## Approved by CC:

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REQUEST FOR AC	GENDA PLACEMENT FORM  MAR	Z P
	<b>Suesday, 12:00 PM before Court Dates</b>	
SUBMITTED BY: Sheriff Bob A	Alfond	
	TE: March 14, 2013	
DEPARTMENT: Sheriff's Office		1
SIGNATURE OF DEPARTMEN	T HEAD:	
REQUESTED AGENDA DATE:	3/25/13	
SPECIFIC AGENDA WORDING ervices to empty shred boxes twice xpense of \$66.00 per month.	Request to increase Shred on site shred a month with two extra sacks for recurring	
PERSON(S) TO PRESENT ITEM	I: Sheriff Alford	
SUPPORT MATERIAL: (Must	enclose supporting documentation)	
TIME: 10 minutes	ACTION ITEM:XXX WORKSHOP	
	WORKSHOP	
	WORKSHOP	
TIME: 10 minutes  Anticipated number of minutes needed to  STAFF NOTICE:	WORKSHOP o discuss item) CONSENT:	
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Anticipated number of minutes needed to STAFF NOTICE: COUNTY ATTORNEY: AUDITOR:	WORKSHOP o discuss item) CONSENT:  EXECUTIVE:  IT DEPARTMENT:  PURCHASING DEPARTMENT:	
Anticipated number of minutes needed to STAFF NOTICE: COUNTY ATTORNEY: AUDITOR: PERSONNEL:	WORKSHOP o discuss item) CONSENT: EXECUTIVE:  IT DEPARTMENT: PURCHASING DEPARTMENT: PUBLIC WORKS:	
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Anticipated number of minutes needed to STAFF NOTICE: COUNTY ATTORNEY: AUDITOR: PERSONNEL: BUDGET COORDINATOR:  *************This Section to be Con	WORKSHOP o discuss item) CONSENT:  EXECUTIVE:  IT DEPARTMENT:  PURCHASING DEPARTMENT:  PUBLIC WORKS:  OTHER:  In pleted by County Judge's Office***********************************	