

Measure B

End-of-Year Program Compliance Report Revised Submittals

Revised Reports due February 20, 2013

Agency Name: San Francisco Bay Area Water Emergency Transportation Authority	REVISION NUMBER: _1_
Choose the type(s) of report you are submitting (check al	I that apply; Tables 1-3 are required)
Annual Program Compliance Report – Bicycle and Pede	
Annual Program Compliance Report – Local Streets and	
Annual Program Compliance Report – Mass Transit Full	
Annual Program Compliance Report – Paratransit Fund	
☐ Tables 1- 3: Program Summary of Revenues, Expenditu	
List any additional attachments in the electronic report s	
	ubilittai (check an that appry).
Attachment A: Bicycle and Pedestrian Attachments	
Attachment B: Local Streets and Roads Attachments	
Attachment C: Mass Transit Attachments	
Attachment D: Paratransit Attachments	
Other Attachments: FY2010-11 (Audited) Basic Finance	ial Statements
FY2011-12 (Audited) Basic Financ	cial Statements
Certification of True and Accurate Reporting	16
Authorized representatives of the reporting agency (i.e. th	
or their designees) must sign below affirming the REVISED true and complete to the best of their knowledge, and the	
exactly to the Measure B revenues and expenditures rep	
Tahles\1-3	10.00
x Vina Cannella	2/11/2013
Signature	Date
Nina Rannells, Executive Director	
x mud	2/11/2013
Signature	Date
Lynne Yu, Finance & Grants Manager	



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.

TABLE OF CONTENTS

Reporting Requirements / Guidance Information

End-of-Year Program Compliance Reporting Requirements	ii
Submittal Instructions	iii
Policy on Timely Use of Funds and Reserve Funds	iv
Required Submittals (as applicable)	
End-of-Year Program Compliance Report Signature Page	
Bicycle and Pedestrian Program Report Summary	2
Local Streets and Roads Program Report Summary	7
Mass Transit Progam Report Summary	12
Paratransit Program Report Summary	



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 guidance throughout the report forms.



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:

- **1.** 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.
- 2. The signature page (page 1) must have original signatures from the city finance manager and city manager, or the appropriate equivalent or their designees.

iii



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: San Francisco Bay Area Water Emergency Transportation Authority (WETA) 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 in the electronic report 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 Authorized representatives of the reporting agency (i.e. the city manager and finance manager or their designees) must sign below affirming 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. Signature **Date** Nina Rannells **Executive Director** Signature Date Lynne Yu Finance & Grants Manager



Bicycle and Pedestrian Program Compliance Report Summary

1.	Did your agency receive Measure B Bio of July 1, 2011 through June 30, 2012?	cycle and Pedestrian Funds in the reporting period
	Yes (Complete the Bicycle/Pedestrian s No (Do not complete the Bicycle/Pedes	
2.	Complete the below contact informati	on.
	CONTACT INFORMATION	
	Bicycle/Pedestrian Program Agency:	
	Contact Name:	
	Title:	
	Phone Number:	
	E-mail Address:	
3.	(Check the boxes below to indicate complete	s 1 to 3 for the Bicycle and Pedestrian Program. tion). Revenues and Expenditures
	compliance report. P before submitting you	nto Table 1 must match your agency's audit and lease contact Alameda CTC staff if you have questions report. All dollar figures must match your independent liance report or Alameda CTC may reject your submission.
		f Expenditures and Accomplishments actual expenditures and activities incurred for FY).
	This table describes y	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.

Funding Agreement requirement (Measure B Bicycle and Pedestrian	(Section 5.1.d) Safety pass-th	: "All projects and rough funds must	programs that use receive governing board
advance (as indicated in Column	R of Table 2: 6	overning Board A	pproval), list them below
the document type, time period,	and resolution	n approval date. Ex	camples include a bicycle
Document Type		Time Period	Resolution Date
jurisdictions to have developed an	nd adopted a C	Complete Streets p	olicy by June 30, 2013.
		•	
	Per Section 6 of the Master Prograjurisdictions to have developed and Does your agency have an adopted adopted by your governing board are dopted are dopted are dopted are dopted by your governing board are dopted by your governing board are dopted by your governing board are dopted are dop	Funding Agreement requirement (Section 5.1.d) Measure B Bicycle and Pedestrian Safety pass-th approval prior to the jurisdiction expending the project/program." If your agency expended funds on any projects advance (as indicated in Column R of Table 2: G and explain why your agency expended funds of the document type, time period, and resolution and/or pedestrian plan, capital improvement p Document Type Per Section 6 of the Master Programs Fund Agree jurisdictions to have developed and adopted a Complete Sadopted by your governing board? If not, please adopted by your governing board? If not, please approval for the project f	If your agency expended funds on any projects not approved by a advance (as indicated in Column R of Table 2: Governing Board A and explain why your agency expended funds without agency ap Describe the governing board approval for future planned projethe document type, time period, and resolution approval date. Exand/or pedestrian plan, capital improvement plan, prioritized pro

