Must be received in the Office by November 7th at 3:00 PM
Be prepared to present your idea to the BOD at the November 15th meeting

Outdoor Resorts
Orlando, Florida
9000 US Highway 192, #1000
Clermont, Florida 34714
Telephone: (863) 424-1407 Fax: (863) 424-5476

Annual Meeting Item Consideration Form

Name: _____ Date received in office: _____

Lot number: _____

Item for consideration to the Board : _____

_____

Action requested: _____

Why this is needed: _____

Person giving presentation to BOD at November 15th meeting: _____

Supporting documentation attached (Should include quotes, maps or pictures): Yes ☐

Financial Impact

Is there a cost associated with the request: YES ☐ NO ☐

If YES, what is the total cost (Include installation, additional parts, shipping and tax): _____

Does requestor have estimates: YES ☐ NO ☐

Estimates submitted with this form: YES ☐ NO ☐

Is this a budgeted expense: YES ☐ NO ☐

If NO, how do you propose it be funded?_____

BOARD ACTION : VOTED FOR ☐ VOTED AGAINST ☐ TABLED ☐

SUBMIT BY VOTE OF BOD TO ANNUAL MEETING: YES ☐ NO ☐

PERCENTAGE OF VOTE NEEDED TO PASS AT ANNUAL MEETING: _____

IS FOLLOW-UP NEEDED: _____

*** Deadline for any estimates (if not received with this form) is Monday, December 8th at 3:00PM**
Items $2,500 or more will require 3 estimates*