

Measure B

End-of-Year Program Compliance Report Revised Submittals

Revised Reports due February 20, 2013

Agency Name:	BART	REVISION NUMBER:1_
Choose the type(s) of	report you are submitting (check o	all that apply; Tables 1-3 are required)
Annual Program Co	ompliance Report – Bicycle and Pe	destrian Safety Funds
Annual Program Co	ompliance Report – Local Streets a	nd Roads Funds
Annual Program Co	ompliance Report – Mass Transit F	unds
X Annual Program	m Compliance Report – Paratransit	: Funds
Tables 1- 3: Progra	m Summary of Revenues, Expendi	tures, and Reserves (Excel workbook)
List any additional att	achments in the electronic report	submittal (check all that apply).
Attachment A: Bic	ycle and Pedestrian Attachments	
Attachment B: Loc	al Streets and Roads Attachments	
Attachment C: Ma	ss Transit Attachments	
X Attachment D:	Paratransit Attachments	
Other Attachment	s (clearly label additional attachme	ents as needed)
Authorized representa or their designees) mu true and complete to	ust sign below affirming the REVISE the best of their knowledge, and their knowledge.	the city manager and finance manager ED compliance information reported are ne audited dollar figures matches eported in the compliance report and
Signature		Date
Laura Timothy		
Manager Access and A		2/20/13
X Chus	Ten	Date
Signature Christopher Gan		Date
Finance Manager		
Alameda County Transportat	ion Commissión	



MEASURE B

End-of-Year Program Compliance Reporting Forms

Reporting Period July 1, 2011 through June 30, 2012



Measure B Program End-of-Year Program Compliance

Reporting Period July 1, 2011 through June 30, 2012

Submittal	Due Dates
Independent	Thursday December 27, 2012
Audit	 Electronic version by email by 5 p.m.
	 Hard copy post-marked by due date.
Compliance	Monday December 31, 2012
Report	 Electronic version by email by 5 p.m.
	 Hard copy with original signatures and
	attachments, post-marked by due date.

The Alameda CTC must receive all electronic files and hardcopies by their respective due dates. If you have any questions or concerns, notify the grants administrator, John Nguyen by e-mail grants@alamedactc.org or phone (510) 208-7419.

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End-of-Year Program Compliance Reporting Requirements

Reporting Period July 1, 2011 through June 30, 2012

In July 2010, the Alameda County Transportation Improvement Authority (ACTIA) merged with the Alameda County Congestion Management Agency to become the Alameda County Transportation Commission (Alameda CTC). Agencies and jurisdictions that have Measure B pass-through fund and grant agreements with ACTIA must continue to submit end-of-year program compliance reports to the Alameda CTC.

Measure B and Vehicle Registration Fee (VRF) pass-through fund recipients are required to submit to the Alameda CTC, one electronic and one hard copy version of the following: an audit report and a compliance report.

COMPLIANCE REPORT REQUIRED ENCLOSURES:

- 1. End of the Year Compliance Report Forms for Measure B and Vehicle Registration Fee (as applicable)
- **2. Tables 1-3** (for each applicable program)
- 3. Documentation of Reporting Requirements
 - Measure B/VRF Signage: In the compliance report, include a description and documentation of signage and the number of signs posted.
 - Website: In the compliance report, include a description and documentation of where you listed a link to Alameda CTC's website (www.alamedactc.org) on your agency's website, and informed the public about how your jurisdiction uses Measure B funds for transportation projects/programs.
 - Publications: In the compliance report, include a description and documentation of an article published in your agency's newsletter or Alameda CTC's e-newsletter for each fund type you receive.

Audit and Compliance Reporting Consistency

The dollar amounts on each of your compliance documents <u>must match</u>, or Alameda CTC will consider your agency out of compliance.

For example, your audit's expenditure dollar figures for the Paratransit program must match reported figures in your Paratransit compliance report, and the Tables 1-3 Attachments. See auidance throughout the report forms.

