



MAYOR: JOHN LIZALDE
MAYOR PRO TEM: ARISTON JULIAN
COUNCIL MEMBER: GINA RUBALCABA
COUNCIL MEMBER: JERRY BEATTY
COUNCIL MEMBER: VIRGINIA PONCE

CITY ADMINISTRATOR: ANDREW CARTER
CITY ATTORNEY: DAVID FLEISHMAN
CITY CLERK: JOICE EARLEEN RAGUZ
CITY TREASURER: PETRONA AMIDO

AGENDA

GUADALUPE CITY COUNCIL

Regular Meeting
Tuesday, January 12, 2016

REGULAR SESSION 6:00 P.M.

City Hall, Council Chambers
918 Obispo Street, Guadalupe, California 93434

In compliance with the Americans with Disabilities Act, if you need special assistance to participate in a City meeting or other services offered by this City, please contact the City Clerk's office, (805) 356-3891. Notification of at least 72 hours prior to the meeting or time when services are needed will assist the City staff in assuring that reasonable arrangements can be made to provide accessibility to the meeting or service.

*If you wish to speak concerning any item on the agenda, please complete the Request to Speak form that is provided at the rear of the Council Chambers prior to the completion of the staff report and hand the form to the City Clerk. **Note:** Staff Reports for this agenda, as well as any materials related to items on this agenda submitted after distribution of the agenda packet, are available for inspection at the office of the City Administrator, City Hall, 918 Obispo Street, Guadalupe, California during regular business hours, 8:00 a.m. to 4:30 p.m., Monday through Friday; telephone (805) 356-3891.*

1. **MOMENT OF SILENCE.**
2. **PLEDGE OF ALLEGIANCE.**
3. **ROLL CALL.** Council Members Jerry Beatty, Virginia Ponce, Gina Rubalcaba, Ariston Julian and Mayor John Lizalde.


4. **COMMUNITY PARTICIPATION FORUM.**

Each person will be limited to a discussion of 3 minutes or as directed by the Mayor. This time is reserved to accept comments from the public on Consent Agenda items, Closed Session items, or matters not otherwise scheduled on this agenda. Pursuant to provisions of the Brown Act, no action may be taken on these matters unless they are listed on the agenda, or unless certain emergency or special circumstances exist. City Council may direct Staff to investigate and/or schedule certain matters for consideration at a future City Council meeting.

5. **CONSENT CALENDAR.** The following items are presented for Council approval without discussion as a single agenda item in order to expedite the meeting. Should a Council Member wish to discuss or disapprove an item, it must be dropped from the blanket motion of approval and considered as a separate item.

- a. Payment of Warrants for the period ending January 7, 2016 to be approved for payment by the City Council. Subject to having been certified as being in conformity with the budget by the Finance Director.
 - b. Adopt Resolution No. 2016-01 and Resolution No. 2016-02 – Low Carbon Transit Operations Program (LCTOP) Funding.
 - c. Adoption of the Transit Drug and Alcohol Testing Program Manual.
6. **APPROVAL TO SUBMIT A GRANT APPLICATION TO THE FEDERAL EMERGENCY MANAGEMENT ADMINISTRATION FOR FUNDING TO REPLACE A FIRE ENGINE.**
- a. Written Staff Report (Gary Hoving, Director of Public Safety)
 - b. City Council discussion and consideration.
 - c. It is recommended that the City Council provide approval for City staff to submit a grant application to the Federal Emergency Management Administration to fund a fire engine for the Fire Department.
7. **PROHIBITION OF MEDICAL MARIJUANA CULTIVATION, PROCESSING AND TRANSPORT WITHIN THE CITY.** That the City introduce by title only and waive first reading of Ordinance No. 2016-440, an Ordinance of the City Council of the City of Guadalupe adding chapter 18.74 to the Guadalupe Municipal Code prohibiting the cultivation, processing and transport of medical marijuana.
- a. Written Staff Report (Dave Fleishman, City Attorney)
 - b. Written Communications.
 - c. Public Hearing.
 - d. City Council discussion and consideration.
 - e. It is recommended that the City Council concludes the public hearing and adopt first reading of Ordinance No. 2016-440.
8. **ECONOMIC DEVELOPMENT AND COMMERCIAL & INDUSTRIAL ZONING.**
- a. Written Staff Report (Andrew Carter, City Administrator)
 - b. City Council discussion and consideration.
 - c. It is recommended that the City Council 1) Discuss Topic; 2) Create Advisory Committee; and 3) Give direction to staff regarding evaluation of the City's Commercial & Industrial zoning regulations.
9. **CITY MANAGER REPORT/ FUTURE AGENDA ITEMS.**
10. **ANNOUNCEMENTS / COUNCIL ACTIVITY REPORTS.**
11. **ADJOURNMENT.**

I hereby certify under penalty of perjury under the laws of the State of California that the foregoing Agenda was posted at the City Hall display case, the Water Department and the City Clerk's office not less than 72 hours prior to the meeting. Dated this 8th day of January 2016.

By: 
Andrew Carter, City Administrator

REPORT TO THE CITY COUNCIL
Council Agenda of January 12, 2016

EB
Prepared by
Esther Britt

AC
Reviewed by
Andrew Carter

AM
Approved by
Annette Munoz

SUBJECT: Payment of warrants for the period ending January 07, 2016 to be approved for payment by the City Council. Subject to having been certified as being in conformity with the budget by the Finance Department staff.

RECOMMENDATION: That the City Council review and approve the listing of hand checks and warrants to be paid on January 13, 2016

BACKGROUND: Submittal of the listing of warrants issued by the City to vendors for the period and explanations for disbursement of these warrants. An exception, such as an emergency hand check may be required to be issued and paid prior to submittal of the warrant listing, however, this warrant will be identified as "Ratify" on the warrant listing.

141 SUBURBAN ROAD STE C-1 *** VENDOR.: ABA01 (ABALONE COAST ANALYTICAL, INC.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
15-7542	WATER SAMPLES	01-16	12/16/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	WATER SAMPLES	12 4425 2150	1	70.00	70.00
		(Wst.Wtr.Op.Fund Wastewater Profl Services)			
				Invoice Extension ---->	70.00
				Vendor Total ----->	70.00

P.O. BOX 6734 *** VENDOR.: ALL08 (ALLWEATHER LANDSCAPE MAINTENANCE, INC)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
26211	MAINTENANCE FOR 12/2015	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	MAINTENANCE FOR 12/2015	01 4300 2150	1	1677.00	1677.00
		{ General Fund Parks & Rec Profl Services }			
0002	MAINTENANCE FOR 12/2015	71 4454 2150	1	349.38	349.38
		{ MEASURE A MEASURE A Profl Services }			
0003	MAINTENANCE FOR 12/2015	01 4145 2150	1	349.37	349.37
		{ General Fund Building Mtce Profl Services }			
0004	MAINTENANCE FOR 12/2015	60 4490 2150	1	419.25	419.25
		{ Quad.Assmt.Dist Quad.Assmt Dist Profl Services }			
				Invoice Extension ---->	2795.00

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
26308	GLYPHOSATE PRO-WEED CONTROL	01-16	11/30/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	GLYPHOSATE PRO-WEED CONTROL	01 4300 2150	1	75.00	75.00
		{ General Fund Parks & Rec Profl Services }			
0002	GLYPHOSATE PRO-WEED CONTROL	71 4454 2150	1	15.63	15.63
		{ MEASURE A MEASURE A Profl Services }			
0003	GLYPHOSATE PRO-WEED CONTROL	01 4145 2150	1	15.62	15.62
		{ General Fund Building Mtce Profl Services }			
0004	GLYPHOSATE PRO-WEED CONTROL	60 4490 2150	1	18.75	18.75
		{ Quad.Assmt.Dist Quad.Assmt Dist Profl Services }			
				Invoice Extension ---->	125.00
				Vendor Total ----->	2920.00

AUTHORS AND PUBLISHERS *** VENDOR.: AME01 (AMERICAN SOCIETY OF COMPOSERS)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
060616	BALANCE FROM ANNUAL PAYMENT FOR 2016	01-16	12/30/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	BALANCE FROM ANNUAL PAYMENT FOR 2016	01 4105 2150	1	1.00	1.00
		{ General Fund Administration Profl Services }			
				Invoice Extension ---->	1.00
				Vendor Total ----->	1.00

912 W. BETTERAVIA ROAD *** VENDOR.: AME03 (AMERIGAS CORP.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
304710814	PROPANE	01-16	12/17/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	PROPANE	12 4425 1560	1	883.68	883.68
		{ Wst.Wtr.Op.Fund Wastewater Fuels/Lubricant }			
				Invoice Extension ---->	883.68

912 W. BETTERAVIA ROAD *** VENDOR.: AME03 (AMERIGAS CORP.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
				Vendor Total -----> 883.68 =====

543-C W. BETTERAVIA ROAD *** VENDOR.: AME04 (AMERICAN INDUSTRIAL SUPPLY INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
0288440IN APPLICATORS,ANTACID TABLETS,IBUPROFEN	01-16	12/17/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 APPLICATORS,ANTACID TABLETS,IBUPROFEN	12 4425 1550		1	238.87	238.87
				(Wst.Wtr.Op.Fund Wastewater Op Supp/Expense)	
				Invoice Extension -----> 238.87	
				Vendor Total -----> 238.87 =====	

AUS WEST LOCKBOX *** VENDOR.: ARA01 (ARAMARK UNIFORM SERVICES)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
530885696 UNIFORM	01-16	08/25/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 UNIFORM	12 4425 2150		1	15.07	15.07
				(Wst.Wtr.Op.Fund Wastewater Profl Services)	
				Invoice Extension -----> 15.07	

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
531167578 MAT,WET AND DUST MOP	01-16	12/15/16 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 MAT,WET AND DUST MOP	01 4145 2150		1	34.53	34.53
				(General Fund Building Mtce Profl Services)	
				Invoice Extension -----> 34.53	

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
531167579 UNIFORMS	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 UNIFORMS	10 4420 2150		1	1.37	1.37
				(Wtr. Oper. Fund Water Operating Profl Services)	
0002 UNIFORMS	01 4300 2150		1	.91	.91
				(General Fund Parks & Rec Profl Services)	
0003 UNIFORMS	01 4145 2150		1	.91	.91
				(General Fund Building Mtce Profl Services)	
0004 UNIFORMS	71 4454 2150		1	1.37	1.37
				(MEASURE A MEASURE A Profl Services)	
0005 UNIFORMS	10 4420 2150		1	4.57	4.57
				(Wtr. Oper. Fund Water Operating Profl Services)	
				Invoice Extension -----> 9.13	

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
531167581 MATS, SOAP-LOTION,MOPS	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 MATS, SOAP-LOTION,MOPS	12 4425 2150		1	77.20	77.20
				(Wst.Wtr.Op.Fund Wastewater Profl Services)	
				Invoice Extension -----> 77.20	

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
531167582 UNIFORM	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 UNIFORM	71 4454 2150		1	2.28	2.28
				(MEASURE A MEASURE A Profl Services)	

AUS WEST LOCKBOX
 P.O. BOX 101179
 INVOICE-TYPE DESCRIPTION

*** VENDOR.: ARA01 (ARAMARK UNIFORM SERVICES)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
Line Description			G/L Account No Unit(s) Unit Cost Amount	
0002 UNIFORM			01 4145 2150 1 2.29 2.29 (General Fund Building Mtce Profl Services)	
0003 UNIFORM			01 4300 2150 1 2.29 2.29 (General Fund Parks & Rec Profl Services)	
			Invoice Extension ---->	6.86

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
531185036 WET AND DUST MOP,MAT	01-16	12/22/15 N N N	A-NET30 FROM INVOICE	2010

Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 WET AND DUST MOP,MAT	01 4145 2150	1	34.53	34.53
	(General Fund Building Mtce Profl Services)			
	Invoice Extension ---->			34.53

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
531185037 UNIFORM	01-16	12/22/15 N N N	A-NET30 FROM INVOICE	2010

Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 UNIFORM	10 4420 2150	1	30.16	30.16
	(Wtr. Oper. Fund Water Operating Profl Services)			
0002 UNIFORM	10 4420 2150	1	1.82	1.82
	(Wtr. Oper. Fund Water Operating Profl Services)			
0003 UNIFORM	01 4145 2150	1	1.21	1.21
	(General Fund Building Mtce Profl Services)			
0004 UNIFORM	01 4300 2150	1	1.21	1.21
	(General Fund Parks & Rec Profl Services)			
0005 UNIFORM	71 4454 2150	1	1.83	1.83
	(MEASURE A MEASURE A Profl Services)			
	Invoice Extension ---->			36.23

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
531185039 UNIFORM AND TOWELS,SOAP,TISSUE	01-16	12/22/15 N N N	A-NET30 FROM INVOICE	2010

Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 UNIFORM AND TOWELS,SOAP,TISSUE	12 4425 2150	1	45.05	45.05
	(Wst.Wtr.Op.Fund Wastewater Profl Services)			
	Invoice Extension ---->			45.05

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
531185040 UNIFORMS	01-16	12/22/15 N N N	A-NET30 FROM INVOICE	2010

Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 UNIFORMS	71 4454 2150	1	2.28	2.28
	(MEASURE A MEASURE A Profl Services)			
0002 UNIFORMS	01 4145 2150	1	2.29	2.29
	(General Fund Building Mtce Profl Services)			
0003 UNIFORMS	01 4300 2150	1	2.29	2.29
	(General Fund Parks & Rec Profl Services)			
	Invoice Extension ---->			6.86

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
531202337 MAT,DUST AND WET MOPS	01-16	12/29/15 N N N	A-NET30 FROM INVOICE	2010

Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 MAT,DUST AND WET MOPS	01 4145 2150	1	34.53	34.53
	(General Fund Building Mtce Profl Services)			
	Invoice Extension ---->			34.53

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
531202338 UNIFORM	01-16	12/29/15 N N N	A-NET30 FROM INVOICE	2010

Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 UNIFORM	10 4420 2150	1	4.57	4.57
	(Wtr. Oper. Fund Water Operating Profl Services)			
0002 UNIFORM	01 4145 2150	1	.91	.91
	(General Fund Building Mtce Profl Services)			

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 AUS WEST LOCKBOX *** VENDOR.: ARA01 (ARAMARK UNIFORM SERVICES)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0003	UNIFORM		01 4300 2150	1	.91	.91
			(General Fund Parks & Rec Profl Services)			
0004	UNIFORM		10 4420 2150	1	1.37	1.37
			(Wtr. Oper. Fund Water Operating Profl Services)			
0005	UNIFORM		71 4454 2150	1	1.37	1.37
			(MEASURE A MEASURE A Profl Services)			
				Invoice Extension ---->		9.13

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
531202340	UNIFORM	01-16	12/29/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	UNIFORM		12 4425 2150	1	16.70	16.70
			(Wst.Wtr.Op.Fund Wastewater Profl Services)			
				Invoice Extension ---->		16.70

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
531202341	UNIFORM	01-16	12/29/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	UNIFORM		01 4145 2150	1	2.29	2.29
			(General Fund Building Mtce Profl Services)			
0002	UNIFORM		01 4300 2150	1	2.29	2.29
			(General Fund Parks & Rec Profl Services)			
0003	UNIFORM		71 4454 2150	1	2.28	2.28
			(MEASURE A MEASURE A Profl Services)			
				Invoice Extension ---->		6.86
				Vendor Total ----->		332.68
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P.O. BOX 1920 *** VENDOR.: CAL01 (CAL COAST FIRE PROTECTION)
 TINO ESTRADA

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
18358	NITROGEN GAS FILL,FIRE EXTINGUISHER INSPECTION,ETC	01-16	12/08/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	NITROGEN GAS FILL,FIRE EXTINGUISHER INSPECTION,ETC		12 4425 1550	1	405.00	405.00
			(Wst.Wtr.Op.Fund Wastewater Op Supp/Expense)			
				Invoice Extension ---->		405.00
				Vendor Total ----->		405.00
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 *** VENDOR.: CAR01 (ANDREW CARTER)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
010616	REIMBURSMET FOR CELL PHONE	01-16	12/12/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	REIMBURSMET FOR CELL PHONE		01 4105 1300	1	70.98	70.98
			(General Fund Administration Bus Exp/Train)			
				Invoice Extension ---->		70.98
				Vendor Total ----->		70.98
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P.O. BOX 790408 *** VENDOR.: CAR09 (CARDMEMBER SERVICE)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
0013	DANA SAFETY SUPPLY-STEEL WINDOW BARRIERS	01-16	12/30/15 N N N	A-NET30 FROM INVOICE	2010

P.O. BOX 790408

*** VENDOR.: CAR09 (CARDMEMBER SERVICE)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
Line	Description			G/L Account No	Unit(s) Unit Cost Amount
0001	DANA SAFETY SUPPLY-STEEL WINDOW BARRIERS	01	4220 1460	(General Fund Fire Vehicle Maintnc)	1 649.47 649.47
0002	USE TAX	01	2265	(General Fund USE TAX PAYABLE)	-1 49.50 -49.50
					Invoice Extension ----> 599.97

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
3996	RETURN ITEM-UPS	01-16	12/04/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description			G/L Account No	Unit(s) Unit Cost Amount
0001	RETURN ITEM-UPS	01	4200 1200	(General Fund Police Off Suppl/Postg)	1 5.95 5.95
					Invoice Extension ----> 5.95

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
5615	BUILDER'S BOOK	01-16	12/21/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description			G/L Account No	Unit(s) Unit Cost Amount
0001	BUILDER'S BOOK	01	4405 1200	(General Fund Bldg and Safety Off Suppl/Postg)	1 56.08 56.08
					Invoice Extension ----> 56.08

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
5795	BOOK OF WHITE RITE-ON TABS	01-16	12/03/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description			G/L Account No	Unit(s) Unit Cost Amount
0001	BOOK OF WHITE RITE-ON TABS	01	4120 1200	(General Fund Finance Off Suppl/Postg)	1 21.16 21.16
0002	USE TAX	01	2265	(General Fund USE TAX PAYABLE)	-1 1.16 -1.16
					Invoice Extension ----> 20.00

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
5962	LIGHTS FOR RESCUE UNIT	01-16	12/23/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description			G/L Account No	Unit(s) Unit Cost Amount
0001	LIGHTS FOR RESCUE UNIT	01	4200 1460	(General Fund Police Vehicle Maintnc)	1 688.08 688.08
0002	USE TAX	01	2265	(General Fund USE TAX PAYABLE)	-1 52.44 -52.44
					Invoice Extension ----> 635.64

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
9234	WALI UPDATE -DEVELOPMENT & LITERACY EVENT IN GUAD	01-16	12/09/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description			G/L Account No	Unit(s) Unit Cost Amount
0001	WALI UPDATE -DEVELOPMENT & LITERACY EVENT IN GUAD	01	4105 1300	(General Fund Administration Bus Exp/Train)	1 22.00 22.00
					Invoice Extension ----> 22.00

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
9463	FUEL	01-16	12/04/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description			G/L Account No	Unit(s) Unit Cost Amount
0001	FUEL	01	4105 1560	(General Fund Administration Fuels/Lubricant)	1 35.74 35.74
					Invoice Extension ----> 35.74

Vendor Total -----> 1375.38

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P.O. BOX 60229 *** VENDOR.: CHA03 (CHARTER COMMUNICATIONS)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
122815	CABLE-	01-16	12/14/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	CABLE-	01 2050 (General Fund Employee Trust Fund)	1	7.00	7.00
0002	CABLE-	57 4213 1000 (Alcohol & Drug Drug & Alcohol Utilities)	1	7.00	7.00
0003	CABLE-	01 4145 1000 (General Fund Building Mtce Utilities)	1	85.81	85.81
Invoice Extension ---->					99.81
Vendor Total ----->					99.81 =====

ATTN:BILLING/COLLECTION *** VENDOR.: CIT04 (CITY OF SANTA BARBARA/JPA)

P.O. BOX 1990

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
15907	CLETS MESSAGE SWITCHING SYSTEM FROM 06/15-11/2015	01-16	12/28/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	CLETS MESSAGE SWITCHING SYSTEM FROM 06/15-11/2015	01 4200 2350 (General Fund Police Svcs.Other Agen)	1	415.72	415.72
Invoice Extension ---->					415.72
Vendor Total ----->					415.72 =====

6375 W. CENTRAL AVENUE *** VENDOR.: CIT07 (CITY OF FRESNO-POLICE DEPARTMENT)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
RTC001818	PATROL RIFLE FOR 1ST RESPONDERS (TRAINING)	01-16	12/21/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	PATROL RIFLE FOR 1ST RESPONDERS (TRAINING)	01 4200 1300 (General Fund Police Bus Exp/Train)	1	1376.00	1376.00
Invoice Extension ---->					1376.00
Vendor Total ----->					1376.00 =====

918 OBISPO ST *** VENDOR.: CIT08 (CITY OF GUADALUPE (FINANC))

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
123015	4402 AMBER,1188,1070,912,110,873-A,949,1075 GUADAL	01-16	01/01/16 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	4402 AMBER,1188,1070,912,110,873-A,949,1075 GUADAL	71 4454 1000 (MEASURE A MEASURE A Utilities)	1	184.96	184.96
0002	5001,5101,4913,5201 W. MAIN ST	60 4490 1000 (Quad.Assmt.Dist Quad.Assmt Dist Utilities)	1	69.36	69.36
0003	5125 W. MAIN	12 4425 1000 (Wst.Wtr.Op.Fund Wastewater Utilities)	1	435.45	435.45
0004	4689-A 11TH ST,406 TOGNAZZINI	01 4300 1000 (General Fund Parks & Rec Utilities)	1	46.24	46.24
0005	5301,W. MAIN,4760 GARRETT,4800 3RD ST,180 PIONEER	01 4300 1000 (General Fund Parks & Rec Utilities)	1	2327.51	2327.51
0006	1025-a,1025,330,884,4545,4550 10th ST,918 OBISPO	01 4145 1000 (General Fund Building Mtce Utilities)	1	323.25	323.25
Invoice Extension ---->					3386.77
Vendor Total ----->					3386.77 =====

