



## Board of Ethics

# Charter Township of Clinton Board of Ethics

### COMPLAINT FORM

**Before filling out this form, please read the following:**

- Complete all sections of the complaint form. Incomplete forms will not be processed.
- Give the specific name and township position of the individual about whom you are complaining. If you are filing a complaint about the conduct of more than one individual, a separate complaint form must be completed for each individual.
- Provide a detailed account of the activity that is alleged to be in violation of the ethics policy.
- The Board of Ethics jurisdiction extends solely to alleged violations of the Clinton Township Ethics Policy. The Board has no authority to investigate personnel matters or matters for which other remedies exist. These include grievances, appointments, promotions, reprimands, suspensions, dismissals, harassment, and discrimination.
- The issue(s) subject to the complaint process must have occurred within one (1) year from the date of the alleged violation.
- Complaints must be submitted on this form by mail or e-mail to one of the addresses listed below.

Case No. \_\_\_\_\_  
(Official Use Only)

**Please return this completed form to:**

**Board of Ethics  
Charter Township of Clinton  
CO /Administrative Assistant  
40700 Romeo Plank Rd.  
Clinton Township, MI 48038**

**Or via email to:**

[ethics@clintontownship-mi.gov](mailto:ethics@clintontownship-mi.gov)

If you have questions about this form, or would like to request the form in an alternate format for the visually impaired, contact the Board of Ethics at (586) 723-8008 or write us at the above address. We will take reasonable steps to accommodate your needs.

**Your contact information:**

Complainant Name (Full Name)	Date
Home or Mailing Address	Home Telephone Number
E-mail address	Work Telephone Number

**Alleged Violation**

Identify the Clinton Township official the complaint is against.

Name
Township Position

What is your association or affiliation to the person you are filing a complaint against? \_\_\_\_\_

Type of ethics violation(s) you are reporting:

- \_\_\_\_\_ Financial interests and/or transactions incompatible with public duties
- \_\_\_\_\_ Misuse of privileged confidential information
- \_\_\_\_\_ Receipt of special privileges
- \_\_\_\_\_ Compensation for official duties or for nonperformance
- \_\_\_\_\_ Engagement in outside activities or employment incompatible with public duties and responsibilities
- \_\_\_\_\_ Inappropriate use of Township time and property for political activity
- \_\_\_\_\_ Receipt of gifts and gratuities
- \_\_\_\_\_ Use of public resources and/or assets for private purposes
- \_\_\_\_\_ Other – Explain: \_\_\_\_\_

Date and Time Alleged Violation(s) occurred: \_\_\_\_\_

Location and/or Address (if applicable): \_\_\_\_\_

Description of Ethical Violation(s):

Please explain the complaint fully, providing a detailed description of the facts and the actions of the person named on page 2 of this form. If insufficient space is provided, additional sheets may be attached.

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**Supporting Documents:**

Identify below any supporting documents (i.e. emails, contracts, photographs, invoices, and audio/visual recordings). Attach all supporting documents to this form. Include relevant names and addresses of persons whom you believe may be witnesses the violation and include a brief summary of what the complainant believes the witness will attest. If insufficient space is provided, additional sheets may be attached.

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How do you know about the information you are reporting?

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I swear or affirm that the facts set forth in this complaint are true and correct to the best of my knowledge and belief.

Complainant's Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Adopted by Board of Ethics: October 2, 2019

Approved by Board of Trustees: