CHECK LIST FOR ALDERMANIC SUBMISSIONS

X X X X X	Cover Letter Order to Appoint/Reappoint Prior Notification Form/Notice of Mat Prior Notification Letter to Appointee/ Application for City Boards/Commissi Resumé/CV <u>or</u> personal statement of i Other: Attendance for past 12 months (*reapper Recommendations/support letters (option Annual Disclosure Form	Re-appointee ions nterest/bio pointments only)
Date Submitted:		January 24 TH , 2024
Meeting Submitted For:		February 5 TH , 2024
Regular or Suspension Agenda:		Regular
Submitted By:		Barbara Montalvo, Legislative Liaison to the BOA
ORDER OF THE NEW HAVEN BOARD OF ALDERS APPROVING THE APPOINTMENT OF ROBERT "BOBBY" BERRIAULT TO THE COMMISSION ON DISABILITIES.		
Comments: LEGISTAR FILE ID: LM-2024~0056		
	inator's Signature: oller's Signature (if grant):	N/A N/A
Mayor	's Office Signature:	

Call (203) 946-7670 or email bmontalvo@newhavenct.gov with any questions.

PLEASE NOTE CLEARLY IF UC (UNANIMOUS CONSENT) IS REQUESTED