



**CITY OF EAST POINT
ETHICS BOARD COMPLAINT FORM**

C/O City Clerk
1526 E. Forrest Avenue, 4th Floor
East Point, GA 30344
404-270-7100

For Internal Use: Date Stamp: Complaint #: _____

ALLEGING A VIOLATION OF THE EAST POINT ETHICS POLICY

I. FORM FOR WRITTEN COMPLAINT: Each complaint filed with the Board shall be in writing and notarized by the party filing the complaint. Each complaint shall state with specificity the following:

- The name and address of the person filing the complaint;
- The name and address of the party against whom the complaint is filed;
- A clear and concise statement of facts upon which the complaint is based;
- A reference to the applicable code sections of the City Ethics Policy deemed to be violated;
- Any other information to support the allegations, including documents, names, dates, times, places, actions, and any other information or persons showing or having knowledge of the facts to support the allegations.
- All exhibits must be clearly labeled and legible;
- All exhibits must be referenced in the complaint;
- The complaint number will be issued by the clerk, use this number for future references;

II. PERSON BRINGING COMPLAINT:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: () _____ (Cell): _____

III. PARTY AGAINST WHOM COMPLAINT IS BROUGHT:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: () _____ (Cell): _____

Title of office held or sought. (If applicable) _____

IV. STATEMENT OF FACTS:

State in your own words the detailed facts and the actions of the party named in Paragraph II upon which the complaint is based. Please identify the facts of the allegation that constitute one or more violations of the Ethics Policy of the City of East Point. The brief space provided below is not intended to limit your statement of facts. (Use additional sheets if necessary)

