



MEASURE B PROGRAM COMPLIANCE REPORT

Signature Cover Sheet *Fiscal Year 2013-14*

Agency Name:

Revision Number:

Choose the type(s) of report you are submitting (*check all that apply; Tables 1-3 are required*)

- Annual Program Compliance Report – Bicycle and Pedestrian Safety Funds
- Annual Program Compliance Report – Local Streets and Roads Funds
- Annual Program Compliance Report – Mass Transit Funds
- Annual Program Compliance Report – Paratransit Funds
- Tables 1- 3: Program Summary of Revenues, Expenditures, and Reserves (Excel workbook)

List any additional attachments included in the submittal (*check all that apply*).

- Attachment A: Bicycle and Pedestrian Attachments
- Attachment B: Local Streets and Roads Attachments
- Attachment C: Mass Transit Attachments
- Attachment D: Paratransit Attachments
- Other Attachments (*clearly label additional attachments as needed*)

Certification of True and Accurate Reporting

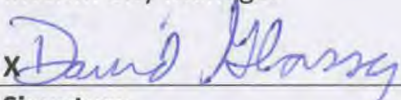
By signing below, the agency manager and finance manager, or their designees certify the compliance information reported are true and complete to the best of their knowledge, and the audited dollar figures matches exactly to the Measure B revenues and expenditures reported in the compliance report and Tables 1-3.

X 

Signature
Tony Acosta
Interim City Manager

18 Feb 2015

Date

X 

Signature
David Glasser
Administrative Services Director

02-18-15

Date



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BICYCLE AND PEDESTRIAN PROGRAM

Compliance Report Summary *Fiscal Year 2013-14*

1. Did your agency receive Measure B Bicycle and Pedestrian Funds in the reporting period of July 1, 2013 through June 30, 2014?

- Yes (Complete the Bicycle/Pedestrian section)
 No (Do not complete the Bicycle/Pedestrian section and continue on)

2. Complete the below contact information.

CONTACT INFORMATION	
Bicycle/Pedestrian Program Agency:	City of Union City
Contact Name:	Farooq Azim
Title:	Principal Civil Engineer
Phone Number:	(510) 675-5368
E-mail Address:	FAzim@UnionCity.Org

3. Complete the Excel Worksheets Tables 1 to 3 for the Bicycle and Pedestrian Program.
(Check the boxes below to indicate completion).

- Table 1: Measure B Revenues and Expenditures**
The values entered into Table 1 must match your agency's audited financial statements and compliance reports. **Please contact Alameda CTC staff if you have questions before submitting your report. All dollar figures must match your audited financial statements and compliance report or Alameda CTC may reject your submission.**
- Table 2: Summary of Expenditures and Accomplishments**
This table describes actual expenditures and activities incurred for FY 2013-2014 (FY 13-14).
- Table 3: Summary of Planned Projects and Reserve Funds**
This table describes your agency's plan to expend any remaining Measure B funds within the defined reserve policies of the funding agreement through FY 14-15 thru FY 17-18.

4. If your agency’s ending MB Direct Local Distribution Program fund balance was greater than ZERO, describe why you have this fund balance and identify larger anticipated projects that will use these funds within the next year. Indicate N/A if not applicable.

Complete Table 3 Summary of Planned Projects and Reserve Funds.

The fund balance is being kept for future expenditure under the Capital Reserve Fund under FY14-15 and FY15-16. The 14-15 Overlay project and the 14-15 Sidewalk repairs projects are two of the larger anticipated projects that will utilize these funds.

The Operational Fund Reserve also has a relatively healthy reserve to meet unanticipated needs and projects, as well as quantity overages, etc.

5. Did your agency expend MORE THAN the amount of Measure B funds received in FY 13-14? If yes, how much more did you expend using prior fund balances? Indicate N/A if not applicable.

N/A.

