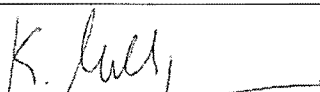


Member's Name Kate Mulligan	
Meeting Date 2020-09-21	Name of Committee or Board Board of Health
Item Number HL20.5	Agenda Item Title 2020 Ontario Seniors Dental Care Program - Capital Project

I declare a direct or indirect pecuniary interest in the agenda item noted above in accordance with section 5 of the Municipal Conflict of Interest Act.

The nature of my interest is as follows:

I work with the Alliance for Healthier Communities, which is the association representing several Community Health Centres receiving this capital funding.

Declaration Date 2020-09-21	Signature of Member 
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Clerk/Secretary Use Only:

Received (Date and Time) September 21, 2020 @ 9:05am	Received by Julie Sawente, Administrator
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