



100 John West Way
Aurora, Ontario
L4G 6J1
(905) 727-3123
aurora.ca

Delegation Request

This request and any written submissions or background information for consideration by either Council or Committees of Council is being submitted to Legislative Services.

Council or Committee (Choose One) *

Council

Council or Committee Meeting Date * ?

2023-9-26



Subject *

Strong Mayor Powers in the Town of Aurora

Full Name of Spokesperson and Name of Group or Person(s) being Represented (if applicable) *

Andy Mitchell

Brief Summary of Issue or Purpose of Delegation *

Speaking in opposition to Strong Mayor Powers being used in the Town of Aurora

Have you been in contact with a Town staff or Council member regarding your matter of interest? *

☐ Yes

☒ No

I acknowledge that the Procedure By-law permits five (5) minutes for Delegations. *

☒ Agree