Measure J GMP Compliance Checklist Attachments

Reporting Jurisdiction: _____ For Fiscal Years 2023-24 and 2024-25 Reporting Period: Calendar Years 2022 & 2023

Review and Approval of Checklist

This Measure J GMP Compliance Checklist was prepared by:

Signature

Date

Name & Title (print)

Phone

Email

The Council/Board of ______ has reviewed the completed Checklist and found that the policies and programs of the jurisdiction as reported herein conform to the requirements for compliance with the Contra Costa Transportation Improvement and Growth Management Program.

Certified Signature (Mayor or Chair)

Date

Name & Title (print)

Attest Signature (City/Town/County Clerk)

Date

Name (print)