Government of Ontario

Access or Correction Request

Freedom of Information and Protection of Privacy Act
Municipal Freedom of Information and Protection of Privacy Act

Please see instructions section before filling out this form

A. Type of Request

- Access to general records (non-personal information)
- Access to own personal information
- Access to other's personal information by authorized party
- Correction of own personal information

Name of institution request made to Ministry of Municipal Affairs and Housing

B. Requester's Information

Last name
First name แระเมลิเมธ
Middle initial
Unit/Apt. no.
Street no. 53
Street name Agence.
PO box
City/Town Ottawa
Province Ontario
Postal Code
Home phone no. (include area code)
Business/Mobile phone no. (include area code & extension)
Ext.

C. Description of Records or Correction Requested

Please provide briefings created by Ministry of Municipal Affairs and Housing from Nov. 4, 2015, to the present concerning implementation of the recommendations contained in the "A PLACE TO 1 CALL HOME REPORT OF THE EXPERT ADVISORY PANEL ON HOMELESSNESS".

As this request is in the public interest, I ask that all fees please be waived. Please contact me when any records are ready for release.

Time period of the records———		
From (yyyy/mm/dd) 2015/11/04	To (yyyy/mm/dd) 2016/03/12	
Method of access		
Receive copy	original (on site only)	

D. Payment and Signature

-\$5 application	n fee-		
Cheque	Cash (in person only)		

Signature

Date (yyyy/mm/dd) 2016/03/12

Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act or Municipal Freedom of Information and Protection of Privacy Act and will be used to answer your request.

Questions about this collection should be directed to the Freedom of Information and Privacy Coordinator at the institution where you make the request.

E. Institution Use Only

Date received (yyyy/mm/dd)

Request no. Comments

Available on-line at ontario.ca. This form will be kept for 6 years from the date of completion. Once completed, this form has a sensitivity level of medium.