

1. Name:

Levy County Board of County Commissioners Agenda Item Summary Form

Alice LaLonde

2.	Organization/Title/Telephone:	Road Department/Administrative Coordinator/352-486-3358 Tuesday, June 20, 2023		
3.	Meeting Date:			
4. Requi	Requested Motion/Action: esting the Levy County Board of County n.	y Commissioners' to appr	ove the Budget	Amendment by
5.	Agenda Presentation:	Yes ⊠	No □	N/A □
6.	Time Requested: (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.	8. If no, State Action Required:			
	a. Budget Action:			
	b. Financial Impact Summary Statement:			
	c. Detailed Analysis Attached			
	d. Budget Officer Approval:			
	If approve	d enter date:		
Background: (Why is the action necessary, and what action will be accomplished) (All supporting documentation must be attached if any)				
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 □

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