## Form #E-1

Dearborn Area Board of Realtors			
2350 Monroe	Board or State Association <b>Dearborn</b>	Michigan	48124
Address	City	State	Zip
	Ed. C. 1.		
To the Grievance Committee of the	Ethics Complaint  Dearborn Area Board of Realtors		
To the Grievance Committee of the		or State Association	
□ Filed:	0		
Complainant(s)		Respondent(s)	
Complainant(s) charge(s):			
An alleged violation of Article(s)	of the Code of Ethics or other r	nembership duty as set forth in th	ne bylaws
of the Board in	and alleges that the	above charge(s) (is/are) supporte	d by the
Article, S	Section and unoges that the	acove charge(s) (is/are) supporte	a of the
attached statement, which is signed and dat different date, when the complainant(s) first belief of the undersigned and is filed within been known in the exercise of reasonable dili is later.	knew about the alleged violations. This cor one hundred eighty (180) days after the fac	nplaint is true and correct to the bests constituting the matter compla	est knowledge and iined of could have
Date(s) alleged violation(s) took place:			
Date(s) you became aware of the facts on whi	ch the alleged violation(s) (is/are) based:		
I (we) declare that to the best of my (our) kno			
Are the circumstances giving rise to this ethic state real estate licensing authority or any other	cs complaint involved in civil or criminal l	itigation or in any proceeding be	fore the
□Yes □No			
You may file an ethics complaint in any juris Code of Ethics, Standard of Practice 14-1 pro more than one Board of Realtors <sup>®</sup> with re event."	ovides, in relevant part, "Realtors® shall not	t be subject to disciplinary proceed	eding in
Have you filed, or do you intend to file, a sim	ilar or related complaint with another Associated	ciation(s) of Realtors®?	
□Yes □No	•		
If so, name of other Association(s):		Date(s) filed:	
I understand that should the Grievance Comr from my transmittal of the dismissal notice to			20) days
from my transmittan of the dismissar notice to	appear the dishinssar to the Board of Brices	013.	
Complainant(s):			
Type/Print Name		Signature	
Type/Print Name		Signature	
	Address		
Phone (Revised 11/15)		Email	