

Levy County Board of County Commissioners Agenda Item Summary Form

1.	. Name:		Jacqueline Marti	Jacqueline Martin		
2.	Organization/Title/Telephone:		Human Resource Manager			
3.	. Meeting Date:		Tuesday, July 16,	Tuesday, July 16, 2024		
4.	Requested Motion/Action:					
	Request approve and 14, 2024.	al to set Group Insurance	Open Enrollment me	eeting dates for A	August 12, 13,	
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 er	nter date: Click or ta	p 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)					
	If approved the hours will be set from 9:00 a.m 4:30 p.m.					
	Closed for lunch from noon till 1:00 p.m.					
	Levy County Government Center cafeteria					
10.	Recommended	Approval				
	a. Departn	nent Director:	Yes □	No □	N/A □	
	b. County	Attorney:	Yes □	No □	N/A □	
	c. County	Coordinator:	Yes □	No □	N/A □	
	d Other:		Vec \square	No 🗆	N/A 🏻	