Washington Secretary of State

Complaint Form

Under section 402(a)(2) of the Help America Vote Act of 2002 (HAVA), P.L. 107-252 and Washington Administrative Code, Chapter 434-263, any person who believes that a violation of any provision of Title III of HAVA has occurred, is occurring, or is about to occur, may file a complaint with the Office of the Secretary of State. This form may be used to file such complaints. However, a letter containing the below information will be considered an acceptable complaint as well. All complaints must be notarized and filed within thirty (30) calendar days of the date after the certification of the election at issue and sent to the Washington Secretary of State, Elections Division, Post Office Box 40229, Olympia, WA 98504-0229. The state shall make a final determination within 90 days of receiving the complaint.

Thank you for taking the time to make this complaint

A. Person Making Complaint

Last Name	First	Middle Initial
Street address		

City	County	State	Zip Code

Home Telephone Number	Work Telephone Number	Email Address (optional)
( )	( )	

B. Description of the Alleged Violation

Please identify:

1. The facts of the alleged violation
2. Witnesses, if any, and contact information if you have it
3. Date and time you became aware of the alleged violation
4. Location where the alleged violation occurred
5. Who is responsible for the alleged violation
6. Other information that you think will be helpful in resolving your complaint

If you need more room to describe the alleged violation, please attach another page.

I hereby certify that the information provided above is true and correct to the best of my knowledge.

_____

Complainant Signature

Please have a Notary Public complete the below section

Subscribed and sworn to (or affirmed) before me this _____ Day

Of _____, 20 _____.

_____

Notary Public

My Commission Expires on:

_____