

## Levy County Board of County Commissioners Agenda Item Summary Form

| 1.  | Name:  |  | Chanda Jordan             |   |       |  |
|---|--|--|---------------------------|---|-------|--|
| 2.  | Organization/Title/Telephone:  |  | Minutes Clerk             |   |       |  |
| 3.  | Meeting Date:  |  | Tuesday, February 6, 2024 |   |       |  |
| <ol> <li>Requested Motion/Action:<br/>Requesting approval of minutes for Regular Board Meetings held December 5, 2023 and December 19, 2023.</li> </ol> |  |  |                           |   |       |  |
| 5.  | Agenda Presentation:   |  | Yes 🗆                     | No 🗆  | N/A 🛛 |  |
| 6.  |  | Requested:<br>Request will be granted if Possible) all | •                         | Click or tap to enter a date.<br>Ited time not more than 15 minutes |       |  |
| 7.  | Is this  | Item Budgeted (If Applicable):                         | Yes 🗆                     | No 🗆  | N/A 🛛 |  |
| 8.  | If no, State Action Required:  |  |                           |   |       |  |
|   | a.   | Budget Action:   |                           |   |       |  |
|   | b.   | Financial Impact Summary<br>Statement:                 |                           |   |       |  |
|   | с.   | Detailed Analysis Attached                             |                           |   |       |  |
|   | d.   | Budget Officer Approval:                               |                           |   |       |  |
|   | If approved enter date: Click or tap to enter a date.  |  |                           |   |       |  |
| 9.  | <ol> <li>Background: (Why is the action necessary, and what action will be accomplished) (All<br/>supporting documentation must be attached if any)</li> </ol> |  |                           |   |       |  |
| 10. Recommended Approval  |  |  |                           |   |       |  |
|   | a.   | Department Director:                                   | Yes 🗆                     | No 🗆  | N/A 🛛 |  |
|   | b.   | County Attorney:                                       | Yes 🗆                     | No 🗆  | N/A 🛛 |  |
|   | c.   | County Coordinator:                                    | Yes 🗆                     | No 🗆  | N/A 🛛 |  |

d. Other: Yes 🗆 No 🗆 N/A 🖾