Yes	No. If no, explain in Q	uestion #13 Additional Inf	ormation.
•	e a copy of the article(s) as <u>Atta</u> and list the publication(s) and		destrian Program
Publication		Date Published	Copy Attached?
	ncy include a description of th	e Bicycle/Pedestrian proj	ects and program
unded by M	easure 6 on its website?		
Yes f yes, include	easure B on its website? No. If no, explain in Q e a printout of the website in A ated and accurate project info		
Yes f yes, include	No. <i>If no, explain in Q</i> e a printout of the website in A ated and accurate project info	ttachment A and provide	
Yes f yes, include contains upda	No. <i>If no, explain in Q</i> e a printout of the website in A ated and accurate project info	ttachment A and provide to mation. Printout	
Yes f yes, include contains upda Website Add	No. <i>If no, explain in Q</i> e a printout of the website in A ated and accurate project info	Printout Attached? (Y/N)	the URL below tha
Yes f yes, include contains upda Website Add	No. If no, explain in Que a printout of the website in Anated and accurate project informations. The project information area in the project	Printout Attached? (Y/N)	the URL below tha
Yes f yes, include contains upda Website Add Did your age Bicycle/Pede Yes	No. If no, explain in Que a printout of the website in Anated and accurate project informations. The project information area in the project	Printout Attached? (Y/N) use of Measure B funds for the street of the s	the URL below that
Yes f yes, include contains upda Website Add Did your age Bicycle/Pede Yes	No. If no, explain in Que a printout of the website in A ated and accurate project informates ress ncy use signage that indicates strian projects and programs? No. If no, explain in Que photos of the signage in Attach	Printout Attached? (Y/N) use of Measure B funds for the street of the s	the URL below that

3. Provide additional the Bicycle and Pe	l information, if necessary, to further explain Measure B expenditures for destrian Program.



Local Streets and Roads (LSR) Program Compliance Report Summary

1.	Did your agency receive Measure B Lo of July 1, 2011 through June 30, 2012	ocal Streets and Roads Funds in the reporting period?
	Yes (Complete the LSR section.) No (Do not complete the LSR section of	and continue on.)
2.	Complete the below contact informat	ion.
	CONTACT INFORMATION	
	LSR 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	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 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.

7.	Alameda CTC uses the data from Tab Funding Agreement requirement (Se Measure B Local Streets and Roads p approval prior to the jurisdiction exper project/program."	ection 5.d.): hass-through	"All projects and p n funds must recei	programs that use ive governing board
	If your agency expended funds on an advance (as indicated in Column R o and explain why your agency expendent	of Table 2: G	overning Board A	Approval), list them below
8.	Describe the governing board approached the document type, time period, an and/or pedestrian plan, capital impro	d resolution	n approval date. E	xamples include a bicycle
	Document Type		Time Period	Resolution Date
9.	Per Section 6 of the Master Programs jurisdictions to have developed and a Does your agency have an adopted adopted by your governing board? and adopt a Complete Streets policy	adopted a C Complete S If not, pleas	omplete Streets p treets policy, and se describe your a	I if so, when was it agency's plan to develop

