City of Cold Lake	<b>Delegation Application</b>
To: The Office of the Chief Administrative Officer	
INVe, DAMEN SCHANB 730-815-1703 INVe, ANDREW	HELIOTIS 780-545-3793
(Name) (Telephone Number) (Name)	Name) (Telephone Number)
Mailing Address 4907-57 AVE COLDLAKE AB T9M	05(
E mail Address DAME ( 661/ALR & Complete Com	
request to appear as a delegation before Cold Lake City Council at a meeting to be held on	MARCH 24TH , 20 20.
*Please Note: In the event of several delegations, please indicate an alternate date or you w	vill be assigned to the next available meeting.
The purpose of the delegation is to present the following: (see reverse for requirements)	
<ul> <li>A copy of all information regarding the topic must accompany the application.</li> </ul>	
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FUNDING RECONEST, POWER POINT PRESENTATION;	PONSOKSHIP FILM.
* Where the subject matter of a delegation pertains to legal matters, personnel, and/or private prop	erty issues, the City of Cold Lake reserves the right not to
hear such delegations.	FOR INTERNAL USE ONLY
We acknowledge that only the above matter will be discussed during the delegation.	allah
Signed MAR. 18, 2020	Request Approved by
Signed 1 Hul Date Mor 18, 2020	Date Approved for April 14,2020
Return completed application to the City of Cold Lake	cc:
5513-48 Avenue, Cold Lake, AB T9M 1A1	□ Other

Phone: (780) 594-4494 Ext. 7967 Fax: (780) 594-3480 Email: creimer@coldlake.com Form 11-00-06

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