



COUNTY OF
NEWELL

Form CN02

Candidate Information Release Form

I, _____, **authorize** **do not authorize** (check one)
(Please Print)

the County of Newell to release for publication purposes the below listed candidate information while participating in the 2021 General Municipal Election. I acknowledge that the County of Newell may use my candidate information on their County website or provide my information to the media and members of the public.

Candidate Information:

NAME _____

MAILING ADDRESS
& POSTAL CODE: _____

HOME PHONE NUMBER: _____

OFFICE PHONE NUMBER: _____

OTHER PHONE NUMBER: _____

FAX NUMBER: _____

EMAIL ADDRESS: _____

Signature

Date

Collection and Use of Personal Information

Personal information is being collected under the authority of section 33(a) and (c) of the *Freedom of Information and Protection of Privacy Act*, and will be used and disclosed as required for the management and administration of the election process under the *Local Authorities Election Act*. If you have questions regarding the collection, use or disclosure of this information, please contact the **Executive Assistant at 403-794-2319**.