6. **Describe Reserve Funds.** If your agency has Measure B Reserve Funds identified, describe your process to allocate these funds and describe in detail your plan and time frame for using these funds. In addition, if the use of reserves requires additional agency approvals, what is your approval process? **Refer to Reserve Fund Guidance, and complete Table 3 Summary of Planned Projects and Reserve Funds.**

We do have Measure B funds in the Capital Fund Reserve as shown in Box 7 of Table 3. We have also allocated \$82,956 or 43% of the eligible reserve amount in Operation fund reserves this year. The Capital Fund Reserve is anticipated to be spent within the next two fiscal years.

All anticipated projects are included in the City’s budget which is approved by the City Council.

7. Alameda CTC uses the data from Table 2 to monitor compliance with the Master Programs Funding Agreement requirement (Section 5.1.d): "All projects and programs that use Measure B Bicycle and Pedestrian Safety pass-through funds must receive governing board approval prior to the jurisdiction expending the pass-through funding on the project/program."

If your agency expended funds on any projects not approved by your governing board in advance (as indicated in Column Q of Table 2: Governing Board Approval), list them below and explain why your agency expended funds without agency approval.

N/A. No funds were expended without City Council's approval. All projects are included in the budget approved by the City Council. Smaller projects, therefore, may not require additional City Council approvals so long as the City follows its standard bidding process approved by the City Attorney. The larger projects, which are required to go to bid, are also specifically approved by City Council for Award. All sources of project funding, such as Measure B or Measure F, are identified in the staff report and in resolution approving the projects.

8. **Describe the governing board approval for future planned projects and/or programs.** List the document type, time period, and resolution approval date. Examples include a bicycle and/or pedestrian plan, capital improvement plan, prioritized project list, etc.

Document Type	Time Period	Resolution Date
Adopted 2013-14 & 14-15 Operating Budget and Capital Improvement Program (CIP)	2013-14 and 2014-15	June 25, 2013 Reso. No. 4462-13

- 9a. **Verify Bicycle/Pedestrian Master Plan Adoption.** Per Section 7 of the Master Programs Fund Agreement Bicycle/Pedestrian Safety Program Implementation Guidelines, Alameda CTC requires local jurisdictions to have current individual or combined Bicycle and Pedestrian Master Plans **(updated every five years)** or demonstrate these plans will be adopted by December 31, 2015.

Does your agency have current Bicycle and Pedestrian Master Plans, and if so, when were these last adopted by your governing board? If not, describe the steps your agency is taking to ensure a Bicycle and Pedestrian Master Plans will be adopted by the December 31, 2015 deadline.

City of Union City Pedestrian and Bicycle Master Plan, dated January 2012, adopted on January 24, 2012 via Resolution No. 4259-12.

- 9b. Bicycle and Pedestrian Master Plans must include core elements to ensure the plans are effective and facilitate countywide planning.

- Required core elements for **pedestrian plans** are described in the *Toolkit for Improving Walkability in* http://www.alamedactc.org/files/managed/Document/11852/ACTIA_Ped_Toolkit_UPDATE_FINAL_EL_web_2009.pdf

- Alameda CTC is currently developing guidelines that outline required core elements for **bicycle plans**; these guidelines will apply to plans for which plan development commences after guidelines are completed. Until these guidelines are developed, bicycle plans should demonstrate that they contain the core elements from the California Streets and Highways Code Section 891.2 (see link below for a checklist of these items): http://www.dot.ca.gov/hq/LocalPrograms/bta/PDFs/Sec891_2.pdf

Which core elements are included in your agency’s Bicycle and Pedestrian Master Plan(s)?

Note that links to appendices of the plan document that demonstrate compliance with required core elements may be provided in response to this question.

Union City’s Master Plan includes all Eleven (11) core elements, which are shown in Table 1-1 on page 1-2 of the City’s Master Plan. The Table refers to each of the core elements and to the pages where the associated information can be found in the Master Plan. The link to the City’s website where the Plan is located is given below:
<http://www.unioncity.org/departments/economic-community-development/bike-and-ped-plan>

10. Did your agency publish an article(s) that highlight Bicycle/Pedestrian projects and programs funded by Measure B in an agency or Alameda CTC newsletter?

- Yes. If yes, complete the table below and INCLUDE a copy of the article(s) as Attachment A: Bicycle and Pedestrian Program Attachments.

