

## AGENDA ITEM INFORMATION SHEET

**SUBJECT:**

CLOSED SESSION (DISTRICTS: ALL)

**REQUIRES FOUR VOTES:**      Yes ☐      No ☒

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

Yes ☐      No ☒

**PREVIOUS RELEVANT BOARD ACTIONS:**

N/A

**BOARD POLICY 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

**OTHER CONCURRENCE(S):**

N/A

**INTERNAL REVIEW COMPLETE BY:**

Signature

**CONTACT PERSON(S):**

\_\_\_\_\_  
Name

(619) 531-4847

\_\_\_\_\_  
Phone

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

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Name

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Phone

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E-mail