

Request to Speak before Council

Request to Make a Deputation/Presentation to Council/Committee
City of Kawartha Lakes
City Clerk's Office
26 Francis Street, PO Box 9000
Lindsay, ON K9V 5R8
705-324-9411

Name: *		
Joan Aberne	thy	
Address:*		
121 William St. N. #3	Line	
*		
City/Town/Village:	Province: *	
hind say	Ontario	K9N4A9
Telephone: *	Email: *	
Telephone:* 705-308-6679	joanabe	erne My@ Yahov. a
There can be a maximum of two speakers for each de who will be speaking. The names that are listed here was a speaker of two speakers for each decomposition.	putation. Please list the name	e(s) of the individual(s)
Deputant One:		
Joan Abernet	hy	
Deputant Two:		

Please provide details of the matter to which you wish to speak: *		
Present a	a claim	- details and materials
		to follow
Please attach any addition		nents you wish to provide and submit with this completed
lave you discussed th	is matter with City \$	Staff?
P No		
f yes, Which departme	nt and staff membe	er(s) have you spoken to?
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Vhat action are you ho	ping will result fron	n your presentation/deputation?*
1 Coun	cif to se	eceine -
2 Low	ncil to	deliberate
(3) Con	nail to	resolve

kawarthalakes.ca

By signing this form you are acknowledging that all of the information you are providing on this form is true, and giving the City permission to collect your personal information for the principal purpose of a request to make a deputation to Committee or Council as outlined below.

Signature:

Date:

The personal information is being collected by the City of Kawartha Lakes for the principal purpose of a request to make a deputation to Committee or Council pursuant to the City's procedural by-law. This information, including all attachments submitted may be circulated to members of Council, staff, the general public and posted on the City website. Questions about the collection of this information should be directed to the City Clerk or Deputy Clerk at 705 324-9411 ext. 1295 or 1322.

Do you understand how your information will be used and agree to allow the City to use your personal information provided on this form, including any attachments for the purposes of requesting to make a deputation to Committee or Council? *

Yes

Please complete this form and return to the City Clerk's Office by submitting it online or: Fax: 705-324-8110 Email: agendaitems@kawarthalakes.ca

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