



Complaint of Violation of Code of Ethics

Please provide the information requested below and attach additional sheets if necessary:

1. Identify the person who is alleged to have violated the Ethics Code.

Name: _____
Title or Position: _____

2. Specific Code of Ethics Violation: **Section 2.50.030** ____ [insert applicable subsection's letter]
Go to <https://www.waterfordct.org/> (click on Ordinances/Policies) or contact the Town Clerk for a hard copy of the Ethics Code.
3. Provide a detailed explanation of the nature of the violation. Include dates, places and corroborating witnesses or documents, if any.

Signed by: _____ **Date:** _____

Print Name: _____ Email: _____

Address: _____ Telephone: _____

So acknowledged this ____ day of ____ before me:
date month year

Witnessed by: _____ **Position:** _____

Print Name: _____

Witness must be (1) a judge of a court of record, (2) a clerk or deputy clerk of a court having a seal, (3) the town clerk, (4) a notary public, (5) a justice of the peace, or (6) an attorney admitted to the bar of this state.

Mail or hand-deliver completed form to Ethics Commission c/o Town Clerk, 15 Rope Ferry Rd, Waterford CT 06385