

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: *			
Heather Kirby, General Manager, Kawartha Lakes Fo	od Souce		
ddress:*			
51 George Street West, Box 123			
ity/Town/Village:	Province: *	Postal Code:	
Lindsay	ON	K9V 4R8	
elephone: *	Email: *	Email: *	
705-324-0707	heather@kawarthalal	heather@kawarthalakesfoodsource.com	
Heather Kirby, Kawartha Lakes Food Source ∟ynda Porteous, Coboconk Food Bank volunteer			
Please provide details of the matter to which y			
 How the partnership between Kawartha Lakes Fool Kawartha Lakes Food Source overview Describe the local need and who our food banks cli 			
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What action are you hoping will	result from your presentation/deputation? *	
1) Deeper knowledge and understanding of hunger in our community 2) Appreciation of how our community supports their community 3) Understand the importance of affordable house within and beyond Lindsay (specifically social housing {there is a multi year wait list}, rent needs to have a ceiling)		
Signature: Heather Kirby	Date: October 11, 2017	

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

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 Section 10 of City of Kawartha Lakes By-law 2014-266. This information may be circulated to members of Council, staff and the general public. 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.