



OPEN MEETING LAW

COMPLAINT FORM

TODAY'S DATE: ____ / ____ / 20____

ATTN: SELECTBOARD OFFICES

PO Box 250
Sharon, VT 05065

PHONE: (802) 763-8238 ext. 4

EMAIL: selectboard@sharonvt.net

Prior to bringing a civil action in the Civil Division of the Superior Court in the county in which the alleged violation has taken place for appropriate injunctive relief or for a declaratory judgment, Vermont law requires any person aggrieved by an alleged violation of the Open Meeting Law to provide the public body with a written notice that alleges a specific violation and requests a specific cure of such violation.

If you feel there has been an Open Meeting Law violation, please provide any additional facts that may assist the Town of Sharon in its investigation below. If you need more space, please attach sheets to this form.

YOUR NAME: _____

PHONE: () _____ Email: _____

PLEASE PROVIDE A FACTUAL DESCRIPTION OF THE COMPLAINT:

Date and Time Occurred: _____

Name of Public Body: _____

- continued -

Specific Violation Alleged:

Specific Cure Requested:

Please provide any additional facts that may assist the Town of Sharon in its investigation below:

If you need more space, please attach sheets to this form. Submit this document, and any supporting documentation, to the address at the top of this form.