



DEPARTMENTAL SUBMISSION

DEPARTMENT: Council Member Latisha Johnson

FILE NUMBER:

*** RE: Testimonial Resolution in Memoriam**

Submitting reso. autho.

*** SUMMARY: D4 City Council TR in Memoriam for Marlowe Stoudamire**

[Click or tap here to enter text.](#)

*** RECOMMENDATION:** District 4 City Council Testimonial Resolution in Memoriam for Marlowe Stoudamire for formal session

[Click or tap here to enter text.](#)

*** DEPARTMENTAL CONTACT:**

Name: Chelsea Davis

Position: Office Manager

***=REQUIRED**