



International Association of Speakers Bureaus
Ethics Complaint Form

RETURN COMPLETED FORM WITH LIVE SIGNATURE TO:
Ethics Committee / International Association of Speakers Bureaus
4015 S. McClintock Drive, Suite 110, Tempe, AZ 85282

IASB Use Only:

M# _____ /C# _____

Date Rec'd: _____

Final Status: _____

FROM (Complainant):

Name: _____ Phone: _____

Address: _____ EMail: _____

I am a member of IASB. I am not a member of IASB.

1. **IASB member being complained about (Respondent):** _____

2. Describe in your own words what you consider the ethical violation to be, including all facts upon which you base your allegation: _____

3. Article of Ethics Code Violated: _____

4. Date(s) of Incident(s): _____

5. Location/Occasion of Incident: _____

6. Were other IASB members directly involved? If yes, who were they and describe involvement: _____

7. How and when did you observe/discover the violation? _____

8. What practices or actions by Respondent do you think the Ethics Committee should investigate? _____

9. Who else knows or has possible information about the situation?
(Please give names and telephone numbers if known. Also state if these individuals are IASB members.) _____

10. Have you had any communication with anybody regarding this incident?
If so, please explain and attach copies of any written communication: _____

11. What action, if any, have you taken to rectify the situation?
List steps taken as well as dates: _____

12. Have you communicated with the Respondent about your concern? No Yes
If so, when and what response did you receive? _____

13. Is this matter currently under legal action, or is it legally actionable? _____

IT IS THE DUTY AND OBLIGATION OF ALL IASB MEMBERS TO COME FORWARD WITH EVIDENCE OF PERCEIVED VIOLATIONS OF THE CODE OF PROFESSIONAL ETHICS. HOWEVER, EACH IASB MEMBER SHOULD BE MINDFUL OF HIS OR HER PROFESSIONAL OBLIGATIONS REGARDING CONFIDENTIALITY AND THE POSSIBLE SANCTIONS FOR ABUSE OF THE COMPLAINT PROCEDURES. YOUR SIGNATURE SIGNIFIES THAT (1) THE INFORMATION CONTAINED IN THIS COMPLAINT IS TRUTHFUL AND ACCURATE AND (2) THE COMPLAINT IS BROUGHT IN GOOD FAITH AND NOT TO HARASS THE RESPONDENT.

Signature: _____
Must be a live signature. Please use blue ink.

Date _____