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

Certified num	ber of road-miles				
This figure must agencies.	t be consistent with the nu	mber of miles repo	orted to state and fed	deral	
Average pave	ment condition index (P	CI) for agency's l	ocal streets		
	t be consistent with the info	year 2010, table "			
2006-2010" (pa	ges 15-18). For more inforr c.ca.gov/library/pothole_re	•	oort 2011.pdf.		
2006-2010" (pa http://www.mt	c.ca.gov/library/pothole reconstructions articles that ded by Measure B in a	t highlight Loca	l Streets and Roa	etter?	ınd
2006-2010" (pa http://www.mt	c.ca.gov/library/pothole reconstructions articles that ded by Measure B in a	t highlight Loca n agency or Ala ain in Question a	Il Streets and Roa Imeda CTC news #14 Additional In	letter? formation.	
2006-2010" (pa http://www.mt	c.ca.gov/library/pothole reconstructions articles that ded by Measure B in a No. If no, explorations a copy of the article(s)	t highlight Loca n agency or Ala ain in Question a	Il Streets and Roa Imeda CTC news #14 Additional In	letter? formation.	ogra

Yes	No. If no, explain	in Question #14 Additional Information.
•	e a printout of the website ated and accurate project i	in $\underline{\text{Attachment B}}$ and provide the URL below th information.
Website Add	iress	Printout Attached? (Y/N)
	ncy use signage that indica	ates use of Measure B funds for its Local Stree
Yes	· <u> </u>	in Question #14 Additional Information.
f yes, include	e photos of the signage in <u>A</u>	Attachment B and describe the signage below.
Signage Desc	cription	Photos attached? (Y/N)
Provide addi	tional information, if nece eets and Roads Program.	essary, to further explain Measure B expenditur



Mass Transit Program Compliance Report Summary

1.	. Did your agency receive Measure B Mass Transit Funds in the reporting period of July 1, 2011 through June 30, 2012?			
	Yes (Complete the Mass Transit second No (Do not complete the Mass			
2.	Complete the below contact inform	ation.		
	CONTACT INFORMATION			
	Mass Transit Program Agency Contact Name Title	Transportation Authority		
	Phone Numbe	r: (415) 364-3193		
	E-mail Address	g: yu@watertransit.org		
3. Complete the Excel Worksheets Tables 1 to 3 for Mass Transit. (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 audit and compliance report. Please contact Alameda CTC staff if you have question before submitting your report. All dollar figures must match your independent audit report and compliance report or Alameda CTC may reject your submitted.			
	Table 2: Summary of Expenditures and Accomplishments This table describes actual expenditures and activities incurred for F 2011-2012 (FY 11-12).			
	This table describ B funds within the	Table 3: Summary of Planned Projects and Reserve Funds This table describes your agency's plan to expend any remaining Measu B funds within the four-year time table of the funding agreement through FY 12-13 thru FY 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.			
	At June 30, 2012, WETA has a total of \$2,502,463 in unspent Measure B funds. These funds are reserved to fund transit capital replacement and rehabilitation projects for the Alameda ferry services.			
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)?			
	N/A			
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.			
	WETA will be establishing an Undesignated Fund Reserve with FY2012/13 Measure B pass-through funds. The Undesignated Fund Reserve balance will be equal to 10% of the annual pass-through revenue. No additional agency approvals are needed when reserve funds are used.			

7.	Did your agency publish articles that highlight Mass Transit projects and programs funded by Measure B in an agency or Alameda CTC newsletter? Yes No. If no, explain in Question #10 Additional Information. If yes, include a copy of the article(s) as Attachment C: Mass Transit Program Attachments and list the publication(s) and date(s) below.					
	Publication	Dat	e Published	Copy Attached?		
8.	Did your agency include a description of the Mass by Measure B on its website?	Tran	sit projects an	nd programs funded		
	Yes No. If no, explain in Question	#10 /	Additional Info	ormation.		
		If yes, include a printout of the website in <u>Attachment C</u> and provide the URL below that contains updated and accurate project information.				
	Website Address		Printout Attached? (Y/N)			
	http://sanfranciscobayferry.com/measure-b-fundir	ng	Υ	1		
9.	Did your agency use signage that indicates use of Measure B funds for its Mass Transit projects and programs? Yes No. If no, explain in Question #10 Additional Information.					
	If yes, include photos of the signage in <u>Attachment C</u> and describe the signage below.					
	Signage Description	Pho (Y/I	otos attached? V)			
	Sign posted at the Clay Street Terminal, in Oakland	Υ				
	Sign posted at the Main Street Terminal, in Alameda	Υ				
	Sign posted at the Harbor Bay Terminal, in Alameda	Υ				

the Mass Transit Program
The Measure B article was planned for the Spring issue of Full Speed Ahead, San Francisco Bay Ferry newsletter. Unfortunately this was the same time period that staff was focused on preparations for the transfer of the Vallejo Baylink ferry service to WETA from the City of Vallejo. We apologize for the oversight and plan on including the Measure B article in the Winter issue of our newsletter.