1333 Broadway, Suites 220 & 300

Oakland, CA 94612

PH: (510) 208-7400

www.AlamedaCTC.org

Submittal Instructions

Audit and Compliance Reports

The End-of-Year (EOY) Program Compliance Report includes a Microsoft (MS) Word Report form and a MS Excel file with tabbed Tables 1-3 for each program. These documents are available for download at http://www.alamedactc.org/app_pages/view/4136.

INDEPENDENT AUDIT REPORT: Due Thursday December 27, 2012

Electronic submission: Submit one copy of the Independent Audit Report via email to grants@alamedactc.org.

Hard-copy submission: Postmark one hard copy of the Independent Audit Report, signed by an independent auditor, by Thursday December 27, 2012.

Mail hard-copy reports to:

Alameda CTC

Attn: End-of-Year Program Compliance

1333 Broadway, Suite 220 Oakland, CA 94612

EOY COMPLIANCE REPORT: Due Monday December 31, 2012

Electronic submission:

- **1.** Download and complete the MS Word Form and Excel files for Measure B and Vehicle Registration Fee Programs as applicable.
- 2. Include attachments, labeled appropriately as Attachments A-D as indicated on the signature page (page 1). Each attachment package should include:
 - a. Two photos maximum, per program fund type.
 - b. Documentation of articles, newsletters, signage, etc., Ensure the attachments are labeled and are easily readable when reproduced in black and white.
- 3. Send an email with the completed MS Word document, Excel Tables 1-3, and attachments to grants@alamedactc.org. If your files are larger than 8 MB, upload the files to Alameda CTC's FTP site below, and send an email to grants@alamedactc.org to notify us of the upload:

FTP server name: ftp.actia2022.com

Username: 2022 Password: Tr33inforest

Hard-copy submission:

County Transportation

Illing

Postmark one hard copy of the EOY Program Compliance Report and the Tables 1-3 workbook attachments with original signatures by Monday December 31, 2012.

The signature page (page 1) must have original signatures from the city finance manager and city

MEDaaage63-3drehevayprojgriate0 écitifValent of their designees.CA 94612 ■

www.AlamedaCTC.org

PH: (510) 208-7400

Policies on Timely Use of Funds and Reserve Funds

Each jurisdiction receiving Measure B and Vehicle Registration Fee (VRF) pass-through funds are required to comply with the stipulations set forth in the Master Programs Funding Agreement (MPFA) between the jurisdiction and Alameda CTC.

Measure B and VRF funds are to be expended in a timely manner, and/or placed into an appropriate reserve as indicated in the MPFA excerpts below.

Article 3.A. Timely Use of Funds

1. Except for those funds properly placed into a reserve fund pursuant to Section B below, all Measure B and VRF funds received by RECIPIENT shall be spent expeditiously, and no expended funds beyond those included in reserves pursuant to Section B below are allowed, unless a written request is submitted to the Alameda CTC and approved by the Board.

Article 3.B. Reserve Fund Policy

- 1. Capital Fund Reserve: RECIPIENT may establish a specific capital fund reserve to fund specific large capital project(s) that could otherwise not be funded with a single year's worth of Measure B or VRF pass-through funds.
 - a. RECIPENT may collected capital funds during not more than three years and shall expend all reserve funds prior to the end of the third fiscal year immediately following the fiscal year during which the reserve was established.
 - For example, if a reserve is established at any time during FY 12-13, recipient may collect reserve funds during some or all of FY 12-13, FY 13-14, and FY 14-15, and must spend the reserve funds prior to the end of FY 15-16.
- 2. Operations Fund Reserve: RECIPIENT may establish and maintain a specific reserve to address operational issues, including fluctuations in revenues, and to help maintain transportation operations. The total amount retained in such fund may not exceed 50 percent of anticipated annual combined revenues from Measure B and VRF funds. This fund may be a revolving fund and is not subject to an expenditure timeframe.
 - **3. Undesignated Fund Reserve:** RECIPIENT may establish and maintain a specific reserve for transportation needs over a fiscal year, such as matching funds for grants, project development work, studies for transportation purposes, or contingency funds for a project or program. This fund may not contain more than 10 percent of annual pass-through revenues.



