

City of Pomona Ethics Commission Ethics Violation Complaint Form

Incident Details	
Date of Incident:	Time:
Location of Incident:	
Nature of Complaint (check all that app	oly):
 □ Ethics/Conflict of Interest Violation □ Campaign Violation □ Inappropriate Conduct □ Brown Act Violation □ Ethics Policy Violation □ Other: 	
Description of the Incident	
·	what happened. Include specific dates, times, what was said any other relevant information. Be sure to clearly identify ncident. Thank you.
Witnesses (if any)	
• Name(s):	
Evidence or Supporting Documentation	n
Please attach copies of any documents, e	emails, photos, or other evidence.
☐ Photos ☐ Emails/Texts ☐ Social Medi	ia Posts □ Documents/Records □ Video/Audio

Desired Outcome or Resolution.	
You may also select: □ No specific outcome, I just want to report this.	
What action are you hoping the city will take in response to this complaint?	
Complainant Information	
• Name:	
• Address:	
Phone Number:	
Email Address:	
Preferred Contact Method: □ Phone □ Email □ Mail □ Prefer not to be contacted	
Are you a: □ Resident □ Visitor □ Vendor □ Other:	
Confidentiality and Acknowledgement	
 Do you wish to remain anonymous? ☐ Yes (Please note that anonymity may limit the ability to investigate) ☐ No 	
I affirm that the information provided is true to the best of my knowledge.	
Signature: Date:	
Additional Notes related to this Form	

Email response to receiving the Complaint form.

This message confirms we have received your Ethics Complaint Form. We appreciate you bringing this matter to our attention.

The Human Resources team will review your submission promptly and handle it in accordance with City and Ethics policies. Please note that we take all concerns seriously and will maintain confidentiality to the fullest extent possible.

If we require additional information or clarification (and you did not submit anonymously), we may contact you directly.

We will also create FAQ's