110 E. COOK STREET *** VENDOR.: CIT12 (CITY OF SANTA MARIA)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
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110 E. COOK STREET *** VENDOR.: CIT12 (CITY OF SANTA MARIA)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
68512 FUEL FOR 10/2015	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	FUEL FOR 10/2015	23 4461 1560	1	4370.37	4370.37
		(LTF - Transit LTF Transit Fuels/Lubricant)			
				Invoice Extension ---->	4370.37

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
68513 FUEL FOR 11/2015	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	FUEL FOR 11/2015	23 4461 1560	1	4007.43	4007.43
		(LTF - Transit LTF Transit Fuels/Lubricant)			
				Invoice Extension ---->	4007.43
				Vendor Total ----->	8377.80

P.O. BOX 22732 *** VENDOR.: COA02 (COASTLINE EQUIPMENT COMPAY INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
274049 KEYS	01-16	12/21/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	KEYS	71 4454 1500	1	19.88	19.88
		(MEASURE A MEASURE A Equipment Replc)			
				Invoice Extension ---->	19.88
				Vendor Total ----->	19.88

3755 WASHINGTON BLVD *** VENDOR.: COR01 (CORBIN WILLITS SYSTEM INC)
 Suite 101

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
000B51215 PROFESSIONAL SERVICES	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	PROFESSIONAL SERVICES	01 4120 2150	1	592.62	592.62
		(General Fund Finance Profl Services)			
				Invoice Extension ---->	592.62
				Vendor Total ----->	592.62

ACCOUNT SERVICES *** VENDOR.: DEP09 (DEPARTMENT OF JUSTICE)
 P.O. BOX 944255

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
139598 BLOOD ALCOHOL ANALYSIS	01-16	09/09/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	BLOOD ALCOHOL ANALYSIS	01 4200 2350	1	140.00	140.00
		(General Fund Police Svcs.Other Agen)			
				Invoice Extension ---->	140.00
				Vendor Total ----->	140.00

5130 SAN JACINTO AVENUE *** VENDOR.: EIK01 (EIKHOF DESIGN GROUP INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
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5130 SAN JACINTO AVENUE *** VENDOR.: EIK01 (EIKHOF DESIGN GROUP INC.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
2016-001	PROFESSIONAL SERVICES	01-16	12/01/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	PROFESSIONAL SERVICES-STREET & STORM DRAINAGE	20 4430 2150	1	2325.00	2325.00
	(Gas Tax Fund Gas Tax-Streets Prof'l Services)				
0002	ALTERNATIVE TRANSPORTATION WORK	71 4454 1559	1	225.00	225.00
	(MEASURE A MEASURE A Alternate Trans)				
0003	PASADERA DEVELOPMENT WORK	01 2004	1	1275.00	1275.00
	(General Fund D.J. FARMS)				
0004	PIONEER ST APTS	01 2075	1	375.00	375.00
	(General Fund Pioneer Street Apartments)				
0005	CABRILLO ECONOMIC DEVELOPMENT CORPORATION	01 2065	1	150.00	150.00
	(General Fund CEDC Family)				
0006	STREET & STORM DRAINAGE WORK	20 4430 2150	1	2045.00	2045.00
	(Gas Tax Fund Gas Tax-Streets Prof'l Services)				
	Invoice Extension ---->				6395.00
	Vendor Total ----->				6395.00

233 GRANADA DRIVE SUITE D *** VENDOR.: EXE01 (EXECUTIVE JANITORIAL INC.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
63195	PROFESSIONAL SERVICES FOR 12/2015	01-16	12/21/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	PROFESSIONAL SERVICES FOR 12/2015	01 4145 2150	1	597.00	597.00
	(General Fund Building Mtce Prof'l Services)				
	Invoice Extension ---->				597.00
	Vendor Total ----->				597.00

P.O. BOX 71628 *** VENDOR.: GAL01 (GALL'S LLC.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
004578191	GLOVE (UNIFORM) * Invoice will NOT be added to vendor's 1099 disbursements *	01-16	12/14/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	GLOVE (UNIFORM)	01 4200 0450	1	37.88	37.88
	(General Fund Police Other Benefits)				
	Invoice Extension ---->				37.88

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
004590922	GALLS 100W CONCEALMENT SPEAKER W/UNI	01-16	12/16/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	GALLS 100W CONCEALMENT SPEAKER W/UNI	01 4200 1460	1	138.56	138.56
	(General Fund Police Vehicle Maintnc)				
	Invoice Extension ---->				138.56

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
004592358	EPSILON 2 ECONOMY SIREN/6 SWITCH	01-16	12/16/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	EPSILON 2 ECONOMY SIREN/6 SWITCH	01 4200 1460	1	955.71	955.71
	(General Fund Police Vehicle Maintnc)				
	Invoice Extension ---->				955.71

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
004611187	UNIFORM FOR CHIEF HOVING	01-16	12/18/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	UNIFORM FOR CHIEF HOVING	01 4200 0450	1	153.28	153.28
	(General Fund Police Other Benefits)				
	Invoice Extension ---->				153.28

P.O. BOX 71628

*** VENDOR.: GAL01 (GALL'S LLC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
			Vendor Total ----->	1285.43 =====

P.O. BOX 51488

*** VENDOR.: GAR08 (HENRY GARCIA)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
010516 DEED OF TRUST FOR 01/2016	01-16	01/05/16 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 DEED OF TRUST FOR 01/2016	26	2300	1	404.88	404.88
	(RDA-Op.Fund Loan Payable)				
			Invoice Extension ---->		404.88
			Vendor Total ----->		404.88 =====

2222 SOUTH BROADWAY STE A

*** VENDOR.: GLE01 (GLENN,BURDETTE,PHILLIPS&B INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
148826 PROFESSIONAL SERVICES (AUDIT AS OF 06/2015)	01-16	12/31/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 PROFESSIONAL SERVICES (AUDIT AS OF 06/2015)	01	4140 2150	1	11000.00	11000.00
	(General Fund Non-Departmentl Profl Services)				
0002 PROFESSIONAL SERVICES (AUDIT AS OF 06/2015)	10	4420 2150	1	11000.00	11000.00
	(Wtr. Oper. Fund Water Operating Profl Services)				
0003 PROFESSIONAL SERVICES (AUDIT AS OF 06/2015)	12	4425 2150	1	11000.00	11000.00
	(Wst.Wtr.Op.Fund Wastewater Profl Services)				
			Invoice Extension ---->		33000.00
			Vendor Total ----->		33000.00 =====

ANDRES CAMARENA
 1076 GUADALUPE STREET

*** VENDOR.: GON01 (GONZALEZ AUTOMOTRIZ)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
1426 VEHICLE MAINTENANCE	01-16	12/16/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 VEHICLE MAINTENANCE	10	4420 1460	1	39.00	39.00
	(Wtr. Oper. Fund Water Operating Vehicle Maintnc)				
0002 VEHICLE MAINTENANCE	71	4454 1460	1	39.00	39.00
	(MEASURE A MEASURE A Vehicle Maintnc)				
0003 VEHICLE MAINTENANCE	01	4145 1460	1	26.00	26.00
	(General Fund Building Mtce Vehicle Maintnc)				
0004 VEHICLE MAINTENANCE	01	4300 1460	1	26.00	26.00
	(General Fund Parks & Rec Vehicle Maintnc)				
			Invoice Extension ---->		130.00

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
19945 VEHICLE MAINTENANCE	01-16	12/16/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 VEHICLE MAINTENANCE	71	4454 1460	1	13.00	13.00
	(MEASURE A MEASURE A Vehicle Maintnc)				
0002 VEHICLE MAINTENANCE	10	4420 1460	1	13.00	13.00
	(Wtr. Oper. Fund Water Operating Vehicle Maintnc)				
0003 VEHICLE MAINTENANCE	01	4145 1460	1	8.00	8.00
	(General Fund Building Mtce Vehicle Maintnc)				
0004 VEHICLE MAINTENANCE	01	4300 1460	1	8.00	8.00
	(General Fund Parks & Rec Vehicle Maintnc)				
			Invoice Extension ---->		42.00
			Vendor Total ----->		172.00 =====

*** VENDOR.: GUA02 (GUADALUPE HARDWARE COMPANY INC.)

P.O. BOX 337

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
93339	KEYS	01-16	12/17/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	KEYS	12	4425 1550	1	5.60	5.60
(Wst.Wtr.Op.Fund Wastewater Op Supp/Expense)						
Invoice Extension ---->					5.60	

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
93527	TASH BAGS,BOLT	01-16	12/13/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	TASH BAGS,BOLT	12	4425 1550	1	9.07	9.07
(Wst.Wtr.Op.Fund Wastewater Op Supp/Expense)						
Invoice Extension ---->					9.07	

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
93636	BOLT	01-16	12/17/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	BOLT	01	4200 1550	1	1.08	1.08
(General Fund Police Op Supp/Expense)						
Invoice Extension ---->					1.08	

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
93737	RAPID SET	01-16	12/09/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	RAPID SET	01	4145 1550	1	20.55	20.55
(General Fund Building Mtce Op Supp/Expense)						
Invoice Extension ---->					20.55	

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
93957	PACKAGEING TAPE & WITH DISPENCE, FIX-ALL	01-16	12/19/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	PACKAGEING TAPE & WITH DISPENCE, FIX-ALL	01	4145 1550	1	54.06	54.06
(General Fund Building Mtce Op Supp/Expense)						
Invoice Extension ---->					54.06	

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
93972	DOUBLE BREAKER, FLOURSCENT BULB'S	01-16	12/22/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	DOUBLE BREAKER, FLOURSCENT BULB'S	01	4145 1550	1	106.68	106.68
(General Fund Building Mtce Op Supp/Expense)						
Invoice Extension ---->					106.68	

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
93996	GLASS CLEANER, SHOVEL, MOTOR OIL, BATTERIES	01-16	12/19/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	GLASS CLEANER, SHOVEL, MOTOR OIL, BATTERIES	71	4454 1550	1	62.15	62.15
(MEASURE A MEASURE A Op Supp/Expense)						
Invoice Extension ---->					62.15	

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
94130	SHIPPING TAPE	01-16	12/01/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	SHIPPING TAPE	01	4200 1550	1	8.32	8.32
(General Fund Police Op Supp/Expense)						
Invoice Extension ---->					8.32	

*** VENDOR.: GUA02 (GUADALUPE HARDWARE COMPANY INC.)

P.O. BOX 337

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
94345	MASTER LOCK,GLOVES,NUTS,BOLT	01-16	12/13/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	MASTER LOCK,GLOVES,NUTS,BOLT	71 4454 1550	1	80.34	80.34
		(MEASURE A MEASURE A Op Supp/Expense)			
				Invoice Extension ---->	80.34

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
94359	BATTERY	01-16	12/07/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	BATTERY	01 4200 1550	1	5.39	5.39
		(General Fund Police Op Supp/Expense)			
				Invoice Extension ---->	5.39

Vendor Total -----> 353.24
 =====

621 GUADALUPE STREET
 LUIS RUIZ

*** VENDOR.: GUA03 (GUADALUPE LAUNDROMAT & DRY CLEANING)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
7693	1 TURNOUT	01-16	12/26/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	1 TURNOUT	01 4220 1400	1	5.00	5.00
		(General Fund Fire Equipment Maint)			
				Invoice Extension ---->	5.00

Vendor Total -----> 5.00
 =====

1421 PARK STREET

*** VENDOR.: GWA01 (GREAT WESTERN ALARM & COMMUNICATION INC.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
201752101	PROFESSIONAL SERVICES FOR 01/01/-01/31/16	01-16	01/01/16 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	PROFESSIONAL SERVICES FOR 01/01/-01/31/16	10 4420 2150	1	47.00	47.00
		(Wtr. Oper. Fund Water Operating Profl Services)			
				Invoice Extension ---->	47.00

Vendor Total -----> 47.00
 =====

8930 MORRO ROAD

*** VENDOR.: HAN04 (HANLEY & FLEISHMAN,LLP)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
2667	PROFESSIONAL SERVICES	01-16	12/31/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	PROFESSIONAL SERVICES	01 4110 2150	1	2430.00	2430.00
		(General Fund City Attorney Profl Services)			
0002	PROFESSIONAL SERVICES-WATER	10 4420 2150	1	30.00	30.00
		(Wtr. Oper. Fund Water Operating Profl Services)			
0003	PROFESSIONAL SERVICES-RDA	26 4500 2150	1	165.00	165.00
		(RDA-Op.Fund Redevelopment Profl Services)			
0004	PROFESSIONAL SERVICES-STREET	20 4430 2150	1	75.00	75.00
		(Gas Tax Fund Gas Tax-Streets Profl Services)			
0005	PROFESSIONAL SERVICES-BEACHSIDE	01 2073	1	15.00	15.00
		(General Fund Beachside Cooler-Peralta)			
				Invoice Extension ---->	2715.00

Vendor Total -----> 2715.00
 =====

771 GUADALUPE STREET
 HARRY MASATANI
 INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT No

010616 LEASE PAYMENT FOR BANDSHELL FOR 01/2016 01-16 01/06/16 N N N A-NET30 FROM INVOICE 2010

*** VENDOR.: HAR05 (HARRY & KIMIKO MASATANI)

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	LEASE PAYMENT FOR BANDSHELL FOR 01/2016	01 4300 2150	1	50.00	50.00
	(General Fund Parks & Rec Profl Services)				
	Invoice Extension ---->				50.00
	Vendor Total ----->				50.00

P.O. BOX 30193
 INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT No

122915 POSTAGE 01-16 12/13/15 N N N A-NET30 FROM INVOICE 2010

*** VENDOR.: HAS01 (TOTALFUNDS BY HASLER)

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	POSTAGE	10 4420 1200	1	1500.00	1500.00
	(Wtr. Oper. Fund Water Operating Off Suppl/Postg)				
0002	POSTAGE	12 4425 1200	1	1500.00	1500.00
	(Wst.Wtr.Op.Fund Wastewater Off Suppl/Postg)				
	Invoice Extension ---->				3000.00
	Vendor Total ----->				3000.00

DEPT 32-2502415643
 P.O. BOX 9055
 INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT No

2011988 WIREWHEEL,DBOARD TAPE 01-16 11/18/15 N N N A-NET30 FROM INVOICE 2010

*** VENDOR.: HOM02 (HOME DEPOT CREDIT SERVICES)

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	WIREWHEEL,DBOARD TAPE	71 4454 1550	1	40.07	40.07
	(MEASURE A MEASURE A Op Supp/Expense)				
	Invoice Extension ---->				40.07
	Vendor Total ----->				40.07

6144 CALLE REAL SUITE 200
 INVOICE-TYPE DESCRIPTION PERIOD DATE TERM-DESCRIPTION G/L ACCOUNT No

816204 COMMUNICATION 01-16 12/21/15 N N N A-NET30 FROM INVOICE 2010

*** VENDOR.: IMP01 (IMPULSE INTERNET SERVICES)

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	COMMUNICATION	01 4405 1150	1	141.19	141.19
	(General Fund Bldg and Safety Communications)				
0002	COMMUNICATION	12 4425 1150	1	141.19	141.19
	(Wst.Wtr.Op.Fund Wastewater Communications)				
0003	COMMUNICATION	01 4200 1150	1	141.19	141.19
	(General Fund Police Communications)				
0004	COMMUNICATION	01 4120 1150	1	141.19	141.19
	(General Fund Finance Communications)				
0005	COMMUNICATION	01 4220 1150	1	141.19	141.19
	(General Fund Fire Communications)				
0006	COMMUNICATION	01 4105 1150	1	141.19	141.19
	(General Fund Administration Communications)				
0007	COMMUNICATION	10 4420 1150	1	141.19	141.19
	(Wtr. Oper. Fund Water Operating Communications)				
0008	COMMUNICATION	01 4300 1150	1	141.19	141.19
	(General Fund Parks & Rec Communications)				
0009	COMMUNICATION	10 4420 1150	1	28.28	28.28
	(Wtr. Oper. Fund Water Operating Communications)				
0010	COMMUNICATION	20 4430 1150	1	56.47	56.47
	(Gas Tax Fund Gas Tax-Streets Communications)				
0011	COMMUNICATION	71 4454 1150	1	56.47	56.47
	(MEASURE A MEASURE A Communications)				
	Invoice Extension ---->				1270.74
	Vendor Total ----->				1270.74

10225 82ND AVENUE *** VENDOR.: INT02 (INTERSPIRO INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
C-11-410 MASK FIT TESTING, WIRELESS HUD,MASK W/BV	01-16	12/21/15 N N N	A-NET30 FROM INVOICE	2010
Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 MASK FIT TESTING, WIRELESS HUD,MASK W/BV	01 4220 1550	1	650.00	650.00
	(General Fund Fire Op Supp/Expense)			
			Invoice Extension ---->	650.00
			Vendor Total ----->	650.00

*** VENDOR.: IWA01 (STEVE IWASKO)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010516 REIMBURSEMENT FOR UNIFORM - EQUIPMENT	01-16	01/04/16 N N N	A-NET30 FROM INVOICE	2010
Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 REIMBURSEMENT FOR UNIFORM - EQUIPMENT	01 4200 0450	1	194.35	194.35
	(General Fund Police Other Benefits)			
			Invoice Extension ---->	194.35

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010716 REIMBURSEMENT FOR 1ST RESPONDER TRAINING & MEALS	01-16	01/04/16 N N N	A-NET30 FROM INVOICE	2010
Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 REIMBURSEMENT FOR 1ST RESPONDER TRAINING & MEALS	01 4200 1300	1	284.77	284.77
	(General Fund Police Bus Exp/Train)			
			Invoice Extension ---->	284.77
			Vendor Total ----->	479.12

JOHN R. GLAU *** VENDOR.: JGI01 (J. GLAU INVESTIGATION)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
1487 PROFESSIONAL SERVICES	01-16	12/28/15 N N N	A-NET30 FROM INVOICE	2010
Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 PROFESSIONAL SERVICES	01 4200 2150	1	120.00	120.00
	(General Fund Police Profl Services)			
			Invoice Extension ---->	120.00
			Vendor Total ----->	120.00

P.O. BOX 400 *** VENDOR.: LEE01 (LEE CENTRAL COAST NEWSPAPERS)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
71177 WATER & WW INCREASE-PUBLIC HEARING	01-16	12/09/15 N N N	A-NET30 FROM INVOICE	2010
Line Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001 WATER & WW INCREASE-PUBLIC HEARING	10 4420 1250	1	55.88	55.88
	(Wtr. Oper. Fund Water Operating Advertisin/Pub.)			
0002 WATER & WW INCREASE-PUBLIC HEARING	12 4425 1250	1	55.87	55.87
	(Wst.Wtr.Op.Fund Wastewater Advertisin/Pub.)			
			Invoice Extension ---->	111.75
			Vendor Total ----->	111.75

*** VENDOR.: MED01 (FRANK MEDINA)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
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*** VENDOR.: MED01 (FRANK MEDINA)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010516	MEALS & MILEAGE 1ST RESPONDER TRAINING	01-16	01/04/16 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	MEALS & MILEAGE 1ST RESPONDER TRAINING	01 4200 1300	1	252.00	252.00
	(General Fund Police Bus Exp/Train)				
	Invoice Extension ---->				252.00
	Vendor Total ----->				252.00

P.O. BOX 4181 *** VENDOR.: NEX03 (NEXTEL COMMUNICATIONS)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
122815	COMMUNICATION	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	COMMUNICATION	10 4420 1150	1	119.85	119.85
	(Wtr. Oper. Fund Water Operating Communications)				
0002	COMMUNICATION	12 4425 1150	1	34.59	34.59
	(Wst.Wtr.Op.Fund Wastewater Communications)				
0003	COMMUNICATION	71 4454 1150	1	14.04	14.04
	(MEASURE A MEASURE A Communications)				
0004	COMMUNICATION	01 4145 1150	1	14.03	14.03
	(General Fund Building Mtce Communications)				
0005	COMMUNICATION	01 4300 1150	1	14.03	14.03
	(General Fund Parks & Rec Communications)				
	Invoice Extension ---->				196.54
	Vendor Total ----->				196.54

P.O. BOX 5200 *** VENDOR.: NIC01 (NICKSON'S MACHINESHOP INC)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
5767	INSTALLATION OF LIGHBAR, CONSOLE, CONTROLER UNIT1502	01-16	12/18/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	INSTALLATION OF LIGHBAR, CONSOLE, CONTROLER UNIT1502	01 4200 1460	1	1800.00	1800.00
	(General Fund Police Vehicle Maintnc)				
	Invoice Extension ---->				1800.00
	Vendor Total ----->				1800.00

GARY NICKLIN *** VENDOR.: NIC02 (NICK'S TELECOM)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
5765	WHELLEN,JUSTICE, LED LIGHTBAR UNIT 1502	01-16	12/18/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	WHELLEN,JUSTICE, LED LIGHTBAR UNIT 1502	01 4200 1460	1	1700.61	1700.61
	(General Fund Police Vehicle Maintnc)				
	Invoice Extension ---->				1700.61
	Vendor Total ----->				1700.61

2280 S MEREDITH LANE *** VENDOR.: NOB02 (NOBLE POWER EQUIPMENT)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
278132	E-CLIPS,WASHER,NEEDLE CAGE,ROPE	01-16	12/21/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount

2280 S MEREDITH LANE *** VENDOR.: NOB02 (NOBLE POWER EQUIPMENT)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 E-CLIPS,WASHER,NEEDLE CAGE,ROPE	01	4220 1400	1 20.61	20.61
		(General Fund Fire Equipment Maint)		
			Invoice Extension ---->	20.61
			Vendor Total ----->	20.61

