



## Authorization to Act as an Agent for Privacy Complaint

I, \_\_\_\_\_, hereby authorize \_\_\_\_\_  
Name of Person Appointing Agent Name of Agent

to act as my agent for the purposes of a privacy complaint to the Information and Privacy Commissioner/  
Ontario under the *Freedom of Information and Protection of Privacy Act/Municipal Freedom of Information  
and Protection of Privacy Act* against the \_\_\_\_\_.  
Name of Government Organization

I further authorize the Commissioner to disclose to \_\_\_\_\_  
Name of Agent

personal information pertaining to me as may be necessary to process my privacy complaint.

\_\_\_\_\_  
Signature of person appointing agent

\_\_\_\_\_  
Signature of witness

\_\_\_\_\_  
Date

Agent Contact Information:

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_