



## Additional Rule Information

Revised June 2020

Include this page only if needed.

<b><u>1. General Information</u></b>			
a. Agency/Board Name*			
b. Agency/Board Address	c. City	d. Zip Code	
e. Name of Agency Liaison	f. Agency Liaison Telephone Number		
g. Agency Liaison Email Address			
h. Program			
Amended Program Name (if applicable):			
<b><u>2. Rule Type and Information, Cont.</u></b>			
a. Provide the Chapter Number, Title, and Proposed Action for Each Chapter.			
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
Chapter Number:	Chapter Name:	<input type="checkbox"/> New <input type="checkbox"/> Amended <input type="checkbox"/> Repealed	
Amended Chapter Name (if applicable):			
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