P.O. BOX 153 *** VENDOR.: NOL01 (NO LIMIT TIRE INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
6267 FLAT REPAIR & PATCH/BOOT	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 FLAT REPAIR & PATCH/BOOT	71	4454 2150	1 19.00	19.00
		(MEASURE A MEASURE A Profl Services)		
			Invoice Extension ---->	19.00
			Vendor Total ----->	19.00

P.O. BOX 1604 *** VENDOR.: NUN01 (MICHAEL K. NUNLEY & ASSOCIATES, INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
1516 DJ FARMS CONSTRUCTION PHASE SERVICES	01-16	12/14/15 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 DJ FARMS CONSTRUCTION PHASE SERVICES	01	2004	1 3868.02	3868.02
		(General Fund D.J. FARMS)		
			Invoice Extension ---->	3868.02
			Vendor Total ----->	3868.02

P.O. BOX 948 *** VENDOR.: NUT01 (NU-TECH PEST MANAGEMENT INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
0116160 PROFESSIONAL SERVICES	01-16	12/14/15 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 PROFESSIONAL SERVICES	12	4425 2150	1 112.00	112.00
		(Wst.Wtr.Op.Fund Wastewater Profl Services)		
			Invoice Extension ---->	112.00
			Vendor Total ----->	112.00

DEPT 56-8510102155 *** VENDOR.: OFF01 (OFFICE DEPOT CREDIT PLAN)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
727797001 BAMBOO CHAIRMAT CHERRY 42	01-16	12/07/15 N N N	A-NET30 FROM INVOICE	2010
Line Description		G/L Account No	Unit(s) Unit Cost	Amount
0001 BAMBOO CHAIRMAT CHERRY 42	01	4200 1550	1 64.94	64.94
		(General Fund Police Op Supp/Expense)		
			Invoice Extension ---->	64.94
			Vendor Total ----->	64.94

*** VENDOR.: OSE01 (ISAAC OSEGUERA)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
010516 MEALS & MILEAGE 1ST RESPONDER TRAINING	01-16	01/04/16 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 MEALS & MILEAGE 1ST RESPONDER TRAINING	01	4200 1300	1	252.00	252.00
	(General Fund Police Bus Exp/Train)				
			Invoice Extension ---->		252.00
			Vendor Total ----->		252.00

P.O. BOX 997300 *** VENDOR.: PAC01 (PACIFIC GAS & ELECTRIC)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
010616 5125 W. MAIN ST	01-16	12/29/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 5125 W. MAIN ST	12	4425 1000	1	8451.09	8451.09
	(Wst.Wtr.Op.Fund Wastewater Utilities)				
			Invoice Extension ---->		8451.09

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
010616-B 945 GUADALUPE -CLOCK TOWER	01-16	12/28/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 945 GUADALUPE -CLOCK TOWER	65	4485 1000	1	19.34	19.34
	(Quad.Light Dist Gdlpe Light Dis Utilities)				
			Invoice Extension ---->		19.34

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
010616-C W. MAIN SEWER	01-16	12/28/16 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 W. MAIN SEWER	12	4425 1000	1	1367.51	1367.51
	(Wst.Wtr.Op.Fund Wastewater Utilities)				
			Invoice Extension ---->		1367.51

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
010616-D 303 OBISPO ST -OBISPO WATER TANK	01-16	12/28/16 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 303 OBISPO ST -OBISPO WATER TANK	10	4420 1000	1	4138.75	4138.75
	(Wtr. Oper. Fund Water Operating Utilities)				
			Invoice Extension ---->		4138.75
			Vendor Total ----->		13976.69

P.O. BOX 40 *** VENDOR.: PER01 (J. PERRY AUTO SUPPLY, INC)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
141973 MINI LAMPS	01-16	12/14/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 MINI LAMPS	01	4200 1460	1	6.45	6.45
	(General Fund Police Vehicle Maintnc)				
			Invoice Extension ---->		6.45

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
141974 CAR WASH	01-16	12/14/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount

P.O. BOX 40 *** VENDOR.: PER01 (J. PERRY AUTO SUPPLY, INC)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	CAR WASH		01 4200 1550	1	6.48	6.48
			(General Fund Police Op Supp/Expense)			
				Invoice Extension ---->		6.48

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
142070	NCB PURPLE POWER CAR WASH	01-16	12/28/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	NCB PURPLE POWER CAR WASH		01 4200 1550	1	14.59	14.59
			(General Fund Police Op Supp/Expense)			
				Invoice Extension ---->		14.59
				Vendor Total ----->		27.52
						=====

ROBERT COBB *** VENDOR.: PER02 (PERRY'S ELECTRIC MOTORS)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
18841	PROFESSIONAL SERV.PADDLE WHEEL ABRATOR NOT RUNNING	01-16	12/04/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	PROFESSIONAL SERV.PADDLE WHEEL ABRATOR NOT RUNNING		12 4425 2150	1	270.00	270.00
			(Wst.Wtr.Op.Fund Wastewater Profl Services)			
				Invoice Extension ---->		270.00

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
18864	GENERATOR WON'T OPERATE-PROFESSIONAL SERVICES	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	GENERATOR WON'T OPERATE-PROFESSIONAL SERVICES		12 4425 2150	1	135.00	135.00
			(Wst.Wtr.Op.Fund Wastewater Profl Services)			
				Invoice Extension ---->		135.00
				Vendor Total ----->		405.00
						=====

P.O. BOX 37600 *** VENDOR.: QUI01 (QUILL CORPORATION)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
1582589	PICTUREMATE	01-16	12/17/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	PICTUREMATE		01 4200 1200	1	32.64	32.64
			(General Fund Police Off Suppl/Postg)			
				Invoice Extension ---->		32.64

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
1641178	FILES,W/LIDS,POST ITNOTE PADS,ENVELOPES,CLASP	01-16	12/18/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description		G/L Account No	Unit(s)	Unit Cost	Amount
0001	FILES,W/LIDS,POST ITNOTE PADS,ENVELOPES,CLASP		01 4120 1200	1	116.03	116.03
			(General Fund Finance Off Suppl/Postg)			
0002	COPY PAPER		01 4140 1200	1	39.85	39.85
			(General Fund Non-Departmentl Off Suppl/Postg)			
0003	PAPER,ENVELOPES		01 4200 1200	1	54.73	54.73
			(General Fund Police Off Suppl/Postg)			
0004	COPY PAPER,BALPT REFILL		01 4220 1200	1	46.47	46.47
			(General Fund Fire Off Suppl/Postg)			
0005	HP 61 TRI/COLOR INK COMBO		12 4425 1200	1	38.00	38.00
			(Wst.Wtr.Op.Fund Wastewater Off Suppl/Postg)			
				Invoice Extension ---->		295.08

P.O. BOX 37600 *** VENDOR.: QUI01 (QUILL CORPORATION)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
1742914	CAUTION SIGNS FOR BUILDING	01-16	12/23/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	CAUTION SIGNS FOR BUILDING	01 4145 1550 (General Fund Building Mtce Op Supp/Expense)	1	156.85	156.85
Invoice Extension ---->					156.85

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
1750047	2 LUMBAR CUSHION FOR FINANCE	01-16	12/17/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	2 LUMBAR CUSHION FOR FINANCE	01 4120 1200 (General Fund Finance Off Supp/Postg)	1	37.82	37.82
Invoice Extension ---->					37.82

Vendor Total -----> 522.39
 =====

PO. BOX 849665 *** VENDOR.: QUI06 (QUINN RENTAL SERVICE INC.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
V6513901	REPAIR/REPLACEMENT AT 4490 ELM ST-SIDEWALK	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	REPAIR/REPLACEMENT AT 4490 ELM ST-SIDEWALK	71 4454 1559 (MEASURE A MEASURE A Alternate Trans)	1	96.35	96.35
Invoice Extension ---->					96.35

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
V6525601	2" DIAMOND CORE BIT,HH CORE DRILL	01-16	12/16/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	2" DIAMOND CORE BIT,HH CORE DRILL	10 4420 2200 (Wtr. Oper. Fund Water Operating Equip.Rental)	1	114.80	114.80
Invoice Extension ---->					114.80

Vendor Total -----> 211.15
 =====

*** VENDOR.: RAM01 (RUBEN RAMIREZ)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010716	REIMBURSEMENT FOR MEALS-TRAINING FIREARMS/TACTICAL	01-16	01/04/16 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	REIMBURSEMENT FOR MEALS-TRAINING FIREARMS/TACTICAL	01 4200 1300 (General Fund Police Bus Exp/Train)	1	60.00	60.00
Invoice Extension ---->					60.00

Vendor Total -----> 60.00
 =====

P.O BOX 3309 *** VENDOR.: RAN01 (RANGE MASTER INC.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
9502	WEAPON CLEANER	01-16	12/11/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	WEAPON CLEANER	01 4200 1550 (General Fund Police Op Supp/Expense)	1	36.70	36.70
Invoice Extension ---->					36.70

P.O BOX 3309

*** VENDOR.: RAN01 (RANGE MASTER INC.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
9532	UNIFORM (MEDINA)	01-16	12/17/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	UNIFORM (MEDINA)	01	4200 0450	1	399.46	399.46
		(General Fund Police Other Benefits)				
				Invoice Extension ---->		399.46
				Vendor Total ----->		436.16

180 NORTH ASHWOOD AVENUE

*** VENDOR.: RIN02 (RINCON CONSULTANTS, INC.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
24813	DJ FARMS	01-16	11/30/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	DJ FARMS	01	2004	1	170.00	170.00
		(General Fund D.J. FARMS)				
0002	PIONEER ST APTS	01	2075	1	361.25	361.25
		(General Fund Pioneer Street Apartments)				
0003	BEACHSIDE COOLER	01	2073	1	212.50	212.50
		(General Fund Beachside Cooler-Peralta)				
0004	PLANNING SERVICES	01	4405 2150	1	280.30	280.30
		(General Fund Bldg and Safety Profl Services)				
				Invoice Extension ---->		1024.05
				Vendor Total ----->		1024.05

P.O. BOX 6007

*** VENDOR.: SAN02 (SANTA MARIA TIRE CORP)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
102106	1 TIRE,WHEEL BALANCE	01-16	12/04/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	1 TIRE,WHEEL BALANCE	01	4200 1460	1	140.54	140.54
		(General Fund Police Vehicle Maintnc)				
				Invoice Extension ---->		140.54

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
478893	(4) TIRES	01-16	12/17/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	(4) TIRES	01	4200 1460	1	578.81	578.81
		(General Fund Police Vehicle Maintnc)				
				Invoice Extension ---->		578.81
				Vendor Total ----->		719.35

300 N.SAN ANTONIO ROAD

*** VENDOR.: SAN14 (SANTA BARBARA COUNTY EMS AGENCY)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
122815	EMT RECERTIFICATIONS-(GARCIA & SAUCEDO)	01-16	12/21/15 N N N	A-NET30 FROM INVOICE	2010	
Line	Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001	EMT RECERTIFICATIONS-(GARCIA & SAUCEDO)	01	4220 1300	1	188.00	188.00
		(General Fund Fire Bus Exp/Train)				
				Invoice Extension ---->		188.00
				Vendor Total ----->		188.00

130 EAST VICTORIA ST. STE 200 *** VENDOR.: SAN23 (COUNTY OF SANTA BARBARA PUBLIC WORKS DEP)

ATTN: GAIL HURD

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
IRWMPQ115 PROP 84 WEB TOOL PER 2012 MOU	01-16	12/14/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	PROP 84 WEB TOOL PER 2012 MOU	84 4484 2150	1	1151.68	1151.68
		(Proposition 84 Proposition 84 Profl Services)			
				Invoice Extension ---->	1151.68
				Vendor Total ----->	1151.68

*** VENDOR.: SCH01 (PATRICK SCHMITZ)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
3476912 2016 EMERGENCY RESPONSE GUIDE	01-16	12/16/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	2016 EMERGENCY RESPONSE GUIDE	01 4220 1550	1	100.06	100.06
		(General Fund Fire Op Supp/Expense)			
				Invoice Extension ---->	100.06
				Vendor Total ----->	100.06

*** VENDOR.: SOU01 (SOUTHERN CALIFORNIA GAS)

P.O. BOX C

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010616 VET'S HALLL 1025 GUADALUPE	01-16	12/30/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	VET'S HALLL 1025 GUADALUPE	01 4145 1000	1	119.36	119.36
		(General Fund Building Mtce Utilities)			
				Invoice Extension ---->	119.36

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010616-A CITY HALL-918 OBISPO ST	01-16	12/30/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	CITY HALL-918 OBISPO ST	01 4145 1000	1	700.63	700.63
		(General Fund Building Mtce Utilities)			
				Invoice Extension ---->	700.63

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010616-B SENIOR CENTER 4545 10TH STREET	01-16	12/30/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	SENIOR CENTER 4545 10TH STREET	01 4145 1000	1	154.92	154.92
		(General Fund Building Mtce Utilities)			
				Invoice Extension ---->	154.92

Vendor Total -----> 974.91

P.O. BOX 31001-2052

LOCKBOX # 912052

*** VENDOR.: STA02 (STATEWIDE TRAFFIC SAFETY & SIGNS INC)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
03002575 CUSTOM SIGNS	01-16	12/14/15 N N N	A-NET30 FROM INVOICE	2010

Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	CUSTOM SIGNS	71 4454 1550	1	279.50	279.50
		(MEASURE A MEASURE A Op Supp/Expense)			
				Invoice Extension ---->	279.50

P.O. BOX 31001-2052 *** VENDOR.: STA02 (STATEWIDE TRAFFIC SAFETY & SIGNS INC)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
				Vendor Total ----->
				279.50 =====

2330 S. WESTGATE # 18 *** VENDOR.: TAN01 (TANKS A LOT)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
2099 HYDRO'S & VALVE REPAIR,AIR FILLS	01-16	12/03/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 HYDRO'S & VALVE REPAIR,AIR FILLS	01	4220 1400	1	310.00	310.00
			(General Fund Fire Equipment Maint)		
				Invoice Extension ----->	310.00
				Vendor Total ----->	310.00 =====

710 FIERO LANE SUITE 14 *** VENDOR.: TEC01 (TECHXPRESS- CORP)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
1477 NETGUARD MANAGED SERIVE 4 WORKSTATIONS & SERVER	01-16	01/01/16 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 NETGUARD MANAGED SERIVE 4 WORKSTATIONS & SERVER	01	4140 2151	1	1950.00	1950.00
			(General Fund Non-Departmentl IT Services)		
				Invoice Extension ----->	1950.00
				Vendor Total ----->	1950.00 =====

JOSEPH FRANZONE *** VENDOR.: TEM01 (TEMPLETON UNIFORMS)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
87348 UNIFORM (RAMIREZ)	01-16	12/18/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 UNIFORM (RAMIREZ)	01	4200 0450	1	399.72	399.72
			(General Fund Police Other Benefits)		
				Invoice Extension ----->	399.72

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
87474 UNIFORM (LIMON)	01-16	12/23/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 UNIFORM	01	4200 0450	1	400.00	400.00
			(General Fund Police Other Benefits)		
				Invoice Extension ----->	400.00
				Vendor Total ----->	799.72 =====

P.O. BOX 742592 *** VENDOR.: TER01 (TERMINIX PROCESSING CENTER)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
351038175 PROFESSIONAL SERVICES FOR 12/15	01-16	12/18/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 PROFESSIONAL SERVICES FOR 12/15	01	4145 2150	1	135.00	135.00
			(General Fund Building Mtce Prof Services)		
				Invoice Extension ----->	135.00

P.O. BOX 742592 *** VENDOR.: TER01 (TERMINIX PROCESSING CENTER)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
			Vendor Total ----->	135.00 =====

1601 S. GROVE *** VENDOR.: THE02 (THE RADAR SHOP INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
RS-9001 REPLACEMENT,SD ANTENNA CONNECTOR,KNOB,CERTIFICATE	01-16	12/10/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 REPLACEMENT,SD ANTENNA CONNECTOR,KNOB,CERTIFICATE	01	4200 1500	1	263.00	263.00
	(General Fund Police Equipment Replc)				
			Invoice Extension ---->		263.00
			Vendor Total ----->		263.00 =====

INFORMATION *** VENDOR.: TOS01 (TOSHIBA AMERICA INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
64001399 LEASE PAYMENT FOR 01/2016	01-16	12/20/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 LEASE PAYMENT FOR 01/2016	01	4140 4150	1	735.41	735.41
	(General Fund Non-Departmentl Lease-Purchase)				
			Invoice Extension ---->		735.41
			Vendor Total ----->		735.41 =====

FILE 57202 *** VENDOR.: TOS02 (TBS CA/NV-FORMERLY WOLCO CORP)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
12409750 COPIES	01-16	12/10/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 COPIES	01	4105 1550	1	46.97	46.97
	(General Fund Administration Op Supp/Expense)				
0002 COPIES	01	4200 1550	1	36.72	36.72
	(General Fund Police Op Supp/Expense)				
0003 COPIES	01	4120 1550	1	133.17	133.17
	(General Fund Finance Op Supp/Expense)				
0004 COPIES	01	4405 1550	1	32.74	32.74
	(General Fund Bldg and Safety Op Supp/Expense)				
			Invoice Extension ---->		249.60
			Vendor Total ----->		249.60 =====

FILE 51122 *** VENDOR.: UNI15 (UNITED RENTALS NORTHWEST, INC)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
005613003 4 WEEK BILLING-(RENTAL)	01-16	12/15/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 4 WEEK BILLING-(RENTAL)	71	4454 2200	1	1197.20	1197.20
	(MEASURE A MEASURE A Equip.Rental)				
0002 4 WEEK BILLING-(RENTAL)	10	4420 2200	1	399.07	399.07
	(Wtr. Oper. Fund Water Operating Equip.Rental)				
0003 4 WEEK BILLING-(RENTAL)	01	4300 2200	1	399.06	399.06
	(General Fund Parks & Rec Equip.Rental)				
			Invoice Extension ---->		1995.33
			Vendor Total ----->		1995.33 =====

ATTN: TFM SOUTHWEST CM9705 *** VENDOR.: USB01 (U.S. BANK TRUST N.A.)

P.O. BOX 70870

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010616	INTEREST DUES FROM 08/01/15 TO 01/31/16	01-16	01/01/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	INTEREST DUES FROM 08/01/15 TO 01/31/16	26 4500 4100	1	129270.00	129270.00
		(RDA-Op.Fund Redevelopment Debt Svc.Inter.)			
				Invoice Extension ---->	129270.00
				Vendor Total ----->	129270.00

P.O. BOX 920041 *** VENDOR.: VER02 (VERIZON CALIFORNIA CORP.)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010516	COMMUNICATION-GLADIATORS	01-16	12/16/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	COMMUNICATION-GLADIATORS	57 4213 1150	1	100.00	100.00
		(Alcohol & Drug Drug & Alcohol Communications)			
				Invoice Extension ---->	100.00

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
122315	303 OBISPO ST	01-16	12/07/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	303 OBISPO ST	10 4420 1150	1	72.80	72.80
		(Wtr. Oper. Fund Water Operating Communications)			
				Invoice Extension ---->	72.80
				Vendor Total ----->	172.80

P.O. BOX 660108 *** VENDOR.: VER05 (VERIZON WIRELESS)

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
010516	COMMUNICATIONFOR 11/15 -12/2015	01-16	12/22/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	COMMUNICATIONFOR 11/15 -12/2015	01 4200 1150	1	53.88	53.88
		(General Fund Police Communications)			
0002	COMMUNICATIONFOR 11/15 -12/2015	01 4220 1150	1	53.88	53.88
		(General Fund Fire Communications)			
				Invoice Extension ---->	107.76

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
122815	COMMUNICATION	01-16	12/08/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	COMMUNICATION	01 4220 1150	1	76.02	76.02
		(General Fund Fire Communications)			
				Invoice Extension ---->	76.02

INVOICE-TYPE	DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No
122915	COMMUNICATION FOR 10/15 - 11/2015	01-16	11/22/15 N N N	A-NET30 FROM INVOICE	2010
Line	Description	G/L Account No	Unit(s)	Unit Cost	Amount
0001	COMMUNICATION	01 4200 1150	1	53.88	53.88
		(General Fund Police Communications)			
0002	COMMUNICATION	01 4220 1150	1	53.88	53.88
		(General Fund Fire Communications)			
				Invoice Extension ---->	107.76

Vendor Total -----> 291.54

104 INDEPENDENCE WAY *** VENDOR.: WIT01 (WITMER PUBLIC SAFETY GROUP INC.)

INVOICE-TYPE DESCRIPTION	PERIOD	DATE	TERM-DESCRIPTION	G/L ACCOUNT No	
1657155 RUBBER BOOTS	01-16	11/25/15 N N N	A-NET30 FROM INVOICE	2010	
Line Description	G/L Account No		Unit(s)	Unit Cost	Amount
0001 RUBBER BOOTS	01	4220 1400	1	152.98	152.98
	(General Fund Fire Equipment Maint)				
			Invoice Extension ---->		152.98
			Vendor Total ----->		152.98
			** Total Invoices ----->		236089.98
			** Total Checks ----->		.00
			*** Total Purchases ---->		236089.98

100.06 +
 119.36 +
 700.63 +
 154.92 +
 279.50 +
 310.00 +
 1,950.00 +
 399.72 +
 400.00 +
 135.00 +
 263.00 +
 735.41 +
 249.60 +
 1,995.33 +
 129,270.00 +
 100.00 +
 72.80 +
 107.76 +
 76.02 +
 107.76 +
 152.98 +
 236,089.98 *