Publication	Date Published (Month/Year)	Confirm Copy Attached? (Y/N)
Newsletter on City website – FY 2013-14 Measure B funded Bike & Ped Projects	7-30-2014	Y

- No. If no, explain in the box below.

11. Did your agency include a description of the Bicycle/Pedestrian projects and programs funded by Measure B on its website?

- Yes. If yes, include a printout of the website as Attachment A and provide the URL below that contains updated and accurate project information.

Website Address	Confirm Printout Copy Attached? (Y/N)
http://www.unioncity.org/departments/public-works/alameda-ctc	Y

- No. If no, explain in the box below.

12. Did your agency use signage that indicates use of Measure B funds for its Bicycle/Pedestrian projects and programs?

Yes. *If yes, include photos of the posted signage in Attachment A and describe the signage below.*

Signage Location / Project	Confirm Photos Attached? (Y/N)
Inspector's Truck/2013-14 Citywide Overlay	Y

No. *If no, explain in the box below.*

13a. Describe your agency's effectiveness at meeting your planned FY 13-14 expenditures reported in the last compliance report and reasons for any variations. Agencies are expected to expend their planned expenditures from their individual projects and/or and reserve funds. **Did your agency expend the amount planned?**

We were reasonably effective in meeting our planned expenditures and spent \$6,083 or 13% more than we had planned to spend in FY 13-14.

13b. If your agency expended LESS THAN the planned amount, provide detailed justification on why dollars were not spent, and reference specific projects that did not expend the funds as planned.
Indicate N/A if not applicable.

N/A.

13c. If your agency expended MORE THAN planned amount for a particular project/reserve, explain why and describe any adjustments to the reserves to finance the surplus amount. *Indicate N/A if not applicable.*

The expenditures were only about 13% more than planned due to the overage in overlay quantities. Funds from the Operation Fund Reserve were used to finance the \$6,083 shortage under Planned projects.

14. Provide additional information, if necessary, to further explain Measure B expenditures for the Bicycle and Pedestrian Program.



LOCAL STREETS AND ROADS (LSR) PROGRAM

Compliance Report Summary *Fiscal Year 2013-14*

1. Did your agency receive Measure B Local Streets and Roads Funds in the reporting period of July 1, 2013 through June 30, 2014?

- Yes (Complete the LSR section)
 NO (Do not complete the LSR section and continue on)

2. Complete the below contact information.

CONTACT INFORMATION	
LSR Program Agency:	City of Union City
Contact Name:	Farooq Azim
Title:	Principal Civil Engineer
Phone Number:	(510) 675-5368
E-mail Address:	FAzim@UnionCity.Org

3. Complete the Excel Worksheets Tables 1 to 3 for the Local Streets and Road Program.
(Check the boxes below to indicate completion).

- Table 1: Measure B Revenues and Expenditures**
The values entered into Table 1 must match your agency's audited financial statements and compliance reports. **Please contact Alameda CTC staff if you have questions before submitting your report. All dollar figures must match your audited financial statements and compliance report or Alameda CTC may reject your submission.**
- Table 2: Summary of Expenditures and Accomplishments**
This table describes actual expenditures and activities incurred for FY 2013-2014 (FY 13-14).
- Table 3: Summary of Planned Projects and Reserve Funds**
This table describes your agency's plan to expend any remaining Measure B funds within the defined reserve policies of the funding agreement through FY 14-15 thru FY 17-18.

4. If your agency’s ending MB Direct Local Distribution Program fund balance was greater than ZERO, describe why you have this fund balance and identify anticipated projects that will use these funds within the next year. Indicate N/A if not applicable. **Complete Table 3 Summary of Planned Projects and Reserve Funds.**

Table 3 shows that City’s annual overlay and slurry seal programs for FY 14-15, as well as the Huntwood Ave. /Whipple Road Intersections Improvements project, will exhaust most of the available fund balances.

In FY 13-14, City spent more funds than were received, as evident in Table 1.

5. Did your agency expend MORE THAN the amount of Measure B funds received in FY 13-14? If yes, how much more did you expend using prior fund balances? Indicate N/A if not applicable.

