NorWest Community Health Centres	Main Site - 525 Simpson Street, Thunder Bay, ON, P7C 3J6
Centres de santé	(807) 622-8235(Phone) (807) 622-7637 (Fax)
communautaire NorWest	website: www.norwestchc.org
lf vou have a complaint regardi	email: ajean @norwestchc.org ng the management of your personal information, please contact our Privacy Compliance Officer:
PRIV	ACY COMPLAINT FORM (Please Print Clearly)
	DATE:
_	PERSONAL*
Mr. Mrs.	Ms. Miss
Surname	Given Name Initials
Address Unit	
Сіту	_ Province Postal Code
Telephone Daytime Evening	
E-mail Address*	
	ed at this e-mail address or through that of my representative on my behalf. I e-mail over the Internet is not secure, in that it can be intercepted and/or
manipulated and retransm	
PRESENTING ISSUE	
FILISEITING ISSUE	

Resolution of Complaint:

Please describe how your privacy complaint could be resolved.

Follow up with telephone call	
Follow up letter	
Follow up with other -	

Personal information contained on this form is collected pursuant to PIPEDA and will be used for the purpose of responding to your complaint and will be retained by NWCHC in accordance with our retention policies. Questions about this collection should be directed to the Privacy Officer.

If we do not resolve your questions or complaint to your satisfaction, you may address your concerns to:

Privacy Officer Information and Privacy Commissioner/Ontario 2 Bloor Street East, Suite 1400 Toronto, Ontario M4W 1A8

Phone: (416) 326-3333 Toll-free: 1-800-387-0073 Fax: (416) 325-9195 Website:www.ipc.on.ca