

BOC Meeting Date 12/4/2019

Commission Districts Affected

Requesting Agency

Finance All Districts

Requested Action (Identify appropriate Action or Motion, purpose, cost, timeframe, etc.)

Discussion of FY2020 Proposed Budget and any suggested changes.

Requirement for Board Action (Cite specific Board policy, statute or code requirement)

Floor is open for discussion and proposed changes to the budget.

Is this Item related to a Strategic Priority Area? (If yes, note strategic priority area below)

Yes All People trust government is efficient, effective, and fiscally sound

Is this a purchasing item?

No

Summary & Background

(First sentence includes Agency recommendation. Provide an executive summary of the action that gives an overview of the relevant details for the item.)

Discussion of FY2020 Proposed Budget by the Board of Commissioners and suggested changes to the budget.

Contract & Compliance Information

(Provide Contractor and Subcontractor details.)

Typed Name and Title Phone
Hakeem K. Oshikoya – Finance Director 404-612-7641

Signature Date

Revised 03/12/09 (Previous versions are obsolete)

Agency Director Approval	County Manager's	
Typed Name and Title Hakeem K. Oshikoya – Finance Director	Phone 404-612-7641	Approval
Signature	Date	

Revised 03/12/09 (Previous versions are obsolete)

				# 19	-102
Solicitation Information No. Bid Notices Sent:	NON-MFBE	MBE	FBE	TOTAL	
No. Bids Received:					
Total Contract Value	-				
Total M/FBE Values	-				
Total Prime Value	-				
Fiscal Impact / Fundin	g Source	(Include projected source of funds, ar		get amount and account numb q requirements.)	er,
Exhibits Attached			(Provide copies of originals, number exhibits consecutively, and label all exhibits in the upper right corner.)		el all
Source of Additional In	nformation	(Type Name, Title,	Agency and Phone	·)	

Agency Director Appr	County Manager's	
Typed Name and Title Hakeem K. Oshikoya – Finance Director	Phone 404-612-7641	Approval
Signature	Date	

Revised 03/12/09 (Previous versions are obsolete)

Continued

Procurement						
Contract Attached:	Previous Contracts:					
Solicitation Number:	Submitting Agency:	Staff Contact:	Contact Phone:			
Description:.						
•	FINANC	IAL SUMMARY				
Total Contract Value:		MBE/FBE Participation	n:			
Original Approved Amo	ount: .	Amount: .	%: .			
Previous Adjustments:		Amount: .	%: .			
This Request:		Amount: .	%: .			
TOTAL:		Amount: .	%: .			
Grant Information Sun	nmary:					
Amount Requested:		☐ Cash				
Match Required:		☐ In-Kind				
Start Date:		Approval to A				
End Date:	•	☐ Apply & Acce	ept			
Match Account \$:		T	1			
Funding Line 1:	Funding Line 2:	Funding Line 3:	Funding Line 4:			
	KEY CON	ITRACT TERMS				
Start Date:	End Date:					
Cost Adjustment:	Renewal/Extension T	erms:				
ROUTING & APPROVALS						
(Do not edit below this line)						
X Originating Dep	partment:	Oshikoya, Hakeem	Date: 11/25/2019			
X County Attorney:		Lowman, David	Date: 11/25/2019			
. Purchasing/Contract Compliance:			Date: .			
	t Analyst/Grants Admin	: .	Date: .			
. Grants Management:			Date: .			
		Anderson, Dick	Date: 11/25/2019			