City of Tampa Code of Ethics Complaint Form

City of Tampa Ethics Commission
306 East Jackson St., 7N
Tampa, FL 33602

For Office Use Only

Date Received: _____

File Number: _____

Name of Complainant:	Phone Number:	
Address:		
City:	State:	Zip:

Alleged Violator – Provide the name, title, department, address and telephone number for the person(s) you allege violated the City of Tampa Code of Ethics. If the person is not a City employee (for example, former public official or employee, candidate, or lobbyist) leave the department information blank.

Name:	Phone Number:	
Title:		
Department:		
Address:		
City:	State:	Zip:

Statement of Facts/Type of Allegation – Please explain your complaint fully in the space provided below or on additional sheets as needed. Identify any and all sections of the City of Tampa Ethics Code which you allege have been violated and which, if true, would constitute improper conduct under the provisions of the City of Tampa Ethics Code. Provide a detailed description of the facts and the actions of the person(s) named above. Include relevant dates and the names, addresses, and telephone numbers of the persons who you believe may be witnesses. Attach any copies of documents that may be relevant or describe any other sources of information that relate to the complaint. Continue this information on the next page and additional sheets if needed.

☐ Check if continued on additional sheet(s). Total number of forms including this page_____.

Statement of Facts/Type of Allegation *continued*

When filing this complaint, the complainant acknowledges that they understand the following:
No complaint shall be filed, nor shall the filing of or intention to file such a complaint be disclosed, against a candidate in any city election on the day of any such election or within five (5) days immediately preceding the date of the election (Sec. 2-658(a)).

In any case in which the Commission finds probable cause to believe that a complainant has committed perjury in regard to any document filed with or any testimony given before the Commission, it shall refer such evidence to the appropriate law enforcement agency for prosecution (Sec. 2-658(d)).

Individuals covered by this Code shall not use its provisions to further frivolous claims against another. Frivolous claims shall be those forwarded with knowledge that the claim contains one or more false allegations or with reckless disregard for whether the complaint contains false allegations of fact material to a violation of this Code (Sec. 2-626(d)).

Any person who willfully discloses or permits to be disclosed his intention to file a complaint, the existence or contents of a complaint which has been filed with the Commission, or any document, action or proceeding in connection with a confidential preliminary investigation of the Commission before the same becomes a public record shall be guilty of an offense against the City, punishable as provided in Section 1-6 of the Code (Sec. 2-658(c)).

Notarized Affidavit

I, the person bringing this complaint, do depose on oath or affirmation and say that the facts set forth in the foregoing complaint and attachments thereto are true and correct to the best of my knowledge and belief.

Signature of Complainant _____

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

THE FOREGOING INSTRUMENT was acknowledged before me by means of ☐ physical presence or ☐ online notarization, this _____ day of _____, 20____, by _____, who is personally known to me or who provided _____ as identification.

[AFFIX NOTARY SEAL/STAMP]

_____
Signature of Notary
Name: _____
(Print or Type Name)
Commission Expires: _____