



DEPARTMENTAL SUBMISSION

DEPARTMENT: Legislative Policy Division
FILE NUMBER: Legislative Policy Division-0323

*** RE:**

Submitting report related to: Comprehensive Report and Exhaustive List of the City of Detroit Housing Funds

*** SUMMARY:**

Comprehensive Report and Exhaustive List of the City of Detroit Housing Funds

*** RECOMMENDATION:**

For Review

*** DEPARTMENTAL CONTACT:**

Name: Sabrina Shockley
Position: Administrative Assistant

***=REQUIRED**