



**IMPERIAL COUNTY
BOARD AGENDA SUBMITTAL SHEET**

Please submit completed form to:
 Clerk of the Board of Supervisors
 940 Main Street, Suite 209
 El Centro, CA 92243
blancaacosta@co.imperial.ca.us

Requested Board Date: _____		Requesting Agency: _____		
Authorized Agency Representative:		Presenter:	Contact Person:	
Name: _____		_____	_____	
Date: _____		Name/Title	Phone No:	
Informational Only/ No Action Required <input type="checkbox"/>		Presentation/Recognition <input type="checkbox"/>	Other <input type="checkbox"/>	
Requested Action / Recommendation: (briefly describe request)				

Special Requests to Clerk of the Board i.e. <i>More than one original to be executed, additional certified copies required, etc.</i>				

FOR CEO/COB USE ONLY			Discussion Date: _____	
ACTION <input type="checkbox"/>	CONSENT <input type="checkbox"/>	HEARING <input type="checkbox"/>	PRESENTATION <input type="checkbox"/>	FILING/INFORMATIONAL <input type="checkbox"/>
Reviewed By:		Reviewed By:		
_____		_____		
Clerk	Date	CEO	Date	

If requesting approval of Resolution/Proclamation please be sure to email the word document to the Clerk of the Board office at blancaacosta@co.imperial.ca.us