	COMPLAINT FORM **ALLEGED CODE OF CONDUCT BREACH OF** **COUNCIL MEMBERS, COMMITTEE MEMBERS AND CANDIDATES** Schedule 1, Division 3 of the *Local Government (Model Code of Conduct) Regulations 2021*

NOTE TO THE PERSON MAKING THE COMPLAINT:

This form should be completed, dated, and signed by the person making a complaint of an alleged breach of the Code of Conduct. The complaint is to be specific about the alleged breach and include the relevant section/subsection of the alleged breach. A Complaint about an alleged breach must be made -

(a) In writing in the form approved by the local government; and
(b) To an authorised person; and
*(c) **Within one month after the occurrence of the alleged breach**.*

The signed form is to be forwarded to: Chief Executive Officer, Shire of Donnybrook Balingup, PO Box 94, Donnybrook WA, 6239 or emailed to shire@donnybrook.wa.gov.au

Complainant's Details (Details of person making the complaint)

Given Name:		Surname:	
Postal Address:			
		Postcode:	
Phone Number:			
Email:			
Complainant's Signature:		Date:	

Complaint Details

Name of Local Government:	Shire of Donnybrook Balingup

Name of council member, committee member, candidate alleged to have committed the breach:

State the full details of the alleged breach. Attach any supporting evidence to your complaint form:

Have you attached any supporting evidence to your complaint?	Yes ☐ No ☐
Date of alleged breach:	

<table>
<tr><td colspan="3" style="background:#7a1030;color:white">Authorised Complaints Officer</td></tr>
<tr><td>Officer's Name:</td><td colspan="2"></td></tr>
<tr><td>Officer's Signature:</td><td></td><td>Date Received:</td></tr>
</table>

Corporate Planning and Governance Officer to complete

Recorded in Synergy:	Yes ☐ No ☐	Record No.	
Recorded in Complaints Register:	Yes ☐ No ☐		