

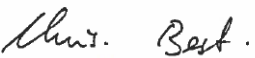
**Chief Officer Confirmation of Report Submission
Cabinet Member Confirmation of Briefing**

Report for: Mayor
 Mayor and Cabinet
 Mayor and Cabinet (Contracts)
 Executive Director
Information **Part 1** **Part 2** **Key Decision**

Date of Meeting	16 September, 2020	
Title of Report	Response from HCSC to Mayor & Cabinet re LSAB Annual Report 2018/19	
Originator of Report	Executive Director for Community Services	Ext: 48107

At the time of submission for the Agenda, I confirm that the report has:

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

Signed: 
 Cabinet Member for the Community Sector
 Date: 3/9/20

Signed: 
 Executive Director for Community Services
 Date: 3/9/20

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	