# 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 brendav@fresnocog.org

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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: \$192,245

Select the type of expenditure (check one for each project) **Expenditure Amount Totals** Street Maintenance Rehabilitation (check one, then give detailed, A. Street Maintenance Reconstruction itemized description in section L) Street Maintenance Storm Damage Repair Street Maintenance Rehabilitation (check one, then give detailed, Street Maintenance Reconstruction B. itemized description in section L) Street Maintenance Storm Damage Repair Street Maintenance Rehabilitation (check one, then give detailed, Street Maintenance Reconstruction C. itemized description in section L) Street Maintenance Storm Damage Repair D. Total **2018-19 Street Maintenance** Planned Expenditures (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 reserved: 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. Total of all cumulative **Street Maintenance** funds held in reserve accounts through June 30, 2018: H. Will you be using 2018-19 Street Maintenance funds in conjunction with other Yes No Fiscal Year 2018-19 Local Agency Pass Through Funds? Flexible I. If you marked yes above, select what other type of Local Pass-Through funds will ADA be used for the expenditures listed in A, B and C above: (check all that apply) **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:

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### **City of Kerman**

The anticipated Fiscal Year 2018-19 revenue allocation for ADA Compliance sub-program: \$6,729

Select the type of expenditure (give detailed, itemiz	<b>Expenditure Amount Totals</b>	
ADA Curb Cuts and Ramps A. Signage/Striping Other program related & support facilities	(check one, then give detailed, itemized description in section L)	
ADA Curb Cuts and Ramps B. Signage/Striping Other program related & support facilities	(check one, then give detailed, itemized description in section L)	
ADA Curb Cuts and Ramps C. Signage/Striping Other program related & support facilities	(check one, then give detailed, itemized description in section L)	
D. Total 2018-19 ADA Compliance Planned Expen	aditures (Items A, B & C):	
E. Fiscal Year 2018-19 <b>ADA Compliance</b> Funds to	be kept in reserve: *	
*Please indicate why 2018-19 funds are being reso	erved:	
F. Total of expenditures in lines D & E above: <u>Total</u> revenue allocation in blue at the top right hand area of		
G. Total of <u>all</u> cumulative <b>ADA Compliance</b> funds June 30, 2018:	held in reserve accounts through	
H. Will you be using <b>2018-19</b> ADA Compliance fun Fiscal Year <b>2018-19</b> Local Agency Pass Through	Yes No	
I. If you marked yes above, select what other type of be used for the expenditures listed in A, B and C a	Flexible Street Maintenance Bikeways Trails	
J. Are you using Matching Funds that are NOT from type of funds:	Yes No	
K. Will you use previous fiscal year reserve funds du	uring 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 Kerman**

The anticipated Fiscal Year 2018-19 revenue allocation for Flexible sub-program: \$229,528

Write it the type of expenditure (give detailed, itemized descriptions at bottom)	<b>Expenditure Amount Totals</b>
A. Type of expenditure:	
B. Type of expenditure:	
C. Type of expenditure:	
D. Total <b>2018-19 Flexible Funding</b> Planned Expenditures (Items A, B & C):	
E. Fiscal Year 2018-19 <b>Flexible Funding</b> 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 <b>Flexible</b> funds held in reserve accounts through <b>June 30</b> , <b>2018</b> :	
H. Will you be using <b>2018-19</b> Flexible Funding in conjunction with other Fiscal Year <b>2018-19</b> 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: