

To: The Office of the Chief Adminis <sub>I/We,</sub> Faber & Company LLP	trative Officer	r Johnson		
(Name)	(Telephone Number)	(Name)	(Telepho	one Number)
Mailing Address				
E-mail Address _pjohnson@faberco	mpany.com			
request to appear as a delegation before Cold Lake City Council at a meeting to be held on		ld on	May 26	
*Please Note: In the event of several of	delegations, please indicate an alternate date or	you will be assigned	d to the next availa	able meeting.
The purpose of the delegation is to pro	esent the following: (see reverse for requirements)			
<ul> <li>A copy of all information regarding the</li> </ul>	he topic must accompany the application.			
City of Cold Lake Financial Stater	ment			
Year ending December 31, 2019				
* Where the subject matter of a delegation	on pertains to legal matters, personnel, and/or privat	a proporty issues the	City of Cold Lake re	corver the right pat t
hear such delegations.	on pertains to legar matters, personner, ana, or privat		city of cold lake le	serves the right not to
I/We acknowledge that only the above matter will be discussed during the delegation.			RNAL USE ONLY	MA
Signed Mucclenter	Date May 19,2020	Request	Approved by	mp-
Signed Care sept-	Date	Date App	roved for <u>may</u>	26,2020
Return completed application to the City of Cold Lake				
5513-48 Avenue, Cold Lake, AB T9M 1A Phone: (780) 594-4494 Ext. 7967	.1	□ Other		
Findle: (780) 594-3480				
Email: creimer@coldlake.com		Information on this form is collected for the sole use of the City of Cold Lake and is protected under the aut Information and Protection of Privacy Act, Sec. 33 (c) which regulates the collection, use and disclosure of		
Form 11-00-06				