

Residence address (Street, City, State and Zip Code)

County

Business address (Street, City, State and Zip Code)

County

PART C -- DESCRIPTION OF COMPLAINT

Provide a statement of the facts upon which your complaint is based. Describe the events in the order in which they occurred. Keep dates of events in sequence. Include full names, addresses and phone numbers of all individuals involved, including any witnesses present when alleged violations took place. Be factual; the information you provide in this statement must be based on facts and not on personal conjecture. Try to answer the questions "who", "what", "where", and "when". Attach extra sheets if more space is needed.

PART D -- CODE VIOLATIONS

List the sections and paragraphs of the Code of Ethics' provisions you believe have been violated:

I CERTIFY THAT I HAVE READ THIS COMPLAINT, I FULLY UNDERSTAND ITS CONTENTS, AND I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF TEXAS THAT THE FOREGOING STATEMENTS AND PHOTOCOPIES OF ATTACHED DOCUMENTS ARE TRUE AND CORRECT. I UNDERSTAND THAT A COPY OF THIS COMPLAINT WILL BE SENT TO THE CHAIR OF THE ETHICS ADVISORY COMMISSION AND TO THE INDIVIDUAL CHARGED IN THIS COMPLAINT. ALL PAPERS AND COMMUNICATIONS RELATING TO A COMPLAINT MUST BE TREATED AS CONFIDENTIAL TO THE EXTENT ALLOWED BY LAW.

Signature

Before me the undersigned authority, on the _____ day of _____, 200____, personally appeared, _____, known to me to be the person whose name is subscribed hereto, and being duly sworn stated that he/she has personal knowledge of the facts hereinabove and that such facts are true and correct.

Notary Public

<NOTARY SEAL>

County, Texas

My Commission expires:

Special Note: Section 3.2 of the Ethics Advisory Commission Rules of Procedure states that, "an amended complaint may only be filed within seven days after the city secretary's receipt of the original complaint"

Should you have any questions concerning this form, please contact the City Secretary's Office, at (214) 671-8970 during regular business hours (8:15am – 5:15pm).

Upon completion of **ALL** sections of the complaint form, please hand deliver or send by certified mail with any attachments to:

Office of the City Secretary
CITY HALL
1500 Marilla Avenue – Suite 5DS
Dallas, TX 75201