

# Legislation Details (With Text)

File #:	21-4925	Version: 1	Name:			
Туре:	Resolution		Status:	Passed		
File created:	9/7/2021		In control:	Commissioners Court		
On agenda:	9/14/2021		Final action:	9/14/2021		
Title:	Request by the Commissioner of Precinct 4 for approval of a resolution recognizing the High Holy Days and the celebration for the Days of Awe for our Jewish Community in Harris County.					
Sponsors:						
Indexes:						
Code sections:						
Attachments:	1. 21-4925 Pct 4 09.14.2021_Agenda Submittal_Resolution High Holy Days.pdf					
Date	Ver. Action By	y	Act	tion Result		
9/14/2021	1 Commis	sioners Court				

#### Department: Commissioner, Precinct 4

#### Department Head/Elected Official: Commissioner R. Jack Cagle

### **Regular or Supplemental RCA:**

🛛 Regular RCA

□ Supplemental RCA

### Type of Request: Resolution

Project ID (if applicable): NA

Vendor/Entity Legal Name (if applicable): NA

**MWDBE Participation (if applicable): NA** 

### **Request Summary (Agenda Caption):**

Request by the Commissioner of Precinct 4 for approval of a resolution recognizing the High Holy Days and the celebration for the Days of Awe for our Jewish Community in Harris County.

**Background and Discussion: NA** 

#### Expected Impact: NA

## **Alternative Options: NA**

# Alignment with Goal(s):

- □ Justice and Safety
- Economic Opportunity
- □ Housing
- Public Health

□ Transportation

□ Flooding

Environment

Governance and Customer Service**Prior Court Action (if any):** 

#### Location:

Address (if applicable list below):

 $\boxtimes$  Countywide

 $\Box$  Precinct 1

Precinct 2

□ Precinct 3

Precinct 4Fiscal and Perse	Jine Jun			
Service Name		FY 21-22	Estimates	
			FY 22	Next 3 FYs
Incremental Expenditures				
Labor Expenditures	-	-	-	
Non-Labor Expenditures	-	-	-	
Total Incremental Expenditure	-	-	-	
Funding Sources (General Fund,	PIC Fund, Deb	ot or CP, Grants, or Ot	ther - Please Spe	cify)
Existing Budget	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Current Budget		-	-	-
Additional Budget Requested	-	-	-	-
	_	-	-	-
	-	-	-	-
Total Additional Budget Reque	sted	-	-	-

Total Funding Sources	-	-	-			
Personnel (Fill out section only if requesting new PCNs)						
Current Position Count for Service	-	-	-			
Additional Positions Requested	-	-	-			
Total Personnel	-	-	-			

# **Anticipated Implementation Date: NA**

# Emergency/Disaster Recovery Note:

⊠ Not an emergency, disaster recovery, or COVID-19 related item

Emergency Item

□ COVID-19 related Item

□ Disaster Recovery related Item

Contact(s) name, title, department: Debbie Kopecky, Agenda Coordinator, Com. Pct. 4

Attachments (if applicable): Resolution