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/Commiss: Resumé/CV <u>or</u> personal statement of i | Re-appointee ions |
|--|--|--|
| | Other: Attendance for past 12 months (*reapp Recommendations/support letters (opt Annual Disclosure Form | ional) |
| Date Submitted: | | February 26 TH , 2024 |
| Meeting Submitted For: | | March 4 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 REAPPOINTMENT OF ROBERT MEGNA TO THE BOARD OF ASSESSMENT APPEALS. | | |
| Comments: LEGISTAR FILE ID: LM-2024~0149 | | |
| | | |
| | | |
| Coordinator's Signature: | | N/A |
| Controller's Signature (if grant): | | 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