

CITY OF JACKSONVILLE ETHICS COMMISSION

117 W. Duval Street, Suite 450

Jacksonville, FL 32202

(904) 255-5510

ethicscommission@coj.net

COMPLAINT FORM

PLEASE NOTE: IF YOU WISH TO REMAIN ANONYMOUS, YOU SHOULD CALL THE ETHICS HOTLINE AT (904) 630-1015.

1. PERSON BRINGING COMPLAINT (Complainant):

Name: _____

Address: _____

City: _____ County: _____ State: _____ Zip: _____

Contact Information (e-mail; phone #s): _____

2. PERSON AGAINST WHOM COMPLAINT IS MADE (Respondent):

State the name, address and contact information of the person whom you believe may have violated the City of Jacksonville Code of Ethics

****Per Complaint Procedures Rule 5(b), only one (1) person/Respondent may be named in each Complaint**

Name: _____

Address: _____

City: _____ County: _____ State: _____ Zip: _____

City position or title: _____

Contact Information (e-mail; phone #s): _____

Have you also filed this complaint with the State Attorney’s Office, law enforcement or any other agency? Yes No. If yes, please list all agencies (on separate sheet of paper attached).

3. ALLEGED VIOLATION(S):

The Ethics Commission has jurisdiction to address only violations of Chapter 602, the Jacksonville Ethics Code. The Ethics Commission cannot address general complaints of unethical behavior. Your Complaint must allege a specific violation of the Jacksonville Ethics Code that you believe was violated by a specific person. You can review Chapter 602, the Jacksonville Ethics Code, on the Ethics Office webpage using the following link: [http://www.coj.net/departments/ethics-office/ethics-code-\(current\).aspx](http://www.coj.net/departments/ethics-office/ethics-code-(current).aspx).

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In a separate attachment, please describe in detail each alleged offense, including the following information:

- √ The provision(s) of the Jacksonville Ethics Code (Section 602) that you believe the person named above may have violated;
- √ The facts and action(s) that you believe support the violation(s) you allege, including the dates when the action(s) occurred;
- √ The names and contact information (e-mail address and telephone numbers) of persons you believe may be witnesses to the facts;
- √ A copy of the documents you mention in your statement or would assist in the investigation of this complaint; and
- √ Other evidence that supports your allegations.

4. OATH

State of Florida
County of _____

I swear or affirm that the above information is true and correct to the best of my knowledge.

Original signature of person bringing complaint

Sworn to and subscribed before me this _____ day of _____, 20_____

Signature of Officer Authorized to Administer Oaths or Notary Public

(Print, type or stamp commissioned name of Notary Public)

Personally know _____ OR Produced Identification _____

Type of Identification Produced _____

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COMPLAINT FORM: INSTRUCTIONS AND PROCEDURES

BACKGROUND

The Jacksonville Ethics Commission was established by the Jacksonville City Council in Jacksonville Ordinance Code section 602.911. Per Ordinance Code section 602.921(a), the Jacksonville Ethics Commission “is authorized to receive, . . . investigate and issue findings” relating to any sworn written complaint alleging a violation of the Jacksonville Ethics Code (Chapter 602 of the Jacksonville Ordinance Code). The Ethics Commission has jurisdiction to address complaints related to the following circumstances:

- (1) Misuse or abuse of city position;
- (2) Conflicts of interest and secondary employment;
- (3) Prohibited gifts; and
- (4) Registration of lobbyists

Upon submission of a Complaint Form, the Director of the Office of Ethics, Compliance & Oversight shall review the Complaint Form to determine compliance with the following requirements:

- (1) only one person has been named as a Respondent in the Complaint Form;
- (2) the Complaint Form has been properly signed under oath by the person submitting the complaint and notarized; and
- (3) the Complaint Form sufficiently alleges facts which, if true, would constitute a violation of the Jacksonville Ethics Code (Chapter 602).

INSTRUCTIONS:

PLEASE read the Ethics Commission Complaint Procedures prior to completing and submitting this Complaint Form to ensure compliance with the procedures. The Complaint Procedures can be found on the Ethics Office webpage at the following link:

<http://www.coj.net/departments/ethics-office/complaint-form>

THIS COMPLAINT FORM MUST BE SIGNED UNDER OATH AND NOTARIZED (SEE PG 2). For additional information or instructions on filing this complaint form, please contact the Ethics Office at (904) 255-5510 or via e-mail at ethics@coj.net

<p>The Ethics Commission’s records and proceedings in a case are confidential until the Ethics Commission rules on probable cause. However, a copy of the complaint will be provided to the person against whom the complaint is brought within ten (10) days of receipt of the complaint.</p>
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SUBMISSION OF COMPLAINT FORM:

Please deliver your completed Complaint Form either in person or by U.S. Mail to the Ethics Office at the address at the top of the Complaint Form. Mark the envelope “confidential.” You may also e-mail the Complaint Form to the Ethics Officer at ethics@coj.net or bring it to a regularly scheduled Ethics Commission meeting (see Ethics Commission webpage at the following link for meeting dates: [http://www.coj.net/departments/ethics-commission/notices,-agendas-minutes-\(1\)](http://www.coj.net/departments/ethics-commission/notices,-agendas-minutes-(1)))