MEASURE C CITIZEN OVERSIGHT COMMITTEE

Fiscal Year 2024-2025 LOCAL AGENCY BUDGET FORM
This Form is used to report your planned budget for Measure C Pass-Through Funding. Please complete each page

	Completed by: (print)	
	Date approved by COC: (staff use only)	
The anticipated Fiscal Year 2024-2025 revenue	allocation for Street Mainten	ance sub-program: \$233,425
•		
Select the type of expenditure (check one for each p	project)	Expenditure 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)	
Street Maintenance Rehabilitation B. Street Maintenance Reconstruction Street Maintenance Storm Damage Repair	(check one, then give detailed, itemized description in section L)	
Street Maintenance Rehabilitation C. Street Maintenance Reconstruction Street Maintenance Storm Damage Repair	(check one, then give detailed, itemized description in section L)	
D. Total 2024-2025 Street Maintenance Planned Exp	penditures (Items A, B & C):	
E. Fiscal Year 2024-2025 Street Maintenance Funds	s to be kept in reserve: *	
* Please indicate why 2024-2025 funds are being re-	served:	
F. Total of expenditures in lines D & E above: <u>Total of revenue allocation in blue at the top right hand area of the top right hand area.</u>		
G. Total of <u>all</u> cumulative Street Maintenance funds June 30, 2024:	held in reserve accounts through	
H. Will you be using 2024-2025 Street Maintenance f Fiscal Year 2024-2025 Local Agency Pass Through		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 from I type of funds:	Measure C? If yes, indicate what	Yes No
K. Will you use previous fiscal year reserve funds dur	ing this fiscal year?	Yes No
L. Give detailed, itemized descriptions of projects of	r items listed above in section A, if needed:	B or C. You may attach

MEASURE C CITIZEN OVERSIGHT COMMITTEE

Fiscal Year 2024-2025 LOCAL AGENCY BUDGET FORM
This Form is used to report your planned budget for all Fiscal Year 2024-2025 Measure C Pass-Through Funding. Please complete all Forms and e-mail to Fresno COG at jmartinez@fresnocog.org

City of Kingsburg

The anticipated Fiscal Year 2024-2025 revenue allocation for ADA Compliance sub-program: \$8,170

Sele	ect the type of expenditure (give detailed, itemize	ed descriptions at bottom)	Expenditure Amount Totals	
	ADA Curb Cuts and Ramps	(check one, then give detailed,		
A.	Signage/Striping	itemized description in section L)		
	Other program related & support facilities	tiemized description in section L)		
	ADA Curb Cuts and Ramps	(check one, then give detailed,		
В.	Signage/Striping	itemized description in section L)		
	Other program related & support facilities	itemizea description in section L)		
	ADA Curb Cuts and Ramps	(1-1111-1-1		
C.	Signage/Striping	(check one, then give detailed,		
	Other program related & support facilities	itemized description in section L)		
D. Total 2024-2025 ADA Compliance Planned Expenditures (Items A, B & C):				
E.	Fiscal Year 2024-2025 ADA Compliance Funds	to be kept in reserve: *		
,	* Please indicate why 2024-2025 funds are being re	eserved:		
F.	Total of expenditures in lines D & E above: <i>Total</i>	on Line F must match the 2024-2025		
	revenue allocation in blue at the top right hand area of			
G.	Total of <u>all</u> cumulative ADA Compliance funds h June 30, 2024:	neld in reserve accounts through		
H. Will you be using 2024-2025ADA Compliance funds in conjunction with other Fiscal Year 2024-2025 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)		Flexible		
		ADA		
		Bikeways		
		Trails		
J	J. Are you using Matching Funds that are NOT from Measure C? If yes, indicate what			
type of funds:				
	ype of failes.		Yes No	
1/	Will		N N	
	Will you use previous fiscal year reserve funds du	2	Yes No	
L.	Give detailed, itemized descriptions of projects of		3 or C. You may attach	
	additional pages of description or documentation	n if needed:		

MEASURE C CITIZEN OVERSIGHT COMMITTEE

Fiscal Year 2024-2025 LOCAL AGENCY BUDGET FORM
This Form is used to report your planned budget for all Fiscal Year 2024-2025 Measure C Pass-Through Funding.
Please complete all Forms and e-mail to Fresno COG at jmartinez@fresnocog.org

City of Kingsburg

The anticipated Fiscal Year 2024-2025 revenue allocation for Flexible sub-program: \$281,372

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 2024-2025 Flexible Funding Planned Expenditures (Items A, B & C):	
E. Fiscal Year 2024-2025 Flexible Funding to be kept in reserve: *	
* Please indicate why 2024-2025 funds are being reserved:	
F. Total of expenditures in lines D & E above: <u>Total on Line F must match the 2024-2025</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, 2024 :	
H. Will you be using 2024-2025Flexible Funding in conjunction with other Fiscal Year 2024-2025 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, additional pages of description or documentation if needed:	B or C. You may attach