MEASURE C CITIZEN OVERSIGHT COMMITTEE Fiscal Year 2023-2024 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 Jake Martinez at jmartinez@fresnocog.org

Barriella Caracia de C	Completed by: (print)		
Date last completed or revised:	Date approved by COC: (staff use or	าly)	
The anticipated Fiscal Year 2023-2024 revenue	allocation for Street Mainten	<mark>ance</mark> sub-prog	ram: <u>\$1,790,53</u>
Select the type of expenditure (check one for each	project)	Expenditure A	Amount Totals
A. Street Maintenance Rehabilitation A. 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 C. Street Maintenance Reconstruction Street Maintenance Storm Damage Repair	(check one, then give detailed, itemized description in section L)		
D. Total 2023-2024 Street Maintenance Planned Ex	xpenditures (Items A, B & C):		
E. Fiscal Year 2023-2024 Street Maintenance Fund	ds to be kept in reserve: *		
* Please indicate why 2023-2024 funds are being r	eserved:		
F. Total of expenditures in lines D & E above: <u>Total</u> revenue allocation in blue at the top right hand area.			
G. Total of <u>all</u> cumulative Street Maintenance fund June 30, 2023:	s held in reserve accounts through		
H. Will you be using 2023-2024 Street Maintenance Fiscal Year 2023-2024 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	<u> </u>	Flexible ADA Bikeway Trails	
J. Are you using Matching Funds that are NOT from type of funds:	Measure C? If yes, indicate what	Yes	No
K. Will you use previous fiscal year reserve funds du	uring this fiscal year?	Yes	No
	or items listed above in section A,	B or C. You ma	ay attach

Fiscal Year 2023-2024 LOCAL AGENCY BUDGET FORM

This Form is used to report your planned budget for all **Fiscal Year 2023-2024** Measure C Pass-Through Funding. Please complete all Forms and e-mail to Fresno COG at <u>jmartinez@fresnocog.org</u>

City of Clovis

The anticipated Fiscal Year 2023-2024 revenue allocation for ADA Compliance sub-program: \$62,669

Sele	ect the type of expenditure (give detailed, itemize	ed descriptions at bottom)	Expenditure Amount Totals
A.	ADA Curb Cuts and Ramps Signage/Striping Other program related & support facilities	(check one, then give detailed, itemized description in section L)	
B.	ADA Curb Cuts and Ramps Signage/Striping Other program related & support facilities	(check one, then give detailed, itemized description in section L)	
C.	ADA Curb Cuts and Ramps Signage/Striping Other program related & support facilities	(check one, then give detailed, itemized description in section L)	
D.	Total 2023-2024 ADA Compliance Planned Exp	enditures (Items A, B & C):	
E.	Fiscal Year 2023-2024 ADA Compliance Funds	to be kept in reserve: *	
2	Please indicate why 2023-2024 funds are being re	eserved:	
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 ADA Compliance funds had June 30, 2023:	neld in reserve accounts through	
Н.	Will you be using 2023-2024 ADA Compliance for Fiscal Year 2023-2024 Local Agency Pass Through		Yes No
I.	If you marked yes above, select what other type o be used for the expenditures listed in A, B and C a	<u> </u>	Flexible ADA Bikeways Trails
	Are you using Matching Funds that are NOT from type of funds:	Measure C? If yes, indicate what	Yes No
K.	Will you use previous fiscal year reserve funds du	ring this fiscal year?	Yes No
L.	Give detailed, itemized descriptions of projects of additional pages of description or documentation		3 or C. You may attach

Fiscal Year 2023-2024 LOCAL AGENCY BUDGET FORM

This Form is used to report your planned budget for all **Fiscal Year 2023-2024** Measure C Pass-Through Funding. Please complete all Forms and e-mail to Fresno COG at <u>jmartinez@fresnocog.org</u>

City of Clovis

The anticipated Fiscal Year 2023-2024 revenue allocation for Flexible sub-program: \$1,727,866

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 2023-2024 Flexible Funding Planned Expenditures (Items A, B & C):	
E. Fiscal Year 2023-2024 Flexible Funding to be kept in reserve: *	
* Please indicate why 2023-2024 funds are being reserved:	
F. Total of expenditures in lines D & E above: <u>Total on Line F must match the 2023-2024</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, 2023 :	
H. Will you be using 2023-2024 Flexible Funding in conjunction with other Fiscal Year 2023-2024 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, ladditional pages of description or documentation if needed:	B or C. You may attach

Fiscal Year 2023-2024 LOCAL AGENCY BUDGET FORM

This Form is used to report your planned budget for all **Fiscal Year 2023-2024** Measure C Pass-Through Funding. Please complete all Forms and e-mail to Fresno COG at jmartinez@fresnocog.org

City of Clovis

The anticipated Fiscal Year 2023-2024 revenue allocation for Pedestrian Urban Trails sub-program: \$421,638

