

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 or Committee Meeting Date * ?	
Council	2024-12-10	#
Subject *		
Agenda Item 9.1 Location for a Men's Transitional Ho	ousing Update	
Full Name of Spokesperson and Name of Group or Pe	erson(s) being Represented (if applicable) *	
Len Bulmer/ Adam Mobbs Aurora Cares- Housing fo	or All	
Brief Summary of Issue or Purpose of Delegation *		
To present our community organizations view on mat Council	terial contained in the Update report being considered by	,
Could we kindly ask that we confirm our delegation by the report on the Agenda	y close of business tomorrow. given the late placement of	of
Have you been in contact with a Town staff or Council Yes I acknowledge that the Procedure By-law permits five Agree	No No	