



STATE OF WEST VIRGINIA
WEST VIRGINIA ETHICS COMMISSION
210 BROOKS STREET, SUITE 300
CHARLESTON WV 25301-1804
(304) 558-0664 • FAX (304) 558-2169
ethics@wv.gov
www.ethics.wv.gov

TO WHOM IT MAY CONCERN:

The West Virginia Ethics Commission has jurisdiction over current and former elected and appointed officials, and public employees. The West Virginia Governmental Ethics Acts prohibits these public servants from having an interest in a public contract and from using their positions for personal benefit. The Ethics Commission also has jurisdiction over lobbyists, who are required to comply with the reporting and registration requirements established by the West Virginia Governmental Ethics Act.

To file a complaint against a public servant or a lobbyist, please complete the enclosed forms and return them to the West Virginia Ethics Commission at the above address. Before you complete the forms, carefully read the instructions.

Once we receive your verified complaint, we will send you a letter confirming that we have received your complaint and assigned it a docket number.

After a complaint is filed, the Commission's Probable Cause Review Board screens it to determine whether the complaint states a **material violation** of one of the prohibitions in the Act. If the Review Board accepts a complaint for investigation, it will issue a Notice of Investigation, send a copy of the complaint to the Respondent, and begin its investigation. If the Review Board determines that the complaint contains no material violation of the Ethics Act, then the Review Board will dismiss the complaint without conducting an investigation. If the complaint is dismissed, the Commission will send a copy of the Dismissal Order and the complaint to the Respondent.

If you have any questions, please contact our office.

Sincerely,

The West Virginia Ethics Commission

Date: _____

INSTRUCTIONS

CONTACT INFORMATION & COMPLAINT FORMS

The West Virginia Ethics Commission has jurisdiction over current and former elected and appointed officials, public employees and lobbyists. The West Virginia Governmental Ethics Acts prohibits these public servants from having an interest in a public contract and from using their positions for personal benefit.

There are two forms to complete, one for contact information and one for the complaint. They are provided for your convenience. You are not required to use this form to file a complaint. If you choose not to use this form, please provide all the information requested, especially the name and title or position of the person you are complaining about, and the date(s) the alleged misconduct occurred.

1. Complete the Contact Information form to the best of your ability either by typing the requested information or printing clearly. State the full name and title of the person you wish to make an ethics complaint against. Please provide the person's address and phone number on the contact information sheet, if you know them.
2. Complete a separate Contact Information form and Complaint form for each person you are complaining about.
3. Complete the Complaint form to the best of your ability either by typing the required information or printing clearly.
4. Provide as much detail as possible regarding **specific actions or inactions**. If available, please include copies of relevant documents and names of witnesses (and their contact information), along with as much relevant information you are able to provide based on your personal knowledge or belief.
5. State the date(s) of alleged violations, if known. The Commission may only investigate and prosecute violations that have occurred within two years of the date you file your complaint.
6. Swear to the truth of the statements in your complaint and sign it in the presence of a notary public, in the space provided on the form.
- 7. Mail or hand-deliver your original signed and verified complaint to the West Virginia Ethics Commission, 210 Brooks St., Ste 300, Charleston WV 25301. You may not file a complaint by fax or email.**

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After a complaint is filed, the Commission's Probable Cause Review Board screens it to determine whether the complaint states a **material violation** of one of the prohibitions in the Act. If the Review Board accepts a complaint for investigation, it will issue a Notice of Investigation, send a copy of the complaint to the Respondent, and begin its investigation. If the Review Board determines that the complaint contains no material violation of the Ethics Act, then the Review Board will dismiss the complaint without conducting an investigation. If the complaint is dismissed, the Commission will send a copy of the Dismissal Order to the complainant and a copy of the complaint and Dismissal Order to the Respondent.

for official use only:
VCRB # _____
date filed: _____

**West Virginia Ethics Commission
210 Brooks Street, Suite 300, Charleston WV 25301
304-558-0664 or 866-558-0664**

CONTACT INFORMATION

I. Complainant – Person bringing Complaint

Name: _____ Telephone: _____
Email: _____ Alternate telephone: _____
Address: _____
City: _____ County: _____ State: _____ Zip: _____
Best time to contact you: _____

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II. Respondent – Person against Whom Complaint is Brought

Current or former public official, public employee, lobbyist - use one complaint form for each.

Name: _____ Position or title: _____
(e.g. Mayor of Smallville, Potomac Co. Commissioner)
Telephone: _____
Email: _____ Alternate telephone: _____
Address: _____
City: _____ County: _____ State: _____ Zip: _____

Name(s) and contact information of any witness(es) to the alleged misconduct:

for official use only:

VCRB # _____

date filed: _____

(Statement of Facts Continued, if needed. Attach additional sheets of paper, if necessary.)

Date alleged violation occurred: _____

(If more than one allegation of wrongdoing, set forth separately the dates on which each occurred.)

Attach or make reference to any documents, materials, minutes, resolutions or other evidence that supports your allegations.

(Please attach photocopies; retain the originals for your own record.)

Verification of Complaint

State of _____ County of _____

_____, the Complainant named in the attached complaint,
(name of person filing the complaint)

being duly sworn, says that the facts and allegations contained therein are true, except so far as they are therein stated to be on information, and that, so far as they are therein stated to be on information she/he believes them to be true.

Complainant signature _____ date: _____

Taken, sworn to and subscribed before me this _____ day of _____, _____

Notary Public signature