

Levy County Board of County Commissioners Agenda Item Summary Form

| 1. | Name: | | John MacDonald | | | |
|-------|---|---|--|-----------------|---------------|--|
| 2. | Organization/Title/Telephone: | | Emergency Management / Director / 3524865213 | | | |
| 3. | Meeting Date: | | Tuesday, August 18, 2020 | | | |
| 4. | Reques | sted Motion/Action: st BOCC Board Chair signature on FEN | ИА Disaster Grant | Z2008 for COVID | 19 Category B | |
| Expen | ditures | | | | | |
| 5. | Agenda Presentation: | | Yes □ | No ⊠ | N/A □ | |
| 6. | Time Requested: 1 minute (Request will be granted if Possible) allotted time not more than 15 minutes | | | | | |
| 7. | . Is this Item Budgeted (If Applicable): Yes □ | | 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 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) | | | | | |
| | Request BOCC Board Chair signature on FEMA Disaster Grant DZ2008 for COV Category B expenditures. Final award amount not yet determined | | | | | |
| 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 ⊠ | |