



DEPARTMENTAL SUBMISSION

DEPARTMENT: Legislative Policy Division
FILE NUMBER: Legislative Policy Division-0567

*** RE:**

Submitting report related to: Report on Amendment to the Future of Health Transformational Brownfield Project

*** SUMMARY:**

Report on Amendment to the Future of Health Transformational Brownfield Project

*** RECOMMENDATION:**

For Review

*** DEPARTMENTAL CONTACT:**

Name: Sabrina Shockley
Position: Administrative Assistant

***=REQUIRED**