

Town of Plaistow  
Conflict of Interest Committee  
PO Box 903  
Plaistow, NH 03865

For COI Committee use only:  
Received Date: \_\_\_\_\_  
File Number: \_\_\_\_\_  
Petitioner(s): \_\_\_\_\_  
Respondent(s): \_\_\_\_\_

Town of Plaistow  
Petition of Alleged Violation(s)

The person(s) submitting a petition to the Conflict of Interest Committee alleging a violation of the Town of Plaistow Conflict of Interest Ordinance, adopted March 12, 2002, must complete this Petition of Alleged Violation form and must mail it to the PO Box indicated above. If the violation is within the jurisdiction of the Committee's authority, the Petitioner and the Respondent shall be notified to meet with the Conflict of Interest Committee at a non-public meeting. The Petitioner and/or Respondent will be requested to attend this meeting and will be required to provide evidence and/or pertinent information relating to the alleged violation(s).

It is in violation of the Town of Plaistow Conflict of Interest Ordinance, to knowingly, without merit or cause, file a petition alleging a violation of this Ordinance to harm an Official's reputation.

**Petitioner(s):** (Person(s) filing this alleged violation(s) form)

**Name:** \_\_\_\_\_  
(Please Print or Type in black or blue)

**Address:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_

**Business Name (if applicable):** \_\_\_\_\_

**Business Address:** \_\_\_\_\_

**Business Contact Number:** \_\_\_\_\_

**Alleged Violation(s):** \_\_\_\_\_

\_\_\_\_\_  
(A separate form must be completed for each alleged violation.)

I request that the Conflict of Interest Committee investigate:

**Name of Respondent(s):** \_\_\_\_\_  
(Person(s) named in the alleged violation(s).) (Please Print or Type in black or blue)

**Title of Respondent(s):** \_\_\_\_\_

**All information must be mailed to:**  
Town of Plaistow, Conflict of Interest Committee, PO Box 903, Plaistow NH 03865.

Petitioner(s): \_\_\_\_\_

Respondent(s): \_\_\_\_\_

For COI Committee use only:

Rec. Date: \_\_\_\_\_

File No: \_\_\_\_\_

**Town of Plaistow**  
**Petition of Alleged Violation(s)**

Describe in detail specific conduct alleged to be in violation of the Town of Plaistow Conflict of Interest Ordinance: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Please continue on additional pages if necessary).

I have read the Petition of Alleged Violation and, in signing my name, affirm that I have read the Town of Plaistow Conflict of Interest Ordinance adopted March 12, 2002. I believe that the subject matter within is a valid alleged violation of the Town of Plaistow Conflict of Interest Ordinance which was in place at the time of the alleged violation.

I/we certify that all information I/we have provided on this petition(s) is true and accurate and I/we knowingly agree that the Town of Plaistow Conflict of Interest Committee and/or its members cannot be held responsible or liable for the contents of this petition(s) nor its findings of the alleged violation(s) of conflict of interest within.

I/we knowingly agree that by signing this form(s) that I/we are subject to the laws of perjury under the laws of the State of New Hampshire and federal law, if applicable.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_