

Municipal Conflict of Interest Act – Complaint Form # 2 STATUTORY DECLARATION

l,	(first and last name),
of the	in the Province of Ontario.
I SOLEMNLY DECLARE THAT:	
1. I reside at:	(full address)
and may be contacted at telephone:	and email:
2. I have reasonable and probable groun	nds to believe that:
has contravened section(s)	(specify name of Member), of The Corporation of the Township of Oro-Medonte, of the Municipal Conflict of g the alleged contravention not more than six (6) weeks separate page if required)
This declaration is made for the purpose Township of Oro-Medonte's Integrity Com	of requesting that this matter be investigated by the missioner and for no other purpose.
DECLARED before me at)
the of	
on (date))
	(Signature)
	(9)

A Commissioner for taking affidavits etc.

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