

TELLER COUNTY BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM REQUEST

FAX (719) 686-7900

Date of Request: _____

Department & Person Making Request: _____

Contact Phone No: _____

Contact Email: _____

Meeting Date Item to Be Heard/Considered At: _____

Topic of Discussion: _____

Wording To Be Used on Agenda: _____

(Wording may be altered by this office as necessary. If so, you will be notified)

Amount of Time Needed/Requested: _____

(NOTE: All materials (**original(s) + 8 copies**) related to the topic of discussion are required to be provided to the Administration Office no less than eight (8) days in advance of the requested agenda date. **Please see packet cutoff dates located in CELIA BoCC dates section.** If materials are not received, the item may not appear on the agenda and another request, for a later date, will be required.)

APPROVED BY: _____

FOR AGENDA DATE: _____

TIME SCHEDULED: _____