

Levy County Board of County Commissioners Agenda Item Summary Form

1.	Name:		Jacqueline Martin		
2.	Organization/Title/Telephone:		Human Resource Manager		
3.	Meeting Date:		Thursday, August 29, 2024		
4. Requested Motion/Action:					
	County	Manager Applicant – William "Will"	Ary		
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				tes
7.	Is this	Item Budgeted (If Applicable):	Yes □	No □	N/A □
8.	If no, S	State Action Required:			
	a.	Budget Action:			
	b.	Financial Impact Summary Statement:			
	c.	Detailed Analysis Attached			
	d.	Budget Officer Approval:			
		If approved ent	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)				
	Ар	plication Attached			
10.	Recom	mended 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 □