End-of-Year Program Compliance Report

Reports due December 31, 2012

Agency Name:	
Choose the type(s) of report you are submitting	g (check all that apply; Tables 1-3 are required)
Annual Program Compliance Report – Bicycl	e and Pedestrian Safety Funds
Annual Program Compliance Report – Local	Streets and Roads Funds
Annual Program Compliance Report – Mass	
Annual Program Compliance Report – Parati	
	, Expenditures, and Reserves (Excel workbook)
List any additional attachments in the electron	ic report submittal (check all that apply).
Attachment A: Bicycle and Pedestrian Attach	hments
Attachment B: Local Streets and Roads Attac	chments
Attachment C: Mass Transit Attachments	
Attachment D: Paratransit Attachments	
Other Attachments (clearly label additional	attachments as needed)
Other Attachments (clearly label additional)	attaciments as necucay
Certification of True and Accurate Reporting	
Authorized representatives of the reporting age	
	ne compliance information reported are true and
Measure B revenues and expenditures reporte	ne audited dollar figures <u>matches exactly</u> to the
measure 5 revenues and expenditures reporte	a in the compliance report and rables 1 s.
X	12/14/2012
Signature	Date
Print Name: Laura Timothy	
Title of Agency Manager: Manager of	
Access and Accessible Services	
X	12/14/2012
Signature	Date
Print Name: Chris Gan	
Title of Finance Manager: Assistant	
Controller	
Alameda County Transportation Commission	
End of the Year Compliance Report FY 11-12	Page 1



Bicycle and Pedestrian Program Compliance Report Summary

1.	Did your agency receive Measure B E of July 1, 2011 through June 30, 2012	sicycle and Pedestrian Funds in the reporting period
	Yes (Complete the Bicycle/Pedestrian No (Do not complete the Bicycle/Ped	
2.	Complete the below contact informa	tion.
	CONTACT INFORMATION	
	Bicycle/Pedestrian Program Agency Contact Name Title	:
	Phone Number	
	Priorie Number	
	E-mail Address	:
3.	Table 1: Measure The values entered compliance report. before submitting you	es 1 to 3 for the Bicycle and Pedestrian Program. detion). B Revenues and Expenditures into Table 1 must match your agency's audit and Please contact Alameda CTC staff if you have questions our report. All dollar figures must match your independent appliance report or Alameda CTC may reject your submission.
		of Expenditures and Accomplishments s actual expenditures and activities incurred for FY .2).
	Table 3: Summary	of Planned Projects and Reserve Funds
Alar	neda County Transportation Commission	

This table describes your agency's plan to expend any remaining Measure B funds within the four-year time table of the funding agreement through FY 12-13 thru FY 15-16.

4.	this reserve? For instance, if you are saving a funding amount, what amount are you saving and what types of projects/programs will those dollars fund? Refer to Reserve Fund guidance (page iv), and complete Table 3 Summary of Planned Projects and Reserve Funds as required by the Master Programs Funding Agreement.
5.	If applicable, why were the reported expenditures in FY 11-12 more than the amount of Measure B funds the agency received in FY 11-12? For instance, if your agency faced a funding shortage, how did you use reserve Measure B funds from a previous fiscal year(s)?
6.	Describe undesignated funds. If your agency has undesignated Measure B funds, describe your process to allocate these funds and describe in detail your plan and time frame for using those funds. In addition, if you plan to use reserves, will this require additional agency approvals, and if so, what is your approval process? Refer to Reserve Fund guidance (page iv), and complete Table 3 Summary of Planned Projects and Reserve Funds.

