



LEA COUNTY BOARD OF COUNTY COMMISSIONERS  
 AGENDA ITEM SUMMARY FORM

**LCBCC Meeting Date: Thursday, May 26, 2022**

Submit this summary form & all attachments to the Finance Director [clow@leacounty.net](mailto:clow@leacounty.net) & cc the Community Engagement Manager [sstout@leacounty.net](mailto:ssout@leacounty.net); Public Information Officer [mrussell@leacounty.net](mailto:mrussell@leacounty.net) and County Manager [mgallagher@leacounty.net](mailto:mgallagher@leacounty.net) by: **Tuesday, May 17, 2022**

*County Manager Approval required for all time sensitive issues that do not meet the above deadline.*

|                                 |                                 |
|---------------------------------|---------------------------------|
| DATE SUBMITTED mm-dd-yyyy:      | SUBMITTED BY Name, Title, Dept: |
| SUBJECT:                        | ATTACHMENT(S):                  |
| NO. OF ORIGINALS FOR SIGNATURE: | ACTION REQUESTED:               |
| BUDGET LINE ITEM NUMBER:        | FISCAL BUDGET YEAR:             |

**STRATEGIC PLAN** Implementation of 5 Year Strategic Plan:

**SUMMARY:**

|  |  |
|--|--|
| <p style="text-align: center;"><b>Requested Items Needed for Presentation</b> Easels/Laptop/Projector/Etc.:</p> <p style="text-align: center;"> <span style="margin-right: 40px;">Easel</span> <span style="margin-right: 40px;">Laptop</span> <span style="margin-right: 40px;">Projector</span> <span>Other:</span> </p> <p style="font-size: small; margin-left: 10px;">If checked; how many:</p> | <b>See Additional Summary Attached</b> |
|--|--|

|                                |   |
|--------------------------------|---|
| SUBMITTER'S RECOMMENDATION(S): | Submitter's Signature<br><small>Department Director, Etc.</small> |
|--------------------------------|---|

|                                    |                              |
|------------------------------------|------------------------------|
| FINANCE REVIEW Fiscal Impact/Cost: | Reviewed by Finance Director |
|------------------------------------|------------------------------|

|   |                             |
|---|-----------------------------|
| LEGAL REVIEW: (Note: Travel does not need legal review) | Reviewed by County Attorney |
|---|-----------------------------|

|                        |   |
|------------------------|---|
| COUNTY MANAGER REVIEW: | Approved by County Manager<br><small>to be Placed on Agenda</small> |
|------------------------|---|

**Item No.** \_\_\_\_\_ **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...