



Please explain your complaint fully, if insufficient space is provided additional sheets may be attached, providing a detailed description of the facts and the actions of the person(s) named on page 1 of this form. Include relevant dates and the names and addresses of persons whom you believe may be witnesses.

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Identify below any supporting documents, i.e. Emails, contracts, photographs, invoices, statements of witnesses, and audio/visual recordings. Attach all supporting documents to this form.

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Please Read the statement below, sign and date:

I, \_\_\_\_\_, hereby acknowledge that making a false statement herein is punishable as a misdemeanor under section 210.45 of the New York State Penal Law

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

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

Complainant's Name Printed: \_\_\_\_\_

**NOTICE: It shall be unlawful for any person to make a complaint or threaten to make a complaint to the Committee against a public servant, or to offer to withdraw a complaint against a public servant, in order to improperly influence that public servant's vote, opinion, judgment, action, decision or exercise of discretion as a public servant. Such conduct will constitute a violation punishable by a fine of not more than \$1,500.**