



MUNICIPAL CLOSED MEETING INVESTIGATION COMPLAINT FORM

Complainant's Name		
Address		
Telephone Number	Home	
	Work	
Email		

Do you consent to having your identity revealed during the investigation? Yes [] No []

Note: Personal Information is collected under the authority of Section 239 of the *Municipal Act*, 2001 as amended, and in accordance with the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, and will be used by the Municipal Investigator to carry out an investigation under the Act.

Date of Closed Meeting	
Name of Municipality	City of North Bay
Municipal Contact	Karen Mclsaac, City Clerk
Telephone	705-474-0400, Ext. 2510
Email	Karen.Mclsaac@northbay.ca

BACKGROUND	This should provide as much information as is required to explain the nature and background of the particular occurrence (i.e. reason provided for closed meeting session, reason for complain, municipal contact, municipal explanation).

ACTION Note any activities you have taken to try to resolve the matter.

ADDITIONAL COMMENTS Provide additional details here.

Date of Signature

Signature of Complainant

OFFICE USE ONLY

Date received _____

Date deemed complete _____

Signature _____