [check one, then give detailed, itemized description in section L) H. Will you be using 2018-19 ADA Compliance funds in conjunction with other Fiscal Year 2018-19 Local Agency Pass Through Funds? Yes Ne 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: (check all that apply) Street Main Bikeways Trails J. Are you using Matching Fund	
C. Signage/Striping Other program related & support facilities itemized description in section L) D. Total 2018-19 ADA Compliance Planned Expenditures (Items A, B & C): E E. Fiscal Year 2018-19 ADA Compliance Funds to be kept in reserve: * * *Please indicate why 2018-19 funds are being reserved: F F. Total of expenditures in lines D & E above: <u>Total on Line F must match the 2018-19</u> revenue allocation in blue at the top right hand area of this page. G G. Total of all cumulative ADA Compliance funds held in reserve accounts through June 30, 2018: F H. Will you be using 2018-19 ADA Compliance funds in conjunction with other Fiscal Year <u>2018-19</u> Local Agency Pass Through Funds? Yes 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: (check all that apply) Flexible Street Main Bikeways Trails J. Are you using Matching Funds that are NOT from Measure C? If yes, indicate what H	
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	tenance
type of funds: Yes No)
K. Will you use previous fiscal year reserve funds during this fiscal year? Yes No I. Give detailed, itemized descriptions of projects or items listed above in section A. B or C. You may 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:

MEASURE C CITIZEN OVERSIGHT COMMITTEE Fiscal Year 2018-2019 LOCAL AGENCY BUDGET FORM

This Form is used to report your planned budget for all **Fiscal Year 2017-18** Measure C Pass-Through Funding. Please complete all Forms and e-mail to Fresno COG at <u>brendav@fresnocog.org</u>

City of Huron

The anticipated Fiscal Year 2018-19 revenue allocation for <u>Flexible</u> sub-program: \$131,370

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 2018-19 Flexible Funding Planned Expenditures (Items A, B & C):	
E. Fiscal Year 2018-19 Flexible Funding to be kept in reserve: *	
Please indicate why 2018-19 funds are being reserved:	
F. Total of expenditures in lines D & E above: <u>Total on Line F must match the 2018-19</u> revenue allocation in blue at the top right hand area of this page.	
 G. Total of <u>all</u> cumulative Flexible funds held in reserve accounts through June 30, 2018: 	
 H. Will you be using 2018-19 Flexible Funding in conjunction with other Fiscal Year 2018-19 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: (check all that apply)	Street Maintenance ADA Bikeways 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: