

**JUDICIAL COUNCIL
OF THE TENTH CIRCUIT**

COMPLAINT OF JUDICIAL MISCONDUCT OR DISABILITY

1. Complainant's name:

Address:

Daytime telephone:

2. Judge complained about:

3. Does this complaint concern the behavior of the judge in a particular lawsuit or lawsuits?

Yes

No

If "yes," give the following information about each lawsuit (use the reverse side if there is more than one):

Court:

Docket number:

Are (were) you a party or lawyer in the lawsuit?

Party

Lawyer

Neither

If a party, give the name, address, and telephone number of your lawyer:

Docket numbers of any appeals to the Tenth Circuit:

4. Have you filed any lawsuits against the judge?

Yes

No

If "yes," give the following information about each lawsuit (use the reverse side if there is more than one):

Court:

Docket number:

Present status of suit:

Name, address, and telephone number of your lawyer:

Court to which any appeal has been taken:

Docket number of the appeal:

Present status of appeal:

5. On separate sheets of paper, not larger than the paper this form is printed on, describe the conduct or the evidence of disability that is the subject of this complaint. See [Rule 2\(b\)](#) and [2\(d\)](#). Do not use more than 5 pages (5 sides). Most complaints do not require that much.

6. You should either:

(1) check the first box below and sign this form in the presence of a notary public; or

(2) check the second box and sign the form. You do not need a notary public if you check the second box.

I swear (affirm) that--

- () I declare under penalty of perjury that--
- (a) I have read Rules 1 and 2 of the Rules of the Judicial Council of the Tenth Circuit Governing Complaints of Judicial Misconduct or Disability, and
 - (b) The statements made in this complaint are true and correct to the best of my knowledge.

Signature

Date

Sworn and subscribed to before me

Date:

Notary Public:

My commission expires:

Mail this form to:

Office of the Circuit Executive
United States Tenth Circuit
Byron White United States Courthouse
1823 Stout Street
Denver, Colorado 80257

Mark the envelope "JUDICIAL CONDUCT COMPLAINT"
or "JUDICIAL DISABILITY COMPLAINT."

Do not put the name of the judge on the envelope.

See [Rule 2\(e\)](#) for the number of copies required.