



DEPARTMENTAL SUBMISSION

DEPARTMENT: Legislative Policy Division - Historic
Designation Advisory Board

FILE NUMBER: Legislative Policy Division - Historic
Designation Advisory Board-0039

*** RE:**

Submitting report related to: Candidates for Consideration for the Historic Designation Advisory Board

*** SUMMARY:**

Candidates for Consideration for the Historic Designation Advisory Board

*** RECOMMENDATION:**

For Consideration

*** DEPARTMENTAL CONTACT:**

Name: Sabrina Shockley
Position: Administrative Assistant

***=REQUIRED**