

LEA COUNTY BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY **FORM**



LCBCC Meeting Date: Thursday, December 12, 2019

Submit this summary form & all attachments to the Finance Director clow@leacounty.net & cc the Executive Coordinator sstout@leacounty.net by: **November 26, 2019**

County Manager Approval (mgallagher@leacounty.net) required for all time sensitive issues that do not meet the above deadline.

DATE SUBMITTED mm-dd-yyyy:	SUBMITTED BY Name/Title/Dept:
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SUBJECT:	ATTACHMENT(S):
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NO. OF ORIGINALS FOR SIGNATURE:	ACTION REQUESTED:
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STRATEGIC PLAN Implementation of 5 Year Strategic Plan:

SUMMARY:

<p style="text-align: center;">Requested Items Needed for Presentation Easels/Laptop/Projector/Etc.:</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; width: 25%;">Easel <small>If checked; how many:</small></td> <td style="text-align: center; width: 25%;">Laptop</td> <td style="text-align: center; width: 25%;">Projector</td> <td style="text-align: center; width: 25%;">Other:</td> </tr> </table>	Easel <small>If checked; how many:</small>	Laptop	Projector	Other:	See Additional Summary Attached
Easel <small>If checked; how many:</small>	Laptop	Projector	Other:		

SUBMITTER'S RECOMMENDATION(S):	Submitter's Signature Department Director, Etc.
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FINANCE REVIEW Fiscal Impact/Cost:	Reviewed by Finance Director
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LEGAL REVIEW: <small>(Note: Travel does not need legal review)</small>	Reviewed by County Attorney
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COUNTY MANAGER REVIEW:	Approved by County Manager to be Placed on Agenda
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RECORDING SECRETARY'S USE ONLY ~ COMMISSION ACTION TAKEN

Approved: _____	Denied: _____	Other: _____
Resolution No. _____	Policy No. _____	Ordinance No. _____
Continued To: _____	Referred To: _____	Comments: _____

Summary Form Continued...