



## FY18 Foster Care Transportation Plan

**Local Educational Agency (LEA)** Marion County Schools

**Superintendent Name** Glenn Tidwell

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**City** Buena Vista **Zip** 31803

**Foster Care Point of Contact (POC) Name** Cassandra Porter **POC Email** Tymes.Cassandra@marion.k12.ga.us

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\_\_\_\_\_  
Superintendent Signature

6/6/2017

\_\_\_\_\_  
Date

Glenn Tidwell  
\_\_\_\_\_  
Print Name of Superintendent

