



Please return to: Florida Department of State
 Division of Elections
 R.A. Gray Building
 500 S. Bronough Street
 Tallahassee, Florida 32399-0250

Office Use Only

FORM FOR COMPLAINT AGAINST THIRD-PARTY VOTER REGISTRATION ORGANIZATION

You will receive a written response from the Division of Elections at the end of its investigation. The Division may report its findings to the Office of Statewide Prosecution or to the State Attorney for the applicable judicial circuit if probable cause is found that a criminal violation also occurred.

PERSON BRINGING COMPLAINT

Name _____ Day Phone _____ Evening Phone _____
 Address _____ City _____
 County _____ State _____ Zip Code _____
 E-mail Address (optional) _____

THIRD-PARTY VOTER REGISTRATION ORGANIZATION (PERSON, ENTITY or ORGANIZATION AGAINST WHOM COMPLAINT IS BROUGHT) (limit one person/entity per form)

Name _____ Phone _____
 Address _____ City _____
 County _____ State _____ Zip Code _____

Have you filed a complaint with the (check all that apply):

Supervisor of Elections (name/county): _____	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
State Attorney's Office (circuit): _____	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Office of Statewide Prosecution	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Florida Department of Law Enforcement	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Other: _____	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

It Is A Second Degree Misdemeanor, Punishable As Provided In S. 775.082, and S. 775.083, for Any Person To Knowingly Make A False Official Statement. (S. 837.06, Fla. Stat.)

Once This Complaint Is Filed With The Division Of Elections, It Becomes A Public Record And Is Available To The Public And Media Upon Request Unless A Specific Statutory Exemption Applies.

STATEMENT OF FACTS AND CIRCUMSTANCES AS BASIS FOR ALLEGED VIOLATION. Please respond to the following questions to the best of your knowledge:

1. To whom did you speak (include names of persons or at a minimum the name of the third-party voter registration organization)?

2. From whom and where did you receive your voter registration application (date and location including address and/or event)?

3. When did you sign your voter registration application?

4. To whom did you submit your voter registration application?

5. How did you submit your voter registration application (by hand-delivery, by mail, etc.)

6. When did you submit your voter registration application (include time and date)?

7. How and when did you check on your voter registration status and determine that your name did not appear on the voter registration rolls?

8. Please include other relevant details (The more specific information that you provide to us, the better we are able to assist you. Attach additional pages as necessary.)

<input type="checkbox"/> Check here if additional pages or documents are attached.	_____ Signature of complainant		_____ Date Signed
	_____ Print or type name of complainant		