Yes. We spent \$882,249 or \$209,184 in excess of the \$673,065 received in FY13-14 using prior year’s fund balance.

6. **Describe Reserve Funds.** If your agency has Measure B Reserve Funds identified, describe your process to allocate these funds and describe in detail your plan and time frame for using these funds. In addition, if the use of reserves requires additional agency approvals, what is your approval process? **Refer to Reserve Fund Guidance, and complete Table 3 Summary of Planned Projects and Reserve Funds.**

The Capital Fund Reserve in Box 7 of Table 3 shows the anticipated expenditures for FY14-15 (\$516,693) and FY15-16 (\$390,000). The projects shown under FY14-15 are mostly projects under construction at this time with impending fund expenditures. The FY15-16 and typically upcoming projects under design.

The Operations Reserve fund show the amount allocated (\$180,614 or 27% of eligible allocation amount) for unanticipated expenditures and unforeseen needs.



7. Alameda CTC uses the data from Table 2 to monitor compliance with the Master Programs Funding Agreement requirement (Section 5.d.): "All projects and programs that use Measure B Local Streets and Roads pass-through funds must receive governing board approval prior to the jurisdiction expending the pass-through funding on the project/program."

If your agency expended funds on any projects not approved by your governing board in advance (as indicated in Column T of Table 2: Governing Board Approval), list them below and explain why your agency expended funds without agency approval.

N/A. (All projects are included in the budget approved by the City Council. Smaller projects, therefore, may not require additional City Council approvals so long as the City follows its standard bidding process approved by the City Attorney. The larger projects, which are required to go to bid, are also specifically approved by City Council for Award. All sources of project funding, such as Measure B or Measure F, are identified in the staff report and resolution approving the projects.)

8. **Describe the governing board approval for future planned projects and/or programs.** List the document type, time period, and resolution approval date. Examples include a bicycle and/or pedestrian plan, capital improvement plan, prioritized project list, etc.

Document Type	Time Period	Resolution Date
Adopted 2013-14 & 14-15 Operating Budget and Capital Improvement Program (CIP)	2013-14 and 2014-15	June 25, 2013 Reso. No. 4462-13

10. **Complete the table below to describe your jurisdiction's road miles and conditions.**

Jurisdiction's Information	
CURRENT POPULATION Refer to the California Department of Finance's Population Estimates: http://www.dof.ca.gov/research/demographic/reports/estimates/e-1/documents/E-1_2014_Internet_Version.xls	72,528
CERTIFIED NUMBER OF ROAD-MILES Consistent with the amount reported to state and federal agencies.	331
PAVEMENT CONDITION INDEX (PCI) FOR AGENCY'S LOCAL STREETS AND ROADS Use Metropolitan Transportation Commission's 2013 PCI Data expected by November 2014	79
If the PCI Falls below a total average of 60 (Fair Condition), specify what actions are being implemented to increase the PCI. <i>Indicate N/A if not applicable.</i>	

11. Did your agency publish an article(s) that highlight Local Streets and Roads projects and programs funded by Measure B in an agency or Alameda CTC newsletter?

- Yes. *If yes, complete the table below and INCLUDE a copy of the article(s) as Attachment B: Local Streets and Roads Program Attachments.*

Publication	Date Published (Month/Year)	Confirm Copy Attached? (Y/N)
Newsletter on City website – FY 2013-14 Measure B funded Local Streets & Roads Projects	7-30-2014	Y

- No. *If no, explain in the box below.*

12. Did your agency include a description of the Local Streets and Roads projects and programs funded by Measure B on its website?

- Yes. *If yes, include a printout of the website as Attachment B and provide the URL below that contains updated and accurate project information.*

Website Address	Confirm Printout Copy Attached? (Y/N)
http://www.unioncity.org/departments/public-works/alameda-ctc	Y

- No. *If no, explain in the box below.*

13. Did your agency use signage that indicates use of Measure B funds for its Local Streets and Roads projects and programs?

