



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

Office Use Only

 DRAFT 6-14-2019

FORM FOR COMPLAINT AGAINST PETITION CIRCULATOR

Use this form if you believe your signature has been misrepresented or forged on a petition, or your signed petition was not delivered to a Supervisor of Elections office.

This complaint becomes a public record upon filing which includes email addresses. Email address is not required to file a complaint.

1. YOUR INFORMATION

Name _____
 (First) (Middle or Initial) (Last)

Address _____ City _____

County _____ State _____ Zip Code _____

Other contact information _____

2. INFORMATION ABOUT THE PERSON OR ENTITY WHO COMMITTED THE ALLEGED VIOLATION (limit one person/entity per form)

Name _____

Petition Circulator Registration Number (if known or applicable) _____

Address _____ City _____

County _____ State _____ Zip Code _____

Other contact information _____

Petition Serial Number _____ Sponsoring Committee _____

3. SPECIFIC FACTS OF ALLEGED VIOLATION

Check applicable one: ____ Signature misrepresented on petition
 ____ Signature forged on petition
 ____ Signed petition not delivered to Supervisor of Elections

a. To whom did you speak (petition circulator's name and others, if applicable)

b. Where did you get the initiative petition form (date and location including address and/or event)?

c. When did you sign the initiative petition form?

d. To whom did you submit the initiative petition form?

e. How did you give the initiative petition form (in-person, by mail, etc.)?

f. When did you submit your initiative petition form (include time and date)?

g. How and when did you learn that your signature on an initiative petition form was misrepresented or forged, or the signed petition was not delivered to your supervisor of elections?

h. 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.)

Check here if additional pages or documents are attached

4. SIGNATURE

Signature of complainant

Date Signed

Print or type name of complainant

It is a second degree misdemeanor, punishable as provided in s. 775.082 and s. 775.083, Florida Statutes, for any person to knowingly make a false official statement. (s. 837.06, Florida Statutes)