§ 12.45 Complaint Form: Judicial Discipline

KANSAS COMMISSION ON JUDICIAL CONDUCT

KANSAS JUDICIAL CENTER
301 SW 10TH AVE., ROOM 115
TOPEKA, KANSAS 66612
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♦ COMPLAINT AGAINST A JUDGE ♦

The Commission only has authority to investigate allegations of judicial misconduct or disability by persons holding state judicial positions. The Commission has no jurisdiction over and does not consider complaints against federal judges, lawyers, law enforcement and detention center officers, district court clerks, and court personnel.

The Commission does not act as an appellate court and cannot review, reverse, or modify a legal decision made by a judge in a court proceeding. Please review the accompanying brochure which describes the functions of the Commission. Note in particular the examples of functions which the Commission cannot perform.

Please Note: Complaint form must be typed or legibly hand-printed, dated, and signed before it will be considered. Complaint forms may be submitted by U.S. Mail or scanned and submitted by e-mail.

I. PERSON MAKING THE COMPLAINT

Full Name

Inmate Number, if applicable

Mailing Address

City, State Zip Code

Telephone Number

E-mail address

Preferred Method of Communication: ___ U.S. Mail ___ E-Mail

II. JUDGE AGAINST WHOM COMPLAINT IS MADE

Full Name

County or City

Type of Judge (check one): ___ Supreme Court Justice ___ Court of Appeals Judge

___ District ___ District Magistrate ___ Municipal

___ Pro Tempore ___ Other
III. COURT CASE INFORMATION

If the complaint involves a court case, please provide:

- Case Title: ____________________________  Case Number: ____________
- Your Relationship to the Case:  _____ Plaintiff/Petitioner  _____ Defendant/Respondent  _____ Other ________________________________

IV. STATEMENT OF FACTS

In the following section, please provide all specific facts and circumstances which you believe constitute judicial misconduct or disability. Include names, dates and places which may assist the Commission in its evaluation and investigation of this complaint.

If additional space is required, attach and number additional pages.
V. ATTACHMENTS

Relevant documents: Please attach any relevant documents which you believe directly support your claim that the judge has engaged in judicial misconduct or has a disability. Highlight or otherwise identify those sections that you rely on to support your claim. Do not include documents which do not directly support your complaint, for example, a copy of your complete court case.

*Keep a copy of all documents submitted for your records as they become the property of the Commission and will not be returned.*

VI. SIGNATURE

I declare that to the best of my knowledge and belief, the above information is true, correct and complete and submitted of my own free will.

Date __________________________ Signature __________________________

In filing this complaint, I understand that:

➢ The Commission’s rules provide that all proceedings of the Commission, including complaints filed with the Commission, shall be kept confidential unless formal proceedings are filed. The confidentiality rule does not apply to the complainant or the judge against whom a complaint is filed.

➢ The Commission may find it necessary to disclose my identity and the existence of this complaint to the involved judge. By filing this complaint, I expressly consent to any such disclosure.