7	Alamada CTC was the data from Table	- 2 to monitor compliance	ith the Mester Dresses		
/.	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 Safe	,			
	approval prior to the jurisdiction expe		-		
	project/program."				
	If your agency expended funds on an		-		
advance (as indicated in Column R of Table 2: Governing Board Approval), list the					
	and explain why your agency expended funds without agency approval.				
	and explain why your agency expend	led funds without agency app	proval.		
	and explain why your agency expend	led funds without agency app	proval.		
	and explain why your agency expend	led funds without agency app	proval.		
	and explain why your agency expend	led funds without agency app	proval.		
	and explain why your agency expend	led funds without agency app	proval.		
	and explain why your agency expend	led funds without agency app	proval.		
8.	Describe the governing board appro	oval for future planned projec	cts and/or programs. List		
8.	Describe the governing board approthe document type, time period, and	oval for future planned project d resolution approval date. Ex	cts and/or programs. List ramples include a bicycle		
8.	Describe the governing board appro	oval for future planned project d resolution approval date. Ex	cts and/or programs. List ramples include a bicycle		
8.	Describe the governing board approthe document type, time period, and	oval for future planned project d resolution approval date. Ex	cts and/or programs. List ramples include a bicycle		
8.	Describe the governing board approthe document type, time period, and and/or pedestrian plan, capital impro	oval for future planned project d resolution approval date. Ex ovement plan, prioritized proj	cts and/or programs. List amples include a bicycle ject list, etc.		
8.	Describe the governing board approthe document type, time period, and and/or pedestrian plan, capital impro	oval for future planned project d resolution approval date. Ex ovement plan, prioritized proj	cts and/or programs. List amples include a bicycle ject list, etc.		
8.	Describe the governing board approthe document type, time period, and and/or pedestrian plan, capital impro	oval for future planned project d resolution approval date. Ex ovement plan, prioritized proj	cts and/or programs. List amples include a bicycle ject list, etc.		
8.	Describe the governing board approthe document type, time period, and and/or pedestrian plan, capital impro	oval for future planned project d resolution approval date. Ex ovement plan, prioritized proj	cts and/or programs. List amples include a bicycle ject list, etc.		
	Describe the governing board approthe document type, time period, and and/or pedestrian plan, capital impro	val for future planned project d resolution approval date. Ex ovement plan, prioritized proj Time Period	cts and/or programs. List camples include a bicycle ject list, etc. Resolution Date		

9. jurisdictions to have developed and adopted a Complete Streets policy by June 30, 2013.

Does your agency have an adopted Complete Streets policy, and if so, when was it adopted by your governing board? If not, please describe your agency's plan to develop and adopt a Complete Streets policy by the June 30, 2013 deadline.

	ncy publish articles that hig easure B in an agency or A	ghlight Bicycle/Pedestrian pı lameda CTC newsletter?	rojects and progra
Yes		in Question #13 Additional Inj	formation.
	a copy of the article(s) as a and list the publication(s) a	Attachment A: Bicycle and Pe and date(s) below.	edestrian Program
Publication		Date Published	Copy Attached
funded by Me	easure B on its website? No. If no, explain i	f the Bicycle/Pedestrian pro	formation.
funded by Me Yes If yes, include	easure B on its website? No. If no, explain i	in Question #13 Additional Inj in <u>Attachment A</u> and provide	formation.
funded by Me Yes If yes, include	No. If no, explain it a printout of the website intended and accurate project in	in Question #13 Additional Inj in <u>Attachment A</u> and provide	formation.

