

**Request for Investigation  
Code of Conduct for Members of Council and Local Boards**

Name of Requestor:	
Address:	
Telephone:	
Email address:	
<b>It is an offence under the Criminal Code of Canada to knowingly swear/affirm a false affidavit.</b>	
I,	<i>(full name)</i>
of	<i>(municipality of residence)</i>
in the Province of Ontario, <b>MAKE OATH AND SAY</b> (or affirm)	
1. I have personal knowledge of the facts as set out in this affidavit.	
2. I have reasonable and probable grounds to believe that:	
<i>(specify name of member of Sault Ste. Marie City Council or local board)</i>	
has contravened section(s)	<i>(specify)</i>
of the Code of Conduct for Members of Council and Local Boards.	
Date of Incident:	
Time of Incident:	
Location of Incident:	
Name(s), Position, Contact Information (phone number or email address) of all Witnesses to the Incident:	
a)	
b)	
c)	
d)	
3. This affidavit is made for the purpose of requesting that this matter be investigated and for no improper purpose.	
List of documents or records that are relevant to the requested inquiry.	
<i>(include document title and date)</i>	
<b>ALL DOCUMENTS OR RECORDS CONSIDERED RELEVANT TO THE COMPLAINT OR REQUEST FOR INQUIRY MUST ACCOMPANY THIS REQUEST FOR INVESTIGATION FORM</b>	
SWORN (or affirmed) before me at the	
City of Sault Ste Marie, in the District of Algoma, this      day of              20	
A Commissioner, etc.	
	Requestor's signature

Deliver request to: City Clerk's Department, Civic Centre, 99 Foster Drive, Sault Ste. Marie ON P6A 5X6