

**Form: Request to Speak to Committee of Council**

Submitted on Thursday, October 31, 2019 - 3:56 pm

==Committee Requested==

**Committee:** Audit, Finance & Administration

==Requestor Information==

**Name of Individual:** Mouna Bile

**Name of Organization:** Hamilton Community Legal Clinic

**Contact Number:**

**Email Address:**

**Mailing Address:**

**Reason(s) for delegation request:** To present a set of recommendations towards the re-opening of Hamilton Anti-Racism Resource Centre.

**Will you be requesting funds from the City?** Yes

**Will you be submitting a formal presentation?** Yes