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**FORT BEND COUNTY FY 2009
COMMISSIONERS COURT AGENDA REQUEST FORM**

Return Completed Form by E-Mail to: Agenda Coordinator, County Judge's Office

Date Submitted: 11/16/2009

Submitted By: Rose Askew

Department: Commissioner Pct. 1

Court Agenda Date: 11/24/2009

Phone Number: 281.344.9400

SUMMARY OF ITEM:

Take all appropriate action to appoint Karen Lightfoot to the Fort Bend County Children's Protective Services board with term ending November 24, 2015.

RENEWAL AGREEMENT/APPOINTMENT

YES



NO



REVIEWED BY COUNTY ATTORNEY'S OFFICE:

YES



NO



List Supporting Documents Attached:

FINANCIAL SUMMARY:BUDGETED ITEM: YES ☐ NO ☒FUNDNG SOURCE: Accounting Unit:
Activity (If Applicable):

Account Number:

DESCRIPTION OF LAWSOM ACCOUNT: _____

Instructions to submit Agenda Request Form:

- Completely fill out agenda form: incomplete forms will not be processed.
- Agenda Request Forms should be submitted by e-mail, fax, or inter-office mail, and all back-up information must be provided by Wednesday at 2:00 p.m. to all those listed below.
- All original back-up must be received in the County Judge's Office by 2:00 p.m. on Wednesday.

DISTRIBUTION:Original Form Submitted with back up to County Judge's Office ☐ (✓ when completed)If by E-Mail to ospindon@co.fort-bend.tx.us

If by Fax to (281) 341-8609

Distribute copies with back-up to all listed below. If by fax, send to numbers below:

<input type="checkbox"/> Auditor (281-341-3774)	<input type="checkbox"/> Comm. Pct. 1 (281-342-0587)
<input type="checkbox"/> Budget Officer (281-344-3954)	<input type="checkbox"/> Comm. Pct. 2 (281-403-8009)
<input type="checkbox"/> Facilities/Planning (281-633-7022)	<input type="checkbox"/> Comm. Pct. 3 (281-242-9060)
<input type="checkbox"/> Purchasing Agent (281-341-8642)	<input type="checkbox"/> Comm. Pct. 4 (281-980-9077)
<input type="checkbox"/> Information Technology (281-341-4526)	<input type="checkbox"/> County Clerk (281-341-8697)
<input type="checkbox"/> Other:	<input type="checkbox"/> County Atty (281-341-4557)

RECOMMENDATION / ACTION REQUESTED:

Special Handling Requested (specify):