



Levy County Board of County Commissioners Agenda Item Summary Form

1. **Name:** Mitch Harrell
2. **Organization/Title/Telephone:** Public Safety/Director/352-486-5209
3. **Meeting Date:** Tuesday, December 17, 2024
4. **Requested Motion/Action:**
Presenting the LCDPS FY2024 Fourth Quarter Department Review
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:** EnterTextHere
 - b. **Financial Impact Summary Statement:** EnterTextHere
 - c. **Detailed Analysis Attached** EnterTextHere
 - d. **Budget Officer Approval:** EnterTextHere

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)**
A review of the Department of the last quarter.
10. **Recommended Approval**
 - a. **Department Director:** Yes No N/A
 - b. **County Attorney:** Yes No N/A
 - c. **County Manager:** Yes No N/A
 - d. **Other:** Yes No N/A