

ETHICAL PRACTICES AND GRIEVANCES COMPLAINT FORM

COMPLAINANT

NAME:	
ADDRESS:	
PHONE NO:	
IAAI MEMBER(S) NAMED IN	
NAME:	
ADDRESS:	
PHONE NO:	
DETAILS OF VIOLA	TION
DATE OF OCCURRENCE:	
DESCRIPTION OF VIOLATION (use additional page if	necessary):
EVIDENCE INCLUDED (i.e., transcripts, reports, etc.):	
IS THERE ANY OPEN CRIMINAL OR CIVIL CASE THE ACCUSED IAAI MEMBER(S)?	ES INVOLVING BOTH YOU AND YesNo
Signature of Complainant	Date
Please send complaint form to:	
Anne Stone, CAE, Executive Director Anne.Stone@firearson.com	
FFICE USE ONLY Complaint No. Date Received Date Forwarded to EP&G	

ETHICAL PRACTICES AND GRIEVANCE COMPLAINT

Date Complaint Request Received	
Complaint Package Sent to Complainant	
Date Complaint Received	
Date Sent to Committee	
Date Complainant and Subject Notified	
Date of Committee Review	
Date Presented to Board	
Hearing Date	
Appeals Date	
All Parties Notified of Final Deposition	
Date File Closed	
COMMENTS	

ETHICAL PRACTICES AND GRIEVANCE COMPLAINT

INVESTIGATION ASSIGNED	YES	NO
RECOMMENDATION OF ETHICAL PRAC	CTICES & GRIEVANC	E COMMITTEE
Signature of Chairman	_	Date
BOARD AC	CTION	
Signature of President	_	Date
ACCUSED MEMBER NOTIFIED OF BOARD	ACTION Da	ite
NOTIFIED BY		
COMPLAINANT NOTIFIED OF BOARD ACT	ΓΙΟΝ Da	nte
NOTIFIED BY		