Deputation Request

COMMI	ITEE: York Region Council
DATE O	F MEETING: November 21, 2013
TITLE:	Transportation Services Mobility Plus Eligibility Appeal Panel Recommendation
1.	INDIVIDUAL MAKING THE DEPUTATION
	Name: Kim McKinnon & Sheri Upper
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	I prefer to be contacted by:Email
2.	NAME OF GROUP OR PERSON(S) BEING REPRENTED:
	Concerned Citizens for Accessibility and Mobility
3.	BRIEF STATEMENT OF ISSUE OR PURPOSE OF DEPUTATION:
	To inform the Council of our concerns regarding the Transportation Services Report of November 7, 2013
	NOTE: There is insufficient time to direct this deputation to the Committee of the Whole as we are just in receipt of this Report and the recommendations

are going to Council for approval on November 21, 2013.