

COMPLAINANT INFORMATION	
Name:	
Tel. No. (Home):	Tel. No. (Cell):
Address:	
Town:	_Postal Code:
E-mail:	

Formal complaints can be submitted to the City Clerk which would then be forwarded to the Integrity Commissioner. Please mail, e-mail (clerks@timmins.ca), or otherwise deliver this request to:

Integrity Commissioner: ADR Chambers C/O the City of Timmins 220 Algonquin Boulevard East Timmins, ON P4N 1B3
Attention: City Clerk CONFIDENTIAL

Following is the contact information for the Integrity Commissioner should you choose to submit your complaint directly to them. Please e-mail (integrity@adr.ca), Fax (1-877-862-8825 or 416-362-8825) or mail to the following:

Office of the Integrity Commissioner ADR Chambers Inc. 180 Duncan Mill Road, 4th Floor Toronto, ON M3B 1Z6

It is recommended that an informal complaint be submitted prior to a formal complaint.

IN THE MATTER OF A FORMAL CODE OF CONDUCT COMPLAINT

l,	(name)	, in the district of Cochrane
and the Province of Ontario he	eby request the Integrity Commission	oner for the City of Timmin

to conduct an inquiry pursuant to Part V.1 of the Municipal Act, 2001 about whether or new	ot the	
following member(s) of Council has (have) contravened the Council Code of conduct applicable		
to the member(s): (Councillors na	ame(s)).	
I have reasonable and probable grounds to believe that the above member(s) has (have	•)	
contravened the Council Code of Conduct on(date	e). at	
(hour) at(lo		
The Rules contravened, together with particulars and names of all persons involved, and witnesses, and information as to how they can be reached is as follows:	d of all	

I hereby request the Integrity Commissioner to conduct an inquiry pursuant to the provisions of section 223.4 of the *Municipal Act, 2001* with respect to the above conduct.

I am hereby submitting this Code of Con	duct Complaint Form with all relevant details along with		
copies of documents and records relevant to the requested inquiry and a \$200 filing fee payable			
in cash or certified cheque to the City.			
Date	Signature of Complainant		
SWORN before me at the City of			
Timmins, in the District of Cochrane, this			
Day of, 20			
Signature of Clerk/Commissioner			