



**Scott County Board of Supervisors**  
**March 1, 2023 – 8:30 a.m.**  
**AGENDA**

190 Beech Street Suite 201 Gate City, VA 24251



<i>No.</i>	<i>Item of Business/Action Requested</i>	<i>Action Taken by Board</i>																								
1.	Call To Order – County Administrator Danny P. Mann																									
2.	Invocation and Pledge of Allegiance by Marshall D. Tipton																									
3.	Roll Call of Members	<input type="checkbox"/> Mr. Jeter, District 1 <input type="checkbox"/> Mr. Tipton, District 2 <input type="checkbox"/> Mr. Herron, District 3 <input type="checkbox"/> Mr. Brickey, District 4 <input type="checkbox"/> Mr. Mann, District 5 <input type="checkbox"/> Ms. Hood, District 6 <input type="checkbox"/> Ms. Addington, At Large																								
4.	Approve Agenda	Motion: _____ Second _____  <table border="0"> <tr> <td align="center">A Y E</td> <td></td> <td align="center">N A Y</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	A Y E		N A Y	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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5.	Approve Minutes:  February 8, 2023	Motion: _____ Second _____  <table border="0"> <tr> <td align="center">A Y E</td> <td></td> <td align="center">N A Y</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	A Y E		N A Y	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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6.	Citizen Expression Period:
7.	<p>Public Hearing on a Special Use Permit Application submitted by Dean Ferguson for the property at the intersection of US 23 North and Partridge Drive, tax map number 100 A 4, to be used as mini-warehouses.</p>
8.	<p>Public Hearing on a Special Use Permit Application submitted by Future 2 Outdoor (Future II, LLC) for property along US 23 North in the Duffield area, tax map number(s) 100A1 A 1, 100A1 A 1 A, and 100A1 A 2, to be used for billboard signs.</p>

Motion: \_\_\_\_\_ Second \_\_\_\_\_

- |                          |           |                          |
|--------------------------|-----------|--------------------------|
| AYE                      |           | NAY                      |
| <input type="checkbox"/> | Jeter     | <input type="checkbox"/> |
| <input type="checkbox"/> | Tipton    | <input type="checkbox"/> |
| <input type="checkbox"/> | Herron    | <input type="checkbox"/> |
| <input type="checkbox"/> | Brickey   | <input type="checkbox"/> |
| <input type="checkbox"/> | Mann      | <input type="checkbox"/> |
| <input type="checkbox"/> | Hood      | <input type="checkbox"/> |
| <input type="checkbox"/> | Addington | <input type="checkbox"/> |

Motion: \_\_\_\_\_ Second \_\_\_\_\_

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9.	Allen Sumpter – Virginia Department of Transportation Update	Motion: _____ Second _____  <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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10.	Jack McClanahan – Spearhead Trails	Motion: _____ Second _____  <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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12.	Budget Committee	Motion: _____ Second _____  <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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13.	Amy Vicars – Bookkeeping	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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14.	<p>Tina Seay - Appointments</p> <p>Courthouse Facilities Committee (Citizen)</p>	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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Courthouse Facilities Committee  
(Town of Gate City)

Motion: \_\_\_\_\_ Second \_\_\_\_\_

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<input type="checkbox"/>	Tipton	<input type="checkbox"/>
<input type="checkbox"/>	Herron	<input type="checkbox"/>
<input type="checkbox"/>	Brickey	<input type="checkbox"/>
<input type="checkbox"/>	Mann	<input type="checkbox"/>
<input type="checkbox"/>	Hood	<input type="checkbox"/>
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Public Service Authority

Motion: \_\_\_\_\_ Second \_\_\_\_\_

AYE		NAY
<input type="checkbox"/>	Jeter	<input type="checkbox"/>
<input type="checkbox"/>	Tipton	<input type="checkbox"/>
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Public Service Authority

Motion: \_\_\_\_\_ Second \_\_\_\_\_

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**Scott County Board of Supervisors**  
**March 1, 2023 – 8:30 a.m.**  
**AGENDA**

190 Beech Street Suite 201 Gate City, VA 24251



	<p>Miscellaneous</p> <p>County Vehicles</p>	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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17.	Report: Pam Cox – Tourism	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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18.	<p>Comments, Requests,          Recommendations from Board of          Supervisors:</p> <p>Mr. Jeter –          Mr. Tipton –          Mr. Herron –          Mr. Brickey –          Mr. Mann –          Ms. Hood –          Ms. Addington –</p>	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td style="text-align: center;">AYE</td> <td></td> <td style="text-align: center;">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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19a.	Enter Closed Session Pursuant to Virginia Code Section 2.2-3711A 1-Personnel 3-Real Estate 5-Prospective Industry 6-Competitive Investments 7-Legal Counsel	Motion: _____ Second _____  <table border="0"> <tr> <td align="center">AYE</td> <td></td> <td align="center">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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19b.	Return to Open Session	Motion: _____ Second _____  <table border="0"> <tr> <td align="center">AYE</td> <td></td> <td align="center">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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19c.	Certify Closed Session	Motion: _____ Second _____  <table border="0"> <tr> <td align="center">AYE</td> <td></td> <td align="center">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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20.	Take Any Necessary Action from Closed Session	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td align="center">AYE</td> <td></td> <td align="center">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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21.	Adjourn meeting until April 5, 2023 at 8:30 a.m.	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td align="center">AYE</td> <td></td> <td align="center">NAY</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Jeter</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Tipton</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Herron</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Brickey</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Mann</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Hood</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Addington</td> <td><input type="checkbox"/></td> </tr> </table>	AYE		NAY	<input type="checkbox"/>	Jeter	<input type="checkbox"/>	<input type="checkbox"/>	Tipton	<input type="checkbox"/>	<input type="checkbox"/>	Herron	<input type="checkbox"/>	<input type="checkbox"/>	Brickey	<input type="checkbox"/>	<input type="checkbox"/>	Mann	<input type="checkbox"/>	<input type="checkbox"/>	Hood	<input type="checkbox"/>	<input type="checkbox"/>	Addington	<input type="checkbox"/>
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