

## ETHICS COMPLAINT

Complainant Name: Address: City, State, Zip Code: Phone Number: Email:					
Relationship to Town of Ossinin	g (circle all that ap	oply): RES	IDENT	EMPLOYEE	PROPERTY
OWNER BUSINESS O	WNER LESS	EE OF PROPER	TY CONTI	RACTOR	
Please provide a detaile constituting an alleged violation(the Department/Job Title of this note any proof, documents or extended to the control of the	s) of the Code of I Fown employee(s)	Ethics, the identite and, if possible,	y of all indi a date, time	vidual Town empe, place of the alle	ployee(s) involved,
2) If known, please referer http://ecode360.com/6422516.)	ace the Town Ethic	es Law in questio	n. (Town E	thics Law can be	found at
3) Please provide any addi additional pages, if necessary.)	tional comments t	hat would be help	oful in inves	tigating your cor	nplaint. (Attach any
Has this matter been referred to a Is there a pending legal action you If yes, which agency/?			es No Yes No		_
I, being duly sworn, have read th of my knowledge, information ar information may constitute a crir	nd belief, believe i	t to be true. I also	understand	the intentional s	
Complainant					
Sworn to before me this day of _					
Notary Public				<del></del>	

Completed form with any supporting documentation shall be submitted to the Town Clerk's office for transmittal to the Chairperson of the Board of Ethics.