## CHECK LIST FOR ALDERMANIC SUBMISSIONS

г

X	Cover Letter	
X	Order to Appoint/Reappoint	
X	Prior Notification Form/Notice of Ma	tter to be Submitted
X	Prior Notification Letter to Appointee	e/Re-appointee
X	Application for City Boards/Commiss	sions
X	Resumé/CV or personal statement of	
	Other:	
X	Attendance for past 12 months (*reappointments only)	
	Recommendations/support letters (op	tional)
	Annual Disclosure Form	
Date Submitted:		January 24 <sup>TH</sup> , 2024
Meeting Submitted For:		February 5 <sup>TH</sup> , 2024
Regular or Suspension Agenda:		Regular
Submitted By:		
Submi	tted By:	Barbara Montalvo, Legislative Liaison to the BOA
	tted By: f Legislation:	Barbara Montalvo, Legislative Liaison to the BOA

REAPPOINTMENT OF LENA ESPOSITO TO THE COMMISSION ON DISABILITIES.

Comments:	LEGISTAR FILE ID: LM-2024-0065	
	57 / A	
Coordinator's Signa	N/A ture:	
	N/A	
Controller's Signatu	ire (if grant):	
Mayor's Office Sign	ature:	
Call (203) 946-7670 or email <u>bmontalvo@newhavenct.gov</u> with any questions.		
**PLEASE NOTE CLEARLY IF UC (UNANIMOUS CONSENT) IS REQUESTED**		