Code of Conduct Formal Complaint Form and Affidavit

Complainant Information			
Name:			
Mailing Address:			
City:	Province:		Postal Code:
Home Telephone:	Cell Number:		
Email address:			
Please note that it is an offence unde			
,			unicipality of residence) in the
Province of Ontario make oath a	nd say (or affirm)):	
1. I have personal knowledge of attended a meeting at which etc.)		out in this affidav	it. (insert reasons e.g. I work for I
date, time and location of conduc	. The particulars	are as follows: (I	_ (specify section(s)) of the Code of Please provide information such as including witnesses, and information
as to how they can be reached. <i>I</i>	Attach additional	pages il necessa	ily.).
 This affidavit is made for the p improper purpose. 	ourpose of reques	sting that this ma	tter be investigated and for no
SWORN (or AFFIRMED) before	me at the (Town	, Municipality, etc	c)
in the Province of Ontario on the		у	
		Signatur	e (to be witnessed by Commissioner)
A Commissioner, etc.			