Signage Description

Photos attached?
(Y/N)

13. 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

1.	Did your agency receive Measure B Loo of July 1, 2011 through June 30, 2012?	cal Streets and Roads Funds in the reporting period
	Yes (Complete the LSR section.) No (Do not complete the LSR section as	nd continue on.)
2.	Complete the below contact informati	on.
	CONTACT INFORMATION	
	LSR Program Agency: Contact Name: Title:	
	Phone Number:	
	E-mail Address:	
3.	Complete the Excel Worksheets Tables (Check the boxes below to indicate complete)	tion).
	The values entered in compliance report. Published before submitting your	Revenues and Expenditures Into Table 1 must match your agency's audit and Ilease contact Alameda CTC staff if you have questions In report. All dollar figures must match your independent Iliance report or Alameda CTC may reject your submission.
		f Expenditures and Accomplishments actual expenditures and activities incurred for FY).
	This table describes	f Planned Projects and Reserve Funds your agency's plan to expend any remaining Measure our-year time table of the funding agreement through 16.

4.	If your agency's ending MB Pass-through balance was greater than zero, why do you have this reserve? For instance, if you are saving a funding amount, what amount are you saving and what types of projects/programs will those dollars fund? Refer to Reserve Fund guidance (page iv), and complete Table 3 Summary of Planned Projects and Reserve Funds as required by the Master Programs Funding Agreement.
5.	If applicable, why were the reported expenditures in FY 11-12 more than the amount of Measure B funds the agency received in FY 11-12? For instance, if your agency faced a funding shortage, how did you use reserve Measure B funds from a previous fiscal year(s)?
6.	Describe undesignated funds. If your agency has undesignated Measure B funds, describe your process to allocate these funds and describe in detail your plan and time frame for using those funds. In addition, if you plan to use reserves, will this require additional agency approvals, and if so, what is your approval process? Refer to Reserve Fund guidance (page iv), and complete Table 3 Summary of Planned Projects and Reserve Funds.

	from Table 2 to monitor compliance w	_			
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 agancy avanded fur	f your agency expended funds on any projects not approved by your governing board in				
	nds on any projects not approved by S lumn R of Table 2: Governing Board A				
-	cy expended funds without agency ap	• •			
	ard approval for future planned proje				
the document type, time pe	eriod, and resolution approval date. Ex	camples include a bicycle			
the document type, time pe		camples include a bicycle			
the document type, time pe	eriod, and resolution approval date. Ex	camples include a bicycle			
the document type, time pe and/or pedestrian plan, cap	eriod, and resolution approval date. Ex pital improvement plan, prioritized pro	camples include a bicycle ject list, etc.			
the document type, time pe and/or pedestrian plan, cap	eriod, and resolution approval date. Ex pital improvement plan, prioritized pro	camples include a bicycle ject list, etc.			
the document type, time pe and/or pedestrian plan, cap	eriod, and resolution approval date. Ex pital improvement plan, prioritized pro	camples include a bicycle ject list, etc.			
the document type, time pe and/or pedestrian plan, cap	eriod, and resolution approval date. Ex pital improvement plan, prioritized pro	camples include a bicycle ject list, etc.			
the document type, time per and/or pedestrian plan, cap Document Type	eriod, and resolution approval date. Expital improvement plan, prioritized pro Time Period	Resolution Date			
the document type, time per and/or pedestrian plan, cap Document Type Per Section 6 of the Master I	eriod, and resolution approval date. Expital improvement plan, prioritized pro Time Period Programs Fund Agreement, Alameda C	Resolution Date CTC requires local			
the document type, time per and/or pedestrian plan, cap Document Type Per Section 6 of the Master I	eriod, and resolution approval date. Expital improvement plan, prioritized pro Time Period	Resolution Date CTC requires local			
Document Type Per Section 6 of the Master I jurisdictions to have developed.	eriod, and resolution approval date. Expital improvement plan, prioritized pro Time Period Programs Fund Agreement, Alameda C	Resolution Date CTC requires local olicy by June 30, 2013.			

and adopt a Complete Streets policy by the June 30, 2013 deadline.

