

APPENDIX "B"

**Council Code of Conduct for Elected or Appointed Officials  
Formal Complaint Form/Affidavit  
Township of Minden Hills**

|                                |              |              |
|--------------------------------|--------------|--------------|
| <b>Complainant Information</b> |              |              |
| Name:                          |              |              |
| Mailing Address:               |              |              |
| Town/City:                     | Province:    | Postal Code: |
| Home Telephone:                | Cell Number: |              |
| Email Address:                 |              |              |

Affidavit  
of \_\_\_\_\_

(full name)

I, \_\_\_\_\_ of \_\_\_\_\_  
(full name), (City, Town, etc.)

in the County/District/Region of \_\_\_\_\_ in the Province of  
Ontario

Make Oath and Say (or affirm):

1. I have personal knowledge of the facts as set out in this affidavit, because

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(insert reasons e.g. I work for... I attend a meeting at which.....etc.)

2. I have reasonable and probable grounds to believe that a member of the  
Township of Minden Hills Council/Committee, Member  
\_\_\_\_\_ (specify name of member) has contravened section(s)  
\_\_\_\_\_ (specify section(s)) of the Council Code  
of Conduct for the Township Minden Hills for Elected or Appointed Officials.

The particulars of which are as follows: (set out the statements of fact in  
consecutively numbered paragraphs in the space below, with each paragraph  
being confined as far as possible to a particular statement of fact. If you require  
more space please use the attached Schedule B.1 form (Additional Information  
form).



