



Levy County Board of County Commissioners Agenda Item Summary Form

1. **Name:** Wilbur Dean
2. **Organization/Title/Telephone:** BOCC/County Coordinator
3. **Meeting Date:** Tuesday, October 4, 2022

4. **Requested Motion/Action:**

Requesting the Levy County Board of County Commissioners' approval of the Contract between Levy County and the State of Florida Department of Health for the Operation of the Levy County Health Department Contract for year 2022-2023.

5. **Agenda Presentation:** Yes No N/A

6. **Time Requested:** Click or tap to enter a date.
(Request will be granted if Possible) 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 tap to enter a date.

9. **Background: (Why is the action necessary, and what action will be accomplished) (All supporting documentation must be attached if any)**

The cost of this agreement is \$165,500.

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