

## Town of Ingersoll Council Code of Conduct Complaint Form and Affidavit

## Filing a Code of Conduct Complaint

- 1. The Code of Conduct applies to all Members of Council, advisory committees and member of local boards of the municipality (as defined in the *Municipal Act*).
- 2. A complaint that a Member has contravened a Code of Conduct must be submitted to the Clerk of the Town of Ingersoll to be filed with the Integrity Commissioner for investigation.
- 3. In accordance with subsection 2234(9) of the Municipal Act, no complaint that a Member has contravened the Code of Conduct may be submitted by any person during the Election period, which starts on Nomination Day and ends on Voting Day in a regular election year.
- 4. This complaint form must be submitted with a sworn affidavit (section 3) attesting to the facts that the Complainant is alleging. An affidavit must be signed and sworn or affirmed before the Town Clerk, a Deputy Clerk, a Notary Public or a Commissioner for Taking Affidavits.

Section 1: Complainant Contact Information					
Full Legal Name:					
Address:					
Primary Phone Number:		Alternate Phone Number			
Email Address (optional):					
Section 2: Code of Conduct Contravention Details  Name(s) of Member(s) who you believe have contravened provisions of the Council Code of  Conduct:					
Using the space below, clearly outline all of the reasons why you believe the Member has contravened the Council Code of Conduct and include applicable dates, times and locations as well as specific provisions of the Code you believe that have been breached. Any supporting documents or evidence that you wish to provide should be listed and attached to this Form.					
Date of alleged contraventi	ion:				
Provision(s) of Code of Col	nduct allegedly contravened	:			

The personal information collected on this form is collected under the authority of sections 223.1 to 223.8 of the Municipal Act, 2001, as amended. The information will be provided to enforce the Code of Conduct and shall be shared with the Integrity Commissioner and any persons the Integrity Commissioner deems necessary as part of his/her investigation.



Names and contact information of any w	itnesses:	
Section 3 - Affidavit of Complainant		
I,Complainant Name	of the	of
Name of Town/City	n the c	Nome of County
Name of Town/City	COLINIV	Name of Colliniv
	County	realite of Oddity
DO SOLEMNLY DECLARE THAT:	County	Name of County
DO SOLEMNLY DECLARE THAT:  All of the statements contained in this Co	omplaint Form are true and I mak	e this solemn declaration
DO SOLEMNLY DECLARE THAT:	omplaint Form are true and I maked I knowing that it is of the same fo	e this solemn declaration
DO SOLEMNLY DECLARE THAT:  All of the statements contained in this Coconscientiously believing it to be true and	omplaint Form are true and I maked knowing that it is of the same fo Evidence Act.	e this solemn declaration
DO SOLEMNLY DECLARE THAT:  All of the statements contained in this Coconscientiously believing it to be true and under Oath and by virtue of the Canada	omplaint Form are true and I maked I knowing that it is of the same fo	e this solemn declaration
DO SOLEMNLY DECLARE THAT:  All of the statements contained in this Coconscientiously believing it to be true and under Oath and by virtue of the Canada	omplaint Form are true and I maked knowing that it is of the same for Evidence Act.  Signature of Complainant	e this solemn declaration rce and effect as if made
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