

Submitted on Wed, 08/16/2023 - 10:37

Submitted by: Anonymous

Submitted values are:

### **Committee Requested**

Committee  
Emergency & Community Services Committee

Will you be delegating in-person or virtually?  
Virtually

Will you be delegating via a pre-recorded video?  
No

### **Requestor Information**

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Merima Menzildzic  
Hamilton Community Legal Clinic

[REDACTED]

[merima.menzildzic@hclc.clcj.ca](mailto:merima.menzildzic@hclc.clcj.ca)

[REDACTED]

Preferred Pronoun  
she/her

Reason(s) for delegation request  
Regarding the Hamilton Support Program

Will you be requesting funds from the City?  
No

Will you be submitting a formal presentation?  
No