COMPLAINT

MAIL TO:	Judicial Inquiry and Review Commission
	Post Office Box 367 Richmond, Virginia 23218-0367
	Note: The Commission does not accept fax or e-mail complaints.
Name of Judge	
Location of Court	
Date of Incident	
Case Name or Nun	nber (if known)
Name and telephone number of persons who witnessed the judge's conduct:	
December 1 and 1	data da la constituir Paldado de la Proprio de Constituir de
Description of wha	at the judge said or did that you believe was improper:
Name: (printed/type	(additional pages may be attached)
	Daytime Telephone:
Address:	
Addicas.	
	Date:
Signature	
Note: The Commiss	sion does not accept unsigned complaints.

Revised: 04/03/2006