

APPENDIX A  
**MANITOWOC COUNTY  
 ETHICS COMPLAINT**

COMPLAINANT INFORMATION	
FIRST NAME	MIDDLE INITIAL
LAST NAME	
ADDRESS/PO BOX	
ADDRESS	
CITY, STATE, and ZIP CODE	
TELEPHONE NUMBER	
EMAIL ADDRESS	

RESPONDENT INFORMATION
NAME OF PUBLIC OFFICIAL
POSITION OR JOB TITLE
BOARD, COMMISSION, COMMITTEE, COUNCIL, OR DEPARTMENT
WORK ADDRESS
CITY, STATE, and ZIP CODE
WORK TELEPHONE NUMBER (If Known)
EMAIL ADDRESS (If Known)

ALLEGED VIOLATION		
<p>I have checked each section of the ethics code and, where indicated, written in the number of each subsection of the section of the ethics code that I believe the Respondent has violated:</p>		
<input type="checkbox"/> 30.07 Campaign Contributions <input type="checkbox"/> 30.08 Confidential Information <input type="checkbox"/> 30.09 Conflict of Interest <input type="checkbox"/> 30.10 Contracts with County <input type="checkbox"/> 30.11 Employment, Other Business Activity, and Service <input type="checkbox"/> 30.12 Fair and Equal Treatment <input type="checkbox"/> 30.13 Gifts and Favors	Subsec. _____ Subsec. _____ Subsec. _____ Subsec. _____ Subsec. _____ Subsec. _____ Subsec. _____	<input type="checkbox"/> 30.14 Influence Peddling <input type="checkbox"/> 30.15 Judicial Contact <input type="checkbox"/> 30.16 Legislation <input type="checkbox"/> 30.17 Permits and Licenses <input type="checkbox"/> 30.18 Personal Service <input type="checkbox"/> 30.19 Political Activity <input type="checkbox"/> 30.20 Public Property <input type="checkbox"/> 30.21 Travel Expenses
Date the violation began:	Date of the most recent violation:	Date first learned of the violation:

BRIEF DESCRIPTION OF CONDUCT ALLEGED TO VIOLATE THE ETHICS CODE
If more space is needed, please attach additional 8½ x 11" pages.

VERIFICATION	
<p>I swear or affirm that I have read the complaint, that I have direct personal knowledge of the facts alleged in the complaint, that the statements I have made are true and correct to the best of my knowledge, information, and belief, and that the complaint is not being filed for any improper purpose, such as to harass the person against whom the complaint is made.</p>	
Subscribed and sworn to before me on this _____ day of _____ 20 _____.  _____ Notary Public, State of Wisconsin My commission <input type="checkbox"/> is permanent. <input type="checkbox"/> expires _____.	_____ <b>COMPLAINANT'S SIGNATURE</b>

## INSTRUCTIONS FOR COMPLETING ETHICS COMPLAINT

The information that you provide on the complaint form is necessary for the Ethics Board to hear your complaint. It is important that you follow these instructions when completing the complaint form. Incomplete forms may not be processed unless you provide further information.

Use black or blue ink. Type or write legibly. If you make an error, draw a line through the error and initial the change. Do not use eraser or whiteout to make corrections. Write on only one side of the complaint form and any additional pages.

If you have any questions about how to complete the complaint form, please call the Manitowoc County Corporation Counsel's office at 920-683-4062. Return your completed complaint form to:

Manitowoc County Corporation Counsel  
1010 South Eighth Street, Room 308  
Manitowoc, Wisconsin 54220

### COMPLAINANT INFORMATION

You must provide your legal name, address, and telephone number. Include your email address if you have one.

### RESPONDENT INFORMATION

You must provide the name of the public official against whom you are filing the complaint. If you know the official's job title, department, work address, telephone number, and email address, you must provide that information. If your complaint is against more than one public official, you must complete a separate complaint form for each official.

### ALLEGED VIOLATION

Check the box for each section of the ethics code that you allege has been violated. If space is provided for a subsection following the section number and title, you must write in the number for each specific subsection that you allege has been violated. Write in the date that the alleged violation began, the date of the most recent violation, and the date that you first learned of the violation in the three boxes that are provided.

### BRIEF DESCRIPTION OF CONDUCT ALLEGED TO VIOLATE THE ETHICS CODE

Provide a short, factual statement describing the action taken by the public official named in your complaint that you allege violates each section of the ethics code that you have identified. Be sure to include the dates on which the alleged violations occurred. If any allegation in the complaint is not based on your own direct knowledge, you must identify and provide the basis for any allegation that is made upon information and belief.

Attach copies of any documents that support your allegations to the complaint. Do not send original documents, because the documents will not be returned to you.

Describe any documents or other materials that support your allegations but that you are not able to attach to the complaint. Indicate where these additional documents or other materials are located.

Include the names and addresses of any witnesses or persons having knowledge of facts that support your allegations.

If you need more space, continue your statement on additional 8½ x 11 - inch pages, making sure that each page is numbered so that it can be kept in the proper order.

### VERIFICATION

You must sign the complaint in the presence of a notary public and have your signature notarized. Your signature verifies that you have read the complaint, that you have personal knowledge of the facts, and that the statements you have made are true. It is unlawful to file a false complaint or to file a complaint for the purpose of harassment.