## MEASURE C CITIZEN OVERSIGHT COMMITTEE Fiscal Year 2019-2020 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 <a href="mailto:brendav@fresnocog.org">brendav@fresnocog.org</a>

**Completed by:** (print)

**City of Firebaugh** 

**Date first completed or revised:** 

Date last completed or revised:	Date approved by COC: (staff use only	Date approved by COC: (staff use only)		
The anticipated Fiscal Year 2019-2020 revenue	ue allocation for Street Maintenar	nce sub-program: <u>\$129,588</u>		
Select the type of expenditure (check one for eac	ch project)	<b>Expenditure Amount Totals</b>		
A. Street Maintenance Rehabilitation A. Street Maintenance Reconstruction Street Maintenance Storm Damage Repai	(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 C. Street Maintenance Reconstruction Street Maintenance Storm Damage Repair	(check one, then give detailed, itemized description in section L)			
D. Total 2019-2020 Street Maintenance Planned	Expenditures (Items A, B & C):			
E. Fiscal Year 2019-2020 Street Maintenance Funds to be kept in reserve: *				
* Please indicate why 2019-2020 funds are being	g reserved:			
F. Total of expenditures in lines D & E above: <u>Total revenue allocation in blue at the top right hand are</u>				
G. Total of <u>all</u> cumulative <b>Street Maintenance</b> fur <b>June 30, 2019:</b>	nds held in reserve accounts through			
H. Will you be using <b>2019-2020</b> Street Maintenand Fiscal Year <b>2019-2020</b> Local Agency Pass Thro	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)		Flexible ADA Bikeways Trails		
J. Are you using Matching Funds that are NOT fro type of funds:	om Measure C? If yes, indicate what	Yes No		
K. Will you use previous fiscal year reserve funds	Yes No			
L. Give detailed, itemized descriptions of project additional pages of description or documentation		3 or C. You may attach		
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#### **MEASURE C CITIZEN OVERSIGHT COMMITTEE**

#### Fiscal Year 2019-2020 LOCAL AGENCY BUDGET FORM

This Form is used to report your planned budget for all **Fiscal Year 2019-2020** Measure C Pass-Through Funding. Please complete all Forms and e-mail to Fresno COG at <a href="mailto:brenday@fresnocog.org">brenday@fresnocog.org</a>

### **City of Firebaugh**

The anticipated Fiscal Year 2019-2020 revenue allocation for ADA Compliance sub-program: \$4,536

Selec	et the type of expenditure (give detailed, itemize	ed descriptions at bottom)	Expenditur	e Amount Totals
	ADA Curb Cuts and Ramps	(check one, then give detailed,		
A.	Signage/Striping Other program related & support facilities	itemized description in section L)		
	Other program related & support facilities ADA Curb Cuts and Ramps	,		
B.	Signage/Striping	(check one, then give detailed,		
В.	Other program related & support facilities	$itemized\ description\ in\ section\ L)$		
	ADA Curb Cuts and Ramps			
C.	Signage/Striping	(check one, then give detailed,		
С.	Other program related & support facilities	itemized description in section $L$ )		
D.	Total <b>2019-2020 ADA Compliance</b> Planned Exp	penditures (Items A, B & C):		
E.	Fiscal Year <b>2019-2020 ADA Compliance</b> Funds	to be kept in reserve: *		
*	Please indicate why 2019-2020 funds are being r	reserved:		
	Total of expenditures in lines D & E above: <i>Total</i>	l on Line E must match the 2010 2020		
	revenue allocation in blue at the top right hand area of			
	Total of <u>all</u> cumulative <b>ADA Compliance</b> funds l <b>June 30, 2019:</b>	held in reserve accounts through		
H. Will you be using <b>2019-2020</b> ADA Compliance funds in conjunction with other Fiscal Year <b>2019-2020</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: (check all that apply)		Flexibl	e	
		ADA		
		Bikewa	ays	
			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	uring this fiscal year?	Yes	No
<ul><li>K. Will you use previous fiscal year reserve funds during this fiscal year?</li><li>L. Give detailed, itemized descriptions of projects or items listed above in section A, B</li></ul>				
	additional pages of description or documentatio		B 01 C. 1 0 u 1	may attach
	additional pages of description of documentation	II II liceded.		

# MEASURE C CITIZEN OVERSIGHT COMMITTEE Fiscal Year 2019-2020 LOCAL AGENCY BUDGET FORM

This Form is used to report your planned budget for all **Fiscal Year 2019-2020** Measure C Pass-Through Funding. Please complete all Forms and e-mail to Fresno COG at brenday@fresnocog.org

### **City of Firebaugh**

The anticipated Fiscal Year 2019-2020 revenue allocation for Flexible sub-program: \$149,756

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 <b>2019-2020 Flexible Funding</b> Planned Expenditures (Items A, B & C):					
E. Fiscal Year 2019-2020 Flexible Funding to be kept in reserve: *					
* Please indicate why 2019-2020 funds are being reserved:					
F. Total of expenditures in lines D & E above: <u>Total on Line F must match the 2019-2020</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, 2019</b> :					
H. Will you be using <b>2019-2020</b> Flexible Funding in conjunction with other Fiscal Year <b>2019-2020</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:					