

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

Delegation Request

Council or Committee (Choose One) *

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 Meeting Date * ?

| Committee of the Whole | 2025-4-8 | m |
|--|------------------------------------|-----------------------------|
| Subject * | | |
| Lake Simcoe Region Conservation Authority - Restora | ntion Projects in the Town of | Aurora |
| Full Name of Spokesperson and Name of Group or Per | son(s) being Represented (if | f applicable) * |
| Christa Sharp, Manager, Restoration, Lake Simcoe R | egion Conservation Authority | (LSRCA) |
| Brief Summary of Issue or Purpose of Delegation * | | |
| At their January 24, 2025 meeting, the LSRCA Board 2024 Restoration Accomplishments. Following the me Place Restoration Project, along with other restoration Council. | eting, Councillor Thompson i | requested that the Devlin |
| Have you been in contact with a Town staff or Council • Yes | member regarding your matt C No | er of interest? * |
| Full name of the Town staff or Council member with whom you spoke | Date you spoke with Tow | n staff or a Council member |
| Councillor Thompson | 2025-1-24 | |

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

Agree