

Levy County Board of County Commissioners Agenda Item Summary Form

1.	Name:		John MacDonald		
2.	Organization/Title/Telephone:		Emergency Management, Director, (352) 486-5213		
3.	Meeting Date:		Tuesday, August 20, 2024		
4. Town o	Reque	sted Motion/Action: st permission to engage in discussion etown for FEMA Public Assistance Su		rnmental Agreeme	ent with the
5.	Agenda Presentation:		Yes ⊠	No □	N/A □
6.	Time Requested: 5 minutes (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) See attached subject letter 				
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 □