- Yes. *If yes, include photos of the posted signage in Attachment B and describe the signage below.*

Signage Location / Project	Confirm Photos Attached? (Y/N)
Inspector's Truck/ 2013-14 Citywide Overlay Project	Y

- No. *If no, explain in the box below.*

14a. Describe your agency's effectiveness at meeting your planned FY 13-14 expenditures reported in the last compliance report and reasons for any variations. Agencies are expected to expend their planned expenditures from their individual projects and/or and reserve funds. **Did your agency expend the amount planned?**

We were quite effective in meeting our goals and in fact exceeded our planned FY13-14 construction expenditures plans by almost \$25,000 or 3%.

14b. If your agency expended LESS THAN the planned amount, provide detailed justification on why dollars were not spent, and reference specific projects that did not expend the funds as planned. Indicate N/A if not applicable.

N/A.

14c. If your agency expended MORE THAN planned amount for a particular project/reserve, explain why and describe any adjustments to the reserves to finance the surplus amount. Indicate N/A if not applicable.

We spent \$882,249 or \$69,385 over the planned expenditure of \$812,864, including staff costs, which were not factored in the planned expenditure project cost. This over expenditure was also due to additional paving done as part of the overlay project and doing some unanticipated projects, as shown in Box 4. Less than half of this overage was funded by using Operation Fund Reserve whereas the rest was funded by reallocating funds under the Capital Fund Reserve.

15. Provide additional information, if necessary, to further explain Measure B expenditures for the Local Streets and Roads Program.

N/A.



MASS TRANSIT PROGRAM

Compliance Report Summary *Fiscal Year 2013-14*

1. Did your agency receive Measure B Mass Transit Funds in the reporting period of July 1, 2013 through June 30, 2014?

- Yes (Complete the Mass Transit section)
 No (Do not complete the Mass Transit section and continue on)

2. Complete the below contact information.

CONTACT INFORMATION	
Mass Transit Program Agency:	City of Union City (Union City Transit)
Contact Name:	Wilson Lee
Title:	Transit Manager
Phone Number:	(510) 675-5409
E-mail Address:	WLee@UnionCity.Org

3. Complete the Excel Worksheets Tables 1 to 3 for the Mass Transit Program.
(Check the boxes below to indicate completion).

- Table 1: Measure B Revenues and Expenditures**
 The values entered into Table 1 must match your agency's audited financial statements and compliance reports. **Please contact Alameda CTC staff if you have questions before submitting your report. All dollar figures must match your audited financial statements and compliance report or Alameda CTC may reject your submission.**
- Table 2: Summary of Expenditures and Accomplishments**
 This table describes actual expenditures and activities incurred for FY 2013-2014 (FY 13-14).
- Table 3: Summary of Planned Projects and Reserve Funds**
 This table describes your agency's plan to expend any remaining Measure B funds within the defined reserve policies of the funding agreement through FY 14-15 thru FY 17-18.

4. If your agency's ending MB Direct Local Distribution Program fund balance was greater than ZERO, describe why you have this fund balance and identify larger anticipated projects that will use these funds within the next year. Indicate N/A if not applicable.

Complete Table 3 Summary of Planned Projects and Reserve Funds.

N/A

5. Did your agency expend MORE THAN the amount of Measure B funds received in FY 13-14? If yes, how much more did you expend using prior fund balances? Indicate N/A if not applicable.

N/A

6. **Describe Reserve Funds.** If your agency has Measure B Reserve Funds identified, describe your process to allocate these funds and describe in detail your plan and time frame for using these funds. In addition, if the use of reserves requires additional agency approvals, what is your approval process? **Refer to Reserve Fund Guidance, and complete Table 3 Summary of Planned Projects and Reserve Funds.**

N/A

7. Did your agency publish an article(s) that highlight Mass Transit projects and programs funded by Measure B in an agency or Alameda CTC newsletter?

Yes. If yes, complete the table below and **INCLUDE** a copy of the article(s) as Attachment C: Mass Transit Program Attachments.

Publication	Date Published (Month/Year)	Confirm Copy Attached? (Y/N)
Union City Transit Website	June 19,2014	Yes

No. If no, explain in the box below.

8. Did your agency include a description of the Mass Transit projects and programs funded by Measure B on its website?

Yes. If yes, include a printout of the website as Attachment C and provide the URL below that contains updated and accurate project information.

