



The Judiciary Commission of Louisiana
 Office of Special Counsel
 601 St. Charles Avenue
 New Orleans, Louisiana 70130-3481

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JUDICIAL MISCONDUCT COMPLAINT

PART A: INFORMATION ABOUT YOU - PLEASE KEEP CURRENT

1. FULL NAME: _____
 TELEPHONE: area code (_____) _____
2. HOME ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
3. EMPLOYER: _____
 WORK ADDRESS: _____
 CITY: _____ STATE: _____ ZIP: _____
 TELEPHONE: area code (_____) _____
4. NAME OF PERSON WHO CAN ALWAYS REACH YOU: _____
 ADDRESS & TELEPHONE: _____
5. YOUR STATUS: _____
 _____ State/Parish/City Employee
 _____ Litigant
 _____ Citizen
 _____ Attorney
 _____ Elected Public Official
 _____ Judge
 _____ Other

PART B: INFORMATION ABOUT THE JUDGE

1. NAME OF JUDGE: _____
2. TYPE: _____ Unknown _____ Mayor's Court
 _____ La. Supreme Court _____ Magistrate Court
 _____ Court of Appeal _____ Hearing Officer
 _____ District
 _____ City or Parish
 _____ Justice of the Peace
 _____ Other _____
3. PARISH: _____
4. CASE TITLE and NUMBER:(If applicable) _____

The Judiciary Commission of Louisiana is charged with the responsibility of investigating allegations of judicial misconduct pursuant to Article 5 §25 of the Louisiana Constitution and under the Code of Judicial Conduct.

PART C: EXPLANATION OF YOUR COMPLAINT

State in detail why you think this judge has done something improper or has failed to do something which this judge should have done.¹ Include the names and addresses of all persons who know something about your complaint. Attach **copies** of any pleadings, judgments, or any other relevant documents that pertain to your complaint. Please retain a copy of all information sent to our office for your personal file. Attach additional 8 1/2" x 11" sheets of paper if you need more space for your explanation.

¹The Judiciary Commission of Louisiana does not have the authority to order a judge to change his/her judgment. If you are dissatisfied with your judgment, consult an attorney regarding filing a writ or appeal.

LIST ALL DOCUMENTS ATTACHED: _____

DATE OF SIGNING: _____

COMPLAINANT

COMPLAINANT

RETURN THIS FORM TO: The Judiciary Commission of Louisiana
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