

County of San Diego Board of Supervisors  
AGENDA ITEM INFORMATION SHEET

**AGENDA ITEM SUBJECT/TITLE:**

COMMUNICATIONS RECEIVED (DISTRICT: ALL)

**REQUIRES FOUR VOTES:**

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>

**WRITTEN DISCLOSURE PER COUNTY CHARTER SECTION §1000.1 REQUIRED:**

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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**NOTICED PUBLIC HEARING REQUIRED:**

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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**PROJECT UNDER CEQA:**

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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If Yes, approval of CEQA document required?

**DECISION WITHIN GOVERNMENT CODE SECTION 84308:**

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
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**PREVIOUS RELEVANT BOARD ACTIONS:**

N/A

**BOARD POLICIES APPLICABLE:**

N/A

**BOARD POLICY STATEMENTS:**

N/A

**MANDATORY COMPLIANCE:**

N/A

**ORACLE AWARD NUMBER(S) AND CONTRACT AND/OR REQUISITION NUMBER(S):**

N/A

**ORIGINATING DEPARTMENT:** CLERK OF THE BOARD OF SUPERVISORS

**OTHER CONCURRENCE(S):** NONE

**INTERNAL REVIEW COMPLETED:** YES  NO

Signature: 

Email: Ryan.Sharp@sdcounty.ca.gov

Signature

**CONTACT PERSON(S):**

Ryan Sharp

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Name \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Signature

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