

Ethics Complaint Form

Please refer to the <u>Ethics Committee procedural documents</u> for information regarding the procedure which shall be followed. Please complete this form in its entirety and electronically send it to <u>complaints@ampp.org</u>. *Please Note: all information in **RED** is required. <u>Ethics</u> submissions are confidential. Anonymous complaints cannot be accepted.

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Today's Date			
Submitter (Complainant) Name			
Submitter (Complainant) Address,			
City, State, Country			
Submitter (Complainant)			
E-mail Address			
Submitter (Complainant) Telephone			
(incl. country code)			
Complaint Being Filed Against			
Name (Respondent)			
Respondent's Company Name			
Respondent's Contact Information			
(Phone number, e-mail address)			
Certification Number (if known)			
CRM Record Number (if known)			
Date of Alleged Violation			
Alleged Violation			
(Use dropdown)			
If "Other" Violation, Explain:			
Is there any current litigation associated with this complaint?	Yes	No	

Summary of complaint (please be as concise and specific as possible, including violations against association policies e.g. attestation):



List of evidence (please attach any relevant correspondence/back up to this document):
List of witnesses (with contact information, where possible; email is preferred):
Please list any additional information/evidence not previously captured above.



Additional Information (Continued):