

CHECK LIST FOR ALDERMANIC SUBMISSIONS

<input checked="" type="checkbox"/>	Cover Letter
<input checked="" type="checkbox"/>	Resolutions/ Orders/ Ordinances (NOTE: If you are submitting any item to the State you must write a Resolution)
<input checked="" type="checkbox"/>	Prior Notification Form
<input checked="" type="checkbox"/>	Fiscal Impact Statement - Should include comprehensive budget
<input type="checkbox"/>	Supporting Documentation (if applicable)
<input type="checkbox"/>	E-mailed Cover letter & Order

IN ADDITION [IF A GRANT]:

<input checked="" type="checkbox"/>	Notice of Intent
<input checked="" type="checkbox"/>	Grant Summary
<input checked="" type="checkbox"/>	Executive Summary (not longer than 5 pages without an explanation)

Date Submitted: May 8, 2024

Meeting Submitted For: May 20, 2024

Regular or Suspension Agenda: Regular

Submitted By: Tomi Veale, Director of Elderly Services

Title of Legislation:

RESOLUTION OF THE BOARD OF ALDERS OF THE CITY OF NEW HAVEN TO
ACCEPT FUNDS FOR THE DIXWELL/NEWHALLVILLE SENIOR CENTER
TRANSPORTATION FOR FY 24 AND FY25 IN THE AMOUNT TOTALLING
\$100,000.00 FROM THE STATE OF CT STATE UNIT ON AGING WITH AN
INDEMNIFICATION CLAUSE

Comments: MOTION TO AMEND: Legistar File ID: LM-2024-0162

Coordinator's Signature: _____

Controller's Signature (if grant): _____

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