AGENDA REQUEST FORM THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

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Eblic School	MEETING DATE	2020-04	-21 10:00 - Regular	School Boa	ard Meeting	Special Ord O Yes	er Request No
ITEM No.:	AGENDA ITEM	ITEMS					
KK-1.	CATEGORY	KK. OFF	ICE OF FINANCIAL	MANAGE	MENT	Tin	ie
,	DEPARTMENT	Capital B	Budget			Open A	_
TITLE:		L				→ Yes	O No
	Amendment as of April 2	21, 2020 & S	Security Cameras, School	Network Equi	ipment and Infrastructure		
XXX XXX	M.)						
REQUESTED A	and the second s	- VE Tayle arms					o por como directions
[[마리타 교실시간][THE HEI] [[H. 12] [H. 12]	d Capital Fund Amendme come from Capital Project			ne S4.5 millior	n for Security Cameras, Netw	ork Equipment and Ir	nfrastructure
		904 947 TABI					
	PLANATION AND BA				19 N. W. T. A. S.	60 E X	
					strative Rule 6A-1.007. This a hanges in the Capital Fund. T		
as of April 21, 2020.		100		- Free House II		aondinoni molu	
See Executive Sum	mary (Exhibit 1) for addition	onal informa	tion.				
SCHOOL BOAR	RD GOALS:						
O Goal 1: Hi	gh Quality Instructi	ion ()	Goal 2: Safe & Sup	portive En	vironment Goal 3	3: Effective Com	munication
FINANCIAL IMP	PACT:						
		1670			cribed on Exhibit B. This item		
	rity Cameras, Network Edinallocated Reserve at \$10	And the control of th	d Infrastructure Upgrades	from the Cap	oital Project Reserve. Activity	for the Capital Reser	rves is shown on
-Aribit O, With the O	indicated reserve at \$10	o. + million.					
EXHIBITS: (Lis	t)						
Management and the second	•	enue Exhib	oit A (3) Capital Approx	oriations Ext	nibit B (4) Capital Reserve	es Exhibit C	
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BOARD ACTIO	OARD ACTION:						
APPF	APPROVED Name: Omar Shir			n		Phone: 754-321-2080	
(For Official Scho	ool Board Records Office Only	y)	Name:			Phone:	
THE SCHOO	L BOARD OF BE		D COUNTY, FLO	RIDA	Approved In Open	APR 2	1 2020
Senior Leader	 Title Chief Financial Off 		100	7	Board Meeting On:	73171 2	/
Juditii Ivi. Iviarte	- Onlei Financiai Off	icer			Ву:	Form of	Lour
Signature				_ 1	2	School Board	Chair
	Judith M. N						3.T.
	4/13/2020, 11:	30.45 AN	//	I			

Electronic Signature Form #4189 Revised 07/25/2019 RWR/ JMM/OS:kw