



The Municipality of
**SOUTH
DUNDAS**

**MUNICIPALITY OF SOUTH
DUNDAS
CONSENT TO RELEASE PERSONAL
INFORMATION**

Form LC02

*(Municipal Freedom of Information and Protection
of Privacy Act)*

Personal information on the Nomination Paper is collected under the authority of the *Municipal Elections Act* and will be used to assist the Clerk in the administration of the 2026 Municipal Election. Questions regarding this collection should be forwarded to the Clerk at 34 Ottawa St., Morrisburg ON K0C 1X0 (613)543-2673

Name of Candidate: _____

Candidate for the office of:

- Mayor
- Deputy Mayor
- Councillor

I acknowledge that the Nomination Form filed by me contains personal information and I am aware that the Clerk will disclose all or part of it to the general public.

Candidate Signature: _____

Municipal Clerk Or Designate: _____

Dated at _____, this ____ day of _____, 2026.