

REQUEST FOR CLOSED MEETING INVESTIGATION

Pursuant to section 239.1 of the Municipal Act, 2001 regarding a meeting or part of a meeting that was closed to the public.

Name:		
Address:		
Telephone:	E-mail Address:	
тетернопе.	E-mail Address.	
Note: Please note that personal information is collected under the authority of section 239.1 of the <i>Municipal Act, 2001</i> and may be used by the closed meeting investigator to carry out an investigation under the statute.		
Name of Municipality, Local Board or Committee:		
Date of Closed Meeting(s):		
Reasons:		
Note: Please provide detailed information relevant to the subject matter, background and reasons for your request sufficient to establish reasonable and probable grounds for an investigation. Additional page(s) may be used if required.		
Signature:		Date:
I agree that an electronic signature is the legal equivale	ent of a manual signature	