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

This figure should reflect the population as of January 1, 2012. Refer to the California Department of Finance's Population Estimates: http://www.dof.ca.gov/research/demographic/reports/estimates/e-1/view.php

	Certified number of road-miles			
	This figure must be consistent with the number of miles repo agencies.	orted to state and fede	ral	
	Average pavement condition index (PCI) for agency's	local streets		
	This figure must be consistent with the information available Commission's 2011 Pothole Report for the year 2010, table '2006-2010" (pages 15-18). For more information, visit http://www.mtc.ca.gov/library/pothole report/Pothole Report/	PCI for Bay Area Jurisd	•	
11. Did your agency publish articles that highlight Local Streets and Roads projects ar programs funded by Measure B in an agency or Alameda CTC newsletter? Yes No. If no, explain in Question #14 Additional Information. If yes, include a copy of the article(s) as Attachment B: Local Streets and Roads Programs				
	Attachments and list the publication(s) and date(s) below.			
	Publication	Date Published	Copy Attac	ched?

Publication	Date Published	Copy Attached? (Y/N)

	nded by Measure B on its w	f the Local Streets and Roads projects and vebsite?
Yes	No. If no, explain in	n Question #14 Additional Information.
•	e a printout of the website in ated and accurate project in	in <u>Attachment B</u> and provide the URL below that nformation.
Website Add	ress	Printout Attached? (Y/N)
	ncy use signage that indicate ojects and programs?	tes use of Measure B funds for its Local Streets
Yes	No. If no, explain in	n Question #14 Additional Information.
If yes, include	e photos of the signage in <u>At</u>	ttachment B and describe the signage below.
Signage Desc	ription	Photos attached? (Y/N)
	tional information, if neces eets and Roads Program.	ssary, to further explain Measure B expenditures
1		



Mass Transit Program Compliance Report Summary

1.	Did your agency receive Measure B M July 1, 2011 through June 30, 2012?	ass Transit Funds in the reporting period of
	Yes (Complete the Mass Transit section No (Do not complete the Mass Transit	
2.	Complete the below contact informat	ion.
	CONTACT INFORMATION	
	Mass Transit Program Agency: Contact Name: Title:	
	Phone Number:	
	E-mail Address:	
3.	Complete the Excel Worksheets Table (Check the boxes below to indicate complete)	
	The values entered compliance report. before submitting you	Revenues and Expenditures into Table 1 must match your agency's audit and Please contact Alameda CTC staff if you have questions or report. All dollar figures must match your independent pliance report or Alameda CTC may reject your submission.
		of Expenditures and Accomplishments actual expenditures and activities incurred for FY 2).
	This table describes	of Planned Projects and Reserve Funds your agency's plan to expend any remaining Measure our-year time table of the funding agreement through -16.

4.	If your agency's ending MB Pass-through balance was greater than zero, why do you have this reserve? For instance, if you are saving a funding amount, what amount are you saving and what types of projects/programs will those dollars fund? Refer to Reserve Fund guidance (page iv), and complete Table 3 Summary of Planned Projects and Reserve Funds as required by the Master Programs Funding Agreement.
5.	If applicable, why were the reported expenditures in FY 11-12 more than the amount of Measure B funds the agency received in FY 11-12? For instance, if your agency faced a funding shortage, how did you use reserve Measure B funds from a previous fiscal year(s)?
6.	Describe undesignated funds. If your agency has undesignated Measure B funds, describe your process to allocate these funds and describe in detail your plan and time frame for using those funds. In addition, if you plan to use reserves, will this require additional agency approvals, and if so, what is your approval process? Refer to Reserve Fund guidance (page iv), and complete Table 3 Summary of Planned Projects and Reserve Funds.

na your agen	cy publish articles that	highlight Mass Transit project	s and programs fu
y Measure B Yes	in an agency or Alamed No. If no, explai	la CTC newsletter? n in Question #10 Additional II	nformation.
	a copy of the article(s) a blication(s) and date(s)	ns <u>Attachment C: Mass Transit</u> below.	Program Attachme
Publication		Date Published	Copy Attached?
	on its website?	of the Mass Transit projects on in Question #10 Additional In	
	a printout of the websit	e in <u>Attachment C</u> and provide t information.	e the URL below tha
	ted and accurate projec		
	ted and accurate projec	Printout Attached? (Y/N)	

