

HOUSE OF REPRESENTATIVES

KENTUCKY GENERAL ASSEMBLY AMENDMENT FORM
2020 REGULAR SESSION
Unofficial Document

Amend printed copy of **HB 593**

On page 2, line 8, after "disease" insert ", unless otherwise approved by the United States Food and Drug Administration".

Amendment No. _____

Rep. Rep. Richard Heath

Committee Amendment _____

Signed: _____

Floor Amendment _____

LRC Drafter: _____

Adopted: _____

Date: _____

Rejected: _____

Doc. ID: XXXX

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