



## DEPARTMENTAL SUBMISSION

DEPARTMENT: Council Member Mary Waters

FILE NUMBER:

---

**\* RE:**

Submitting reso. autho.

**\* SUMMARY:**

Resolution to support providing child care assistance to DDOT bus drivers

**\* RECOMMENDATION:**

Support

**\* DEPARTMENTAL CONTACT:**

Name: Thomas Choske, [Thomas.Choske@detroitmi.gov](mailto:Thomas.Choske@detroitmi.gov)

Position: Policy and Communications Analyst

**\*=REQUIRED**