

City of Meadow Vale

ETHICS VIOLATION COMPLAINT FORM

To the best of my knowledge, information and belief formed after reasonable reflection, I believe that the information given in this inquiry is true. I request the City of Meadow Joint Board of Ethics to evaluate the information given here and to take appropriate measures in accordance with the procedures outlined in Ordinance #20, Series 2019-2020.

Printed Name of Person Filing Complaint:

Home/work address of Person Filing Complaint:

City, State, Zip code

Home/work telephone of Person Filing Complaint:

City officer, official, or employee that I wish the City of Meadow Vale Joint Board of Ethics to review:

Name of City officer, official, or employee:

Name Position or job title (if known):

Department or Agency Work Address (if known):

Work telephone (if known):

Please note: If you wish to file an inquiry about more than one person, you must file a separate inquiry form (and any attachments) for each person. Please describe the facts that you believe constitute a violation of the City of Meadow Vale Code of Ethics in sufficient detail so that the Joint Board of Ethics and the person who is the subject of the inquiry can understand the nature of the alleged violation. Give as much detail as possible, including approximate dates, names, etc. Add extra sheets if needed and attach copies of any pertinent documents.

Signature of Person Filing Complaint

Date

NOTE: A copy of the inquiry will be sent to the person who is the subject of the inquiry and may be made available to the public.

Mail completed form to: City of Meadow Vale, Att: City Clerk, Confidential, PO Box 22292, Louisville, KY 40252-0292