

REQUEST FOR AGENDA PLACEMENT FORM

Submission Deadline - Tuesday, 12:00 PM before Court Dates

SUBMITTED BY: Gary Morris
TODAY'S DATE: 6/12/2013

DEPARTMENT: Medical Examiner's Office

SIGNATURE OF DEPARTMENT HEAD: Gary Morris *Gary Morris*

REQUESTED AGENDA DATE: 6/24/2013

SPECIFIC AGENDA WORDING: Request for Caller ID and Call Forwarding on phone system for Medical Examiner's Office in the amount of a recurring monthly fee of \$15.00 per month to be added to phone bill.

PERSON(S) TO PRESENT ITEM: Gary Morris

SUPPORT MATERIAL: (Must enclose supporting documentation)

TIME: 3 min.

ACTION ITEM: _____
WORKSHOP _____

(Anticipated number of minutes needed to discuss item) **CONSENT:** _____

EXECUTIVE: _____

STAFF NOTICE:

COUNTY ATTORNEY: _____ **IT DEPARTMENT:** Connie Jansky
AUDITOR: _____ **PURCHASING DEPARTMENT:** _____
PERSONNEL: _____ **PUBLIC WORKS:** _____
BUDGET COORDINATOR: _____ **OTHER:** _____

*****This Section to be Completed by County Judge's Office*****

ASSIGNED AGENDA DATE: _____

REQUEST RECEIVED BY COUNTY JUDGE'S OFFICE _____

COURT MEMBER APPROVAL _____ Date _____