

Form: Request to Speak to Committee of Council

Submitted on Wednesday, September 18, 2019 - 9:07 am

==Committee Requested==

Committee: Emergency and Community Services Committee
(Previously Healthy & Safe Communities)

==Requestor Information==

Name of Individual: Judith Bishop

Name of Organization: Child Advocacy Group

Contact Number:

Email Address:

Mailing Address: Hamilton ON

Reason(s) for delegation request: To express concern over the elimination of the Transition Child Benefit

Will you be requesting funds from the City? No

Will you be submitting a formal presentation? No