



DEPARTMENTAL SUBMISSION

DEPARTMENT: Legislative Policy Division
FILE NUMBER: Legislative Policy Division-0638

*** RE:**

Submitting reso. autho. Resolution in Support of HB 4707

*** SUMMARY:**

Resolution in Support of HB 4707

*** RECOMMENDATION:**

For Consideration

*** DEPARTMENTAL CONTACT:**

Name: Sabrina Shockley
Position: Administrative Assistant

***=REQUIRED**