



STATE ETHICS COMMISSION COMPLAINT FORM INSTRUCTIONS

Please review the instructions below before submitting a complaint with the Commission. Failure to follow these instructions can result in the complaint's dismissal.

1. Complainant's information

This section requires you to provide your name and contact information. It is important to list the correct mailing address, email address, and phone number (written legibly if filled out by hand), so that the Commission can communicate with you and provide you with notices related to the complaint.

2. Respondent's information

This section requires you to fill out the name and contact information for the person against whom you are filing a complaint ("the respondent"). The complaint **must** provide the respondent's name and, to the extent known, the respondent's mailing address, email address, telephone number, and public office or position. **Please note that the Commission does not have jurisdiction over local government officials or employees.**

3. Pending and parallel complaints

Please note if you have filed your complaint with any other agency and you are aware of any pending court action against the respondent related to your complaint.

4. Laws alleged to be violated

Please select those laws you believe the respondent violated. This section helps the Commission determine whether it has the legal authority to act on your complaint. The Commission can only enforce the civil provisions of the nine laws under its jurisdiction. The Commission provides links to all of the laws under its jurisdiction at: <https://www.sec.nm.gov/law/>. If you are unsure of what law the respondent violated, you may check the box labeled "unsure." Please also indicate whether you believe any part of the respondent's conduct violates criminal law. The Commission does not have jurisdiction for criminal violations and will refer criminal matters to the appropriate authorities.

5. Description of the respondent's conduct

Please provide a detailed account of the respondent's conduct. Please also explain how the respondent's conduct violates the law(s) the Commission has jurisdiction to enforce. If you are attaching materials to your complaint, please indicate the number of pages in addition to the complaint form. This allows the Commission to verify that it has received a complete copy of your complaint.

6. Signing

This section provides space for you to sign the complaint form. **Please note that the law requires that you sign and swear to the truth and accuracy of the allegations for the Commission to act upon it.**



NEW MEXICO STATE ETHICS COMMISSION

800 Bradbury Drive Southeast, Suite 215 Albuquerque, New Mexico 87106
505.827.7800 | ethics.commission@sec.nm.gov

Hon. William F. Lang (*Chair*)
Jeffrey L. Baker
Stuart M. Bluestone
Hon. Dr. Terry McMillan
Hon. Celia Foy Castillo
Ron Solimon
Dr. Judy Villanueva

COMPLAINT FORM

By my signature below, I verify that the allegations contained in this complaint, along with the attachments and exhibits hereto, are true and correct to the best of my knowledge and belief, and that I believe the allegations herein violate New Mexico law.

COMPLAINANT'S INFORMATION (Person or Organization filling out this complaint)

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

RESPONDENT INFORMATION (Person or Organization this complaint is filed against)

Include information for additional Respondents (if any) on a separate sheet. Complaints submitted without the Respondent's address or email will not be accepted.

Name & Position: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Have you submitted or will you submit this or a substantially similar complaint against the Respondent with another governmental agency: Yes No If yes, which agency _____

Is there any pending legal action against the Respondent for the conduct alleged in the complaint? Yes No Unsure

The State Ethics Commission has jurisdiction to investigate and adjudicate alleged violations of the following laws. Please indicate the law(s) you believe have been violated and, if known, include specific provisions in the Complaint Description. (*Check all that apply*):

- | | |
|---|---|
| <input type="checkbox"/> Campaign Reporting Act | <input type="checkbox"/> Procurement Code |
| <input type="checkbox"/> Financial Disclosure Act | <input type="checkbox"/> State Ethics Commission Act |
| <input type="checkbox"/> Gift Act | <input type="checkbox"/> Article 9, Section 14 of the Constitution of New Mexico (Anti-Donation Clause) |
| <input type="checkbox"/> Lobbyist Regulation Act | <input type="checkbox"/> Unsure |
| <input type="checkbox"/> Voter Action Act | |
| <input type="checkbox"/> Governmental Conduct Act | |

Do you believe any of the conduct alleged in this complaint constitutes a violation of criminal law?
 Yes No Unsure

Attached hereto are _____ additional pages which reasonably describe the Respondent's actions or inactions which I believe violate the selected laws as indicated above.

HOW TO SUBMIT THIS COMPLAINT TO THE STATE ETHICS COMMISSION

You may submit this complaint through the SEC's online Proceedings Portal at: proceedings.state.nm.us, or via US post to 800 Bradbury Drive SE, Suite 215, Albuquerque, NM 87106. If you have questions or need assistance with submitting your complaint, please contact ethics.commission@sec.nm.gov.

COMPLAINT DESCRIPTION

Please use the following format for your description of each alleged violation: 1) Law(s) violated and relevant section(s) or provision(s) of the law; 2) Description of alleged violation; 3) Facts that substantiate the alleged violations including the date, place, and time of the Respondent's conduct; 4) Names and contact information of any witnesses; 5) What action(s) or relief you seek from the Commission; and 6) Description of supporting document(s) included with this complaint, if any.

If more space is needed, please include extra pages using the same format as above.

**By submitting this complaint, I attest under oath and subject to penalty of perjury that the information in the complaint, and any attachments provided with the complaint, are true and accurate.*

FULL NAME (Print): _____

DATE: ____ / ____ / ____ . SIGNATURE: _____