

## Town of East Haddam Ethics Commission, Minutes of Meeting, 10/12/16

Meeting was opened by Chairman Scott Jezek, at 7:00 PM.

All commission members were present and included Chairman Scott Jezek, Vice Chairman Pamela Gourlie, Secretary Warren Bellows, Bruce Gelston and Lynn Branscombe. No members of the public were present.

Minutes from previous meeting of 6/27/16 were approved without comment.

Complaint Petition, as revised August 2016 and attached to these minutes, was reviewed and approved without comment.

The potential for development of a Respondent Form was discussed, and it was determined that no form would be pursued. State statutes on Ethics Complaints were reviewed, and broad mention of creation of a "record" was identified as required. Discussion determined this "record" would need to be in a format befitting the circumstance. The format could be as simple as documenting the issue in our minutes, or as complicated as requesting the town for transcription services if deemed appropriate.

Future meeting schedule was discussed and general agreement was reached to maintain meetings on the second Wednesdays of June and October next year, at 7:00 PM at the Grange Hall, subject to availability. This schedule will support addressing membership term expirations, occurring each June 30th. If any reason is identified for a sooner meeting, it will be scheduled.

A motion to adjourn was made by Warren Bellows at 7:22 PM, seconded by Bruce Gelston, and was unanimously approved.



## TOWN OF EAST HADDAM - ETHICS COMMISSION

TOWN OFFICE BUILDING, 7 MAIN STREET, P.O. BOX K, EAST HADDAM, CT 06423

COMPLAINT PETITION - PAGE 1 OF 2

Print or type the following information:

Your Name: \_\_\_\_\_

Your Address: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

1. What is the full name of the person you believe has violated the Town Code of Ethical Conduct?

\_\_\_\_\_

2. What position did this person hold at the time of the alleged violation?

\_\_\_\_\_

3. Date, time and place alleged violation(s) occurred.

\_\_\_\_\_

4. Provide details on the alleged violation. Attach a statement of facts and circumstances, names and addresses of any witnesses and/or persons involved.

\_\_\_\_\_

5. What **specific** section(s) of the Town Code of Ethical Conduct do you believe was violated?

\_\_\_\_\_

### **NOTE:**

- 1) This complaint must be filed within 3 years from the date of the alleged violation.
- 2) This complaint will not be effective unless it is properly signed, dated and witnessed. (See item 6)
- 3) The East Haddam Ethics Commission may not act on any complaint that does not provide all the information requested on the Complaint Petition.
- 4) Once filed, the Complainant may not withdraw this complaint.
- 5) The preliminary investigation will be held in executive session, unless the Respondent requests that it be open. Unless the East Haddam Ethics Commission advises you otherwise, the Complainant or Respondent shall not disclose the allegations in the complaint or any information supplied to or received from the East Haddam Ethics Commission during the investigation to any third party except as provided by appropriate statutory authority.



## TOWN OF EAST HADDAM - ETHICS COMMISSION

TOWN OFFICE BUILDING, 7 MAIN STREET, P.O. BOX K, EAST HADDAM, CT 06423

COMPLAINT PETITION - PAGE 2 OF 2

- 6) This complaint must be sworn to before one of the following:
- a) A judge of a court of record;
  - b) A clerk or deputy clerk of a court having a seal;
  - c) A commissioner of deeds or Town Clerk;
  - d) A notary public;
  - e) A justice of the peace;
  - f) An attorney admitted to the bar of the State of Connecticut.

### OATH:

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.

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Signature of Complainant

### CERTIFYING OFFICIAL:

Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_ of 20\_\_\_\_. I hereby certify that I hold a position described in 6) above, and if I am a notary public, my authority expires on \_\_\_\_\_.

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Signature of Certifying Official

Send by Certified Mail or hand-deliver this request to the:

Chairman, East Haddam Ethics Commission

Town Office Building, 7 Main Street, P.O. Box K, East Haddam, CT 06423

East Haddam Ethics Commission use only:

Date Received at Town Office Building

Date Received by Chairman of Ethics Commission

Date of Ethics Commission First Meeting