Please submit to: **Florida Department of State**
Office of Elections Crimes and Security
P.O. Box 5317
Tallahassee, FL 32314-5317

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.

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 signed petition 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)