Patricia Jones-Greenhalgh Executive Director of Adult Care Services

Our Ref Your Ref Date Please ask for Direct Line Direct Fax E-mail

Sharon Wells 0161 253 5421 0161 253 5494 s.wells@bury.gov.uk Complaints Section Business Re-design & Development Division

Harry Downie Assistant Director (Business Re-design & Development)

CONSENT FORM

CONSENT TO SHARE INFORMATION WITH ELECTED MEMBERS AND MEMBERS OF PARLIAMENT ON BEHALF OF CONSTITUENTS WHO HAVE RAISED CONCERNS AND SPECIFIC ISSUES

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give my consent for MI	^y /COUNCILLOR to
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act on my behalf in relation to concerns I have raised with him/her. I give my

permission for information held by the Council in respect of myself

to be shared with him/her for the purpose of responding to the concern(s) I have

raised

SIGNED:	•••	•••	• •	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•	•					
DATED:				-																								



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