

APPENDIX "B"

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

Complainant Information		
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).

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

3. This Affidavit is made for the purpose of requesting that this matter be reviewed by the Township of Minden Hills appointed Integrity Commissioner and for no other purpose.

Page 20