FUND	DEPT	OBJT	Description (DEPT/OBJT/FUND)	Activity	Actual	Encumbrance	Total	Budget	Variance
01	2004		D.J. FARMS//General Fund	5313.02					
01	2010		Accounts Payable//General Fund	-45831.65					
01	2050		Employee Trust Fund//General Fu	7.00					
01	2065		CEDC Family//General Fund	150.00					
01	2073		Beachside Cooler-Peralta//Gener	227.50					
01	2075		Pioneer Street Apartments//Gene	736.25					
01	2265		USE TAX PAYABLE//General Fund	-103.10					
01	4105	1150	Administratio/Communication/Gen	141.19	2336.07	.00	2477.26	4600.00	2122.74
01	4105	1300	Administratio/Bus Exp/Train/Gen	92.98	886.80	.00	979.78	1500.00	520.22
01	4105	1550	Administratio/Op Supp/Expen/Gen	46.97	1369.68	.00	1416.65	2500.00	1083.35
01	4105	1560	Administratio/Fuels/Lubrica/Gen	35.74	188.76	.00	224.50	2000.00	1775.50
01	4105	2150	Administratio/Profl Service/Gen	1.00	1204.80	.00	1205.80	2000.00	794.20
01	4110	2150	City Attorney/Profl Service/Gen	2430.00	31639.81	.00	34069.81	50000.00	15930.19
01	4120	1150	Finance/Communication/General F	141.19	1553.30	.00	1694.49	3200.00	1505.51
01	4120	1200	Finance/Off Suppl/Pos/General F	175.01	1094.83	.00	1269.84	2261.00	991.16
01	4120	1550	Finance/Op Supp/Expen/General F	133.17	705.55	.00	838.72	2000.00	1161.28
01	4120	2150	Finance/Profl Service/General F	592.62	11086.10	.00	11678.72	15000.00	3321.28
01	4140	1200	Non-Department/Off Suppl/Pos/Gen	39.85	973.52	.00	1013.37	2834.00	1820.63
01	4140	2150	Non-Department/Profl Service/Gen	11000.00	6375.36	.00	17375.36	30000.00	12624.64
01	4140	2151	Non-Department/IT Services/Gener	1950.00	12911.81	.00	14861.81	30000.00	15138.19
01	4140	4150	Non-Department/Lease-Purchas/Gen	735.41	4563.06	.00	5298.47	9000.00	3701.53
01	4145	1000	Building Mtce/Utilities/General	1383.97	13334.04	.00	14718.01	32000.00	17281.99
01	4145	1150<*>	Building Mtce/Communication/Gen	14.03	.00	.00	14.03	.00	-14.03
01	4145	1460<*>	Building Mtce/Vehicle Maint/Gen	34.00	.00	.00	34.00	.00	-34.00
01	4145	1550	Building Mtce/Op Supp/Expen/Gen	338.14	2711.69	.00	3049.83	7000.00	3950.17
01	4145	2150	Building Mtce/Profl Service/Gen	1210.48	7329.73	.00	8540.21	18000.00	9459.79
01	4200	0450	Police/Other Benefit/General Fu	1584.69	9147.69	.00	10732.38	20561.00	9828.62
01	4200	1150	Police/Communication/General Fu	248.95	4091.16	.00	4340.11	6500.00	2159.89
01	4200	1200	Police/Off Suppl/Pos/General Fu	93.32	1418.61	.00	1511.93	3392.00	1880.07
01	4200	1300<*>	Police/Bus Exp/Train/General Fu	2224.77	3639.28	.00	5864.05	5000.00	-864.05
01	4200	1460	Police/Vehicle Maint/General Fu	6008.76	2811.49	.00	8820.25	14000.00	5179.75
01	4200	1500	Police/Equipment Rep/General Fu	263.00	2154.24	.00	2417.24	13000.00	10582.76
01	4200	1550	Police/Op Supp/Expen/General Fu	174.22	4969.55	712.40	5856.17	12000.00	6143.83
01	4200	2150	Police/Profl Service/General Fu	120.00	550.27	.00	670.27	7000.00	6329.73
01	4200	2350	Police/Svcs.Other Ag/General Fu	555.72	8441.27	.00	8996.99	58000.00	49003.01
01	4220	1150	Fire/Communication/General Fund	324.97	1965.79	.00	2290.76	4620.00	2329.24
01	4220	1200	Fire/Off Suppl/Pos/General Fund	46.47	888.24	.00	934.71	2490.00	1555.29
01	4220	1300	Fire/Bus Exp/Train/General Fund	188.00	2100.28	.00	2288.28	4000.00	1711.72
01	4220	1400	Fire/Equipment Mai/General Fund	488.59	4015.61	.00	4504.20	10000.00	5495.80
01	4220	1460	Fire/Vehicle Maint/General Fund	649.47	1443.96	.00	2093.43	9000.00	6906.57
01	4220	1550	Fire/Op Supp/Expen/General Fund	750.06	3275.26	.00	4025.32	10000.00	5974.68
01	4300	1000	Parks & Rec/Utilities/General F	2373.75	17575.01	.00	19948.76	47500.00	27551.24
01	4300	1150	Parks & Rec/Communication/Gener	155.22	854.28	.00	1009.50	1800.00	790.50
01	4300	1460<*>	Parks & Rec/Vehicle Maint/Gener	34.00	.00	.00	34.00	.00	-34.00

FUND	DEPT	OBJT	Description (DEPT/OBJT/FUND)	Activity	Actual	Encumbrance	Total	Budget	Variance
01	4300	2150	Parks & Rec/Profl Service/Gener	1811.90	10856.92	.00	12668.82	27500.00	14831.18
01	4300	2200	Parks & Rec/Equip.Rental/Genera	399.06	.00	.00	399.06	500.00	100.94
01	4405	1150	Bldg and Safe/Communication/Gen	141.19	1228.33	.00	1369.52	2600.00	1230.48
01	4405	1200	Bldg and Safe/Off Suppl/Pos/Gen	56.08	37.55	.00	93.63	278.00	184.37
01	4405	1550<*>	Bldg and Safe/Op Supp/Expen/Gen	32.74	284.65	.00	317.39	.00	-317.39
01	4405	2150	Bldg and Safe/Profl Service/Gen	280.30	43509.69	.00	43789.99	184000.00	140210.01
Fund (01) Total ---->				.00	225524.04	712.40	265737.42	657636.00	391898.58
=====									
10	2010		Accounts Payable//Wtr. Oper. Fu	-17743.48					
10	4420	1000	Water Operati/Utilities/Wtr. Op	4138.75	56872.87	.00	61011.62	90000.00	28988.38
10	4420	1150	Water Operati/Communication/Wtr	362.12	1903.42	.00	2265.54	5000.00	2734.46
10	4420	1200	Water Operati/Off Suppl/Pos/Wtr	1500.00	4348.74	.00	5848.74	10000.00	4151.26
10	4420	1250	Water Operati/Advertisin/Pu/Wtr	55.88	.00	.00	55.88	2000.00	1944.12
10	4420	1460	Water Operati/Vehicle Maint/Wtr	52.00	152.94	.00	204.94	2000.00	1795.06
10	4420	2150	Water Operati/Profl Service/Wtr	11120.86	40499.89	.00	51620.75	75000.00	23379.25
10	4420	2200	Water Operati/Equip.Rental/Wtr.	513.87	.00	.00	513.87	1000.00	486.13
Fund (10) Total ---->				.00	103777.86	.00	121521.34	185000.00	63478.66
=====									
12	2010		Accounts Payable//Wst.Wtr.Op.Fu	-25306.94					
12	4425	1000	Wastewater/Utilities/Wst.Wtr.Op	10254.05	78003.39	.00	88257.44	185000.00	96742.56
12	4425	1150	Wastewater/Communication/Wst.Wt	175.78	1764.56	.00	1940.34	4000.00	2059.66
12	4425	1200	Wastewater/Off Suppl/Pos/Wst.Wt	1538.00	4148.82	.00	5686.82	10000.00	4313.18
12	4425	1250	Wastewater/Advertisin/Pu/Wst.Wt	55.87	.00	.00	55.87	500.00	444.13
12	4425	1550	Wastewater/Op Supp/Expen/Wst.Wt	658.54	5646.09	.00	6304.63	30000.00	23695.37
12	4425	1560	Wastewater/Fuels/Lubrica/Wst.Wt	883.68	2480.31	.00	3363.99	8000.00	4636.01
12	4425	2150	Wastewater/Profl Service/Wst.Wt	11741.02	37474.51	.00	49215.53	100000.00	50784.47
Fund (12) Total ---->				.00	129517.68	.00	154824.62	337500.00	182675.38
=====									
20	2010		Accounts Payable//Gas Tax Fund	-4501.47					
20	4430	1150<*>	Gas Tax-Stree/Communication/Gas	56.47	56.47	.00	112.94	.00	-112.94
20	4430	2150	Gas Tax-Stree/Profl Service/Gas	4445.00	27383.50	.00	31828.50	75000.00	43171.50
Fund (20) Total ---->				.00	27439.97	.00	31941.44	75000.00	43058.56
=====									
23	2010		Accounts Payable//LTF - Transit	-8377.80					
23	4461	1560	LTF Transit/Fuels/Lubrica/LTF -	8377.80	13741.36	.00	22119.16	95000.00	72880.84
Fund (23) Total ---->				.00	13741.36	.00	22119.16	95000.00	72880.84
=====									
26	2010		Accounts Payable//RDA-Op.Fund	-129839.88					

FUND	DEPT	OBJT	Description (DEPT/OBJT/FUND)	Activity	Actual	Encumbrance	Total	Budget	Variance
26	2300		Loan Payable//RDA-Op.Fund	404.88					
26	4500	2150	Redevelopment/Profl Service/RDA	165.00	5540.17	.00	5705.17	30000.00	24294.83
26	4500	4100	Redevelopment/Debt Svc.Inte/RDA	129270.00	132082.50	.00	261352.50	270000.00	8647.50
Fund (26) Total ---->				.00	137622.67	.00	267057.67	300000.00	32942.33
57	2010		Accounts Payable//Alcohol & Dru	-107.00					
57	4213	1000	Drug & Alcoho/Utilities/Alcohol	7.00	35.00	.00	42.00	100.00	58.00
57	4213	1150	Drug & Alcoho/Communication/Alc	100.00	261.03	.00	361.03	600.00	238.97
Fund (57) Total ---->				.00	296.03	.00	403.03	700.00	296.97
60	2010		Accounts Payable//Guad.Assmt.Di	-507.36					
60	4490	1000	Guad.Assmt Di/Utilities/Guad.As	69.36	3704.52	.00	3773.88	12500.00	8726.12
60	4490	2150	Guad.Assmt Di/Profl Service/Gua	438.00	2370.00	.00	2808.00	7500.00	4692.00
Fund (60) Total ---->				.00	6074.52	.00	6581.88	20000.00	13418.12
65	2010		Accounts Payable//Guad.Light Di	-19.34					
65	4485	1000	Gdlpe Light D/Utilities/Guad.Li	19.34	19172.55	.00	19191.89	75000.00	55808.11
Fund (65) Total ---->				.00	19172.55	.00	19191.89	75000.00	55808.11
71	2010		Accounts Payable//MEASURE A	-2703.38					
71	4454	1000	MEASURE A/Utilities/MEASURE A	184.96	981.42	.00	1166.38	3000.00	1833.62
71	4454	1150	MEASURE A/Communication/MEASURE	70.51	788.81	.00	859.32	2500.00	1640.68
71	4454	1460	MEASURE A/Vehicle Maint/MEASURE	52.00	1056.69	.00	1108.69	3000.00	1891.31
71	4454	1500	MEASURE A/Equipment Rep/MEASURE	19.88	84.79	.00	104.67	3000.00	2895.33
71	4454	1550	MEASURE A/Op Supp/Expen/MEASURE	462.06	8716.34	.00	9178.40	15000.00	5821.60
71	4454	1559	MEASURE A/Alternate Tra/MEASURE	321.35	12693.76	.00	13015.11	60000.00	46984.89
71	4454	2150<*>	MEASURE A/Profl Service/MEASURE	395.42	11285.03	.00	11680.45	.00	-11680.45
71	4454	2200<*>	MEASURE A/Equip.Rental/MEASURE	1197.20	5193.82	.00	6391.02	4000.00	-2391.02
Fund (71) Total ---->				.00	40800.66	.00	43504.04	90500.00	46995.96
84	2010		Accounts Payable//Proposition 8	-1151.68					
84	4484	2150<*>	Proposition 8/Profl Service/Pro	1151.68	830.00	.00	1981.68	.00	-1981.68
Fund (84) Total ---->				.00	830.00	.00	1981.68	.00	-1981.68

**Low Carbon Transit Operations Program (LCTOP)
AUTHORIZED AGENT**

AS THE MAYOR
(Chief Executive Officer / Director / President / Secretary)

OF THE CITY OF GUADALUPE
(Name of County/City Organization)

I hereby authorize the following individual(s) to execute for and on behalf of the named Regional Entity/Transit Operator, any actions necessary for the purpose of obtaining Low Carbon Transit Operations Program (LCTOP) funds provided by the California Department of Transportation, Division of Rail and Mass Transportation. I understand that if there is a change in the authorized agent, the project sponsor must submit a new form. This form is required even when the authorized agent is the executive authority himself. I understand the Board must provide a resolution approving the Authorized Agent. The Board Resolution appointing the Authorized Agent is attached.

ANDREW CARTER, CITY ADMINISTRATOR OR
(Name and Title of Authorized Agent)

(Intentionally left blank) OR
(Name and Title of Authorized Agent)

(Intentionally left blank)
(Name and Title of Authorized Agent)

(Print Name) (Title)

(Signature)

Approved this _____ day of _____, 20____

Attachment: Board Resolution approving Authorized Agent

Low Carbon Transit Operations Program (LCTOP) CERTIFICATIONS AND ASSURANCES

Project Sponsor: CITY OF GUADALUPE

Agency Name: CITY OF GUADALUPE TRANSIT

Effective Date of this Document: _____

The California Department of Transportation (Department) has adopted the following certifications and assurances for the Low Carbon Transit Operations Program. As a condition of the receipt of LCTOP funds, project lead must comply with these terms and conditions.

A. General

- (1) The project lead agrees to abide by the current LCTOP Guidelines and applicable legal requirements.
- (2) The project lead must submit to the Department a signed Authorized Agent form designating the representative who can submit documents on behalf of the project sponsor and a copy of the board resolution appointing the Authorized Agent.

B. Project Administration

- (1) The project lead certifies that required environmental documentation is complete before requesting an allocation of LCTOP funds. The project lead assures that projects approved for LCTOP funding comply with Public Resources Code § 21100 and § 21150.
- (2) The project lead certifies that a dedicated bank account for LCTOP funds only will be established within 30 days of receipt of LCTOP funds.
- (3) The project lead certifies that when LCTOP funds are used for a transit capital project, that the project will be completed and remain in operation for its useful life.
- (4) The project lead certifies that it has the legal, financial, and technical capacity to carry out the project, including the safety and security aspects of that project.
- (5) The project lead certifies that they will notify the Department of pending litigation, dispute, or negative audit findings related to the project, before receiving an allocation of funds.
- (6) The project lead must maintain satisfactory continuing control over the use of project equipment and facilities and will adequately maintain project equipment and facilities for the useful life of the project.
- (7) Any interest the project lead earns on LCTOP funds must be used only on approved LCTOP projects.
- (8) The project lead must notify the Department of any changes to the approved project with a Corrective Action Plan (CAP).
- (9) Under extraordinary circumstances, a project lead may terminate a project prior to completion. In the event the project lead terminates a project prior to completion, the project lead must (1) contact the Department in writing and follow-up with a phone call verifying receipt of such notice; (2) pursuant to

verification, submit a final report indicating the reason for the termination and demonstrating the expended funds were used on the intended purpose; (3) submit a request to reassign the funds to a new project within 180 days of termination.

- (10) Funds must be encumbered and liquidated within the time allowed.

C. Reporting

- (1) The project lead must submit the following LCTOP reports:
 - a. Semi-Annual Progress Reports by May 15th and November 15th each year.
 - b. A Final Report within six months of project completion.
 - c. The annual audit required under the Transportation Development Act (TDA), to verify receipt and appropriate expenditure of LCTOP funds. A copy of the audit report must be submitted to the Department within six months of the close of the year (December 31) each year in which LCTOP funds have been received or expended.
- (2) Other Reporting Requirements: ARB is developing funding guidelines that will include reporting requirements for all State agencies that receive appropriations from the Greenhouse Gas Reduction Fund. Caltrans and project sponsors will need to submit reporting information in accordance with ARB's funding guidelines, including reporting on greenhouse gas reductions and benefits to disadvantaged communities.

D. Cost Principles

- (1) The project lead agrees to comply with Title 2 of the Code of Federal Regulations 225 (2 CFR 225), Cost Principles for State and Local Government, and 49 CFR, Part 18, Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments.
- (2) The project lead agrees, and will assure that its contractors and subcontractors will be obligated to agree, that:
 - a. Contract Cost Principles and Procedures, 48 CFR, Federal Acquisition Regulations System, Chapter 1, Part 31, et seq., shall be used to determine the allow ability of individual project cost items and
 - b. Those parties shall comply with Federal administrative procedures in accordance with 49 CFR, Part 18, Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments. Every sub-recipient receiving LCTOP funds as a contractor or sub-contractor shall comply with Federal administrative procedures in accordance with 49 CFR, Part 18, Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments.
- (3) Any project cost for which the project lead has received funds that are determined by subsequent audit to be unallowable under 2 CFR 225, 48 CFR, Chapter 1, Part 31 or 49 CFR, Part 18, are subject to repayment by the project lead to the State of California (State). All projects must reduce greenhouse gas emissions, as required under Public Resources Code section 75230, and any project that fails to reduce greenhouse gases shall also have its project costs submit to repayment by the project lead to the State. Should the project lead fail to reimburse moneys due to the State within thirty (30) days of demand, or within such other period as may be agreed in writing between the Parties hereto, the State is authorized to intercept and withhold future payments due the project lead from the State or any third-party source, including but not limited to, the State Treasurer and the State Controller.

E. Record Retention

- (1) The project lead agrees, and will assure that its contractors and subcontractors shall establish and maintain an accounting system and records that properly accumulate and segregate incurred project costs and matching funds by line item for the project. The accounting system of the project lead, its contractors and all subcontractors shall conform to Generally Accepted Accounting Principles (GAAP), and enable the determination of incurred costs at interim points of completion. All accounting records and other supporting papers of the project lead, its contractors and subcontractors connected with LCTOP funding shall be maintained for a minimum of three (3) years after the "Project Closeout" report or final Phase 2 report is submitted (per ARB Funding Guidelines, Vol. 3, page 3.A-16), and shall be held open to inspection, copying, and audit by representatives of the State and the California State Auditor. Copies thereof will be furnished by the project lead, its contractors, and subcontractors upon receipt of any request made by the State or its agents. In conducting an audit of the costs claimed, the State will rely to the maximum extent possible on any prior audit of the project lead pursuant to the provisions of federal and State law. In the absence of such an audit, any acceptable audit work performed by the project lead's external and internal auditors may be relied upon and used by the State when planning and conducting additional audits.
- (2) For the purpose of determining compliance with Title 21, California Code of Regulations, Section 2500 et seq., when applicable, and other matters connected with the performance of the project lead's contracts with third parties pursuant to Government Code § 8546.7, the project sponsor, its contractors and subcontractors and the State shall each maintain and make available for inspection all books, documents, papers, accounting records, and other evidence pertaining to the performance of such contracts, including, but not limited to, the costs of administering those various contracts. All of the above referenced parties shall make such materials available at their respective offices at all reasonable times during the entire project period and for three (3) years from the date of final payment. The State, the California State Auditor, or any duly authorized representative of the State, shall each have access to any books, records, and documents that are pertinent to a project for audits, examinations, excerpts, and transactions, and the project lead shall furnish copies thereof if requested.
- (3) The project lead, its contractors and subcontractors will permit access to all records of employment, employment advertisements, employment application forms, and other pertinent data and records by the State Fair Employment Practices and Housing Commission, or any other agency of the State of California designated by the State, for the purpose of any investigation to ascertain compliance with this document.

F. Special Situations

The Department may perform an audit and/or request detailed project information of the project sponsor's LCTOP funded projects at the Department's discretion at any time prior to the completion of the LCTOP.

I certify all of these conditions will be met.

BY: _____

ANDREW CARTER, CITY ADMINISTRATOR
City of Guadalupe

RESOLUTION NO. 2016-01

**AUTHORIZATION FOR THE EXECUTION OF THE
CERTIFICATIONS AND ASSURANCES AND AUTHORIZED AGENT FORMS
FOR THE LOW CARBON TRANSIT OPERATIONS PROGRAM (LCTOP)**

WHEREAS, the CITY OF GUADALUPE is an eligible project sponsor and may receive state funding from the Low Carbon Transit Operations Program (LCTOP) for transit projects; and

WHEREAS, the statutes related to state-funded transit projects require a local or regional implementing agency to abide by various regulations; and

WHEREAS, Senate Bill 862 (2014) named the Department of Transportation (Department) as the administrative agency for the LCTOP; and

WHEREAS, the Department has developed guidelines for the purpose of administering and distributing LCTOP funds to eligible project sponsors (local agencies); and

WHEREAS, the CITY OF GUADALUPE wishes to delegate authorization to execute these documents and any amendments thereto to ANDREW CARTER, CITY ADMINISTRATOR.

NOW, THEREFORE, BE IT RESOLVED by the **CITY COUNCIL** of the CITY OF GUADALUPE that the fund recipient agrees to comply with all conditions and requirements set forth in the Certification and Assurances and the Authorized Agent documents and applicable statutes, regulations and guidelines for all LCTOP funded transit projects.

NOW THEREFORE, BE IT FURTHER RESOLVED that ANDREW CARTER, CITY ADMINISTRATOR be authorized to execute all required documents of the LCTOP program and any Amendments thereto with the California Department of Transportation.

