

Levy County Board of County Commissioners Agenda Item Summary Form

1	. Name	:	Wilbur Dean			
2	. Organ	ization/Title/Telephone:	BOCC/County Coordinator			
3	. Meeti	ng Date:	Tuesday, September 8, 2020			
4 Resol	Public	sted Motion/Action: Hearing - Requesting the Levy Count 20-093; for the Annual EMS Tax Asses	•	•	approval of	
5	. Agend	a Presentation:	Yes □	No □	N/A ⊠	
6		Requested: Request will be granted if Possible) al	Click or tap to enter a date. lotted time not more than 15 minutes			
7	. Is this	Item Budgeted (If Applicable):	Yes □	No □	N/A ⊠	
8	. If no, S	If no, State Action Required:				
	a.	Budget Action:				
	b.	Financial Impact Summary Statement:				
	c.	Detailed Analysis Attached				
	d.	Budget Officer Approval:				
		If approved ento	er date: Click or ta	ap 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)				
Final Rate Resolution 2020-093 for Emergency Medical Services Tax Assessments as prepared by Nabors, Giblin & Nickerson, P.A. This directs the imposition of Emergency Medical Services Tax Assessments for fiscal year 2020-2021, beginning October 1, 2020 Government Services Group ("GSG") prepared the data for establishing assessment scenarios.					Emergency ober 1, 2020.	
1	0. Recon	nmended 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 □	