

ETHICS VIOLATION COMPLAINT FORM

Complete the below information and email to ethics@madisonvillegov.com

To the best of my knowledge, information and belief formed after reasonable reflection, I believe that the information given in this inquiry is true. I request the City of Madisonville Ethics Board to evaluate the information given here and to take appropriate measures in accordance with the procedures outlined in the City of Madisonville Ethics Code, ordinance no. 1994-32 and amended in 2019-4.

Printed Name of Person Filing Complaint: _____

Home or Work address of person filing complaint:

Home or Work telephone number of Person Filing Complaint: _____

Name of City officer, official, or employee that I wish the City of Madisonville Ethics Board to review:

Position or job title (if known): _____

Department or Agency Work Address (if known): _____

Work telephone (if known): _____

Please note: If you wish to file an inquiry about more than one person, you must file a separate inquiry form (and any attachments) for each person.

Please describe the facts that you believe constitute a violation of the City of Madisonville Code of Ethics in sufficient detail so that the Ethics Board and the person who is the subject of the inquiry can understand the nature of the alleged violation. Give as much detail as possible, including approximate dates, names, and section of Ethics Ordinance that has been violated, etc. Add extra sheets if needed and attach copies of any pertinent documents.

Signature of Person Filing Complaint

DATE