

**MEASURE C EXTENSION REGIONAL PUBLIC TRANSIT PROGRAM  
PASS THROUGH REVENUES FOR CLOVIS TRANSIT SUB PROGRAM  
FY2019-20 REPORTING REQUIREMENTS**

(Completed form must be submitted to FCTA no later than November 15th or future funds will be stopped until compliance is met.  
Complete one form for each Sub Program and detail the expenditures in the Schedule of Projects on the 2nd page.)

Date  
Accepted  
By FCTA

TO: Fresno County Transportation Authority (Name of Agency)  
 FROM: City of Clovis  
 Address: 1033 Fifth Street  
 Contact Name: Amy Hance Phone: 559-324-2769 FAX: 559-324-2858  
 Email Address: amvh@cityofclovis.com

**Regional Public Transit Program  
Clovis Transit Sub Program Reporting for FY19/20:**

Total Clovis Transit Revenue Allocations to Date: \$ 16,219,844.77

Clovis Transit Beginning Fund Balance: 0.00  
 Prior Year Adjustments: 0.00  
 Clovis Transit Adjusted Beginning Fund Balance: 0.00  
 Clovis Transit Revenues: 1,519,787.11  
 Clovis Transit Interest Revenue: 0.00

Total Clovis Transit Available Fund Balance: \$ 1,519,787.11

Total Clovis Transit Expenditures: 1,519,787.11  
 (You must detail expenditures below)  
 Net Change (+/-) 0.00

FY19/20 Clovis Transit Ending Balance: \$ -  
 (Ending Balance reflect reserve balances.)

This amount should match your prior year Ending Balance reported to Authority.  
 This amount reflects adjustments made to this program after your prior year reports were filed. Indicate supporting details below.  
 They should match this amount.  
 This amount adds for you and will reflect your adjusted Beginning Balance after prior year adjustment.  
 This amount should match the revenue allocations reported to you by the Authority and your Financial Reports.  
 This amount represents interest revenue allocated to the sub program by the Agency for the fiscal year, as required.  
 This amount adds for you and represents available fund balance to the sub program before expenditures by the Agency for the fiscal year.  
 This amount represents your expenditures for the fiscal year for this sub program and should match the expenditures on page 2 of this report and your Financial Reports.  
 Net Change calculates for you (i.e. Revenue minus Expenditure)

Approximately 1.97% of the Measure C Extension Regional Public Transit Program is provided to Clovis Transit to fund Primary and Secondary Transit Programs. The goal of the Primary Program is to improve the level of public transit services within Clovis and to continue to seek ways to coordinate and/or consolidate services in order to achieve a seamless transit system to the public.

Eligible projects to the Primary Program would be to improve frequencies to every 15 minutes on the busiest routes of the public transportation system in Clovis; enhance the delivery of paratransit to the disabled community consistent with federal and state law; install and integrate a regional automated farebox system to enhance transit coordination and seamless passenger travel between transit systems; complete fleet conversion to low emissions buses; expand service areas to all riders as Clovis's Sphere of Influence changes and reduced general public transit fares to Seniors 65 years of age and older.

The goal of the Secondary Program are improvements that will be funded after Primary Programs are completed provided that funding is available. Eligible projects would be to extend weekend service hours; enhance the delivery of paratransit services to the senior community; pursue other alternative mass public transportation options such as bus rapid transit, automated people movers, light rail, etc. etc.; deploy other operational and infrastructure improvements such as "real time" bus arrival and departure information displays to provide better services to transit users and provide a Taxi Sctip Program for seniors 70 years or older.



Completed By: Amy Hance Title: General Services Manager Date: 10/29/2020  
 This Reporting Form was prepared under the direction of the Public Works Director, Engineer, Transit Administrator or Other Authorized Official of the agency listed above. By filing this form you are certifying that expenditures listed on this form are v









