



CITY OF NORTH BATTLEFORD
“Schedule A”
Code of Ethics for Members of Council
Formal Complaint Form

Please note that knowingly signing a false affidavit may expose you to prosecution under the Criminal Code of Canada.

I _____ of _____,
(First and Last Name) (Full mailing address)

do solemnly swear/ (affirm and declare) that the following contents of this statement are true and correct and hereby request the council of the City of North Battleford to (*look into/ conduct an investigation/ inquiry/ follow-up on*) whether or not the following member(s) of the City Council has (have) contravened the Code of Ethics:

Member(s) of council name(s)

I have reasonable and probable grounds to believe that the above member(s) has (have) contravened the Code of Ethics by reason of the following:

1. insert date(s), time and location of conduct;
2. include the sections of this bylaw that have been contravened;
3. provide the particulars and names of all persons involved, and of all witnesses;
4. provide contact information for all people listed;
5. any exhibits can be attached; and
6. if more space is required, please attach additional pages as needed.

(Signature of Complainant)

(Date signed)

For Office Use Only

(Date filed)

(Signature of _____ (i.e. Municipal administrator, City Clerk, or other applicable position pursuant to Code of Ethics for Members of Council bylaw.