



DISTRICT OF PARRY SOUND

56 ONTARIO STREET
PO BOX 533
BURK'S FALLS, ON
POA 1C0

(705) 382-3332
(705) 382-2954
Fax: (705) 382-2068

Website: www.armourtownship.ca

Council Code of Conduct

Formal Complaint Form/Affidavit

Affidavit of _____ (full name)

I, _____ (full name), of the _____ (City, Town),

_____ (County/District of Residence) in the Province of Ontario.

Make Oath and Say (or affirm):

1. I have personal knowledge of the facts as set out in this affidavit, because

(insert reasons e.g. I work for, I attended a meeting at which, etc.,)

2. I have reasonable and probable grounds to believe that a member of the Township of Armour Council _____ (specify name of member) has contravened section(s) _____ (specify section(s) of the Council Code of Conduct of the Township of Armour.

The particulars of which are as follows: set out the statements of fact in consecutively numbered paragraphs in the space below, with each paragraph being confined as far as possible to a particular statement of fact. If you require more space, please attach additional pages. If you wish to include exhibits to support this complaint, please refer to the exhibits as Exhibit A, B, etc. and attach them to this Affidavit.)



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This affidavit is made for the purpose of requesting that this matter be reviewed by the Township of Armour's appointed Integrity Commissioner and for no other purpose.

Sworn (or affirmed) by me at _____)

_____ (Town, etc.) of _____)

In the Province of Ontario on _____)

_____ (Date)) _____

_____) (Signature)

(Signature of Commissioner)

A Commissioner for taking affidavits etc.

Please note that signing a false affidavit may expose you to prosecution under Section 131, 132 or 134 of the Criminal Code, R.S.C. 1985 c. C-46 and also to civil liability for defamation.