



**Ethical Practices Board**

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**ETHICAL PRACTICES BOARD**

City of Rochester  
Rochester, Minnesota

***INQUIRY / COMPLAINT SUBMISSION FORM***

(Please print and complete the form and return it to the City Clerk's Office located at City Hall, 201 4<sup>th</sup> Street SE, Room 135, Rochester, MN 55904.)

**DATE OF INQUIRY SUBMISSION:** \_\_\_\_\_

**REQUESTOR:**    **Name:** \_\_\_\_\_  
                         **Address:** \_\_\_\_\_  
                         \_\_\_\_\_  
                         \_\_\_\_\_  
                         **Best way to contact:** \_\_\_\_\_  
                         **Is this home or work?** \_\_\_\_\_

**NATURE OF INQUIRY** (Additional pages may be added – please indicate total pages submitted):  
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**REQUESTOR SIGNATURE:** \_\_\_\_\_  
**PRINTED:** \_\_\_\_\_

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| <p><b>OFFICE USE ONLY</b></p> <p><b>REQUEST RECEIVED BY:</b></p> <p><b>DATE / TIME RECEIVED:</b></p> |
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