



BOARD OF ETHICS

Ethics Violation Complaint Form

Please refer to [Ordinance 233 of the City of Mason Code](#). All fields must be completed, or the complaint will not be considered.

Send completed form to: City of Mason Ethics Board
c/o City Clerk
201 W Ash St
Mason, MI 48854

Complainant Information:

Name: _____ Phone: _____

Address: _____

Email: _____

Identify the person about whom you are filing this complaint:

Name: _____ Position or Title: _____

What section of the Code of Ethics do you believe has been violated?

Explain in detail why you believe the individual named above violated the Code of Ethics: (attach additional pages or any other materials that support your allegations if necessary)

Signature of Complainant: _____ **Date:** _____

For Office Use Only: Received By: _____ **Date:** _____

Revised 3.22.21 (Board of Ethics)