AGENCY BOARD DESIGNEE:

BY: _____

RESOLUTION NO. 2016-02

**AUTHORIZATION FOR THE EXECUTION OF THE
THE LOW CARBON TRANSIT OPERATIONS PROGRAM (LCTOP) PROJECT:
GUADALUPE TRANSIT EXPANSION / \$ 71,000**

WHEREAS, the CITY OF GUADALUPE is an eligible project sponsor and may receive state funding from the Low Carbon Transit Operations Program (LCTOP) now or sometime in the future for transit projects; and

WHEREAS, the statutes related to state-funded transit projects require a local or regional implementing agency to abide by various regulations; and

WHEREAS, Senate Bill 862 (2014) named the Department of Transportation (Department) as the administrative agency for the LCTOP; and

WHEREAS, the Department has developed guidelines for the purpose of administering and distributing LCTOP funds to eligible project sponsors (local agencies); and

WHEREAS, the CITY OF GUADALUPE wishes to implement the LCTOP project(s) listed above,

NOW, THEREFORE, BE IT RESOLVED by the **CITY COUNCIL** of the CITY OF GUADALUPE that the fund recipient agrees to comply with all conditions and requirements set forth in the applicable statutes, regulations and guidelines for all LCTOP funded transit projects.

NOW, THEREFORE, BE IT RESOLVED by the **CITY COUNCIL** of the CITY OF GUADALUPE that it hereby authorizes the submittal of the following project nomination(s) and allocation request(s) to the Department in FY 2015-16 LCTOP funds:

Project Name: **GUADALUPE TRANSIT EXPANSION**

Amount of LCTOP funds requested: **\$ 71,000**

Short description of project: Expand the Guadalupe Flier intercity transit schedule that offers round trip service to city residents from Guadalupe to neighboring Santa Maria. The expanded service will include:

- * Two (2) additional Saturday morning loops,
- * One (1) additional Saturday evening loop, and
- * An eight (8) loop day of service on Sundays

Contributing Sponsors (if applicable): *None Anticipated*

AGENCY BOARD DESIGNEE:

BY: _____

Low Carbon Transit Operations Program (LCTOP)

PROJECT DESCRIPTION AND ALLOCATION REQUEST (SUMMARY)

Project Information:

Lead Agency:	CITY OF GUADALUPE
Project Name:	GUADALUPE TRANSIT EXPANSION
Project Type: <i>See Attachment A</i>	A2: Expand/Enhance transit service
Description of Project (Short):	Expand intercity transit Flyer service between Guadalupe and Santa Maria to provide two additional Saturday morning loops, one additional Saturday evening loop, and eight new Sunday loops.
Project Location:	City of Guadalupe, Santa Barbara County, California
Project Start Date (anticipated):	July 1, 2016
Project End Date (anticipated):	June 30, 2017

Funding Information:

Funding Year:	2016-2017
Requested Amount of PUC 99313:	\$71,000
Requested Amount of PUC 99314:	
Total LCTOP Funding:	\$71,000
Total Project Cost:	\$71,000

Project Benefits:

Greenhouse Gas Benefits (off of worksheet)

Estimated GHG Reduction:	-20.87 MTCO ₂ e
Project Life:	1 year
Estimated Total GHG Reduction:	-20.87 MTCO ₂ e

Disadvantaged Communities (DAC) Benefits:

Does your service area have a DAC?	YES
Does the Project Benefit a DAC?	YES
Identify the DAC Census Tracts?	6083002402
Identify Specific DAC Benefit Criteria? <i>See Attachment B</i>	TP 1A: Project provides improved transit or intercity rail service for stations or stops in a disadvantaged community.
Qualitative Description of DAC Benefit?	Project provides improved transit service for bus stops and enhanced access for residents in a disadvantaged community by providing three added Saturday loops and a new service day on Saturday (8 loops).
Describe the DAC Need Project Addresses?	Transit riders had expressed the need for this expanded service (Sat. & Sun.) during repeated Unmet Transit Needs Hearings and during community meetings. Prior to the creation of the LCTOP grants, transit resources were insufficient in answering that unmet need.
Total GGRF \$ Allocated to DAC	\$71,000

Co-benefit

Critical Air Pollution Reduction:	
VMT Reduction:	34,704
Ridership Increase	5,575 projected new passenger trips annually
Fuel Ues Reduction:	
Energy Use Reduction:	

Low Carbon Transit Operations Program (LCTOP)

PROJECT DESCRIPTION AND ALLOCATION REQUEST (ALLOCATION)

Regional Entity: Santa Barbara Co. Assoc. of Gov. (SBCAG)
--

Project Lead: CITY OF GUADALUPE	County: Santa Barbara County
--	-------------------------------------

Project Title: GUADALUPE TRANSIT EXPANSION

Project Lead:

I

certify the scope, cost, schedule, and benefits as identified in the attached Allocation Request (Request) and attachments are true and accurate and demonstrate a fully funded operable project. I understand the Request is subject to any additional restrictions, limitations or conditions that may be enacted by the State Legislature, including the State's budgetary process and/or auction receipts. In the event the project cannot be completed as originally scoped, scheduled and estimated, or the project is terminated prior to completion, project lead shall, at its own expense, ensure that the project is in a safe and operable condition for the public. I understand this project will be monitored by the California Department of Transportation - Division of Rail and Mass Transportation.

Name: ANDREW CARTER

Signature:

Title: CITY ADMINISTRATOR

Agency: CITY OF GUADALUPE

Date: _____ **Amount:** \$71,000

Contributing Sponsor(s):

*If this project includes funding from more than one project sponsor, the project lead above becomes the "recipient agency" and the additional contributing project sponsor(s) must also sign and state the amount and type of LCTOP funds (PUC Sections 99313 and 99314) contribution. Sign below or **attach a separate officially signed letter providing that information. If there is more than one contributing sponsor, please submit additional page, or a letter from the additional contributors.**

Name:

Signature:

Title:

Agency:

Date: _____ **Amount:** _____

Low Carbon Transit Operations Program (LCTOP)

PROJECT DESCRIPTION AND ALLOCATION REQUEST (FUNDING)

<i>LCTOP Allocation</i>	15/16	16/17	17/18
Request Amount per PUC 99313:		\$71,000	\$0
Request Amount per PUC 99314:	\$0	\$0	\$0
Total Project Allocation Request:	\$0	\$71,000	\$0
Project Title:	<u>GUADALUPE TRANSIT EXPANSION</u>		
Project Location/Address:	<u>918 Obispo St., Guadalupe, CA 93434</u>		

Table 1: Project Lead Information

		Legislative District Numbers	
Agency Name: <u>CITY OF GUADALUPE</u>		Assembly: <u>37</u>	
Contact Person: <u>ANDREW CARTER</u>		Senate: <u>19</u>	
Contact Phone #: <u>(805) 356-3892</u>		Congressional: <u>24</u>	
Email Address: <u>acarter@ci.guadalupe.ca.us</u>		Amount:	PUC Funds Type:
Address: <u>918 Obispo Street</u>	\$	<u>\$71,000</u>	
<u>Guadalupe, CA 93434</u>	\$		

Table 2: Contributing Sponsor Information

Name: _____	Amount :	PUC Fund Type:
Contact: _____	\$ _____	
Contact Phone #: _____	\$ _____	
Email Address: _____		
Address: _____		

<i>Other Contributing Sponsors: (Attach sheet with contact information)</i>	Amount:	PUC Fund Type:
Name: _____	\$ _____	
Name: _____	\$ _____	
Name: _____	\$ _____	
Name: _____	\$ _____	

TOTAL \$71,000

(*Contributing project sponsors provide signed letters of verification as to amount and eligibility or sign cover page)

Low Carbon Transit Operations Program (LCTOP)

PROJECT DESCRIPTION AND ALLOCATION REQUEST (PROJECT)

Table 3: Type of Project

See Attachment A for category of project (example: Category 1A Implement new or expanded transit service (for new routes or expansion of existing routes)).

Operations Projects		Capital Projects	
	A1		Ai
XX	A2		Aii
	A3		Aiii
	A4		Aiv
	A5		
			B1
			B2
			B3
			B4
			Bi
			Bii
			Bii

Table 4: Project Summary

a) Project Description - Describe the project in your own words, using comprehensive overall project description regarding improvements to be made, increased level of service and performance goals.

Improvements to be made: The project will expand the Guadalupe Flyer schedule to include three additional service loops (two in the morning and one in the evening) on Saturdays and a full eight-loop day of new service on Sundays. This service expansion will: 1) Reduce Greenhouse gas emissions and Vehicle Miles Traveled in cars, 2) Promote inter-modal transportation (walking, bicycle, local transit), 3) Promote access to inter-regional transit services (Amtrak, Greyhound, San Luis Obispo Rapid Transit (SLORTA) Route 10), 4) Enhance Job Access, and 5) Increase Retail and Recreational Access. **Increased level of service and performance goals:** Based on preliminary first-year outcomes, the new-passenger goal for the three Saturday loops in 2016-2017 is projected at 1,700 new trips. The new passenger goal for the Sunday service in 2016-2017 is projected at 3,875 for a total performance goal of 5,575 new passenger trips in 2016-2017. The residents of Guadalupe personify the definition of "transit dependence". The Guadalupe Transit system continues to have the highest passenger trip per capita of any transit system in the region. In the past three years ('13-'14/'14-'15/'15-'16), the system provided an average of 108,039 annual passenger trips. This level was over 2 times the trip per capita for the nearby Santa Maria Area Transit service, a successful service in its own right, and 10 times the trips per capita of Lompoc Colt and Santa Ynez transit COMBINED. This service level was achieved with the previous 6-day per week schedule.

b) Project Location - Describe the location of the project. Also provide an 8 1/2" X 11" project site map that shows the transit service area and project location. Use link to CalEPA website for information, <http://www.calepa.ca.gov/EnvJustice/GHGInvest/default.htm>.

The City of Guadalupe, population 7,080 (2010 Census), is located in the northwestern corner of Santa Barbara County, roughly 8 miles from Santa Maria, the largest city in the county and the location of the majority of retail, medical, education (high school and college), social service, employment and recreation services. The City operates a transit service that includes the Guadalupe Flyer route between Guadalupe and Santa Maria. Each 75 minute round trip loop travels through twelve bus stops in Guadalupe and four bus stops in Santa Maria, anchored at the Santa Maria Transit Center located within two blocks of the city's government center and Town Center Mall. The transit center is also the hub for a number of local and inter-regional transit services. A passenger survey included in the 2014 Short Range Transit Plan indicated that 79% of surveyed riders had NO Access to an Automobile, demonstrating the substantial transit dependency of Guadalupe residents.

c) Project Life - For capital projects, state the Useful Life of the Project. For operations project state the number of months service will operate.

Capital:



Effective 11/15

Operations: 12 months, Fiscal Year July 1, 2016 - June 30, 2017

Low Carbon Transit Operations Program (LCTOP)

PROJECT DESCRIPTION AND ALLOCATION REQUEST (BENEFITS/OUTCOMES)

Table 5: Description of Major Benefits/Outcomes

a) Greenhouse Gas Reduction - Describe how this project will reduce greenhouse gases and any assumptions or data that support this description. For example, "The expanded transit service will reduce VMT and greenhouse gas emissions by replacing auto trips with transit trips. Initial estimates indicate that the expansion could add 50 commuter bus riders per day to replace an average auto trip of 10 miles each way." If available, please provide the expected amount of VMT reductions and greenhouse gas reductions.

The expanded transit service on Saturdays and Sundays will reduce VMT and greenhouse gas emissions by replacing auto trips with transit trips. Based on 2015-2016 first year ridership, in 2016-2017 the Saturday expansion is projected to add 1,700 new annual passenger trips and the new Sunday service is projected to add an additional 3,875 annual passenger trips for a total of 5,575 NEW passenger trips in 2016-2017. Using this NEW ridership projection of 5,575, the average trip distance of 11.50 miles, and using the CARB Calculator (attached), the expanded service is projected to reduce automobile Vehicle Miles Traveled by 34,704 VMT and reduce Greenhouse Gases by <20.87> MTCO_{2e}.

b) Increased Mode Share - Describe how this project will directly increase mode share.

The project will provide 3 loops of additional service Mon-Sat and 1 new day of service (8 loops) on Sundays, all previously not available to residents of Guadalupe and the affected DAC. This new service is projected to provide 5,575 in total increased mode share that otherwise would have been completed in automobiles or simply not have taken place.

c) Disadvantaged Communities (DAC) Project Criteria

See Attachment B for DAC Criteria to Evaluate Projects (example: Category 1B Project provides transit incentives to residents with a physical address in a disadvantage community (e.g., vouchers, reduced fares, transit passes).

Low Carbon Transportation Projects				Transit Projects					
	1A		2A	XX	1A		1G		2E
	1B		2B		1B		1H		2F
	1C		2C		1C		2A		2G
	1D				1D		2B		2H
					1E		2C		2I
					1F		2D		

d) Disadvantaged Communities (DAC) (if applicable*) - Describe how this project will directly benefit the DAC(s) within your service area in your own words. For agencies whose service area includes disadvantaged communities, at least 50 percent of the total moneys received shall be expended on projects that will benefit disadvantaged communities.

The Guadalupe Flyer bus stop (refer to attached maps please) on Main and Russell is .1 mile walking distance to a designated DAC as well as immediately adjacent to two popular retail shopping areas (Carneceria El Toro and La Jolla Plaza) and a bilingual dental clinic. This Flyer bus stop is also 0.1 miles from the Santa Maria Area Transit (SMAT) Route 2 bus stop. The project expansion therefore offers passengers increased access to retail shopping, bilingual dental services, and inter-city transit services.

Low Carbon Transit Operations Program (LCTOP)

PROJECT DESCRIPTION AND ALLOCATION REQUEST (BENEFITS/OUTCOMES)

Table 5: Description of Major Benefits/Outcomes

e) Co-Benefits - Check all additional Benefits/Outcomes.

<input type="checkbox"/> Improved Safety	<input type="checkbox"/> Coordination with Educational Institutions
<input type="checkbox"/> Improved Public Health	<input type="checkbox"/> College/University <input type="checkbox"/> Grades K-12
<input type="checkbox"/> Reduced Operating/Maintenance Cost	<input type="checkbox"/> Promotes Active Transportation (walking, biking)
<input type="checkbox"/> Increase System Reliability	<input checked="" type="checkbox"/> Promotes integration with other modes of transportation
<input type="checkbox"/> Other Benefits (describe below)	

f) Co-Benefits - Describe benefits indicated above in d) and any other benefits not listed.

The Guadalupe Flyer route includes a bus stop at the Amtrak Surfliner train station in Guadalupe and extends to the Santa Maria Transit Center where all intercity SMAT routes stop, as well as the inter-regional (SLORTA Route 10 to San Luis Obispo County), and Greyhound intermocal services can be accessed . The Transit Center's close proximity to nearby Town Center Mall, neighboring retail outlets, medical offices, social services, and the city's government center also promotes walking and bicycle riding.

Table 6: Project Schedule

Capital Projects	
Begin Construction Phase (Contract Award)	
End Construction Phase (Contract Acceptance)	
Begin Vehicle/Equipment Order (Contract Award)	
End Vehicle/Equipment Order (Contract Acceptance)	
Begin Closeout Phase	
End Closeout Phase	

Operations Projects	
Begin expanded/enhanced transit services	1-Jul-16
End expanded/enhanced transit services	30-Jun-17
Begin Closeout Phase	
End Closeout Phase	

START DATE FOR LCTOP FUNDED PHASES MAY NOT PROCEED PROJECT APPROVAL LETTER.

Pre-construction costs (e.g design, environmental and right-a-way) are not eligible to be funded by LCTOP funds,they must be funded by other soures.

Low Carbon Transit Operations Program (LCTOP)

PROJECT DESCRIPTION AND ALLOCATION REQUEST (OPERATIONS DESCRIPTION)

Table 7: Operations Project Description

a) Describe the operating plan for this system.

The project is an extension of the service expansion that was implemented in August 2015. As such, the operations will continue seamlessly from fiscal year '15-'16 to '16-'17. The Guadalupe Flyer route will continue as a 75 minute loop between Guadalupe and Santa Maria starting at 6:15 a.m. and finishing at 7:50 p.m. Mondays through Saturdays. An abbreviated schedule operates on Sundays from 8:45 a.m. through 6:35 p.m. This fixed route service will also offer complementary ADA origin to destination service for eligible disabled residents during the same schedule hours as required.

b) Describe the fare structure for this system.

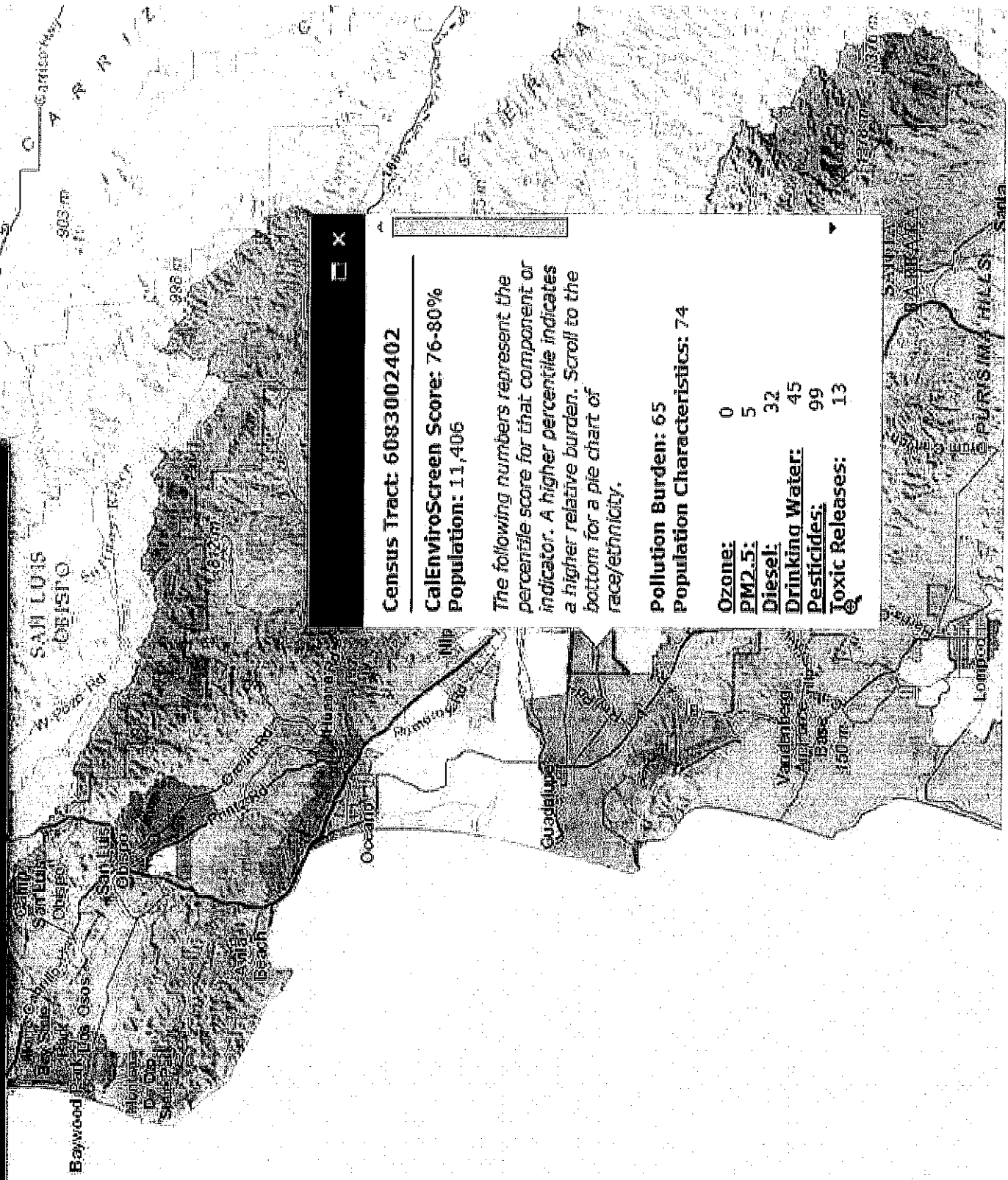
The Guadalupe Flyer fares are: General Public \$1.50; Students \$1.00; Seniors, Disabled, and Medicare Cardholders \$0.75. Convenient Monthly Passes are also available: General Public \$45; Students, Seniors, Disabled, Medicare Cardholders \$25. A \$10 Punch Pass is also available. Passes are sold at Guadalupe City Hall, at the transit contractor's office (SMOOTH, Inc.) in Santa Maria, at the Town Center Mall utility counter, and Allen Hancock College in Santa Maria.

c) Describe the assumptions and process that were used to develop the ridership projections shown in the request.

Passenger ridership during the first five months of 2015-2016 were used to project ridership for this grant cycle. New monthly passenger rides experienced on the three new Saturday loops averaged 142 trips per month... $142 \times 12 \text{ months} = 1,704$ (rounded to 1,700). Sunday ridership averaged 322 trips (August's ridership was not included as, the City extended a Free Pass for Saturdays and Sundays for the entire month of August). $322 \times 12 \text{ months} = 3,864$ (rounded up to 3,875). This resulted in a projected total ridership for the project year of 5,575.

d) Describe the assumptions and process for how the operating cost projections were developed.

Transit staff developed a detailed expense spreadsheet for the 2015-2016 year which was used for LCTOP periodic reports and internal controls. This spreadsheet allowed the contractor and city to report all actual expenses incurred in the first full year of service. For the 2016-2017 grant cycle, actual days of expanded service in the target year were calculated and all projected expense changes were inserted in the spreadsheet (payroll increases, fuel cost estimate, advertising and promotion costs, projected maintenance, etc.) It is offered that this methodology has resulted in a reliable expense projection.



