

Organization Name (if applicable)

Downtown Prince George Business Improvement Association

Applicant / Contact First Name *

Colleen

Applicant / Contact Last Name *

Van Mook

Mailing Address *

1406 2nd Avenue

City / Town *

Prince George

Province *

British Columbia

Country

Canada

Postal Code *

V2L 3B6

Primary Phone Number *

250-614-1330

Email Address *

colleenvm@downtownpg.com

Presentation Information

First Presenter's Name *

Eoin Foley

First Presenter's Title / Position *

President

Second Presenter's Name

Colleen Van Mook

Second Presenter's Title / Position

Executive Director

Presentation Topic *

Annual Report

Purpose of Presentation and/or Action You Wish Council to Take *

Information Only

Request for a Letter of Support

Request for Funding or Financial Support

Other (please provide details)

Other Purpose of Presentation / Action *

Annual Report to provide required documents and information as per Bylaw #8929-2018

What is your preferred method of delivery for your delegation presentation?*

- In-person Presentation
- Written Submission
- Pre-recorded Video

Will You be Providing Supporting Documentation (PowerPoint, Brochures, etc.)?*

- Yes
- No

What types of materials will be provided? *

- PowerPoint Presentation
- Handouts
- Other (please specify)

List Any Additional Technical Requirements