



Legislation Text

File #: 2023-004, **Version:** 1

Department: Administration

Subject:

Type of Action: Choose an item.

Presentation by Family Services Center.

Type of Document: Choose an item.

Finance Information:

Account Number: Click or tap here to enter text.

City Cost Amount: \$

Total Cost: \$

Special Circumstances:

Grant Funded: \$

Grant Title - CFDA or granting Agency: Click or tap here to enter text.

Resolution #: Click or tap here to enter text.

Location: (list below)

Address:

District: District 1 ☐ District 2 ☐ District 3 ☐ District 4 ☐ District 5 ☐

Additional Comments:

