New York State Commission on Judicial Conduct

COMPLAINT FORM -- CONFIDENTIAL

Please complete this Complaint Form and mail it to the Commission office nearest you:

61 Broadway, Suite 1200 ♦ New York, NY 10006

Corning Tower, Suite 2301 ♦ Empire State Plaza ♦ Albany, New York 12223

400 Andrews Street ♦ Rochester, NY 14604

The law requires that complaints to the Commission be in writing and signed by the complainant (see Section 44.1 of the Judiciary Law of the State of New York). A complaint does not have to be sworn or notarized. You may submit a complaint by letter or by using this complaint form. If you submit a letter, please include the kind of information requested by this form.

BACKGROUND INFORMATION

	Today's Date:
Your Name:	
Address:	
Home Phone:	Other Phone:
	E-mail: :
	Are you represented by a lawyer? Yes No
If YES, Lawyer's N	Name:
Address:	
Telephone	
	COMPLAINT INFORMATION
Judge's Name:	
Judge's Court	County:
Date(s) of Incid	dent(c)

DETAILS OF COMPLAINT:

Below and on the back of the information as possible, such	as what happene	d, where and wh	en; the names of	of witnesses; who sa
what to whom, and i	in what tone of vo	oice; etc. Use ad	lditional sheets	if necessary.
omplainant's Signature:				
omplainant's Name				
-	(Plea	se Print)		