

# ADMINISTRATIVE COMPLAINT FORM

PLEASE PRINT ALL INFORMATION

## PERSON BRINGING COMPLAINT

Name of Complainant \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Email Address \_\_\_\_\_

## PERSON OR ENTITY AGAINST WHOM COMPLAINT IS BROUGHT

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

## DESCRIPTION OF VIOLATION

Section of Title III of the Help America Vote Act allegedly violated (if known): \_\_\_\_\_

Please explain the basis for your complaint. State detailed facts and circumstances, including names of persons whom you believe have knowledge of the facts. If necessary, attach additional sheets.

Date alleged violation occurred: \_\_\_\_\_

*Administrative Complaint Form, Page 2*

Would you like the Secretary of State to conduct a hearing on the record?  Yes  No

I swear under oath that all statements made in this complaint are true and correct.

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

State of Kansas )

County of )

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_ .

\_\_\_\_\_  
Signature of Notary Public

My Commission expires \_\_\_\_\_

**ACCOMMODATIONS**

Any person with a disability may request accommodation in order to participate in the administrative complaint process. Requests for accommodation should be made at the time of filing the complaint, or, for participants other than the complainant, ten working days before the accommodation is needed. Requests should be made to the Elections Division, (785) 296-4561 or 1-800-262-8683 (TTD/TTY). Accessible parking is located on the south side of Memorial Hall, and accessible entryways to the building are located on the south side of Memorial Hall and through the adjoining building, Landon State Office Building.

Please mail or fax the completed form to:

Elections Division  
Kansas Secretary of State  
Memorial Hall, 1st Floor  
120 SW 10th Avenue  
Topeka, KS 66612-1594  
Phone: (785) 296-4561  
Fax: (785) 291-3051  
Email: [election@sos.ks.gov](mailto:election@sos.ks.gov)