Census Tract: 6083002402

CalEnviroScreen Score: 76-80%
Population: 11,406

The following numbers represent the percentile score for that component or indicator. A higher percentile indicates a higher relative burden. Scroll to the bottom for a pie chart of race/ethnicity.

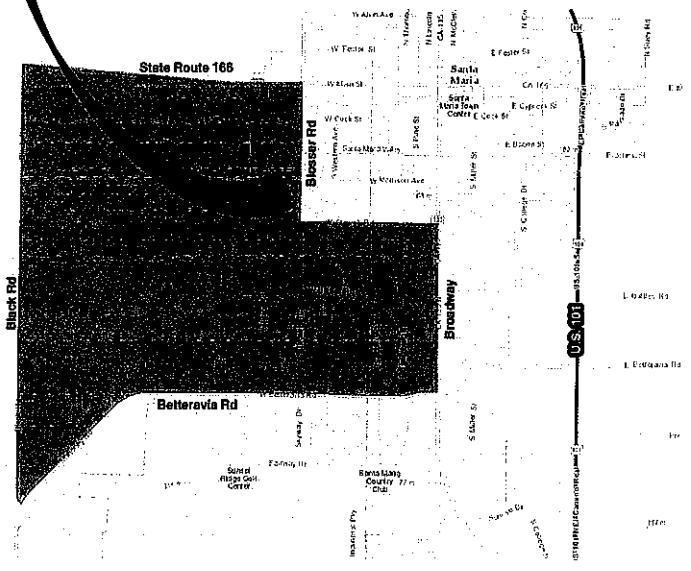
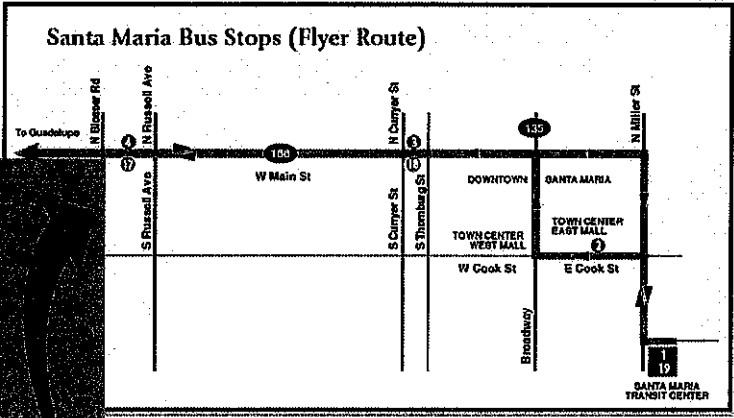
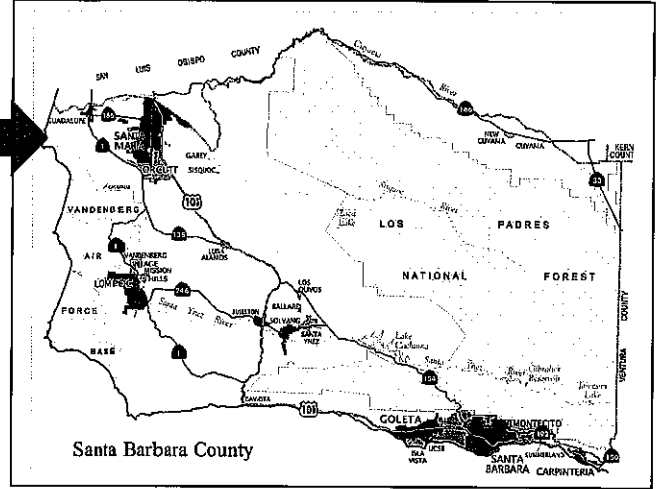
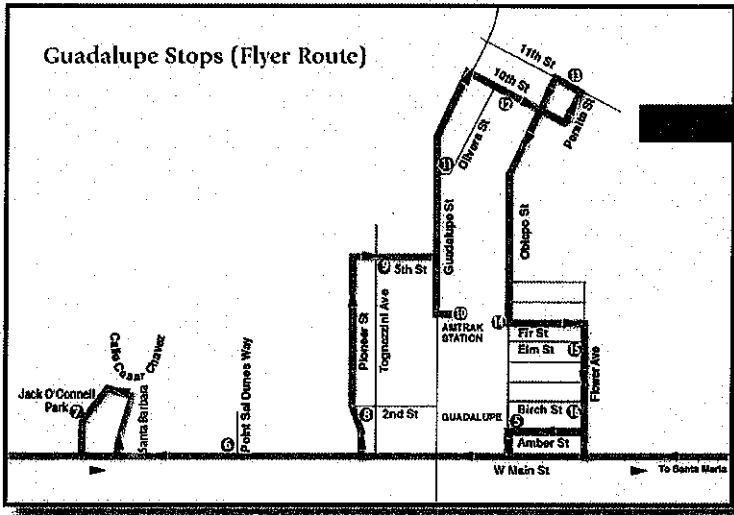
Pollution Burden: 65
Population Characteristics: 74

Ozone:	0
PM2.5:	5
Diesel:	32
Drinking Water:	45
Pesticides:	99
Toxic Releases:	13

PROJECT AND DAC MAPS (Table 4: Item b AND Table 5: Item d)

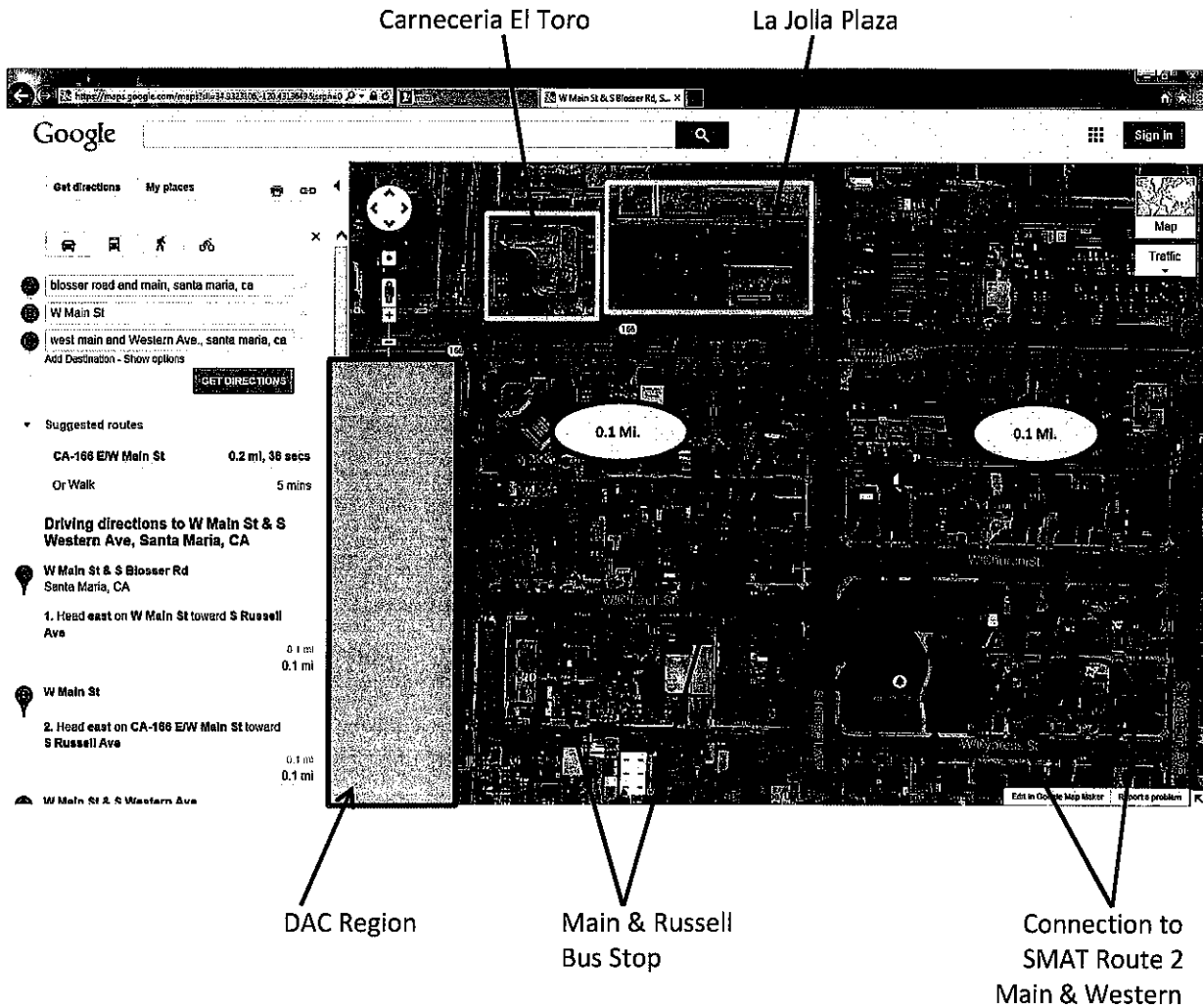
Grant Program:
Applicant:
Project Name:

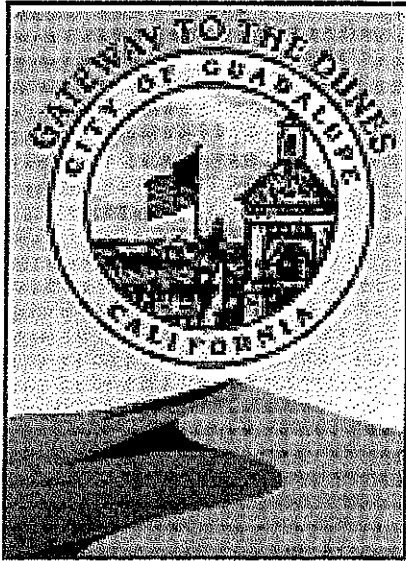
Low Carbon Transit Operations Program (LCTOP), 2016-2017
City of Guadalupe
Guadalupe Transit Expansion



DAC DESTINATIONS & DISTANCE FROM DAC TO BUS STOP CONNECTIONS
(Table 5 – d: Distance from DAC to Bus Stop)

Grant Program: Low Carbon Transit Operations Program (LCTOP), 2016-2017
Applicant: City of Guadalupe
Project Name: Guadalupe Transit Expansion





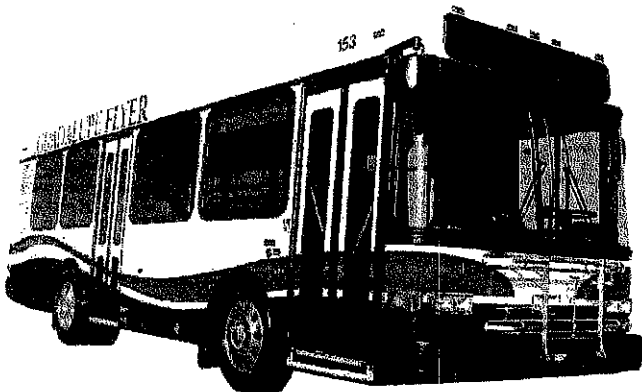
SMOOTH

240 East Roemer Way
Santa Maria, CA 93454
(805) 922-8476

GUADALUPE TRANSIT and SMOOTH, Inc.

FTA DRUG AND ALCOHOL TESTING PROGRAM MANUAL

Revised/Board Adopted 2/4/2015



**GUADALUPE TRANSIT / SMOOTH, Inc. – Contractor
DRUG AND ALCOHOL PROGRAM**

TABLE OF CONTENTS

TAB # 1 DRUG AND ALCOHOL TESTING POLICY

A. PURPOSE.....	Page 1
B. APPLICABILITY.....	Page 1-2
C. DEFINITIONS.....	Page 2-9
D. EDUCATION AND TRAINING.....	Page 9
E. PROHIBITED SUBSTANCES.....	Page 9-10
F. PROHIBITED CONDUCT.....	Page 11
G. DRUG STATUTE CONVICTION.....	Page 12
H. TESTING REQUIREMENTS.....	Page 12
I. DRUG TESTING PROCEDURES.....	Page 12-15
J. ALCOHOL TESTING PROCEDURES.....	Page 15-16
K. PRE-EMPLOYMENT TESTING.....	Page 16-18
L. REASONABLE SUSPICION TESTING.....	Page 18-19
M. POST-ACCIDENT TESTING.....	Page 19-21
N. RANDOM TESTING.....	Page 21-22
O. RETURN-TO-DUTY TESTING.....	Page 22
P. FOLLOW UP TESTING.....	Page 22
Q. RESULT OF DRUG AND ALCOHOL TEST.....	Page 23-25
R. GREIVANCE AND APPEAL.....	Page 26
S. PROPER APPLICATION OF THE POLICY.....	Page 26
T. INFORMATION AND DISCLOSURE.....	Page 26-27
ADOPTION CERTIFICATION.....	Page 28

ATTACHMENTS

ATTACHMENT – A	COVERED JOB CLASSIFICATIONS.....	Page 29
ATTACHMENT – B	SYSTEM CONTACTS.....	Page 30

**DRUG AND ALCOHOL TESTING POLICY
GUADALUPE TRANSIT / SMOOTH, INC.
Adopted as of FEBRUARY 3, 2015**

A. PURPOSE

- 1) The **GUADALUPE TRANSIT / SMOOTH, INC.** provides public transit and paratransit services for the residents of **the City of Guadalupe, CA**. Part of our mission is to ensure that this service is delivered safely, efficiently, and effectively by establishing a drug and alcohol-free work environment, and to ensure that the workplace remains free from the effects of drugs and alcohol in order to promote the health and safety of employees and the general public. In keeping with this mission, **GUADALUPE TRANSIT / SMOOTH, INC.** declares that the unlawful manufacture, distribution, dispense, possession, or use of controlled substances or misuse of alcohol is prohibited for all employees.
- 2) Additionally, the purpose of this policy is to establish guidelines to maintain a drug and alcohol-free workplace in compliance with the Drug-Free Workplace Act of 1988, and the Omnibus Transportation Employee Testing Act of 1991. This policy is intended to comply with all applicable Federal regulations governing workplace anti-drug and alcohol programs in the transit industry. Specifically, the Federal Transit Administration (FTA) of the U.S. Department of Transportation has published 49 CFR Part 655, as amended, that mandates urine drug testing and breath alcohol testing for safety-sensitive positions, and prohibits performance of safety-sensitive functions when there is a positive test result. The U. S. Department of Transportation (USDOT) has also published 49 CFR Part 40, as amended, that sets standards for the collection and testing of urine and breath specimens.
- 3) Any provisions set forth in this policy that are included under the sole authority of **SMOOTH, INC.** and are not provided under the authority of the above named Federal regulations are underlined. Tests conducted under the sole authority of **SMOOTH, INC.** will be performed on non-USDOT forms and will be separate from USDOT testing in all respects.

B. APPLICABILITY

This Drug and Alcohol Testing Policy, and DOT testing procedures, applies to all safety-sensitive employees (full- or part-time) when performing safety sensitive duties for **GUADALUPE TRANSIT**. Employees that do not perform safety-

FTA DOT Revised 9/2014

sensitive functions for Guadalupe Transit services are also covered under this policy under the sole authority of SMOOTH, INC.. See Attachment A for a list of employees and the authority under which they are included.

1. For FTA covered employees (performing functions for Guadalupe transit. A safety-sensitive function is operation of public transit service including the operation of a revenue service vehicle (whether or not the vehicle is in revenue service), maintenance of a revenue service vehicle or equipment used in revenue service, security personnel who carry firearms, dispatchers or person controlling the movement of revenue service vehicles and any transit employee who operates a vehicle that requires a Commercial Drivers License to operate. Maintenance functions include the repair, overhaul, and rebuild of engines, vehicles and/or equipment used in revenue service. A list of safety-sensitive positions who perform one or more of the above mentioned duties is provided in Attachment A. Supervisors are only safety sensitive if they perform one of the above functions. Volunteers are considered safety sensitive and subject to testing if they are required to hold a CDL, or receive remuneration for service in excess of actual expense.
2. For Federal Motor Carrier Safety Administration (FMCSA) covered employees (operating a vehicle for SMOOTH that requires a Commercial Driver License (CDL), every employee who operates a commercial motor vehicle in commerce.

C. DEFINITIONS

FMCSA Accident: An occurrence involving a commercial motor vehicle operating on a public road in commerce and,

- a. An loss of human life; OR
- b. Bodily injury and immediately receives medical treatment away from the scene of the accident AND a citation was issued within 8 hours of the occurrence under State of local law for a moving violation arising from the accident; OR
- c. One or more vehicles incur disabling damage as the result of the occurrence AND a citation was issued within 8 hours of the occurrence under State of local law for a moving violation arising from the accident.

FTA Accident: An occurrence associated with the operation of a vehicle even when not in revenue service, if as a result:

- a. An individual dies;

- b. An individual suffers a bodily injury and immediately receives medical treatment away from the scene of the accident; or,
- c. One or more vehicles incur disabling damage as the result of the occurrence and is transported away from the scene by a tow truck or other vehicle. For purposes of this definition, *disabling damage* means damage which precludes departure of any vehicle from the scene of the occurrence in its usual manner in daylight after simple repairs. Disabling damage includes damage to vehicles that could have been operated but would have been further damaged if so operated, but does not include damage which can be remedied temporarily at the scene of the occurrence without special tools or parts, tire disablement without other damage even if no spare tire is available, or damage to headlights, taillights, turn signals, horn, or windshield wipers that makes them inoperative.

Adulterated specimen: A specimen that has been altered, as evidence by test results showing either a substance that is not a normal constituent for that type of specimen or showing an abnormal concentration of an endogenous substance.

Alcohol: The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols contained in any beverage, mixture, mouthwash, candy, food, preparation or medication.

Alcohol Concentration: Expressed in terms of grams of alcohol per 210 liters of breath as indicated by a breath test under 49 CFR Part 40.

Aliquot: A fractional part of a specimen used for testing, It is taken as a sample representing the whole specimen.

Canceled Test: A drug or alcohol test that has a problem identified that cannot be or has not been corrected, or which is cancelled. A canceled test is neither positive nor negative.

Commerce: means

- (1) Any trade, traffic, or transportation within the jurisdiction of the United States between a place in a State and a place outside of such State, including a place outside of the United States; and
- (2) Trade, traffic, and transportation in the United States which affects any trade, traffic, and transportation described in paragraph (1) of this definition.

Commercial Motor Vehicle: a motor vehicle or combination of motor vehicles used in commerce to transport passengers or property if the vehicle

- (1) Has a gross combination weight rating or gross combination weight of 11,794 kilograms or more (26,001 pound or more), whichever is greater, inclusive of a towed unit(s) with a gross vehicle rating or gross vehicle weight of more than 4,536 kilograms (10,000 pounds), whichever is greater; or
- (2) Has a gross vehicle rating or gross vehicle weight of 11,794 or more (26,001 or more pounds), whichever is greater; or
- (3) Is designed to transport 16 or more passengers, including the driver; or
- (4) Is of any size and is used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Act (49 U.S.C. 5103(b)) and which require the motor vehicle to be placarded under the Hazardous Materials Regulations (49 CFR part 172, subpart F).

Confirmatory Drug Test: A second analytical procedure performed on a different aliquot of the original specimen to identify and quantify the presence of a specific drug or metabolite.

Confirmatory Validity Test: A second test performed on a different aliquot of the original urine specimen to further support a validity test result.

Covered Employee Under FTA Authority: SEE ATTACHMENT A for job titles covered by FTA at SMOOTH. An employee who performs a safety-sensitive function including an applicant or transferee who is being considered for hire into a safety-sensitive function (See Attachment A for a list of covered employees).

Covered Employee Under FMCSA Authority: SEE ATTACHMENT A for job titles covered by FMCSA at SMOOTH. An employee, applicant, or transferee who is being considered for hire into a safety-sensitive function. (See Attachment A).

Designated Employer Representative (DER): An employee authorized by the employer to take immediate action to remove employees from safety-sensitive duties and to make required decisions in testing. The DER also receives test results and other communications for the employer, consistent with the requirements of 49 CFR Parts 40 and 655.

FTA DOT Revised 9/2014

Department of Transportation (DOT): For the purposes of Drug and Alcohol regulatory oversight, DOT is the department of the federal government which includes the Federal Transit Administration, Federal Railroad Administration, Federal Aviation Administration, Federal Motor Carriers' Safety Administration, Pipeline & Hazardous Materials Safety Administration, United States Coast Guard, and the Office of the Secretary of Transportation.

Dilute specimen: A urine specimen with creatinine and specific gravity values that are lower than expected for human urine.

Disabling damage: Damage which precludes departure of any vehicle from the scene of the occurrence in its usual manner in daylight after simple repairs. Disabling damage includes damage to vehicles that could have been operated but would have been further damaged if so operated, but does not include damage which can be remedied temporarily at the scene of the occurrence without special tools or parts, tire disablement without other damage even if no spare tire is available, or damage to headlights, taillights, turn signals, horn, or windshield wipers that makes them inoperative.

Evidentiary Breath Testing Device (EBT): A Device approved by the NHTSA for the evidential testing of breath at the 0.02 and the 0.04 alcohol concentrations. Approved devices are listed on the National Highway Traffic Safety Administration (NHTSA) conforming products list.

Initial Drug Test: (Screening Drug Test) The test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites.

Initial Specimen Validity Test: The first test used to determine if a urine specimen is adulterated, diluted, substituted, or invalid

Invalid Result: The result reported by an Department of Health & Human Services (HHS)-certified laboratory in accordance with the criteria established by the HHS Mandatory Guidelines when a positive, negative, adulterated, or substituted results cannot be established for a specific drug or specimen validity test.

Laboratory: Any U.S. laboratory certified by HHS under the National Laboratory Certification program as meeting standards of Subpart C of the HHS Mandatory Guidelines for Federal Workplace Drug Testing Programs; or, in the case of foreign laboratories, a laboratory approved for participation by DOT under this part.

