



## DEPARTMENTAL SUBMISSION

DEPARTMENT: Council Pro Tem James Tate  
FILE NUMBER: Council Pro Tem James Tate-0055

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**\* RE:**

Testimonial Resolutions Ronald Jones

**\* SUMMARY:**

Testimonial Resolutions for Ronald Jones

**\* RECOMMENDATION:**

Please add

**\* DEPARTMENTAL CONTACT:**

Name: Karen Williams  
Position: Office Manager

**\*=REQUIRED**