

## **INSTRUCTIONS FOR FILING A VERIFIED COMPLAINT WITH THE COMMISSION ON JUDICIAL TENURE AND DISCIPLINE**

The Commission accepts a Verified Complaint made against any judicial officer of the Supreme, Superior, Family, District Court, Workers' Compensation Court, and Traffic Tribunal, any magistrate appointed pursuant to G.L. 1956 §§ 8-2-11.1, 8-2-39, 8-2-39.1, 8-39.2, 8-8-8.1, 8-8-16.2, 8-8.2-1, 8-10-3.1, and/or 8-10-3.2, and any judge of a probate court appointed or elected by any municipality of the State of Rhode Island.

The Verified Complaint shall contain a statement of facts, circumstances, or other matter upon which the complaining party relies for the complaining party's charge that a judicial officer, magistrate, or judge (collectively judicial officers):

- a. has engaged in a violation of the **Code of Judicial Conduct**<sup>1</sup> (specify which canon and rule has been violated); or
- b. has willfully and persistently failed to perform his or her duties; or
- c. suffers from a disabling addiction to alcoholic beverages, drugs, or narcotics; or
- d. has engaged in conduct that brings his or her judicial office into serious disrepute; or
- e. that the judicial officer has a physical or mental disability that seriously interferes and will continue to interfere with the performance of the judicial officer's duties.

The Commission has no power to decide whether a judicial officer has decided a case incorrectly or unfairly nor may the Commission change a decision made by a judicial officer .

### **Verification**

The Statement of Facts **must be signed by the complainant before a notary public**. If additional pages have been added, the box should be checked next to "Check if continuation page is used" and the number of pages should be noted in the "Page \_\_\_\_ of \_\_\_\_" on each page of the Verified Complaint form and continuation pages. You may print and fill out as many continuation pages as is necessary.

### **Filing**

A Verified Complaint shall be filed with the Commission by sending the Verified Complaint certified mail, return receipt requested to the Commission on Judicial Tenure and Discipline. The address appears on the facepage of the Verified Complaint form. The Verified Complaint should be typed or printed.

If you have any questions, please call the Commission office for further assistance at **(401) 615-5228. Business hours are from Monday to Friday 8:30 a.m. to 4:00 p.m. Accommodations for persons with disabilities are available upon request.**

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<sup>1</sup> The Code of Judicial Conduct can be found in the Rhode Island Court Rules Annotated, Article VI, Code of Judicial Conduct.

**COMMISSION ON JUDICIAL TENURE AND DISCIPLINE  
VERIFIED COMPLAINT FORM**

Return *Notarized* form by *Certified Mail, Return Receipt Requested* to:

**Commission on Judicial Tenure and Discipline  
Noel Judicial Complex  
222 Quaker Lane  
Warwick, RI 02886**

(Please type or print)

1. Date of filing: \_\_\_\_\_

2. Your Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

3. Telephone Number: \_\_\_\_\_

4. Judicial Officer against whom you wish to file a complaint:

Judicial Officer's full name: \_\_\_\_\_

Court and case number: \_\_\_\_\_

5. If this complaint is prepared by an attorney, or if it is being submitted upon the advice of an attorney, please state the attorney's name and address:

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

6. Attach as many sheets to this form as necessary to accurately state your complaint. Please note the number of pages filed in the "Verification" section below.

*For Commission use only:*

File Number \_\_\_\_\_ Date received \_\_\_\_\_

Mailed to judicial officer \_\_\_\_\_ Mailed to members \_\_\_\_\_

### STATEMENT OF FACTS

**Concerning judicial officer** \_\_\_\_\_

(Please type or print)

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Check if continuation page is used.

Signature of the Complainant _____	Date  
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State of \_\_\_\_\_

County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned notary public, personally appeared \_\_\_\_\_  personally known to me or  proved to me through satisfactory evidence of identification, which was \_\_\_\_\_, to be the person who signed above in my presence, and who swore or affirmed to me that the contents of the document are truthful to the best of his or her knowledge.

Notary Public: \_\_\_\_\_  
 My commission expires: \_\_\_\_\_  
 Notary identification number: \_\_\_\_\_

