

"FORM A"



Judicial Standards Commission State of Montana

GRIEVANCE

The undersigned being first duly sworn, upon oath, states the following facts showing misconduct on the part of the following named judge, to-wit:

NAME OF JUDGE: _____

ADDRESS: _____

Based on the attached Code of Judicial Conduct, please cite which Canon(s) you feel the judge has violated and why. If you cannot clearly identify which canon the judge has violated, then your grievance is not within the purview of this Commission to review. Please also note that a grievance that is based solely on rulings in a case which can be addressed in an appeal or on sentence review shall not constitute adequate grounds for disciplinary proceedings and shall be summarily rejected and dismissed by the Commission

The facts of the above Judge's misconduct or unethical conduct are as follows: (Please state in your own words the misconduct or unethical conduct of the judge. Provide information as to when and where the misconduct occurred, and the names of any other people involved.)

(If more space is needed, you may attach additional sheets to this grievance and mark them a, b, c, etc.)

The names and addresses of other persons who are witnesses to or have information as to the misconduct of the above judge are:

Name: _____	Name: _____
Address: _____	Address: _____
Phone No. _____	Phone No. _____

(Names of additional witnesses may be listed on a separate sheet and attached.)

I (have _____ / have not _____) contacted the judge in regard to my grievance.

I will furnish additional information to your Commission if requested. If the grievance is investigated, I will cooperate with your Commission and furnish the evidence I may have and I will testify at any hearing on this grievance.

My full name, address and telephone number is:

NAME: _____
ADDRESS: _____
PHONE #: _____

DATED this _____ day of _____, 20____.

SIGNATURE

SUBSCRIBED AND SWORN TO before me this _____ day of _____, 20____.

(SEAL)

Notary Public for the State of Montana
Residing at _____
My Commission expires _____

RETURN TO: JUDICIAL STANDARDS COMMISSION
PO BOX 203005
301 S. PARK, SUITE 328
HELENA, MT 59620-3005