FTA DOT Revised 9/2014

Limit of Detection (LOD): The lowest concentration at which a measurand can be identified, but (for quantitative assays) the concentration cannot be accurately calculated.

Limit of Quantitation: For quantitative assays, the lowest concentration at which the identity and concentration of the measurand can be accurately established.

Medical Review Officer (MRO): A licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by the drug testing program who has knowledge of substance abuse disorders, and has appropriate medical training to interpret and evaluate an individual's confirmed positive test result, together with his/her medical history, and any other relevant bio-medical information.

Negative Dilute: A drug test result which is negative for the five drug/drug metabolites but has a specific gravity value lower than expected for human urine.

Negative result: The result reported by an HHS-certified laboratory to an MRO when a specimen contains no drug or the concentration of the drug is less than the cutoff concentration for the drug or drug class and the specimen is a valid specimen.

Non-negative test result: A urine specimen that is reported as adulterated, substituted, invalid, or positive for drug/drug metabolites.

Oxidizing Adulterant: A substance that acts alone or in combination with other substances to oxidize drugs or drug metabolites to prevent the detection of the drug or metabolites, or affects the reagents in either the initial or confirmatory drug test.

Performing (a safety-sensitive function): A covered employee is considered to be performing a safety-sensitive function and includes any period in which he or she is actually performing, ready to perform, or immediately available to perform such functions.

Positive result: The result reported by an HHS- Certified laboratory when a specimen contains a drug or drug metabolite equal or greater to the cutoff concentrations.

Prohibited drug: Identified as marijuana, cocaine, opiates, amphetamines (including ecstasy), or phencyclidine at levels above the minimum thresholds specified in 49 CFR Part 40, as amended.

Reconfirmed: The result reported for a split specimen when the second laboratory is able to corroborate the original result reported for the primary specimen.

Rejected for Testing: The result reported by an HHS- Certified laboratory when no tests are performed for a specimen because of a fatal flaw or a correctable flaw that has not been corrected.

Revenue Service Vehicles: All transit vehicles that are used for passenger transportation service.

Safety-sensitive functions for FTA: Employee duties identified as:

- (1) The operation of a transit revenue service vehicle even when the vehicle is not in revenue service.
- (2) The operation of a non-revenue service vehicle by an employee when the operation of such a vehicle requires the driver to hold a Commercial Drivers License (CDL).
- (3) Maintaining a revenue service vehicle or equipment used in revenue service.
- (4) Controlling the movement of a revenue service vehicle and
- (5) Carrying a firearm for security purposes.

Split Specimen Collection: A collection in which the urine collected is divided into two separate bottles, the primary specimen (Bottle A) and the split specimen (Bottle B).

Substance Abuse Professional (SAP): A licensed physician (medical doctor or doctor of osteopathy) or licensed or certified psychologist, social worker, employee assistance professional, state-licensed marriage and family therapist, or drug and alcohol counselor (certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission or by the International Certification Reciprocity Consortium/Alcohol and other Drug Abuse (ICRC) or by the National Board for Certified Counselors, Inc. and Affiliates/Master Addictions Counselor (NBCC)) with knowledge of and clinical experience in the diagnosis and treatment of drug and alcohol related disorders.

Substituted specimen: A urine specimen with creatinine and specific gravity values that are so diminished or so divergent that they are not consistent with normal human urine.

Test Refusal: The following are considered a refusal to test if the employee:

FTA DOT Revised 9/2014

- (1) Fails to appear for any test (excluding pre-employment) within a reasonable time, as determined by the employer, after being directed to do so by the employer
- (2) Fails to remain at the testing site until the testing process is complete
- (3) Fails to provide a urine or breath specimen for any drug or alcohol test required by Part 40 or DOT agency regulations
- (4) In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring of your provision of a specimen
- (5) Fails to provide a sufficient amount of urine or breath when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure
- (6) Fails or declines to take a second test the employer or collector has directed you to take
- (7) Fails to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by the DER as part of the "shy bladder" or "shy lung" procedures
- (8) Fails to cooperate with any part of the testing process (e.g., refuse to empty pockets when so directed by the collector, behave in a confrontational way that disrupts the collection process)
- (9) If the MRO reports that there is verified adulterated or substituted test result
- (10) Failure or refusal to sign Step 2 of the alcohol testing form
- (11) Failure to follow the observer's instructions during an observed collection including instructions to raise your clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if you have any type of prosthetic or other device that could be used to interfere with the collection process.
- (12) Possess or wear a prosthetic or other device that could be used to interfere with the collection process
- (13) Admit to the collector or MRO that you adulterated or substituted the specimen.

Transit Vehicle: A bus, electric bus, van, automobile, rail car, trolley car, trolley bus, or vessel. A public transit vehicle is a vehicle used for public transportation or for ancillary services.

FTA DOT Revised 9/2014

Verified negative test: A drug test result reviewed by a medical review officer and determined to have no evidence of prohibited drug use above the minimum cutoff levels established by the Department of Health and Human Services (HHS).

Verified positive test: A drug test result reviewed by a medical review officer and determined to have evidence of prohibited drug use above the minimum cutoff levels specified in 49 CFR Part 40 as revised.

Validity testing: The evaluation of the specimen to determine if it is consistent with normal human urine. Specimen validity testing will be conducted on all urine specimens provided for testing under DOT authority. The purpose of validity testing is to determine whether certain adulterants or foreign substances were added to the urine, if the urine was diluted, or if the specimen was substituted.

D. EDUCATION AND TRAINING

- 1) Every covered employee will receive a copy of this policy and will have ready access to the corresponding federal regulations including 49 CFR Parts 655 and 40, as amended. In addition, all covered employees will undergo a minimum of 60 minutes of training on the signs and symptoms of drug use including the effects and consequences of drug use on personal health, safety, and the work environment. The training also includes manifestations and behavioral cues that may indicate prohibited drug use.
- 2) All supervisory personnel or company officials who are in a position to determine employee fitness for duty will receive 60 minutes of reasonable suspicion training on the physical, behavioral, and performance indicators of probable drug use and 60 minutes of additional reasonable suspicion training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse.

E. PROHIBITED SUBSTANCES

- 1) Prohibited substances addressed by this policy include the following.
 - a. Illegally Used Controlled Substance or Drugs Under the Drug-Free Workplace Act of 1988 any drug or any substance identified in Schedule I through V of Section 202 of the Controlled Substance Act (21 U.S.C. 812), and as further defined by 21 CFR 1300.11 through

1300.15 is prohibited at all times in the workplace unless a legal prescription has been written for the substance. This includes, but is not limited to: marijuana, amphetamines (including methamphetamine and ecstasy), opiates (including heroin), phencyclidine (PCP), and cocaine, as well as any drug not approved for medical use by the U.S. Drug Enforcement Administration or the U.S. Food and Drug Administration. Illegal use includes use of any illegal drug, misuse of legally prescribed drugs, and use of illegally obtained prescription drugs. Also, the medical use of marijuana, or the use of hemp related products, which cause drug or drug metabolites to be present in the body above the minimum thresholds is a violation of this policy

Federal Transit Administration drug testing regulations (49 CFR Part 655) require that all employees covered under FTA Authority be tested for marijuana, cocaine, amphetamines (including methamphetamine and ecstasy), opiates (including heroin), and phencyclidine as described in Section H of this policy. Employees covered under company authority will also be tested for these same substances. Illegal use of these five drugs is prohibited at all times and thus, covered employees may be tested for these drugs anytime that they are on duty.

- b. Legal Drugs: The appropriate use of legally prescribed drugs and non-prescription medications is not prohibited. However, the use of any substance which carries a warning label that indicates that mental functioning, motor skills, or judgment may be adversely affected must be reported to a **GUADALUPE TRANSIT / SMOOTH, INC.** supervisor and the employee is required to provide a written release from his/her doctor or pharmacist indicating that the employee can perform his/her safety-sensitive functions.

- c. Alcohol: The use of beverages containing alcohol (including any mouthwash, medication, food, candy) or any other substances such that alcohol is present in the body while performing safety-sensitive job functions is prohibited. A random or reasonable suspicion alcohol test can only be performed on a covered employee under 49 CFR Part 655 just before, during, or just after the performance of safety-sensitive job functions. Under **SMOOTH, INC.** authority, a non-DOT alcohol test can be performed any time an employee is on duty.

F. PROHIBITED CONDUCT

- 1) All covered employees are prohibited from reporting for duty or remaining on duty any time there is a quantifiable presence of a prohibited drug in the body above the minimum thresholds defined in 49 CFR PART 40, as amended.
- 2) Each covered employee is prohibited from consuming alcohol while performing safety-sensitive job functions or while on-call to perform safety-sensitive job functions. If an on-call employee has consumed alcohol, they must acknowledge the use of alcohol at the time that they are called to report for duty. The covered employee will subsequently be relieved of his/her on-call responsibilities and subject to discipline.
- 3) The Transit Department shall not permit any covered employee to perform or continue to perform safety-sensitive functions if it has actual knowledge that the employee is using alcohol
- 4) Each covered employee is prohibited from reporting to work or remaining on duty requiring the performance of safety-sensitive functions while having an alcohol concentration of 0.02 or greater regardless of when the alcohol was consumed.
- 5) No covered employee shall consume alcohol for eight (8) hours following involvement in an accident or until he/she submits to the post-accident drug/alcohol test, whichever occurs first.
- 6) No covered employee shall consume alcohol within four (4) hours prior to the performance of safety-sensitive job functions.
- 7) SMOOTH, INC. under its own authority also prohibits the consumption of alcohol all times employee is on duty, or anytime the employee is in uniform.
- 8) Consistent with the Drug-free Workplace Act of 1988, all **GUADALUPE TRANSIT / SMOOTH, INC.** employees are prohibited from engaging in the unlawful manufacture, distribution, dispensing, possession, or use of prohibited substances in the work place including transit system premises and transit vehicles.

G. DRUG STATUTE CONVICTION

Consistent with the Drug Free Workplace Act of 1998, all employees are required to notify the **GUADALUPE TRANSIT / SMOOTH, INC.** management of any criminal drug statute conviction for a violation occurring in the workplace within five days after such conviction. Failure to comply with this provision shall result in disciplinary action as defined in Section Q.10 of this policy.

H. TESTING REQUIREMENTS

- 1) Analytical urine drug testing and breath testing for alcohol will be conducted using the testing methodologies and thresholds defined in 49CFR part 40 as amended. All employees covered under FTA authority shall be subject to testing prior to performing safety-sensitive duty, for reasonable suspicion, following an accident, and random as defined in Section K, L, M, and N of this policy, and return to duty/follow-up. All employees covered solely under SMOOTH, INC. authority will also be subject to testing for reasonable suspicion, post-accident, random and return to duty/follow up using non-DOT testing forms
- 2) A drug test can be performed any time a covered employee is on duty. A reasonable suspicion and random alcohol test can be performed just before, during, or after the performance of a safety-sensitive job function. Under SMOOTH, INC. authority, a non-DOT alcohol test can be performed any time a SMOOTH service employee is on duty.
- 3) All employees will be subject to urine drug testing and breath alcohol testing as a condition of ongoing employment with **GUADALUPE TRANSIT / SMOOTH, INC.**. Any safety-sensitive employee who refuses to comply with a request for testing shall be removed from duty and subject to discipline as defined in Section Q of this policy.

I. DRUG TESTING PROCEDURES

- 1) Testing shall be conducted in a manner to assure a high degree of accuracy and reliability and using techniques, equipment, and laboratory facilities which have been approved by the U.S. Department of Health and Human Service (HHS). All testing will be conducted consistent with the procedures set forth in 49 CFR Part 40, as amended. The procedures will be performed in a private, confidential manner and every effort will be

made to protect the employee, the integrity of the drug testing procedure, and the validity of the test result.

- 2) The drugs that will be tested for include marijuana, cocaine, opiates (including heroin), amphetamines (including methamphetamine and ecstasy), and phencyclidine. After the identity of the donor is checked using picture identification, a urine specimen will be collected using the split specimen collection method described in 49 CFR Part 40, as amended. Each specimen will be accompanied by a DOT Chain of Custody and Control Form and identified using a unique identification number that attributes the specimen to the correct individual. The specimen analysis will be conducted at a HHS certified laboratory. An initial drug screen and validity test will be conducted on the primary urine specimen. For those specimens that are not negative, a confirmatory Gas Chromatography/Mass Spectrometry (GC/MS) test will be performed. The test will be considered positive if the amounts of the drug(s) and/or its metabolites identified by the GC/MS test are above the minimum thresholds established in 49 CFR Part 40, as amended.
- 3) The test results from the HHS certified laboratory will be reported to a Medical Review Officer. A Medical Review Officer (MRO) is a licensed physician with detailed knowledge of substance abuse disorders and drug testing. The MRO will review the test results to ensure the scientific validity of the test and to determine whether there is a legitimate medical explanation for a confirmed positive, substitute, or adulterated test result. The MRO will attempt to contact the employee to notify the employee of the non-negative laboratory result, and provide the employee with an opportunity to explain the confirmed laboratory test result. The MRO will subsequently review the employee's medical history/medical records as appropriate to determine whether there is a legitimate medical explanation for a non-negative laboratory result. If no legitimate medical explanation is found, the test will be verified positive or refusal to test and reported to the **GUADALUPE TRANSIT / SMOOTH, INC.** Drug and Alcohol Program Manager (DAPM). If a legitimate explanation is found, the MRO will report the test result as negative to the DAPM.
- 4) If the test is invalid without a medical explanation, a retest will be conducted under direct observation. Employees do not have access to a test of their split specimen following an invalid result.
- 5) Any covered employee who questions the results of a required drug test under paragraphs L through P of this policy may request that the split

sample be tested. The split sample test must be conducted at a second HHS-certified laboratory. The test must be conducted on the split sample that was provided by the employee at the same time as the primary sample. The method of collecting, storing, and testing the split sample will be consistent with the procedures set forth in 49 CFR Part 40, as amended. The employee's request for a split sample test must be made to the Medical Review Officer within 72 hours of notice of the original sample verified test result. Requests after 72 hours will only be accepted at the discretion of the MRO if the delay was due to documentable facts that were beyond the control of the employee. **GUADALUPE TRANSIT / SMOOTH, INC.** will ensure that the cost for the split specimen are covered in order for a timely analysis of the sample, however **GUADALUPE TRANSIT / SMOOTH, INC.** will seek reimbursement for the split sample test from the employee.

- 6) If the analysis of the split specimen fails to confirm the presence of the drug(s) detected in the primary specimen, if the split specimen is not able to be analyzed, or if the results of the split specimen are not scientifically adequate, the MRO will declare the original test to be canceled. If the split specimen is not available to analyze the MRO will direct **GUADALUPE TRANSIT / SMOOTH, INC.** to retest the employee under direct observation.
- 7) The split specimen will be stored at the initial laboratory until the analysis of the primary specimen is completed. If the primary specimen is negative, the split will be discarded. If the primary specimen is positive, it will be retained in frozen storage for one year and the split specimen will also be retained for one year. If the primary is positive, the primary and the split will be retained for longer than one year for testing if so requested by the employee through the Medical Review Officer, or by the employer, by the MRO, or by the relevant DOT agency.
- 8) Observed collections
 - a. Consistent with 49 CFR part 40, as amended, collection under direct observation (by a person of the same gender) with no advance notice will occur if:
 - i. The laboratory reports to the MRO that a specimen is invalid, and the MRO reports to **GUADALUPE TRANSIT / SMOOTH, INC.** that there was not an adequate medical explanation for the result;

- ii. The MRO reports to **GUADALUPE TRANSIT / SMOOTH, INC.** that the original positive, adulterated, or substituted test result had to be cancelled because the test of the split specimen could not be performed;
- iii. The laboratory reported to the MRO that the specimen was negative-dilute with a creatinine concentration greater than or equal to 2 mg/dL but less than or equal to 5 mg/dL, and the MRO reported the specimen to you as negative-dilute and that a second collection must take place under direct observation (see §40.197(b)(1)).
- iv. The collector observes materials brought to the collection site or the employee's conduct clearly indicates an attempt to tamper with a specimen;
- v. The temperature on the original specimen was out of range;
- vi. Anytime the employee is directed to provide another specimen because the original specimen appeared to have been tampered with.
- vii. All follow-up-tests; or
- viii. All return-to-duty tests

J. ALCOHOL TESTING PROCEDURES

- 1) Tests for breath alcohol concentration will be conducted utilizing a National Highway Traffic Safety Administration (NHTSA)-approved Evidential Breath Testing device (EBT) operated by a trained Breath Alcohol Technician (BAT). Alcohol screening tests may be performed using a non-evidential testing device which is also approved by NHSTA. If the initial test indicates an alcohol concentration of 0.02 or greater, a second test will be performed to confirm the results of the initial test. The confirmatory test must occur on an EBT. The confirmatory test will be conducted no sooner than fifteen minutes after the completion of the initial test. The confirmatory test will be performed using a NHTSA-approved

EBT operated by a trained BAT. The EBT will identify each test by a unique sequential identification number. This number, time, and unit identifier will be provided on each EBT printout. The EBT printout, along with an approved alcohol testing form, will be used to document the test, the subsequent results, and to attribute the test to the correct employee. The test will be performed in a private, confidential manner as required by 49 CFR Part 40, as amended. The procedure will be followed as prescribed to protect the employee and to maintain the integrity of the alcohol testing procedures and validity of the test result.

- 2) An employee who has a confirmed alcohol concentration of 0.04 or greater will be considered a positive alcohol test and in violation of this policy. The consequences of a positive alcohol test are described in Section Q. of this policy. Even though an employee who has a confirmed alcohol concentration of 0.02 to 0.039 is not considered positive, the employee shall still be removed from duty for at least twenty-four hours or for the duration of the work day whichever is longer and will be subject to the consequences described in Section Q of this policy. An alcohol concentration of less than 0.02 will be considered a negative test.
- 3) **GUADALUPE TRANSIT / SMOOTH, INC.** affirms the need to protect individual dignity, privacy, and confidentiality throughout the testing process. If at any time the integrity of the testing procedures or the validity of the test results is compromised, the test will be canceled. Minor inconsistencies or procedural flaws that do not impact the test result will not result in a cancelled test.
- 4) The alcohol testing form (ATF) required by 49 CFR Part 40 as amended, shall be used for all FTA required testing. Failure of an employee to sign step 2 of the ATF will be considered a refusal to submit to testing.

K. PRE-EMPLOYMENT TESTING

- 1) All applicants for covered transit positions shall undergo urine drug testing prior to performance of a safety-sensitive function
 - a. All offers of employment for covered positions shall be extended conditional upon the applicant passing a drug test. An applicant will not be allowed to perform safety-sensitive functions unless the applicant takes a drug test with verified negative results.

- b. An employee shall not be placed, transferred or promoted into a position covered under US DOT or company authority until the employee takes a drug test with verified negative results.
- c. If an applicant fails a pre-employment drug test, the conditional offer of employment shall be rescinded and the applicant will be referred to a SAP. Failure of a pre-employment drug test will disqualify an applicant for employment for a period of at least one year. Before being considered for future employment the applicant must provide the employer proof of having successfully completed a referral, evaluation and treatment plan as described in section 655.62 of subpart G. The cost for the assessment and any subsequent treatment will be the sole responsibility of the applicant.
- d. When an employee being placed, transferred, or promoted from a non-covered position to a position covered under US DOT or company authority submits a drug test with a verified positive result, the employee shall be subject to disciplinary action in accordance with Section Q herein.
- e. If a pre-employment test is canceled, **GUADALUPE TRANSIT / SMOOTH, INC.** will require the applicant to take and pass another pre-employment drug test.
- f. In instances where a US DOT covered employee does not perform a safety-sensitive function for a period of 30 consecutive days or more regardless of reason, and during that period is not in the random testing pool the employee will be required to take a US DOT pre-employment drug test and have negative test results prior to the conduct of safety-sensitive job functions.
- g. Following a negative dilute the employee will be required to undergo another test. Should this second test result in a negative dilute result, the test will be considered a negative and no additional testing will be required unless directed to do so by the MRO.
- h. Applicants are required (even if ultimately not hired) to provide **GUADALUPE TRANSIT / SMOOTH, INC.** with signed written releases requesting FTA drug and alcohol records from all previous, DOT-covered, employers that the applicant has worked for within the last two years. Failure to do so will result in the employment offer being rescinded. **GUADALUPE TRANSIT /**

SMOOTH, INC. is required to ask all applicants (even if ultimately not hired) if they have tested positive or refused to test on a pre-employment test for a DOT covered employer within the last two years. If the applicant has tested positive or refused to test on a pre-employment test for a DOT covered employer, the applicant must provide **GUADALUPE TRANSIT / SMOOTH, INC.** proof of having successfully completed a referral, evaluation and treatment plan as described in section 655.62 of subpart G.

L. REASONABLE SUSPICION TESTING

- 1) All **GUADALUPE TRANSIT / SMOOTH, INC.** covered employees will be subject to a reasonable suspicion drug and/or alcohol test when the employer has reasonable suspicion to believe that the covered employee has used a prohibited drug and/or engaged in alcohol misuse. Reasonable suspicion shall mean that there is objective evidence, based upon specific, contemporaneous, articulable observations of the employee's appearance, behavior, speech or body odor that are consistent with possible drug use and/or alcohol misuse. Reasonable suspicion referrals must be made by one or more supervisors who are trained to detect the signs and symptoms of drug and alcohol use, and who reasonably concludes that an employee may be adversely affected or impaired in his/her work performance due to possible prohibited substance abuse or alcohol misuse. A reasonable suspicion alcohol test can only be conducted just before, during, or just after the performance of a safety-sensitive job function. However, under **SMOOTH, INC.**'s authority, a non-DOT reasonable suspicion alcohol test may be performed any time the covered employee is on duty. A reasonable suspicion drug test can be performed any time the covered employee is on duty. All employees covered under the sole authority of **SMOOTH, INC.** will also be subject to non-USDOT reasonable suspicion testing procedures modeled off the provisions in 49 CFR Part 40.

