

Judicial Complaint

Please print clearly or type. Attach additional pages if needed.

BEFORE YOU BEGIN

These are the instructions for filing a complaint against a judge with the Arkansas Judicial Discipline and Disability Commission. The Commission reviews allegations concerning judicial misconduct or disability. A complaint should describe specific conduct by a judge, not simply disagreement with a court ruling or decision.

Please provide specific facts, including dates, locations, case numbers, and names of individuals involved when known. You may attach additional pages and supporting documents if necessary.

⚠ IMPORTANT — APPEALS AND DEADLINES

Filing a complaint with the Commission does not replace an appeal or other legal remedy and does not extend any applicable deadline. If you believe you have a legal or appellate deadline, seek legal advice promptly.

HOW TO FILE A COMPLAINT

1. Use this form to file an official complaint against a judge. Complete the form by typing or printing all requested information. Use a separate form for each judge if you wish to file complaints against more than one.
2. Include a daytime telephone number or another number where the Commission can reach you to discuss your complaint. If your complaint arises out of a lawsuit, you must provide the case number and the names of the attorneys who participated in the case.
3. Make sure the form is complete and accurate. You may use a separate letter or the Statement of Facts section to explain, in your own words, the circumstances that led to your complaint. Be as specific as possible in describing names, places, dates, and any witnesses to the judge's actions, and list all relevant events in chronological order. Use additional sheets if necessary, and attach copies of any documents that support your statement. If you wish to include court documents, please send copies, not originals.
4. Sign the complaint in the space provided. Complaints may, however, be submitted anonymously. Keep a copy of the complaint for your records.
5. Mail or fax the original complaint and your Statement of Facts to the Commission at the address shown at the end of this form. You may also send the complaint form by e-mail to jddc@arkansas.gov. The Commission does not accept complaints by telephone.

1**WHO**

Judge, complainant, and contact information

A. Judge you are complaining about

Judge's name	
Court / Division	
County / Judicial district	

B. Your information

Your name			
Mailing address			
City, State, ZIP			
Phone		Alternate phone	
Email		Best time to reach you	

C. Your role in the matter

- | | |
|---|---|
| ☐ Party (plaintiff/petitioner) | ☐ Witness |
| ☐ Party (defendant/respondent) | ☐ Court employee |
| ☐ Attorney | ☐ Member of the public |
| ☐ Family member of a party | ☐ Other: _____ |

2**WHERE & WHEN**

Court, case, and incident details

A. Case information (if applicable)

Case name	
Case number	
Court where the case is/was pending	

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B. Incident information

When and where did the incident occur?

Date		Approximate time	
Location		Type of proceeding	

Was the proceeding recorded? ☐ Yes ☐ No ☐ Unknown

Was a transcript prepared? ☐ Yes ☐ No ☐ Unknown

Was a written order entered? ☐ Yes ☐ No ☐ Unknown

C. Did the conduct occur more than once?

☐ No

☐ Yes — approximately how many times? _____

If yes, list the dates or approximate dates of each occurrence:

Date	Location / Proceeding	Brief description

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WHAT HAPPENED

Type of conduct and your statement of facts

A. What does your complaint concern? Check all that apply.

- | | |
|---|---|
| ☐ Conduct during a court proceeding | ☐ Inappropriate comments or behavior |
| ☐ Conduct outside the courtroom | ☐ Failure to perform a judicial duty |
| ☐ Conflict of interest / relationship | ☐ Delay in handling a matter |
| ☐ Failure to recuse | ☐ Disclosure or misuse of confidential information |
| ☐ Bias or discrimination | ☐ Political or campaign-related conduct |
| ☐ Improper communication or ex parte contact | ☐ Other: _____ |
| ☐ Failure to follow a required procedure | |

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B. STATEMENT OF FACTS — What happened?

Describe the specific words, actions, or conduct of the judge that you believe constitute misconduct or indicate disability. Attach additional pages if needed.

C. Why are you reporting it?

Briefly explain why you believe the conduct should be reviewed by the Commission.

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WHO ELSE KNOWS

Participants and witnesses

A. Who was present when the conduct occurred?

- | | |
|---|--|
| ☐ Attorney(s) | ☐ Clerk |
| ☐ Defendant/respondent | ☐ Bailiff |
| ☐ Plaintiff/petitioner | ☐ Law enforcement |
| ☐ Court reporter | ☐ Other: _____ |

B. Witnesses

List anyone who saw or heard the conduct or has firsthand knowledge of it.

Name	Role/relationship	Phone or email	What they know

C. Anything else the Commission should know about who was involved? (optional)

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WHAT SUPPORTS YOUR COMPLAINT

Documents, recordings, and other evidence

A. Evidence available

- | | |
|--|---|
| ☐ Transcript | ☐ Correspondence/email |
| ☐ Audio/video recording | ☐ Text messages |
| ☐ Court order | ☐ Photographs |
| ☐ Docket sheet | ☐ Other: _____ |
| ☐ Pleading/motion | |

B. Where can the Commission obtain documents that you do not have?

Document / Record	Location / Custodian	Case / Record number

C. List of attached documents

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CERTIFY & SUBMIT

Notice, signature, and submission instructions

⚠ REMINDER

This complaint does not replace an appeal or other legal remedy and does not extend any applicable deadline.

CONFIDENTIALITY NOTICE

Under Arkansas Supreme Court rule and Ark. Code Ann. § 16-10-404, all records, files, reports, and proceedings before the Commission are confidential, except for final actions taken by the Commission or a finding of probable cause requiring a formal disciplinary proceeding. This confidentiality extends to information written, recorded, or orally received or developed during the course of a Commission investigation. Any information contained in this complaint or received from you must be kept strictly confidential. Any person who obtains information about the Commission's work and violates this requirement is subject to punishment for contempt of the Arkansas Supreme Court.

I request that the Judicial Discipline & Disability Commission investigate the above complaint, supported by the Statement of Facts, and take appropriate action.

I hereby swear or affirm that the above information is true and correct.

Signature

Date

Printed name

SUBMITTING YOUR COMPLAINT

Before submitting, please make sure you have:

- ☐ Completed all applicable sections
- ☐ Signed and dated the complaint
- ☐ Included the case number, if applicable
- ☐ Included dates and locations when known
- ☐ Listed witnesses, if known
- ☐ Listed attached documents
- ☐ Kept copies of your original documents for your records

Submit completed complaint to:

Judicial Discipline & Disability Commission

323 Center Street, Suite 1060, Little Rock, Arkansas 72201

Phone: (501) 682-1050 | Fax: (501) 682-1049

E-mail: jddc@arkansas.gov