



Official Use Only:
Date Received:

VERMONT STATE MUNICIPAL ETHICS COMMISSION COMPLAINT FORM

The Vermont State Ethics Commission has authority to accept, review, refer, and track complaints regarding alleged violations of governmental conduct regulated by law, the Department of Human Resources Code of Ethics, and the State's campaign finance law set forth in 17 V.S.A. Ch. 61. 3 V.S.A. § 1221(a).

Anonymous complaints cannot be accepted. 3 V.S.A. § 1223(a)(2).

Your Contact Information

Type or print clearly

Your name: _____

Address: _____

City/Town: _____

State: _____ Zip: _____ Email: _____

Telephone(s): _____

Attach additional pages as necessary.

1. Who is this complaint against? Name, job title or position. **Please file a separate complaint for each individual you complain against.**
2. Date(s) the alleged violation(s):

3. How has this person violated governmental conduct governed by law, ethics provisions, or campaign laws? Describe fully. Be specific and provide as much detail as possible. Attach any documentation that supports your claim.

4. If you can, please indicate which law, rule or other legal requirement you believe has been violated.

5. Provide the names and contact information for anyone else who may have information regarding this complaint.

6. Has the conduct you describe above been the subject of a prior complaint? If yes, please explain.

7. Is there anything else the Ethics Commission should know about this complaint?

Attach additional pages as necessary.

I certify that the information provided in this complaint is true, correct, complete, and of my own personal knowledge. I will fully cooperate in the process regarding this complaint.

_____ Date: _____
 (Signature)

Submit by email to: ethicscommission@vermont.gov Enter "Complaint" in subject
If you wish to submit your complaint by regular mail, please email or call first at (802)828-7187