

I,, being a candidate for the office	e of:
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Name (Please Print)

 $\Box$  Councillor

in accordance with the *Municipal Freedom of Information and Protection of Privacy Act,* **1990** as amended, acknowledge that the Nomination Form (Form 1) filed by me contains personal information that this form, once signed, will be available for inspection by members of the public at the Clerk's Office in accordance with the applicable legislation. I hereby authorize the Clerk and/or designate to include on the Town of LaSalle's website and make available to any person, the following information with respect to my candidacy for elected office:

Primary Phone	-	Secondary Phone	
	_		
Email Address			
	_		_
Signature		Date	

**Privacy Statement:** Information on this form is being collected under the authority of the *Municipal Elections Act* and will be used for the nomination process in the 2025 Municipal By-Election. Questions about the collection of this information may be directed to the Returning Officer/Clerk at the Town of LaSalle, 5950 Malden Road, LaSalle, N9H 1S4, Telephone: 519-969-7770.