

# Council Delegation Request

Members of the public or citizen group may submit a Delegation Request to speak at an open meeting of Council.

**First Name \***

Suzanne

**Last Name \***

Fleet

**Street Address \***

43 North Street West

**Town/City \***

Tillsonburg

**Postal Code \***

N4G 1B9

**Phone Number \***

519-983-2748

**E-mail \***

info@turtlefest.ca

**Website**

**Do you or any members of your party require accessibility accommodations? \***

Yes

No

**Council Meeting Date \***

September 23,  
2019

**Subject of Delegation \***

Turtlefest 2019 Final Report and 2020 Sponsorship Request

**Name(s) of Delegates and Position(s) \***

Suzanne Fleet - Festival Director  
Cephas Panschow - Vice-chair

**Name of Group or Person(s) being represented (if applicable)**

Tillsonburg Turtlefest

**I acknowledge Delegations are limited to fifteen (15) minutes each. \***

I accept

**Brief Summary of Issue or Purpose of Delegation \***

To provide Council with our annual final report and 2020 sponsorship request

**Will there be a Power Point presentation? \***

Yes

No

**Please attach a copy of your presentation.**

**Have you been in contact with a Staff member regarding the Delegation topic? \***

Yes

No

**If yes, please list the Staff member(s) you have been working with. \***

Cephas Panschow

**I acknowledge that all presentation material must be submitted to the Clerk's Office by 4:30 p.m. the Wednesday before the Council meeting date.**

I accept

# Thank You

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