- 2) **GUADALUPE TRANSIT / SMOOTH, INC.** shall be responsible for transporting the employee to the testing site. Supervisors should avoid placing themselves and/or others into a situation which might endanger the physical safety of those present. The employee shall be placed on administrative leave pending disciplinary action described in Section Q of this policy. An employee who refuses an instruction to submit to a drug/alcohol test shall not be permitted to finish his or her shift and shall

FTA DOT Revised 9/2014

immediately be placed on administrative leave pending disciplinary action as specified in Section Q of this policy.

- 3) A written record of the observations which led to a drug/alcohol test based on reasonable suspicion shall be prepared and signed by the supervisor making the observation. This written record shall be submitted to the **GUADALUPE TRANSIT / SMOOTH, INC.**
- 4) When there are no specific, contemporaneous, articulable objective facts that indicate current drug or alcohol use, but the employee (who is not already a participant in a treatment program) admits the abuse of alcohol or other substances to a supervisor in his/her chain of command, the employee shall be referred for assessment and treatment consistent with Section Q of this policy. **GUADALUPE TRANSIT / SMOOTH, INC.** shall place the employee on administrative leave in accordance with the provisions set forth under Section Q of this policy. Testing in this circumstance would be performed under the direct authority of the **GUADALUPE TRANSIT / SMOOTH, INC.**. **Since the employee self-referred to management, testing under this circumstance would not be considered a violation of this policy or a positive test result under Federal authority.** However, self-referral does not exempt the covered employee from testing under Federal authority as specified in Sections L through N of this policy or the associated consequences as specified in Section Q.

M. POST-ACCIDENT TESTING

- 1) **FTA FATAL ACCIDENTS - All GUADALUPE TRANSIT / SMOOTH, INC.** employees covered under FTA authority will be required to undergo urine and breath testing if they are involved in an accident with a transit vehicle regardless of whether or not the vehicle is in revenue service that results in a fatality. All employees covered under the sole authority of **SMOOTH, INC.** will also be subject to non-USDOT post-accident testing procedures. This includes all surviving covered employees that are operating the vehicle at the time of the accident and any other whose performance could have contributed to the accident.
- 2) **FMCSA FATAL ACCIDENTS:** All **SMOOTH, INC.** safety-sensitive employees under FMCSA authority who were performing safety-sensitive functions with respect to the vehicle involved in an accident with a commercial motor vehicle operating on a public road in commerce that results in a fatality will be tested.
- 3) **FTA NON-FATAL ACCIDENTS -** A post-accident test of the operator will be

conducted if an accident results in injuries requiring immediate transportation to a medical treatment facility; or one or more vehicles incurs disabling damage, unless the operators performance can be completely discounted as a contributing factor to the accident.

- 3) **FMCSA NON-FATAL ACCIDENTS** – A FMCSA post-accident test will be conducted on all drivers not performing functions for GUADALUPE TRANSIT who were performing safety-sensitive functions with respect to the commercial motor vehicle requiring the use of a CDL who received a citation within 8 hours of the occurrence under State of local law for a moving traffic violation arising from the accident, if the accident involved bodily injuries requiring medical attention away from the scene; or one or more vehicles incurs disabling damage.
 - a. As soon as practicable following an accident, as defined in this policy, the transit supervisor investigating the accident will notify the transit employee operating the transit vehicle and all other covered employees whose performance could have contributed to the accident of the need for the test. The supervisor will make the determination using the best information available at the time of the decision.
 - b. The appropriate transit supervisor shall ensure that an employee, required to be tested under this section, is tested as soon as practicable, but no longer than eight (8) hours of the accident for alcohol, and no longer than 32 hours for drugs. If an alcohol test is not performed within two hours of the accident, the Supervisor will document the reason(s) for the delay. If the alcohol test is not conducted within (8) eight hours, or the drug test within 32 hours, attempts to conduct the test must cease and the reasons for the failure to test documented.
 - c. Any covered employee involved in an accident must refrain from alcohol use for eight (8) hours following the accident or until he/she undergoes a post-accident alcohol test.
 - d. An employee who is subject to post-accident testing who fails to remain readily available for such testing, including notifying a supervisor of his or her location if he or she leaves the scene of the accident prior to submission to such test, may be deemed to have refused to submit to testing.
 - e. Nothing in this section shall be construed to require the delay of necessary medical attention for the injured following an accident, or to prohibit an employee from leaving the scene of an accident for the period necessary to obtain assistance in responding to the accident, or to obtain necessary emergency medical care.

- f. In the rare event that **GUADALUPE TRANSIT / SMOOTH, INC.** is unable to perform an FTA drug and alcohol test (i.e., employee is unconscious, employee is detained by law enforcement agency), **GUADALUPE TRANSIT / SMOOTH, INC.** may use drug and alcohol post-accident test results administered by local law enforcement officials in lieu of the FTA test. The local law enforcement officials must have independent authority for the test and the employer must obtain the results in conformance with local law.

N. RANDOM TESTING

- 1) All covered employees will be subjected to random, unannounced testing. All safety-sensitive employees employed by SMOOTH, INC. are trained or licensed and are available for assignment to any one or multiple Guadalupe Transit / SMOOTH, INC. safety sensitive duties to include Driver, Dispatch, Mechanic, Office, or Management. Therefore, all safety sensitive employees of SMOOTH, INC. are covered under US DOT authority for **Random Testing** and will be selected from a pool of DOT-covered safety-sensitive employees. The selection of employees shall be made by a scientifically valid method of randomly generating an employee identifier from the appropriate pool of employees.
- 2) The dates for administering unannounced testing of randomly selected employees shall be spread reasonably throughout the calendar year, day of the week and hours of the day.
- 3) The number of employees randomly selected for drug/alcohol testing during the calendar year shall be not less than the percentage rates established by Federal regulations for those safety-sensitive employees subject to random testing by Federal regulations. The current random testing rate for drugs established by FTA equals twenty-five percent of the number of covered employees in the pool and the random testing rate for alcohol established by FTA equals ten percent of the number of covered employees in the pool.
- 4) Each covered employee shall be in a pool from which the random selection is made. Each covered employee in the pool shall have an equal chance of selection each time the selections are made. Employees will remain in the pool and subject to selection, whether or not the employee has been previously tested. There is no discretion on the part of management in the selection.
- 5) Covered transit employees that fall under the Federal Transit Administration regulations will be included in one random pool maintained separately from the testing pool of non-safety-sensitive employees that are included solely under **SMOOTH, INC.** authority.

- 6) Random tests can be conducted at any time during an employee's shift for drug testing. Alcohol random tests can be performed just before, during, or just after the performance of a safety sensitive duty. However, under SMOOTH, INC.'s authority, a non-DOT random alcohol test may be performed any time the employee is on duty. Testing can occur during the beginning, middle, or end of an employee's shift.
- 7) Employees are required to proceed immediately to the collection site upon notification of their random selection.

O. RETURN-TO-DUTY TESTING

All covered employees who previously tested positive on a drug or alcohol test or refused a test, must test negative for drugs, alcohol (below 0.02 for alcohol), or both and be evaluated and released by the Substance Abuse Professional before returning to work. For an initial positive drug test a Return-to-Duty drug test is required and an alcohol test is allowed. For an initial positive alcohol test a Return-to-Duty alcohol test is required and a drug test is allowed. Following the initial assessment, the SAP will recommend a course of rehabilitation unique to the individual. The SAP will recommend the return-to-duty test only when the employee has successfully completed the treatment requirement and is known to be drug and alcohol-free and there are no undo concerns for public safety.

P. FOLLOW-UP TESTING

Covered employees will be required to undergo frequent, unannounced drug and/or alcohol testing following their return-to-duty. The follow-up testing will be performed for a period of one to five years with a minimum of six tests to be performed the first year. The frequency and duration of the follow-up tests (beyond the minimums) will be determined by the SAP reflecting the SAP's assessment of the employee's unique situation and recovery progress. Follow-up testing should be frequent enough to deter and/or detect a relapse. Follow-up testing is separate and in addition to the random, post-accident, reasonable suspicion and return-to-duty testing.

In the instance of a self-referral or a management referral, the employee will be subject to non-USDOT follow-up tests and follow-up testing plans modeled using the process described in 49 CFR Part 40. However, all non-USDOT follow-up tests and all paperwork associated with an employee's return-to-work agreement that was not precipitated by a positive test result (or refusal to test) does not constitute a violation of the Federal regulations will be conducted under company authority and will be performed using non-DOT testing forms.

Q. RESULT OF DRUG/ALCOHOL TEST

- 1) Any covered employee that has a verified positive drug or alcohol test, or test refusal, will be removed from his/her safety-sensitive position, informed of educational and rehabilitation programs available, and referred to a Substance Abuse Professional (SAP) for assessment. No employee will be allowed to return to duty requiring the performance of safety-sensitive job functions without the approval of the SAP and the employer.
- 2) Following a negative dilute the employee will be required to undergo another test. Should this second test result in a negative dilute result, the test will be considered a negative and no additional testing will be required unless directed to do so by the MRO.
- 3) Refusal to submit to a drug/alcohol test shall be considered a positive test result and a direct act of insubordination and shall result in termination and referral to an SAP. A test refusal includes the following circumstances:
 - a. Fails to appear for any test (excluding pre-employment) within a reasonable time, as determined by the employer, after being directed to do so by the employer
 - b. Fails to remain at the testing site until the testing process is complete
 - c. Fails to provide a urine or breath specimen for any drug or alcohol test required by Part 40 or DOT agency regulations
 - d. In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring of your provision of a specimen
 - e. Fails to provide a sufficient amount of urine or breath when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure
 - f. Fails or declines to take a second test the employer or collector has directed you to take
 - g. Fails to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by the DER as part of the "shy bladder" or "shy lung" procedures
 - h. Fails to cooperate with any part of the testing process (e.g., refuse to empty pockets when so directed by the collector, behave in a confrontational way that disrupts the collection process)
 - i. If the MRO reports that there is verified adulterated or substituted test result
 - j. Failure or refusal to sign Step 2 of the alcohol testing form
 - k. Failure to follow the observer's instructions during an observed collection including instructions to raise your clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if you have any type of prosthetic or other device that could be used to interfere with the collection process.
 - l. Possess or wear a prosthetic or other device that could be used to interfere with the collection process

m. Admit to the collector or MRO that you adulterated or substituted the specimen

- 4) For the first instance of a verified positive test from a sample submitted as the result of a random, drug/alcohol test (≥ 0.04 BAC), disciplinary action against the employee shall include:
- a. Mandatory referral to Substance Abuse Professional for assessment, formulation of a treatment plan, and execution of a return to duty agreement;
 - b. Failure to execute, or remain compliant with the return-to-duty agreement shall result in termination from **GUADALUPE TRANSIT / SMOOTH, INC.** employment.
 - i. Compliance with the return-to-duty agreement means that the employee has submitted to a drug/alcohol test immediately prior to returning to work; the result of that test is negative; in the judgment of the SAP the employee is cooperating with his/her SAP recommended treatment program; and, the employee has agreed to periodic unannounced follow-up testing as defined in Section P of this policy.
 - c. Refusal to submit to a periodic unannounced follow-up drug/alcohol test shall be considered a direct act of insubordination and shall result in termination.
 - d. A periodic unannounced follow-up drug/alcohol test which results in a verified positive shall result in termination from **GUADALUPE TRANSIT / SMOOTH, INC.** employment.
- 5) The second instance of a verified positive drug or alcohol (≥ 0.04 BAC) test result including a sample submitted under the random, reasonable suspicion, return-to-duty, or follow-up drug/alcohol test provisions herein shall result in termination from **GUADALUPE TRANSIT / SMOOTH, INC.** employment.
- 6) A verified positive post-accident, or reasonable suspicion drug and/or alcohol (≥ 0.04) test shall result in termination.
- 7) An alcohol test result of ≥ 0.02 to ≤ 0.039 BAC shall result in the removal of the employee from duty for eight hours or the remainder or the work day whichever is longer. The employee will not be allowed to return to safety-sensitive duty for his/her next shift until he/she submits to an alcohol test with a result of less than 0.02 BAC
- 8) The cost of any treatment or rehabilitation services will be paid directly by the employee or their insurance provider. The employee will be permitted to take accrued sick leave or administrative leave to participate in the prescribed treatment program. If the employee has insufficient accrued leave, the employee shall be placed on leave without pay until the employee has successfully completed the required treatment program and has been

released to return-to-duty. Any leave taken, either paid or unpaid, shall be considered leave taken under the Family and Medical Leave Act.

- 9) In the instance of a self-referral or a management referral, disciplinary action against the employee shall include:
- a. Mandatory referral for an assessment by an employer approved counseling professional, formulation of a treatment plan, and execution of a return to work agreement;
 - b. Failure to execute, or remain compliant with the return-to-work agreement shall result in termination from **GUADALUPE TRANSIT / SMOOTH, INC.** employment.
 - i. Compliance with the return-to-work agreement means that the employee has submitted to a drug/alcohol test immediately prior to returning to work; the result of that test is negative; the employee is cooperating with his/her recommended treatment program; and, the employee has agreed to periodic unannounced follow-up testing as described in Section P of this policy; however, all follow-up testing performed as part of a return-to-work agreement required under section Q.9 of this policy is under the sole authority of **SMOOTH, INC.** and will be performed using non-DOT testing forms.
 - c. Refusal to submit to a periodic unannounced follow-up drug/alcohol test shall be considered a direct act of insubordination and shall result in termination. **All tests conducted as part of the return to work agreement will be conducted under company authority and will be performed using non-DOT testing forms.**
 - d. A self-referral or management referral to the employer's approved counseling professional that was not precipitated by a positive test result does not constitute a violation of the Federal regulations and will not be considered as a positive test result in relation to the progressive discipline defined in Section Q of this policy.
 - e. Periodic unannounced follow-up drug/alcohol test conducted as a result of a self-referral or management referral which results in a verified positive shall be considered a positive test result in relation to the progressive discipline defined in Section Q of this policy.
 - f. A Voluntary Referral does not shield an employee from disciplinary action or guarantee employment with **GUADALUPE TRANSIT / SMOOTH, INC.**
 - g. A Voluntary Referral does not shield an employee from the requirement to comply with drug and alcohol testing.
- 10) Failure of an employee to report within five days a criminal drug statute conviction for a violation occurring in the workplace shall result in termination.

R. GRIEVANCE AND APPEAL

The consequences specified by 49 CFR Part 40.149 (c) for a positive test or test refusal is not subject to arbitration.

S. PROPER APPLICATION OF THE POLICY

GUADALUPE TRANSIT / SMOOTH, INC. is dedicated to assuring fair and equitable application of this substance abuse policy. Therefore, supervisors/managers are required to use and apply all aspects of this policy in an unbiased and impartial manner. Any supervisor/manager who knowingly disregards the requirements of this policy, or who is found to deliberately misuse the policy in regard to subordinates, shall be subject to disciplinary action, up to and including termination.

T. INFORMATION DISCLOSURE

- 1) Drug/alcohol testing records shall be maintained by the **GUADALUPE TRANSIT / SMOOTH, INC.** Drug and Alcohol Program Manager and, except as provided below or by law, the results of any drug/alcohol test shall not be disclosed without express written consent of the tested employee.
- 2) The employee, upon written request, is entitled to obtain copies of any records pertaining to their use of prohibited drugs or misuse of alcohol including any drug or alcohol testing records. Covered employees have the right to gain access to any pertinent records such as equipment calibration records, and records of laboratory certifications. Employees may not have access to SAP follow-up testing plans.
- 3) Records of a verified positive drug/alcohol test result shall be released to the Drug and Alcohol Program Manager, and other transit system management personnel on a need to know basis.
- 4) Records will be released to a subsequent employer only upon receipt of a written request from the employee.
- 5) Records of an employee's drug/alcohol tests shall be released to the adjudicator in a grievance, lawsuit, or other proceeding initiated by or on behalf of the tested individual arising from the results of the drug/alcohol test. The records will be released to the decision maker in the preceding.

- 6) Records will be released to the National Transportation Safety Board during an accident investigation.
- 7) Information will be released in a criminal or civil action resulting from an employee's performance of safety-sensitive duties, in which a court of competent jurisdiction determines that the drug or alcohol test information is relevant to the case and issues an order to the employer to release the information. The employer will release the information to the decision maker in the proceeding with a binding stipulation that it will only be released to parties of the proceeding.
- 8) Records will be released to the DOT or any DOT agency with regulatory authority over the employer or any of its employees.
- 9) Records will be released if requested by a Federal, state or local safety agency with regulatory authority over **GUADALUPE TRANSIT / SMOOTH, INC.** or the employee.
- 10) If a party seeks a court order to release a specimen or part of a specimen contrary to any provision of Part 40 as amended, necessary legal steps to contest the issuance of the order will be taken
- 11) In cases of a contractor or sub-recipient of a state department of transportation, records will be released when requested by such agencies that must certify compliance with the regulation to the FTA.

ADOPTION CERTIFICATION

This Policy, as revised, was adopted by the SMOOTH, Inc. Board of Directors, during the regular meeting of the Board, February 3, 2015 at the SMOOTH Office in Santa Maria, CA.

Following a MOTION by K. Fischer, a SECOND by D. Thompson and Board discussion, 13 Votes in FAVOR, 0 Votes AGAINST, and 0 Votes ABSTAINING were received.

Attested to by:

[Signature] Board President 2/4/15
Board Member / Office Date

[Signature] Secretary 2/4/15
Board Member / Office Date

Attachment A

SAFETY-SENSITIVE EMPLOYEES

<u>Job Title</u>	<u>Job Duties</u>	<u>Testing Authority</u>
Bus Driver	Vehicle Operator	FTA – FMCSA *
Opener/Closer	Dispatch/Bus Driver	FTA – FMCSA *
Driver Trainer	Training/Bus Driver	FTA – FMCSA **
Route Specialist	Training/Bus Driver	FTA – FMCSA
Fleet Mechanic	Vehicle Repair/Maintenance	FTA – FMCSA
Administrative Assistant	Clerical/Dispatch/Bus Driver	FTA – FMCSA **
Office Manger	Administration/Dispatch/Bus Driver	FTA – FMCSA **
Operations Manager	Management/Bus Driver	FTA – FMCSA **
Executive Director	Management/Bus Driver	FTA – FMCSA **

* **A Post-Accident Test involving a safety-sensitive Bus Driver assigned solely to the operation of a Guadalupe Transit vehicle (bus or van) will be conducted using a FTA – DOT test.**

* **A Post-Accident Test involving a safety-sensitive Bus Driver assigned to the operation of a vehicle (bus or van) under the sole authority of SMOOTH, INC. (Any assignment NOT in a Guadalupe bus or van) will be conducted using a FMCSA test.**

** **The Safety-Sensitive Employees identified above (**) may possess Commercial Driver Licenses and may be assigned to temporary driver duties.**

A Post-Accident Test involving these employees when assigned solely to the operation of a Guadalupe Transit vehicle (bus or van) will be conducted using a FTA – DOT test.

A Post-Accident Test involving these employees when assigned to the operation of a vehicle under sole authority of SMOOTH, INC. (Any assignment NOT in a Guadalupe bus or van) will be conducted using a FMCSA test.

Attachment B Contacts

Any questions regarding this policy or any other aspect of the substance abuse policy should be directed to the following individual(s).

GUADALUPE TRANSIT / SMOOTH, INC. Drug and Alcohol Program Manager

Name/Title: Jim Talbott, Executive Director
Address: 240 East Roemer Way, Santa Maria, CA 93454
Telephone Number: (805) 922-8476

Collection Site

Name: Industrial Medical Group (IMG)
Address: 3070 Skyway Drive, #106, Santa Maria, CA 93455
Telephone Number: (805) 922-8282

Medical Review Officer (MRO)

Name/Title: Paul Christensen, MD / Medical Review Officer (MRO)
Address: 3070 Skyway Drive, #106, Santa Maria, CA 93455
Telephone Number: (805) 922-8282

Substance Abuse Professional (SAP)

Name: Tina Hedstrom
Title: Addictions Counselor, DOT-SAP Credentialed
Address: 438 E. Shaw #405, Fresno, CA 93710
Appointments Scheduled in San Luis Obispo
Telephone Number: (559) 392-0817 Email: thestrom@att.net

Substance Abuse Professional – Referral Specialist

Name: Dominick LaCovara
Title: DOT-SAP Credentialed - SAP Referral Specialist
Address: 1798 10th St., Los Osos, CA 93402
Appointments Scheduled in San Luis Obispo
Telephone Number: (805) 748-6077 Email: domlacovara@gmail.com

HHS Certified Laboratory Primary Specimen

Name: Clinical Reference Laboratory
Address: 8433 Quivira, Lenexa, Kansas 66215
Telephone Number: (800) 452-5677

HHS Certified Laboratory Split Specimen

Name: Quest
Address: 2822 F. Street, #A, Bakersfield, CA 93301
Telephone Number: (800) 877-2525



ADMINISTRATION DEPARTMENT

City of Guadalupe
918 Obispo Street
P.O. Box 908
Guadalupe, CA 93434
Tel (805) 356-3891
Fax (805) 343-5512

ADOPTION CERTIFICATION

This Guadalupe Transit and SMOOTH, Inc. Drug and Alcohol Testing Program Manual, as revised, was adopted by the City Council of Guadalupe, during the regular Council meeting, January 12th, 2016 at the Guadalupe City Council Chambers, 918 Obispo Street, Guadalupe, CA 93434.

Following a MOTION by _____, a SECOND by _____ and Council discussion, _____ Votes in FAVOR, _____ Votes AGAINST, and _____ Votes ABSTAINING were received.

Attested to by:

Council Member / Office

Date

Staff Member / Office

Date