If yes, include photos of the signage in Attachment C and describe the signage below. **Signage Description** Photos attached? (Y/N) 10. Provide additional information, if necessary, to further explain Measure B expenditures for the Mass Transit Program



Paratransit Program Compliance Report Summary Revised 2-20-2013

1.	Did your agency receive No July 1, 2011 through June		Paratransit Funds in the reporting period of
	Yes (Complete this Parat		ion.) it section and continue on.)
2.	Complete the below conta	act inform	ation.
	CONTACT INFORMATION		
	Paratransit Program Conta	n Agency: ct Name: Title:	BART as part of the East Bay Paratransit Consortium Laura Timothy Manager of Access and Accessible Services
	Phone	Number:	510 464 6446
	E-mail	Address:	ltimoth@bart.gov
3.	Complete the Excel Works (Check the boxes below to inc		
	The valu complia before s	ues entere ince repor ubmitting y	e B Revenues and Expenditures and into Table 1 must match your agency's audit and t. Please contact Alameda CTC staff if you have questions your report. All dollar figures must match your independent mpliance report or Alameda CTC may reject your submission
	This tab		y of Expenditures and Accomplishments es actual expenditures and activities incurred for FY -12).
	— This tab B funds	le describ	y of Planned Projects and Reserve Funds es your agency's plan to expend any remaining Measure e four-year time table of the funding agreement through 15-16.

4.	If your agency's ending MB Pass-through balance was greater than zero, why do you have this reserve? For instance, if you are saving a funding amount, what amount are you saving and what types of projects/programs will those dollars fund? Refer to Reserve Fund guidance (page iv), and complete Table 3 Summary of Planned Projects and Reserve Funds as required by the Master Programs Funding Agreement.			
	N/A			
5.	If applicable, why were the reported expenditures in FY 11-12 more than the amount of Measure B funds the agency received in FY 11-12? For instance, if your agency faced a funding shortage, how did you use reserve Measure B funds from a previous fiscal year(s)?			
	Measure B mandated pass-through Pa operate the East Bay Paratransit Cons program are provided from BART's Ge	ortium. The majority o		
6.	Describe undesignated funds. If you your process to allocate these funds using those funds. In addition, if you approvals, and if so, what is your ap iv), and complete Table 3 Summary	s and describe in deta u plan to use reserves oproval process? Refe	il your plan and time frame for , will this require additional agency r to Reserve Fund guidance (page	
	N/A			
7.	List the amount of the Total Operat	ting Expenses allocate	ed to the following.	
	Category	Expense Amount Indicate zero if none.		
	Management * (oversight, planning, budgeting, etc.)	\$62,000		

\$310,000

\$9,993,652

\$10,365,652

Customer Service and Outreach

Trip Provision (direct or contracted taxis,

TOTAL Operating Expenses:

Activities

vans, shuttles, etc.)

^{*}Not included in question #7, Total Operating Expenses of \$10,365,652 is BART's cost for the Program Coordinator's office of \$138,982.

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

Cancelled Trip Reservations (percent)	Passenger No-shows (percent)	On-time Pickups (percent)	Late Pickups (percent)	Missed Trips, Provider No- shows* (percent)	Average Ride Time (minutes)
23%**	2.6%	93.6%	6.2%	0.08%	38.4 min.

