

HAVA Complaint Form

- You may use this form to file a complaint alleging a violation of Title III of the Help America Vote Act of 2002 (HAVA).
- All fields marked with an asterisk (*) are required.
- You must sign and notarize the completed form.
- Mail, fax, deliver, or scan your signed form and email it to:

The Colorado Secretary of State, Elections Division
1700 Broadway, Ste. 200
Denver, CO 80290
Fax: (303) 869-4861
state.electiondivision@sos.state.co.us

For office use only

Complaint ID:

Date Stamp:

Secretary of State authority and complaint process

The Secretary of State has sole jurisdiction to adjudicate alleged violations of Title III of the Help America Vote Act of 2002 (HAVA). [Section 1-1.5-105, C.R.S.]

Any person who believes a violation of Title III of HAVA that has occurred, is occurring, or that is about to occur, may file a complaint. In order to initiate the complaint process, you must file a sworn, written, signed and notarized complaint with the Secretary of State no later than one year from the date of either the occurrence of the alleged violation or of the election giving rise to the complaint, whichever is later. The complaint must allege the violation with particularity, contain a reference to the section of HAVA alleged to have been violated, and name the person or entity responsible for the violation.

This complaint will be investigated and adjudicated without a hearing unless you request one on this form. You may always withdraw your request for a hearing at a later time.

NOTICE: This complaint is not confidential and, once filed with the Department of State, will be treated as a public record.

Your identifying information

Last name* First name* Middle name

Phone number (include area code)* Email address

Current Street address (No P.O. Boxes)* Apt. or Unit City or Town* ZIP Code* Colorado County

Mailing address (required if different from your home address) Apt. or Unit City or Town State ZIP Code

Identifying information of the person or entity you are alleging the complaint against (only one person/entity per form)

Name of the person or entity*

Phone number (include area code) Email address

Address Apt. or Unit City or Town State ZIP Code

Alleged violation(s) of HAVA/Federal Law (check all that apply)

HAVA/Federal Election Law was violated because:

- Applications for voter registration were not properly processed, e.g. applicants were not required to provide appropriate identification
- Required voting information was not publicly posted in a polling place on Election Day
- Voting system standards were not met

I was not allowed to:

- Vote using a provisional ballot

I was not able to:

- Determine whether my provisional ballot was counted
- Vote because my polling place was not accessible to individuals with disabilities
- Other (please specify including statutory provision):

Details of the complaint

If you believe a violation of Title III of HAVA that has occurred, is occurring, or is about to occur, please state the specific acts committed by the person or entity named in the complaint along with a reference to the section of Title III of HAVA alleged to have been violated.

State in your own words the detailed facts and circumstances that form the basis of your complaint. Include any relevant person(s), dates, and times and the names and addresses of other persons whom you believe have knowledge of the facts. Also, give any reasons that you feel the alleged violation was committed by the person and/or entity against whom this complaint is brought.

Please print or type the details of your complaint in the space provided below.

If you require extra space, please attach another page.

Request for Hearing

I request that the Secretary of State or his or her designee hold a hearing to adjudicate my complaint. I understand that I may later withdraw this request for a hearing.

Signature and certification of attestation

STATE OF COLORADO

COUNTY OF _____

I, the undersigned, affirm under penalty of perjury that the information contained in this complaint is true and accurate to my best knowledge.

Signature of complainant*

Sworn to and subscribed before me this _____ day of _____, 20____ by _____
(day) (month) (year) (printed name of complainant)

Signature (and title) of notary/official administering oath

(Print, type, or stamp commissioned name of notary public)

My commission expires: _____
(date)