## DEPARTMENTAL SUBMISSION



DEPARTMENT: [eSCRIBE Department] FILE NUMBER: Legislative Policy Division - Historic Designation Advisory Board-0062

\* **RE:** Submitting report related to:

\* SUMMARY:

Click or tap here to enter text.

## \* RECOMMENDATION:

Click or tap here to enter text.

## \* DEPARTMENTAL CONTACT:

Name:Click or tap here to enter text.Position:Click or tap here to enter text.

\*=REQUIRED