Website Address	Confirm Printout Copy Attached? (Y/N)
www.uctransit.org	Yes

No. If no, explain in the box below.

9. Did your agency use signage that indicates use of Measure B funds for its Mass Transit projects and programs?

Yes. If yes, include photos of the posted signage in Attachment C and describe the signage below.

Signage Location / Project	Confirm Photos Attached? (Y/N)
Graphic of a bus with the ACTC/ACTIA logo. "Your Measure B Tax Dollars help fund the operations of this bus"	Yes

No. If no, explain in the box below.

10a. Describe your agency's effectiveness at meeting your planned FY 13-14 expenditures reported in the last compliance report and reasons for any variations. Agencies are expected to expend their planned expenditures from their individual projects and/or and reserve funds. **Did your agency expend the amount planned?**

All funds were expended. No funds are held in reserve/surplus.

10b. If your agency expended LESS THAN the planned amount, provide detailed justification on why dollars were not spent, and reference specific projects that did not expend the funds as planned. *Indicate N/A if not applicable.*

N/A

10c. If your agency expended MORE THAN planned amount for a particular project/reserve, explain why and describe any adjustments to the reserves to finance the surplus amount. *Indicate N/A if not applicable.*

N/A

11. Provide additional information, if necessary, to further explain Measure B expenditures for the Mass Transit Program

N/A

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PARATRANSIT PROGRAM

Compliance Report Summary *Fiscal Year 2013-14*

1. Did your agency receive Measure B Paratransit Funds in the reporting period of July 1, 2013 through June 30, 2014?

- Yes (Complete the Paratransit section)
 NO (Do not complete the Paratransit section)

2. Complete the below contact information.

CONTACT INFORMATION	
Paratransit Program Agency:	City of Union City (Union City Paratransit)
Contact Name:	Wilson Lee
Title:	Transit Manager
Phone Number:	(510) 675-5409
E-mail Address:	WLee@UnionCity.Org

3. Complete the Excel Worksheets Tables 1 to 3 for the Paratransit Program.
 (Check the boxes below to indicate completion).

- Table 1: Measure B Revenues and Expenditures**
 The values entered into Table 1 must match your agency's audited financial statements and compliance reports. **Please contact Alameda CTC staff if you have questions before submitting your report. All dollar figures must match your audited financial statements and compliance report or Alameda CTC may reject your submission.**
- Table 2: Summary of Expenditures and Accomplishments**
 This table describes actual expenditures and activities incurred for FY 2013-2014 (FY 13-14).
- Table 3: Summary of Planned Projects and Reserve Funds**
 This table describes your agency's plan to expend any remaining Measure B funds within the defined reserve policies of the funding agreement through FY 14-15 thru FY 17-18.

4. If your agency's ending MB Direct Local Distribution Program fund balance was greater than ZERO, describe why you have this fund balance and identify anticipated projects that will use these funds within the next year. *Indicate N/A if not applicable.*

Complete Table 3 Summary of Planned Projects and Reserve Funds.

N/A

5. Did your agency expend MORE THAN the amount of Measure B funds received in FY 13-14? If yes, how much more did you expend using prior fund balances? *Indicate N/A if not applicable.*

N/A

6. **Describe Reserve Funds.** If your agency has Measure B Reserve Funds identified, describe your process to allocate these funds and describe in detail your plan and time frame for using these funds. In addition, if the use of reserves requires additional agency approvals, what is your approval process? **Refer to Reserve Fund Guidance, and complete Table 3 Summary of Planned Projects and Reserve Funds.**

N/A

7. List the amount of the FY 13-14 Total Operating Expenses allocated to the following categories.

Category	Expense Amount
Management (<i>oversight, planning, budgeting, etc.</i>)	\$29,498
Customer Service and Outreach Activities	\$19,675
Trip Provision (<i>direct or contracted taxis, vans, shuttles, etc.</i>)	\$233,100
TOTAL Operating Expenses:	\$282,273

8a. List the total number of trips provided and services provided in FY 13/14.

