

# Certified Local Government Annual Report 2024

Name of Certified Local Government:

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*Signature of person who completed this report*\_\_\_\_\_

I certify that a representative of the historic preservation commission has attended a public meeting and presented the details of this report to the city council (city CLG) or the Board of Supervisors (county CLG).

*Date of public meeting:*

*Name of Mayor or Chairman of the Board of Supervisors:*

\_\_\_\_\_  
\_\_\_\_\_  
*Signature of Mayor or Chairman of the Board of Supervisors*

***Please upload this completed form with your annual report on SlideRoom. Thank you.***