

**Chief Officer Confirmation of Report Submission  
Cabinet Member Confirmation of Briefing**

<b>Report for:</b>	<b>Mayor</b>	<input type="checkbox"/>
	<b>Mayor and Cabinet</b>	<input checked="" type="checkbox"/>
	<b>Mayor and Cabinet (Contracts)</b>	<input type="checkbox"/>
	<b>Executive Director</b>	<input type="checkbox"/>
<b>Information</b>	<input type="checkbox"/>	<b>Part 1</b> <input checked="" type="checkbox"/>
	<input type="checkbox"/>	<b>Part 2</b> <input type="checkbox"/>
		<b>Key Decision</b> <input checked="" type="checkbox"/>

<b>Date of Meeting</b>	14 <sup>th</sup> January 2015
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<b>Title of Report</b>	Governing Bodies Reconstitution
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<b>Originator of Report</b>	Sue Tipler	<b>Ext. 47331</b>
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At the time of submission for the Agenda, I confirm that the report has:

Category	Yes	No
Financial Comments from Exec Director for Resources		X
Legal Comments from the Head of Law	√	
Crime & Disorder Implications		X
Environmental Implications		X
Equality Implications/Impact Assessment (as appropriate)	√	
Confirmed Adherence to Budget & Policy Framework		X
Risk Assessment Comments (as appropriate)		X
Reason for Urgency (as appropriate)		X

Signed: \_\_\_\_\_ Executive Member



Date: 6<sup>th</sup> January 2015

Signed: \_\_\_\_\_ Executive Director

Date:

**Control Record by Committee Support**

Action	Date
Listed on Schedule of Business/Forward Plan (if appropriate)	
Draft Report Cleared at Agenda Planning Meeting (not delegated decisions)	
Submitted Report from CO Received by Committee Support	
Scheduled Date for Call-in (if appropriate)	
To be Referred to Full Council	