Trips / Service Types	Quantity <i>(match to Table 2, Excel Form)</i>
Number of One-way unduplicated trips	
ADA Mandated Paratransit	19913
Door-to-Door Program / Van Services	
Taxi Program	
Fixed-Route Services	
Group Trips	
Volunteer Driver Program	
Other: [Specify here]	
Number of contacts through Mobility Management/Travel Training	
Number of Scholarships provided	
Number of Meals Delivered	

8b. Complete the table below with available service quality data for reservations and trips. If no data is available, skip this question and complete 8c and 8d.

Cancelled Trip Reservations <i>(percent)</i>	Passenger No-shows <i>(percent)</i>	On-time Pickups <i>(percent)</i>	Late Pickups <i>(percent)</i>	Missed Trips, Provider No-shows* <i>(percent)</i>	Average Ride Time <i>(minutes)</i>
5.1%	1.7%	99%	1%	0.2%	

*Includes very late pickups

8c. Describe your complaint and commendation process. Describe the process from beginning to end, including instructions you provide to customers for filing complaints or commendations, your document procedures, and your follow up.

Complaints/Commendations are received by UC Transit/Paratransit and are either forwarded to the Contractor or handled by City staff for resolution. Responses are either in writing, telephone or e-mail. All valid comments/complaints/commendations are reported in our Monthly Management Reports.



8d. Describe any common or recurring complaints your program has received and any program changes as a result. Did the number of complaints increase or decrease compared to the prior year?

No common or recurring complaints regarding provision of existing service other than requests for guaranteed same-day service. Same day service is not required by the ADA. Union City Paratransit participates in the Tri-City Taxi Voucher program which provides subsidized same-day taxi trips.

9. Does your agency have service quality data available about ridership? If so, enter the data in the applicable boxes below.

Number of Registered Riders (as of 6/30/14)	Number of Riders Added to Program in FY 13-14	Number of Riders on Wait List	Number of Accidents and Incidents*
1022	206	0	0

*Report incidents resulting in any of the following: a fatality other than a suicide, injuries requiring immediate medical attention away from the scene for two or more persons, property damage equal to or exceeding \$7,500, an evacuation due to life safety reasons, or a collision at a grade crossing.

10. Did your agency publish an article(s) that highlight Paratransit projects and programs funded by Measure B in an agency or Alameda CTC newsletter?

Yes. If yes, complete the table below and INCLUDE a copy of the article(s) as Attachment D: Paratransit Program Attachments.

Publication	Date Published (Month/Year)	Confirm Copy Attached? (Y/N)
Union City Paratransit Website	June 19, 2014	Yes

No. If no, explain in the box below.

11. Did your agency include a description of the Paratransit projects and programs funded by Measure B on its website?

Yes. If yes, include a printout of the website as Attachment D and provide the URL below that contains updated and accurate project information.

Website Address	Confirm Printout Copy Attached? (Y/N)
http://www.unioncity.org/departments/transit/services/paratransit	Yes

No. If no, explain in the box below.

12. Did your agency use signage that indicates use of Measure B funds for its Paratransit projects and programs?

Yes. *If yes, include photos of the posted signage in Attachment D and describe the signage below.*

Signage Location / Project	Confirm Photos Attached? (Y/N)
Graphic of a bus with ACTC (ACTIA) logo. "Your Measure B Tax Dollars help fund the operations of this bus"	Yes

No. *If no, explain in the box below.*

13a. Describe your agency's effectiveness at meeting your planned FY 13-14 expenditures reported in the last compliance report and reasons for any variations. Agencies are expected to expend their planned expenditures from their individual projects and/or and reserve funds. **Did you expend the amount planned?**

All funds were expended. No funds are held in reserve/surplus.

13b. If your agency expended LESS THAN the planned amount, provide detailed justification on why dollars were not spent, and reference specific projects that did not expend the funds as planned.
Indicate N/A if not applicable.

N/A

13c. If your agency expended MORE THAN planned amount for a particular project/reserve, explain why and describe any adjustments to the reserves to finance the surplus amount. Indicate N/A if not applicable.

N/A

14. Provide additional information, if necessary, to further explain Measure B expenditures for the Paratransit Program.

N/A