^{*}Includes very late pickups

- **8b.** 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.
 - Individuals making a complaint receive a post card or a phone call, thanking them for the information, explaining we use complaints to review and improve the system. The individual is told they may call us back in 2 weeks if they would like to know the outcome of the research we conduct on their complaint. Riders who have specified an alternative format receive post cards in their specified format.
 - Customer Response clerks research the complaint using tapes of calls, AVL data, fixed route time, route mapping, etc. Once the Response clerk has investigated, the complaint is sent to the appropriate party (Service Provider or EBPC management) for their investigation and response.
 - Complaints needing additional response are forwarded to the AC Transit and BART management for coordination and response.
 - Complaints about individuals are shared with them and made a part of their file. The individuals is counseled or re-trained. Progressive discipline procedures are used with individuals receiving multiple complaints.
 - The Operations Manager reviews driver complaints regularly with the providers.
 - Complaints about vehicles are investigated and repairs are made, if necessary.
 - Complementary fare tickets are given to riders took rides that were more than 60 minutes late, or situations where the vehicle never arrived.

^{**} includes 100% of cancellations, from same day to 7 days in advance of the trip

8c. Describe any common or recurring complaints your program has received and the program changes as a result.

All customer complaints are tracked by type. Numbers of complaints are reported by category to staff and to the EBPC Rider Committee, called the Service Review Advisory Committee (SRAC). Complaint statistics and details are used to determine areas of the service needing attention. Information uncovered in the complaint process is used to improve the service most often through specific attention to individual employees or through modification of service practices. The Broker's Operations Manager regularly reviews complaints and their responses to identify trends and issues.

FY 11/12, results are as follows:

Complaint type:	Number
Timeliness	934
Driver	1,230
Equipment/vehicle	72
Provider scheduling	144
Broker	212
Broker scheduling	255
Other	309
Total Complaints	3,156
Complaints as a % of revenue passengers	0.49%
Commendations received	1,745

Complaints against staff, such as Broker employees or drivers are reviewed with the staff person and made a part of their file, after re-training or counseling. The Broker's office and the service providers all have graduated disciplinary measure.

Complaints involving vehicles and equipment are addressed through inspections and maintenance of the faulty equipment.

Scheduling problems are investigated. Complaints concerning standing orders might result in changes to the pick up times or to the route the standing order is assigned to.

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	Number of Riders Added to Program in FY 11-12	Number of Riders on Wait List	Number of Accidents and Incidents*
@ yr-end: 18,586 riders on data base	Net riders added = 1,342**	0	42

^{*}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 articles that highlight Paratransit projects and programs funded
	by Measure B in an agency or Alameda CTC newsletter?
	Yes No. If no, explain in Question #13 Additional Information.
	If yes, include a copy of the article(s) in <u>Attachment D: Paratransit Program Attachments</u> and list the publication(s) and date(s) below.

Publication	Date Published	Copy Attached? (Y/N)
Newsletter for ACTC from EBPC	Sent to ACTC: 10/13/2011	yes
Measure B Article from East Bay Paratransit	Sent to ACTC: 3/22/2012	yes
On hold message	Played throughout FY 11/12	Yes

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

⊠ Yes	No If no	ovalain	in Ouastian	412	Additional	Information
∠ res	110. IJ 110,	explain	in Question	#13	Auuitionui	Information.

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

Website Address	Printout Attached? (Y/N)
EBPC website: http://eastbayparatransit.org/	yes
BART website: http://www.bart.gov/guide/accessibility/paratransit.aspx	yes

^{** 4,474} riders (both new to EBPC and recertifying riders) were certified as eligible to use the system; 3,132 rider records were inactivated due to death; leaving the service area; not seeking recertification, etc.

Learn BART! A project supported by an ACTC Gap Grant. Last page of	Yes (last page)
brochure acknowledges ACTC and PAPCO. (last page attached)	
http://www.bart.gov/docs/brochures/Learn%20BART%20Online5.3.pdf	

12.	Did your agency use signage that indicates use of I projects and programs? Yes No. If no, explain in Question If yes, include photos of the signage in Attachment	#13 Additional Informati	on.
	Signage Description	Photos attached? (Y/N)]
	Bumper sticker on all EBPC vehicles	yes	
	Provide additional information, if necessary, to fur the Paratransit Program.	ther explain Measure B e	expenditures for
	BART's primary objective will be to continue its partner mandated paratransit through their joint venture, the		