

Municipality of Chatham-Kent Integrity Commissioner Compliant Form

Submit completed complaint and \$25.00 filing fee in a sealed envelope to: Judy Smith, Municipal Clerk, 315 King Street West, P.O. Box 640, Chatham ON N7M 5K8. 519.360.1998 Ext # 3200. email: judys@chatham-kent.ca

Requestor Information:

Last Name:		First Nam	e:	
Street Address:		Municipal	ty / City:	
Postal Code:		Phone #:		
E-mail Address:				
Details of Alleged Contravention	of Council	Code of C	Conduct:	
*Facts constituting the alleged corpossible clearly indicate names, d				
*Name(s) and contact information of any witnesses:				
*Please use additional paper and attach to this form if necessary. Signature: Date:				
Olgridiano.		Year:	Month:	Day:
FOR OFFICE USE ONLY: Date Received by: Year: Month: Day:	Complaint #:		Comments:	
Personal information contained on thi Freedom of Information and Protection responding to a complaint review.	on of Privacy .	Act and will	be used for the purpo	se of
Names and facts of this process will be made public through reports and decisions issued by the				

Integrity Commissioner. As per section 19 (c) (v) of the Code of Conduct for Members of Council, the Integrity Commissioner has the authority to keep confidential any names or facts that would

identify witnesses where it is in the interest of a just and fair result to do so.