Board of Ethics Complaint Form

1. Have you read the City of St. Marys Code of Ordinance Article VIII, titled ETHICS, section 2-351—2-385.  
   YES______  NO______

2. Person Charged. _____________________________________________________________
   Title. _____________________________________________________________

3. Identify the provisions of the City’s Ethics ordinance that is the subject of this complaint.
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

4. Please provide a detailed description of the potential conflict, issue or problem. (Please include all facts, including any documents or other evidence, that support your allegations.) Please provide the names and contact information for those witnesses with direct knowledge of the situation and related documents.
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

   (Additional pages may be added as required along with any attachments to be submitted)
   Additional pages included:  YES______  NO______

5. Deliver to the Mayor’s Office (or the Mayor Pro Tem if the complaint regards the Mayor) in a sealed envelope marked “PERSONAL & CONFIDENTIAL” ATTENTION: BOARD OF ETHICS.
6. OPTIONAL INFORMATION: (Lack of contact information may prevent the Board of Ethics from communicating the final results of the Complaint to the submitter of the Complaint.)

Print Name: ______________________________ Telephone No. ______________________

Address: ______________________________________________________________________

Signature: ___________________________________ Date: __________________________