

ELECTIONS FRAUD COMPLAINT

Voter Fraud Hotline Telephone number 1-877-868-3737

Under section 97.022, Florida Statutes, the Department of State has authority to conduct preliminary investigations into election law violations or election irregularities. The Department may then report its findings to the Office of Statewide Prosecution or to the State Attorney for the judicial circuit in which the alleged violation occurred for prosecution, where warranted. Please return the completed complaint form by email to OECS@dos.fl.gov or by mail to:

Florida Department of State
Office of Election Crimes and Security
P.O. Box 5317
Tallahassee, FL 32314-5317

PERSON BRINGING COMPLAINT

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

PERSON OR ENTITY AGAINST WHOM COMPLAINT IS BROUGHT (limit one person/entity per form)

Name _____ Work Phone _____

Person's title of office or position held or sought if applicable *Name of Governmental Office or Private Entity/Office*
Address _____ City _____
County _____ State _____ Zip Code _____

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

State Attorney's Office	☐ Yes	☐ No
Office of Statewide Prosecution	☐ Yes	☐ No
Florida Department of Law Enforcement	☐ Yes	☐ No
Florida Elections Commission	☐ Yes	☐ No
Other (If yes, specify which entity)	☐ Yes	☐ No

Entity: _____

VIOLATION: If you believe any irregularities or fraud has been committed, please state the specific acts committed by the person or entity named in this complaint:

STATEMENT OF FACTS

State in your own words exactly what happened. Please include details such as what happened, where the events or acts happened, when they happened (including dates and times), what you were told, who spoke to you and to whom you spoke, what you agreed or did not agree to, and who else saw or knows about what happened. Include the names, addresses and phone numbers of relevant persons. Also, give any reasons why you feel that the person or entity against whom you have brought this complaint knew that his or her actions were wrongful. The more specific information that you provide to us, the better we will be able to assist you.

☐

Check here if additional pages or documents are attached.

Signature of complainant

Date Signed

Print or type name of complainant

It is a third-degree felony for any person to knowingly and willfully make any false, fictitious, or fraudulent statement or representation in any matter within the jurisdiction of the Department of State. See § 817.155, Florida Statutes

THIS COMPLAINT IS NOT CONFIDENTIAL. ONCE IT IS FILED WITH THE DEPARTMENT OF STATE, IT BECOMES A PUBLIC RECORD.