



Scott County Board of Supervisors
September 6, 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 – Chairman Danny P. Mann																									
2.	Invocation and Pledge of Allegiance by Stefanie Addington																									
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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6.	<p>Citizen Expression Period:</p> <p>1. Ellen Bailey</p>																								
7.	<p>Public Hearing on the possible adoption of an Ordinance to Amend and Reenact in its Entirety the Scott County Public Procurement Ordinance to reflect the law as it now reads in Title 2.2, Chapter 43 of the Code of Virginia.</p>																								
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9.	Ratify \$400 from Board Contingency to Court Service Travel.	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td>AYE</td> <td></td> <td>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.	Scott County 4-H Trip	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td>AYE</td> <td></td> <td>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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11.	Amy Vicars – Bookkeeping	<p>Motion: _____ Second _____</p> <table border="0"> <tr> <td>AYE</td> <td></td> <td>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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<p>12.</p>	<p>Tina Seay - Appointments</p> <p>Comprehensive Policy Management Team (Private Provider) – Unexpired Term</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 style="text-align: center;"><input type="checkbox"/></td> <td>Jeter</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Tipton</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Herron</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Brickey</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Mann</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Hood</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Addington</td> <td style="text-align: center;"><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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15.	Report: 1. John Kilgore – Economic Development Authority																									
16.	Comments, Requests, Recommendations from Board of Supervisors: Mr. Jeter – Mr. Tipton – Mr. Herron – Mr. Brickey – Mr. Mann – Ms. Hood – Ms. Addington –	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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190 Beech Street Suite 201 Gate City, VA 24251



17a.	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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17b.	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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18.	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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19.	Adjourn meeting to October 4, 2023.	<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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