



# City of Fort Bragg

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## Legislation Details (With Text)

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**File #:** 20-619      **Version:** 1      **Name:**

**Type:** Report      **Status:** Business

**File created:** 2/6/2020      **In control:** Finance and Administration Committee

**On agenda:** 2/12/2020      **Final action:** 2/12/2020

**Title:** Recieve Oral Update from Staff on Departmental Activites

**Sponsors:**

**Indexes:**

**Code sections:**

**Attachments:**

Date	Ver.	Action By	Action	Result
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Recieve Oral Update from Staff on Departmental Activites