

If this information is required in an alternate format,  
please contact the Accessibility Coordinator at 905-623-3379 ext. 2131.

What is your feedback regarding?		
<input type="radio"/> Accessibility <input type="radio"/> Election Assistance Centre <input type="radio"/> Technology <input type="radio"/> Voters' List <input type="radio"/> Other:		
Location (if applicable):		Date (if applicable):
Details:		
<p>If you would like a response to your feedback, please provide your contact information below. Please note that, if an email address is provided, email will be the default method of contact.</p>		
<b>Contact Information</b>		
First Name		Last Name
Address		
Telephone		Email
<b>Action Taken (internal use only)</b>		
Date Received		Department/Division
Action Taken		
<b>Customer Follow-up</b>		
Date		Method <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> In person
<input type="checkbox"/> Resolved/Completed	Signature	Date

Personal information on this form is collected under the authority of [Section 11 of the Municipal Act, 2001](#). The purpose of the collection of your personal contact information is so that we may respond to your feedback. Questions about this collection may be directed to:  
Municipal Clerk's Division, 40 Temperance Street, Bowmanville, ON L1C 3A6, 905-697-4747 or [votes@clarington.net](mailto:votes@clarington.net).