3.	Rehab existing pedestrian trail Construct new pedestrian trail Signage/Striping Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail Signage/Striping Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail Construct new pedestrian trail Signage/Striping	(check one, then give detailed, itemized description in section L) (check one, then give detailed, itemized description in section L)	
3.	Signage/Striping Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail Signage/Striping Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail	itemized description in section L) (check one, then give detailed,	
	Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail Signage/Striping Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail	itemized description in section L) (check one, then give detailed,	
	Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail Signage/Striping Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail	(check one, then give detailed,	
	Rehab existing pedestrian trail Construct new pedestrian trail Signage/Striping Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail		
	Construct new pedestrian trail Signage/Striping Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail		
	Signage/Striping Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail		
<u> </u>	Master plan preparation & updates Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail		
7.	Other program related & support facilities Rehab existing pedestrian trail Construct new pedestrian trail	uemizea aeseripion in section Ey	
2.	Rehab existing pedestrian trail Construct new pedestrian trail		
<u>.</u>	Construct new pedestrian trail		
	Signage/Striping	(check one, then give detailed,	
		itemized description in section L)	
	Master plan preparation & updates	tiemized description in section Dy	
	Other program related & support facilities		
). Total	2023-2024 Pedestrian Urban Trail Planned	d Expenditures (Items A, B & C):	
E Fisca	l Year 2023-2024 Pedestrian U rban Trail F	Funds To Be Kent In Reserve: *	
		*	
* Pleas	e indicate why 2023-2024 funds are being re	served:	
. Total	of expenditures in lines D & E above: Total	on Line E must match the 2023, 2024	
	ue allocation in blue at the top right hand area of		
3. <mark>Total</mark>	of <u>all</u> cumulative Pedestrian Urban Trail f	unds held in reserve accounts	
<u>throu</u>	gh June 30, 2023:		
н и	7ill you be using 2023-2024 Pedestrian Urban	n Trail funds in conjunction with	N. M.
	iscal Year 2023-2024 Local Agency Pass Th		Yes No
	15041 1 041 <u>2020 2021</u> 20041 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	irough runus (ribri, riemote, etc.)	Ct. 1 M. i. t
I IC		611 D Thursh 61:11	Street Maintenance
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	
		ADA	
т .	' Mal' E 1 da NOTC	M CO.IC : 1: 4 1 4	Bikeways
	Are you using Matching Funds that are NOT from Metype of funds:	n Measure C? If yes, indicate what	
type			Yes No
K. Will	you use previous fiscal year reserve funds du	uring this fiscal year?	Yes No
	, <u>, , , , , , , , , , , , , , , , , , </u>		
	detailed, itemized descriptions of projects		B of C. You may attach
addı	tional pages of description or documentation	on it needed:	

Fiscal Year 2023-2024 LOCAL AGENCY BUDGET FORM

This Form is used to report your planned budget for all **Fiscal Year 2023-2024** Measure C Pass-Through Funding. Please complete all Forms and e-mail to Fresno COG at jmartinez@fresnocog.org

City of Clovis

The anticipated Fiscal Year 2023-2024 revenue allocation for Bicycle sub-program: \$107,416

Select t	he type of expenditure (give detailed, itemize	d descriptions at bottom)	Expenditur	e Amount Totals
	Class II Bicycle Facilities			
A.	Signage/Striping	(check one, then give detailed,		
	Master plan preparation & updates	itemized description in section L)		
	Other program related & support facilities			
-	Class II Bicycle Facilities	/ 1		
B.	Signage/Striping	(check one, then give detailed,		
	Master plan preparation & updates	itemized description in section L)		
	Other program related & support facilities			
	Class II Bicycle Facilities			
C.	Signage/Striping	(check one, then give detailed,		
	Master plan preparation & updates	itemized description in section L)		
	Other program related & support facilities			
D. To	otal 2023-2024 Bicycle Planned Expenditures (In	tems A, B & C):		
E. Fis	scal Year 2023-2024 Bicycle Funds To Be Kept	In Reserve: *		
* Ple	ease indicate why 2023-2024 funds are being re	eserved:		
F To	atal of avnanditures in lines D & E above: Total	on Line E must match the 2022 2024		
F. Total of expenditures in lines D & E above: <u>Total on Line F must match the 2023-2024</u> revenue allocation in blue at the top right hand area of this page.				
	* • • • • • • • • • • • • • • • • • • •			
G. To	otal of <u>all</u> cumulative Bicycle funds held in reser	ve accounts through		
Ju	ine 30, 2023:			
H. Wi	ill you be using 2023-2024 Bicycle funds in con	iunction with other	3.7	3. T
	scal Year 2023-2024 Local Agency Pass Through		Yes	No
		5 1 440 (1 10000)	Ctua at 1	Maintenance
I IC 1 1 1 1 1 CI 1D TI		ach founds will be used. (-LL-II		
-	If yes, select what other type of Local Pass-Through funds will be used: (check all		Flexibl	е
that ap	u appiy)		ADA	
			Trails	
	J. Are you using Matching Funds that are NOT from Measure C? If yes, indicate what			
typ	pe of funds:		Yes	No
K. W	ill you use previous fiscal year reserve funds du	ring this fiscal year?	Yes	No
	ve detailed, itemized descriptions of projects of ditional pages of description or documentation		B or C. You	may attach