

Corruption Report/Complaint Form

Part A – About you (OPTIONAL INFORMATION)

1. Name: Mr/Mrs/Miss/Ms: _____
2. Physical Address: _____
3. Mailing Address: P.O. Box _____ Postal Code: KY - _____
4. Contact numbers: Work: _____ Cell: _____ Home: _____
5. Email: _____

Part B – Your Report/Complaint

Whom are you reporting/complaining about (if known)?

1. Name: _____
2. Position: _____
3. Name of organisation: _____
4. Physical Address: _____
5. Mailing Address: P.O. Box _____ Postal Code: KY - _____
6. Contact numbers: Work: _____ Cell: _____ Home: _____
7. Email: _____

Why are you complaining to the Commission?

I believe or suspect the following offences (check all that apply) under the Anti-Corruption Law have been committed (see Schedule 1 for more information):

- Bribery of public officers and members of the Legislative Assembly
- Frauds on the Government
- Contractor subscribing to election fund
- Breach of trust by public officer or by a member of the Legislative Assembly
- Selling or purchasing office
- Influencing or negotiating appointments or dealing in offices
- False claims by public officers
- Abuse of office
- False certificates by public officers or by members of the Legislative Assembly
- Conflicts of interests
- Duty of a public officer and member of the Legislative Assembly to whom a bribe is offered etc.
- Secret commissions
- Bribing a foreign public officer
- False statements to the Commission
- Conspiracy, etc. to commit an offence under the Law

What are you reporting/complaining about?

Describe in detail the events that you want to make a report/complaint about. We need to know:

- What happened?
- When?
- Who was there?
- How did you become aware of this matter e.g. were you there, did someone tell you about it?
- When did you become aware of this matter?
- Why would you say that what happened was corrupt or wrong?

Are there any other people who may be aware of this matter and may be able to assist the Commission in investigating it? If so, who are they and how may they be contacted?

What do you want to happen as a result of making this report/complaint?

Have you reported, or complained about, this matter to any other person or agency? If so, to whom or to which agency? What was the outcome? Please attach any relevant correspondence.

Have you tried to resolve this matter in any other way? If yes, please give details and attach any relevant documents.

Are you willing for the Commission to contact you further regarding this matter? If so, how would you like the Commission to do this?

Telephone Cell _____ Work _____ Home _____

Mail P.O. Box _____ Postal Code: KY - _____

E-mail _____

Other _____

DECLARATION:

I hereby declare that the above information is true to the best of my knowledge and belief. I understand that providing false, misleading, or inconsistent information to an investigator acting on behalf of the Anti-Corruption Commission may amount to an offence for which the punishment, on conviction under section 25 of the Anti-Corruption Law (2016 Revision), may be a fine of up to KYD\$10,000 or a term of imprisonment of up to 3 years.

Signature: _____

Date: _____

Remember to:

- sign and date this document; and
- attach copies of any relevant documents.

Send your completed form to:
Manager, Commissions Secretariat
P.O. Box 391
Grand Cayman
CAYMAN ISLANDS KY1-1106
info@anticorruptioncommission.ky

Official Use Only

Case Reference Number: _____

Date and Time Received: _____

Name of Secretariat Representative: _____

Date Placed on the Commission Agenda: _____

Report/Complaint Subject to Further Action: Yes No