10. Provide additional information, if necessary, to further explain Measure B expenditures for



Paratransit Program Compliance Report Summary

1.	Did your agency receive Measure B F July 1, 2011 through June 30, 2012?	Paratransit Funds in the reporting period of
	Yes (Complete this Paratransit section No (Do not complete the Paratransit	
2.	Complete the below contact informa	tion.
	CONTACT INFORMATION	
	Paratransit Program Agency: Contact Name: Title:	
	Phone Number:	
	E-mail Address:	
3.	Complete the Excel Worksheets Tabl (Check the boxes below to indicate comp	
	The values entered compliance report. before submitting yo	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 apliance report or Alameda CTC may reject your submission.
		of Expenditures and Accomplishments s actual expenditures and activities incurred for FY 1.2).
	This table describe	of Planned Projects and Reserve Funds s your agency's plan to expend any remaining Measure four-year time table of the funding agreement through 5-16.

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.

7. List the amount of the Total Operating Expenses allocated to the following.

Category	Expense Amount Indicate zero if none.
Management (oversight, planning, budgeting, etc.)	\$
Customer Service and Outreach Activities	\$
Trip Provision (direct or contracted taxis, vans, shuttles, etc.)	\$
TOTAL Operating Expenses:	\$

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)

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

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*

^{*}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.

<u>-</u>		cy or Alameda CTC			
Yes	∐ No.	No. If no, explain in Question #13 Additional Information.			
		ne article(s) in <u>Attac</u> and date(s) below.	chment D: Paratransit Pr	rogram Attachment	
Publication			Date Published	Copy Attached?	
				.,,,	
	-	-	Paratransit projects ar	nd programs funde	
Measure B or	n its wehsite	2			
		•			
•	☐ No.	If no, explain in Qu	nestion #13 Additional Ir tachment D and provide mation.	•	
f yes, include	No. a printout cated and acc	If no, explain in Qu	tachment D and provide	•	
f yes, include contains upda	No. a printout cated and acc	If no, explain in Qu	tachment D and provide mation. Printout	•	
f yes, include contains upda	No. a printout cated and acc	If no, explain in Qu	tachment D and provide mation. Printout	•	
f yes, include contains upda Website Add	No. a printout of ated and accords ress ncy use signa	If no, explain in Quarter of the website in Aturate project inform	tachment D and provide mation. Printout	e the URL below tha	
If yes, include contains upda Website Add	No. a printout of the area and according to the area and according to the area area area. The area area area area area area area ar	If no, explain in Quantity of the website in Aturate project informate project informates that indicates the second control of the website in Aturate project informates that indicates the second control of the website in Aturate project information in Aturate project in Aturate project information in Aturate project	tachment D and provide mation. Printout Attached? (Y/N)	for its Paratransit	
f yes, include contains upda Website Add Did your ager projects and Yes	No. a printout of the accordance and accordance and accordance areas ncy use signate programs? No.	If no, explain in Quantity of the website in Aturate project informable age that indicates using the second of the website in Aturate project information.	Printout Attached? (Y/N)	for its Paratransit	
Did your agei	No. a printout of the area and according to the area and according to the area area area. The area area area area area area area ar	If no, explain in Quantity of the website in Aturate project informable age that indicates using the second of the website in Aturate project information.	Printout Attached? (Y/N) use of Measure B funds vestion #13 Additional In	for its Paratransit aformation. The signage below.	
Did your agei projects and Yes	No. a printout of the area and according to the area and according to the area area area. The area area area area area area area ar	If no, explain in Quantity of the website in Aturate project informable age that indicates using the second of the website in Aturate project information.	Printout Attached? (Y/N) use of Measure B funds vestion #13 Additional In hment D and describe the	for its Paratransit aformation. The signage below.	

. Provide additional information, if necessary, to further explain Measure B expenditule the Paratransit Program.				
		_		