Form: Request to Speak to Committee of Council Submitted on Friday, February 10, 2017 - 3:37pm

==Committee Requested==

Committee: Unknown

==Requestor Information==

Name of Individual: Lenore Lukasik-Foss

Name of Organization: Sexual Assault Centre (Hamilton and

Area), SACHA

**Contact Number:** 905 525-4573, ext 223

Email Address: lenore@sacha.ca

Mailing Address: 75 MacNab St S Hamilton ON L8P 3C1

Reason(s) for delegation request: To address the committee dealing with the Transgender Protocol

Will you be requesting funds from the City? No

Will you be submitting a formal presentation? No