

Levy County Board of County Commissioners Agenda Item Summary Form

| 1. | Name: | Alicia Tretheway | | |
|----|---|---|-------------------|-----------------------------|
| 2. | Organization/Title/Telephone: | BOCC/Procurement Coordinator | | |
| 3. | Meeting Date: | Tuesday, November 21, 2023 | | |
| | Requested Motion/Action: Announcing that Levy County Staff will lesiliency Project, on Tuesday, November 2 | • | der Public Meetin | g for the Cedar |
| 5. | Agenda Presentation: | Yes □ | No □ | N/A ⊠ |
| 6. | • | Click or tap to enter a date. e) allotted 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 Statement: | | | |
| | c. Detailed Analysis Attached | | | |
| | d. Budget Officer Approval: | | | |
| | If approved | enter date: Click or ta | p to enter a date | |
| 9. | Background: (Why is the action necess supporting documentation must be att | • • | will be accompli | shed) (All |
| | The Meeting will be held at the Nat Cedar Key, FL 32625. | ure Coast Biological St | ation, located at | 551 1 st Street, |
| 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 □ |