



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST

(Revised: 6/9/2014)

Board Clerk Use Only

Meeting Date: 4/21/16
Agenda Item #: C.4
Est. Start Time: 9:30 am
Date Submitted: 3/30/16

Agenda Title: **Proclamation Proclaiming May 1-7, 2016 as Public Service Recognition Week in Multnomah County, Oregon**

Note: Title should not be more than 2 lines but sufficient to describe the action requested. Title on APR must match title on Ordinance, Resolution, Order or Proclamation.

Requested

Meeting Date: April 21, 2016 **Time Needed:** n/a

Department: Non-Departmental **Division:** Chair's Office

Contact(s): Travis Graves/Kelli Gallippi

Phone: 503-988-6134 **Ext.** 86134 **I/O Address:** 503/3/300

Presenter

Name(s) &

Title(s): Consent Agenda

General Information

1. What action are you requesting from the Board?

Adoption of Proclamation Declaring the Week of May 1 through May 7, 2016 as "Public Service Recognition Week" in Multnomah County, Oregon and Recognizing the Contributions of All Multnomah County Employees and the Essential Public Services they Provide.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

Celebrated the first full week in May for the past 31 years, *Public Service Recognition Week (PSRW)* is a time to honor the men and women who serve our nation as federal, state, county and local government employees.

Throughout the nation and the world, public servants use this occasion to educate others about the work they do and why they have chosen public service careers, as well as the many ways government services make life better for all of us.

In addition, Multnomah County will be holding an Employee Awards Ceremony on Wednesday, May 4th.

3. Explain the fiscal impact (current year and ongoing).

N/A

4. Explain any legal and/or policy issues involved.

N/A

5. Explain any citizen and/or other government participation that has or will take place.
N/A

Required Signature

**Elected
Official or
Department
Director:**

Travis Graves

Date:

3/30/16

Note: Please submit electronically. Insert names of your approvers followed by /s/ - we no longer use actual signatures. Please insert date approved.