

Levy County Board of County Commissioners Agenda Item Summary Form

1.	Name:		Wilbur Dean		
2.	Organization/Title/Telephone:		BOCC/County Coordinator		
3.	Meeting Date:		Tuesday, August 18, 2020		
Bargai	Reques	sted Motion/Action: sting the Levy County Board of Count eement Between Levy County and th County Professional Paramedics and I	ne IAFF Local 4069	International Ass	
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 ento	er date: Click or ta	p to enter a date	
9.	•	round: (Why is the action necessary rting documentation must be attach	-	will be accompli	shed) (All
10	. Recom	nmended 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 □