Affidavit of Complainant

I	of the of	f of _		
	[Full legal name] of the of	[City, Town etc.]	[Name of Municipality]	
in the Province of Ontario, make oath and say (or affirm):				
1.	I have reasonable grounds to believe t	hat [Name of Memb	, a Member of Council/Local Board, per]	
	has contravened the following provisions of the Code of Conduct			
	[List specific section(s) of the Code of Conduct]			
2.	The particulars of this belief are outlines in the attached form Schedule "A" as applicable to this my affidavit.			
	[on Schedule A, the Complainant should clearly outline all the reasons why you believe the Member of Council/Local Board has contravened the Code, including applicable date(s), time(s) and location(s). Any supporting documents and evidence that you wish to provide should be listed in Schedule A. Additional Schedule A pages can be added as required and marked Exbibit A, B, etc.]			
3.	. That I make this affidavit in support of my formal complaint that the named Member of Council/Local Board has contravened the Code and for no improper purpose.			
Sworn	n (or Affirmed) before me at the			
Name	e of Municipality]			
In the	Province of Ontario on this day			
of	[month],[year	- C	Complainant's Signature	
A Con	mmissioner for Taking Affidavits, etc.			

Personal Information Collection Notice

Personal information collected on this form is collected under the authority of section 10(1), 223.1 and 223.8 of the *Municipal Act*, 2001, as amended, and will be used by the Integrity Commissioner to carry out an investigation under the Act. This form will be shared with the Integrity Commissioner and may be shared by the Integrity Commissioner with any persons the Integrity Commissioner deems necessary as part of any in esti ation Questions regarding the collection of personal information on this form can be directed to the Clerk for the onship of illies

SCHEDULE "A"

INTEGRITY COMMISSIONER REQUEST FOR INQUIRY CODE OF CONDUCT

This form will be used to request the Integrity Commissioner conduct an inquiry of an alleged Code of Conduct contravention	Submit this form with the above affidavit directly to the Municipal Clerk
REQUESTOR'S INFORMATION	
Last Name:	
Street Address:	
Postal Code:	
E-mail Address:	r w jiring
Facts constituting the alleged Code of Conduct	contravention (please use separate page(s) if required)
Name(s) and contact information of any witness	es:
I agree to release my identity with regard	to this request
I do NOT agree to release my identity wi	th regard to this request Date:
	Year: Month: Day:
FOR OFFICE USE ONLY	
Date Received Request #: Year: Month: Day:	Comments:
Personal information contained on this form is called and Protection of Privacy Act and will	collected under the authority of the Municipal Freedom of the used for the purpose of requesting an inquiry.