



**WARREN COUNTY  
BOARD OF COMMISSIONERS  
AGENDA ITEM REQUEST FORM**  
*Updated 1-2009*

**This form must be completed and attached to all supporting documentation for items to be included in the Warren County Board of Commissioners Agenda. One (1) form per agenda item.**

Submitted By: \_\_\_\_\_ Department: \_\_\_\_\_

Contact Phone #: (\_\_\_\_) \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Date of Board of Commissioners Meeting to consider this item: \_\_\_\_\_  
(Meetings are generally 1st Monday of each month.... confirm date with Clerk.)

Description (give short summary of topic, this is how item appears on the Agenda).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Who will attend Commissioner's meeting able to respond to questions? Give name & title:  
\_\_\_\_\_

**Where does this item need to appear? Check all that apply:**

<input type="checkbox"/> Action Agenda	<input type="checkbox"/> Consent Agenda	<input type="checkbox"/> Closed Session
<input type="checkbox"/> Presentation/Recognition	<input type="checkbox"/> Work session	<input type="checkbox"/> Schedule Public Hearing**
<input type="checkbox"/> Schedule joint meeting*	<input type="checkbox"/> Schedule joint work session*	

\*Board, commission, or group requesting joint meeting: \_\_\_\_\_

\*\* If requesting a Public Hearing, provide an e-mail copy of sample ad to run in newspaper.

**Supply General Statute or local ordinance that governs this item (attach copy):**  
\_\_\_\_\_

Has this item been reviewed by County Attorney? Yes \_\_\_\_\_ No \_\_\_\_\_ (Attach recommendation.)

What action is requested of the Board? \_\_\_\_\_

What action is requested of the Manager? \_\_\_\_\_

Are County funds required? Yes / No \$ \_\_\_\_\_ Funding Source \_\_\_\_\_

**PLEASE PROVIDE: One (1) paper copy and one (1) E-mail** copy of all attachments to go in the digital Agenda to the Clerk no later than stated Agenda Item due date for above referenced meeting.