

AUG 13 2018

**Approved**

**REQUEST FOR AGENDA PLACEMENT FORM**

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

**SUBMITTED BY:**

**TODAY'S DATE: August 6, 2018**

**DEPARTMENT: County Judge's Office**

**SIGNATURE OF DEPARTMENT HEAD:**

**REQUESTED AGENDA DATE: August 13, 2018**

**SPECIFIC AGENDA WORDING: Consideration of an Intergovernmental Transfer under Demonstration Year 7 of the Medicaid Transformation Waiver for the Benefit of Texas Health Harris Methodist Cleburne, in an Amount Not to Exceed \$400,000.00**

**PERSON(S) TO PRESENT ITEM: County Judge Roger Harmon**

**SUPPORT MATERIAL: (Must enclose supporting documentation)**

**TIME: 5 minutes**

**ACTION ITEM:  X**

**WORKSHOP \_\_\_\_\_**

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

**EXECUTIVE: \_\_\_\_\_**

**STAFF NOTICE:**

**COUNTY ATTORNEY:**

**IT DEPARTMENT:**

**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 \_\_\_\_\_