



# Board of County Commissioners Agenda Request

## 2G

Agenda Item #

**Requested Meeting Date:** 03/10/2026

**Title of Item:** Approve Affidavit for Duplicate of Lost Warrant

<input type="checkbox"/> REGULAR AGENDA <input checked="" type="checkbox"/> CONSENT AGENDA <input type="checkbox"/> INFORMATION ONLY	<b>Action Requested:</b> <input checked="" type="checkbox"/> Approve/Deny Motion <input type="checkbox"/> Adopt Resolution (attach draft)	<input type="checkbox"/> Direction Requested <input type="checkbox"/> Discussion Item <input type="checkbox"/> Hold Public Hearing* <small>*provide copy of hearing notice that was published</small>
<b>Submitted by:</b> Sara Math		<b>Department:</b> ACHHS Accountgint
<b>Presenter (Name and Title):</b> N/A		<b>Estimated Time Needed:</b> N/A
<b>Summary of Issue:</b> Approve affidavit for Duplicate of Lost Municipal Order or Warrant: Arrowhead EMS Association, Inc., warrant number 114557 dated June 13, 2025, in the amount of \$120.00.		
<b>Alternatives, Options, Effects on Others/Comments:</b>		
<b>Recommended Action/Motion:</b> Approve affidavit for Duplicate of Lost Municipal Order or Warrant: Arrowhead EMS Association, Inc., warrant number 114557 dated June 13, 2025, in the amount of \$120.00.		
<b>Financial Impact:</b> Is there a cost associated with this request? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No What is the total cost, with tax and shipping? \$ Is this budgeted? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Please Explain:</i>		

