



DEPARTMENTAL SUBMISSION

DEPARTMENT: [eSCRIBE Department]

FILE NUMBER:

*** ITEM**

MEMORANDUM

*** Council Member**

Choose an item.

Memorandum relative to (summary below):

*** SUMMARY:**

Click or tap here to enter text.

*** RECOMMENDATION:**

Click or tap here to enter text.

*** COMMITTEE REFERRED TO:**

Choose an item.

*** DEPARTMENTAL CONTACT:**

Name: Click or tap here to enter text.

Position: Click or tap here to enter text.

***=REQUIRED**