

Case Number: FD-\_\_\_\_-\_\_\_\_\_



**CITY OF ATLANTA BOARD OF ETHICS**  
**APPEAL OF FINANCIAL DISCLOSURE PENALTIES**

**Notice of Appeal to Board of Ethics**

I appeal the Ethics Officer's administrative decision imposing penalties on me for violating section 2-814 of the Code of Ethics. I understand that I must file this appeal within 30 days of the date of that decision.

Name \_\_\_\_\_

Department or Board \_\_\_\_\_

Home mailing address \_\_\_\_\_

Telephone number \_\_\_\_\_  
Day-time Other

E-mail address \_\_\_\_\_

I disagree with the following findings of fact and conclusions of law in the administrative decision:

\_\_\_\_\_  
\_\_\_\_\_

The Board of Ethics should reverse the administrative decision of the Ethics Officer for these reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Relief that I seek: \_\_\_\_\_

Date I filed the City Financial Disclosure Statement \_\_\_\_\_

Date of the administrative decision \_\_\_\_\_

I request a hearing before the Board of Ethics.  Yes  No

**I have reviewed the Rules for Appeals of Financial Disclosure Penalties and declare under penalty of perjury that I am filing this notice of appeal within 30 days of the administrative decision and to the best of my knowledge this appeal is a true, accurate, and complete statement of my interests.**

Signature

Date

Filing Instructions: Any appeal to the Board of Ethics must be in writing and filed within 30 days of the administrative decision by (1) mailing this completed form to City of Atlanta Ethics Office, 68 Mitchell St., SW, Suite 12130, Atlanta, GA 30303; (2) hand delivery to the Ethics Office, City Hall Tower, Twelfth Floor; (3) fax to the Ethics Office at 404-658-6077; or (4) send as an email attachment to [ethicsofficer@atlantaga.gov](mailto:ethicsofficer@atlantaga.gov).