

CITY OF ESSEX JUNCTION MUNICIPAL ETHICS COMPLAINT FORM

City of Essex Junction January 1, 2025

ATTN: Designated Complaint Recipient

State law (24 V.S.A. § 1997) requires municipalities to enact procedures to 1) investigate complaints that allege a municipal officer has violated the Municipal Code of Ethics, and 2) to enforce against substantiated complaints, including developing methods of enforcement and available remedies.

Your Contact Information

Type or print clearly

Your name (complaints can be anonymous):						
Ad	Address:					
М	unicipality:					
State:		Zip:	Telephone(s):			
			E-mail:			
1.	•	aint against? Name n individual you com	e, and job title or position. Please file a se nplain against.	parate		
2.	Date(s) of the alle	ged violation(s):				

3. How has this person violated the City of Essex Junction's Municipal Code of Ethics? Describe fully. Be specific and provide as much detail as possible. Attach any documentation that supports your claim(s).

4.	If you can, please indicate which law, rule, or other legal requirement you believe has been violated.
5.	Provide the names and contact information for anyone else who may have information regarding this complaint.
6.	Has the conduct you describe above been the subject of a prior complaint? If yes, please explain.

Is there	anything else the Designated Complaint Recipient should know about this int?
	Attach additional pages as necessary.
rtify tha	at the information provided in this complaint is true, correct, complete, and of m
n persor	nal knowledge. I will fully cooperate in the process regarding this complaint.
nature: _	
e:	
-	email to: cdwyer@essexjunction.org.
er "Com	nplaint" in subject line OR by USPS mail to: (2 Lincoln St. Essex Junction, VT 0545.

Attn: Human Resources Director