CONFIDENTIAL

WSSC BOARD OF ETHICS COMPLAINT FORM

c/o Ethics Office

14501 Sweitzer Lane, Laurel, Maryland 20707 (301) 206-8010 | #EthicsQuestions@wsscwater.com

Your Name:				
-	First	Middle Initial		Last
Your Address:				
	Street			
-	City	State	Zip Code	Home Phone
DAYTIME PHO	NE NUMBER?			
WHAT PROVIS	SION(S) OF THE W	SSC CODE OF ETHIC	S DO YOU BEL	IEVE HAVE BEEN
	E(S) OF THE WSSODE OF ETHICS:	C EMPLOYEE(S) THA	T YOU BELIEVE	E HAVE VIOLATED
1)		3)		
2)		4)		
DETAILED FAC	CTS AS TO EACH C	EASE DESCRIBE IN Y OF THE CODE OF ETH ER IF NECESSARY):		
CONTENTS O	F THIS COMPLAIN	RM UNDER THE PEIT, INCLUDING ANY DRINGTON AND BELIE	ATTACHMENT,	
	Signa	ture		 Date