

**CITY OF GAUTIER  
Business Item #1  
Fact Sheet**

**Council Meeting:** September 2, 2014  
**Title:** Public Hearing for FY 2015 Proposed Budget  
**Introduced by:**  
**Contact Person/Telephone:** Teresa Montgomery 497-8000 Ext. 309

**Summary Explanation:** Conduct public hearing for FY 2015 Proposed Budget.

**EXHIBITS FOR REVIEW**

<b>Resolution</b>	<input type="checkbox"/>
<b>Ordinance</b>	<input type="checkbox"/>
<b>Contract</b>	<input type="checkbox"/>
<b>Minutes</b>	<input type="checkbox"/>
<b>Plan Maps</b>	<input type="checkbox"/>
<b>Order</b>	<input type="checkbox"/>
<b>Other</b>	<input checked="" type="checkbox"/>
<b>Submittal Authorization</b>	<b>City Manager</b>

**Staff Recommendation:**

**Approval**

<b>Motion Made by:</b>													
<b>Gollott</b>	<input type="checkbox"/>	<b>Martin</b>	<input type="checkbox"/>	<b>Jones</b>	<input type="checkbox"/>	<b>Guillotte</b>	<input type="checkbox"/>	<b>Vaughan</b>	<input type="checkbox"/>	<b>Anderson</b>	<input type="checkbox"/>	<b>Colledge</b>	<input type="checkbox"/>

<b>Second Made by:</b>													
<b>Gollott</b>	<input type="checkbox"/>	<b>Martin</b>	<input type="checkbox"/>	<b>Jones</b>	<input type="checkbox"/>	<b>Guillotte</b>	<input type="checkbox"/>	<b>Vaughan</b>	<input type="checkbox"/>	<b>Anderson</b>	<input type="checkbox"/>	<b>Colledge</b>	<input type="checkbox"/>

<b>Voted as follows:</b>		<b>AYES</b>	<b>NAYS</b>	<b>Abstained</b>	<b>Absent</b>
<b>Mayor</b>	<b>Gollott</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>At Large</b>	<b>Martin</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Ward 1</b>	<b>Jones</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Ward 2</b>	<b>Guillotte</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Ward 3</b>	<b>Vaughan</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Ward 4</b>	<b>Anderson</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Ward 5</b>	<b>Colledge</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Action Taken:**