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Secretary of State

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Date

For Office Use Only: Effective Date _____Code Number ____ Name of Agency Contact E-mail Phone Statutory Authority for Promulgating Rules _____ Rule Title: Intended Effective Date Date (Check One) T Emergency (ACA 25-15-204) **1** 10 Days After Filing (ACA 25-15-204) Final Date for Public Comment Reviewed by Legislative Council.....

CERTIFICATION OF AUTHORIZED OFFICER

E-mail Address

I Hereby Certify That The Attached Rules Were Adopted In Compliance with the Arkansas Administrative Act. (ACA 25-15-201 et. seq.)

Sue A Je Had MNSc, APRN Signature	
Phone Number	E-mail Address
Ti	tle
D	ate