

GILPIN COUNTY COMMISSIONERS MEETING AGENDA REQUEST FORM

This form must be given to the Deputy Clerk of the Board of County Commissioners no later than 5 p.m. on Wednesday preceding the meeting you wish to attend. Scan to rbaker@co.gilpin.co.us.

Meeting date requested: Tuesday, _____, _____

Time sensitive: no yes Action required by: (date) _____

Starting time requested (meetings begin at 9, first item at 9:05): _____

Length of time expected for presentation & discussion: _____

Presenter(s) name(s) and title(s): _____

Agency represented: _____

Presenter phone #: _____ Presenter email: _____

Email address: _____

(Presenters should provide business cards to the Deputy Clerk at the meeting.)

Printed information to be provided: no yes (10 copies, **plus** originals for signature, etc.)

Action requested: _____

Fiscal impact (if known): \$_____ one-time annually

Equipment needed: PowerPoint projector screen easel flipchart

other: _____

Please allow adequate time to reach Central City and find parking prior to your scheduled presentation time.
For directions or other assistance, please call 303-582-5214.